

Being an Effective Clinical Preceptor



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ABSTRACT

The role of the Anesthesia Technologist has morphed over the decades. It has not been without the many important learning experiences the Surgical Department (and various departments) continues to provide. So many have learned on the job from physicians and clinicians that have been instrumental in molding this role into what it is today, all to the benefit of patient care and safety. By those teaching strategies, real-life experiences, and patient scenarios that do not always look the same, Anesthesia Technologists and Technicians have had the unique privilege to serve on Anesthesia Care Teams (ACTs) around the nation.

KEYWORDS

Clinical education, anesthesia technologist, anesthesia technician, preceptor.

INTRODUCTION: REVIEW OF ANESTHESIA TECH EDUCATION

Anesthesia Technology education was mainstreamed for the first time in 2010. The dedication of two frontrunners, Mrs. Victoria Reyes, Cer. AT, LVN and Mr. Michael Boytim, EdD, CRNA spearheaded the start of The Kaiser Permanente School of Anesthesia Technology in Affiliation with Pasadena City College. Through the creation of the COA-ATE, the first accredited program was born. Since then, there are currently eleven accredited programs that train Certified Anesthesia Technologists nationwide.

The importance of bridging classroom knowledge with clinical practice is not only one of the keys to success, but necessary for the connection of didactic learning to become experiential learning. Clinical education connects the dots, fills the gaps, and brings to life every bit of information given in the classroom, discussion, and/or simulation. The clinical preceptors bring that education to life, each with their own flare, set of specific skills, and approaches to the best clinical practice.

THEORETICAL APPROACHES TO CLINICAL LEADERSHIP

Effective teaching and leadership methods are part of an integral quality in all healthcare professionals. The anesthesia technology clinical preceptor is the leader and

educator in this case. Unfortunately, post-global crisis, crucial leadership skills are needed not only to navigate stressful situations with the collaboration of interprofessional health care teams, but also to lead with innovation and find solutions. Scholars have taken the time to research what approaches make a leader shine above the rest and the tools it takes to do so. *Trait Theory* suggests that “effective leadership was associated with traits such as intelligence, extroversion, confidence, and energy. Later studies emphasized ambition, sociability, assertiveness, and adaptability” (Olden & Erwin, 2023). Through many studies, the research is conclusive to naming so many traits that give little practical advice. In more recent research, emotional intelligence, integrity, self-confidence, and others are attributed to successful leadership. The *Skill Theory* focuses on technical, conceptual skills, and human skills. The technical aspect refers to the ability to make things (e.g., making a product of service available). In other words, making an ultrasound suddenly appear when they are technically all in use. The conceptual skills are skills for working with ideas to produce innovative ideas, projects, etc. (i.e., finding better ways for anesthesia machine care during COVID). The human skills work for collaborating with people, being able to mentor, and/or effectively communicate with all employees, colleagues, etc. A key approach for all preceptors and those in leadership. The *Behavior Theory* investigates the skills and traits of a leader and studies their conduct, actions, and behaviors. “Behavior theory examines leadership behavior (sometimes called *leadership style*) and how it influences leadership effectiveness. It looks at what the leader does—how they behave or conduct themselves” (Olden & Erwin, 2023). There are two dimensions of leadership behavior; 1. Consideration Behavior: the leader is considerate of the worker’s feelings, ideas, and concerns. 2. Initiating Structure Behavior: the leader initiates the work needed, along with the tasks and structure of the job to complete the goals successfully.



PERSONALITY TRAITS OF A SUCCESSFUL PRECEPTOR / LEADER

Personality traits of successful leaders have been widely studied over the last 140 years. Previously known as the “great man” theory, scholars thought only certain leaders were born with specific characteristics that predispose them to take charge and lead others (Carlyle, 1841). Personality is not a concrete idea, but a complex phenomenon with a wide variation among individuals. The Big Five or OCEAN model of personality is a largely accepted model that describes five personality traits: “Openness (imaginative, creative, open minded), Conscientiousness (goal oriented), Extroversion (positive attitude, sociable), Agreeableness (accommodating, adaptable), and Neuroticism (need for stability, pessimistic)” (Weiss, D., Tillen, F. & Morgan, M. J., 2024). While the research suggests these traits to be the most successful, we are all aware of the wonderfully colorful anesthesia techs we have all been privileged to learn from across our great nation. Whether a preceptor is a fellow anesthesia technologist or technician, a CRNA, or physician, our experiences may be in different timelines but are potentially similar to one another.

FOUR EMOTIONAL INTELLIGENCE DOMAINS

Authenticity—defined as “individuals behaving in a way that aligns with their sense of self and accepting themselves fully” (Koç Aslan & Sarica, 2025). Emotions have a way of dictating our thoughts and thoughts, our actions. There is something to be said for someone who holds the four emotional intelligence domains: *Self-Awareness, Self-Management, Social Awareness, and Relationship Management*. A leader with self-awareness can be cognizant of their emotions, describe their emotions, describe their actions, and acknowledge personal weaknesses and strengths with an accurate self-assessment. A preceptor with such awareness is able convey reasons behind their decisions and knows oneself enough to know when to admit failure. Some spend years of their life trying to accomplish this. Knowing oneself leads to effective leadership and so much more in life. Guiding a student is no different. We do not always make the right choices, but such a leader can learn from those choices and pass on the knowledge of those errors. One who has successful *self-management* can moderate negative emotional responses from others, remain calm in stressful scenarios, and adapt to an ever-changing environment. This speaks so much to the environment we all work in every day. A surgical case does not always look the same for each patient given their comorbidities or each provider with specific needs or wants. Focus and reaction matters on how next steps in all scenarios are decided on and taught. A

leader who is *socially aware* has a talent for understanding others, teams, and organizations at their core. They are also open to other perspectives, understanding other cultures, and the unspoken rules of a group organization. One who contains good *relationship management* can resolve conflicts successfully, coach or mentor others, while inspiring others with a compelling vision. In most healthcare facilities or organizations, leaders /preceptors are chosen based on years of experience or expertise, but the responsibility increases as does the skill of leading people. Being a part of the ACT is in the business of people. Patients are evaluated physically, mentally, and emotionally. Having the understanding and emotional intelligence to have personal strategies to influence others is a true gift and skill. This makes a leader have employees, colleagues, and students that want to follow them, who look for their input, and seek out mentoring from them. These are most effective in our field because we are working with anesthesia technology students and/or new hires. Respectively, we are with patients in high-stress, high-reward (most of the time) situations. We want to have the ability to understand our emotions, keep them intact when a student may be emotional or a patient is upset. Relationship management allows the tools to strategize, express, and influence others effectively.

CHALLENGES OF OR-BASED INSTRUCTION

Making the first connections between classroom instruction to the clinical setting can be overwhelming for anyone, but especially an anesthesia tech student. The “greener” to student, the more daunting it can be for their first patient interaction. According to V. Piliposyan, Cer. ATT (personal communication, February 26, 2026), “a students’ first clinical rotation can be intimidating. I have found that assigning clear tasks—such as covering specific rooms alongside another anesthesia tech can make a tremendous difference. Students feel more engaged and begin to anticipate what is needed for current and upcoming cases. This active involvement builds both confidence and critical thinking skills.” The challenges come when staffing is an issue, the case load is



high, and the tech-to-room ratio is uneven. Having a student when the responsibility is higher than normal and the stress of taking care of the “priority” cases are even more pressing, can be the most difficult. Finding balance in such cases is usually difficult, but not always unattainable. Expect the unexpected, prepared for the worst, hope for the best, and do it all with dignity.

There are hospitals that are large educational facilities that contain medical students, anesthesia residents, nursing students, scrub tech students, etc. While those environments can be the most educational and rewarding for all involved, sometimes it can create a ‘space issue.’ If anesthesia tech student-learning is not advocated for by the preceptor or management, it can be pushed to the wayside. Advocate!

Lastly, but not least, learning to work with different personalities and all occupations can be a culture shock. Healthcare is a melting pot of interdisciplinary collaboration of professionals out to accomplish the same goal. Utilizing and understanding the traits mentioned earlier can be a helpful tool in learning how to work alongside everyone effectively regardless of title or position.

OPERATING ROOM AS A LEARNING ENVIRONMENT


The OR has characteristics that are unique in comparison to other areas of care. It can be fast-paced and a high-acuity level of patient care. Interdisciplinary teamwork consists of many various roles geared to achieve patient success and safety, while using real-time concepts. There is exposure to anesthesia equipment and technology, airway tools, as well as exposure to medications, volatile agents, sterile equipment, and the skills to use them. “Some clinical days feel like a whirlwind and sort of like a daze at the end of a shift but being a part of shaping students to be an initiative-taking member of the ACT and try to leave them with something productive each day” (A. Gallegos, Cer. ATT, personal communication, March 23, 2026).

The development of professional communication is one of the most important aspects of the job. According to G. Maritim, Cer. AT (personal communication, February 26, 2026), “being a preceptor is not only about teaching technical skills (e.g., understanding surgeries and procedures). It is also about helping students build confidence, judgment, and the ability to communicate clearly with the team. Watching them grow into capable, thoughtful members of the ACT is one of the most rewarding parts of the role.” Much can be lost in translation if communication is unclear or assumption is in place of fact. That is when errors can occur when it is more than avoidable. We need to take the time and effort it takes to discuss plans, understand

the needs, and pay attention to the details. Our role is all about the details! Showing a student how to be present and remembering that any one of their patients could be their mother, father, husband, wife, child or friend, is imperative, not to become callus to the patient's situation, and to be intentionally thoughtful (A. Bowmen, Cer. AT, personal conversation, February 25, 2026). Positive reinforcement does wonders for people in a setting that is not always textbook and straight forward.

A PRECEPTOR'S EDUCATIONAL OPPORTUNITY

Through a collection of personal quotes and conversations with fellow clinical preceptors, here are some things to consider from one of the most experienced technologists out there: "Preceptors should help facilitate learning to ensure patient safety, provide constructive criticism and feedback, act as a resource to the student, and demonstrate professionalism, compassion, and competence. One of the greatest gifts we can pass on to our students is learning how to be prepared as one of my mentors said and I quote from the late great John Wooden, 'Failing to prepare is preparing to fail.' This goes way beyond the basketball court. This is something to follow in our lives. If we can pass this onto our students, it will help them immensely" (M. Dolan, PharmD, Cer. ATT, personal communication, March 3, 2026). Be the clinical preceptor you would want to have.

Special thanks to all the Clinical Preceptors that contributed to sharing your own thoughts and experiences in your role. You make a difference! 

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Continuing Education Quiz

PAGE 1 of 2

To test your knowledge on this issue's article, provide correct answers to the following questions on the form below. Follow the instructions carefully.

- 1. Effective leadership and teaching are part of the _____ in all healthcare professionals?**
 - A) Necessary tasks
 - B) Theoretical obligations
 - C) Integral quality
 - D) Daily duties
- 2. The Skill Theory focuses on: Technical skills**
 - A) True
 - B) False
- 3. The Trait Theory is associated with traits, such as: (Choose all the apply)**
 - A) Human skills
 - B) Intelligence
 - C) Energy
 - D) Adaptability
 - E) All the above
- 4. The ability to work with people in collaboration or mentorship describes:**
 - A) Leadership style
 - B) Human Skill theory
 - C) Personality
 - D) All the above
- 5. There are five dimensions of leadership behavior.**
 - A) True
 - B) False
- 6. The OCEAN model of personality is a largely excepted model that describes personality traits. What are those 5 traits?**
 - A) Neuroticism
 - B) Openness
 - C) Introversion
 - D) Acceptance
 - E) Conscientiousness
 - F) Agreeableness
 - G) Extroversion
- 7. Self-management speaks to the ability to adapt in any situation, stress scenarios, and the ever-changing environment.**
 - A) True
 - B) False
- 8. A clinical preceptor is a key motivator for all students currently enrolled in anesthesia technology programs. There are _____ emotional intelligence domains all clinical educators should strive to obtain.**
 - A) 1
 - B) 2
 - C) 3
 - D) 4
 - E) 5
 - F) 6
- 9. Hospitals are melting pots of _____ of professionals seeking to accomplish patient success and safety.**
 - A) Difficult people
 - B) Different cultures
 - C) Interdisciplinary collaboration
 - D) Positions
- 10. _____ says, "Failing to prepare is preparing to fail." As clinical educators, we much be ready for every scenario and opportunity to build up the next generation of Anesthesia Technologists.**
 - A) Albert Einstein
 - B) Michael Jordan
 - C) John Wooden
 - D) Mookie Bets

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| 1. A B C D | 6. A B C D E F G |
| 2. A B | 7. A B |
| 3. A B C D E | 8. A B C D E F G |
| 4. A B C D | 9. A B C D |
| 5. A B | 10. A B C D |

Quiz 1

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