



EMT and Paramedic Student Field Training Program

**Guidelines and Orientation Information
Application and Authorization Forms**

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Introduction

Welcome to AMR. You will be participating in the Student Field Training Program. You will be assigned to ride with an AMR field crew, one of whom will be your preceptor. The crew will be responsible for providing your training in an environment that is safe and conducive to learning. The crew will address different topics and have different expectations depending on your goals. Your field education and experience will give you a solid foundation from which you can grow both personally and professionally.

Types of Students

AMR provides field training for a variety of people. This document covers the Student Field Training Program for EMTs and Paramedics. People who do not meet this designation should refer to the Ride-Along Observer Program document.

The following students will be allowed to train with an AMR crew:

- EMT-Basic
- EMT-Intermediate 99
- Advanced EMT
- Paramedic.

The student must be enrolled at a training institution (hereinafter “the institution”). A representative of the institution must confirm that the student is covered under Worker’s Compensation Insurance and Professional Liability Insurance.

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Student Authorizations

Prior to the student being allowed to schedule field training shifts, the AMR FTO Program Supervisor must receive a digital copy of a signed original of the following documents:

- Application
- Agreement and Release of Claims
- Confidentiality Commitment.

In addition, students must provide documentation proving the following:

All Students

- At least 18 years old

EMT-Basic Students

- Hepatitis B vaccinations (started, completed or declined)
- CPR training
- Completion of OSHA bloodborne pathogens and airborne pathogens courses
- Outfitted with an OSHA-approved N95 respirator.

EMT-Intermediate 99, Advanced EMT and Paramedic Students

- All requirements listed for EMT-Basic students
- EMT certification
- Completion of ACLS Training.

Student Field Training Program Orientation

AMR requires that the student participate in a program orientation session. The institution representative must schedule the session with the AMR FTO Program Supervisor. The session can be held at the institution or at AMR.

The orientation session is an hour long and comprises the following:

- Field training expectations
- Dress code, ethics, personal belongings
- Completion of the Field Training Program application
- Explanation of shift schedules (primarily 12-hour Flex shifts)
- Managing cancellations and rescheduling.

Following the session, the student will state their preferences, including:

- Number of field training hours needed
- Dates the student would be available for shifts
- Times the student would like to start the shifts.

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Scheduling Field Training Shifts

Field training shift scheduling will be coordinated by the AMR FTO Program Supervisor with the student and the institution representative. AMR will determine the placement of all students.

Once approved, a schedule of the assigned shift or shifts will be sent to the student. The student must present the schedule to the preceptor at the beginning of each shift to confirm that the student is authorized to be on that shift.

Attendance

The student is expected to attend each scheduled shift. The student must arrive 15 minutes early to help the crew prepare the ambulance and equipment.

The student should be absent only for valid reasons set forth by the student's institution. If the student cannot attend a shift, or if they are going to arrive late, the student must notify the AMR On-Duty Supervisor and the AMR FTO Program Supervisor by phone as soon as possible. A voicemail message is sufficient. They must also notify their institution representative. If arriving late, the student must understand that the assigned crew may not be able to wait for them and that they may be required to reschedule the shift.

Rescheduling Shifts

To reschedule a shift, the student must coordinate with the AMR FTO Program Supervisor and their institution representative. Rescheduling is subject to availability of open shifts. Should the student be rescheduling excessively, their institution representative will be notified. The student risks being removed from the program.

What You Should Expect from AMR

While in the field, you should be accepted as a member of the crew and be asked to participate in the crew activities. You should be respected and heard. You should be safe at all times. You should receive the best possible education and experience. Your preceptor should provide unbiased coaching and counseling regarding your performance and your professional behavior and offer suggestions for improvement. If your institution requires written evaluation forms, they will be completed and discussed with you.

What AMR Expects from You

We at AMR believe that field training with our company should be a valuable educational experience, not only in the areas of medical knowledge and skills, but also in areas of scene management, interpersonal communication, and personal growth and development. We expect that the student will adhere to the policies established by their institution, as well as AMR's policies outlined in this packet.

While in the field, you are responsible for:

- Following your institution's policies and procedures.
- Following AMR's field training program policies and procedures.
- Treating each patient you encounter with dignity and respect.
- Providing the best patient care possible.
- Serving as a patient advocate.
- Maintaining high standards of professional behavior.

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- Being part of a team effort.
- Always working within your scope of practice.
- Ensuring your safety and the safety of your crew and patient.

Dress Code

The student must look professional in appearance. The following dress items are permitted:

- White or light blue button-down shirt or the training shirt issued by your institution. Blouses and polo shirts are allowed.
 - A logo or patch from the institution may be displayed. No other logos, patches, names or designs are permitted.
- Dark blue pants. No jeans. No shorts.
- Polished black shoes or boots or clean black tennis shoes. No sandals or high heels.
- Plain jacket or coat. No logos, patches, names or designs are permitted.
- A nametag must be worn during the shift.
- Note: students who are not AMR field employees are not permitted to wear an AMR uniform or anything that designates them as an AMR employee.

Grooming

In addition to being clean and neatly groomed, the student must adhere to the following health and safety requirements:

- Hair should be of a natural color and, if long, secured away from the face.
- No piercings should be visible other than earrings, with only one earring per ear and no hoops or dangling earrings.
- Men must be clean shaven or have a mustache or goatee that allows an N95 mask to fit tightly. Full beards are not permitted.
- No heavy-scented perfumes or colognes are permitted.

Meals

OSHA guidelines stipulate that eating or drinking or storing food (or applying lip balm, contacts, or make-up) in the patient compartment of the ambulance is not allowed. If the student wishes to bring food, it should be sealed in a small container that can be stored easily in a designated cabinet. Otherwise, students should be prepared to purchase meals.

Personal Belongings

The student may bring personal items, including books and study materials, as long as they can be easily stored in the ambulance.

Special Concerns

AMR reserves the right to discontinue a student's participation in the program should they display unprofessional behavior. This includes but is not limited to the following situations:

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- Telephone use
Telephone use should be limited to incoming emergency calls only.
- Drugs and Alcohol
Arriving for a shift under the influence of drugs or alcohol is strictly **prohibited**. An intoxicated student will be asked to leave AMR property immediately. The student's institution representative will be notified.
- Workplace Violence
AMR strives to maintain a violence-free workplace. If a physical altercation occurs in the field, the student should not intervene and should seek safety. A student who acts in a violent, hostile, or threatening manner will be immediately suspended from the shift and will be asked to leave AMR property. At AMR's discretion, local law enforcement may be contacted.
- Weapons
Firearms, explosives, knives or other weapons will not be permitted in the ambulance or on AMR property. Trauma shears are permitted.
- Personal Conduct
The conduct of a student reflects on the student, AMR, other responding agencies, and the student's institution. As a result, professional conduct by the student is of utmost importance. The student must always behave professionally, including showing respect for everyone and refraining from making inappropriate remarks or gestures.
- Smoking
Smoking (or loud conversation) is prohibited in medical facility corridors or patient areas. Follow facility policies regarding designated smoking areas. Smoking or the use of smokeless tobacco in AMR ambulances or at AMR facilities is strictly prohibited.

Patient Care Professionalism

Patients must be treated with dignity and respect at all times. Consider the following:

- Do not be afraid to talk with a patient or family members. Except in unusual circumstances, most people are pleased by the attention and are eager to share their specific problems with an interested professional. Adopt a listening attitude.
- Never argue with a patient or family member.
- Specific questions from a patient or family member regarding the patient's medical status should always be referred to the preceptor.
- Never "drill" a patient or family member for information. If unable to obtain vital information in an emergency, request the preceptor's help.

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- Never handle a patient roughly unless failing to do so would endanger their health or safety. Let trained medical personnel manage difficult patients and provide assistance only when requested. Do not put yourself in harm's way.
- Patients have the right to refuse medical treatment or transport. Do not attempt to force them against their will.
- Do not initiate any phase of patient care unless so directed by the preceptor. Furthermore, the care must be directly observed by the preceptor.

Patient Confidentiality

A patient has the right to complete privacy regarding their health and healthcare. The student must always respect this right.

- It is the policy of AMR that any information acquired about any patient will not be discussed with anyone not directly associated with the call. This includes **any** information that can be used to identify the patient, their condition, treatment, or medical history.
- Do not record any aspect of the patient or patient care with a cellphone, camera or other audio or video recording device.
- No patient care documentation, in any form, is allowed to be removed from AMR. Under no circumstances will the patient care report be copied for the student or their institution. The student may write a brief narrative of the call as required by their institution so long as it does not breach the above-mentioned confidentiality rules.
- A student will be immediately dismissed from the shift upon a breach or probable breach of patient confidentiality. Their institution representative will be notified of the violation. They will be ineligible for further shifts.

Preceptor-Student Professionalism

AMR strives to ensure the best possible environment for a positive interaction between the preceptor and the student. With this in mind:

- The student should maintain a cooperative, eager-to-learn attitude at all times. To a great extent, the quality of a student's field experience is dependent on their degree of enthusiasm.
- Questions about the care provided to a patient are encouraged. However, the student must be mindful of the appropriate time and place for such questions to be discussed, which is usually after the call.
- The student must not argue with the preceptor in front of the patient, family, bystanders or medical personnel. Should a disagreement arise that is not readily resolved, the student should contact their institution representative and the AMR FTO Program Supervisor as soon as conveniently possible.

Crew Proximity

It is imperative that the student remain near their assigned ambulance and crew or in an assigned area. The student must notify the crew when they intend to be elsewhere. At the end of a shift, the student must confirm with the preceptor that they may leave.

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Equipment Familiarization

The student is expected to become familiar with the ambulance and all of the equipment that they will be using. They should be actively involved in checking out the ambulance and equipment at the start of the shift.

Riding in the Ambulance

At no time will the student function as the second crewmember. The student is not allowed to sit in the cab of the ambulance unless the preceptor directs them to do so for their safety (e.g., while transporting a violent or an infectious patient). The student will sit in the jump seat located at the head of the stretcher unless attending to a patient requiring emergency care. **The student will wear their seat belt while the ambulance is in motion unless they are actively involved in emergency patient care.** A student who fails to wear their seatbelt may be immediately suspended from the shift.

The student will not operate the radio, with the exception of giving a patient care report to a receiving facility at the direction of the preceptor.

Infection Control

The student is responsible for their personal safety and health. Body Substance isolation (BSI) and the use of Personal Protective Equipment (PPE) will be standard practice when handling equipment and caring for patients. Situations indicating PPE include, but are not limited to:

- Performing or observing invasive procedures.
- Contact with blood or other potentially infectious materials (OPIM).
- Handling any item that may have been contaminated with blood or OPIM.
- Circumstances that may lead to exposure to a contagious or infectious disease.

Personal Protective Equipment (PPE)

Schools should provide students with N95 for their rides with AMR.

PPE is provided on each unit, including:

- Nitrile gloves
- Eye protection
- Respiratory protection (N95 masks and surgical masks)
- Gowns
- Shoe covers
- Head covers.

Note: If the crew is caring for a patient with a highly contagious airborne illness (e.g., Covid, TB), the student may be directed to sit in the front passenger seat.

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Contaminated Needles (Sharps)

Contaminated needles and IV catheters are a significant health hazard. To avoid being stuck by a needle and becoming infected, the following procedures must be adhered to rigorously:

- If not formally trained in IV access procedures, the student will not handle sharps under any circumstances.
- Immediately place all used needles and catheters in the appropriate puncture resistant biohazard container.
- Never leave a needle or catheter lying anywhere in the ambulance.
- Do not recap needles or catheters.
- Exposures or potential exposures must be reported immediately to the preceptor, who will, in turn, notify the AMR On-Duty Supervisor and the AMR FTO Program Supervisor, who will notify the institution representative.

Student Field Training Program Documentation

Appropriate documentation of calls and training hours will be reviewed and signed by the preceptor at the end of each shift. It is the responsibility of the student to assure that all required paperwork and evaluations are completed. AMR will not forward field training evaluation forms to preceptors.

Questions and Comments

AMR hopes that the student will benefit from their field training experience and that they will find their time in the field both fun and educational. After their field training, should they have any questions or comments, the student may contact AMR.



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Application

Student Name: Last _____ First _____ MI _____ Date: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone: _____

To Be Completed by the Training Institution

Training Institution Name: _____

EMT or Paramedic Course Location: _____

Training Institution Representative: _____

Title: _____ Phone Number: _____

Select the most applicable level of student's training:

- ☒ EMT-Basic Student ☐ Advanced EMT Student
☐ EMT-Intermediate 99 Student ☐ Paramedic

Student has the following:

- _____ Started HbV vaccination series (on file with Training Institution)
_____ Completed T.B. Mantoux Test (on file with Training Institution)
_____ Outfitted with an OSHA-approved N95 respirator (on file with Training Institution)
_____ Current CPR Certification Card

Student is covered by training institution's

- _____ Worker's Compensation Insurance (on file with AMR)
_____ Professional Liability Insurance (on file with AMR)

Representative Signature: _____ Date: _____

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To Be Completed by the Student

Student Initials:	I understand that AMR may have latex on each ambulance. I do not have a known or suspected latex allergy.
Student Initials:	I understand that I must bring my own outfitted with an OSHA-approved N95 respirator if I was not fit tested with the same model provided by AMR.

I have read this document and have had the opportunity to discuss all questions or concerns with the AMR FTO Program Supervisor. I also confirm that I will be given a signed copy.

Student Signature: _____ Date: _____

To Be Completed by the AMR FTO Program Supervisor

I have presented this document to the student and have discussed all their questions and concerns. I intend to give the student a signed copy.

 _____ AMR FTO Program Supervisor Signature	James Buchanan _____ Printed name	September 29, 2023 _____ Date
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Shift Assignment for:

- ☐ EMT-Basic Student
- ☐ EMT-Intermediate 99 Student
- ☐ Advanced EMT Student

Date: _____ Start Time: _____ End Time: _____

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Exhibit A Agreement and Release of Claims

Student is enrolled in a course of study at _____ (name of school) designed to enable Student to become a licensed/certified Emergency Medical Technician, Emergency Medical Technician-Paramedic or other similar pre-hospital health care provider. As part of the curriculum, Student has enrolled in the Clinical Experience, which is offered through the School, with AMR's assistance. The Clinical Experience involves: 1) Student's performing acquired pre-hospital skills alongside AMR's personnel; and, 2) accompanying and observing AMR's personnel providing emergency and non-emergency ambulance transport, care and related services.

Student has asked to participate in Clinical Experience knowing that participation will require Student to accompany AMR personnel in dangerous and potentially life-threatening situations. Student realizes that AMR could not, and would not, allow Student to accompany its personnel without his/her agreement to: (i) release AMR from any and all claims for injury or death which may result from Student's participation in the program; (ii) assume the risk of death or injury associated with the Clinical Experience; (iii) agree to read, understand and follow AMR's policies, procedures and guidelines; (iv) act in a professional and respectable manner at all times; and follow the instruction/direction of AMR personnel with respect to patient care, demeanor, safety, use of personal protective devices, scene control, etc.

Student understands that he or she is exposing himself or herself to certain risks inherent in the activities associated with the Clinical Experience. Student hereby represents that he or she **AGREES TO ASSUME THE RISKS INHERENT IN THE ACTIVITY**. These risks include, but are not limited to, being hurt or injured: (1) by broken glass (or other scene hazards) including various cuts about the head, face, eyes, hands, legs, and torso; (2) by exposure to tetanus or contagious diseases such as the Hepatitis B virus and the Human Immunodeficiency Virus ("HIV"); (3) injury due to gurney lifts and or drops; (4) injury from slip and fall type incidents; (5) various strains and/or sprains to one and/or all muscle groups; (6) risks associated with emergency vehicle operation; and (7) risks at the scene of emergencies including assault and battery.

In consideration of AMR's agreement to provide the Clinical Experience to Student, Student agrees to release and forever discharge AMR and its agents, employees, affiliates, parent corporation, successors and assigns of and from all claims, demands, suits, injuries or damages of any kind arising in any way out of the participation in this program.

Student further agrees to: (i) follow AMR's policies, procedures and work rules; (ii) follow AMR's instruction and direction with respect to patient care, safety, personal protection; and, abide by AMR's rules and direction. Student understands that failure to follow AMR's direction may result, in AMR's sole discretion, in his/her expulsion from the Clinical Experience program.

The School shall require its students to complete a Criminal Offenders Record Information ("CORI") check. By virtue of this agreement, the School assures AMR that it found no information that would, in accordance with the provisions of state EMS regulations, preclude the Student from the duties of an EMS provider.

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The relationship of a field training Student and AMR is that of a student being provided an educational experience by AMR and such activity shall in no way be construed as creating any other relationship including an employment relationship. The Student shall receive no compensation from AMR for activities during the field training.

AMR has made available to the Student a copy of its Code of Conduct, Anti-kickback policies and other compliance policies, as may be changed from time-to-time, at AMR’s web site, located at: www.amr.net, and the Student acknowledges receipt of such documents. AMR warrants that its personnel shall comply with AMR’s compliance policies, including training related to the Anti-kickback Statute.

The Student represents and certifies that he/she has not been convicted of any conduct identified on Schedule “A”. The Student further represents and certifies that he/she is not ineligible to participate in Federal health care programs or in any other state or federal government payment program, as provided on Schedule A or otherwise. The Student understands that if DHHS or OIG excludes he/she from participation in Federal health care programs, he/she party must notify the other party within 5 days of knowledge of such fact, and AMR may immediately terminate the Agreement.

Student certifies that he/she is at least eighteen (18) years old and is an adult with full legal authority to execute this release.

By Signing this Document You Acknowledge That You Have Been Advised That There Are Risks Inherent in this Type of Activity and Have Decided to Assume That Risk and Release AMR of and from All Liability. You Agree to Release AMR from Any Claims Associated with the Event and That You, Not AMR, Are Assuming Complete and Total Responsibility for Any and All Injuries, Damages or Losses That You May Suffer as a Result of Participating in the Clinical Experience Program.

I agree to all terms set forth above.

Student Signature

Printed Name

Date

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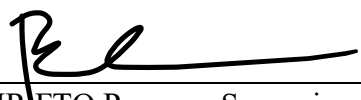
Confidentiality Commitment

- I understand and agree that I have the responsibility of maintaining strict confidentiality of any and all information shared with me, or acquired by me, as a result of my field training with American Medical Response.
- Any and all patient information, confidential information about an employee, physician, healthcare worker, or management and financial information regarding AMR that is made available to me during my training is for my professional use during the training only and may not be disseminated in any manner not specifically allowed for in this agreement.
- I understand that being allowed to train on an American Medical Response ambulance gives me access to private, personal, privileged, and/or confidential information that I would otherwise not have access to and understand that such privileged access establishes an even higher burden of responsibility for me to maintain the confidentiality of all information acquired by me during this training than I would have without any such privileged access.
- I understand that such information may be shared only as needed to properly perform the duties of my position during this training only. I further understand that this prohibition extends to any disclosure to colleagues, other students, family members, media, attorneys, family of a patient, or any other individual not specifically involved in the scope and performance of my duties as student on an AMR ambulance and not specifically required by law.
- I understand that a breach of confidentiality includes the dissemination of any information that, in any way, allows for the subsequent identification of a patient, employee, physician, or other individual protected by this agreement. This includes any circumstance, address, response information, or identifying information of any kind, or the release of any information that would allow another party to subsequently identify the protected person.
- I understand that unauthorized or indiscriminate disclosure of such confidential information is to be considered a breach of this agreement and may subject me to corrective action, administrative sanctions, civil and criminal penalties, and/or other forms of legal recourse.

Student Signature

Printed Name

Date



AMR FTO Program Supervisor
Signature

James Buchanan

Printed Name

September 29, 2023

Date