

Preceptor Comments on any unsatisfactory ratings or discrepancies: _____

Professional Behavior Objectives: Student demonstrates they are: **Self-motivated:** Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback and adjusts behavior/performance. **Efficient:** Keeps assessment and treatment times to a minimum, releases other personnel when not needed and organized team to work faster/better. **Flexible:** Makes adjustments to communication style, directs team members and changes impressions based on findings. **Careful:** Pays attention to detail of skills, documentation, patient comfort, set-up and clean-up and completes tasks thoroughly. **Confident:** Makes decisions, trusts and exercises good personal judgement and is aware of limitations and strengths. **Open to feedback:** Listens to preceptor and accepts constructive feedback without being defensive (interrupting, giving excuses)

Pt. Interview/Hx Gathering: Student completes an appropriate interview and gathers appropriate history; listens actively, makes eye contact, clarifies complaints, respectfully addresses patient (s); demonstrated compassion and/or firm bedside manner depending on the needs of the situation.

Physical Exam: Student completes an appropriate focused physical exam specific to the chief complaint and/or comprehensive head-to-toe physical examination.

Impression & Rx Plan: Student formulates an impression and verbalizes an appropriate treatment plan.

Skill Performance: Student performs technical skills accurately and safely.

Communication: Student communicates effectively with team, provides an adequate verbal report to other health care providers and completes a thorough written patient narrative.

Team Membership Objective: Clinical experience evaluation of field performance assesses a student as a Team Member and is isolated to evaluation of individual skill delivery or a portion of patient care that is delivered. The student is not assuming the Team Leader role but integrating with other Team Members. When evaluating the student performance as a team member, only the portion of care completed by the student is evaluated. The Team Member role contains an affective component and evaluates the students' cognitive understanding of complete patient care that paramedic's are expected to deliver.

**NOTE: Ideally, students will progress their role from observation to participation in simple skills, to more complex assessments and formulating treatment plans. Students will progress at different rates and case difficulty will vary. Students should be active and ATEMPT to perform skills and assess/treat patients early even if this results in frequent prompting and unsuccessful ratings. Unsuccessful ratings are normal and expected in the early stages of the clinical learning process when student needs prompting. Improvement plans MUST follow an unsuccessful or inconsistent ratings.*

<p>Rating: NA = Not applicable - not needed or expected; this is a neutral rating (Example: student expected to only observe, or the patient did not need intervention). 0 = Unsuccessful - required excessive or critical prompting; includes "Not Attempted" when student was expected to try; this is an unsatisfactory rating. 1 = Marginal - inconsistent, not yet competent; this includes partial attempts. 2=Successful/competent - no prompting.</p>	Pt. Interview & History Taking	Physical Exam	Impression/Treatment Plan	Skill Performance	Communication	Professional Behavior	Team Membership
Score on today's Clinical Objective Performance							

Yes	No

Student asked relevant questions and participated in learning answers, used downtime to its highest potential

Student knows equipment location and use

Student helps clean up and restock, unprompted

Student left site early (Did NOT complete shift)

Student reported:	<input type="checkbox"/>	on Time
	<input type="checkbox"/>	well groomed
	<input type="checkbox"/>	In uniform and prepared to begin the shift
Professional Behavior Objectives:	<input type="checkbox"/>	Accepts feedback openly
	<input type="checkbox"/>	Self-motivated
	<input type="checkbox"/>	Efficient
	<input type="checkbox"/>	Flexible
	<input type="checkbox"/>	Careful
	<input type="checkbox"/>	Confident

Preceptor - PLEASE INITIAL HERE:	BY initialing here, I acknowledge that I have reviewed the PRS Preceptor Orientation Packet regarding: 1. Student/Preceptor Roles and Responsibilities. 2. The training guidelines per unit/ward. 3. Student FERPA rights regarding privacy of their education. If you have not seen this material, please ask the student to provide you with the material for your review and approval, or see the Unit Manager/Education Coordinator of your facility to review the material provided.
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Preceptor requests a follow-up with appropriate program personnel: Phone call _____ Email _____

If needed, please feel free to contact the Education Director: Paula Johnson at: 304-716-0129 ext. 602. If not in, please leave a voicemail.

<p>I agree to the above ratings: Preceptor Signature: _____</p>
