

**Sanford Health EMS
Education
North Dakota State
College of Science**



EMS Lab/Practicum Handbook

EMS Lab/Practicum Overview

Practicum Entry Requirements:

Prior to attending any practicum shifts, students must complete the requirements below, verified through Castle Branch. Failure to complete these requirements by the assigned date will result in an automatic “F” in the applicable course.

- Background check:
 - All students must pass a national background check.
 - All students participating in a MN practicum experience must complete an additional MN background check.
 - Students that may be required to submit additional background checks based on individual state requirements.
- Immunization requirements: Must provide proof of the following immunizations (or immunity by positive antibody titer):
 - Measles
 - Mumps
 - Rubella
 - Varicella
 - Hepatitis B
 - TB skin test (2 step)
 - Tetanus/Diphtheria/Pertussis (Tdap)
 - Influenza (current)
 - Meningococcal
 - Additional immunizations may be required based on specific site requirements.
- Medical Documents and Certifications:
 - American Heart Association BLS CPR valid throughout the program.
 - FEMA IS-100, IS-200, IS-700, IS-800, IS 5a

- Sanford Health disclosure form
- Training specific to other practicum sites
- Identification photo
- For AEMT and above programs, copies of national and/or state certifications, registrations and licenses.
- Any additional Castle Branch training

Uniform Standards: (Lab and Practicum)

All students are required to be in uniform for practicums. All students are required to wear designated uniforms to class and labs. Failure to wear the proper uniform at any time will result in the student being turned away from a practicum site, lab or classroom. This will be considered an unexcused absence. Students should contact the course coordinator if questions arise regarding uniform dress. The proper uniform is:

All EMS students:

- Black shoes or boots
- Undershirt sleeves must not extend beyond the uniform shirt sleeves.
- Shirts must be tucked in at all times.
- Clinical Coordinator must approve alterations to any uniform
- No other patches or pins shall be worn
- Females may wear up to two stud earrings in each ear. Males are not allowed to wear earrings.
- No other visible piercings or tattoos allowed. (Tongue piercings are not allowed).
- Poor personal hygiene is unacceptable and may be grounds for dismissal from a site or program
 - Students will avoid perfumes, colognes, or other offensive odors
 - Hair must be controlled and worn off the shoulder

- Facial hair:
 - any facial hair must be neatly groomed
 - must not interfere with the fit of a mask
 - students may be required to have a quantifiable fit test
 - All other areas of the face and neck must be clean shaven
 - Some clinical sites may require students to be completely clean shaven (no facial hair at all) and may require students to shave prior to starting shift.
- Name badges are provided and required at all times
 - On the shirt off the right chest
 - If the badge is lost or misplaced, the student must notify the Clinical Coordinator within 24 hours
 - Students are financially responsible for replacement badges
 - Badges must be returned to the program at the completion of the program or if dismissed
- Designated uniform shirt and jacket
 - School patch is to be worn on both sleeve shoulders, centered, and ½ inch from the seam.
- Program T-shirts
 - May only be worn during designated times and only if preceptors are wearing t-shirts.
- Navy blue or black EMS pants
- If a student is wearing their jacket, the uniform shirt must be worn as well
- Clinical site uniforms
 - Black hospital scrubs for all clinical experiences unless otherwise designated.

- Children's clinic is business casual (must be approved by clinical coordinator prior to the clinical experience.
- The required supplies for hospital, field, and lab experiences are as follows:
 - Practicum documentation
 - Pen
 - Stethoscope
 - Watch
 - Field guide
 - Trauma shears
 - Electronic Device (Laptop/Tablet that meets software specs.)
 - Safety glasses

Practicum scheduling:

All practicum shifts will be scheduled through the approved scheduling software. Students must follow the specific practicum site requirements for scheduling. Once the schedule has been published per the practicum site requirements, students are responsible for attending that shift.

Practicum attendance:

Attendance at all scheduled practicums is mandatory. If a student is going to be absent to the shift, they **must**:

- Contact the instructor at least 1 hour before the start of their shift by email, phone, or in person. The time the email is sent will be used as the timestamp of the notification.
- Contact the practicum site using the phone number found in platinum planner or in person.

Tardiness also has a negative impact on practicums. If the student is going to be tardy, they must notify the instructor by email and the practicum site immediately.

The practical experiences during these shifts are critical for being a successful student. Because of this, each missed session will result in the following:

- The first absence or a tardiness of up to 10 minutes will result in a 4% loss in the student's letter grade. If the student did not notify the instructor of an absence at least an hour before the start of the session or has a tardiness greater than 10 minutes, this will result in a 7% loss in letter grade.
- A second absence will result in another 4% loss in the student's letter grade, or 7% if the student did not notify the instructor at least an hour before the start of the session. In addition to the grade reduction, the student will also meet with the program coordinator to discuss their continuation in the program.
- A third offense will result in an automatic failing grade.
- Failure to notify the instructor of any absence will result in a failing grade for the course.
- This policy applies to each semester.

Laboratory attendance:

Attendance at all scheduled labs is mandatory. If a student is going to be absent from the lab, they must contact the instructor at least 1 hour prior to the start of their class by email or phone. The time that the email is sent or voicemail received will be used as the timestamp of the notification.

Tardiness also has a negative impact on skills lab. If the student is going to be tardy, they must notify the instructor by email or phone immediately. Any student that is more than 10 minutes late will be counted as absent from class.

Regardless of the student's skills progress, any missed lab time may require a makeup session.

The technical skills taught at the lab sessions are critical for being a successful student and a successful paramedic. Because of this, each missed lab session will result in the following:

- The first absence or a tardiness of up to 10 minutes will result in a 4% loss in the student's letter grade. If the student did not notify the instructor of an absence at least an hour before the start of the session or has a tardiness greater than 10 minutes, this will result in a 7% loss in letter grade.
- A second absence in will result in another 4% loss in the student's letter grade, or 7% if the student did not notify the instructor at least an hour before the start of the session. In addition to the grade reduction, the student will also meet with the Paramedic Program Director to discuss their continuation in the program.
- A third absence will result in an automatic failing grade in Skills Lab.
- This policy applies to each semester.
- Each lab session is a three to four-hour period. The course syllabus will outline each session.

Lab and Practicum Documentation:

Accurate documentation is an essential skill in any healthcare profession. All documentation can be completed in both Wi-Fi and non-Wi-Fi settings. Students must have all documentation submitted before leaving their lab or practicum site. This includes:

- The electronic software used for data collection.
 - A CHART-formatted narrative must be submitted for all patient contacts.
 - Best practice is to have electronic documentation completed and submitted to your preceptor at least a half-hour before the end of the shift. If you go on a call after submitting the documentation, have the preceptor send the documentation back to you.
- Each ambulance ride along requires a "Field Experience Verification Form" attached to the electronic shift.
 - <http://webapps.sanfordhealth.org/emseducation/FEVF.pdf>
- Practicum Site Specific forms.
 - ER Clinical

- IV/OR Clinical
- OB/PICU/NICU Clinical
- ICU/CCU

EMS 231 Objectives and Requirements

Due Dates:

Please see course schedule for specific skill due dates. Skills not completed by the prescribed due date may result in a grade reduction.

EMS 231 Skills	Peer Requirement	Instructor Requirement
12-Lead ECG Skill Lab Portfolio	8	1
Airway Obstruction Removal by Direct Laryngoscopy	2	1
Apply a Nasal Cannula	1	
Apply a Non Re-Breather Mask	1	
Assembling Preloads	5	1
Bleeding Control and Shock Management	1	
CPAP and PEEP Portfolio Skill Lab	5	1
CPR Portfolio Skill Lab PR	1	
Defibrillation (Unwitnessed Arrest) Portfolio	10	2
Direct Orotracheal Intubation Adult Portfolio	25	2
Direct Orotracheal Intubation Peds Portfolio	20	2
Drawing from a Vial	5	1
Drawing from an Ampule	5	1
End Tidal Carbon Dioxide ETCO ₂	5	2
Endotracheal Removal	2	
ETT Medication Administration	2	1
Glucometer Portfolio Skill Lab	5	1
IM and SC Medication Administration	5	1
Inhaled Medication Administration	5	1
Intranasal Medication Administration	5	1

EMS 231 Skills	Peer Requirement	Instructor Requirement
Intraosseous Infusion	10	2
Intravenous Bolus Med Admin	10	2
Intravenous Piggyback Infusion	8	2
Intravenous Therapy	20	2
Joint Splinting	1	
Long Bone Splinting	1	
Manual Airway Maneuvers	1	1
Metered Dose Inhaler (MDI)	1	
Mixing Meds from 2 Vials	2	
Nasopharyngeal Airway	1	
Nasotracheal Intubation Adult	2	1
Needle Cricothyrotomy	2	1
NG-OG Tube	2	1
Oral Medication Administration	2	
Oropharyngeal Airway	1	
Perform Percutaneous Cricothyrotomy	2	1
Perform Venipuncture		2
Pleural Decompression (Needle Thoracostomy)	5	1
Spinal Assessment & Precautions	5	1
Spinal Immobilization Adult (Seated Patient)	1	
Spinal Immobilization Adult (Supine Patient)	1	
Sublingual (SL) Medication Administration	5	1
Suctioning with Flexible Catheter	5	1
Suctioning with Rigid Catheter	5	1
Supraglottic Airway Device Adult	20	2
Supraglottic Airway Removal	2	1
Synchronized Cardioversion	10	2
Traction Splinting	1	
Transcutaneous Pacing	10	2
Trauma Endotracheal Intubation	10	2
Vital signs	5	2

EMS 234 Objectives and Requirements

Due Dates:

Please see course syllabus for specific skill due dates. Skills not completed by the prescribed due date may result in a grade reduction.

EMS 234 Skills	Peer Requirement	Instructor Requirement
Obtain a patient history	5	2
Comprehensive normal adult physical assessment techniques	5	2
Comprehensive normal pediatric physical assessment techniques	5	2
Trauma adult physical assessment	5	2

EMS 232 Objectives and Requirements

Due Dates:

Please see course syllabus for specific skill due dates. Skills not completed by the prescribed due date may result in a grade reduction.

EMS 232 Skills	Peer Requirement	Instructor Requirement
OB (Normal Delivery)	5	1
OB (Abnormal Delivery)	5	1
Team Leader (Adult)	20	2
Team Member	20	2
Team Leader (Pediatric)	10	2
Team Leader (Geriatric)	10	2
Medical/Cardiac Patient Simulation	10	2
Trauma Patient Simulation	10	2
Urinary Catheterization	2	1
Tracheostomy suctioning	5	1
Tracheostomy replacement	5	1
PICC line access	5	1

EMS 233 Objectives and Requirements

Due Dates:

Please see course syllabus for specific skill due dates. Skills not completed by the prescribed due date may result in a grade reduction.

EMS 233 Skills	Peer Requirement	Instructor Requirement
NREMT Dynamic Cardiology	10	2
NREMT Static Cardiology	10	2
NREMT Oral station	10	2
NREMT Trauma assessment	10	2
NREMT Integrated Out-of-hospital Simulation	10	2

EMS 241 Objectives and Requirements

Number of objectives to be completed during EMS 241:

Objective	Quantity	
Patient Contacts and Assessments	Pediatrics (under 18)	2
	Adult	10
	Geriatric	10
Field Comprehensive Patient Assessment	BLS or ALS	15
Intravenous Access	40 successful	
Medication Administration	10	
- Intravenous Bolus (human)	2	
- Intramuscular/Subcutaneous Injection	2	
12-Lead ECG Placement	4	
Non-intubated ventilations with a BVM	10	
Supraglottic airway placement	10	
Airway Management	10	

*Airway Management is defined as a skill that is performed to maintain a patient's airway (i.e. basic adjunct insertion, supraglottic airway placement, manual airway maneuvers, etc..).

Forms:

<http://webapps.sanfordhealth.org/emseducation/FEVF.pdf>

EMS 242 Objectives and Requirements

Number of objectives to be completed during EMS 242:

Objective	Quantity	
Patient Contacts/Assessments	Pediatrics (under 18)	18 total
	Specific age groups:	
	- Newborn (up to 1 mo.)	2
	- Infant (1 mo. to 1 yr.)	2
	- Toddler (1-3 yrs.)	2
	- Pre-School (3-5 yrs.)	2
	- School age (5-12 yrs.)	2
	- Adolescents (13-17 yrs.)	2
	- Adult	40
	- Geriatric	20
	Clinical Comprehensive Assessment	8
	- ICU	2
	- CCU	2
- PICU	2	
Team Leader	BLS	10 of the last 10
	ALS	30 (9 of last 10)
Medical	Medical	60
	- Pediatric	12
	- Geriatric	12
	- Stroke/TIA	2
	- Acute coronary syndrome	2
	- Cardiac Dysrhythmia	2
	- Live Vaginal Births (Normal)	2
	- Respiratory distress / failure	20

	- Hypoglycemia/DKA/HHS	2
	- Sepsis	2
	- Shock	2
	- Toxicological Event/OD	2
	- Psychiatric	10
	- Altered Mental Status	10
	- Abdominal Pain	10
	- Chest Pain	10
Trauma	Trauma	30
	- Pediatric	6
	- Adult	6
	- Geriatric	6
Intravenous Access (human)	35 successful (18 out of last 20)	
Medication Administration (human)	30	
	- IV Bolus Medication Administration	20
	- Inhaled Medication (MDI, Nebulizer)	2
Un-intubated Ventilations (human)	10	
ET intubations – Adult (human)	10	
CPAP and PEEP	2	
Airway Management	15	

*Airway Management is defined as a skill that is performed to maintain a patient's airway (i.e. basic adjunct insertion, supraglottic airway placement, manual airway maneuvers, etc..).

Forms:

<http://webapps.sanfordhealth.org/emseducation/FEVF.pdf>

EMS 243 Objectives and Requirements

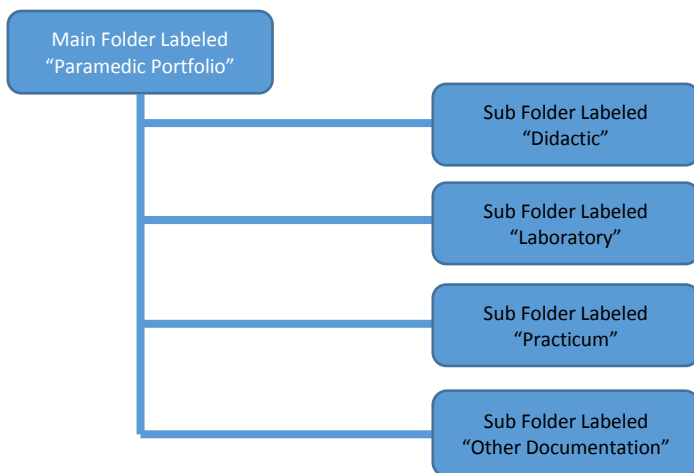
Objective	Quantity
Team Leader (overall)	18 of last 20 calls
Team Leader (ALS)	Must successfully lead 25 ALS calls

Forms:

<http://webapps.sanfordhealth.org/emseducation/FEVF.pdf>

Paramedic Portfolio Requirement

All paramedic students wishing to test NREMT Paramedic must submit a portfolio showing completion of all program requirements. Students should use the following diagram in putting together their electronic portfolio. All portfolios must be submitted in their entirety to the program director prior to being signed off for cognitive registry testing.



Didactic Folder	Laboratory Folder	Practicum Folder	Other Documentation
EMS 101 Grade Book	EMS 150L lab report or	EMS 241 practicum report	Counseling forms
EMS 170 Grade Book	EMS 234 lab report	EMS 242 practicum report	NIMS 100, 200, 700, 800
EMS 180 Grade Book	EMS 231 lab report	EMS 243 practicum report	College Transcript
EMS 203 Grade Book	EMS 232 lab report		Hazmat Training 5a
EMS 204 Grade Book	EMS 233 lab report		
EMS 205 Grade Book			
EMS 207 Grade Book			
EMS 215 Grade Book			
EMS 217 Grade Book			
EMS 218 Grade Book			
EMS 219 Grade Book			

Important dates and notes:

Program Emergency Contact Number

701-491-8911