

## Paramedic Clinical Preceptor Evaluation Form

**Rating scale:**

- 1) **UNACCEPTABLE**-Frequently fails to perform procedure/skill in a competent manner
- 2) **NEEDS CONTINUED WORK**-Inconsistent performing procedure/skill but is showing improvement
- 3) **ACCEPTABLE**-Consistently performs procedure in a safe and manner according to direction
- N/A)** Did not perform skill/Procedure

Clinical and Professional Skills/Procedures	1	2	3	N/A
IV Access/Blood draws				
Access of indwelling catheters/Vascular devices				
Intraosseous Access				
Medication Administration				
Advanced Airway Management (OPA, NPA, ET, BIAD, Cric, etc.)				
Needle Thoracostomy				
Oxygen delivery devices(NC,NRB,BVM, etc)				
Suction procedures (Oral, Tracheal, etc.)				
Gastric decompression (nasal/orogastric tubes, etc.)				
EKG Interpretation (3 lead, 12 lead, 15 lead etc.)				
Defibrillation, Cardioversion, or Pacing procedures				
Splinting devices(Rigid,Soft,Traction,LSB, CID, CCollars, MAST etc)				
Assessment (Medical)				
Assessment (Trauma)				
Treatment plans/Action on those plans				
History and Physical Assessment				
Builds rapport with the health care team, patient, and family				
Performs well under stressful situations				
Accepts constructive criticism and guidance				
Exhibits professional attitude and work ethic				
Performs primary assessment and identifies any deficits				
Identifies the level of acuity for patients				
Develops a clinical impression and treatment plan accordingly				
Anticipates the needs of the patients/responds appropriately				
Hospital reports are concise, confident and in a timely manner				
Practices in a safe manner				
Reassess the patient for effectiveness after performing therapeutic modalities				
Other :				

**Please make any comments and provide rational for any rating below at a "2" or below**

***Thank you*** for completing this evaluation. We really appreciate your honesty. If you need to make further confidential remarks, go to the preceptor page at [www.jcjc.edu/depts/emt](http://www.jcjc.edu/depts/emt) or contact the **Emergency Technology Clinical/Field Coordinator at 601-477-4074**

**Evaluators Signature:**

**Date:**

Office Use Only						
Incomplete Returned to Student	Shift #	Logged into FISDAP	1 week time Frame	Daily Grade	Total Hours	Confirmation