Syllabus
EMS 261 EMT-I Field Experience
(2 Credits)

TEXT

The Maryland medical protocols for emergency medical services providers. (2016). Maryland: MIEMSS

Course Description

In order to obtain an actual training experience, the student secures or is placed in an approved ambulance unit or company designated as an Advanced Life Support Program unit by the Maryland Institute for Emergency Medical Services Systems (MIEMSS). Supervision and grading of the training experience are provided by both the instructor and the field supervisor. Hours: 100 as an intern, with a minimum of 75 runs. Prerequisite: EMS 207 and EMS 208 with grades of “C” or better of permission of the department head. Usually offered in the fall and spring.

Required Supplies

1. A duty uniform to consist of program approved navy blue polo or uniform shirt and midnight blue or khaki pants. This uniform shall be worn during the field internship assignment, unless the preceptor or instructor instruct otherwise.

2. The student shall have the “patient contact and skill log” in their possession at the start of the field internship session.

3. A copy of the Maryland Medical Protocols for EMS Providers shall be in the student’s possession during the internship experience.

4. Wor-Wic student identification card. ID card must be worn at all times when attending clinical sessions.
**Course Objective**

Upon successful completion of the course the student will be able to:

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<thead>
<tr>
<th>Course Objectives</th>
<th>Assessment Goals</th>
<th>Assessment Strategies</th>
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<tbody>
<tr>
<td>1. Demonstrate the ability to perform as an entry level Emergency Medical Technician Paramedic when confronted by various emergency situations at both the ALS and BLS levels.</td>
<td>1. Function independently as the team leader on an EMS response.</td>
<td>1. Clinical Field Internship Evaluation form. &lt;br&gt;<code>GEO 1, 2, 3, 4, 5, 6, 8 &amp; 9</code></td>
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**Course Requirements**

For successful completion of the course, students are expected to:

1. As a field intern, satisfactorily perform as the team leader on a minimum of 15 EMS responses.
2. Receive a satisfactory evaluation from all field internship sites and preceptors.
3. Complete a “Student Evaluation of Clinical/Field Experience” Form for each preceptor/FTO.

**Course Expectations**

*The following expectations will be measured through the “Clinical/Field Internship Evaluation Form”.*

**A. Professionalism**

Consistently demonstrate professional behaviors in accordance with the expectation of the profession. In order to complete this phase the student must:

1. Demonstrate initiative and interest in all learning activities.
2. Assist with all duty assignments, including housekeeping, ambulance cleaning, and pre shift equipment checks.
3. Be familiar with equipment and supplies and participating in the pre-shift check.
4. Report on time, in uniform (with name tag) and prepared to work and learn at the beginning of the shift.
5. Accept constructive feedback in a positive manner.

**B. Tasks**

Serve as the Team Leader for at least 15 calls functioning as a paramedic intern under the direction of the preceptor. In order to complete this phase the student must demonstrate knowledge of pre-hospital medical protocols and medications:

1. Serve as the Team Leader (to a level determined by the intern’s progress in the program) for EMS calls where the preceptor deems appropriate.
2. Conduct patient histories/interviews and physical exams.
3. Perform radio/phone notification to the receiving hospital with patient information, practice MD consults.
4. Demonstrate knowledge of all medical standing orders, protocols or guidelines, appropriate indications, dosage, administration route and method, contra-
indicators and side effects of any medication carried in the ambulance.

5. Only 1 patient refusal and 5 BLS runs may count towards the minimum team lead requirement.

Skills Performance:
Successfully demonstrate the ability to complete a run report for all patients and perform ALS and BLS skills. In order to complete this phase the student must:

1. Successfully, and while performing all steps of each procedure, perform BLS and ALS procedures as directed by the preceptor.
2. Provide safe, careful and patient oriented care in all patient encounters.
3. Complete comprehensive written patient care report on every patient encounter prior to the end of the shift.

C. Attendance:
It is the recommendation of the program for students to complete 100 internship hours to reach the program minimum of 15 team leads. Students are to arrange ride time with a program approved field preceptor/field training officer. A list of approved sites and preceptors will be provided by the instructor. Students must schedule ride time with the preceptor prior to their arrival. Attendance shall be documented in FISDAP and on the Field Training Log and must be signed by the preceptor.

D. Entry of Internship Data on clinical/field evaluation form:
Students are to enter their field internship shifts and all applicable skills achieved during the experience on the clinical/field evaluation within 1 week of the field shift.

E. Rules, Regulations, and Policies of the Field Training Site:
While operating at a field training site during field training, students shall obey all lawful rules, regulations, and safety policies of the field experience training site. This includes HIPPA policies.

F. Injuries Occurring During Field Experience:
Any injury occurring during field experience must be reported to the instructor immediately. This includes accidental needle sticks and incidents involving exposure to blood and/or body fluids.

G. Firefighting and HAZMAT Operations:
Students shall not perform firefighting tasks (any situation that requires the donning of protective gear) or operate in the Hot Zone of a HAZMAT incident during field experience.

H. Operating in the Field OUTSIDE of the Course:
While operating in the field outside of the course, you ARE NOT authorized to perform any advanced skill that is outside the scope of practice for your current level of certification or licensure. All skills must be performed in the direct supervision of a preceptor (FTO). This prohibition does not apply to procedures that have been authorized by medical control under the Maryland Extraordinary Care Protocol. Performance of advanced skills in the field outside of this provision is illegal and shall result in automatic failure of the course. In addition, you and any other involved EMS providers may be referred to MIEMSS and the Maryland Emergency Medical Services Board for disciplinary action.
I. **Field Training Attire** – During field training, the student shall wear the following attire:

   1. Midnight Blue or khaki pants. If you are a member of a Fire or EMS Service, departmental approved uniform pants may be worn instead of the Dickey brand pant.
   2. Program approved collared polo or uniform shirt.
   3. Dark socks.
   4. Black shoes or boots. Safety shoes are strongly recommended.
   5. Wor-Wic ID badge (available from Student Services). The name tag must be worn at all times during field training.

**Definitions**

**Successful Team Lead:**
The student shall receive a successful team led if he or she has conducted (not necessarily performed the entire interview or physical exam, but rather been in charge-of) a comprehensive assessment, and formulated and implemented a treatment plan for the patient determined by his or her progress in the program. This means that most (if not all) of the decisions have been made by the student, especially formulating a field impression and directing the treatment, packaging and movement of the patient. Minimal to no prompting was needed by the preceptor. No action was initiated, performed or withheld that endangered the physical or psychological safety of the patient or crew.

**BLS Call:**
Any call that does not require advanced assessment techniques or invasive interventions. *5 BLS calls may count towards the required team lead total.*

**ALS Call:**
Any call where an a) IV has been attempted, or b) an ECG has been monitored or 12 Lead ECG is obtained, OR c) a medication other than oxygen has been administered, OR d) any ALS-level skill is performed (An ALS-Level skill is a skill reserved for CRT’s, CRT-I’s and EMT-P’s as defined by the Maryland Medical Protocols for EMS Providers,) OR e) advanced judgment/assessment (as determined by the preceptor) has been performed. *A minimum 10 Team Lead Runs MUST be ALS.*

**Refusal of Treatment, Procedures and/or Transport:**
*Refusals may count as a maximum of 1 patient contact (team lead).* To get team lead credit for a refusal, the intern must perform as adequate assessment (determined by the preceptor) and complete all necessary documentation.

**Permitted Skills**
Students are permitted to perform skills that are approved protocol skills that have been discussed and successfully completed in class, lab, or clinical. All skills performed successfully shall be documented in the Patient Contact and Skill Log. Your preceptor may sign off any skill.

**Contacting the Instructor**
If the student encounters a situation in which he or she feels the need to contact the instructor, the
student may contact the instructor at the office number or by campus email (student email accounts preferred) listed on the first page of this document. The instructor will return your message by the next business day. If the preceptor deems it to be an actual emergency and the instructor needs to be contacted, the preceptor has the ability to do so. The instructor is not required by the college to return phone messages left on his personal cell phone from students. In case of injuries encountered during the field internship, all three area hospitals and their respective nurse liaisons have the ability to contact the instructor immediately and will do so.

**Blackboard Usage Statement**

Blackboard is being used as a supplementary site in this course. To access course content in Blackboard you need to have access to a computer with an Internet connection, (other requirements may apply). Computers that meet these requirements are available on campus in MTC 200, BH 217, HH 100, GH 204, WDC 305, and AHB 108.

Please follow these directions to access course syllabi and any other materials posted for this course:

**Login Information**

1. From Wor-Wic home page, point to "Quick Links" (top-right) and click the “Blackboard Login” link.
2. Enter your Wor-Wic user ID and password (same as your Wor-Wic email user ID and password). Don't know your user ID or password? Contact Student Services

All students logging into Blackboard affirm that they understand and agree to follow Wor-Wic Community College policies regarding academic integrity and the use of College resources as described in the college catalog. Wor-Wic Community College considers the following as violations of the computer usage policy:

- Using the campus computing network and facilities to violate the privacy of other individuals.
- Sharing of account passwords with friends, family members or any unauthorized individuals

Violators are subject to college disciplinary procedures.

**Documentation**

The appropriate Field Internship Evaluation Form must be completed for each shift in excess of 2 hours. All data must be submitted on the clinical/field evaluation form. The form should be submitted to the instructor within one week of the shift. Documentation shall be delivered to the instructor as follows:

1. Documents may be hand delivered to the Emergency Medical Services Office of the college (AHB 307).
2. Documents may be mailed to the Emergency Medical Services Office.
3. Documents may be hand delivered to the instructor.
4. Electronically via campus email.
Students must participate in the preparation of Patient Care Reports. All Patient Care Reports shall be countersigned by your preceptor.

NOTE: Late, missing, incomplete, or inaccurate Patient Care data entry is considered equivalent to falsifying information (cheating on a test). Patient care data entry problems must be corrected immediately. This data must still be re-entered correctly. Three separate, or repeated, or willful patient care data entry problems will result in dismissal. Students are encouraged to make copies of all completed Field Internship Evaluation forms for their personal records in the event of a missing form.

The student **MUST** submit a student evaluation of clinical/field site for each field shift. **Students shall not get credit for the experience if this form is not completed and submitted.**

In addition, students shall complete a Field Training Log. This document records the times and dates of field experience shifts. This must be signed by your preceptor and shall be delivered to the instructor at the completion of the semester.

**Evaluation**

Students will be evaluated by the preceptor after each field internship assignment. Upon completion of the scheduled field internship, students are required to have the preceptor complete a field internship evaluation form (*at the end of this document*) and review said evaluation with the student at the end of the shift. This form will be delivered to the instructor as stated on the form.

Once this form is received, the instructor will determine an average point score for the experience by taking the total points earned divided by total points possible. This average will be applied to the applicable points listed below to achieve an overall point score.

If a student receives an unsatisfactory evaluation for an assigned field internship site visit, the student must repeat the assignment with a different preceptor. If a student receives a second unsatisfactory for the original assignment, the student will receive a grade of “F” for the course. *(CO 1)*

Students must complete a site evaluation and a preceptor evaluation for **ALL** experiences. Students must submit this form to get credit for the experience. The instructor will award 1 point for each evaluation submitted. The instructor will take this sum and divide this number by the total points possible.

**Points will be awarded as follows:**

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<th>Field Internship Experience Evaluations</th>
<th>70%</th>
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<tr>
<td>Completed Placement Evaluation Forms</td>
<td>30%</td>
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</table>

Final grades will be based on percentage of total points earned to total points possible:

- 90% - 100% = A
- 80% - 89% = B
- 75% - 79% = C
- Below 75% = F
Clinical Disciplinary Policy (GEO 8):

Clinical Conference:
The clinical conference is used to inform the student of a behavior or action that needs to be changed and to identify suggestions for change that will help to avoid recurrence of those behaviors/actions. This will take place as soon as possible following the occurrence.

Clinical Notice:
The clinical notice is used to inform the student of unsatisfactory or unacceptable behavior/action that does NOT directly impact patient care during the clinical/field experience and identify changes the student has to make to correct the behavior/action.

The student will receive the clinical notice as soon as possible following the behavior/action.

Clinical Reprimand:
The clinical reprimand is used to notify the student of his/her unsafe behavior/action that directly impacts patient care or contact. The issue of the clinical reprimand requires a thorough investigation of the incident to determine if the unsafe behavior/action of the student placed the patient in a position of physical or emotional jeopardy.

Physical Jeopardy
Physical jeopardy is defined as any action or inaction that directly threatens the physical safety or well-being of another person. Examples of physical jeopardy include, but are not limited to, failure to follow safety precautions, medication errors, breaks in aseptic technique, poor judgment in the use of patient restraint, and leaving a patient unattended.

Emotional Jeopardy
Emotional jeopardy is defined as any action or inaction which directly threatens the emotional well-being of another person. Examples of emotional jeopardy include, but are not limited to, failure to address patients by name, use of nicknames or endearments without the patient's permission, breach of confidentiality (with or without the patient's knowledge), failure to respond to an expressed patient need, and the use of abusive, ridiculing, or inappropriate language.

Receiving multiple clinical reprimands can result in receiving a failing grade for the course. The student will receive the clinical reprimand as soon as possible following the behavior/action.
**Point Deductions from Final Course Grade**

The following list contains possible behavior/actions and the resulting point deduction from the final course grade for such behavior/actions.

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<tr>
<th>Behavior/Actions</th>
<th>Point Deduction from Final Course Grade</th>
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<tbody>
<tr>
<td>Second and repeat episodes of tardiness:</td>
<td>2 point deduction</td>
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<tr>
<td>Dress code violation:</td>
<td>2 point deduction</td>
</tr>
<tr>
<td>Missing clinical assignment:</td>
<td>2 point deduction</td>
</tr>
<tr>
<td>Receipt of clinical notice:</td>
<td>5 point deduction</td>
</tr>
<tr>
<td>Receipt of clinical reprimand:</td>
<td>15 point deduction</td>
</tr>
<tr>
<td>Receipt of clinical reprimand for physical or emotional jeopardy:</td>
<td>25 point deduction</td>
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<tr>
<td>Appropriate removal from clinical site by the clinical instructor:</td>
<td>25 point deduction</td>
</tr>
<tr>
<td>Proved unethical or unprofessional conduct that is considered to be in serious</td>
<td>25 point deduction</td>
</tr>
<tr>
<td>violation of the program, college, hospital or field experience site policies,</td>
<td></td>
</tr>
<tr>
<td>rules and regulations.</td>
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<tr>
<td>Evidence of emotional instability, drug or alcohol use that could impact a</td>
<td>25 point deduction</td>
</tr>
<tr>
<td>patient’s welfare</td>
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<tr>
<td>Other actions not defined here.</td>
<td>To be determined by the instructor.</td>
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**Academic Integrity**

Academic integrity is expected of all students. Cheating and plagiarism are violations of academic integrity. **All papers and presentations must be the student’s own work.** Any student who has violated the academic honesty policy will be denied credit (receive a 0) for the assignment, and then the matter will be turned over to the Student-Faculty Disciplinary Committee. Documented evidence of the offense will be kept in the Documented evidence of the plagiarism will be kept in the General Education Department office and/or the Emergency Medical Services Department office.

**Cheating:**

Cheating is defined as the act of obtaining information or data improperly or by dishonest or deceitful means. This includes the intentional use or attempted use of unauthorized materials, information or study aids in any academic exercise. This ALSO includes helping or attempting to help another student to cheat or submitting the same paper for two different classes without the explicit authorization/approval of both instructors, etc. (see college catalog). Each instructor will be available for consultation regarding any confusion a student may have before submitting an assignment.

**Plagiarism:**

Plagiarism is defined as copying or imitating the language, ideas or thoughts of another author and presenting them as one’s original work or the copying of another’s words in any medium without documenting the borrowing and thus failing to give credit to the original author in proper format (such as MLA or APA documentation format). Each instructor will be available for consultation regarding any confusion a student may have before submitting an assignment. Students are encouraged to use all available resources, including the instructor, assignment directions, handouts, suggested web resources and media center and/or writing center staff for help in avoiding plagiarism.

In both oral and written communication, the following guidelines for avoiding plagiarism must be followed:

- Any words quoted directly from a source must be in quotation marks and cited.
- Any paraphrasing or rephrasing of the words and/or ideas of a source must be cited.
- Any ideas or examples derived from a source that are not in the public domain or of general knowledge must be cited.
**Emergency Information Statement:**

In the event of severe inclement weather or other emergency, information about the closing of the college will be communicated via e2Campus and the College's website. Faculty will communicate with students about their courses and course requirements, such as assignments, quiz and exam dates, and class and grading policies, via Blackboard. Students will be responsible for completing all assignments in accordance with class policies.

**Services for Students with Disabilities**

Wor-Wic provides reasonable accommodations for students with disabilities, in compliance with the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. If you are in need of accommodations, please contact the counseling office at (410) 334-2899. For more information, see Wor-Wic's Services for Students with Disabilities web page.

**Sexual Violence Disclosures**

Wor-Wic Community College seeks a campus free of sexual violence which includes sexual harassment, domestic violence, dating violence, stalking, and/or any form of sex or gender discrimination. Please be aware that if a student discloses a personal experience verbally or in writing as a Wor-Wic student to a faculty or staff member, the employee cannot maintain confidentiality and has the mandatory responsibility to notify one of the college’s Title IX coordinators. However, if you'd like to make a confidential disclosure of any such violence, you can contact Wor-Wic’s director of counseling (X-2900) or you can contact the Life Crisis Center at 410-749-HELP or 2-1-1. Information on rights of victims of sexual violence and related resources is available in the college catalog and at the public safety page of Wor-Wic’s website: [http://www.worwic.edu/Administration/PublicSafety.aspx](http://www.worwic.edu/Administration/PublicSafety.aspx)