		CALIFORNIA PA	ARAMEDIC F	ΊEL	D IN	TERN	ISHIF	P DAII	LY PE	RFORMANCE RECORD
INTERN		DATE		P	ARAMEI	DIC PRO	GRAM -	- Imper	ial Valle	ey College INTERNING AGENCY/UNIT #
SHIFT #	TIME IN:	OUT:		PI	RECEPT	OR:				SUBSTITUTE PRECEPTOR:
DIRECTIONS: Sections are to be completed each applicable category. Comments regard	by the intern. Each ling runs should be	run must be rated by the inter	rn and preceptors in rided.			RATING	1- Fail	s to Per	form	2 — Borderline-inconsistent 3 - Competent
Patient Information and Chief Complaint		Treatment Rendered	ALS Patient Contact (Y/N)		Scene Management	Assessment/Tx.	Communication	Leadership	Treatment Skills	COMMENTS
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Preceptor must provide a written	summary of to	day's performance			SUMMA	ARY OI	PERF	ORMA	NCE	
Drills/Demonstrations										
PLAN FOR IMPROVEMENT (By Pr	eceptor)									
PRECEPTOR SIGNATURE CERT. #			RT. #				SUBSTI	ITUTE P	RECEPT	OR SIGNATURE CERT. #
INTERN SIGNATURE							IVC REF	P. SIGNA	TURE	

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CALIFORNIA PARAMEDIC FIELD INTERNSHIP DAILY PERFORMANCE RECORD

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INTERN		DATE		P	ARAMEI	DIC PRO	GRAM -	- Imper	ial Valle	y College	INTERNING AGENCY/UNIT #
SHIFT #	TIME IN:	OUT:		PF	RECEPT	OR:					SUBSTITUTE PRECEPTOR:
SHIFT # DIRECTIONS: Sections are to be completed by each applicable category. Comments regarding	the intern. Each run mus ng runs should be made in	st be rated by the intern and pre n comments area provided.	ceptors in		ļ	RATING:	1- Fails	to Per	form	2 — Borderline-inconsis	stent 3 - Competent
Patient Information and Chief Complaint	Treatm	nent Rendered	ALS Patient Contact (Y/N)		Scene Management	Assessment/Tx.	Communication	Leadership	Treatment Skills		COMMENTS
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