

**Peoria Area EMS System**  
**EMT-Intermediate to Paramedic Student Field Internship**  
**END OF PHASE THREE: FINAL STATUS REPORT**

Complete this report **PRIOR** to the final meeting with the **PAEMS** Medical Director. Retain with your internship records.

Student Name (print): \_\_\_\_\_ Medical Director Meeting Date: \_\_\_\_\_

Course Start Date: \_\_\_\_\_ Course End Date (didactic): \_\_\_\_\_ Internship End Date: \_\_\_\_\_

Course Coordinator (print): \_\_\_\_\_ Course Location: \_\_\_\_\_

| Field Clinical Site         | Hours to Date<br>(minimum 300 hours) | Breakdown    |
|-----------------------------|--------------------------------------|--------------|
| Advanced Medical Transport  |                                      | _____ %      |
| East Peoria Fire Department |                                      | _____ %      |
| Fulton County EMA           |                                      | _____ %      |
| Morton Fire Department      |                                      | _____ %      |
| Washington Fire Department  |                                      | _____ %      |
| <b>TOTAL HOURS</b>          |                                      | <b>100 %</b> |

| Hospital Clinical  | Completion Date |
|--|-----------------|
| ED: 60 hours.  |                 |
| OR: Minimum 8 hours and 3 successful intubations         |                 |
| Pulmonary: 8 hours (ICU 4 hrs. and general floor 4 hrs.) |                 |
| CCU: 8 hours   |                 |
| MICU: 8 hours  |                 |
| Labor & Delivery: 16 hours (must witness 3 live births)  |                 |
| Pediatric Unit: 8 hours                                  |                 |

| Skills Performed                                  | Totals  |  |                | Call Types            | Totals | Certifications<br>(attach copies) |
|---|---|--|----------------|-----------------------|--------|-----------------------------------|
| Endotracheal Intubation<br>(min. 3 successful)    | OR: Success vs Attempts<br>_____/_____<br>_____ / _____               | Field: Success vs Attempts<br>_____/_____<br>_____ / _____ |                | Abdominal             |        | CPR                               |
| IV Therapy - ED<br>(15 min. and ≥ 65% Success)    | Success: _____  | Attempts: _____  | Percent: _____ | Altered LOC           |        | ACLS                              |
| IV Therapy - FIELD<br>(10 min. and ≥ 65% Success) | Success: _____  | Attempts: _____  | Percent: _____ | Behavioral            |        | PALS / PEPP                       |
| Drug Admin/Meds<br>15 min. (10-IV)                | Total Meds: _____   | Total IV Meds: _____                                       |                | Cardiac / Respiratory |        | ITLS / PHTLS                      |
| Participate In Care                               | Minimum 40 Adult Patients<br># Required (30 ALS, 10 BLS, 5 Pediatric) |  |                | DAS                   |        |                                   |
| FIELD   | ALS = _____   | BLS = _____  | PEDS = _____   | Medical- Other        |        | Protocol Exam<br>Test #1          |
| Team Leader<br>(min. 90% in Phase 3)              | ALS = _____   | BLS = _____  | Percent _____  | OB/GYN                |        |                                   |
| # Call-Ins  | Telemetry: _____  |  | MERCI: _____   | OD/Poison             |        | Protocol Exam<br>Test #2          |
| <b>Other Skills</b>                               |   |  |                | Pediatrics            |        |                                   |
| Arrest Management                                 | EKG Monitoring  |  |                | Refusals              |        | Protocol Exam<br>Test #3          |
| Capnography                                       | External Jugular Access   |  |                | Seizures              |        |                                   |
| Cardioversion                                     | Intraosseous Access   |  |                | Trauma - ALS          |        |                                   |
| CPAP  | Orogastric (OG) Tube  |  |                | Trauma - BLS          |        |                                   |
| Defibrillation                                    | Transcutaneous Pacing   |  |                | <b>Total Calls</b>    |        |                                   |

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

Course Coordinator Signature: \_\_\_\_\_

EMS System Coordinator Signature: \_\_\_\_\_

Medical Director Signature: \_\_\_\_\_