

**M A S S A C H U S E T T S**  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
DEPARTMENT OF PUBLIC HEALTH

**ADMINISTRATIVE REQUIREMENT MANUAL**

**EFFECTIVE DATE:** February 24, 2015    **AUTHORIZATION:** MK  
**TITLE:** Minimum Skill Requirements for Advanced EMT Training

**PURPOSE**

To define the minimum clinical and field internship skill performance requirements for Advanced Emergency Medical Technician (AEMT) students trained at Massachusetts Department of Public Health (Department)-accredited EMT training institutions. To define the administrative requirements of accredited EMT training institutions conducting Advanced EMT initial training programs.

**ELIGIBILITY TO PARTICIPATE IN CLINICAL AND FIELD INTERNSHIPS**

Only **AEMT students participating in a training program at a Department-accredited training institution** may participate in clinical and/or field internships. The Advanced EMT student must meet the following prerequisites: 1) maintain current Massachusetts, out-of-state, or National Registry of EMTs (NREMT) certification or licensure as an Emergency Medical Technician (EMT) at the EMT-Basic or EMT-Intermediate level; 2) maintain current card documenting successful completion of a course meeting, at a minimum, the standards established by the Committee on Cardiopulmonary Resuscitation and Emergency Cardiac Care of the American Heart Association in Basic Cardiac Life Support health care professional cardiopulmonary resuscitation; 3) successfully complete training prerequisites; and, 4) receive authorization from the Program Director to begin the internship.

Training prerequisites for the **clinical internship** include successful completion of didactic education, lab training, and all cognitive and psychomotor examinations for skill(s) to be performed. The training program must have a valid affiliation agreement with the clinical site(s) and ensure the training program, clinical site(s) and students are covered by malpractice insurance.

Training prerequisites for the **field internship** include successful completion of didactic education, lab training, all cognitive and psychomotor examinations, and clinical internship. The training program must have a valid affiliation agreement with the field internship site(s) and ensure that the training program, field site(s) and students are covered by malpractice insurance.

**PERFORMANCE STANDARDS**

AEMT students must perform the clinical and field skills listed below on live human patients unless otherwise noted. All skills documented must be performed successfully. Each AEMT student must successfully complete clinical and field skills in the presence of a qualified preceptor. During the field internship, the student must always serve as a third rider. The student is never part of the assigned two-person EMT crew. Only one student is allowed on the ALS ambulance at a time.

**DOCUMENTATION:**

Students must maintain records that document the skills performed and the time spent in the clinical and field internship. The appropriate clinical/field preceptors must verify and sign these records.

**Clinical Skill Log:**

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Clinical skill logs document the performance of individual skills. Original skill logs must be maintained by the training program and are subject to audit by the Department's Office of Emergency Medical Services (OEMS). The skill log must include the following information:

- Description of successfully performed skills (i.e., IV NS 18 ga. angio., Left forearm).
- Date the skill was successfully completed. There must be a corresponding date listed on the time log.
- Preceptor's signature and credential (RN, NP, PA, MD).

**Field Internship Patient Contact Report:**

During the field internship students must complete a patient contact report for each patient they assess and treat. Original patient contact reports must be maintained by the training program and are subject to audit by OEMS. The report must include the student's name, the date, a description of the patient, the mechanism of injury/chief complaint, all assessment findings, treatment plan, all skills performed by the student and a preceptor evaluation, signature and current state EMT number. The patient contact report and preceptor evaluation are developed by the accredited training institution. The accredited training institution may also use any format of patient care report as their patient contact report as long as it includes all elements listed above.

**Time Log:**

The time log must document the total number of hours spent in clinical and field internship. Original time logs must be maintained by the training program and are subject to audit by OEMS. Time logs must include the following information:

- Name of the clinical department and hospital or the name of the ambulance service for each rotation.
- Date of the rotation.
- Start and completion times of the clinical or field internship rotation.
- Preceptor's signature and credential (RN, NP, PA, MD, Paramedic), and comments. Preceptor's current state EMT certification number, at the Advanced EMT or paramedic level, is required on field internship documentation.

**MINIMUM SKILL REQUIREMENTS FOR THE CLINICAL PRACTICUM:**

<u>Clinical Skills</u>	<u>OEMS Requirement</u>
Patient Assessment - Adult (age 17 or older)	25
Patient Assessment - Pediatric (age 16 or younger)	10
Airway Management*	20
Vascular Access	25
Medication Administration	15

The Program Director and/or Medical Director must verify a student's competency in the use of the skills listed below in a clinical or lab setting. Competency includes the understanding of indications, contraindications and competency in performing the skills. A written, signed & dated competency statement must be included with the student's clinical course completion documentation.

- Insertion of supraglottic airways

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- Use of end-tidal carbon dioxide capnography monitoring to confirm airway placement
- Establishing and maintaining intraosseous access (adult and pediatric patients)
- Tracheobronchial suctioning of an already intubated patient
- Administration of sublingual nitroglycerine to a patient experiencing chest pain of suspected ischemic origin
- Administration of glucagon to a hypoglycemic patient
- Administration of intravenous dextrose to a hypoglycemic patient
- Administration of inhaled beta agonists to a patient experiencing difficulty breathing and wheezing
- Administration of a narcotic antagonist to a patient suspected of narcotic overdose
- Assessment of blood glucose levels

The below skills are part of the National EMS Education Standards for the AEMT and as such competency must be ensured for obtaining NREMT certification. However, the training program must make clear to the students that these items are outside of the scope for an AEMT in Massachusetts. The competency of these skills may be assessed in a lab setting.

- Administering nitrous oxide for pain management
- Use of automated transport ventilator

\* **Airway Management:** This skill category requires successful performance of a minimum of 20 airway management skills, with 100% success rate in their last 10 attempts at airway management across all age categories (neonate, infant, pediatric and adult). Airway management may be accomplished utilizing any combination of live patients, high-fidelity simulations, low-fidelity simulations, or cadaver labs. It is recommended that the majority of attempts be accomplished by using either live patients, realistic simulation labs, or both.

The AEMT student must establish airway competency by mastering the following:

1. Adequately assessing, establishing, maintaining and monitoring the airway throughout patient contact;
2. Performing basic airway management, including the use of basic maneuvers and airway adjuncts;
3. Preparing and performing advanced airway management;
4. Demonstrating psychomotor skill proficiency related to all levels of airway management;
5. Performing airway management in various environments, including laboratory, clinical and field;
6. Verification of airway placement to be used includes: capnography and at least two of the following; auscultation, colorimetric reading and other clinical signs; and
7. Demonstration of critical thinking and clinical judgment regarding total airway management decision making.

The AEMT student must be successful in **any** combination of live patients, high-definition fidelity simulations, low-fidelity simulations, **or** cadaver labs in all age brackets (neonate, infant, pediatric, and adults). High-definition simulation, defined by Sim man, METI man, etc., is highly recommended but optional. Low-fidelity simulation is defined by traditional simulation manikin heads. AEMT students must have exposure to diverse environments of learning, including but not limited to hospital units; out-of-hospital settings (e.g., ambulance or field environments); and in laboratory settings (e.g. floor, varied noise levels, and varied lighting conditions).

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As with all other required skills, terminal competency in airway management must be defined by the AEMT-level accredited training institution, and validated for each student by the institution's Medical Director.

**MINIMUM REQUIREMENTS FOR THE FIELD INTERNSHIP:**

AEMT students must complete a field internship consisting of a minimum 30 ALS patient contacts, and must be documented as the team leader as appropriate for the AEMT scope of practice for a minimum of 10 of those patient contacts.

Completion of these minimum requirements does not constitute successful completion of the field internship. The accredited training institution is responsible for reviewing all field internship documentation, including patient contact reports and preceptor evaluations, to determine if the student has met the accredited training institution's requirements for successful completion of the field internship component of the program. The accredited training institution may require that the student do additional field internship hours and/or additional ALS patient contacts in order to successfully complete the field internship.

The patient contacts are documented on the field internship contact report, which is developed by the accredited training institution. The accredited training institution may also use any format of patient care report as their patient contact report as long as it includes all of the required elements.

During the field internship, a student must perform a patient assessment for each patient contact. Other skills to be performed are vascular therapy, airway management, and medication administration. Some students may not have the opportunity to perform each type of skill, even though they successfully complete their field internship. When this happens, it is expected to be an exception and not a common occurrence. The accredited training institution must ensure that all students are exposed to a diverse patient population and that students have opportunities to perform as many of the AEMT skills as possible. Accredited training institutions seeking renewal of accreditation must demonstrate that they can provide their students adequate field internship resources.

If a student does not perform a category of skill in the field (i.e., no medication administration performed), that student must be re-evaluated in that skill by the accredited training institution's medical director after the field internship is complete. The accredited training institution may develop its own skill sheet to use in the evaluation of the students, or the evaluation may be documented on the appropriate skill testing form from the National Registry AEMT psychomotor examination. This form must be kept on file and is subject to audit by the Department.

**MINIMUM REQUIREMENTS FOR THE FIELD PRECEPTOR:**

During the field internship, Advanced EMT students must be precepted by a certified/licensed AEMT or Paramedic with greater than two years of experience. The AEMT preceptor must have current certification or licensure (certified or licensed) as an AEMT or a Paramedic in the state where the field internship is performed. The preceptor must observe, evaluate, and document each skill.

Each AEMT or Paramedic acting as a preceptor for the field internship of an AEMT must have a documented orientation to the scope of practice of the AEMT, and what skills the AEMT may perform during their field



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internship. This orientation and documentation of completion is to be created and maintained by the accredited training institution and is subject to audit by the Department.