Horry Georgetown Technical College
EMS Preceptor Training Manual

Introduction
The EMT faculty wishes to thank you for serving as a preceptor for the EMT / Paramedic program. You were recommended or selected by your agency to serves as a preceptor and have met the qualifications of our college for this role. We sincerely appreciate your willingness to participate in this educational endeavor.

Our faculty believes that involvement of professional paramedics in health care agencies supports and enhances the quality of learning and strengthens the link between Paramedic education and Paramedic practice. The knowledge and skill you share during this experience are an integral component of successfully transitioning the student(s) from basic theory principles to practice. Your guidance is instrumental in molding positive professional behaviors, and you will likely witness an amazing transformation in confidence as the student progresses from day one to the final day of the experience.

Purpose of Internship
The practicum provides educational experiences to assist students in developing the EMT / Paramedic roles beyond what is possible during traditional clinical experiences. The experience provides the student opportunity to:
1. Translate theory into practice through a collaborative relationship with an experienced paramedic.
2. Develop effective clinical judgment based on interactions with a professional who demonstrates successful EMS practice.
3. Increase competence and confidence under the guidance of an experienced paramedic.
4. Benefit from the relationship between EMS education and EMS practice.
5. Attain skills necessary to begin competent, safe, and ethical practice as a Paramedic.

Definitions
- **Internship** – a selected experience in which a designated professional paramedic collaborates with faculty to supervise, teach and evaluate student performance; may also be referred to as "preceptorship."
- **Preceptor** – a qualified paramedic employed by a health care agency who agrees to collaborate with faculty to supervise, teach, and evaluate student performance in a selected practicum experience.
- **Preceptee** – An EMT/paramedic student assigned to participate in a practicum experience in order to fulfill the clinical requirements for a designated EMT course.
- **Faculty Liaison** – A designated EMT faculty member who establishes and maintains the connection between the entities involved in the preceptor agreement.

Program Director:	Clinical Coordinator:	Ambulance Coordinator:
Chris Schierer, EdD, NRP	Bret Holland	Chief Autumn Wagner
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Myrtle Beach, SC 29577	Myrtle Beach, SC 29577	

Faculty Liaison Responsibilities

Your designated faculty liaison is expected to:

1. Accept responsibility for the overall coordination of the practicum experience.
2. Establish and maintain communication with the preceptor, student, and agency staff to support and facilitate fulfillment of preceptor experience.
3. Provide students with the requirements for the practicum experience.
4. Provide meaningful feedback to both preceptors and students to promote professional growth; schedule meetings as needed to enhance this process.
5. Assume responsibility for the evaluation process of the student's practicum by integrating verbal and written preceptor feedback into overall evaluation for this clinical component.
6. Meet with the student, at least once during practicum to discuss progress in meeting objectives for the practicum and review final grade at the end of each semester.

Situations in which the faculty liaison must be contacted:

1. Patient Safety / Professional Issues
   a. Inappropriate behavior (ex: places client or agency at risk).
   b. Repeated absences, tardiness & illness.
   c. Inadequate preparation for clinical day.
2. Concerns related to student progress.
   a. No follow-through on suggestions made by preceptor.
   b. Difficulty transferring knowledge from one situation to another.
   c. Consistently unable to complete work in established time limit.
3. Injury / Accidents / Illness on Site
4. Support and Feedback
   a. For guidance or suggestion in directing student learning.
   b. To inform regarding outstanding or substandard student events.

Preceptor Qualifications & Responsibilities

To serve as a preceptor, you must possess the following qualifications:

1. A current certification to practice as a paramedic in South Carolina.
2. Be designated by your agency as a preceptor.
3. An ability to supervise, teach and evaluate students.
4. A positive attitude towards the practicum experience, students and faculty participation.
5. The ability to model specific EMS roles: provider of care, manager of care, and member of EMS discipline.
6. Responsibility for the care of an assigned group of patients and authority for delegation and supervision.
7. Complete this online preceptor orientation.

By assuming the role of preceptor, you agree to:

1. Review this document, and clarify any unclear areas with liaison, prior to beginning the practicum experience.
2. Act as a role model / mentor for the student.
3. Work on a one-on-one basis with the student.
4. Assist the student to think critically in making clinical judgments by applying new and previously learned theory and skills, and by integrating research findings into EMT practice.
5. Discuss mutual expectation between you and the student.
6. Act as a facilitator by assisting the student to meet clinical objectives and choose goals relevant and feasible to unit assigned.
7. Facilitate student's access to appropriate resources.
8. Foster an environment that boosts student competence and increases confidence in assuming responsibility and accountability for practice.

9. Aid in accurate evaluation of student behaviors and performance (documents will be provided to you by the student).
10. Collaborate with the faculty liaison, as needed, for issues or concerns about the practicum; report concerns of unsafe practice immediately to the faculty liaison.

Note: Students may not complete the course without submission of the preceptor evaluation form. The preceptor evaluation is used to determine the student's Satisfactory or Unsatisfactory grade but is not the sole method for determining the student's course grade.

Student Objectives / Responsibilities
As a requirement for satisfactory completion during the preceptorship the student agrees to:
1. Assume responsibility for understanding the requirements of the practicum experience and fulfilling the clinical objectives.
2. Negotiate a schedule based on preceptor availability to fulfill total hours required for the practicum.
3. Maintain open communication with the preceptor and faculty liaison to promote achievement of clinical objectives.
4. Maintain a clinical journal by entering all information into the Platinum Planner skill tracking program in a timely manner.
5. Be professional, responsible, and respectful.
6. Recognize limitations and seek assistance appropriately.
7. Work interdependently within a multidisciplinary setting.
8. Seek and participate in opportunities to acquire psychomotor skills appropriate.
9. Be accountable for own actions / decisions.
10. Assume responsibility for knowing and adhering to the student policies as well as clinical site and internship site related student policies.
11. Maintain a professional appearance while in the role of the student.
12. Attend all scheduled preceptor hours as agreed upon and entered into the Platinum Planner system.
    a. If unable to attend a scheduled practicum, the student is expected to notify the preceptor and faculty liaison in a timely manner.
    b. Excessive absences or tardiness will be reported to the faculty liaison by the preceptor.
13. Participate in the evaluation of the practicum experience as a whole.

Initial Contact on the First Day
On the first day, the student will likely be overwhelmed with many emotions and expectations regarding the precepted experience. As the preceptor, you will need to assist the student to focus on the priorities of the day which include administrative tasks, orientation to the unit and then as time allows, observation and participation in patient care routines. By explaining the importance of the initials steps and ensuring the student there will be adequate time for the hands-on clinical skills attainment, the student will likely become more comfortable in his / her surroundings and the overall experience will be more productive and meaningful.

Each individual agency has selected preceptors based on experience and availability. It is the student's responsibility to report to his or her assigned station, upon reporting the following should occur:

The following information should be provided by the preceptor with the initial contact:
1. Your name.
2. A brief orientation to the station to include areas that the student may and may not enter.

3. Your expectations of them related to station duties, meals and any special information they need to know.
4. Review with student the dispatch procedures, and special events of the day or information that may be required by your specific agency.

The following information should be provided by the student with the initial contact:
1. Brief information about self (ex: any related healthcare experience, current employment, etc.)
2. Goals for preceptorship experience (ex: specific clinical skill attainment, time management and organization improvement, etc.)
3. Any areas of self-identified weakness that you may be able to assist them with.

Administrative Tasks
1. Review and sign any paperwork needed by your EMS agency for the ride along, in most cases there will not be any necessary. There is a contract in place with your organization related to liability requirements.
2. Ensure that the student is carrying their State EMT card as per SC DHEC EMS regulations.

Orientation to Unit / Faculty:
1. Ensure student has appropriate identification – some agencies require an ID badge.
2. Identify the location of any areas that are off limits to the student.
3. Provide an orientation to the unit as necessary.
4. Introduce student to EMS / Fire team members in your area and key individuals that he or she may come in contact with.
5. Provide overview of the expectations of precepted experience (what activities the student will be involved in and what they cannot be involved in – such as firefighting activities or other situations of safety concerns).
6. Discuss documentation protocols (ex: charting methods, narrative, etc.)

Additional Suggestions
1. Develop a timeline with specific goals / accomplishments for each day of the experience.
2. Discuss any special interests of the student and attempt to integrate into the overall plan for precepted experience.
3. Share personal strategies from your own EMT experience to assist the student in organization, time management, and prioritization.
   a. Share any worksheets you use for keeping up with patient care interventions / activities.

Establish a Daily Routine
Establishing a daily routine will aid the student in formulation of his / her own future practice preferences.

Some pertinent things to remember as you go along:
1. Students may take more time to complete tasks than experienced paramedics.
2. Students are responsible for care delivered to patients.
   a. Encourage early independence within area of competence.
   b. Full role responsibility should be integrated as the student progresses toward the end of the experience (updating physician of patient status, identifying concerns and reporting these to the physician.)
   c. Hold the student accountable for follow through of assigned patient care routines.
3. Challenge the student to think critically about the whole picture (ex: ask the student to analyze the connection between an abnormal sign / symptom and a change in the patient's condition.)
4. Encourage the student to develop his/her own style by observing a variety of EMS team members in areas of interdisciplinary communications, patient care interventions, documentation, basic unit responsibilities, etc.
5. Be comfortable in your authority to redirect student learning based on your observation of the

student's abilities and document them on the "Paramedic Internship Report".

6. Be consistent in providing both positive and constructive feedback as close to the event as possible (if possible, take a time-out to talk about what occurred for both negative and positive instances).

Legal Guidelines for Students in Preceptor Experiences
These guidelines are intended to address issues of responsibility and accountability for all students involved in precepted experiences through the EMT / Paramedic program.

Students are required to:
1. Adhere to the Student Code for the SC Technical College Systems (3-2-106.1) (HGTC Students)
2. Adhere to the SC DHEC EMS Guideline.
   a. Scope and Standard of Practice
   b. Code of Ethics for Paramedics
3. Adhere to Laws governing EMT's in South Carolina
   a. EMS Regulation 61-7

Any breech of policy or standards during a precepted student experience should be handled according to your facility's policies. The faculty liaison should be contacted immediately for further guidance regarding college procedures.

In the precepted role, a student may perform:
1. Skills (interventions and procedures) a staff paramedic would ordinarily perform in the routine care of patients.
2. Skills for which he/she has received theoretical instruction.
3. Medication administration
   a. Medication errors should be reported and documented as per agency policy and the faculty liaison must be notified.

To ensure safe practice, you may be required to dis-allow a student from performing a particular skill but encourage the student to observe as a learning opportunity. This will be at your discretion as the preceptor.

Adult Learning Styles
Most adult learners develop a preference for learning that is based on childhood learning patterns. Some characteristics of the adult learner include:
1. Goal / relevancy oriented
2. Intrinsically motivated
3. Life experienced bring vast knowledge.
4. Practical and problem solvers
5. Have accumulated life experiences.

Adults have a range of different motivations including:
1. Personal development
2. Professional advancement
3. To meet employment expectations
4. Make or maintain social relationships.
5. Develop skills which will benefit the local community.
6. Financial

There are many keys to helping adults learning become successful including:
1. Staying motivated
2. Appropriate level of concern

3. Course work should be challenging.
4. Positive and negative reinforcement
5. Transfer classroom knowledge to practical knowledge and skills.

Barriers for Adult Learners
1. Fear of failure
2. Work / Family obligations.
3. Fear of being made to look foolish.
4. Childcare issues
5. Lack of motivation / poor attitude

Every person has an optimum way of learning new material through one or all of three modalities:
1. Visual
2. Auditory
3. Kinesthetic (Hands on)

Preceptor Evaluation Tools
The EMT / paramedic program uses two primary forms to grade the progress and conduct of the students.
1. Daily Field Internship Evaluation Form / Student Evaluation
    a. Allows the program director a method to monitor the student's attendance and professional behavior.
    b. Allows for general overall affective aptitude evaluation.
    c. Allows for feedback and a review tool for the students.
    d. Helps to satisfy accreditation requirements.
2. Paramedic Internship Patient Care Report
    a. Helps to provide the student with the best possible constructive criticism for each patient they encounter and each skill they perform.
    b. Helps to provide the needed information that the student must place to track skills in the Platinum Planner skills tracking system.

Both forms will be turned in by the student within 72 hours of completing the field internship.

Please take the time to honestly evaluate the student in the areas indicated. If you "pencil whip" this form, it is useless. Please make all comments legible. Please make sure to address the affective domain – how they interacted with the patients, hospital staff, allied health personnel, etc.

Requirements for Successful Completion
During the field internship students are required to ride a minimum of 500 hours as a third person on an ALS ambulance during the 2ⁿᵈ and 3ʳᵈ semesters. Students are responsible for arranging their own internship rotations.

Students are expected to complete the following minimum requirements during the internship and clinical rotations (Note: All of the listed minimum requirements will have been practiced at the skills or formative level before the internship begins):

Student Minimum Competencies at the Summative Level

Ages	
Pediatric (newborn to 17)	9
Adult (18 to 64)	30
Geriatric (≥ 65)	9

Impressions	
Trauma	9
Psychiatric/Behavioral	6
Obstetric delivery w/newborn*	2
Distressed neonate*	2
Cardiac pathology or complaint	6
Cardiac arrest*	1
Cardiac dysrhythmia	6
Medical neurology complaint	4
Respiratory complaint	4
Other medical complaints	6

Skills	
Establish IV Access	25
Administer IV bolus medication	10
Perform endotracheal intubation*	10
Administer IV infusion medication	2
Administer IM injection	2
Establish IO access*	2
Perform PPV with BVM*	10
Perform endotracheal suctioning*	2
Perform FBAO removal (Magill's)*	2
Perform cricothyrotomy*	2
Insert supraglottic airway*	10
Perform needle decompression*	2
Perform synchronized cardioversion*	2
Perform defibrillation*	2
Perform transcutaneous pacing*	2
Perform chest compressions*	2

Team Leads - student runs the call with minimal or no prompting	20

Accident or Blood/Fluid Exposure Occurring On or Off Campus

An accident/illness involving faculty, staff or student worker must be reported immediately to the Human Resources Department (843.349.7134) before seeking medical treatment, if possible, so an accident/incident report can be completed, and Worker's Compensation can be notified. In the event someone in Human Resources cannot be notified, the injured party may contact the College's Worker's Compensation insurance carrier, CompEndium Services, to complete an accident/incident report and to receive clearance for treatment at 877.709.2667.

If the incident is an emergency, please notify Human Resources as soon as the proper medical attention has been rendered for verification of workers' compensation coverage.

In any event, if an accident occurs, proper documentation needs to be completed. An accident report needs to be filled out stating the name of the injured party, the location of the accident, his/her identification number (social or H number), his/her address & phone number, the date & time of the accident, whether there were witnesses, and a brief description of what occurred. Attached is a copy of the Accident/Incident Report form and a link to the same report is on the HGTC website next to the Preceptor Training Manual link. A copy of the report needs to be distributed to the following departments: Human Resources, the respective Supervisor, and the Dean/Provost of the specific campus.

HORRY-GEORGETOWN TECHNICAL COLLEGE
ACCIDENT/INCIDENT REPORT
(Please submit to the appropriate departmental office immediately)

CAMPUS: [ ] Conway   [ ] Grand Strand   [ ] Georgetown

Name of Person Involved in Accident/Incident: _____

S.S./H Number: _____

Address: _____

_____

Phone Number(s): _____

Date of Accident/Incident Occurred: _____ Time: _____

Nature of Accident/Incident:

(1) Injury

(2) Property Damage

(3) Fire/Arson

(4) Theft/Robbery/Motor Vehicle Theft/Burglary

(5) Hate/Prejudice Crime

(6) Crimes (such as drug or liquor law violations, assaults, or weapons possession)

(7) Other:

CHECK ONE
[ ] Faculty
[ ] Staff
[ ] Student
[ ] Visitor

Explain Accident/Incident: _____

_____

_____

_____

_____

_____

What Action Has Been Taken?: _____

_____

_____

_____

Reporting Person's Signature: _____

College Representative: _____

Date of Report: _____ Time: _____

Copy of Report Distributed to: Human Resources, Public Safety, Student Affairs, Dean/Provost of Campus, &/or Supervisor
(whomever applicable)

Daily Paperwork and Forms

The remaining three pages include daily field internship and patient care report paperwork that must be completed, signed by a preceptor, and submitted by the student. Also, Platinum Planner includes an option for online paperwork with electronic signatures, which is acceptable per HGTC standards. If you have any questions or concerns, please feel free to contact the appropriate agency.

Please feel free to contact us with any questions or concerns and we would like to thank you in advance for working with our students.

Program Director:	**Clinical Coordinator:**	**Ambulance Coordinator:**
Chris Schierer, EdD, NRP	Bret Holland	Chief Autumn Wagner
Phone:	**Phone:**	**Phone:**
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Horry Georgetown Technical College

Internship Paperwork

Daily Field Internship Evaluation Form

All information above the bold double lines is mandatory for all EMS incidents.
Below the double lines please check or fill in all that apply.

Student Name:	Platinum Planner #:	
This student is certified as an EMT-Basic. This student should be able to perform care on all BLS patients and perform basic entry level paramedic skills under the supervision of the preceptor. This student should only take team lead at the comfort level of the preceptor. The student must have the HGTC paramedic course skills approval sheet with them at all times and be in proper HGTC EMT Department uniform.	Date:	
	Total Runs:	
	Start Time:	
	End Time:	
	Total # of patients:	

Preceptor Instructions: Please rate the student in the following categories at the end of the shift.

Grading Scale

4 – Field Competent – Functioning as an entry level paramedic.
3 – Appropriate for Experience Level – Functioning at level expected in the program.
2 – Needs Improvement – Needs further practice and education to improve.
1 – Dangerous to practice – Hazard to patients and others.

Grade (Circle)	Daily Affective Aptitude Evaluation
4 3 2 1	**Professionalism / Attitude:** *The student's behavior demonstrated integrity, empathy, self-motivation, self confidence, teamwork, diplomacy, respect, patient advocacy, careful delivery of service, appropriate time management, appropriate appearance and personal hygiene. Reported to clinical assignment on time and in full. uniform.*
4 3 2 1	**Learner Characteristics:** *Demonstrates attendance within the state program policy, independently seeks out appropriate learning experienced, participates in a multi-skilled approach to patient care, practices required skills, and seeks advice to improve skills, demonstrates the superior delivery of patient care required of a paramedic student as stated within the program policy.*
4 3 2 1	**Communication Skills:** *Performs and reports patient assessments, completely and proficiently, Interacts with patients and other health care professionals on a "student role" appropriate level.*
	Student Performance
4 3 2 1	**Phase / Shift Objective:** *Reviews current objectives and performs the task to standard outlined. Requests and accepts constructive criticism, takes personal responsibility for self-improvement.*
4 3 2 1	**Psychomotor Skills:** *Student can thoroughly describe all elements of applicable procedures and accomplishes psychomotor skills independently and proficiently.*
	Team Leader Evaluation
4 3 2 1	**Interview:** *Completes comprehensive interviews. Demonstrated active listening.*
4 3 2 1	**Exam:** *Completes appropriate head-to-toe and/or focused physical exam.*
4 3 2 1	**Treatment:** *Formulates a field impression and implemented a treatment plan.*
4 3 2 1	**Skill:** *Interventions performed were complete. Satisfactory and timely.*
4 3 2 1	**Leadership:** Set priorities, directed team, and adapted to evolving information
	Preceptor Comments

Preceptor Name:	Preceptor Signature:	Program Review

Please contact the HGTC – EMT Department at (843) 477-2188 with any comments or concerns.

Student Name:_____	**Horry Georgetown Technical College**	
Date:_____	**Patient Care Report**	Audited By:_____

Sex / Race / Age / Disposition / Type of Incident / Call Type / Patient Status

Sex	Race	Age	Disposition	Type of Incident		Call Type	Patient Status
Male	White		Treat / No Transport	**Trauma**	**Medical**	**To Scene**	**On Scene**
	Black		DOA on Scene	MVA	Environ	Emergent	Emergent
Female	Am. Indian	Years	Hospital ER	MC	Behav	Non Emergent	Non Emergent
	Hispanic	Months	Hospital Direct Admit	PED	OB/GYN		**From Scene**
Undetermined	Asian	Days	Pt. Refused Treatment	Fall	Resp		Emergent
	Other		Out Patient	Assault	Cardiac		Non Emergent
			Other:_____	Other	Other		

Preliminary Impression (Check no more than 4) / Treatment Procedures

Seizure	Head Injury	Cardiac Arrest	Dressing Applies	Oxygen Given — CPR
Diabetic	Spinal Injury	Gunshot	Limb Splinted	Suction Used — Bleeding Controlled
Abrasions/Contusions	Stroke	Alcohol Impairment	Spine Immobilized	MAST Trousers — Cold Applied
Laceration	GI Problem	OB / GYN	Neck Immobilized	Airway Maintained — Patient Restrained
Fracture	Respiratory Problems	Stroke / TIA	OB Assistance	Anti-Shock Treatment — Ventilator
Multishock	Cardiac Problems	Other:_____	OPA / NPO Used	Artificial Respirations — Other (Use Comments)

Safety Equipment / Significant MOI / Site of Injury / Revised Trauma Score

Safety Equipment	Significant MOI	Site of Injury	Glascow Coma Score	Systolic BP	Respiratory Rate	Code Value
Seatbelt	Fall > 20 Feet	Head	13-15	>89	10-29	4
Helmet	High Speed MVA	Face	9-12	76-89	>29	3
Airbags	Ejection / Rollover	Neck	6-8	50-75	6-9	2
None	Severe Vehicle Damage	Chest	4-5	1-49	1-5	1
Unknown	Motorcycle	Back	3	0	0	0
	Pedestrian	Upper Extremity				
	Death in Vehicle	Lower Extremity				
	Bicycle vs. Auto	Hip / Pelvis	GCS Score:		RTS Score:	
		Abdomen				

Advanced Procedures / Drugs Used

EKG Monitored Rhythm:_____

First Defibrillation Watt Setting:_____

Post Rhythm:_____

Second Defibrillation Watt Setting:_____

Post Rhythm:_____

12 Lead EKG:_____

External Pacing

Sync Cardioversion Watt Setting:_____

Post Rhythm:_____

Pleural Decompression

Patient Assisted Meds:_____

AED Used

Intubation (Method):_____
Size:_____
Number of Attempts:_____
Blood Drawn   Dextrose BGL:_____
IV Started – Gauge:_____ Solution:_____
Rate:_____ Time:_____
IV Started – Gauge:_____ Solution:_____
Rate:_____ Time:_____
Number of IV Attempts:_____
IO Infusion – Site:_____ Solution:_____
Rate:_____ Time:_____
Exposure to Pt's Body Fluids?   Yes   No

Drug	Dose	Time

Vital Signs

Blood Pressure	Pulse (Rate / Regular / Irregular)	Respirations (Rate / Regular / Irregular)	Pupils (E / U / N / C / D)	LOC (AVPU)	Time

COMMENTS (INCLUDE CHIEF COMPLAINT, OBSERVATIONS AT SCENE, RESPOSE TO STIMULI)

Once you have completed all PCR grading seal them in the envelope provided by the student and sign the seal and give it to the student.

The preceptor is asked to evaluate the student's performance on this call based on the criteria below. The student should be given a score of 1-5 for the skills performed on this patient. The guidelines for numerical scoring is provided below:

5= Performs skills without instruction and without error (equal to a 100 on the grading scale).
4= Performs skills with minimal instruction and without error (equal to an 85% on the grading scale). 3= Performs skills with close supervision (equal to 75% on the grading scale).
2= Requires instruction and cannot successfully complete skill (equal to a 60% on the grading scale). 1= Declines to perform skill when delegated (equal to a 0 on the grading scale).
Do not score area if the skill was not performed on this incident

Score	Skill	Score	Skill
	CPR		IV Cannulation
	Bandaging		Blood Specimen
	Splinting		Endotracheal Intubation
	Vital Signs		Dysrhythmia Identification
	Patient Exam		Cardioversion / Defibrillation
	History		Medication Administration
	Oxygen Administration		Pleural Decompression
	Airway Maintenance		Endotracheal Suctioning
	Suctioning		Cardiac Monitor Application
	Patient Handling		Other:

Preceptor Comments (include skills delegated, strong / weak areas; suggest areas of improvement, etc.)

Name: **Signature:**   **Date:**