Skills Assessment of Paramedic Competency for Kern County Accreditation

Pre									NNS			10	9	8	7	6	5	4	ω	2	1		ALS Contact	If you	"ALS	conta	Direc	Intern:		
Preceptor Signature:									1MA	SUMMARY OF PERFORMANCE: Preceptor must provide a written summary of intern's performance.												Age	_	If you are using this form for simulations put "LAB" in the run number column.	"ALS contact" must have 2 or more ALS procedures (ie IV and a med or IV and a 12 lead)	contacts and receive a "3" in each category within the "Final Rating" to complete accreditation process. This can be accomplished via run completion, drills, demonstraions or discussion.	Directions: Each run must be rated by the preceptor in each applicable category. The preceptor will assure that the intern receives pr	rn:		
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