

Central DuPage Emergency Medical Services System Field Internship – Summative Evaluation Shift 5

Student Name	 Date
Primary Preceptor _	 Department

Instructions:

- This form is to be completed by the student's preceptor for this shift
- All sections **MUST** be filled in for the form to be considered complete

Note to Preceptors:

This form is to be completed at the end of Shift #5. The purpose of this evaluation is to determine if the student has made progress to transition into the Team Leader Role. If you do not feel the student has made enough progress towards the Field Internship Objectives, please indicate your evaluation below. If you determine the score in the category as 1 or 2, the student will not be permitted to transition into the Team Leader Role.

Once complete, please discuss this with your student. Both preceptor and student must sign at the end of the form. If at any time you have concerns about the student's progress or performance, please contact Tiff 630-933-1523 immediately.

Field Performance Evaluation- Consideration for Transition of Role

Please check the appropriate level of performance achieved by the paramedic student. Please add any comments you feel are necessary to support your evaluation score.

SCORE: 1 = Unsatisfactory performance 2 = Marginal performance 3 = Satisfactory performance 4 = Outstanding performance	1	2	3	4
Correlative ability: application of didactic material to clinical patient management	cannot apply	poor application	correlates and initiates properly	initiates and proceeds
Comments:				
Skills: initiation and proficiency of learned clinical skills	unable to accomplish	needs repeated attempts	proficient minimal supervision	proficient and independent
Please Circle all that apply IV insertion Medication Administration Cardiac Rhythm Interpretati 12 Lead ECG Interpretation Oral Suctioning ETT Intubation I-Gel Insertion BVM				

Attitude: initiative, motivation, and interest in working in a clinical scenario	no initiative demonstrated	needs constant motivation	positive initiative and motivation	highly motivated
Comments:				
Team member function: communication, interaction, leadership abilities	does not function	weak, poor interactions	appropriate skills and functioning	high leadership potential
Comments:				
Decision making capabilities: appropriate	no initiative demonstrated	high level of supervision	independent but seeks	independent, creative,
decision making, degree of guidance required	demonstrated	required	appropriate help	flexible
Comments:				
Organization and priority	unable to	high level of	organized,	well
setting: degree of organization and prioritizing	accomplish	supervision required	needs minimal	organized, excellent
under stress		required	guidance	prioritizing
Comments:				
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Performance Summary- Consideration for Transition to Team Leader Role

As the preceptor, do you feel the student is progressing in a manner which will allow him/her to transition from Team Member *(Field Internship)* into the Team Leader Role *(Field Capstone)* at this time? YES / NO

If NO, what goals need to be completed for you to allow the transition of role? Please be specific.

Preceptor Signature_____

Student Signature _____