

Truckee Meadows Community College Field Internship Rotation Evaluation

Intern:		Preceptor:		
ID Number:	Station:	Shift:	Captain:	
Phase:	Date:	EMS Coordinator:		
Major Evaluation: (Check One) 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> Extension <input type="checkbox"/>		Medical Director:		
<p>Rating Criteria: Refer to Performance Evaluation Standards which are based on the level of performance for the final shift. An intern should progress from a rating of 1 or 2 to a minimum of 3 in each category on the final evaluation to be certified/licensed for service.</p> <p>4 Performs procedure in an above average manner. Comment required.</p> <p>3 Consistently performs procedures in a competent manner according to established standards.</p> <p>2 Inconsistent in performing procedures in a competent manner, but is showing improvement.</p> <p>1 Frequently fails to perform procedure in competent manner. Comment required.</p> <p>N/A Not applicable. Did not perform skill. Skills not observed in the field shall be evaluated in a drill prior to certification.</p>				
Evaluation Factors		Rating		Comments are required in each <u>major</u> category.
		IR	PR	
Evaluation and Control of Scene				
1. Determines safety for self and adequacy of work environment.				
2. Initiates appropriate scene control.				
3. Requests additional assistance and equipment.				
4. Establishes and maintains rapport with patients and bystanders.				
Patient Assessment Skills				
5. Performs a complete initial assessment (60 seconds) and intervenes immediately.				
6. Obtains relevant and accurate history.				
7. Performs an appropriate rapid or detailed exam.				
8. Recognizes need for further medical attention, determines appropriate mode of transportation.				
9. Obtains/directs the assessment of vital signs and appropriately interprets.				
10. Recognizes need for cardiac monitoring				
11. Accurately interprets ECG rhythms.				
12. Interprets assessment information correctly and takes appropriate action.				
Documentation and Telemetry				
13. Recognizes need to make base hospital contact as per protocol.				
14. Accurately reports all information, via radio/telephone, in a systematic manner				
15. Upon care transfer, presents patient information in clear and concise manner.				
16. Repeats all radio orders and upon arrival reports patient response to therapy.				
17. Keeps accurate, complete, and legible written reports.				

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Demeanor / Teamwork			
18. Anticipates orders, anticipates the needs of other team members.			
19. Establishes approp. working relationship with all team members/agencies.			
20. Assumes leadership role and directs team members appropriately.			
21. Performs well under stress, uses good judgement.			
22. Is able to accept constructive criticism and guidance.			
Treatment Skills			
23. Airway control/oxygen administration. (BLS and ALS)			
24. Bandaging and splinting			
25. Burn therapy.			
26. Electrical therapy. (Defibrillation)			
27. Medication therapy.			
28. Drug administration.			
29. IV technique.			
30. Spinal immobilization			
Equipment and Supplies			
31. Maintains assigned inventory.			
32. Demonstrates the ability to operate all equipment.			
33. Drills / simulations.			
Preceptors must provide a written summary of the intern's overall performance to date.			
Final Evaluation: Recommend Cert. Yes <input type="checkbox"/> No <input type="checkbox"/>		Additional Field Shifts Required Yes <input type="checkbox"/> No <input type="checkbox"/>	
Extended Shifts: Recommend Cert. Yes <input type="checkbox"/> No <input type="checkbox"/>			
Other Recommendations (e.g., didactic, clinical, etc.):			
Preceptor's Signature			Cert. #
Intern's Signature			Cert. #
EMS Coordinator's Signature			Recommendation: Yes <input type="checkbox"/> No <input type="checkbox"/>
Medical Director's Signature			Approval: Yes <input type="checkbox"/> No <input type="checkbox"/>
Intern Comments:			

Truckee Meadows Community College Field Performance Evaluation Standards

Evaluation Factor	Rating 1	Rating 2	Rating 3	Rating 4
Evaluation and Control of Scene				
1. Determines safety for self and adequacy of work environment, and takes appropriate action.	Frequently fails to provide a safe and adequate environment.	On several occasions, failed to provide a safe and adequate environment.	Consistently ensures a safe and adequate environment during the course of a response in a reasonable amount of time.	Consistently provides safety and adequacy of environment in a very timely manner.
2. Initiates appropriate scene control measures.	Frequently fails to take any steps to control scene.	Is inconsistent with scene control. Sometimes handles situations effectively, but sometimes has no control.	Consistently initiates scene control measures. Calls for additional resources as needed. Directs manpower appropriately.	Has very strong leadership qualities. Consistently able to control difficult situations.
3. Requests additional assistance and equipment, (police, ALS, ambulances, etc.) when necessary.	Failed to recognize the need for additional help. Appears to be overwhelmed by situation.	Recognizes need for additional help, but is slow to request.	Requests additional assistance for equipment and personnel in a timely manner in most situations.	Shows strong ability to identify the need for extra assistance or equipment in even the most difficult and/or stressful situations.
4. Establishes and maintains rapport with patients and bystanders.	Rude, abrupt; and/or unprofessional conduct.	Occasionally shows lack of consideration for patient or bystander.	Builds rapport with patients and bystanders. Shows consideration of patient/bystander. Acts professionally.	Consistently deals with even the most difficult patients or family in a professional manner.

Patient Assessment Skills				
5. Performs primary assessment and intervenes immediately as indicated.	Omits portions of initial assessment, OR Fails to intervene when a problem is noted.	Performs a complete initial assessment, but is either very slow in assessing and/or intervening, or is disorganized.	Performs a complete and fairly organized assessment in a reasonable amount of time. Recognizes critical vs. non-critical patients.	Demonstrates above average skills in performing a complete and organized primary assessment in a timely manner. Intervenes rapidly.
6. Obtains relevant and accurate patient history.	Totally disorganized patient assessment. Does not get pertinent information, is not complete.	Obtains an adequate patient assessment, but is either very slow in assessment and/or is disorganized.	In a reasonable amount of time, obtains an adequate patient history, chief complaint, medications, and allergies in a fairly organized manner.	Able to gather information efficiently even in difficult situations. Organized and timely.
7. Performs an appropriate rapid or detailed exam.	Frequently fails to perform a patient exam and/or findings are inaccurate.	Inconsistent in performance of pertinent physical exams. Findings are accurate.	Performs a physical exam pertinent to the patient's chief complaint. Findings are accurate.	Same rating as 3 and able to detect subtle findings.
8. Recognizes need for further medical attention, determines appropriate mode of transportation.	Frequently fails to recognize need for further medical attention and/or does not use good judgement in determining appropriate mode of transportation. Frequently fails to recognize transport needs. Makes the same mistakes on subsequent runs.	Usually recognizes need for further medical attention, but does not consistently choose correct mode of transport. Occasionally fails to recognize the transport needs. Does not make the same or similar mistake on subsequent runs.	Consistently uses good judgement in determining the need for further medical care. Chooses appropriate mode of transportation. Determines appropriate time in run to transport.	Uses excellent judgement regarding medical attention/transportation. Shows strong ability to identify appropriate transportation needs even in the most difficult situations.
9. Obtains/directs the assessment of vital signs and appropriately interprets.	Frequently fails to ensure vitals are obtained at appropriate times. OR Frequently fails to verify questionable vital signs.	Occasionally vital signs are not put in proper priority. Usually verifies vitals in doubt.	Usually takes vital signs at appropriate times. Always verifies vital signs in doubt.	Shows strong ability to correlate vital signs with patient's condition. Always directs vitals to be obtained at appropriate times and verifies if warranted.
10. Recognizes the need for cardiac monitoring	Frequently unable to identify patients who warrant cardiac monitoring	Occasionally identifies need for cardiac monitoring, but frequently requires preceptor guidance or very slow to initiate.	Usually identifies need for cardiac monitoring in reasonable period of time	Consistently able to identify patients who require cardiac monitoring and establishes in timely manner.
11. Accurately interprets ECG rhythms	Frequently unable to identify classic rhythms in a timely manner either in drills or in field situations.	Performs well in station drills, but occasionally has problems with accuracy and timeliness in field settings.	Identifies classic ECG rhythms accurately and quickly. Able to read static or oscilloscope rhythms.	Identifies even difficult ECG rhythms accurately and quickly.
12. Interprets assessment information correctly and takes appropriate action.	Frequently is unable to interpret assessment information correctly. Demonstrates weak knowledge base, OR Suggests treatments that would have an adverse effect on the patient.	Interprets assessment information correctly, but is hesitant about action to take.	Correlates information gained from patient assessment with knowledge base gained from training and suggests treatment appropriate to situation.	Shows strong ability to interpret assessment information and take appropriate action. Notices things the average intern would not.

Documentation and Telemetry

13. Recognizes need to make base hospital contacts as per protocol.	Frequently uses poor judgement when deciding not to make telemetry contact. Does not follow protocols, OR, Frequently relies on preceptors to make decisions.	Is inconsistent about when/when not to make contact. Tries to "mind read" what preceptors want instead of making own decision.	Familiar with protocols. Makes telemetry contact whenever appropriate.	Shows strong ability to identify the need for telemetry contact even in difficult or very unusual situations.
14. Accurately reports all information, via radio/telephone, in a systematic manner.	Fails to report key information. "Paints a poor or inaccurate picture."	Reports all pertinent information, but is very disorganized.	Reports all pertinent information in a fairly organized manner. "Paints an accurate picture"	Reports all pertinent information in a fairly organized manner. "Paints an accurate picture"
15. Upon care transfer, presents patient information in clear and concise manner.	Fails to report key information. "Paints a poor or inaccurate picture."	Reports all pertinent information, but is very disorganized.	Reports all pertinent information in a fairly organized manner. "Paints an accurate picture"	Reports all pertinent information in a fairly organized manner. "Paints an accurate picture"
16. Repeats all radio orders and upon arrival reports patient response to therapy.	Frequently fails to repeat orders or repeats orders back inaccurately. Frequently fails to inform hospital of patient's response to therapy.	Occasionally fails to repeat orders and/or report patient response to therapy. Needs to be prompted by hospital staff.	Consistently repeats all orders and usually keeps hospital informed of patient response to field treatments; rarely needs prompting.	Consistently repeats all orders and without prompting updates hospital.
17. Keeps an accurate, complete, and legible written record.	Records are inaccurate, incomplete, and/or illegible.	Records are accurate and complete, but difficult to read.	Records are accurate, complete, and legible. Cover all legal implications.	In addition to rating 3, is extremely thorough, neat and timely.

Demeanor / Teamwork				
18. Anticipates orders, anticipates the needs of team members.	Frequently does not anticipate even basic orders of oxygen, monitor, or IV. Does not assist when other team members need help.	Occasionally does not anticipate orders or is not prepared to assist other team members.	Usually anticipates most orders and the needs of other team members.	Very efficient and organized. Approach to patient care is so systematic that there is little wasted time or effort.
19. Establishes appropriate working relationships with all team members / agencies	Does not function as part of a team effort. Fails to establish rapport with team members. Attitude impedes progress of calls. Does not follow appropriate chain of command.	Has established rapport with some, but not all team members / agencies.	Functions as a team member; established rapport. Respects chain of command and follows directions.	Establishes exceptional rapport with team members.
20. Assumes leadership role and directs team members appropriately.	Makes little or no attempt to provide direction to other personnel. Seems intimidated. Frequently needs to be given direction by preceptors to get active in situation.	Delegates some responsibilities, but does not have control of average situations; still needs some preceptor help. Occasionally has difficulty taking charge of unfamiliar situations.	Actions instill confidence in patient. Uses manpower appropriately. Takes charge of most situations- "“Gets the job done”" even in unfamiliar situations.	Provides direction for all team members in such a manner that even difficult situations are handled efficiently and systematically.
21. Performs well under stress, uses good judgement.	Frequently fails to provide adequate and/or safe patient care when under stress. Seems overwhelmed by situation.	Is inconsistent; handles some stressful situations easily, but is unsure of what to do in other situations. Unsure of what to do in new situations, but does fairly well in situations that are similar to previous ones handled.	Thinks clearly; uses good judgement. Provides adequate and safe patient care when under stress. Remains calm.	Consistently shows calm, collected attitude that seems to reassure personnel around him. Thinks clearly; uses good judgement.
22. Is able to accept constructive criticism and guidance	Takes constructive criticism poorly; argues with preceptors. Rationalizes mistakes.	Appears to accept constructive criticism – Shows respect of preceptors or captain, but does not appear to fully understand reason or make changes. Has no comments.	Participates in evaluation of self; accepts constructive criticism and suggestions. Does not rationalize mistakes. Makes necessary attempts to correct performance.	Extremely open to suggestions. Encourages preceptors to be critical. Always seeking ways to improve self.

Treatment Skills				
23. Airway control / oxygen administration (BLS and ALS)	Frequently fails to open and maintain an airway. Uses or does not recognize poor technique	Is inconsistent. Sometimes adequately manages airway and sometimes does not.	Consistently opens and maintains an adequate airway using appropriate techniques. Monitors performance of others. Treats it appropriately and highest priority.	Same as rating 3 with remarkable knowledge of procedure.
24. Bandaging and Splinting	Ineffective technique or treatment causing potential harm to patient. Failure to initiate any treatment.	Aware of need for bandaging / splinting, but needs some direction. Gives adequate direction to personnel.	Applies appropriate and adequate dressings / splints in a timely manner. Able to direct personnel to apply appropriately.	Able to dress difficult / unique injuries well. Very neat.
25. Burn therapy	Fails to initiate basic burn care. No secondary considerations.	Knowledgeable about burn care, but fails to care out all aspects of burn care in a timely manner.	Effectively recognizes and treats appropriately most types of burns. Uses burn pack appropriately.	Remarkable Knowledge and skill level.
26. Electrical Therapy – Defibrillation	Unaware of indications and/or incorrect procedure.	Aware of indications for use, but needs some direction to perform.	Performs correctly. Aware of indications for use.	Remarkable knowledge and performance. Able to anticipate patient needs following the procedure.
27. Medication therapy	Unfamiliar with drug therapy. Poor knowledge base.	Inconsistently recognizes needs for drug administration. Requires preceptor's direction.	Adequate knowledge of indications, contra-indications, adverse effects and dosages.	Anticipates drug orders for more complex situations.
28. Drug administration	Can not calculate correct drug dosages.	Basic understanding of drug administration but is inconsistent.	Administers drugs correctly.	Administers drugs correctly in timely manner even in more complex situations.
29. IV technique	Frequently fails to establish IV in even simple cannulations and/or poor aseptic technique.	Inconsistently establishes on 1 st or 2 nd attempt.	Consistently establishes on 1 st or 2 nd attempt	Always able to establish IV in timely manner. Good aseptic technique.
30. Spinal Immobilization	Fails to recognize obvious back / neck injuries. Fails to initiate spinal precautions in obvious situations. Incomplete or incorrect procedure.	Recognizes obvious problems but may fail to recognize potential problems and is slow to initiate proper treatment. Incomplete treatment. Inconsistent performance of procedure	Uses full spine precautions whenever indicated. Recognizes obvious and potential problems. Uses complete and correct procedure.	Consistently above average application and anticipation.

Equipment and Supplies				
31. Maintains assigned inventory	Needs frequent reminders to resupply drug box and/or unit. Fails to take equipment and drug inventory at start of shift.	Occasionally fails to resupply, but follows up immediately when deficiencies are noted.	Consistently resupplies drug/trauma box and unit following calls.	Anticipates need to restock supplies and replace outdated drugs. Takes extra time to maintain unit appearance.
32. Demonstrates the ability to operate all equipment.	Does not know how to operate equipment or uses equipment in an unsafe manner	Knows proper use of equipment, but frequently needs direction to operate.	Following orientation to equipment, demonstrates the ability to correctly operate.	Adapts to new equipment easily and uses it effectively. Able to demonstrate to others.
33. Drills / simulations	Demonstrates a poor knowledge base. Is not prepared.	Marginal knowledge base. Is not adequately prepared.	Demonstrates an adequate knowledge of paramedic functions.	Remarkable knowledge. Strong ability to relate knowledge to others in drills / simulations.