



TEMPLE COLLEGE

# Rotation Summary Form

Student Name: \_\_\_\_\_ Location: \_\_\_\_\_

Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Total Hours: \_\_\_\_\_

Date Submitted: \_\_\_\_\_ Received By: \_\_\_\_\_ Date Returned: \_\_\_\_\_ Date Resubmitted: \_\_\_\_\_

## Learning Objectives

### Purpose

The purpose of this rotation is to give students exposure to a wide variety of critically ill and injured children and provide opportunities to assess these patients and to review and discuss their treatment plans. Although students may perform technical skills as requested, they should focus on each patient's diagnosis, key assessment findings, and treatment plans.

### Objectives (These experiences must be completed)

At a minimum, students in fourth semester paramedic clinical rotations will be expected to accomplish the following objectives during the Pediatric ICU rotation:

1. Perform at least 3 patient assessments, including recent and past medical history and physical examination. The assessment should include a rapid initial evaluation of respiratory effort, heart rate, and status of hydration and perfusion; taking and recording of vital signs; a review of all systems (neuro, cardiovascular, pulmonary, gastrointestinal, genitourinary; and noting of all IV, tubes, drains, and hemodynamic monitoring.
2. Review all records, including patient's chart, diagnosis, treatment, and nurses notes.
3. Document each patient assessment using the SOAP method to include age and gender, presenting problem or chief complaint, past medical history, assessment findings, treatment plan, and a description of each medication being administered which includes name, class, mechanism of action, dose, and route of administration.
4. Observe age-specific reactions to injury/illness and responses to health care personnel.
5. Observe age-specific parent-child interactions.
6. Demonstrate appropriate age-specific approaches to elicit and keep child's cooperation.

### Goals (The student should complete as many of these experiences as possible)

It is the goal of the paramedic fourth semester clinical rotation in the pediatric ICU to expose students to as many experiences as possible involving critically ill or injured children. These may include but are not limited to:

1. Assess and manage pediatric patients with common illnesses found in the critical care setting, including acute asthma, meningitis, croup, epiglottitis, bronchiolitis, and sepsis.
2. After observation and instruction, draw blood samples via venipuncture or existing IV lines
3. Demonstrate knowledge of equipment, procedures, and sites for vascular access in children
4. Perform peripheral IV insertion.
5. Prepare and administer medications as directed
6. Observe effects of medications administered.
7. Insert nasogastric and orogastric tubes.
8. Acquire and interpret ECG rhythms
9. Assist in ambulating patients from bed to chair, lifting and turning patients, and with activities of daily living.
10. Assist in cases of cardiac arrest as directed including performing CPR, managing airway, assisting with endotracheal intubation, and defibrillation.
11. Operate oxygen delivery equipment and give oxygen
12. Review mechanical ventilation equipment, noting various settings.
13. Maintain airway in unconscious patients using positioning, oral airways, and suctioning.
14. Perform aseptic endotracheal or orotracheal suctioning
15. Observe and assist in set-up and maintenance of IV infusion pumps.

### Competency Checks

During this course, the student must complete the following hospital competency checks:  
Medical Director Evaluation/Competency Check

### Patient Contacts

During third and fourth semester clinical rotations, the student must document contact with the following types of patients.

Chest pain 10; Non-traumatic AMS/neuro deficit 5; Vehicular Trauma 6; Acute Abdomen 2; Cardiac Arrest 1; Hypoglycemia 1; Hyperglycemia 1; Adult breathing difficulty 8; Pediatric breathing difficulty 4; Non-vehicular trauma 6; Vaginal delivery 1; Toxicologic/Poisoning 4; Behavioral 2  
Newborns 3; Infants (0 to 1 years) 3; Toddlers (1 to 3 years) 3; Preschoolers (4 to 5 years) 3; School age (6 to 12 years) 3; Adolescents (13 to 17 years) 3; Adults (18 to 60 years) 10; Older adults (> 60 years) 8

<b>PRECEPTOR'S EVALUATION OF STUDENT</b>			
<b>AFFECTIVE OBJECTIVES</b>			
<b>Does the student display the following personal behaviors required of an entry-level paramedic?</b>			
INTEGRITY: Consistent honesty; being able to be trusted with the property of others; being able to be trusted with confidential information; complete and accurate documentation of patient care and learning activities	YES	NO	NBE
EMPATHY: Compassion for others; responding appropriately to patient and family member emotions; demonstrating respect for others; demonstrating a calm, compassionate, helpful demeanor; being supportive and reassuring	YES	NO	NBE
SELF-MOTIVATION: Taking initiative to complete assignments or to improve; taking on or following through on tasks without constant supervision; showing enthusiasm; constantly striving for excellence; accepting feedback positively; taking advantage of learning opportunities	YES	NO	NBE
APPEARANCE/PERSONAL HYGIENE: Complying with clinical dress code; practicing good personal hygiene and grooming	YES	NO	NBE
SELF-CONFIDENCE: Demonstrating ability to trust personal judgment; demonstrating awareness of strengths and limitations; exercising good judgment	YES	NO	NBE
COMMUNICATIONS: Speaking clearly; writing clearly; listening actively; adjusting communications strategies to various situations	YES	NO	NBE
TIME MANAGEMENT: Being consistently punctual; Completing work on time	YES	NO	NBE
TEAMWORK AND DIPLOMACY: Placing team success above self; not undermining team; helping, supporting other team members; showing respect; remaining flexible and open to change; communicating with others to resolve problems	YES	NO	NBE
RESPECT: Being polite to others; not using derogatory or demeaning terms; behaving in a manner that brings credit to the profession	YES	NO	NBE
PATIENT ADVOCACY: Not allowing personal bias to interfere with care; placing patient need above self interest; protecting and respecting patient confidentiality and dignity	YES	NO	NBE
CAREFUL SERVICE DELIVERY: Developing and maintaining mastery of knowledge and skills; demonstrating safe, careful, complete attention to duties; following orders and instructions	YES	NO	NBE
PRECEPTOR COMMENTS (All "NOs" require comment including suggestions for improvement)			
STUDENT COMMENTS (All "NOs" require comment including student's planned actions for improvement)			

NBE = No basis for evaluation

## PRECEPTOR'S EVALUATION OF STUDENT

### COGNITIVE AND PSYCHOMOTOR OBJECTIVES

Does the student display the following knowledge and skills required of an entry-level paramedic?

OCCUPATIONAL HEALTH AND SAFETY: Displaying safety consciousness with patients, self, other personnel, equipment; compliance with infection control principles, including appropriate use of standard precautions and aseptic technique; using proper body mechanics when handling patients and equipment; demonstrating understanding of psychological hazards of emergency/critical care environments and of techniques for stress reduction and management	YES	NO	NBE
VASCULAR ACCESS: Ability to safely and effectively access the venous circulation of patients from all age groups.	YES	NO	NBE
MEDICATION ADMINISTRATION: Ability to safely and effectively give medications by the intravenous push, intravenous continuous infusion, intramuscular, subcutaneous, and nebulized routes.	YES	NO	NBE
BAG VALVE MASK VENTILATION: Safely and effectively ventilating unintubated patients from all age groups	YES	NO	NBE
ENDOTRACHEAL INTUBATION: Ability to safely and effectively perform endotracheal intubation.	YES	NO	NBE
PATIENT ASSESSMENT AND MANAGEMENT: Performing an assessment, developing a differential diagnosis, formulating, and implementing a treatment plan demonstrating the knowledge base and professional judgment required of an EMT-Intermediate	YES	NO	NBE
WRITTEN RECORDKEEPING: Documenting patient information, observations, and occurrences accurately, completely, concisely, and legibly	YES	NO	NBE
VERBAL COMMUNICATIONS: Communicating pertinent information understandably, completely, concisely, and accurately	YES	NO	NBE
ECG ACQUISITION AND INTERPRETATION: Demonstrating ability to safely and effectively acquire and interpret both a monitoring lead and 12-lead ECG.	YES	NO	NBE

PRECEPTOR COMMENTS: (All "NOs" require comment including suggestions for improvement)

STUDENT COMMENTS: (All "NOs" require comment including student's planned actions for improvement)

Preceptor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Preceptor's Printed Name: \_\_\_\_\_

**Please call us at 254-298-8562 if you wish to discuss this student's performance directly with a faculty member.**

## Performance Record

Interventions		Conditions	Gender/Age
Vital Signs	CPR	Chest Pain	Male
Assessments	Oxygen	Breathing Difficulty (Adult)	Female
Breath Sounds	Spinal Board/KED	Breathing Difficulty (Pediatric)	< 1 year
Oral Airway	BVM	Vehicular Trauma	1-2
Nasal Airway	Bandage & Splint	Non-Vehicular Trauma	3-4
Oral Suction	Traction Splint	Non-trauma AMS/neuro deficit	5-9
Nebulizer	PASG	Acute Abdomen	10-19
Oral Meds	SAED	Hypoglycemia	20-29
Epi Autoinjector	IV Therapy	Hyperglycemia	30-39
Blood glucose	IV Push Drugs	Toxicologic/Poisoning	40-49
Oral Intubation	IV Piggyback	Behavioral	50-59
Nasal Intubation	IM Drugs	Vaginal Delivery	60-69
NG Tube	SC Drugs	Cardiac Arrest	70-79
Surgical Airway	Chest Decompress		80-89
12 Lead ECG	Defib/Cardiovert		90-99
Monitoring Lead	External Pacing		> 100

### Student Evaluation of Clinical Site

Did the staff make you feel welcome and include you in daily activities and patient care?	YES	NO
Did this site provide you with adequate patient contacts and other experiences to help you complete to objective for the rotation?	YES	NO

### Student Evaluation of Preceptor

Did your preceptor make you feel welcome and include you in patient care activities and non-clinical activities?	YES	NO
Did the preceptor assist your learning by building on your knowledge and relating it to patient care?	YES	NO

COMMENTS: (All "NOs" require comment including suggestions for improvement)

The information in this document and all documents submitted with it is an accurate record of my activities during this clinical assignment:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date