Northwest Community Healthcare Paramedic Program SUMMATIVE FIELD INTERNSHIP EVALUATION

To be jointly completed by the primary Preceptor, Provider EMSC, and the hospital EMSC/educator responsible for mentoring the student's internship.

Student:	Preceptor:		
RN EMSC/educator:	Date:		

Evaluate the degree to which this student has completed the outcome objectives of the field internship:

(3) Exceeds expectations (2) Consistently/fully achieved

(1) Marginally achieved; recommend continued work with preceptor

Rating	Objectives	Comments
	Student demonstrates ability to comprehend, apply and evaluate information consistent with expectations of an entry-level paramedic.	
	Student demonstrates technical proficiency in all skills necessary to fulfill the role of an entry-level paramedic.	
	Student demonstrates behaviors consistent with national and program standards for an entry-level paramedic.	

Rating key: Circle the rating which most often reflects the student's performance for each skill/activity

4	Naturalization/mastery	Automated, unconscious mastery of activity and related skills at a strategic level; able to multi-task effectively and define aim, approach and strategy for activity to meet patient needs		
3	Articulation/consolidation	Modifies the skill to problem solve and meet new situations; combines more than one skill in sequence with harmony, consistency and no critical errors		
2 Proficient/Competent1 Manipulation/needs improvement		Consistently executes skill accurately, without critical error, assistance or instruction		
		Performs activity with instruction; relies heavily on written SOPs or skill sheets; carries out activity with verbal prompting or instructions; needs continued practice/work with preceptor		
0	Not observed in field	Competency demonstrated in simulated runs or labs in class		

Rating	PATIENT ASSESSMENT (all ages & sizes)/DISPOSITION/DOCUMENTATION
4 3 2 1 0 4 3 2 1 0 4 3 2 1 0	Scene size up/safety; requests appropriate resources; appropriately uses PPE; triages as needed Primary assessment SAMPLE history; establishes rapport with pt/significant others
4 3 2 1 0	VS, notes trends that predict deterioration and takes appropriate action
4 3 2 1 0	Secondary assessments including ROS & neuro exam prn; (LOC, GCS, pupils, motor/sensory integrity)
4 3 2 1 0	Obtains/documents factors necessary to calculate a revised trauma score
4 3 2 1 0	Ongoing assessment; safely monitors patient until appropriate disposition
4 3 2 1 0	Newborn assessment (APGAR) / appropriately measures child size using Broselow tape
4 3 2 1 0	Documents call appropriately using Image Trend software
	AIRWAY/OXYGENATION Assessment/Management/Ventilatory Assistance
4 3 2 1 0	Oral and/or tracheal suctioning; FB removal
4 3 2 1 0	Orotracheal intubation (including use of difficult airway techniques/Bougie)
4 3 2 1 0	Drug-assisted intubation (using medications authorized by NWC EMSS SOPs)
4 3 2 1 0	In-line intubation
4 3 2 1 0	Nasotracheal intubation
4 3 2 1 0	Digital, anterior intubation
4 3 2 1 0	King LST-D airway
4 3 2 1 0	Cricothyrotomy: needle / surgical (circle observed skills)
4 3 2 1 0	Correct application and interpretation of pulse oximetry and capnography monitors
4 3 2 1 0	Uses oxygen delivery devices appropriately: NC, NRM, CPAP, BVM
	CARDIAC ARREST MANAGEMENT
4 3 2 1 0	Performs quality CPR on adults, children, and infants
4 3 2 1 0	Team member and leader in pit crew approach to cardiac arrest resuscitation
4 3 2 1 0	Use of ResQPod
4 3 2 1 0	Post-ROSC circulatory support or pt disposition after termination of resuscitation

4 3 2 1 0 ECC electrode application: limb leads and Combo pads 4 3 2 1 0 Rythm Identification and treatment transmit tracing 4 3 2 1 0 Rythm Identification and treatment Interprets is technic changes on 12-lead ECG and calls STEMI alert to hospital in timely manner 4 3 2 1 0 Transcutaneous pacing Patricular Comment of Transcutaneous pacing VASCULAR ACCESS, FLUID ADMINISTRATION, GLUCOSE READINGS VASCULAR ACCESS, FLUID ADMINISTRATION (Trachicus) in part of the part	F	Rating CARDIAC MONITORING/DEFIBRILLATION				
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4 3 2 1 0 Interdisciplinary communications: Dispatchers, law enforcement, other EMS personnel	4	3	2	1	0	
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Endorsement for graduation:

We have evaluated this student and agree that he/she has demonstrated competency in meeting all objectives established by IDPH and NCH. We therefore recommend this individual for graduation and licensure as a paramedic.

Signature of primary preceptor:	Date	Signature of Provider EMSC:	Date
Signature of hospital EMSC/educator:	Date	Signature EMS MD	Date

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