

ANGELINA COLLEGE
EMERGENCY MEDICAL SERVICES PROGRAM
CLINICAL & FIELD INTERNSHIP HANDBOOK
Version 1.0



Prepared By

Adelida Pena, AA
EMS Clinical Coordinator

Reviewed By

Janice Hartsfield, MEd, BAAS, AAS, EMT-LP
EMS Program Director / Lead Instructor

Angelina College
Lufkin, Texas

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DEDICATION

Serve with Compassion.

Learn with Purpose.

Lead with Professionalism.

Clinical education is more than the completion of hours, patient contacts, and competencies.

It is the process through which students develop the knowledge, skills, judgment, and professionalism necessary to serve their communities as Emergency Medical Services professionals.

Every patient encounter presents an opportunity to learn.

Every clinical experience presents an opportunity to grow.

Every call for service presents an opportunity to make a difference.

The Angelina College EMS Program is committed to preparing compassionate, competent, ethical, and professional EMS providers dedicated to serving others with integrity, excellence, and respect.

"The best way to find yourself is to lose yourself in the service of others."

— Mahatma Gandhi

Dedicated to the students, preceptors, faculty, clinical partners, EMS agencies, and healthcare professionals who contribute to the education and development of future EMS providers.

Angelina College

Emergency Medical Services Program

Clinical & Field Internship Handbook

This handbook establishes the policies, procedures, requirements, expectations, and standards governing clinical and field education experiences for students enrolled in the Angelina College EMS Program.

This handbook supplements the Angelina College EMS Student Handbook and applies to all students enrolled in the EMT, AEMT, and Paramedic Programs.

Prepared By

Adelida Pena, AA
EMS Clinical Coordinator

Signature: _____

Date: _____

Reviewed By

Janice Hartsfield, MEd, BAAS, AAS, EMT-LP
EMS Program Director / Lead Instructor

Signature: _____

Date: _____

Approved By

Dr. Winifred Ferguson-Adams
Dean

Signature: _____

Date: _____

Approved By

Dr. J. Michael Wilson
Medical Director

Signature: _____

Date: _____

EFFECTIVE DATE AND REVISION INFORMATION

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HANDBOOK DEVELOPMENT ACKNOWLEDGMENT

The Angelina College EMS Clinical & Field Internship Handbook was developed through the collaborative efforts of EMS faculty, administration, clinical affiliates, EMS partners, and program leadership.

The handbook was created to establish consistent expectations, policies, procedures, and educational standards for students participating in clinical and field education experiences.

The Angelina College EMS Program acknowledges the contributions of clinical affiliates, EMS agencies, preceptors, faculty members, and students whose commitment to excellence supports the development of future EMS professionals.

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ACRONYMS & ABBREVIATIONS

Acronym	Definition
AEMT	Advanced Emergency Medical Technician
BLS	Basic Life Support
CoAEMSP	Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions
CPR	Cardiopulmonary Resuscitation

EMS	Emergency Medical Services
EMT	Emergency Medical Technician
ED	Emergency Department
HIPAA	Health Insurance Portability and Accountability Act
ICCU	Intensive Cardiac Care Unit
IV	Intravenous
LP	Licensed Paramedic
NREMT	National Registry of Emergency Medical Technicians
PCR	Patient Care Report
PPE	Personal Protective Equipment
PHI	Protected Health Information
SIM	Simulation

QUICK REFERENCE GUIDE

Key Contacts

Position	Contact
Clinical Coordinator	Adelida Pena
Program Director	Janice Hartsfield
EMS Instructor	Charles Eric Freeman
Medical Director	Dr. J. Michael Wilson

Clinical Documentation Requirements

Requirement	Standard
Narrative Submission	Within 48 Hours
Narrative Rewrite	Within 48 Hours
Clinical Attendance	Mandatory Once Scheduled
Clinical Absences	No Unexcused Absences
Cell Phone Use	Prohibited During Clinical Activities
Clinical Chain of Communication:	Clinical Coordinator → Program Director

EMT Requirements

Requirement	Standard
EMS Hours	48
Emergency Department Hours	32
Patient Histories	32
EMS Narratives	8

AEMT Requirements

Requirement	Standard
EMS Hours	120
Emergency Department Hours	32
Simulation Hours	24
Surgery Hours	16
Patient Histories	56
Successful IV Starts	20

Live Intubations	2
EMS Narratives	15

Paramedic Requirements

Requirement	Standard
EMS Hours	208
Emergency Department Hours	72
Surgery Hours	24
Telemetry Hours	8
Cardiac Catheterization Lab Hours	8
ICCU Hours	8
Labor & Delivery Hours	24
Pediatric Emergency Department Hours	8
Medical Director Emergency Department Hours	8
Simulation Hours	80
EMS Narratives	52

Program Motto

Serve with Compassion.

Learn with Purpose.

Lead with Professionalism.

CHAPTER 1

INTRODUCTION

Purpose

The purpose of the Angelina College EMS Clinical & Field Internship Handbook is to establish the policies, procedures, requirements, expectations, and standards governing clinical and field education experiences for students enrolled in the Emergency Medical Services Program.

Clinical and field education experiences provide opportunities for students to apply classroom knowledge, laboratory skills, and critical thinking abilities in real-world healthcare and prehospital environments. These experiences are essential to the development of competent, safe, and professional EMS providers.

This handbook serves as a guide for students, faculty, preceptors, clinical affiliates, and EMS partners involved in the education and evaluation of EMS students.

Scope

This handbook applies to all students enrolled in the Angelina College:

- Emergency Medical Technician (EMT)
- Advanced Emergency Medical Technician (AEMT)
- Paramedic

Relationship to the EMS Student Handbook

This Clinical & Field Internship Handbook supplements the Angelina College EMS Student Handbook.

Students are responsible for complying with all requirements contained within both handbooks.

In the event of a conflict between the Clinical & Field Internship Handbook and the EMS Student Handbook, the EMS Program administration shall determine the appropriate interpretation and application of policy.

Commitment to Excellence

The Angelina College EMS Program is committed to providing high-quality educational experiences that prepare students to deliver safe, effective, and compassionate patient care.

Clinical education serves as the bridge between classroom instruction and professional practice. Students are expected to approach every clinical experience with professionalism, integrity, respect, and a commitment to lifelong learning.

CHAPTER 2

PROGRAM ADMINISTRATION

The Angelina College EMS Program is administered through the Health Careers Division and is supported by EMS faculty, administration, clinical affiliates, EMS agencies, and healthcare professionals dedicated to student success.

Program Leadership

Dean

Dr. Winifred Ferguson-Adams

Dean

Health Careers Division

Email: wadams@angelina.edu

Phone: 936-633-5266

EMS Program Director / Lead Instructor

Janice Hartsfield, MEd, BAAS, AAS, EMT-LP

Email: jhartsfield@angelina.edu

Phone: 936-633-5420

EMS Instructor

Charles Eric Freeman, BAAS, AAS, EMT-LP

Email: cfreeman@angelina.edu

Phone: 936-633-5421

EMS Clinical Coordinator

Adelida Pena, AA

Email: apena@angelina.edu

Phone: 936-633-5241

Administrative Assistants

Daphne Shepherd

dshepherd@angelina.edu

Terry Scott

tscott@angelina.edu

Medical Director

Dr. J. Michael Wilson

Contact information maintained by the EMS Program.

Program Administration Responsibilities

The Program Director, Clinical Coordinator, and EMS faculty work collaboratively to coordinate clinical and field education experiences, monitor student progress, maintain affiliate relationships, and support student success.

Questions regarding clinical scheduling, documentation, attendance, field experiences, and clinical concerns should be directed to the Clinical Coordinator.

CHAPTER 3

MISSION, VISION, GOALS, AND CLINICAL EDUCATION PHILOSOPHY

Mission Statement

The mission of the Angelina College Emergency Medical Services Program is to provide high-quality EMS education that prepares students to deliver safe, competent, ethical, and compassionate patient care in a variety of healthcare and prehospital environments.

Vision Statement

The Angelina College EMS Program strives to be a leader in EMS education by preparing graduates who positively impact their communities through professional service, clinical competence, leadership, and dedication to patient-centered care.

Program Goals

The goals of the Angelina College EMS Program are to:

1. Prepare competent entry-level EMS professionals.
2. Promote patient safety and quality care.
3. Develop critical thinking and clinical decision-making skills.
4. Foster professionalism and ethical behavior.
5. Encourage lifelong learning and professional development.
6. Maintain compliance with accreditation, regulatory, and affiliate requirements.
7. Meet the workforce needs of the communities served by the Program.

Clinical Education Philosophy

The EMS Program believes that clinical and field education are essential components of professional EMS preparation.

Classroom instruction provides the foundation of knowledge; however, competence is achieved through supervised patient care experiences.

Students develop clinical judgment, communication skills, leadership abilities, and professional behaviors through direct interaction with patients, healthcare professionals, EMS personnel, and clinical preceptors.

Clinical education is designed to promote safe patient care while providing meaningful learning experiences that support student growth and professional development.

Students are expected to actively participate in learning opportunities, seek constructive feedback, and continually strive for improvement.

CHAPTER 4

CLINICAL COMMUNICATION AND STUDENT RESPONSIBILITIES

Clinical Communication Structure

Effective communication is essential to the success of the clinical and field education process. Students are expected to communicate professionally and utilize the established chain of communication when addressing clinical concerns.

Questions regarding clinical scheduling, attendance, documentation, field internship experiences, exposure incidents, evaluation concerns, and other clinical matters shall be directed through the following communication pathway:

1. Clinical Coordinator
2. Program Director

Students shall not independently contact hospital administration, EMS agency administration, affiliate leadership, physicians, or other external personnel regarding clinical concerns without prior approval from the Clinical Coordinator or Program Director.

The Clinical Coordinator, Program Director, and EMS faculty work collaboratively to support student success and maintain effective relationships with clinical affiliates and EMS partners.

Student Responsibilities

Students are responsible for actively participating in their clinical and field education experiences.

Responsibilities include:

- Maintaining eligibility requirements.
- Scheduling required clinical experiences.
- Arriving prepared for clinical assignments.
- Following affiliate policies and procedures.
- Completing required documentation.
- Monitoring progress toward clinical requirements.
- Maintaining professional behavior.
- Communicating concerns appropriately.
- Protecting patient confidentiality.
- Following all safety procedures.

Students are expected to take ownership of their clinical education and seek learning opportunities throughout the clinical experience.

Professional Communication

Students shall communicate professionally with:

- Patients
- Family members
- EMS personnel
- Nurses
- Physicians
- Hospital staff
- Clinical preceptors
- Faculty members

Professional communication includes:

- Respectful language
- Appropriate tone
- Active listening
- Timely responses
- Honest communication
- Constructive conflict resolution

Students shall not engage in:

- Profanity
- Harassment
- Threatening behavior
- Insubordination
- Disrespectful communication
- Inappropriate electronic communication

Conflict Resolution

Students are encouraged to address concerns professionally and respectfully.

When misunderstandings occur, students should seek clarification and attempt to resolve issues through appropriate communication channels.

Concerns that cannot be resolved at the student level should be communicated to the Clinical Coordinator for further review and assistance.

The use of social media, public forums, or unauthorized communications to address program concerns is prohibited.

CHAPTER 5

CLINICAL ELIGIBILITY REQUIREMENTS

General Requirements

Students must maintain all required clinical eligibility requirements throughout their enrollment in the EMS Program.

Failure to maintain clinical eligibility may result in removal from clinical assignments and may delay progression or completion of the program.

CPR Certification

Students must maintain current healthcare provider-level CPR certification throughout the program.

It is the student's responsibility to ensure certification remains current and does not expire during enrollment.

Immunization and Health Requirements

Students must comply with all immunization, health screening, and medical documentation requirements established by:

- Angelina College
- Clinical affiliates
- EMS agencies
- Regulatory authorities

Required documentation must remain current throughout the student's enrollment.

Failure to maintain required health documentation may result in suspension from clinical participation until compliance is achieved.

Criminal Background Checks

Students must comply with criminal background check requirements established by the College, clinical affiliates, EMS agencies, and regulatory authorities.

Certain criminal convictions may affect eligibility for clinical participation, certification, licensure, or employment.

Students are responsible for understanding these requirements and reporting any changes that may affect eligibility.

Drug Screening

Students may be required to undergo drug screening in accordance with College policies and affiliate requirements.

Drug screening may be required:

- Prior to clinical participation.
- As required by a clinical affiliate.
- Following an accident or incident.
- Upon reasonable suspicion.

Failure to comply with required drug screening procedures may result in removal from clinical activities.

Physical and Functional Requirements

Students must be capable of performing the essential functions associated with EMS education and patient care activities.

Students are expected to possess the physical, cognitive, communication, behavioral, and emotional abilities necessary to safely participate in clinical and field education experiences.

Professional Liability Insurance

Students must maintain any required professional liability coverage or program-required protections as established by Angelina College and affiliated clinical sites.

Clinical Compliance

Students are responsible for ensuring all required documentation is submitted and maintained by established deadlines.

Clinical compliance requirements may include:

- CPR certification
- Immunization records
- Background checks
- Drug screening
- Physical examinations
- Required training modules
- Additional affiliate-specific requirements

Students who fail to maintain compliance may be prohibited from participating in clinical experiences until deficiencies are corrected.

Responsibility for Compliance

Maintaining clinical eligibility is the responsibility of the student.

Failure to maintain eligibility does not exempt students from meeting program requirements and may delay progression, graduation, or completion of the EMS Program.

CHAPTER 6

CLINICAL SCHEDULING, ATTENDANCE, AND DOCUMENTATION

Clinical Scheduling

Students are responsible for scheduling required clinical and field experiences in accordance with program requirements and deadlines.

Clinical experiences should be scheduled in a manner that allows students adequate time to complete all required hours, patient contacts, competencies, and documentation before the end of the semester.

Students are encouraged to schedule clinical experiences early and avoid waiting until the end of the semester to complete requirements.

Attendance

Clinical and field experiences are mandatory components of the EMS Program.

Once a clinical or field experience has been scheduled, attendance is required.

Failure to attend a scheduled clinical assignment will be considered an absence.

There are no excused absences from clinical assignments.

Students who are unable to attend a scheduled clinical experience shall notify the Clinical Coordinator as soon as possible.

Repeated absences may result in counseling, remediation, clinical failure, or inability to progress within the program.

Tardiness

Students are expected to arrive at clinical assignments on time and prepared to participate.

Students arriving late may be denied participation by the clinical affiliate or EMS agency.

Repeated tardiness may result in disciplinary action.

Clinical Documentation

Students are responsible for completing all required clinical documentation accurately and honestly.

Required documentation may include:

- Clinical narratives
- Patient contact records

- Competency documentation
- Clinical evaluations
- Clinical logs
- Other program-required records

Documentation shall reflect actual patient encounters and activities.

Falsification of documentation is prohibited and may result in clinical failure or dismissal from the EMS Program.

Narrative Requirements

Clinical narratives are an important component of EMS education and are used to evaluate assessment, documentation, and communication skills.

Students shall submit narratives within forty-eight (48) hours of the clinical experience.

Narratives requiring revision shall be corrected and resubmitted within forty-eight (48) hours of notification.

Failure to meet documentation deadlines may result in counseling or remediation.

Clinical Progress Monitoring

Students are responsible for monitoring their progress toward completion of:

- Required clinical hours
- Patient contacts
- Competencies
- Narratives
- Team Lead requirements
- Other program requirements

Failure to monitor progress does not relieve students of responsibility for completing program requirements.

CHAPTER 7

UNIFORM, APPEARANCE, AND PROFESSIONAL CONDUCT

Uniform Requirements

Students shall comply with all uniform requirements contained within the current Angelina College EMS Student Handbook.

Uniform requirements apply during:

- Hospital clinical experiences
- EMS field experiences
- Simulation activities
- Other program activities as directed by faculty

Students are expected to present a professional appearance that reflects positively upon Angelina College and the EMS profession.

Personal Appearance

Uniforms shall be clean, neat, and in good repair.

Students shall maintain:

- Appropriate personal hygiene
- Professional grooming
- Clean footwear
- Proper identification

Students shall comply with all appearance standards established by the EMS Program and clinical affiliates.

Identification

Students shall wear required identification while participating in clinical and field education experiences.

Identification must remain visible at all times unless otherwise directed by the clinical affiliate.

Professional Conduct

Students are expected to conduct themselves professionally at all times.

Professional behavior includes:

- Honesty
- Integrity
- Respect
- Accountability
- Dependability
- Ethical conduct

Students shall treat patients, families, healthcare providers, and fellow students with dignity and respect.

Cell Phone Use

Cell phone use during clinical and field experiences is prohibited unless specifically authorized for educational or emergency purposes.

Personal phone use shall not interfere with patient care, clinical responsibilities, or professional conduct.

Social Media

Students shall not post, share, transmit, or discuss patient information on social media platforms.

Students shall comply with all HIPAA requirements and confidentiality standards.

Violation of confidentiality requirements may result in disciplinary action, clinical failure, or dismissal.

Tobacco and Nicotine Products

Students shall comply with tobacco and nicotine policies established by Angelina College and clinical affiliates.

Students are expected to present a professional image and comply with all facility regulations.

CHAPTER 8

STUDENT SAFETY, WELLNESS, INFECTION CONTROL, AND EXPOSURE REPORTING

CHAPTER 8

STUDENT SAFETY, WELLNESS, INFECTION CONTROL, AND EXPOSURE REPORTING

Patient and Provider Safety

Patient safety and student safety are the highest priorities during all clinical and field education experiences.

Students shall function within their level of education, training, and competency while under appropriate supervision.

Students shall immediately report unsafe conditions, errors, injuries, exposures, or incidents to the appropriate personnel.

Students shall comply with all safety policies established by Angelina College, clinical affiliates, EMS agencies, and regulatory authorities.

Student Wellness

The Angelina College EMS Program recognizes that clinical and field education experiences may expose students to emotionally challenging situations and stressful patient care environments.

Student wellness is considered an important component of professional development, patient safety, and career longevity within the EMS profession.

Students are encouraged to seek assistance when experiencing emotional distress, stress-related concerns, burnout, compassion fatigue, or difficulty coping with clinical experiences.

Seeking assistance under this policy shall not, by itself, result in disciplinary action or negatively affect a student's academic standing.

Critical Incident Response

A critical incident is any event that has the potential to overwhelm a student's normal coping abilities and result in significant emotional distress.

Examples may include, but are not limited to:

- Pediatric death or severe injury
- Cardiac arrest involving a child
- Suicide or attempted suicide
- Mass casualty incidents
- Severe trauma cases
- Violent crime scenes
- Death or serious injury of a healthcare provider, first responder, student, friend, or family member
- Any event resulting in significant emotional distress

Students experiencing distress following a critical incident are encouraged to notify their preceptor, Clinical Coordinator, or Program Director.

Preceptors should notify the Clinical Coordinator when significant student distress is observed following a critical incident.

The Clinical Coordinator and Program Director may provide guidance, support, and referral to appropriate resources when indicated.

Emergency Mental Health Concerns

Any student expressing thoughts of self-harm, harm to others, or demonstrating behavior that presents an immediate safety concern shall be referred for emergency evaluation in accordance with college policies and local emergency procedures.

Confidentiality

Information related to student wellness concerns shall be handled confidentially to the extent permitted by law, college policy, and safety considerations.

Infection Control

Students shall comply with infection control procedures established by:

- Angelina College

- Clinical affiliates
- EMS agencies
- State and federal regulations

Students shall utilize appropriate infection control measures and standard precautions during all patient care activities.

Personal Protective Equipment (PPE)

Students shall utilize appropriate PPE whenever indicated.

PPE may include:

- Gloves
- Eye protection
- Masks
- Gowns
- Other protective equipment

Failure to utilize appropriate PPE may result in removal from patient care activities.

Exposure Incidents

Exposure Incident Protocol

The safety and well-being of students are priorities of the Angelina College EMS Program. Any student involved in an exposure incident shall immediately follow the procedures outlined below.

Immediate Actions

Following an exposure incident, the student shall:

1. Immediately stop the activity when safe to do so.
2. Perform appropriate first aid measures, including washing the affected area with soap and water or flushing exposed mucous membranes with copious amounts of water.
3. Immediately notify the assigned preceptor, clinical supervisor, or EMS field preceptor.
4. Follow all exposure control procedures established by the clinical affiliate or EMS agency.

5. Seek medical evaluation and treatment as directed by the clinical affiliate or EMS agency.

Facility Reporting Requirements

Students shall comply with all reporting, documentation, testing, and follow-up procedures required by the clinical affiliate or EMS agency where the exposure occurred.

The clinical affiliate's exposure control plan shall take precedence during the initial management of the exposure incident.

Program Notification

The student shall notify the Clinical Coordinator as soon as practical but no later than twenty-four (24) hours following the incident.

If the Clinical Coordinator is unavailable, the student shall notify the Program Director.

Documentation Requirements

The student shall complete:

- All required affiliate or agency exposure documentation.
- The Angelina College EMS Program Student Clinical Exposure / Needle Stick Incident Report.

Documentation shall be submitted to the Clinical Coordinator within twenty-four (24) hours of the incident whenever possible.

Follow-Up

The Clinical Coordinator shall:

- Review the incident report.
- Verify appropriate documentation has been completed.
- Maintain documentation in accordance with program policies.
- Communicate with the Program Director regarding significant incidents when appropriate.

Medical Care Required as a Result of Student Accidents or Exposure

As a student enrolled at Angelina College, you will encounter certain risks while you are enrolled in a classroom or laboratory experience, or in a clinical, field experience, or capstone setting.

In the event that you sustain an injury and/or require any medical testing or care, all resulting medical expenses (hospital, ambulance, or physician fees), are your responsibility and not the responsibility of Angelina College or the clinical/practicum site.

It is recommended that you purchase a student/personal health insurance plan (medical/hospitalization) if you are not covered by a group health insurance plan.

Confidentiality

Exposure incident information shall be maintained confidentially and shared only with individuals who have a legitimate educational, medical, legal, or administrative need to know.

Failure to Report

Failure to promptly report an exposure incident may result in delayed access to appropriate medical evaluation and treatment.

Exposure incidents include, but are not limited to:

- Needle stick injuries
- Sharps injuries
- Blood exposure
- Body fluid exposure
- Mucous membrane exposure
- Communicable disease exposure

Students involved in an exposure incident shall:

1. Immediately notify the clinical preceptor or supervisor.

2. Follow the affiliate's exposure control procedures.
3. Obtain appropriate medical evaluation and treatment.
4. Notify the Clinical Coordinator.
5. Complete required documentation within twenty-four (24) hours.

The approved Student Clinical Exposure / Needle Stick Incident Report shall be completed for all reportable exposure incidents.

Accident & Injury Reporting

All accidents and injuries must be reported immediately to the clinical instructor. Students must follow facility incident reporting procedures and complete all required program incident documentation. Appropriate medical attention should be sought when needed.

CHAPTER 9

HOSPITAL CLINICAL EXPERIENCES

Purpose

Hospital clinical experiences provide students with opportunities to develop patient assessment, communication, critical thinking, and clinical skills in a supervised healthcare environment.

Students are expected to actively participate in patient care activities appropriate to their level of education and training while under the supervision of qualified healthcare professionals.

Clinical experiences are designed to bridge classroom instruction with real-world patient care and promote the development of competent EMS providers.

Clinical Affiliates

The Angelina College EMS Program currently utilizes the following hospital affiliates for clinical education experiences:

- CHI-Lufkin St. Luke's Memorial, 1201 W Frank Ave, Lufkin, TX 75904
- CHI-Livingston St, Luke's Memorial, 1717 US-59, Livingston, TX 77351
- Woodland Heights Medical Center, 505 S John Redditt Dr, Lufkin, TX 75904
- Nacogdoches Medical Center, 4920 NE Stallings Dr, Nacogdoches, TX 75965
- Nacogdoches Memorial Hospital, 1204 N Mound St, Nacogdoches, TX 75961

Clinical affiliates may change as affiliation agreements are established, modified, renewed, or expanded.

Students may be assigned to any approved affiliate utilized by the EMS Program.

Student Expectations

Students are expected to:

- Arrive on time and prepared.
- Report to the assigned department or unit.
- Introduce themselves professionally.
- Wear the approved uniform and identification.
- Actively seek learning opportunities.
- Assist healthcare staff when appropriate.
- Follow all facility policies and procedures.

- Maintain patient confidentiality.
- Demonstrate professionalism at all times.

Students are guests within the healthcare facility and shall conduct themselves in a manner that reflects positively upon Angelina College and the EMS profession.

Patient Interaction

Students are encouraged to develop strong patient communication skills through direct interaction with patients and families.

Students should:

- Introduce themselves appropriately.
- Explain their role as EMS students.
- Obtain patient histories when appropriate.
- Practice effective communication techniques.
- Demonstrate empathy and professionalism.

Students shall always respect patient dignity, privacy, and autonomy.

Patient Histories

Patient history collection is an essential component of EMS education.

Students shall utilize hospital clinical experiences to develop skills in:

- Interviewing patients
- Gathering medical histories
- Identifying chief complaints
- Assessing current illnesses or injuries
- Reviewing medications
- Identifying relevant past medical history

Students should seek opportunities to improve communication and assessment skills during every clinical experience.

Procedures and Skills

Students may participate in procedures consistent with their level of education, affiliate policy, and preceptor supervision.

Participation may include:

- Patient assessment
- Vital signs
- Airway management
- Oxygen administration
- Intravenous access
- Medication administration observation
- Cardiac monitoring observation
- Other approved clinical activities

Students shall not perform procedures without appropriate authorization and supervision.

Professional Conduct

Professional conduct is expected at all times during hospital clinical experiences.

Students shall:

- Respect patients and staff.
- Maintain confidentiality.
- Follow directions.
- Demonstrate initiative.
- Accept constructive feedback.

Unprofessional conduct may result in removal from the clinical site and referral to the Clinical Coordinator and Program Director.

Clinical Documentation

Students are responsible for documenting required patient contacts, competencies, and clinical activities in accordance with program requirements.

Documentation shall be completed accurately, honestly, and within established deadlines.

Clinical Evaluation

Students may be evaluated by:

- Clinical preceptors
- Nurses
- Physicians
- Clinical staff
- EMS faculty

Evaluations may include assessment of:

- Professional behavior
- Communication skills
- Clinical performance
- Initiative
- Documentation quality
- Overall preparedness

Feedback should be viewed as an opportunity for professional growth and development.

CHAPTER 10

EMS FIELD EXPERIENCES

Purpose

EMS field experiences provide students with opportunities to apply classroom knowledge and clinical skills in the prehospital environment.

Field experiences allow students to participate in patient care activities under the supervision of licensed EMS professionals and develop the knowledge, skills, judgment, and professionalism necessary for entry-level EMS practice.

EMS Affiliates

The Angelina College EMS Program currently utilizes the following EMS affiliates:

- Lufkin Fire Department, 314 E. Lufkin Avenue, Lufkin, Tx 75901
- Nacogdoches County EMS, 1204 N Mound St, Nacogdoches, TX 75961
- Allegiance EMS, 201 E 4th St, Livingston, TX 77351

Additional EMS affiliates may be utilized as affiliation agreements are established or modified.

Students may be assigned to any approved EMS affiliate utilized by the EMS Program.

Student Responsibilities During EMS Clinicals

Students are expected to:

- Arrive on time.
- Report to the assigned EMS station or location.
- Wear the approved uniform and identification.
- Participate actively in patient care.
- Follow directions provided by the preceptor.
- Demonstrate professionalism at all times.
- Complete required documentation.

Students are expected to maintain a positive attitude and actively seek opportunities to learn.

Role of the Student

The role of the student will vary according to the level of training and experience.

Students shall function under the supervision of the assigned preceptor and within the limits of their education and competency.

Students shall not independently provide patient care without appropriate supervision.

Patient Care Participation

Students are encouraged to actively participate in:

- Patient assessments
- History taking
- Vital signs
- Airway management
- Patient movement
- Documentation
- Communication with patients and providers

As competence develops, students may assume greater responsibility for patient care activities under preceptor supervision.

EMT Field Experiences

The primary role of the EMT student is to function as an assistant to the EMS crew and observe the assessment and treatment process while developing patient care and documentation skills.

Students are expected to:

- Assist with patient movement.
- Assist with equipment preparation.
- Participate in patient assessments.
- Observe treatment interventions.
- Complete required narratives and documentation.

AEMT Field Experiences

AEMT students are expected to assume an increased role in patient assessment and management while developing advanced skills and clinical judgment.

Students may participate in advanced procedures consistent with their education, affiliate policy, and preceptor supervision.

Paramedic Field Experiences

Paramedic students are expected to progressively develop leadership, assessment, treatment, and decision-making skills.

Students shall assume increasing responsibility for patient care and work toward successful completion of required Team Lead experiences.

Teamwork and Professionalism

EMS is a team-oriented profession.

Students shall demonstrate:

- Respect
- Cooperation
- Accountability
- Professional communication
- Positive attitudes

Students are expected to work effectively with EMS personnel, healthcare professionals, patients, and families.

Clinical Evaluation

Field performance may be evaluated through:

- Preceptor evaluations
- Narrative review
- Patient contacts
- Competency completion
- Clinical documentation
- Professional behavior assessments

Students are expected to accept constructive feedback and use evaluation results to improve performance.

Safety

Students shall follow all EMS agency safety procedures.

Students shall:

- Wear seat belts when available.
- Utilize appropriate PPE.
- Follow lifting and movement procedures.
- Maintain situational awareness.
- Report injuries or unsafe conditions immediately.

Patient safety and provider safety shall remain the highest priorities during all EMS field experiences.

CHAPTER 11

CLINICAL REQUIREMENTS

Students must successfully complete all required clinical hours, patient contacts, competencies, narratives, and program requirements before program completion.

The Clinical Coordinator, Program Director, and EMS faculty monitor student progress throughout the program.

Failure to complete clinical requirements may result in delayed progression, delayed graduation, clinical failure, or inability to complete the program.

EMT Clinical Requirements

EMS Clinical

Students shall complete:

- 48 EMS clinical hours
- 8 documented 911 patient contacts for narrative evaluation

The primary role of the EMT student is to function as an assistant to the EMS crew while developing assessment, communication, documentation, and patient care skills.

Hospital Clinical

Students shall complete:

- 32 Emergency Department clinical hours
- 32 patient histories

Students are expected to develop patient assessment and communication skills through direct interaction with patients and healthcare professionals.

AEMT Clinical Requirements

EMS Clinical

Students shall complete:

- 120 EMS clinical hours
- 15 documented 911 patient contacts for narrative evaluation

Students shall assume increasing responsibility for patient assessment and care while functioning under preceptor supervision.

Hospital Clinical

Students shall complete:

- 32 Emergency Department hours
- 24 Simulation hours
- 16 Surgery hours

Students shall also complete:

- 56 patient histories
- 20 successful IV starts
- 2 live patient intubations

Paramedic Clinical Requirements

EMS Clinical

Students shall complete:

- 208 EMS clinical hours
- 52 documented 911 patient contacts for narrative evaluation

Students shall work toward successful completion of Team Lead requirements and progressively assume responsibility for patient care management.

Hospital Clinical

Students shall complete:

- 72 Emergency Department hours
- 24 Surgery hours
- 8 Telemetry hours
- 8 Cardiac Catheterization Laboratory hours
- 8 ICCU hours
- 24 Labor and Delivery hours
- 8 Pediatric Emergency Department hours
- 8 Medical Director Emergency Department hours
- 80 Simulation hours

Students shall complete all competencies and patient contacts required by the EMS Program and applicable accreditation standards.

CLINICAL ROTATION OBJECTIVES

Emergency Department Objectives

During the Emergency Department clinical experience, students should practice under appropriate supervision and demonstrate proficiency appropriate to their level of education and training.

All Levels

The student should:

- Obtain patient histories.
- Perform patient assessments.
- Obtain and interpret vital signs.
- Practice patient interviewing techniques.
- Observe and participate in treatment of medical emergencies.
- Observe and participate in treatment of traumatic injuries.
- Assist with patient movement and transfers.
- Participate in patient documentation activities when appropriate.
- Demonstrate effective communication with patients and healthcare providers.

AEMT and Paramedic Students

The student should seek opportunities to:

- Perform IV access under supervision.
- Observe medication administration.
- Participate in advanced patient assessment.
- Assist with advanced airway management.

Paramedic Students

The student should seek opportunities to:

- Perform advanced patient assessments.
- Participate in medication administration as approved.
- Assist with advanced airway procedures.
- Observe and interpret ECG monitoring.
- Participate in critical patient management.

Operating Room Objectives

During the Operating Room clinical experience, students should focus on airway management, patient monitoring, and perioperative care.

Paramedic Students

The student should:

- Observe airway management procedures.
- Perform endotracheal intubation when approved.
- Observe medication administration.
- Observe patient monitoring techniques.
- Participate in airway suctioning procedures when appropriate.
- Demonstrate professional interaction with anesthesia providers and surgical staff.

Labor and Delivery Objectives

During Labor and Delivery rotations, students should develop an understanding of obstetrical emergencies and newborn care.

Paramedic Students

The student should:

- Observe normal labor and delivery.
- Observe newborn assessment.
- Observe neonatal resuscitation when available.
- Identify the stages of labor.
- Discuss common obstetrical complications.
- Observe management of postpartum hemorrhage.
- Observe fetal monitoring and maternal assessment.

Cardiac Catheterization Laboratory Objectives

During the Cardiac Catheterization Laboratory rotation, students should develop an understanding of cardiac emergencies and invasive cardiac procedures.

Paramedic Students

The student should:

- Observe pre-procedure patient preparation.
- Observe cardiac catheterization procedures.
- Observe post-procedure patient care.
- Discuss STEMI activation procedures.
- Identify members of the cardiac care team.
- Observe cardiac monitoring and rhythm interpretation.
- Discuss emergency management of cardiac patients.

Telemetry Unit Objectives

During the Telemetry rotation, students should focus on cardiac monitoring and rhythm recognition.

Paramedic Students

The student should:

- Observe cardiac rhythm monitoring.
- Identify common cardiac rhythms.
- Discuss treatment considerations for common dysrhythmias.
- Observe telemetry documentation.
- Discuss indications for cardiac monitoring.

Intensive Cardiac Care Unit (ICCU) Objectives

During the ICCU rotation, students should observe the management of critically ill cardiac patients.

Paramedic Students

The student should:

- Observe advanced cardiac monitoring.
- Observe ventilator management.
- Observe vasoactive medication administration.
- Discuss management of cardiac emergencies.
- Observe interdisciplinary critical care team interactions.

Pediatric Emergency Department Objectives

During pediatric clinical experiences, students should develop comfort and confidence caring for pediatric patients.

All Levels

The student should:

- Obtain pediatric patient histories.
- Perform age-appropriate assessments.
- Observe common pediatric illnesses and injuries.
- Demonstrate effective communication with pediatric patients and caregivers.
- Discuss age-specific treatment considerations.

AEMT and Paramedic Students

The student should:

- Observe pediatric medication administration.
- Participate in pediatric patient assessment.
- Observe pediatric emergency interventions when available.

EMS Field Internship Objectives

During EMS field experiences, students should integrate classroom knowledge, clinical skills, and professional behaviors into patient care.

All Levels

The student should:

- Participate in patient assessments.
- Obtain patient histories.
- Assist with patient movement.
- Perform vital signs.
- Participate in documentation.
- Demonstrate effective communication.
- Practice scene safety.
- Utilize appropriate PPE.
- Function as a member of the EMS team.

AEMT Students

The student should:

- Participate in advanced patient care activities.
- Perform IV access under supervision.
- Participate in treatment planning discussions.
- Demonstrate clinical decision-making skills.

Paramedic Students

The student should:

- Demonstrate leadership abilities.
- Formulate field impressions.
- Develop treatment plans.
- Perform advanced procedures when appropriate.
- Demonstrate clinical judgment.
- Progress toward successful completion of Team Lead requirements.

Clinical Objective Documentation

Students should actively seek opportunities to meet rotation objectives during each clinical and field experience.

Successful completion of clinical hours does not guarantee competency. Students are expected to demonstrate progressive development of knowledge, skills, professionalism, communication, and clinical judgment throughout all clinical and field education experiences.

CHAPTER 12

TEAM LEAD REQUIREMENTS

Team Lead: occurs during the capstone field internship experience in which students apply the concepts acquired and demonstrate that they have achieved the terminal goals for learning established by their education program, and are able to demonstrate entry-level competency in the profession including the cognitive, psychomotor, and affective learning domains. The capstone experience occurs after the didactic, lab and clinical, and optional field experience components have been completed and of sufficient volume to show competence in a wide range of clinical situations. A successful team lead should be clearly defined for preceptors and students to assist in inter-rater reliability.

The student has successfully led the team if he or she has conducted a comprehensive assessment (not necessarily performed the entire interview or physical exam, but rather been in charge of the assessment), as well as formulated and implemented a treatment plan for the patient. This means that most (if not all) of the decisions have been made by the student, especially formulating a field impression, directing the treatment, determining patient acuity, disposition and packaging/moving the patient (if applicable). Minimal to no prompting was needed by the preceptor. No action was initiated/performed that endangered the physical or psychological safety of the patient, bystanders, other responders or crew. (Preceptors should not agree to a "successful" rating unless it is truly deserved. As a general rule, more unsuccessful attempts indicate willingness to try and are better than no attempt at all.) To be counted as a Team Lead the student must conduct a comprehensive assessment, establish a field impression, determine patient acuity, formulate a treatment plan, direct the treatment, and direct and participate in the transport of the patient to a medical facility, transfer of care to a higher level of medical authority, or termination of care in the field. For the capstone field internship to meet the breadth of the profession, team leads must include transport to a medical facility and may occasionally include calls involving transfer of care to an equal level or higher level of medical authority, termination of care in the field, or patient refusal of care. Capstone field internship team leads cannot be accomplished with simulation.

Team Lead experiences are designed to prepare Paramedic students to function as entry-level paramedics capable of managing patient care situations while under appropriate supervision.

Students shall complete:

- Twenty-seven (27) Team Lead patient contacts

Team Lead requirements shall be completed in accordance with current EMS Program requirements and the Angelina College EMS Student Handbook.

During Team Lead experiences, students are expected to demonstrate:

- Leadership
- Patient assessment
- Clinical decision-making
- Treatment planning
- Communication
- Documentation
- Professionalism

The assigned preceptor shall evaluate the student's ability to manage patient care while maintaining patient safety and professional standards.

Students who fail to demonstrate satisfactory performance may be required to complete additional Team Lead experiences as determined by the Program Director and Clinical Coordinator.

CHAPTER 13

CLINICAL EVALUATION PROCESS

Student performance is evaluated throughout all clinical and field education experiences.

Evaluation is intended to:

- Measure student progress
- Identify strengths
- Identify deficiencies
- Promote professional growth
- Verify competency achievement

Evaluation Methods

Student evaluation may include:

- Preceptor evaluations
- Clinical narratives
- Patient contact documentation
- Competency completion
- Faculty observation
- Clinical participation
- Professional behavior assessments

Preceptor Evaluations

Clinical and field preceptors provide valuable feedback regarding student performance.

Evaluation areas may include:

- Professionalism
- Patient assessment
- Communication
- Clinical performance
- Initiative
- Documentation

- Teamwork

Students are expected to accept constructive feedback and utilize evaluation results to improve performance.

Students may also be evaluated utilizing the EMS Program Affective Behavior Evaluation when concerns regarding professionalism, communication, accountability, or other affective domain behaviors are identified.

Documentation Review

Clinical narratives and patient documentation are reviewed by EMS faculty to evaluate clinical reasoning, communication skills, and documentation quality.

Narratives requiring revision shall be corrected and resubmitted within forty-eight (48) hours.

Clinical Progression

Successful clinical progression requires satisfactory completion of:

- Clinical hours
- Patient contacts
- Competencies
- Documentation requirements
- Professional conduct standards
- Team Lead requirements when applicable

CHAPTER 14

COUNSELING AND REMEDIATION

The Angelina College EMS Program is committed to supporting student success through timely identification of deficiencies and implementation of corrective actions.

Clinical Counseling

Clinical counseling may occur when concerns are identified regarding:

- Attendance
- Tardiness
- Documentation deficiencies
- Professional conduct
- Uniform violations
- Communication concerns
- Policy violations
- Clinical performance

Counseling is intended to provide guidance and assist students in improving performance.

A Clinical Counseling Form may be completed and maintained as part of the student's program record.

Clinical Remediation

Remediation is designed to assist students in correcting identified deficiencies and achieving program requirements.

Remediation may be required for:

- Deficient clinical hours
- Deficient patient contacts
- Narrative deficiencies
- Unsatisfactory evaluations
- Competency deficiencies
- Team Lead deficiencies
- Professional conduct concerns

Remediation Plans

The Clinical Coordinator and Program Director may develop individualized remediation plans.

Remediation activities may include:

- Additional clinical hours
- Additional patient contacts
- Additional documentation assignments
- Simulation activities
- Skills practice
- Faculty conferences
- Written assignments

Failure to successfully complete remediation requirements may result in clinical failure and inability to progress within the EMS Program.

CHAPTER 15

CLINICAL SUSPENSION, FAILURE, AND DISMISSAL

Patient safety and professional conduct are fundamental expectations of the EMS Program.

Students who fail to meet established standards may be subject to clinical suspension, clinical failure, or dismissal.

Clinical Suspension

Students may be temporarily suspended from clinical activities when circumstances exist that may compromise patient safety or violate program requirements.

Reasons for suspension may include:

- Clinical eligibility deficiencies
- Drug screening concerns
- Background check concerns
- Professional conduct violations
- HIPAA violations
- Patient safety concerns
- Failure to comply with remediation requirements

Students shall not participate in clinical activities while suspended.

Clinical Failure

Clinical failure may result from:

- Failure to complete required clinical hours
- Failure to complete required patient contacts
- Failure to complete required competencies
- Failure to complete Team Lead requirements
- Failure to complete remediation requirements
- Repeated policy violations

Clinical failure may delay progression or graduation.

Program Dismissal

Program dismissal may result from:

- Academic dishonesty
- Falsification of documentation
- HIPAA violations
- Serious professional conduct violations
- Patient safety violations
- Criminal conduct affecting eligibility

Dismissal decisions shall be made in accordance with Angelina College policies and EMS Program requirements.

The Program reserves the right to take immediate action when necessary to protect patients, students, faculty, clinical affiliates, or the integrity of the EMS Program.

CHAPTER 16

STUDENT RIGHTS, PROGRAM EXPECTATIONS, AND HANDBOOK ACKNOWLEDGMENT

Student Rights

Students enrolled in the Angelina College EMS Program have the right to:

- Be treated fairly and respectfully.
- Learn in a safe educational environment.
- Receive constructive feedback regarding performance.
- Participate in meaningful clinical and field education experiences.
- Ask questions and seek clarification regarding program requirements.
- Report concerns through established communication channels.
- Be evaluated using established program standards and expectations.
- Receive support and guidance from EMS faculty and program leadership.

The EMS Program is committed to fostering an educational environment that promotes professionalism, respect, accountability, and student success.

Program Expectations

Students are expected to:

- Demonstrate professionalism at all times.
- Comply with all College, EMS Program, clinical affiliate, and EMS agency policies.
- Maintain clinical eligibility requirements.
- Complete all required clinical hours, patient contacts, competencies, and documentation.
- Communicate appropriately with faculty, preceptors, patients, and healthcare professionals.
- Accept responsibility for personal actions and decisions.
- Protect patient privacy and confidentiality.
- Demonstrate honesty, integrity, and ethical behavior.
- Actively participate in learning opportunities.
- Represent Angelina College and the EMS profession positively.

The EMS Program expects students to approach every clinical and field experience with a willingness to learn and a commitment to excellence.

Commitment to Professional Growth

Clinical and field education experiences are designed to help students develop into competent and compassionate EMS professionals.

Students are encouraged to:

- Seek learning opportunities.
- Ask questions.
- Accept constructive feedback.
- Learn from mistakes.
- Develop leadership skills.
- Promote patient advocacy.
- Pursue lifelong learning.

Success in EMS education requires dedication, accountability, professionalism, and perseverance.

Handbook Revisions

The Angelina College EMS Program reserves the right to revise handbook policies and procedures as necessary to maintain compliance with:

- Angelina College policies
- Clinical affiliate requirements
- EMS agency requirements
- State and federal regulations
- Accreditation standards
- EMS Program needs

Students will be notified of significant revisions when appropriate.

Student Handbook Acknowledgment

All students participating in clinical and field education experiences shall acknowledge receipt of the Angelina College EMS Clinical & Field Internship Handbook.

By signing the Student Handbook Acknowledgment Form, students acknowledge that they:

- Have received access to the handbook.
- Have reviewed the handbook.
- Understand the policies and requirements contained within the handbook.
- Agree to comply with handbook requirements.
- Understand that failure to comply with handbook policies may result in counseling, remediation, suspension, clinical failure, or dismissal from the EMS Program.

The signed acknowledgment form shall be maintained in the student's program file.

Serve with Compassion.

Learn with Purpose.

Lead with Professionalism.

Angelina College EMS Program

Clinical & Field Internship Handbook

Version 1.0

APPENDIX A



CLINICAL EVALUATION FORMS



Appendix I National Registry of Emergency Medical Technicians® Paramedic Psychomotor Competency Portfolio Manual CLINICAL SHIFT EVALUATION WORKSHEET

Student Name		Date		Educational Program		Unit or Station:		Clinical Site						
Page	of	Time In:	Out:	Preceptor:										
Directions: Each contact must be rated by the student first, and rated by the preceptor second. Mark student ratings in the row marked "S" and preceptors in row "P." Comment on any discrepancies on back. Preceptors complete shaded sections														
Patient Age/Sex	Impression / Differential Diagnoses	LOC Complaints, Event/Circumstances	Summary of treatments rendered successfully by student	Circle Patient Contact Type	Rating: NA = Not applicable- not needed or expected. 0 = Unsuccessful - required excessive or critical prompting; Includes "Not attempted" when student was expected to try. 1 = Marginal - Inconsistent, not yet competent. 2 = Successful/competent - no prompting (See description at end of instrument)							Comments and Immediate Plan for Improvement for Next Contact		
					Clinical Objectives									
					Rater	Pt Interview + Hx Gathering	Physical Exam	Impression/Tx Plan	Skill Performance	Communication	Professional Behavior (Affect)	Team Membership	Initials	
1.				ALS	S									
				BLS	P									
2.				ALS	S									
				BLS	P									
3.				ALS	S									
				BLS	P									
4.				ALS	S									
				BLS	P									
5.				ALS	S									
				BLS	P									
6.				ALS	S									
				BLS	P									
7.				ALS	S									
				BLS	P									



Appendix I
National Registry of Emergency Medical Technicians®
Paramedic Psychomotor Competency Portfolio Manual
CLINICAL SHIFT EVALUATION WORKSHEET

Comment on any unsatisfactory ratings or discrepancies:

Overall plan for improvement for future shifts:

Student reported ☐ on time, ☐ well groomed, ☐ in uniform and prepared to begin the shift. ☐ Yes ☐ No	Student knows equipment location and use. ☐ Yes ☐ No
Behavior was professional: ☐ Accepts feedback openly ☐ Self-motivated ☐ Efficient ☐ Flexible ☐ Careful ☐ Confident	Student helps clean up and restock, unprompted. ☐ Yes ☐ No
Student asked relevant questions and participated in learning answers, used downtime to its highest potential. ☐ Yes ☐ No	Student left site early (did not complete shift). ☐ Yes ☐ No
Preceptor requests a follow-up with appropriate program personnel. ☐ Phone call _____ or ☐ Email _____	
Student Signature _____	

I agree to the above ratings:
Preceptor Signature _____

Clinical Objectives:

Pt Interview/Hx Gathering: Student completes an appropriate interview and gathers appropriate history; listens actively, makes eye contact, clarifies complaints, respectfully addresses patient(s); demonstrated compassion and/or firm bedside manner depending on the needs of the situation.

Physical Exam: Student completes an appropriate focused physical exam specific to the chief complaint and/or comprehensive head-to-toe physical examination.

Impression & Tx Plan: Student formulates an impression and verbalizes an appropriate treatment plan.

Skill Performance: Student performs technical skills accurately and safely.

Communication: Student communicates effectively with team, provides an adequate verbal report to other health care providers and completes a thorough written patient narrative.

Professional Behavior Objectives: Student demonstrates they are:

Self-motivated: Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback and adjusts behavior/performance.

Efficient: Keeps assessment and treatment times to a minimum, releases other personnel when not needed and organizes team to work faster/better.

Flexible: Makes adjustments to communication style, directs team members and changes impressions based on findings.

Careful: Pays attention to detail of skills, documentation, patient comfort, set-up and clean-up and completes tasks thoroughly.

Confident: Makes decisions, trusts and exercises good personal judgment and is aware of limitations and strengths.

Open to feedback: Listens to preceptor and accepts constructive feedback without being defensive (interrupting, giving excuses).

Team Membership Objective: Clinical Experience evaluation of field performance assesses a student as a Team Member and is isolated to evaluation of individual skill delivery or a portion of patient care that is delivered. The student is not assuming the Team Leader role but integrating with other Team Members. When evaluating the student performance as a Team Member, only the portion of care completed by the student is evaluated. The Team Member role contains an affective component and evaluates the student's cognitive understanding of complete patient care that paramedics are expected to deliver.

Rating: NA = Not applicable - not needed or expected; This is a neutral rating. (Example: Student expected to only observe, or the patient did not need intervention). 0 = Unsuccessful - required excessive or critical prompting; includes "Not attempted" when student was expected to try. This is an unsatisfactory rating. 1 = Marginal - inconsistent, not yet competent; This includes partial attempts. 2 = Successful/competent - no and case difficulty will vary. Students should be active and ATTEMPT to perform skills and assess/treat patients early even if this results in frequent prompting and unsuccessful ratings. Unsuccessful ratings are normal and expected in the early stages of the clinical learning process when student needs prompting. Improvement plans MUST follow any unsuccessful or inconsistent ratings.



Appendix K
National Registry of Emergency Medical Technicians®
Paramedic Psychomotor Competency Portfolio Manual
CAPSTONE FIELD INTERNSHIP SHIFT EVALUATION WORKSHEET

Student Name		Page of		Time In:		Time Out:		Educational Program		Date		Unit or Station:		Clinical Site	
Directions: Each contact must be rated by the student FIRST, and rated by the preceptor SECOND. Mark student ratings in the row marked "S" and preceptors in row "P." Comment on any discrepancies on back. Preceptors complete shaded sections										Ratings: NA = Not applicable - not needed or expected. 0 = Unsuccessful - required excessive or critical prompting; Includes "Not attempted" when student was expected to try. 1 = Marginal - inconsistent, not yet competent. 2 = Successful/competent - no prompting					
Patient Age Sex	Impression and/or Differential Diagnosis	LOC, Complaints, Event/Circumstances	Summary of treatments rendered successfully by student	Circle Patient Contact Type	Objectives							Preceptor Initials	Comments and Immediate Plan for Improvement for Next Contact		
					Rating	Pt Interview + Hx gathering	Physical Exam	Field Impression Tx Plan	Skill Performance	Communication	Professional Behavior (Affect)			Team Leadership	
1.				ALS	S										
				BLS	P										
2.				ALS	S										
				BLS	P										
3.				ALS	S										
				BLS	P										
4.				ALS	S										
				BLS	P										
5.				ALS	S										
				BLS	P										
6.				ALS	S										
				BLS	P										
7.				ALS	S										
				BLS	P										



Appendix K
National Registry of Emergency Medical Technicians®
Paramedic Psychomotor Competency Portfolio Manual
CAPSTONE FIELD INTERNSHIP SHIFT EVALUATION WORKSHEET

Comment on any unsatisfactory ratings or discrepancies:

Overall plan for improvement for future shifts:

Student reported ☐ on time, ☐ well groomed, ☐ in uniform and prepared to begin the shift. ☐ Yes ☐ No	Student knows equipment location and use. ☐ Yes ☐ No
Behavior was professional: ☐ Accepts feedback openly ☐ Self-motivated ☐ Efficient ☐ Flexible ☐ Careful ☐ Confident	Student helps clean up and restock, unprompted. ☐ Yes ☐ No
Student asked relevant questions and participated in learning answers, used downtime to its highest potential. ☐ Yes ☐ No	Student left site early (did not complete shift). ☐ Yes ☐ No
Preceptor would appreciate ☐ phone call or ☐ email from the instructor (please provide contact info). ☐ Yes ☐ No	
Student Signature	I agree to the above ratings: Preceptor Signature

Clinical Objectives:

PI Interview/Hx Gathering: Student completes an appropriate interview and gathers appropriate history; listens actively, makes eye contact, clarifies complaints, respectfully addresses patient (s); demonstrated compassion and /or firm bedside manner depending on the needs of the situation.

Physical Exam: Student completes an appropriate focused physical exam specific to the chief complaint and/or comprehensive head-to-toe physical examination.

Impression & Tx plan: Student formulates an impression and verbalizes an appropriate treatment plan.

Skill Performance: Student performs technical skills accurately and safely.

Communication: Student communicates effectively with team, provides an adequate verbal report to other health care providers and completes a thorough written patient narrative.

Professional Behavior Objectives: Student demonstrates they are:

Self-motivated: Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback and adjusts behavior/performance.

Efficient: Keeps assessment and treatment times to a minimum, releases other personnel when not needed and organizes team to work faster/better.

Flexible: Makes adjustments to communication style, directs team members and changes impressions based on findings.

Careful: Pays attention to detail of skills, documentation, patient comfort, set-up and clean-up and completes tasks thoroughly.

Confident: Makes decisions, trusts and exercises good personal judgment and is aware of limitations and strengths.

Open to feedback: Listens to preceptor and accepts constructive feedback without being defensive (interrupting, giving excuses).

Team Leadership Objective: The student has successfully led the team if he or she has conducted a comprehensive assessment (not necessarily performed the entire interview or physical exam, but rather been in charge of the assessment), as well as formulated and implemented a treatment plan for the patient. This means that most (if not all) of the decisions have been made by the student, especially formulating a field impression, directing the treatment, determining patient acuity, disposition and packaging/moving the patient (if applicable). Minimal to no prompting was needed by the preceptor. No action was initiated/performed that endangered the physical or psychological safety of the patient, bystanders, other responders or crew. (Preceptors should not agree to a "successful" rating unless it is truly deserved. As a general rule, more unsuccessful attempts indicate willingness to try and are better than no attempt at all.)

Ratings: NA = Not applicable - not needed or expected; This is a neutral rating. (Example: Student expected to only observe, or the patient did not need intervention). 0 = Unsuccessful - required excessive or critical prompting; includes "Not attempted" when student was expected to try. This is an unsatisfactory rating. 1 = Marginal - inconsistent, not yet competent; This includes partial attempts. 2 = Successful/competent - no prompting. Note: Ideally, students will progress their role from observation to participation in simple skills, to more complex assessments and formulating treatment plans. Students will progress at different rates and ease difficulty will vary. Students should be active and ATTEMPT to perform skills and assess/treat patients early even if this results in frequent prompting and unsuccessful ratings. Unsuccessful ratings are normal and expected in the early stages of the clinical learning process when student needs prompting. Improvement plans MUST follow any unsuccessful or inconsistent ratings.

APPENDIX B



Angelina College EMS Program Student Clinical Exposure / Needle Stick Incident Report

EXPOSURE INCIDENT REPORTING REMINDER

- Notify your preceptor immediately.
- Follow the facility's exposure control plan.
- Obtain medical evaluation as directed.
- Notify the Clinical Coordinator within 24 hours.
- Complete all required facility and Angelina College EMS Program documentation.

Student Information

Name: _____

Program (EMT-Basic / Paramedic): _____

Clinical Site: _____

Date & Time of Incident: _____

Incident Details

Location (ED, ambulance, ICU, etc.): _____

Type of Exposure: ☐ Needle stick ☐ Sharps injury ☐ Blood/body fluid splash

☐ Other:

Description of Incident:

Exposure Details

Device was: ☐ Clean/unused ☐ Used on patient

If used: Known source patient? ☐ Yes ☐ No

Type of fluid: ☐ Blood ☐ Saliva ☐ Other: _____

PPE worn: ☐ Gloves ☐ Eye protection ☐ Mask ☐ None

Immediate Actions Taken

- ☐ Washed/irrigated area
- ☐ Reported to preceptor
- ☐ Reported to facility supervisor
- ☐ Employee Health / ED notified
- ☐ Source patient testing initiated

Medical Evaluation

Student sent to: ☐ ED ☐ Employee Health ☐ Urgent Care

Time seen: _____

Post-exposure prophylaxis (PEP) offered? ☐ Yes ☐ No

Preceptor / Site Verification

Preceptor Name: _____

Facility Name: _____ Contact #: _____

AC Program Notification

Date/Time Program Notified: _____

Notified by: _____

Coordinator Follow-Up Notes:

Signatures

Student Signature: _____ Date: _____

EMS Program Director: _____ Date: _____

EMS Clinical Coordinator: _____ Date: _____

The student must follow the clinical site's exposure control plan immediately. Angelina College EMS Program is not responsible for medical costs incurred. Documentation must be completed within 24 hours of the incident.

APPENDIX C



STUDENT CLINICAL COUNSELING FORM



Committee on Accreditation
of Educational Programs for the
Emergency Medical Services Professions



Student Counseling Form

Program Number:

Date:

Program Name:

Course Number:

Student Name:

Course Start Date:

Reason for Counseling:

	Class	Lab	Clinical	Field
Attendance				
Academic Performance				
Skill Acquisition/Performance				
Affective Behavior				
Administrative Probation (financial/other)				

This student has been counseled regarding the following:

Previous Performance Improvement Plan (PIP) Completed:	Y ☐ N ☐	Date:
Previous Counseling:	Y ☐ N ☐	Date:
Dismissal:	Y ☐ N ☐	Date:

Student Comments:

Student Signature:

Date:

Faculty Signature:

Date:

Program Director Signature:

Date:

APPENDIX D



CLINICAL REMEDIATION PLAN

ANGELINA COLLEGE EMS PROGRAM

CLINICAL REMEDIATION PLAN

Student Name: _____

Program Level: _____

Date Initiated: _____

Reason for Remediation

- ☐ Deficient Clinical Hours
- ☐ Deficient Patient Contacts
- ☐ Deficient Narratives
- ☐ Unsatisfactory Evaluation
- ☐ Competency Deficiency
- ☐ Team Lead Deficiency
- ☐ Professional Conduct Concern
- ☐ Documentation Deficiency
- ☐ Other _____

Description of Deficiency

Required Remediation Activities

- ☐ Additional Clinical Hours
- ☐ Additional Patient Contacts
- ☐ Additional Narratives
- ☐ Simulation Assignment

- ☐ Skills Practice
- ☐ Faculty Conference
- ☐ Written Assignment
- ☐ Other _____

Completion Deadline

Outcome

- ☐ Successfully Completed
- ☐ Additional Remediation Required
- ☐ Clinical Failure Recommended

Comments

Student Signature _____ Date _____

Clinical Coordinator _____ Date _____

Program Director _____ Date _____

APPENDIX E



AFFECTIVE BEHAVIOR EVALUATION

Affective Behavior Evaluation

CoAEMSP Program Number:

Date:

Program Sponsor:

Faculty:

Student:

Course:

Rate the following attributes of professional behavior and affect. Some examples are included, and others may be appropriate.	Needs Improvement	Fair	Good
1. Integrity Consistent honesty; trustworthy with the property of others; trustworthy with confidential information; complete and accurate documentation.	☐	☐	☐
2. Compassion Acts to support others who are suffering, actively listens to patients and families and demonstrates concern.	☐	☐	☐
3. Accountability Takes responsibility for actions, complete assignments, open to constructive feedback.	☐	☐	☐
4. Respect Polite to others, does not use derogatory or demeaning terms; has a manner that brings credit to the profession.	☐	☐	☐
5. Empathy Responds appropriately to the response of patients and family members; demonstrates respect for others; supportive and reassuring to others.	☐	☐	☐
6. Self-Motivation Takes initiative to complete assignments; takes initiative to improve and/or correct behavior; takes on tasks and follows through without constant supervision; shows enthusiasm for learning and improvement; consistently strives for excellence in all aspects of patient care and professional activities; accepts constructive feedback in a positive manner; takes advantage of learning opportunities.	☐	☐	☐
7. Appearance and Personal Hygiene Clothing and uniform are appropriate, neat, clean, and well maintained, good personal hygiene and grooming.	☐	☐	☐

8. Self-Confidence	☐	☐	☐
Demonstrates the ability to trust personal judgment, demonstrates an awareness of strengths and limitations; exercises good personal judgment.			
9. Communications	☐	☐	☐
Speaks clearly; writes legibly; listens actively; adjusts communication strategies to various situations.			
10. Teamwork and Diplomacy	☐	☐	☐
Places the success of the team above self-interest; not undermining the team; helps and supports other team members; shows respect for all team members; remains flexible and open to change; communicates with others to resolve conflict.			
11. Patient Advocacy	☐	☐	☐
Does not allow personal bias or feeling interfere with interactions with others; places the needs of patients above self-interest; protects and respects patient confidentiality and dignity.			
12. Cultural Competency	☐	☐	☐
Maintains awareness of the assumptions and biases related to cultural issues and how they may affect patients, peers and all others involved in the delivery of medical care. Seeks to learn about others' cultural identities and looks at how one's own background and social environment have shaped the individual. Provides culturally competent, equitable and medically appropriate care to each patient no matter their background.			

Additional Pertinent Comments:

Student Signature: _____

Date:

Faculty Signature: _____

Date:

APPENDIX F



STUDENT HANDBOOK ACKNOWLEDGMENT FORM

I acknowledge that I have received access to the Angelina College EMS Clinical & Field Internship Handbook.

I understand that I am responsible for reviewing and complying with all policies, procedures, expectations, and requirements contained within the handbook.

I understand that failure to comply with handbook requirements may result in counseling, remediation, suspension, clinical failure, or dismissal from the EMS Program.

Student Name _____ Student ID _____

Program:

☐ EMT

☐ AEMT

☐ Paramedic

Student Signature _____

Date _____

Program Director / Clinical Coordinator _____

Date _____

APPENDIX G



REVISION HISTORY

Version	Date	Description
1.0	2026	Initial EMS Clinical & Field Internship Handbook
1.1	_____	_____
1.2	_____	_____
1.3	_____	_____
1.4	_____	_____



CLOSING MESSAGE

The Angelina College EMS Program recognizes that becoming an Emergency Medical Technician, Advanced Emergency Medical Technician, or Paramedic requires dedication, perseverance, professionalism, and a commitment to lifelong learning.

Clinical and field education experiences provide opportunities for students to develop the knowledge, skills, judgment, and confidence necessary to serve patients and communities during times of need.

The faculty, Clinical Coordinator, Program Director, Medical Director, clinical affiliates, EMS agencies, preceptors, and healthcare professionals associated with the Angelina College EMS Program are committed to supporting student success throughout this educational journey.

Students are encouraged to approach every clinical experience as an opportunity to learn, every patient encounter as an opportunity to serve, and every challenge as an opportunity to grow.

The Angelina College EMS Program wishes every student success in achieving their educational goals and future EMS career.