

PERCOM EMS Medical Education Consortium Paramedic Program

PARAMEDIC CLINICAL AND FIELD EXPERIENCES EMERGENCY MEDICAL SERVICES ACADEMY

Course Syllabus

TARGET AUDIENCE: Candidates for this program must be and remain certified as at least EMT level as well as an American Heart Association BLS Provider card. Students will be required to produce and maintain evidence on file of a current NREMT or TDSHS certification at EMT or higher and the AHA BLS card prior to being cleared to schedule for rotations, and these must remain current until all rotations and Final Field Internship are complete. Rules and paperwork requirements vary for individual clinical or field sites and even some states. Other documentation may be required for individual sites or even for rotating in other states and must be completed before schedule requests will be initiated for those sites.

Students also must be cleared for rotations. Students must also submit all clinical documentation and requirements. This information and the preferred method for submission is located inside the course at percomcourses.com under the link entitled "Clinical Registration". Once all requirements are submitted and accepted, the student will receive a uniform shirt, nametag, tablet PC (if requested for loan), and emailed counseling instructions from the Clinical Coordinator. All scheduling will then be coordinated through the Clinical Coordinator or designee.

PROGRAM GOALS AND EXPECTED OUTCOMES: PERCOM EMS Medical Education Consortium strives to ensure that competent, entry-level students graduate, become certified or licensed and move into patient care jobs and volunteer positions that continue to be desperately needed in the community. To achieve this overall course goal, the Paramedic Program is broken into 2 primary Paramedic course segments, Paramedic 1 and Paramedic 2 (P1 and P2). (Students seeking only NREMT-Advanced – AEMT certification will only be required to complete P1, P1 labs and P1 clinical and field rotations.) Students who wish to be eligible for Paramedic certification must successfully complete both P1 and P2 segments, including associated Labs, Clinical and Field Experiences, Final Field Internship and a summative Graduate Scenario Examination with the Medical Director. The following outcomes and objectives have been adopted and must be demonstrated by each student prior to successful completion of the program.

Student Learning Outcomes Statements

Objectives

The program prepares its graduates to:

- Demonstrate individual professional behaviors consistent with employer and community expectations of an entry-level paramedic.
- Demonstrate technical proficiency in all of the skills identified for the role of an entry-level paramedic.
- Comprehend, apply, and evaluate information relative to the expected duties, roles and responsibilities of the entry-level paramedic.

Expected Outcomes

Students in the program will demonstrate:

1. Cognitive knowledge level expected of an entry level paramedic and as necessary to function in a healthcare setting.
2. General medical knowledge expected of an entry level paramedic and as necessary to function in a healthcare setting.
3. The ability to collect data from charts and patients and appropriately interpret that data.
4. The ability to thoroughly assess a patient utilizing various diagnostic tools and procedures.
5. The ability to recommend appropriate therapeutic procedures and make sound patient care judgments as expected of an entry level paramedic.
6. The ability to perform a broad range of clinical skills, procedures and equipment.
7. The ability to communicate and interact effectively with non-clinical and clinical persons in various healthcare and scene environments.
8. The ability to present oneself in an ethical and professional manner.
9. The ability to manage time efficiently while functioning in a healthcare setting.
10. The ability to use critical thinking skills to assess and treat patients in emergency settings.

METHODS OF EVALUATION: To graduate from the Paramedic program, students must demonstrate minimum levels of competency in the following areas: cognitive (knowledge), psychomotor (skills and hands-on type performances) and affective (behavior and attitude). The last area, affective, involves the student's ability to demonstrate the following characteristics throughout the program, and students will be graded on each at various stages and throughout the entire course: integrity, empathy, self-motivation, appearance and personal hygiene, self-confidence, communications, time management, teamwork and diplomacy, respect, patient advocacy, and careful delivery of service.

Following passing the summative Paramedic Final Exam and all Lab Skills Testing components and competencies, students will schedule and complete the Clinical and Field Rotation requirements before being cleared to complete the Final Field Internship phase. These requirements target not only hours, departments, and types of agencies or services, but also have minimum requirements for certain patient age categories and conditions, as well as minimum skills requirements. Clinical and Field Experiences requires scheduling and completing a minimum of 312 total hours (and requirements) prior to being cleared to begin Final Field Internship. More hours may be necessary to complete other minimum requirements.

The necessary minimum components that must be met include:

Hours Required:

EMS – 96 Hours
Hospital ER – 128 Hours
Hospital OB – 16 Hours
Hospital Respiratory Dept. – 8 Hours
Hospital OR – 24 Hours
Hospital Cardiac unit – 8 Hours
Hospital Cath Lab – 8 Hours
Hospital Neonatal ICU – 8 Hours
Hospital ICU – 16 Hours
Total Required Hours – 312 Hours

Contacts Required:

EMS – Twenty five (25) EMS transports, Five minimum(5) must be advanced transports
OB patient contacts – 10
Live birth witnessed – 1
Medical patient contacts – 40
Trauma patient contacts – 40
Cardiac patient contacts – 20
Respiratory patient contacts – 20
Psychiatric/behavioral patients – 5
Altered mental status patients – 5
Syncope episode patients – 4
Abdominal pain patients – 4

Adult patient contacts – 40
Geriatric patient contacts – 20 Adolescent patient contacts – 4
School-age patient contacts – 4 Preschool patient contacts – 4
Toddler patient contacts – 4
Infant patient contacts - 4

Skills Required:

Successful IV administration – 40 times
Successful blood draw – 20 times
Endotracheal intubation – 5 times
Ventilations performed – 3 times
Medication administration – 15 times
EKG interpretation – 20 times
 EKG Interpretation: Not normal sinus rhythm – 10 times
20 Airway Procedures (18 of last 20 successful)

DISABILITIES OR HANDICAPS: Students who enter the program with a disability or handicap must notify the course coordinator or lead instructor by the beginning of the third class. Any alterations in testing or clinical rotations during the course do not ensure that the same alteration will be made for the student in the national-testing situation. If a student needs accommodation for a disability at a national-testing site, the student must notify the coordinator by the beginning of the third class. Any accommodation for disability at the national-testing site must be pre-arranged with the national examination program. It is not the responsibility of PERCOM to arrange or make decisions regarding the national approval of any disability or handicap that might affect the candidate during the testing process, nor does PERCOM take any responsibility for any refusal or denial of lack of acceptance by the national examination or state certifying organizations. Disabilities and Handicaps that are to receive an accommodation at the national-testing site shall be confirmed by a physician's statement of disability/handicap or any other requirements as listed by the national testing or state certifying organizations or agencies.

SCHOLASTIC DISHONESTY: Students are responsible for adhering to the PERCOM policy on academic dishonesty on Pgs. 26-27 of the online Student Handbook located at the web address below:

<https://www.percomcourses.com/percom-policies>

Students should also read this entire Handbook for all general Rules and Policies governing the Program and its students.

CLASS DATES AND TIMES: Rotation dates and times are site dependent and scheduled through the appropriate scheduling system in coordination with the Clinical Coordinator. Once a rotation is scheduled, students must follow appropriate procedures as outlined in the Clinical Manual to “call off” if an emergency arises that precludes the student from attending the scheduled rotation. Cancellations without following the appropriate procedure or abuse of the policy (multiple cancellations) may result in “no show” fees being assessed against the student. Fees must be paid if assessed for rotations to continue or prior to course completion being achieved if necessary. Student requested dates must be held open by the student until either the request is confirmed or denied by the site, which could be up to the day before the rotation. Students who are confirmed for a rotation date request but have made other plans and wish to cancel will be responsible for paying the “no show” fee and may be subject to counseling or other disciplinary action.

Successful completion of all documentation requirements and preceptor evaluations and signatures is required for credit for each rotation. *Students are responsible for completing these requirements and documents and assuring that preceptor evaluations and signatures are complete as directed in the Clinical Manual to receive credit for each rotation.* Incomplete documentation, missing signatures, or missing forms can cause the student to have to receive no credit for the rotation and have to complete the rotation, hours, contacts, skills, etc. so it is imperative that students familiarize themselves with all clinical instructions, the Clinical Manual, all forms required, platinumplanner.com, and the Student Handbook before attending any rotations. Any questions about these items or requirements should be directed to the Clinical Coordinator.

Required**Materials:**

Clinical Manual

Clinical Objectives

Hard Copy Backup Rotation Documentation Materials (in case of internet, tablet or preceptor issues)

Hard Copy Preceptor Verification Forms for every shift

Tablet PC or other electronic device capable of viewing and documenting through platinumplanner.com

Established "Course" for Clinical and Field Rotations as directed in platinumplanner.com

PERCOM Uniform Shirt and other uniform requirements as outlined in the Student Handbook and

Clinical Manual

PERCOM Student Nametag

Watch with second hand

Stethoscope

Black inkpens

Primary Instructor: Tammy Williams, TDSHS Paramedic, Clinical Coordinator

(clinicalcoordinator@percomonline.com)

PARAMEDIC CLINICAL OBJECTIVES

Students should familiarize with the list of objectives and department specific objectives in this document. While it may be possible to achieve ALL objectives during rotations, students must make an attempt to perform or participate in as many of these objectives as possible to maximize experiences and exposures. All of these objectives have been covered in didactic and/or lab portions of this program as appropriate.

- 7.0 Infection control and safety
 - 7.1 Demonstrate safe methods for lifting and moving patients in emergency and non-emergency situations.
 - 7.2 Demonstrate the proper procedures to take for personal protection from disease.
 - 7.3 Demonstrate the use of protective equipment appropriate to the environment and scene.
 - 7.4 Demonstrate the ability to comply with body substance isolation guidelines.
 - 7.5 Demonstrate the donning and doffing of appropriate PPE.
 - 7.6 Demonstrate how to safely place a patient in, and remove a patient from, an ambulance.

- 8.0 Venous Access and Medication Administration
 - 8.1 Demonstrate cannulation of peripheral or external jugular veins.
 - 8.2 Demonstrate intraosseous needle placement and infusion.
 - 8.3 Demonstrate clean technique during medication administration.
 - 8.4 Demonstrate administration of meds via the following routes:
 - 8.4.1 Oral/Sublingual
 - 8.4.2 Inhalation
 - 8.4.3 Gastric tube
 - 8.4.4 Rectal
 - 8.4.5 Parenteral
 - 8.4.6 IVP
 - 8.4.7 Subcutaneous
 - 8.4.8 Intramuscular
 - 8.4.9 IV piggy back drip
 - 8.4.10 Nasal
 - 8.5 Demonstrate preparation and techniques for obtaining a blood sample.
 - 8.6 Demonstrate proper disposal of contaminated items and sharps.

- 9.0 Airway Management and Ventilation
 - 9.1 Perform body substance isolation procedures during basic airway management, advanced airway management, and ventilation.
 - 9.2 Perform pulse oximetry.
 - 9.3 Perform end-tidal CO₂ detection.
 - 9.4 Perform manual airway maneuvers

- 9.5 Perform manual airway maneuvers for pediatric patients.
 - 9.6 Perform complete airway obstruction maneuvers.
 - 9.7 Demonstrate suctioning the upper airway.
 - 9.8 Perform tracheobronchial suctioning in the intubated patient.
 - 9.9 Demonstrate insertion of a nasogastric tube.
 - 9.10 Demonstrate insertion of an orogastric tube.
 - 9.11 Perform gastric decompression.
 - 9.12 Demonstrate insertion of an oropharyngeal airway.
 - 9.13 Demonstrate insertion of a nasopharyngeal airway.
 - 9.14 Demonstrate ventilating a patient.
 - 9.15 Perform oxygen delivery with an oxygen cylinder and various delivery devices.
 - 9.16 Perform endotracheal intubation.
 - 9.17 Perform assessment to confirm correct placement of the endotracheal tube.
 - 9.18 Adequately secure an endotracheal tube.
 - 9.19 Perform extubation.
 - 9.20 Perform insertion of a Combitube or LMA.
 - 9.21 Perform assessment to confirm correct placement of the Combitube or LMA.
- 10.0 Patient Assessment
- 10.1 Demonstrate the skills involved in performing each phase of the patient assessment skill.
 - 10.2 Demonstrate a caring attitude when performing physical examination skills.
 - 10.3 Demonstrate proficiency in the assessment of vital signs.
- 11.0 Communications
- 11.1 Demonstrate the ability to use the local dispatch communications system.
 - 11.2 Demonstrate the ability to use a radio.
 - 11.3 Demonstrate the ability to therapeutically communicate with patients, bystanders, preceptors, fire personnel, law enforcement personnel, and other healthcare personnel.
- 12.0 Foley catheterization
- 12.1 Demonstrate the proper technique and procedure for insertion of a Foley catheter.
- 13.0 Ophthalmoscope/Otoscope
- 13.1 Demonstrate proper utilization of the ophthalmoscope in patient assessment situations.
 - 13.2 Demonstrate proper utilization of the otoscope in patient assessment situations.
- 14.0 Trauma
- 14.1 Demonstrate the assessment and management of patients with signs and symptoms of hemorrhagic shock.
 - 14.2 Demonstrate the assessment and management of patients with signs and symptoms of external hemorrhage.

- 14.3 Demonstrate the assessment and management of patients with signs and symptoms of internal hemorrhage.
 - 14.4 Demonstrate the assessment and management of a patient with signs and symptoms of soft tissue injuries.
 - 14.5 Demonstrate the assessment and management of the burn patient.
 - 14.6 Demonstrate a clinical assessment to determine the proper management modality for a patient with a suspected traumatic spinal injury.
 - 14.7 Demonstrate a clinical assessment to determine the proper management modality for a patient with a suspected non-traumatic spinal injury.
 - 14.8 Demonstrate immobilization of the urgent and non-urgent patient with assessment findings of a spinal injury.
 - 14.9 Demonstrate documentation of suspected spinal cord injury to include:
 - 14.9.1 General area of spinal cord involved
 - 14.9.2 Sensation
 - 14.9.3 Dermatomes
 - 14.9.4 Motor function
 - 14.9.5 Area(s) of weakness
 - 14.9.6 Before and after immobilization techniques
 - 14.10 Demonstrate preferred methods for stabilization of a helmet in a potentially spine injured patient.
 - 14.11 Demonstrate helmet removal techniques.
 - 14.12 Demonstrate the following techniques of management for thoracic injuries:
 - 14.12.1 Needle decompression
 - 14.12.2 Elective intubation
 - 14.12.3 ECG monitoring
 - 14.12.4 Oxygenation
 - 14.12.5 Ventilatory assistance
 - 14.13 Demonstrate a clinical assessment to determine the proper treatment plan for a patient with suspected abdominal trauma.
 - 14.14 Demonstrate a clinical assessment to determine the proper treatment plan for a patient with a suspected musculoskeletal injury.
- 15.0 Pulmonary
- 15.1 Demonstrate proper use of airway and ventilation devices.
 - 15.2 Conduct a history and patient assessment for patients with pulmonary diseases and conditions.
 - 15.3 Demonstrate management and treatment of a patient with a pulmonary emergency.
 - 15.4 Demonstrate management and treatment of a patient with shock related to pulmonary disorders.
- 16.0 Cardiology
- 16.1 Demonstrate how to set and adjust the ECG monitor settings to varying

patient situations.

- 16.2 Demonstrate a working knowledge of various ECG lead system – 3 lead, 12 lead, 15 lead etc. and demonstrate interpretation of leads to identify the area and potential impact of a myocardial infarction.
 - 16.3 Demonstrate how to record an ECG.
 - 16.4 Perform, document and communicate a cardiovascular assessment.
 - 16.5 Set up and apply a transcutaneous pacing system.
 - 16.6 Assess and manage a patient with signs and symptoms of heart failure.
 - 16.7 Demonstrate satisfactory performance of the following skills in the patient care environment:
 - 16.7.1 CPR
 - 16.7.2 Defibrillation
 - 16.7.3 Synchronized cardioversion
 - 16.7.4 Transcutaneous pacing
 - 16.8 Demonstrate management and treatment of a patient with a cardiac emergency.
 - 16.9 Demonstrate management and treatment of a patient with cardiogenic shock.
- 17.0 Neurology
- 17.1 Perform an appropriate assessment of a patient with coma or altered mental status.
 - 17.2 Perform a neurological examination as part of the comprehensive physical examination of a patient with coma or altered mental status.
 - 17.3 Appropriately manage a patient with coma or altered mental status as indicated, including the administration of oxygen, oral glucose, dextrose and narcotic reversal agents.
 - 17.4 Perform an appropriate assessment of a patient with syncope.
 - 17.5 Appropriately manage a patient with syncope.
 - 17.6 Perform an appropriate assessment of a patient with seizures.
 - 17.7 Appropriately manage a patient with seizures.
 - 17.8 Perform an appropriate assessment of a patient with a possible stroke. Appropriately manage a patient with a possible stroke.
 - 17.9 Demonstrate management and treatment of a patient with other types of neurological or spinal emergencies.
 - 17.10 Demonstrate management and treatment of a patient with shock related to neurological or spinal disorders.
- 18.0 Hematology
- 18.1 Perform an assessment of the patient with a hematologic disorder.
 - 18.2 Appropriately manage a patient with a hematologic disorder.
 - 18.3 Demonstrate management and treatment of a patient with shock related to hematological disorders.
- 19.0 Infectious Disease

- 19.1 Perform an assessment of a patient with infectious/communicable disease.
 - 19.2 Effectively and safely manage a patient with infectious/communicable disease.
 - 19.3 Demonstrate management and treatment of a patient with an infectious disease emergency.
 - 19.4 Demonstrate management and treatment of a patient with septic shock.
- 20.0 Behavioral/Psychiatric
- 20.1 Demonstrate safe techniques for managing and restraining a violent patient.
 - 20.2 Demonstrate appropriate assessment techniques for the patient with a behavioral/psychiatric emergency.
- 21.0 Obstetrics/Gynecology
- 21.1 Demonstrate proper assessment of a patient with a gynecological complaint.
 - 21.2 Demonstrate proper care of a patient with:
 - 21.2.1 Vaginal bleeding
 - 21.2.2 Abdominal pain
 - 21.2.3 Sexual assault
 - 21.3 Demonstrate proper assessment of an obstetric patient.
 - 21.4 Demonstrate how to provide care for a patient with:
 - 21.4.1 Excessive vaginal bleeding
 - 21.4.2 Abdominal pain
 - 21.4.3 Pregnancy induced hypertension
 - 21.5 Demonstrate how to prepare the obstetric patient for delivery.
 - 21.6 Demonstrate how to assess the patient in labor to include:
 - 21.6.1 Fetal heart tones
 - 21.6.2 Fetal position
 - 21.6.3 Crowning
 - 21.6.4 Maternal assessment
 - 21.7 Demonstrate how to assist in the normal cephalic delivery of the fetus.
 - 21.8 Demonstrate proper actions to be taken as the placenta delivers and management of the placenta .
 - 21.9 Demonstrate how to deliver post-delivery care to the mother and neonate.
 - 21.10 Demonstrate procedures for assisting with abnormal deliveries.
 - 21.11 Demonstrate proper care of the mother with delivery complications.
- 22.0 Neonatology
- 22.1 Demonstrate preparation for management of the newborn.
 - 22.2 Demonstrate appropriate assessment techniques for examining a newborn.
 - 22.3 Demonstrate appropriate assisted ventilation of the newborn.
 - 22.4 Demonstrate appropriate endotracheal intubation of the newborn.
 - 22.5 Demonstrate appropriate insertion of an orogastric tube.
 - 22.6 Demonstrate needle chest decompression for a newborn or neonate.
 - 22.7 Demonstrate appropriate CPR techniques for the newborn.

- 22.8 Demonstrate vascular access cannulation techniques for a newborn.
- 22.9 Demonstrate initial steps in resuscitation of a newborn.
- 22.10 Demonstrate oxygen delivery techniques for a newborn.

- 23.0 Pediatrics
 - 23.1 Demonstrate the appropriate approach for assessing and treating infants and children.
 - 23.2 Demonstrate appropriate intervention techniques with families of acutely ill or injured infants and children.
 - 23.3 Demonstrate appropriate techniques for assessing pediatric vital signs.
 - 23.4 Demonstrate the use of a length based resuscitation tape when treating an infant or child.
 - 23.5 Demonstrate the appropriate approach for treating for treating infants and children with respiratory distress, failure, shock and arrest.
 - 23.6 Demonstrate the appropriate use of airway adjuncts, both basic and advanced, for infants and children.
 - 23.7 Demonstrate the proper placement of a gastric tube in infants or children.
 - 23.8 Demonstrate appropriate techniques for gaining vascular access in infants and children.
 - 23.9 Demonstrate the appropriate techniques for administration of medications by various routes.
 - 23.10 Demonstrate the appropriate method for insertion of an intraosseous line.
 - 23.11 Demonstrate proper assessment and management of infants or children with partially or completely occluded airways.
 - 23.12 Demonstrate appropriate assessment and management of pediatric trauma victims to include:
 - 23.12.1 Head injury
 - 23.12.2 Chest injury
 - 23.12.3 Abdominal injury
 - 23.12.4 Extremity injury
 - 23.12.5 Burns
 - 23.13 Demonstrate appropriate parent/caregiver interviewing techniques for infant and child death situations.
 - 23.14 Demonstrate proper infant and child CPR.
 - 23.15 Demonstrate proper techniques for performing infant and child defibrillation and synchronized cardioversion.

- 24.0 Geriatrics
 - 24.1 Demonstrate the ability to assess a geriatric patient.
 - 24.2 Demonstrate the ability to adjust assessment and treatment of the geriatric patient.

- 25.0 Abuse and Assault
 - 25.1 Demonstrate the ability to assess a spouse, elder or pediatric abused patient.

- 25.2 Demonstrate the ability to assess a sexually assaulted patient.
- 26.0 Chronically Ill Patients
 - 26.1 Demonstrate proper care of a tracheostomy patient.
 - 26.2 Demonstrate proper technique for drawing blood from a central venous line.
 - 26.3 Demonstrate the method of accessing vascular access devices found in the home health care setting.
 - 26.4 Demonstrate proper care of a peg tube.
 - 26.5 Demonstrate proper care of the patient with a urinary catheter.
 - 26.6 Demonstrate wound care in the bed bound or chronically ill patient.
- 27.0 Rescue Awareness and Operations
 - 27.1 Demonstrate stabilization techniques for a vehicle involved in a MVC.
 - 27.2 Demonstrate access techniques for a patient involved in a MVC.
 - 27.3 Demonstrate techniques for accessing and moving patients in various situations such as high angle, water, enclosed spaces, etc.
- 28.0 EMS Field Objectives
 - 28.1 Perform assessments, treatments, and interventions at Paramedic level of patients with the following complaints. Not all of the following complaints may be contacted in this phase but as many of the following as possible are preferred.
 - 28.1.1 CVA/AMS/Seizure
 - 28.1.2 Cardiac
 - 28.1.3 Trauma
 - 28.1.4 Geriatric
 - 28.1.5 Pediatric
 - 28.1.6 Neurological
 - 28.1.7 Pulmonary
 - 28.1.8 Endocrine
 - 28.1.9 Allergy/Anaphylaxis
 - 28.1.10Gastrointestinal
 - 28.1.11Obstetrical/Gynecologica
 - 28.1.12Renal
 - 28.1.13Toxicological/Overdose
 - 28.1.14Hematological/Cancer
 - 28.1.15Communicable Disease
 - 28.1.16Behavioral/Psychiatric

**PARAMEDIC CLINICAL AND INTERNSHIP
OBJECTIVES SUMMARY BY DEPARTMENT**

Intensive Care Unit/Coronary Unit (ICU/CCU) Objectives

During the experience in the ICU/CCU, the AEMT and Paramedic student should practice under direct supervision and demonstrate proficiency for each of the following:

- Perform patient assessment including relevant medical history and physical examination. The minimum should include taking and recording vital signs and auscultation of lung sounds.
- Review all patient cases including patient chart, diagnosis, and treatment.
- Perform peripheral IVinsertion.
- Draw blood samples.
- Assist in performing CPR and basic airway management.
- Assist in the care of patients with tracheostomy tubes.
- Assist in the care of patients breathing on respirators.
- Prepare and administer intramuscular, subcutaneous, and IV medications.
(Appropriate meds for P1 andP2)
- Record and interpret EKGs. **(P2 Only)**
- Perform defibrillation, transcutaneous pacing, and/or synchronized cardioversion.
(P2 Only)

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director.

Cardiac Catheterization Lab Objectives

During the experience in the Cath Lab, the Paramedic 2 student should practice under direct supervision and demonstrate proficiency for each of the following:

P2 Only

- Assess the impact of cardiac catheterization on the patient and his/her family.
- Identify the role that proper patient preparation has in successful diagnostic procedures.
- Evaluate various interventions used to facilitate patient comfort and compliance during diagnostic procedures.
- Observe interventions and evaluations made by professional personnel within the department.

Paramedic students are allowed to work to their level if needed in the patient care of cardiac arrest. Skills that can be performed include but not limited to high quality chest compressions, medication administration, IV/IO access, defibrillation, pacing and/or cardioversion, and ETT insertion and maintenance.

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director.

Surgery/OR Objectives

During the experience in the Surgery room, the AEMT and Paramedic student should practice under direct supervision and demonstrate proficiency for each of the following:

- Perform endotracheal suctioning.
- Maintain airway in an unconscious patient using manipulations and position of head, oropharyngeal airways, etc.
- Monitor vital signs of the surgical patient.
- Operate oxygen equipment and assist in the operation of the mechanical respirators.
- Perform endotracheal and supraglottic intubation.
- Perform peripheral IV insertion.

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director.

Pediatric Contact Objectives

During the rotation experiences, the AEMT and Paramedic student should practice under direct supervision and demonstrate proficiency for each of the following:

- Perform patient assessment including relevant medical history and physical examination. The minimum should include taking and recording vital signs and auscultation of lungsounds.
- Assist in the management of febrile and seizure patients, if available.
- Initiate and monitor intravenous infusions, if available.
- Observe physiological differences in the pediatric patient.
- Prepare and administer intramuscular and IV medications, if available.

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director..

Labor and Delivery Objectives

During the experience in the labor and delivery unit, the AEMT and Paramedic student should practice under direct supervision and demonstrate proficiency for each of the following:

- Identify and label the three stages of labor, common complications, and abnormal deliveries.
- Assist in normal cephalic deliveries.
- Observe and assist, if possible, in abnormal deliveries.
- Assist in the management of the newborn, including cutting the cord and suctioning.
- Assist in the resuscitation of the newborn.
- Observe and assist, if possible, the control of postpartum hemorrhage by uterine massage and infusion of oxytocin.

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director.

Respiratory Therapy Objectives

During the respiratory therapy clinical experience, the AEMT and Paramedic student should practice under direct supervision and demonstrate proficiency for each of the following:

- Assist with nebulizer treatments as allowed.
- Auscultate lung sounds before and after treatments to differentiate various pulmonary lung sounds.
- Assist with suctioning as allowed.
- Perform endotracheal intubation, as allowed.
- Assist with Ventilator as allowed.
- Assist with stoma patients as allowed.

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director.

Emergency Room Objectives

During emergency room experience, the AEMT and Paramedic student should practice under direct supervision and demonstrate proficiency for each of the following:

- Perform patient assessment including relevant medical history and physical examination. The minimum should include taking and recording vital signs and auscultation of lung sounds.
- Assist and review the treatment of trauma cases and medical emergencies.
- Assist in triaging patients.
- Assist in hemorrhage control and splinting.
- Assist in the performance of CPR and basic airway management.
- Assist in administration of Epinephrine for use in treatment of allergic reactions.
- Assist in use of bronchodilator.
- Perform peripheral IV insertions.
- Draw blood samples.
- Perform endotracheal and supraglottic intubations.*
- Prepare and administer intramuscular, subcutaneous, and IV medications.
(Appropriate meds for P1 and P2)
- Perform urinary catheterization.

Paramedic II Only

- Record and interpret EKGs.
- Perform Defibrillation, Pacing and/or Cardioversion.
- Perform external jugular IV insertion, if allowed.*

Performance of skills contained in the clinical internship objectives shall be based on performance criteria established by standard medical practice and course medical director.

* Indicates optional skills that may be performed if allowed.