



# Princeton Rescue Squad EMT Course Clinical Evaluation



**Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Preceptor Name:** \_\_\_\_\_

**Clinical Shift Time:** \_\_\_\_\_ **Arrival Time:** \_\_\_\_\_

**All Crew Members:** \_\_\_\_\_

Please fill the entire form out at the end of the student's scheduled shift. Read each section carefully and grade them appropriately. Total all points at the end of evaluation. Please grade the student honestly. After evaluation is complete, place this form in a sealed envelope and sign your signature on the seal. Place the envelope in the box outside of the Education Coordinators Office. Student will have been shown and participated in basic skills prior to clinicals. You may review with student if you wish. (*Airway, Ventilation, 12-lead, CPR, Spinal and Extremity Mobilization, Medication Administration, Patient Assessment, Patient Movement, Bleeding Control, Basic Vitals*) Do Not Penalize the student for advanced or non covered skills.

### Preparedness

Skill/Task	Obtainable Points	Received Points
Student arrived on time to clinical site.	5	
Student is wearing required clothing for clinical shift. (Clinical shirt, Dark EMS pants, black boots, badge)	5	
Student presents with clean appearance, neatly groomed, and no unnecessary fragrances or piercings.	5	
<b>Total</b>	<b>15</b>	

**Please provide feedback for student improvement:**


### Performance

Skill/Task	Obtainable Points	Received Points
Student performs a comprehensive interview, including a detailed history, and demonstrates active listening.	5	
Student completes a primary assessment, to include general impression, level of consciousness, airway, breathing, and circulation examination.	5	
Student completes an appropriate secondary assessment: head-to-toe and/or focused physical examination.	5	
Student formulates a field impression based on their exam and implements a treatment plan appropriate to their current class studies.	5	
Student performed all interventions and treatments were completed in a satisfactory and timely manner appropriate to their current class studies.	5	
<b>Total</b>	<b>25</b>	

**Please provide feedback for student improvement:**


*Evaluation Continued on Back*

Affective			
Skill/Task	Obtainable Points	Received Points	
Student was confident.	5		
Student appeared motivated.	5		
Student responded well to criticism and took responsibility for self improvement.	5		
Student exhibited strong values needed as a healthcare provider	10		
Student worked as part of the EMS team.	15		
<b>Total</b>	<b>40</b>		
<b>Please provide feedback for student improvement:</b>			
Shift Duties			
Skill/Task	Obtainable Points	Received Points	
Student assisted with start of shift duties (Truck Check)	5		
Student assisted with post run duties (restock, decon)	5		
Student assisted with end of shift responsibilities	5		
Student stayed for entire duration of clinical shift	5		
<b>Total</b>	<b>20</b>		
<b>Please provide feedback for student improvement:</b>			
Evaluation Summary			
Skill/Task	Obtainable Points	Received Points	
<b>Total of all points received in evaluation.</b>	<b>100</b>		
Leadership, Development, and Progression			
Student shows potential and development beyond mean of course. Student makes effort to participate without direction in a safe and proper manner. Student shows an understanding of the job and duties associated towards the level of an EMT.			
<b>YES</b>	<b>NO</b>		
<b>Please provide constructive feedback to assist student in development</b>			
<b>Number of Calls</b>		<b>Number of Patient Contacts</b>	
<b>Departure Time</b>			
<i>Preceptor Signature:</i>			
<i>Student Signature:</i>			
<i>Clinical Coordinator Signature:</i>			
Educational Administrative Use Only:			
<i>Date Received:</i>		<i>Student Improvement Seen?</i>	<b>YES</b> <b>NO</b>
<i>Does Student Require A Performance Review based on Preceptor's Evaluation?</i>		<b>YES</b>	<b>NO</b>
Date Student Performance review was completed (If applicable)			
<i>Comments:</i>			