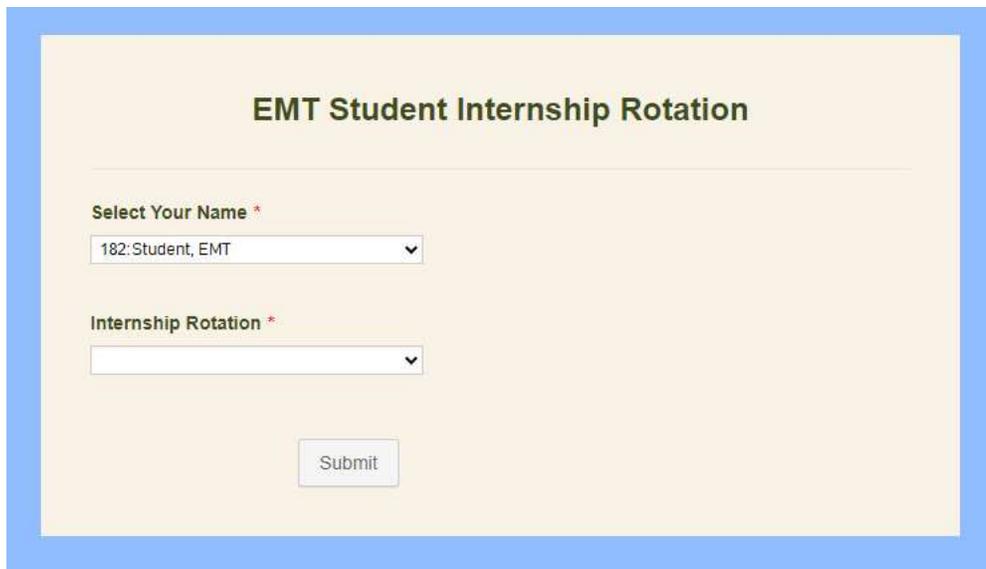# MCFRS EMT Training – Internship Rotation – Patient Assessment

Background:

As part of your internship rotation packet, you should complete a Patient Assessment submission with each eMEDS report. This is just the Patient Assessment submission only, not eMEDS. Refer to **EMT Class Resource Page** for eMEDS submission process.

Process:

- You can submit the form on your phone, or any internet browser, and it must be signed by your FTC (Field Training Coordinator) or approved designee.

- Go to EMT Student Internship Rotation (https://mcfrs.jotform.com/232055813424955). This link can also be found on **EMT Class Resource Page**

- From the first drop down option, select your class number and name (*XXX: last name, first name*) to proceed. If you cannot find your name, reach out to your lead instructor.

- Next Select the appropriate Internship Rotation, in this case it will be Patient Assessment.

- This action will open the rest of the JotForm to be filled. Your next step is to fill out unit number, FTC and date of the assessment.

MCFRS EMT Training – Internship Rotation – Patient Assessment

EMS unit Assigned to (i.e. A727) *

A742

FTC Name *

Field | Coordinator
First Name | Last Name

Date of Internship EMS Response *

10-16-2023
Date

- Your next option of patient encounter location will either be "Field" or "Classroom". If you select field, you will need to enter the "Incident #". Ensure that your incident # matches that of the eMEDS report that is submitted separate. If you choose Classroom, make sure you select the appropriate scenario, and it will auto-populate an eMEDS number for you.

Patient encounter location *
- ◉ Field
- ○ Classroom

Incident # *

F2300012345

OR

Patient encounter location *
- ○ Field
- ◉ Classroom

Select the scenario *

Asthma

Use the below incident number to complete your eMeds report

900122

- In the last section your FTC will evaluate your performance. If marked as "Needs Remedial" you must review material, study, and complete additional Patient Assessments. Once the remedial is completed, complete a new JotForm mark "Satisfactory Remedial" for the specific incident. FTC will also leave comments about your performance.

MCFRS EMT Training – Internship Rotation – Patient Assessment

- Finally, have your FTC sign their name in signature box.

- Congratulations on completing your Patient Assessment. You can now **Submit** the form. Remember you will have to submit at least 10 Patient Assessments