



Clinical Internship Guide

for the Paramedic Intern

TABLE OF CONTENTS

- [Introduction](#)
- [Patient Confidentiality](#)
- [Professional Behavior](#)
- [Universal Precautions](#)
- [Documentation](#)
- [Skill Performance](#)
- [Eligibility to Participate](#)
- [Dress Code](#)
- [Malpractice](#)
- [Contact Information](#)
- [Miscellaneous Points](#)
- [Immunizations & Proof of Negative 10 Panel Drug Test](#)
- [CORI / Background Check](#)
- [Goals of the Clinical Internship Experience](#)
- [Objectives of the Clinical Internship Experience](#)
- [Program Requirements for Clinical Time](#)



Clinical Internship Guide

for the Paramedic Intern

INTRODUCTION

The paramedic clinical internship is a structured schedule of rotations in which the paramedic student will visit and participate in patient care at off-campus clinical facilities. This will occur under the direct supervision of a designated preceptor or instructor. Individual preceptors will vary from clinical site to clinical site, from unit to unit and from time to time. The paramedic student will be provided with the contact information for their clinical preceptor prior to the start of their clinical internship. Paramedic students will be expected to attend a mandatory orientation at their clinical site, with their clinical preceptor, prior to the start of their clinical internship. At this orientation, the rules and regulations of the specific clinical site will be explained along with any information that is unique to that clinical site.

There paramedic student will frequently be involved in patient care situations ranging in acuity from routine to urgent and life-threatening. In each situation, the paramedic student is responsible for:

- Being attentive
- Applying clinical protocols
- Exercising common sense
- Recognizing his or her own limitations
- Participating assertively in the patient's management and care
- Acting courteous, professional and appropriate at all times with the patient and

the staff



Clinical Internship Guide

for the Paramedic Intern

PATIENT CONFIDENTIALITY

Protected health information (or “PHI”), under the US Health Insurance Portability and Accountability Act (HIPAA) is any information about health status, provision of health care, or payment for health care that can be linked to a specific individual. Confidentiality of protected health information is the responsibility of all healthcare providers, inclusive of paramedic students.

Paramedic students will be cautious whenever they discuss protected health information, taking into consideration their location (e.g., public areas) and who they discuss this information with. It is appropriate to discuss such information with preceptors and other healthcare providers who are and were previously involved with that patient’s care. Paramedic students are also encouraged to discuss interesting clinical cases encountered during their internship with peers and faculty; however at no time should the names of patients or any other identifying information be divulged.

No part of the patient’s medical records may be copied or taken from the clinical site. The only exception is to ECGs, and only after they have been de-identified (redaction should be accomplished using a wide black pen or marker and subsequently photocopying the result).

Any discussion of protected health information or discussion of clinical encounters outside these guidelines may result in disciplinary action and / or dismissal from the paramedic education program.



Clinical Internship Guide

for the Paramedic Intern

PROFESSIONAL BEHAVIOR

Paramedic students will conduct themselves in a professional manner at all times. They will treat patients, their families and hospital staff with the utmost respect. Paramedic students should remember they will not only be evaluated on psychomotor performance, but also continually evaluated on their professionalism. Behavior that is unprofessional will be immediately and severely dealt with.

Paramedic students are expected to exhibit a moderate amount of assertiveness in approaching hospital staff regarding the performance of skills. You should neither be overbearing nor timid. During the clinical internship, you should not expect the preceptors to be aggressive in finding you for skills and assessments. The onus is on you to become a valuable member of the team. Once you have become acquainted with your clinical site's staff and they become familiar with you and your capabilities, your internship will become more productive.

Paramedic students are encouraged to discuss their performance with preceptors. Use the information learned during these discussions to improve your productivity and aptitude. Listen carefully to your preceptor's criticisms and use them constructively. Any discussion or criticism by preceptors that you feel is malicious should be reported to the Coordinator of Clinical Education immediately.

Paramedic students should never forget the reasons behind a clinical internship. It is a learning experience. It should not be considered "just another hurdle" towards your paramedic certification. You should not be satisfied with the program's minimum requirements. If a preceptor or hospital staff member approaches you to perform skills, the offer should be turned down courteously only if you are occupied with another task. It is **never** acceptable to decline a skill by saying, "I already have enough of those skills, thanks."

Please remember that you never get a second chance to make a good first impression.

UNIVERSAL PRECAUTIONS

Paramedic students functioning in the clinical environment are at risk for exposure to blood borne pathogens and infectious diseases. All body substances should be considered potentially infectious. Personal protective equipment (PPE) is readily available at each clinical site and should be used whenever appropriate. The minimum recommended PPE includes:

Gloves: Disposable gloves should be worn **before** initiating patient care when there is any risk of exposure to body substances. This includes any invasive procedures (e.g., starting intravenous lines). Sterile gloves may be required for some procedures. The same gloves should not be worn with more than one patient. Always remove gloves when leaving a patient's room or area. You should always endeavor to wash hands with soap and warm water after gloves have been removed; however using wall-mounted antibacterial gel may be an appropriate substitute if authorized by the clinical site.

Masks and protective eyewear: Protective eyewear and face masks should always be worn when there is a risk of splashing or spattering of blood or other bodily fluids. Examples of this include intubation and airway management, childbirth and open wounds or fractures. Healthcare providers should wear appropriate respirators or masks whenever there is potential for airborne transmission of disease. Standard corrective eyeglasses do **not** provide sufficient splash protection from fluids; most medical protective eyewear or masks can accommodate corrective eyewear.

Gowns: Gowns should always be worn when there is a risk of splashing or spattering of blood or other bodily fluids, as described in the previous section.

Hand sanitization: Hand sanitizing is mandatory prior to and following any patient contact, using the restroom, or eating a meal. Conventional soap and warm water *or* antibacterial gels are both acceptable, if allowed by the specific clinical site. It is the policy of each clinical site to have the Paramedic follow the Hand Sanitation policy and lack of compliance may result in dismissal from the clinical site.



Clinical Internship Guide

for the Paramedic Intern

Any student who is exposed to a patient's bodily fluids should immediately decontaminate themselves, report the incident to their preceptor and Coordinator of Clinical Education and follow the hospital's post-exposure protocols. In addition, the student will need to complete an exposure packet which can be obtained from the program.

DOCUMENTATION

Complete and accurate documentation is fundamental to both your clinical internship and career in the EMS profession. You should always anticipate the, “worst case scenario” when completing your clinical documentation. Please review and ensure that your documentation complies with all the statements below.

- Skills and assessments may only be signed by the preceptor who assigned and observed your performance of the skill. **At no time can administrative staff sign your paperwork**
- Falsification of any documentation is grounds for corrective action, up to and including dismissal from the paramedic education program.
- Any errors made in documentation of time or skills must be brought to the attention of the Coordinator of Clinical Education as soon as they are discovered.
- All documentation entries must be made in black ink. If a preceptor signs in blue ink accidentally please leave it, do not write over it. Do not make this a habit.
- Print all entries clearly and legibly; any unclear or illegible entries may be discarded.
- Registered nurses (RN), physicians (MD, DO), physician assistants (PA), nurse practitioners (NP) and CRNS's are the only healthcare providers allowed to sign your clinical documentation.
- Only original documents will be accepted; you are allowed to make copies for back-up purposes. You are required to make photo copies or keep scans of your clinical binder, if your binder is lost and you have not done this you will be required to start your clinical internship over.
- The only allowable correction method is a single line written through the error, which is then to be initialed by the corrector; the correction is then made on a separate line, in a separate entry.



Clinical Internship Guide

for the Paramedic Intern

- You should never use any correction fluid or tape (see above).
- Each entry must be completely filled out and signed (e.g., no “ditto” marks).
- Use 24-hour notation (e.g., “military time”) to document time.
- **ALL SHIFTS MUST BE KEYED INTO FISDAP PRIOR TO THE SHIFT START, ANY FAILURE TO DO SO WILL RESULT IN THAT SHIFT NOT COUNTING**
- **DOCUMENTATION NEEDS TO BE SUBMITTED WITHIN 72 HOURS OF THE SHIFTS END.**
- **IF FOR SOME REASON YOU HAVE ANY TECHNOLOGICAL DIFFICULTIES WITH FISDAP, YOU ARE TO CONTACT US AS SOON AS POSSIBLE. YOUR EMAIL TO US WILL SERVE AS PROOF THAT YOU WERE ATTEMPTING TO COMPLETE YOUR DOCUMENTATION. WITHOUT THIS, EVEN IF THE ISSUE IS RESOLVED, YOU WILL NOT BE GIVEN CREDIT FOR THE SHIFT.**
- In the event that your paperwork is found to be inaccurate, fraudulent or unreadable, the student may be responsible for fixing errors. Any activity deemed inappropriate or unprofessional in regard to paperwork, may result in program dismissal without opportunity for resolution.
- Paramedic students must complete a post-shift evaluation for each clinical shift.

<https://secure.vanguardsw.com/survey/v2/survey2.dsb?ID=1220959346>

- Paramedic students are encouraged to ask preceptors to complete the electronic evaluation on them.

<https://secure.vanguardsw.com/survey/v2/survey2.dsb?ID=1220990514>

- All preceptors are encouraged register with the online link. Preceptors may view your guide to more clearly understand your skills and objectives.

<http://vista-survey.com/survey/v2/survey2.dsb?ID=1220954083>

SKILL PERFORMANCE

Please remember that you must be didactically educated, practically trained, and signed off on each skill by the Program Director or the Clinical Coordinator before you are allowed to perform any skill in the clinical setting. All skills must be performed on live, human patients, unless otherwise noted. You must successfully complete clinical and field skills in the presence of a qualified preceptor.

You are permitted to perform the following skills in your clinical practicum. Although paramedic students are expected to perform beyond minimum expectations, for reference the minimum number of skills is provided for each.

1. Assessment of **adult** patients – 50
2. Assessment of **geriatric** patients – 30
3. Assessment of **pediatric** patients – 10

The above patient assessments will include of the following:

- Assessment of **obstetric** patients – 3
 - Obstetrical **deliveries** – 3
- Assessment of **trauma** patients – 10
- Assessment of **medical** patients – 40
 - Assess and plan treatment of **chest pain** – 10
 - Assess and plan treatment of **respiratory** complaint – 10
 - Assess and plan treatment of **syncope** – 10
 - Assess and plan treatment of **abdominal pain** – 5
 - Assess and plan treatment of **altered mental status** – 10
- Psychiatric interviews – 10

- Endotracheal intubation – 3 LIVE with total of 10 managed airways
- Cardiac ECG recognition / interpretation / application – 20
- Intravenous cannulations – 40
- Intravenous bolus medication administration – 20
- Intravenous infusion medication administration – 10
- Medication administration along other routes (e.g., IM, IO, SC, etc.) – 5
- Electrical skill therapy (defibrillation, synchronized cardioversion, transcutaneous pacing)[†]
- Alternative airway insertion (e.g., LMA, King-LT, Combitube)[†]
- Needle chest decompression[†]

† - While you are allowed to perform these skills during your clinical internship, the opportunity to perform these skills rarely arises. As such, the program will verify the student's competency in the performance of these skills in the laboratory setting. Competency is described as the understanding of the indications, contraindications, possible complications and psychomotor competency in the performance of the skill.



Clinical Internship Guide

for the Paramedic Intern

ELIGIBILITY TO PARTICIPATE

The following pre-requisites must be satisfied for any paramedic student to participate in the clinical internship:

- Maintain current Massachusetts or NREMT EMT or EMT-Intermediate certification
- Maintain current American Heart Association cardiopulmonary resuscitation credentials (healthcare provider level)
- Maintain current ACLS and PALS Certification
- Successfully complete education and training prerequisites
- Receive authorization from the program to initiate the internship
- Be in good standing with the paramedic program
- All points on behavioral evaluations must be deemed 'Competent' to begin or stay in the Clinical Rotation



Clinical Internship Guide

for the Paramedic Intern

DRESS CODE

Excellent personal appearance in the clinical setting is vital. Paramedic students shall present themselves in the uniform required by the program, unless otherwise dictated by a particular clinical setting (such as the operating room rotations).

An identification badge, which will be issued to students prior to the start of clinical internship, must be worn at all times. It must be worn outward facing so that the student's first name and the title, "Paramedic Student" is visible. All paramedic education program policies and procedures are in effect during your clinical practicum; as such please refer to those for explicit instructions regarding dress code.

All CFM dress code polices will be strictly enforced during clinical times. The student must be dress and appear in uniform, neat, clean and in good working order for clinical shift. Violations of this policy will result in you being sent home from clinical shift and possible other corrective actions.



Clinical Internship Guide

for the Paramedic Intern

MALPRACTICE

All students are covered under a blanket policy through HPSO. The program is responsible for maintaining coverage for each student.



Clinical Internship Guide

for the Paramedic Intern

CONTACT INFORMATION

Paramedic Students are encouraged to use good common sense and experiential judgment in solving the problem at hand. In the event of an urgent problem or questions involving the clinical internship, the people below should be contacted in listed order. In the event that an individual in the list below cannot be reached, **contact Pro EMS dispatch at 617.492.2700 in the event of an emergency.**

- Charge RN at your clinical site: _____

If you will be unable to attend your shift in the clinical site or will be tardy for any reason, you are to contact a program representative via EMAIL only and in either case contact the Charge RN at the facility. We understand occasional emergencies occur however excessive tardiness or absenteeism may result in removal from the clinical site and/or the program.

MISCELLANEOUS POINTS

- Students must respond to all appropriate requests made by an appropriate representative of the hospital or clinical site. If a question or perceived conflict with the program's policies and procedures exist, contact the Coordinator of Clinical Education immediately.
- Adhere to all rules and procedures of the specific clinical site concerning smoking, parking, breaks, use of facilities, dress codes, etc.
- Keep all critical opinions concerning hospital staff members to yourself. If necessary and appropriate, relate your opinions only to the Coordinator of Clinical Education.
- Students may not enter, nor participate, in any patient care area of a health care facility except the area to which they are currently assigned. It may be possible to temporarily participate in another area if explicit permission is obtained from both your preceptor and a preceptor (or an authorized staff member) in the unit to which you wish to go, with prior approval from the clinical coordinator (An example of this is an opportunity for an obstetrical delivery during your ER rotation, or an opportunity for an electrical therapy in the ICU during your OB rotation).
- During your 10 week clinical internship period, students must check CFM email daily, students are also required to bring clinical binders each week to the classroom portion of the program. Failure to do so may result in suspension from the clinical internship.



Clinical Internship Guide

for the Paramedic Intern

IMMUNIZATIONS & PROOF OF NEGATIVE 10 PANEL DRUG TEST

All immunization documentation must be submitted prior to acceptance. Failure to submit immunization documentation will result in a potential delay or inability to participate in a clinical rotation.

All paramedic students must obtain a drug screening and provide proof of negative results. Failure to submit proper documentation will result in a potential delay or inability to participate in a clinical rotation.

If student fails to complete the internship, for any reason, in a timely manner and chooses to restart or repeat the internship at a different time, the student may be required to obtain a repeat drug test.

****A flu shot is required to enter the clinical site, please provide proof of such. Neglecting to do so will result in inability to start clinicals.**



Clinical Internship Guide

for the Paramedic Intern

CORI / BACKGROUND CHECK

All paramedic students will be required to submit to a CORI check and or background prior to the start of their clinical internship.



Clinical Internship Guide

for the Paramedic Intern

GOALS OF THE CLINICAL INTERNSHIP EXPERIENCE

- Provide the student with an opportunity to perform assessment and treatment skills learned in the didactic and laboratory portion of the program.
- To expose the student to the most current concepts in emergency care.
- To allow the student to develop a working relationship with other members of the health care team.

OBJECTIVES OF THE CLINICAL INTERNSHIP EXPERIENCE

- Perform a comprehensive assessment on patients of all ages, to include:
 - ✓ Newborns
 - ✓ Infants
 - ✓ Toddlers
 - ✓ Preschoolers
 - ✓ School age
 - ✓ Adolescents
 - ✓ Adults
 - ✓ Geriatrics
- Report the assessment information in a brief, organized and accurate manner
- Correctly and concisely document assessment information
- Describe the pathophysiology, signs and symptoms, and appropriate prehospital care for a patient encountered in the clinical setting
- Demonstrate correct knowledge of basic and advanced airway management procedures
- Demonstrate and describe correct resuscitation procedures
- Take and properly record accurate vital signs
- Identify normal and abnormal lung sounds
- Perform venipuncture
- Safely administer medications, while understanding all indications, contraindications, adverse effects, and routes
- Effectively ventilate a patient



Clinical Internship Guide

for the Paramedic Intern

- Safely perform endotracheal intubation
- Initiate, maintain, and discontinue intravenous therapy
- Prepare and administer medications by intravenous, intramuscular, subcutaneous, endotracheal, intraosseous, nebulized / inhaled routes
- Accurately interpret ECG rhythms and determine appropriate treatment
- Identify and demonstrate the correct procedures for treating fractures and hemorrhage
- Develop and maintain rapport with health care professionals
- Demonstrate sensitivity to and provide support for the physical and emotional needs of both the patient and the family



Clinical Internship Guide

for the Paramedic Intern

AFFECTIVE DOMAIN OBJECTIVES

- Develop a respect for death, injury and illness, and the dying process
- Demonstrate punctuality by being on time and ready to start
- Demonstrate the ability to treat preceptors and fellow students with respect
- Demonstrate the ability to work with others by working as a team in given patient scenarios and situations
- Demonstrate critical thinking skills by applying information learned in class and determining the proper action necessary to give competent and compassionate patient care
- Demonstrate acceptable ethical and moral standards
- Demonstrate confidence, assertiveness, and a respect for the instructor / preceptor and others by participating in every opportunity



Clinical Internship Guide

for the Paramedic Intern

PROGRAM REQUIREMENTS FOR CLINICAL TIME

Center for MEDICS requires a minimum of 250 hours for your clinical time. The following is the list of your required rotations. You will be able to obtain all of your required skills within these rotations in the clinical / hospital setting.

- Emergency department – 154 hours
- Intensive care – 24 hours
- Operating room – No Hour requirement
- Obstetrics – No Hour requirement (3 births)
- Elective – open

EMERGENCY DEPARTMENT (ED)

Through clinical experience in the emergency department, the paramedic student will develop a more comprehensive understanding of the pathophysiology of disease and trauma, rationale for treatments rendered and how specific treatment alters disease or injury. Technical skills necessary to render advanced pre-hospital patient care will also be enhanced.

INTENSIVE CARE UNIT (ICU)

Through clinical experience in the intensive care unit, the paramedic student will develop a more comprehensive understanding of the pathophysiology of disease and trauma, rationale for treatments rendered and how specific treatment alters disease or injury. Technical skills necessary to render advanced pre-hospital patient care will also be enhanced.



Clinical Internship Guide

for the Paramedic Intern

OPERATING ROOM (OR)

The goal of clinical experience in the operating room is to provide the paramedic student with observations and supervised management of the airway in the conscious and unconscious patient.

LABOR & DELIVERY (L&D)

Through clinical experience in the labor and delivery setting, the paramedic student will develop a more comprehensive understanding of the pathophysiology of disease and trauma, rationale for treatments rendered and how specific treatment alters disease or injury. Technical skills necessary to render advanced pre-hospital patient care will also be enhanced.



Clinical Internship Guide

for the Paramedic Intern

ELECTIVE HOURS

Elective hours can be fulfilled in many different departments. The paramedic student should use this rotation to experience specific areas of interest within the clinical internship. You may fulfill your elective hours by choosing to complete more of your clinical time in the Emergency department, however, this may only occur after you have met your minimum of 154 in the ED. ED time and elective time may not run concurrently. You may choose to do your elective hours in your hospital / clinical site and / or a Center for Medics approved facility. Listed below are approved / suggested departments within your clinical site:

- Surgical or Medical Intensive Care Unit (SICU or MICU)
- Cardiac Care Unit (CCU)
- Burn Unit
- Cath Lab
- Psychiatric Department
- Radiology
- Respiratory Therapy
- EP lab
- Operating Room