

County of San Luis Obispo Public Health Department
 Division: Emergency Medical Services Agency

Policy 341 Attachment B
 Effective Date: 01/01/2026

Paramedic Accreditation - Field Evaluation Completion Form

Prior to accreditation in the County of San Luis Obispo, a paramedic must complete the following orientation under the direction of a Field Training Officer or other EMS Agency designated individual (preceptor).

This form completes the Paramedic Application for Accreditation requirements and must be returned to the EMS Agency upon field evaluation completion.

Paramedic Name:

FTO/Preceptor Name:

Agency:

Field Evaluation Completion Requirements

- ☐ Reviewed the County of San Luis Obispo EMS system design and structure.
- ☐ Reviewed the County of San Luis Obispo Policies and Procedures.
- ☐ Demonstrated all County of San Luis Obispo scope of practice skills and procedures.
- ☐ Supervised field evaluation of ALS patient contacts (choose one of the following):
 - ☐ For paramedics licensed less than one year; Ten (10) ALS patient contacts.
 - ☐ For paramedics licensed more than one year; A minimum of five (5) ALS patient contacts.
- ☐ Passed County of San Luis Obispo Accreditation Test with a score of at least 80%.

ATTESTATION OF PARAMEDIC

I hereby certify that I have reviewed and understand the County of San Luis Obispo EMS system, policies and procedures.

Signature of Paramedic:

Date:

ATTESTATION OF FTO OR PRECEPTOR

I hereby certify that the above named paramedic has reviewed and understands the County of San Luis Obispo EMS system, policies and procedures and has successfully completed a field evaluation.

Signature of FTO/Preceptor:

Date of Completion: