



| Date | Pt initials | Pt. age | ALS/ BLS | Nature of call | ECG (list) | Call-in (X) |
|------|-------------|---------|----------|----------------|------------|-------------|
|      |             |         |          |                |            |             |
|      |             |         |          |                |            |             |
|      |             |         |          |                |            |             |
|      |             |         |          |                |            |             |
|      |             |         |          |                |            |             |
|      |             |         |          |                |            |             |
|      |             |         |          |                |            |             |

**SKILL PERFORMANCE APPRAISAL:** Indicate the general level of performance

**Scale:**

- 5 Exceptional Clearly outstanding for a student at this level of training
- 4 Superior Above average for a student at this level of training
- 3 Proficient As expected for a student at this level of training
- 2 Marginal Not quite up to expectations for a student at this level of training
- 1 Deficient Poor performance for a student at this level of training

| <b>Team Leadership skills</b>   | <b>Rating</b> |
|---|---------------|
| Takes charge; demonstrates confidence, compassion, maturity and command presence  |               |
| Requests additional resources in a timely manner if needed  |               |
| Receives, processes, verifies and prioritizes information   |               |
| Interprets patient data to form an accurate paramedic impression  |               |
| Creates an appropriate action plan; implements the appropriate SOP based on the PARAMEDIC impression                        |               |
| Correctly prioritizes pt needs and assigns team member duties in the appropriate location                                   |               |
| Communicates accurately and concisely while listening and encouraging feedback  |               |
| Reconciles incongruent information  |               |
| Makes appropriate pt disposition decisions in a timely fashion; including selection of appropriate receiving hospital       |               |
| Transmits information to the hospital in a concise OLMC report  |               |
| Continuously monitors situation, resources, and patient condition until appropriate pt disposition and modifies accordingly |               |
| Facilitates patient handover to ED staff giving appropriate follow-up reports   |               |
| Ensures that ambulance is appropriately restocked   |               |
| Ensures that appropriate patient use of supplies forms are completed (for billing purposes)                                 |               |
| Conducts a post-run CQI review with team members  |               |
| Maintains accountability for team's actions/outcomes  |               |

| <b>AFFECTIVE OBJECTIVES</b>   | <b>Rating</b> |
|---|---------------|
| <b>INTEGRITY:</b> Consistently honest; maintains patient confidentiality.   |               |
| <b>EMPATHY:</b> Shows compassion for others; responds appropriately to patients and bystanders.   |               |
| <b>SELF-MOTIVATION:</b> Self-disciplined, resourceful, takes on and follows through on tasks without constant supervision; consistently strives for excellence in all activities.   |               |
| <b>APPEARANCE AND PERSONAL HYGIENE:</b> Well groomed; wears appropriate clothing.   |               |
| <b>SELF-CONFIDENCE:</b> Is aware of own strengths and limitations; projects confidence to patients  |               |
| <b>COMMUNICATIONS:</b> Speaks clearly; maintains appropriate interactions/language at all times; listens actively; adjusts communication methods to meet situational needs.         |               |
| <b>TIME MANAGEMENT:</b> Consistently punctual; completes tasks and assignments on time.   |               |
| <b>TEAMWORK AND DIPLOMACY:</b> Shows respect and supports team members; communicates effectively with others  |               |
| <b>ATTITUDE:</b> Accepts coaching and modifies behavior as requested; does not complain; demonstrates a positive attitude.  |               |
| <b>PATIENT ADVOCACY:</b> Insists on appropriate patient management.   |               |
| <b>CAREFUL DELIVERY OF SERVICE:</b> Performs complete equipment checks; demonstrates safe ambulance operations; makes independent critical judgments supported by System standards. |               |

| General areas of competency   | Rating |
|---|--------|
| <b>Medical knowledge:</b> Knowledge base relative to stage of training and ability to apply that knowledge and work within the SOPs & EMS policies when caring for patients.  |        |
| History taking skills: Ability to obtain an accurate history and identify the scope of historical data needed to assess the patient's problem.  |        |
| <b>Presentation skills:</b> Ability to provide an organized, accurate summary of data in a concise and timely fashion during the radio report and face-to-face report at the hospital.  |        |
| <b>Physical exam skills:</b> Ability to perform a competent exam appropriate to the patient's care needs within a reasonable time frame.  |        |
| <b>Clinical reasoning skills:</b> Ability to assess common problems and reach accurate conclusions using appropriate reasoning skills.  |        |
| <b>Treatment skills:</b> Ability to determine need for and competently execute EMS interventions.   |        |
| <b>Written documentation:</b> Ability to complete factual, accurate, complete, and timely PCRs and other supplementary documents (Refusal forms, Notice of privacy practices, CMMS signature forms) that reflects the clinical encounter in a comprehensive manner. |        |
| <b>Intellectual curiosity:</b> Evidence of review of SOPs, clinical literature, notes on a daily basis reflecting effort to improve knowledge of problems encountered during patient care.  |        |

**Comments are especially important for any marginal or exceptional ratings. Provide behavior-specific descriptions and explanations rather than generic statements. Use back of page if needed.**

**Overall STRENGTHS:** (If you believe this student is outstanding, describe the behaviors that lead you to this conclusion)

---



---



---

**AREAS FOR IMPROVEMENT:** (Feedback to assist the student in improving their performance)

---



---



---

**Signatures**

\_\_\_\_\_  
Student NAME/ signature

\_\_\_\_\_  
Preceptor NAME/signature

\_\_\_\_\_  
Hospital EMS Coordinator/Educator

\_\_\_\_\_  
Provider EMSC NAME/signature

\_\_\_\_\_  
Date

- Recommendation:**
- Internship complete; graduate; allow to take credentialing exam; unrestricted license
  - Graduate; allow to take credentialing exam; retain with preceptor until: \_\_\_\_\_
  - Retain in Phase II (attach corrective action plan)
  - Terminate the internship; sponsorship withdrawn (attach documentation)