



COUNTY OF VENTURA HEALTH CARE AGENCY		EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: Paramedic Preceptor		Policy Number: 319	
APPROVED: Administration:	 Steven L. Carroll, Paramedic	Date: December 1, 2008	
APPROVED: Medical Director	 Angelo Salvucci, MD	Date: December 1, 2008	
Origination Date:	June 1, 1997	Effective Date December 1, 2008	
Date Revised:	July 10, 2008		
Last Date Reviewed:	September 11, 2014		
Next Review Date:	September, 2017		

- I. PURPOSE: To establish minimum requirements for designation as a Ventura County Paramedic Preceptor.
- II. AUTHORITY: Health and Safety Code, Sections 1797.214 and 1798.
- III. POLICY:
  - A. A Paramedic may be designated a Paramedic preceptor upon completion of the following:
    1. 6 months, (minimum 1440 hours) practice in Ventura County as a Level II Paramedic.
    2. Written approval submitted to VC EMSA by employer.
    3. Written approval submitted to VC EMSA by the Prehospital Care Coordinator at the base hospital of the area where the Paramedic practiced the majority of the time.
    4. Successful completion of The Ventura County Emergency Medical Services Agency (VC EMSA) Paramedic Preceptor Training course.
    5. Written notification of intent to practice as a Paramedic Preceptor shall be submitted to VC EMSA prior to preceptor working in this capacity.
  - B. The Paramedic Preceptor will be responsible for the training, supervision and evaluation of personnel in Ventura County who are preparing for accreditation or completion of requirements for Level I, Level II or EMT ALS Assist authorizations, and Paramedic Interns.
  - C. A preceptor shall not precept or evaluate more than one person at a time.
  - D. Paramedic Interns: Preceptors must directly observe the performance of all "Critical Procedures" and must be located in a position to immediately assume control of the procedure. The preceptor may not be functioning in any other capacity during these procedures.

1. Critical Procedures:
  - a. Endotracheal Intubation
    - 1) Paramedic Intern shall be limited to one attempt in difficult intubations (e.g., morbidly obese patients, neck or facial trauma, active vomiting, massive oropharyngeal bleeding).  
The intern will not make a second attempt.
  - b. Needle Thoracostomy
  - c. Intraosseous needle insertion
  - d. Childbirth
  - e. Drug Administration
  - f. PVAD
  - g. Intravenous Access when patient requires immediate administration of fluids and/or medication(s).
- E. Paramedics acting as preceptors for paramedic interns need to meet State of California, Title XXII requirements and successfully complete the Ventura County Preceptor Training course.
- F. Each preceptor will be evaluated by their intern or candidate at the end of their training period. This evaluation will be forwarded to the preceptor's employer

**Recommendation Form**

**Employer: Please instruct the Paramedic to complete the requirements in the order listed. Upon employer approval the employer will contact the PCC prior to Paramedic contacting PCC for approval.**

\_\_\_\_\_, Paramedic has been evaluated and is approved to provide EMS Prehospital Care in the following instances. S/he has met all criteria as defined in Ventura County EMS policies. I have reviewed documentation of such and it is attached to this recommendation.

**Please initial the appropriate box**

**Paramedic Preceptor**

- \_\_\_\_\_ All the requirement of level II met.
- \_\_\_\_\_ 6 months (minimum 1440 hrs.) practice in Ventura County as a Level II Paramedic.
- \_\_\_\_\_ Successful completion of the VC EMS Preceptor Training course.
- \_\_\_\_\_ Approval by employer
- \_\_\_\_\_ Approval by the PCC at the base hospital of the area where the Paramedic practiced the majority of the time during the previous year.
- \_\_\_\_\_ Notification of VC EMS
- \_\_\_\_\_ Completion of Curriculum Vitae

Please sign and date below for approval.

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Date:

\_\_\_\_\_  
PCC, BH

\_\_\_\_\_  
Date: