



UNIVERSITY OF ARKANSAS  
**PULASKI TECH**

**Department of**  
**Emergency Medical Sciences**  
**Paramedic Program**

**PRECEPTOR MANUAL**

**Spring 2026**

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### EMERGENCY CONTACT INFORMATION

Department of EMS Chair: Harold Shray	Office: (501) 771-6020 e-mail: <a href="mailto:hshray@uaptc.edu">hshray@uaptc.edu</a>
General Department Contact	Telephone: (501) 812-2339
	Fax: (501) 812-2815
Dr. Cassandra Cole, Medical Director	Office: (501) 771-6020
Dr. Brandon Morshedi, Associate Medical Director	Office: (501) 301-1400
Lead Instructor,	(501) 771-6023
Tim Rinehart, Clinical Coordinator	(501) 771-6021 or (501) 944-6663 e-mail: <a href="mailto:trinehart@uaptc.edu">trinehart@uaptc.edu</a>
Mailing Address:	Department of EMS 3000 West Scenic Drive North Little Rock, AR 72118
Web Site: <a href="https://www.uaptc.edu/ems">https://www.uaptc.edu/ems</a>	e-mail: <a href="mailto:emsprograms@uaptc.edu">emsprograms@uaptc.edu</a>
	e-mail: <a href="mailto:emsclinicals@uaptc.edu">emsclinicals@uaptc.edu</a>
<b>For Needle Stick and Bloodborne Pathogen Exposures</b>	
Emergency Department	
Personal Physician	
EMS Department	(501) 771-6021 e-mail: <a href="mailto:trinehart@uaptc.edu">trinehart@uaptc.edu</a>

**MISSION:**

To utilize highly skilled preceptors to provide quality training for paramedic students.

**PURPOSE:**

The purpose of this Preceptor Training Manual and the accompanying presentation is to develop preceptors who:

- (1) Are knowledgeable of the skills that paramedic students may perform
- (2) Are eager to allow paramedic students perform approved skills under appropriate supervision
- (3) Evaluate and grade students fairly and consistently

## DEFINITIONS

This listing of definitions is not comprehensive but may serve to guide those who may be unfamiliar with the rapidly evolving nomenclature of EMS education:

**Advanced assessment:** An advanced assessment is one that is performed on a patient requiring advanced life support or invasive skills.

**Approved skills:** These are skills that may be performed by the EMT or paramedic student under supervision of an approved preceptor in the clinical setting. This list of skills has been approved by the College, the clinical site and the Arkansas Department of Health and Human Services Section of EMS.

**Basic assessment:** A basic assessment is one that is performed on a patient requiring only basic life support skills.

**Clinical studies:** This term refers to any required out-of-classroom exercise in which the student is responsible for observation or participation in direct patient care. Clinical studies may take place with an in an emergency department, physician's office, senior center, skilled nursing facility or elsewhere in or out of the hospital. When participating in clinical studies, the EMT or paramedic student must always be under the supervision of a qualified preceptor.

**School:** The School of Science, Math & Allied health is a unit in the educational division of the University of Arkansas Pulaski Tech (UA-PTC). The Department of Emergency Medical Sciences is a department within this School.

**Entry level Competency -** the student is able to function independently as a team leader in the field with all of the combined knowledge, technical skills and personal behavior and attitude that is required to work independently as a practitioner.

**Field Internship** That portion of instruction and evaluation of paramedic students that is devoted to patient care in the prehospital environment. The student should initially be expected to perform initially as a team member for the first three semesters but during the final semester of the program the student should be able to pull together the cognitive, psychomotor and affective skills so that they can take on the role of team leader.

**Field studies:** This term refers to any required out-of-classroom exercise in which the student is responsible for observation or participation in direct patient care in the prehospital environment. Field studies may take place with a field preceptor approved by UA-PTC. When participating in field studies, the paramedic student must always be under the supervision of a qualified field preceptor.

**Inter-rater reliability:** This term refers to the ability of two or more preceptors or instructors to objectively evaluate or grade the performance of skills and abilities in a similar manner. By using standard skill performance criteria, the UA-PTC Department of EMS is attempting to achieve a high level inter-rater reliability of the paramedic students in the clinical and field internship environments.

**Medical Assessment:** A medical assessment is an assessment performed on a patient whose chief complaint is the result of a nontraumatic injury.

**Team Member** The student is only being evaluated only on their performance as a team member. This is the formative stage in education and the student may still need occasional support or assistance as a team member.

**Team Leader** – This is the phase where the student should be taking a leadership role in managing patient care on all levels. The student will be evaluated on their ability to put all of the aspects of patient care into a cohesive plan that follows organizational policies and standards of care.

**Trauma Assessment:** A trauma assessment is an assessment performed on a patient whose chief complaint results from traumatic injury.

**Preceptor:** A preceptor is a qualified individual who teaches students in a clinical or field environment. He or she is selected for his or her ability and willingness to assist students in translating the didactic materials learned in the classroom to practical application in the work environment. The preceptor is typically an integral part of the patient care team and assists students as an added responsibility and without additional compensation. Although the preceptor is not employed by the College, he or she shares some responsibility in the assessment and grading of the paramedic student.

## PARAMEDIC CLINICAL AND FIELD INTERNSHIP OBJECTIVES

**COGNITIVE OBJECTIVES:** When participating in EMS clinical or field rotations, the students must:

1. Display an acceptable knowledge base for a paramedic
2. Demonstrate satisfactory history taking skills
3. Use history taking and physical examination skills while demonstrating knowledge of proper treatment
4. Document patient care scenarios in an efficient and organized fashion

**PSYCHOMOTOR OBJECTIVES:** When participating in EMS clinical or field rotations, the students must:

1. Demonstrate competent assessment and management of the trauma patient
2. Demonstrate competent assessment and management of the medical patient

Additionally, when opportunity exists, the student should show competency in the performance of the following skills:

1. Endotracheal intubation
2. IV initiation
3. Phlebotomy
4. EKG interpretation
5. Intraosseous (IO) infusion
6. Manual Defibrillation
7. 12-lead EKG
8. IV/IO-bolus medications
9. IVIO-infusion medications
10. Subcutaneous injections
11. Intramuscular injections
12. PO, SL and buccal medications
13. Transtracheal medications
14. CPAP administration
14. Other approved skills at the student's level of training

**AFFECTIVE OBJECTIVES:** When participating in EMS clinical or field rotations, the students should exhibit the following traits and work habits:

1. Present and on time for each scheduled day
2. Neat in appearance, wears the appropriate uniform and has all necessary equipment
3. Performs duties safely and cooperatively
4. Accepts constructive criticism and works toward self-improvement
5. Performs competent patient care during stressful situations
6. Maintains patient confidentiality and respects the rights of others
7. Demonstrates professional patient interaction by communicating in a nonjudgmental, empathetic and responsible manner

## **MEDICAL DIRECTOR APPROVED EMT STUDENT SKILLS**

**APPROVED SKILLS:** The following is a list of medical director approved skills for UA-PTC EMT students in clinical or field settings.

### **EMT-SKILLS:**

1. Triage
2. Assessment
3. Vital signs (blood pressure, heart rate, respiratory rate, SaO<sub>2</sub>, and temperature)
4. Oxygen administration
5. Oropharyngeal or nasopharyngeal airway management
6. Oropharyngeal suctioning
7. Assessment of breath sounds
8. Bag-valve-mask (BVM) device ventilations
9. Cardiopulmonary resuscitation (CPR)
10. Pulse oximetry
11. Control bleeding (direct pressure)
12. Dressing and bandaging (sterile and pressure dressings)
13. Spinal immobilization
14. Splinting of extremities
15. Standard precautions (PPE) for infection control
16. Automated External Defibrillator (AED)
17. Glucometer use
18. Physician-ordered assisted administration of patient's prescribed inhalers
19. Physician-ordered assisted administration of patient's prescribed epinephrine auto-injector
20. Physician-ordered assisted administration of patient's prescribed sublingual nitroglycerine

## **MEDICAL DIRECTOR APPROVED PARAMEDIC STUDENT SKILLS**

1. All skills listed for EMT
2. Advanced patient assessment
3. Physician-ordered endotracheal intubation and extubations
4. Supraglottic airways
5. Laryngeal Mask Airway (LMA)
6. Physician-ordered rapid sequence intubation/induction
7. Endotracheal suctioning and care
8. Transtracheal suctioning
9. Ventilatory management
10. Physician-ordered tracheotomy care
11. Physician-ordered CPAP administration
12. Physician-ordered needle chest decompression
13. Physician-ordered peripheral intravenous catheter and phlebotomy
14. Physician-ordered intraosseous infusion
15. Physician-ordered glucose administration
16. IV/IO bolus medications
17. IV/IO infusion medications
18. Sublingual, oral, and buccal medication administration
19. Subcutaneous and intramuscular medication injections
20. Endotracheal tube medication administration
21. Nasogastric tube placement
22. Capnography and capnography monitoring
23. Standard ECG/EKG monitoring
24. Physician-ordered manual defibrillation and cardioversion
25. Transcutaneous pacing
26. Twelve-lead ECG/EKG monitoring
27. Normal spontaneous vaginal delivery (NSVD) of newborns

## **PARAMEDIC STUDENT HEALTH AND SAFETY**

It is our goal to provide a safe clinical experience for the student. We depend on preceptors to monitor any unsafe situations and to minimize the risk of injury or illness of our students.

### **PREVENTION:**

As part of their pre-entry health screening, students receive required immunizations to protect them from communicable disease. They also receive infection control training before being scheduled for clinical studies. As a courtesy, your area/service provides students with necessary personal protective equipment (PPE) with which to protect them from communicable disease. Please make sure the student knows where to find appropriate PPE and that he or she uses it appropriately and consistently.

### **EXPOSURE TO COMMUNICABLE DISEASE:**

If a student is injured or exposed, or feels he or she has been exposed to a communicable disease during a clinical or field shift, the student has been instructed to notify you the preceptor. Here is a listing of steps to take after an exposure or injury is reported to you.

- (1) Provide any necessary first aid treatment including cleansing the exposed area with soap and water, or saline eye wash if the eyes are involved.
- (2) Contact Tim Rinehart, the Department Clinical Coordinator, at (501) 771-6021 or any of the faculty members, at (501) 812-2339 during weekday office hours. One of the faculty members will come to your site, if necessary.

### **Emergency Information for exposure related incidents:**

Emergency Department

Personal Physician

## **WHAT PRECEPTORS SHOULD EXPECT**

### **ARRIVAL AT CLINICAL OR FIELD SITE:**

When a student presents to the clinical or field site, the student will introduce himself or herself to the appropriate personnel, and then be assigned to a preceptor for the day. The student should work with the preceptor for the duration of the shift. Meals and breaks should be scheduled by the preceptor. If the student arrives late or is not dressed properly, he or she should be asked to leave the area and to contact the department chair for counseling before any shift may be rescheduled.

### **UA-PTC PARAMEDIC PROGRAM OFFICIAL STUDENT UNIFORM**

The official identification badges provided by the department shall be worn on the uniform so that the student's identity and student status is readily visible to patients and staff, and others who may be present.

Students must have the following items with them at all times: stethoscope, eye protection, required identification. Students must wear shoes with closed toes and heels.

Other than a watch, wearing jewelry is discouraged. If worn, jewelry must be limited to the following two items during clinical and field internship rotations: a wedding ring, and one pair of earrings that do not extend below the ear lobe.

### **CLINICAL AREAS**

In the clinical areas, students will wear their UA-PTC Departmental polo and appropriate pants, shoes, etc.

### **OPERATING ROOM**

Students are required to wear the surgical scrubs provided in the operating room area. They are not allowed to take these surgical scrubs home.

### **HOSPICE**

Casual business attire is the minimum standard. An example of this dress code would be a dress shirt with buttons, a belt, slacks, and dress shoes with dark socks. No tee shirts, blue jeans, or tennis shoes are allowed.

### **FIELD INTERNSHIP**

Navy pants are required and cannot be bloused, denim, or blue jeans. Traditional on-campus paramedic students are required to wear grey Polo shirts approved by the department with specific UA-PTC insignia. All paramedic students are required to wear black belts, black socks, black boots or shoes, black shoe laces, paramedic intern name tag. A watch is the only required jewelry.

## **STUDENT IDENTIFICATION (NAME TAGS):**

Official picture identification badges are provided by UA-PTC

## **EQUIPMENT AND SUPPLIES:**

The student must present with the following tools:

1. Stethoscope
2. Watch with some mechanism to count seconds
3. Trauma Shears
4. Black ink pen
5. Pen light
6. Protective eye wear

## **OTHER GROOMING AND DRESS ISSUES:**

Hair will be off the collar in back (men & women) plain clasp or hair clips only

Men will be clean shaven or beards & mustaches neatly trimmed.

No visible body piercing

Students may not wear caps to clinical or field rotations

Students must arrive at clinical and field rotations clean, free of body odor or offensive breath

Students arriving for clinical or field rotations inappropriately attired, poorly groomed or without necessary equipment, will be sent home & will not attend any further rotations until counseled by the department chair.

Fingernails must be kept clean and neatly trimmed.

Students may be asked to cover tattoos during patient care rotations.

Hair should be neat and well groomed. Unless hair is cut short enough to remain close to the head and off the collar, it must be pulled away from the face and secured in such a manner that no hair falls into the face or is in easy reach of a patient. Students are required to maintain an appearance that is both professional and appropriate at all times when scheduled for rotations in an area where patient care is performed. Personal appearance should be such that it instills confidence in patients in the student's abilities, performance, and professionalism.

Make-up and cologne should be applied sparingly.

Other than wearing a watch, jewelry is discouraged. If jewelry is worn, it must be limited to the following two items during clinical and field internship rotations: a wedding ring and/or one pair of earrings that do not extend below the ear lobe.

## **SCORING AND DOCUMENTATION**

(Upper and front page of Clinical Rotation Summary Form)

This section will help the preceptor to fairly score students while achieving a high degree of inter-rater reliability. Each part of the Clinical or Field Rotation Summary Form is explained below:

The top of the clinical and field internship shift summary form includes the following information (highlighted in yellow or grey) that the preceptor should verify and information that needs to be completed. This section requires recording of the:

1. EMT or Paramedic student's name
2. Date of the clinical or field shift
3. Location of the clinical or field shift
4. Time of student arrival in the clinical area
5. Time of student departure from the clinical area
6. The clinical skills ratings (explained below)

## **SCORING AND DOCUMENTATION**

(For operating room shifts and ALS airway management)

1. Paramedic student's name
2. Date of the clinical or field shift
3. Location of the clinical or field shift
4. Time of student arrival in the clinical area (only needed on one sheet for the day)
5. Time of student departure from the clinical area (only needed on one sheet for the day)
6. Circle the Modified Mallampati Classification of the patient
7. Indicated the number of intubation attempts and ventilation sets performed on this patient
8. Check all procedures that the student performed including BVM ventilation, intubation, and auscultation of lung sounds after intubation.
9. Preceptor signature

## UAPTC-EMS Paramedic student Clinical Documentation

Student Name Printed: \_\_\_\_\_ Begin Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Clinical Site: \_\_\_\_\_ Shift Date: \_\_\_\_\_

Skills permitted this semester	# Performed		Cumulative Skill Assessment	Skills permitted this semester	# Performed		Cumulative Skill Assessment
	Successful	Unsuccessful			Successful	Unsuccessful	
Patient Assessment			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement	IV / IO Access			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement
Med Administration IV, PO, IM, SQ, IN, Nebulizer			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement	EKG Interpretation			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement
Supraglottic Airway Devices			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement	Intubation			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement
Synchronized Cardioversion			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement	Defibrillation			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement
External Pacing			<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement				<input type="checkbox"/> Competent <input type="checkbox"/> Developing <input type="checkbox"/> Needs Improvement

Case	Patient Info	Pertinent Diagnosis	Skills Observed	Skills Performed
1	Age: _____ Gender: _____			
2	Age: _____ Gender: _____			
3	Age: _____ Gender: _____			
4	Age: _____ Gender: _____			
5	Age: _____ Gender: _____			
6	Age: _____ Gender: _____			
7	Age: _____ Gender: _____			
8	Age: _____ Gender: _____			
9	Age: _____ Gender: _____			
10	Age: _____ Gender: _____			
11	Age: _____ Gender: _____			
12	Age: _____ Gender: _____			
13	Age: _____ Gender: _____			
14	Age: _____ Gender: _____			
15	Age: _____ Gender: _____			
16	Age: _____ Gender: _____			
17	Age: _____ Gender: _____			
18	Age: _____ Gender: _____			
19	Age: _____ Gender: _____			
20	Age: _____ Gender: _____			
21	Age: _____ Gender: _____			

**Preceptor Comments:** (General feedback AND any skills requiring additional practice) \_\_\_\_\_

Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Preceptor Name: \_\_\_\_\_

UAPTC-EMS Paramedic student  
Student Performance Daily Evaluation

Student Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Preceptor, please evaluate the student objectively, based solely on their performance during this clinical shift today and based on the student's semester progression in the program.

**Competent:** Performs without coaching, **No critical criteria.**

**Developing:** Performs with coaching, **No critical criteria.**

**Needs Improvement:** Needs additional practice, **1 or more critical criteria.**

**Critical Criteria** – Any activity or procedure that varies from the generally accepted standard operating procedures for a given situation that does or could potentially cause harm to a patient or others.

**2 = Competent | 1 = Developing | 0 = Needs Improvement**

***Affective Domain: Attitude and Professional Characteristics***

- |   |   |   |   |
|---|---|---|---|
| 2 | 1 | 0 | <b>Punctuality.</b> Student arrived on-time and prepared for clinical.                            |
| 2 | 1 | 0 | <b>Appearance.</b> Student is well-groomed, free of body odor, uniform is clean with no wrinkles. |
| 2 | 1 | 0 | <b>Conduct.</b> Student is respectful, demonstrates initiative, completes tasks thoroughly.       |

***Cognitive Domain: Learner Characteristics***

- |   |   |   |   |
|---|---|---|---|
| 2 | 1 | 0 | <b>Application.</b> Applies learned material effectively during patient care.                           |
| 2 | 1 | 0 | <b>Knowledge.</b> Demonstrates appropriate knowledge of subject matter, appropriate with curriculum.    |
| 2 | 1 | 0 | <b>Leadership.</b> Develops treatment plan, communicates with crew, and directs effective patient care. |

***Psychomotor Domain: Patient Care***

- |   |   |   |   |
|---|---|---|---|
| 2 | 1 | 0 | <b>Interview.</b> Capable of conducting a comprehensive patient/bystander interview.                        |
| 2 | 1 | 0 | <b>Assessment.</b> Performs thorough physical assessments as necessitated by chief complaint or impression. |
| 2 | 1 | 0 | <b>Intervention.</b> Competently performs various hands-on skills germane to the treatment plan.            |

**Preceptor Comments:** (General feedback AND any skills requiring additional practice) \_\_\_\_\_

Preceptor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Preceptor Name: \_\_\_\_\_

## UA-PTC Paramedic Program: Respiratory Care Objectives

Complete as many of the objectives listed below as possible:

Objective to Complete	# of times (tally marks are ok)	Verified by Respiratory Preceptor
Auscultate breath sounds, evaluate and classify		
Observe and assist with the administration and effect of updraft medications		
Obtain patient histories from charts & enter in FISDAP		
Observe CPAP therapy		
Observe BiPAP therapy		
Observe and participate in tracheal airway suction		
Observe ventilator settings and management		
Observe chest tube management		

### Respiratory Rotation Medication List

	Drug	Dose	Route	Preceptor Initials
1				
2				
3				
4				
5				
6				

## PROGRESSION AND EXPECTATIONS

**EMSC 12103 Clinical Experiences I** – This is the first clinical course where the student will be participating in selected clinical experiences as well as participating in field observations. Students will need close preceptor guidance in this first clinical course. Students should start working on diagnostic reasoning and decision making while they work on their role as a team member.

**EMSC 12203 Clinical Experiences II** – The second clinical course in the paramedic program with the student participating in selected clinical experiences as well as participating in field observations. Students will initially need close preceptor guidance for this second clinical course but they should be demonstrating an increased independence and the ability to perform a more comprehensive assessment and overall, a more complete proficiency in the clinical setting. Students should continue to work on their decision and reasoning skills as they refine their role as a team member.

**EMSC 23104 Field Internship** – This is the actual field experience of the paramedic program where the student participates in supervised prehospital care experiences. Emphasis at this point is on becoming a team leader in the field environment. Students at this point are expected to demonstrate a high level of independence, competence and proficiency in their clinical skills as well as the diagnosis and management of patients of all ages.

## COMPLETION OF EVALUATION FORMS

Students will complete documentation on each patient contact that they make filling in their age, gender, impression and/or differential diagnosis, LOC, Complaints, Event/Circumstances along with a summary of the treatments that the student successfully performed. After this the student should FIRST rate their own performance with the patient contact and then afterwards they should have the preceptor evaluate the performance of the student.

Please rate the listed clinical objectives using the following scale:

NA – Not applicable or not needed or expected

0 – Unsuccessful – required excessive or critical prompting; includes rating of “not attempted” when student was expected to try.

1 – Marginal – Inconsistent – Not yet competent

2 – Successful/Competent no prompting

**If at any point in the semester, you have concerns related to the student’s performance or the ability of the student to meet entry level competence as a field provider by the end of the program, please contact the Clinical Coordinator Tim Rinehart at 501-771-6021 or any of the other EMS Faculty at 501-812-2339**

Both the student and the preceptor will each rate the shift’s performance as to how the student was able to interrelate the above areas into a cohesive plan and management of their patient.

### Preceptor Policies

#### Low Preceptor Ratings

Based on student evaluations, the vast majority of students enjoy their clinical and field experiences which is mostly attributed to the preceptors. Inevitably, conflicts will arise between students and preceptors for any number of reasons. The faculty members in the Department of EMS realize that a rating system is a helpful scoring tool but not the definitive gauge for quality of instruction. However, the preceptor rating system is used as a routing system for student concerns. Therefore, every situation in which a preceptor receives at least three evaluations and an overall rating of less than 80% requires action by the department. The department chairman will discuss the reason for the low evaluations with the student and the preceptor individually and confidentially. The department chairman will either allow both sides to continue to work through the conflict or the student will be reassigned to a different preceptor. All discussions with students and preceptor will be documented in a preceptor and student file. All of the preceptors with evaluations lower than 80% will be monitored closely. Preceptors who receive overall evaluations below 80% over two consecutive sets of three student ratings per set may be taken off of the preceptor list depending upon the circumstances of the case.

## Preceptor Feedback

Each clinical and shift summary form has an opportunity for students to rate the clinical and field internship preceptors. This information is entered for each individual preceptor. At the end of each clinical or field internship period, each preceptor will receive a report of:

1. How students rated the preceptor as compared to other preceptors in the same clinical or field internship area.
2. How the preceptor rated student performance as compared to other preceptors in the same clinical or field internship area.

### Student Ratings of Preceptors

Evaluated online after each shift

#### Student's Rating of Preceptor

Clarity of instruction:	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Average	<input type="checkbox"/>	Below Average	<input type="checkbox"/>	Poor
General attitude and accessibility:	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Average	<input type="checkbox"/>	Below Average	<input type="checkbox"/>	Poor
Promoted patient contact:	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Average	<input type="checkbox"/>	Below Average	<input type="checkbox"/>	Poor
Valuable instruction:	<input type="checkbox"/>	Excellent	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Average	<input type="checkbox"/>	Below Average	<input type="checkbox"/>	Poor

## Emergency Department Paramedic Student Clinical Goals and Objectives

**Purpose of an Emergency Department Rotation:** This rotation should prepare students to assess and manage patients at the level of a paramedic as well as to build their patient care experience and knowledge while having a better understanding of how EMS integrates into the health care system.

**Objectives:** At a minimum, students will be expected to accomplish the following objectives during each Emergency Department rotation:

1. Perform and document at least 7 patient assessments, including recent and past medical history and physical exam. The assessment should include taking and recording vital signs and a review of all systems. Patient assessments to include the pathophysiology of diagnosis, mechanism of action of any medications given, in a SOAP style report.
2. Interact with patients and their families. Observe behavioral reactions to injury/illness.
3. Operate oxygen administration equipment and give oxygen as many times as possible.
4. Administer medications as many times as possible.
5. Record mechanism of action, dosage, route of administration and indications for any medications given.
6. Establish IV access as many times as possible.
7. Draw and prepare blood samples for laboratory studies as many times as possible.

**Goals:** It is the goal of the emergency department rotations to expose students to as many patient assessment/management experiences as possible with an emphasis on developing proficiency in performing the technical skills taught during the first semester such as endotracheal intubation, IV access and medication therapy. These experiences may include, but are not limited to:

1. Operating oxygen administration equipment and giving oxygen.
2. Performing peripheral IV insertion.
3. After observation and instruction, drawing blood samples via venipuncture or existing IV lines.
4. Assisting in ambulating patients from bed to chair, lifting and turning patients.
5. Assisting in cases of cardiac arrest as directed including performing CPR, managing the airway, endotracheal intubation, and electrical and pharmacological arrhythmia therapy.
6. Discussing with a preceptor the results of laboratory tests, and correlating results with patient management.
7. Reviewing operation of mechanical ventilator equipment, noting various settings.
8. Maintaining airway in unconscious patients using manipulation, positioning, oral airways, and suctioning.
9. Performing aseptic endotracheal suctioning.
10. Observing and assisting in setting up and maintaining IV infusion pumps.
11. Exposure to critical care diagnostic procedures.
12. Exposure to long term treatment plans and care of patients with multiple organ system failure.
13. Treatment modalities not normally utilized in prehospital medicine.
14. Exposure and assistance with other procedures not commonly performed in the prehospital setting such as:
  - a. Placement of central venous lines
  - b. Placement of arterial lines
  - c. Endoscopic procedures
  - d. Neurological assessments
  - e. Hemodynamic monitoring
  - f. Urinary catheterization

### **Labor and Delivery Clinical Goals and Objectives**

**Purpose:** The purpose of this rotation is to give students an opportunity to observe and assist with normal and abnormal deliveries as well as practice assessing the pregnant patient and newborn infant.

**Goals:** It is the goal of the Labor and Delivery rotations to expose students to as many patient assessment & management experiences as possible. These experiences may include, but are not limited to:

- Observe and assist abnormal deliveries including breech delivery, prolapsed cord, shoulder dystocia and limb presentation.
- Observe, assist in, and review management of patients with pregnancy induced hypertension, placenta previa, placental abruption, fetal distress, ruptured/leaking amniotic membranes, premature labor, and precipitous delivery.
- Observe delivery via cesarean section.
- Observe administration of epidural or subdural anesthesia.
- Performance of fundal massage after delivery.
- Observe and assist with medication administration including magnesium sulfate and Pitocin.
- Observe assessment and management of postpartum complications including perineal injury, retained placenta, and prolapsed cord.
- Observe and assist with neonatal resuscitation.
- Observe and assist with management of meconium aspiration.

**Objectives:** At a minimum, students should try to accomplish the following objectives during each Labor and Delivery rotation:

- Identification of the 3 stages of labor.
- Observe and assist with normal vaginal deliveries.
- Evaluation of neonate by determination of APGAR score.
- Observe and assist with routine care of newborn including evaluation of airway and ventilation, suctioning, oxygen administration, clamping/cutting umbilical cord, and temperature control.
- Inspect placenta.
- Inspect umbilical cord and attempt to identify artery and veins

**Pediatric Emergency Department  
Clinical Goals and Objectives**

**Purpose:** The purpose of the Pediatric Emergency Department (ED) clinical rotation is to enable paramedic students to observe and participate in the assessment and interventions for acutely ill or injured pediatric patients in preparation of doing these assessments/interventions independently in the out-of-hospital environment.

**Goals:** It is the goal of the Pediatric Emergency Department rotations to expose students to as many patient assessment & management experiences as possible. These experiences may include, but are not limited to:

- Observe and participate in pediatric patient care interactions.
- Observe and participate communicating with patients using various strategies of communication based on age and development.
- Participate in gathering patient history and performing a physical exam.
- Develop diagnostic skills by observing the process followed by the preceptor in arriving at his/her impression or medical diagnosis.
- Synthesizing a prehospital impression / differential diagnosis based on information gathered from the history and physical exam.
- Discuss the patient's treatment plan with the preceptor. By observing total patient care, the student will achieve greater knowledge of disease processes and definitive interventions that will improve the quality of care provided in the field.
- Observe the effects and side effects of drugs/medications taken by, or administered, to the patient. Assist in calculating any medication doses.

**Objectives:** At a minimum, students should try to accomplish the following objectives during each Labor and Delivery rotation:

- Measuring vital signs in the pediatric patient and the recognition of "normal" for the pediatric patient
- Identification of psychosocial development of the infant, toddler, preschooler and school aged children
- Evaluate how to approach and relate to the pediatric patient during physical assessment and treatment procedures
- Be able to estimate weight and age in the pediatric patient
- Identification of coping mechanisms used by the acutely ill pediatric patients and their families



## EMT CLINICAL/FIELD SUMMARY FORM

Student Name \_\_\_\_\_ Date \_\_\_\_\_ Location: \_\_\_\_\_

Crew Member #2: \_\_\_\_\_ Time in: \_\_\_\_\_ Time out: \_\_\_\_\_

Preceptor Name \_\_\_\_\_ Supplemental Documentation: Y N

**(Printed)**

### PATIENT OBSERVATIONS

Please keep track of the patients that you observed by using the appropriate boxes. **(All information should be obtained)**

Skill	Pt #1	Pt #2	Pt #3	Pt #4	Pt #5
Nature of Call					
Age & Sex of Patient					
Signs & Symptoms					
Allergies					
Medications					
Past Medical History					
Events Leading to the Injury or Illness					
Treatment					
Destination /Outcome					

## OVERALL STUDENT EVALUATION

To the **preceptor**: We thank you for your expertise and assistance with our students. The clinical grade is very important to the student and the faculty. Please provide an honest overall rating of the student's abilities.

✓ Please check the statement below that best describes the student's internship performance on this date.			
Yes	No	NA	
			Was the student on time for the shift?
			Did the student present a professional image?
			Was the student knowledgeable about BLS skills?
			Was the student knowledgeable when questioned about basic concepts?
			Was the student able to follow directions?
			Did the student observe all rules pertaining to patient confidentiality?

### Summary (indicate with tally marks)

# Patient Contacts for this shift		
# Emergency Calls		
# Non-Emergency Calls		
<b>Activity</b>	<b># Student Observed</b>	<b># Student Performed</b>
<i>Sample Skill</i>		
Vital Signs		
Oxygen Administration		
Patient Ventilation		
Airway Suctioning		
CPR		
Bleeding Control and Bandaging		
Splinting		
Spinal Immobilization		
List Other Skills:		

I, \_\_\_\_\_, have reviewed **BOTH** sides of this evaluation with my preceptor  
 (Student Signature) and we have discussed my performance, strengths, and weaknesses.

\_\_\_\_\_  
 (Preceptor Signature)

### PRECEPTOR COMMENTS:


## **THANK YOU!**

Thank you for your willingness to precept our paramedic students. Your training and mentoring of these students will help to assure a high educational standard at the UA-PTC Paramedic Program. Your honest assessments of their abilities and competencies will go a long way in maintaining the integrity of our field and clinical training. If you have any questions about the program or a policy that may not be covered here, please feel free to contact the Department of EMS office (501) 812-2339.

### Preceptor Contact Form

Preceptor First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Credentials or title: \_\_\_\_\_

Clinical or Field Internship site: \_\_\_\_\_

Electronic mail: \_\_\_\_\_

Business Phone #: \_\_\_\_\_

Mobile Phone # (for field preceptors): \_\_\_\_\_

I have read the preceptor manual and understand what is required of me in terms of rating the student and what to do in case of an accidental bloodborne pathogen exposure or injury.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return to:  
Department of EMS  
3000 West Scenic Drive  
North Little Rock, AR 72118  
[emsprograms@uaptc.edu](mailto:emsprograms@uaptc.edu)