

Paramedic 1/Intermediate/Advanced EMT Skills Days Schedule

PERCOM EMS Academy Practice Sessions

This schedule is designed for 8 hour per day blocks of training for the hands-on psychomotor skills components. It may be divided in smaller or larger blocks as indicated, but should include the following skills at a minimum. ALL students are required to practice all the skills listed FIRST. Testing must be achieved on separate days at a later date in a separate session (preferably at least a week following the last Practice Session). PERCOM students are required to attend TWO Practice Sessions and ONE Testing Session unless otherwise credited.

Students are barred from attending the first P1 Practice Session until after being cleared by the didactic lead instructor. This typically occurs after completion of all reading, coursework and homework through the Patient Assessment section (or as otherwise noted/updated on the School Announcements Pages). Students may ONLY RSVP for and attend the 2nd Practice Session until after having taken and passed the P1/AEMT Final Exam. Students should plan accordingly and target completion of their didactic coursework in such a manner as to allow plenty of time to RSVP for P1 Practice and Testing Sessions within the allotted total 9 months AEMT course or P1 section of the Paramedic course.

Students are BARRED from clinical and field rotations until they have performed in the designated Practice Session(s). **Students must produce a copy of the Paramedic 1 Entry Level Proficiency Verification Form to the instructor at the end of the first session for completion.** The instructor holds the right to either complete and sign the form or require that the student complete another session prior to receiving a signature from a PERCOM designated instructor. This form will be submitted by the instructor with all other skills documents to the PERCOM office. This helps assure that no student will be in the clinical and field rotation environment who is not adequately prepared to perform skills satisfactorily and safely under a preceptor's guidance. Receiving this form does not alleviate the student from attending a second Practice Session.

Many sites have minimum student numbers for a session to “make” (usually 3). No site date is GUARANTEED but students can help ensure their preferred sessions will “make” by communicating with fellow students who may also be

ready for skills. The Forum or the chat rooms are perfect opportunities for you to communicate with your fellow students on this issue and coordinate your RSVP's. *For students who cannot attend one or more of the scheduled sessions on the Course Calendar, a "1 on 1" option may be available but PERCOM must charge extra fees for this option.*

DAY 1

Preliminary Basic Competencies Testing (This beginning segment is designed to quickly assess students on basic competencies that each should hold as an EMT. Students MUST be prepared to test each item as an isolated skill one or more times and in a basic competency scenario one or more times. The number of times required is denoted on the P1/AEMT Lab Competencies Worksheet.)

AHA BLS CPR Skills – Isolated Basic Comp. Can be Peer Reviewed

- 1 and 2 Rescuer CPR/Adults (1)
- 1 and 2 Rescuer CPR/Children (1)
- 1 and 2 Rescuer CPR/Infants (1)
- BVM/Rescue Breathing/Adults (1)
- BVM/Rescue Breathing/Children (1)
- Automated External Defibrillator (1)
- Relief of Choking/Infants (1)
- Relief of Choking > 1 yo or older(1)

AHA BLS CPR Skills – Basic Comp. Scenarios - Must be Instructor Reviewed

- 1 and 2 Rescuer CPR/Adults (2)
- 1 and 2 Rescuer CPR/Children (2)
- 1 and 2 Rescuer CPR/Infants (2)
- BVM/Rescue Breathing/Adults (1)
- BVM/Rescue Breathing/Children (1)
- Relief of Choking/Infants (1)
- Relief of Choking > 1 yo or older (1)

Trauma Skills – Isolated Basic Competencies - Can be Peer Reviewed

- Spinal Restriction Supine (1)
- Spinal Restriction Seated (1)
- Joint Splinting (1)
- Long Bone Splinting(1)

Traction Splinting (1)
Hemorrhage Control (1)

Trauma Skills – Basic Comp. Scenarios - Must be Instructor Reviewed

Spinal Restriction Supine (2)
Spinal Restriction Seated (2)
Joint Splinting (2)
Long Bone Splinting (2)
Traction Splinting (2)
Hemorrhage Control (2)

Medical Skills – Isolate Basic Competencies - Can be Peer Reviewed

Intranasal Med. Admin. (2)
Inhaled Med. Admin (2)
Glucometer (2)
12 lead ECG Placement (2)

Medical Skills – Basic Comp. Scenarios - Must be Instructor Reviewed

Intranasal Med. Admin. (2)
Inhaled Med. Admin (2)
Glucometer (2)
12 lead ECG Placement (2)

FOLLOWING ABOVE CHECKOFFS, THE BELOW SKILLS SHOULD BE DISCUSSED/PRACTICE/INCORPORATED

Airway Monitoring with Devices

SaO₂
ETCO₂ – static and dynamic waveform

Airway Positioning

Head Tilt - Chin Lift
Jaw Thrust

Modified Jaw Thrust

Oxygenation with BLS Delivery Devices

Nasal Cannula

Simple Mask

Venturi Mask

Partial Non Rebreather

Non Rebreather

BLS Airway Adjuncts

NPA

OPA Basic Oral/Nasal Suctioning

DAY 2

Manual Ventilatory Assistance

BVM with O2

Mechanical Ventilatory Assistance

Ventilator

CPAP/PEEP

ETCo2 (Static and Dynamic Waveform)

Inhaled Medication Delivery with Nebulizer through ETT

Alternative Airway Devices

LMA

Combitube, KING, SALT

Tracheostomy Tube Insertion, Care and Replacement

Pediatric Airway Positioning

Head - Tilt Chin - Lift

Jaw Thrust

Modified Jaw Thrust

BLS Airway

Adjuncts

NPA

OPA

Basic Oral/Nasal Suctioning

Manual Ventilatory Assistance

BVM with O2

Pediatric Endotracheal Intubation

Pediatric Respiratory Compromise

IV Therapy Live

Phlebotomy

Live

DAY 3

IV Therapy Live Continued

Phlebotomy Live Continued

IM|SQ Medication

Intraosseous Infusion

Medical, Trauma, Cardiac

Medical Pt Assessment – (Pt Hx from Alert Pt, Comprehensive Normal Adult, Comprehensive Normal Pediatric, Medical, Cardiac, Focused vs. Multi-trauma or Altered Mental Status, NREMT)

Trauma

Endotracheal Intubation

Trauma Physical Exam/Patient Assessment

OB/Neonate and Other

Normal Delivery with Newborn Care

Abnormal delivery with Newborn Care

Simulation Practice – Minimums on Competencies Checksheet

DAY 4

Simulation Practice – Minimums on Competencies Checksheet

DAYS 5 AND 6 TESTING

Complete Simulation Practice – Minimums on Competencies Checksheet

TESTING on ALL Skills Checksheets Final Summative Proficiency Simulation Testing

***Instructors retain the right to turn away students who attend Practice Sessions unprepared. In the event this occurs, students will be required to schedule for another Practice Session at a fee of an extra \$309 if to attend a calendar scheduled session (or fee as updated on the Student Announcements Pages) plus processing to be paid to PERCOM prior to attending the rescheduled session. Students will also be required to pay the appropriate rescheduling fee if they have RSVP'd for a Practice or Testing Session but do not show up or cancel for any reason.

To avoid additional fees, students should only RSVP and attend sessions after they have memorized ALL skills sheets provided in the program and watched ALL skills videos provided in the program and on any DVD/CD that comes with their textbooks ***or using the online publisher resources associated with the textbook***. Students should also locate internet resources and videos for further study and preparation. YouTube is an excellent potential source. (Students who find local educators to assist them in prior practice tend to do better at the Practice

or Testing sessions, but outside practice is NOT required.) Students should also be sure to RSVP for sessions that they KNOW they can attend. RSVP's MUST be received by PERCOM by the deadlines posted in the Course Calendar and/or PERCOM Announcements on the Student Page. Late RSVP's are not accepted.

Students will be required to complete skills competency tracking using the appropriate spreadsheet through the Practice Sessions and continue practicing until all competencies are at least at 100%. **This should be completed by the end of the second Practice Session to prevent having to pay for and attend another Practice Session to complete these competencies.** Simulation competencies must be completed by the end of the first day of the P1 TESTING session. During, and the end of each Practice Session, the student is required to log into Platinum and carefully enter ALL data showing competency completion to be reviewed by the skills instructor either immediately after the session or within a time to be designated by the Skills Instructor. If the competencies are not completed within the time frame given or if the student fails to enter all competencies as completed into the system by the time the instructor marks final "Pass" or "Fail" in the Platinum system for the session, the student will be held responsible for incomplete competencies and may have to pay for and attend another Practice Session to complete the remaining competencies. **Final responsibility for ensuring all competencies are documented honestly and accurately rests solely with the student. Any dishonesty or deception by the student in entering the competencies for credit could lead to failure and potential removal of the student from the program.**

Simulation Practice/Skills Testing Session – 2 days

Students MUST successfully complete ALL required skills at the Testing Session or he/she will be required to schedule for another Testing Session weekend and must pay a Rescheduling Fee prior to rescheduling. This INCLUDES completion of all simulation requirements and simulation testing. **If the IV/Phlebotomy Live Stick Form or the Entry Level Proficiency Verification forms have not been completed and turned in to the PERCOM Program Director prior to the Testing Session, it should be completed and turned into the Skills Instructor to submit with all other testing documents following the session.**

Final Skills Testing that should be completed during this session includes:

IV Therapy

Medication administration – SQ, IM, IVP, Intranasal
(IVPBD is NOT tested at Paramedic 1 level.)

Intraosseous Therapy
(Manual and electric devices should both be tested if electric drill devices are available.)

Adult Airway Management – Intubation, ***Trauma Intubation, Nasotracheal Intubation*** and Alternative Airway Devices

Infant Intubation

CPAP/PEEP

Pleural Decompression

Needle Thoracostomy

NG/OG Tubes

Needle and Surgical Cricothyrotomy

Phlebotomy

Pediatric Respiratory Compromise

Cardiac Arrest Management with AED

Medical and Trauma Patient Assessment and Management to include:

Obtain Patient History from Alert and Oriented Patient

Comprehensive Normal Adult Physical Assessment

Comprehensive Normal Pediatric Physical Assessment

Trauma Adult Physical Assessment

Medical and Cardiac Scenario Assessment

Normal Delivery with Newborn Care

Abnormal Delivery with Newborn Care

Final Proficiency Assessment (simulation based)

BLS Skills to include:

Glucometer

Hemorrhage Control

Joint Splinting

Long Bone Splinting

Spinal Immobilization Adult Seated Patient

Spinal Immobilization Adult Supine Patient

Traction Splinting

CPR Adult, Child, Infant

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:									
YELLOW Indicates PlatinumPlanner Checksheets		Date ALL Competencies Completed:					* Indicates Needs Instructor		
<u>DAYS 1 and 2</u> * I nYellow Column indicates at least 1 PP checksheet must be by instructor							Scenario Checksheet(s)		
	Peer Monitored Successful Attempts		Instructor	Instructor		REQUIRED	In a	In a	Required
Required Minimum Lab Competencies - Adult		Peer Monitored Unsuccessful Attempts	Monitored Successful Attempts	Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	Scenario	Simulation	Minimum Instructor Checksheets As PASS
									Before
									Scenarios/
Adult Airway									
Airway Monitoring With Devices SaO ₂ ETCO ₂						5	5		
Airway Positioning- Head Tilt - Chin Lift Jaw Thrust Modified Jaw Thrust						5	5		
Oxygenation with BLS Delivery Devices Nasal Cannula Simple Mask Venturi Mask Partial Non Rebreather Non Rebreather						5	5		

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:									
<u>DAYS 1 and 2...</u>							<u>continued</u>		
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS
BLS Airway Adjuncts NPA OPA Basic Oral/Nasal Suctioning						2	2		
Bag Valve Mask - Adults						2	*1		1
Mechanical Ventilatory Assistance - Ventilator						1	1		
CPAP/PEEP						5	**2	2	1
Inhaled Medication Delivery with Nebulizer						4	**2		2
Supraglottic Airway Devices LMA Combitube SALT King LT						14	6	6	2

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:										
<u>DAYS 1 and 2...</u>							<u>continued</u>			
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS Before	
Direct Orotracheal Intubation-Adult						15	2	3	*10	
Nasotracheal Intubation						2			2	
Sterile Tracheal Suctioning						2	2			
Needle Cricothyrotomy						5	2	1	*2	
Surgical Cricothyrotomy						5	2	1	2	
NG OG Tubes						1	1			
Pleural Decompression						5	2	1	*2	
Intravenous Therapy Manikin						14	10	2	*2	
IV Therapy Live						2	2 live			
Phlebotomy Manikin						4	3		1	
Phlebotomy Live						1	1 live			

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:										
<u>DAYS 1 and 2..... Continued</u>										
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS Before	
IV Medication Administration						5	2	1	*2	
IM SQ Medication						3 ea.	1 ea.	1 ea.	**1 ea.	
Intranasal Medication						4	**2		2	
Intraosseous Infusion						5	2	1	*2	
Glucometer Assessment						2			2	
Urinary Catheterization						2	2			
Review Any Needed Skills & Practice	<i>Add #'s to Day 1 Categories</i>									

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:									
<u>DAYS 1 and 2continued</u>									
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS
Pediatric Airway Positioning- Head-Tilt Chin-Lift Jaw Thrust						5	5		
BLS Airway Adjuncts- NPA OPA Basic Oral/Nasal Suctioning						5	5		
BagValveMask - Pedi						3	2		1
Direct Orotracheal Intubation - Pedi						17	1	6	*10
Relief of Choking - Infants						2	*1		1
Relief of Choking - Pts > 1yo						2	*1		1

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:									
<u>DAYS 1 and 2.....continued</u>									
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS Before
Comprehensive Normal Pediatric PE						2	2		*2
Pedi Resp Compromise						1	1		
<u>MEDICAL, TRAUMA, CARDIAC</u>									
Comprehensive Normal Adult PE						2			*2
Obtain a Patient History Alert						2			*2
Medical Incl Cardiac Pt Ass Mgt						6	2	2	2
Trauma PE/Pt Ass						6	2	2	*2
AED						1			1
Cardiac Arrest Mgt with ACLS						1	1		
CPR 1 and 2 Rescuer for Adults, Children and Infants						3 ea	**2ea		1 ea
12 Lead ECG Electrode Placement						4	**3		1

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:									
<u>DAY 3</u>									
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS Before
Tracheostomy Tube Care & Replacement						1	1		
Tracheostomy Tube Insertion						1	1		
<u>TRAUMA</u>									
Trauma Endo. Intubation						6	2	2	2
Spinal Imm. Seated						3	**2		1
Spinal Imm. Supine						3	**2		1
Joint Splinting						3	**2		1
Long Bone Splinting						3	**2		1
Hemorrhage Control						3	**2		1
Traction Splinting						3	**2		1

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:									
<u>DAY 3....continued</u>									
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Successful Attempts	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS	In a Scenario	In a Simulation	Required Minimum Instructor Checksheets As PASS
<u>OB/NEONATE AND OTHER</u>									
Normal Delivery with Newborn Care						5	2	2	1
Abormal Delivery with Newborn Care						5	2	2	*1
Complete Outstanding IV's or Blood Draw Sticks	<i>Add #'s to Day 1 Categories</i>								
Complete any Outstanding Competencies on Any Skill									

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:								
<u>DAY 4</u>								
Formative Sims Practice								
	Minimum for Each Condition	Completed for Each Condition	Team LEADER Adult Patient Minimum 1 Successful	Team LEADER Geriatric Patient - Minimum 1 Successful	Team Leader Pediatric Patient - Minimum 1	Team Member - Minimum 5 Successful		
Respiratory Distress/Failure	1 (Pedi)							
Allergic Reaction/Anaphylaxis	1							
Hypoglycemia/DKA /HHNS	1							
Obstetric or Gynecologic	1							
Trauma - Blunt	1 (Pedi)							
Trauma Penetrating	1							
Trauma - Burns	1							
Trauma Hemorrhagic	1							
Normal Delivery with Newborn Care	2							
Abnormal Delivery with Newborn Care	2							
TOTALS for Team Member/Leader Columns								

PERCOM EMS Mediical Education Consortium P1/AEMT Lab Competencies Worksheet

Student Name:								
		Date ALL Competencies Completed:						
<u>DAY 5 and 6 TESTING</u>								
Required Minimum Lab Competencies - Adult	Peer Monitored Successful Attempts	Peer Monitored Unsuccessful Attempts	Instructor Monitored Success	Instructor Monitored Unsuccessful Attempts	SUM SUCCESSFUL ATTEMPTS	REQUIRED MINIMUM NUMBER OF SUCCESSFUL ATTEMPTS		
Final Summative Testing on All					1 ea	1 ea		
Final Summative Proficiency Simulation Testing - Selection from One of Any of Simulation Practice Topics					1	1		

PERCOM CLASSROOM SKILLS LAB
PHLEBOTOMY AND IV LIVE STICK DOCUMENTATION RECORD

Student Name

Successful Blood Draw # 1

Date: _____ Location of Draw: Hand AC Forearm

No. of Attempts Until Successful: _____

Device Used: Vacutainer Butterfly Needle Syringe

Comments: _____

Instructor/Preceptor Signature: _____

Student Name

Successful IV ACCESS #1

Date: _____ Location of IV: Hand AC Forearm Upper Arm

Catheter Used: 22 ga 20 ga 18 ga 16 ga 14 ga

IV Set: Microdrip Macrodrop Fluid Choice: D5W NS LR Saline lock

No. of Attempts Until Successful: _____

Comments:

Instructor/Preceptor Signature: _____

Successful IV ACCESS #2

Date: _____ Location of IV: Hand AC Forearm Upper Arm

Catheter Used: 22 ga 20 ga 18 ga 16 ga 14 ga

IV Set: Microdrip Macrodrop Fluid Choice: D5W NS LR Saline lock

No. of Attempts Until Successful: _____

Comments:

Instructor/Preceptor Signature: _____

Procedure Competency Form - **Endotracheal Intubation**
PercomOnline Inc., PERCOM EMS Medical Education Consortium

Student: _____

Date: _____

Intubation manikin

Pre-Procedure:

- _____ Recognizes procedure is necessary
- _____ Informs patient/family of procedure including risks and benefits and obtains consent.
- _____ Evaluates airway for potential difficulty
- _____ Addresses potential difficulty with appropriate plan for intubation
- _____ observes universal precautions
- _____ Pre oxygenates patient
- _____ Prepares and Checks equipment necessary for procedure (checks blade light, suction

Procedure:

- _____ Acts as the team leader and gives orders appropriately in sequence
- _____ Gives medications at appropriate time
- _____ Knows when to initiate intubation attempt
- _____ Manual dexterity with blade appropriate
- _____ Addresses problems during the intubation appropriately
- _____ Passes ET tube appropriately
- _____ Recognizes need to abort attempt and re-oxygenate

Number of successful intubations for this skills session _____

Number of unsuccessful intubations for this skills session _____

Instructor comments

Instructor name _____

Date _____

Instructor signature _____



ENTRY PROFICIENCY VERIFICATION BY INSTRUCTOR

Student Name: _____

I have performed preliminary practice/evaluation on the above student, and based on his/her performance in the Skills Practice Session(s) at which I was instructor, I feel that he/she is ready to perform each of the following skills while being monitored by a preceptor in the clinical or field rotation environment.

- IV therapy
- Phlebotomy using a Vacutainer
- Medication administration
 - Subcutaneous medication administration
 - Intramuscular medication administration
 - IV Push medication administration
- Intraosseous therapy
- Adult airway management with suctioning component (Intubation)
 - Failed Airway Techniques
- Dual lumen airway – Combitube, King LT, Laryngeal Mask Airways
- Infant Intubation
- ETCO₂ device use
- CPAP
- Foley catheters and sterile technique
- Needle Chest Decompression NG/OG tubes Needle and surgical cricothyrotomy
- Medical and Trauma Patient Assessment

Instructor Signature

Date

NOTICE: All AEMT/Paramedic students MUST declare their intentions as to which NREMT certifications they intend to achieve at the session where they are cleared to begin rotations. If you are an AEMT student ONLY, check AEMT below and sign. If you are a Paramedic student and are choosing to test AEMT while finishing the Paramedic program, check AEMT and sign below. If you are a Paramedic student and do NOT wish to test AEMT/Paramedic and only plan to test at Paramedic when you complete this course, check Paramedic and sign below. YOUR DECISION IS NON-REVERSIBLE AND WILL NOT BE CHANGED AFTER TODAY AND THE CHOICE MUST BE MADE TODAY AS PART OF YOUR CLEARANCE FOR ROTATIONS.

_____ AEMT Only

_____ AEMT/Paramedic

_____ Paramedic Only

Student Signature

Date



P1 FORMATIVE SIM PRACTICE CHECKSHEET

STUDENT NAME: _____

SKILLS SESSION (circle one) **Practice Session 1** **Practice Session 2**

P1 Testing Session

The Formative SIMS P1 2019 Topics (from the lab book) **MUST** be completed in order as listed below with simulated skills performed up to the number of times listed. These SIMS are designed to not only challenge the student(s) as team leaders and team members in relation to 911 calls over the various topics and age categories but also to allow for credit for simulated skills performances that will apply toward Appendix G, Column 4 requirements that are typically difficult to obtain in clinical or EMS rotations (and as are approved by the Advisory Council). The instructor must sign below verifying what was completed.

This form **MUST** be taken by the student to the subsequent P1 Skills Sessions and handed off to the instructor of that session at the beginning of the session. This will ensure completion of all mandatory SIMS Topics as well as required simulated skills and assessments.

It is the **RESPONSIBILITY** of the student to ensure this form is completed at each P1 lab session documenting SIMS and that it is presented to subsequent P1 Lab Instructors.

IMPORTANT NOTE: Students who do not present this form at each lab and do not complete all necessary lab and SIMS requirements will be required to schedule at a later Practice or Testing Session to complete and will be required to pay the rescheduling fee.

# Total	Topic – P1 2019 List	Inst. Initials	Instructor Name - Print
1	Respiratory Distress - Pedi		
2	Respiratory Distress - Geriatric		
1	Penetrating Trauma - Geriatric		
3	Penetrating Trauma - Adult		
1	Hemorrhage - Adult		
1	Diabetic Emergency - Pediatric		
3	Cardiac Arrest - Adult		
3	Cardiac Arrest - Geriatric		
1	Burns – Adult (Airway Compromise)		
1	Blunt Trauma - Pediatric		
1	Anaphylactic Reaction - Adult		
2	Abd Pain, Labor – Normal Delivery		
2	Abd Pain, Labor – ABNORMAL Delivery		

STUDENT NAME: _____

Simulated Skills to be credited based on completion of the above SIMS combos are listed below.

CPAP/PEEP	2						
Supraglottic Airways Successful Placement	6						
Direct Orotracheal Intubation – Adult	3						
Needle Cricothyrotomy	2						
Surgical Cricothyrotomy	2						
Pleural Decompression	1						
Intravenous Therapy	2						
IV Medication Administration – IVP	1						
Intramuscular Medication Administration	1						
Subcutaneous Medication Administration	1						
Intraosseous Infusion	1						
Direct Orotracheal Intubation Pediatric	6						
Trauma Physical Exam/Patient Assessment	2						
Trauma Endotracheal Intubation	2						
Newborn Delivery with Newborn Care	2						
Abnormal Delivery with Newborn Care	2						

Instructor Signature

Instructor Signature

Instructor Signature

Instructor Signature

Adult CPR and AED Skills Testing Checklist



Student Name _____ Date of Test _____

Hospital Scenario: "You are working in a hospital or clinic, and you see a person who has suddenly collapsed in the hallway. You check that the scene is safe and then approach the patient. Demonstrate what you would do next."

Prehospital Scenario: "You arrive on the scene for a suspected cardiac arrest. No bystander CPR has been provided. You approach the scene and ensure that it is safe. Demonstrate what you would do next."

Assessment and Activation

- | | |
|--|--|
| <input type="checkbox"/> Checks responsiveness | <input type="checkbox"/> Shouts for help/Activates emergency response system/Sends for AED |
| <input type="checkbox"/> Checks breathing | <input type="checkbox"/> Checks pulse |

Once student shouts for help, instructor says, "Here's the barrier device. I am going to get the AED."

Cycle 1 of CPR (30:2) *CPR feedback devices preferred for accuracy

Adult Compressions

- ☐ Performs high-quality compressions*:
- Hand placement on lower half of sternum
 - 30 compressions in no less than 15 and no more than 18 seconds
 - Compresses at least 2 inches (5 cm)
 - Complete recoil after each compression

Adult Breaths

- ☐ Gives 2 breaths with a barrier device:
- Each breath given over 1 second
 - Visible chest rise with each breath
 - Resumes compressions in less than 10 seconds

Cycle 2 of CPR (repeats steps in Cycle 1) Only check box if step is successfully performed

- ☐ Compressions ☐ Breaths ☐ Resumes compressions in less than 10 seconds

Rescuer 2 says, "Here is the AED. I'll take over compressions, and you use the AED."

AED (follows prompts of AED)

- ☐ Powers on AED ☐ Correctly attaches pads ☐ Clears for analysis ☐ Clears to safely deliver a shock
- ☐ Safely delivers a shock

Resumes Compressions

- ☐ Ensures compressions are resumed immediately after shock delivery
- Student directs instructor to resume compressions or
 - Student resumes compressions

STOP TEST

Instructor Notes

- Place a ✓ in the box next to each step the student completes successfully.
- If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to Instructor Manual for information about remediation).

Test Results Check **PASS** or **NR** to indicate pass or needs remediation:

PASS ☐ **NR** ☐

Instructor _____ Instructor Name _____ Date _____

Adult CPR and AED

Skills Testing Critical Skills Descriptors

- 1. Assesses victim and activates emergency response system (this *must* precede starting compressions) within a maximum of 30 seconds. After determining that the scene is safe:**
 - Checks for responsiveness by tapping and shouting
 - Shouts for help/directs someone to call for help *and* get AED/defibrillator
 - Checks for no breathing or no normal breathing (only gasping)
 - Scans from the head to the chest for a minimum of 5 seconds and no more than 10 seconds
 - Checks carotid pulse
 - Can be done simultaneously with check for breathing
 - Checks for a minimum of 5 seconds and no more than 10 seconds
- 2. Performs high-quality chest compressions (initiates compressions immediately after recognition of cardiac arrest)**
 - Correct hand placement
 - Lower half of sternum
 - 2-handed (second hand on top of the first or grasping the wrist of the first hand)
 - Compression rate of 100 to 120/min
 - Delivers 30 compressions in 15 to 18 seconds
 - Compression depth and recoil—at least 2 inches (5 cm) and avoid compressing more than 2.4 inches (6 cm)
 - Use of a commercial feedback device or high-fidelity manikin is highly recommended
 - Complete chest recoil after each compression
 - Minimizes interruptions in compressions
 - Delivers 2 breaths so less than 10 seconds elapses between last compression of one cycle and first compression of next cycle
 - Compressions resumed immediately after shock/no shock indicated
- 3. Provides 2 breaths by using a barrier device**
 - Opens airway adequately
 - Uses a head tilt–chin lift maneuver or jaw thrust
 - Delivers each breath over 1 second
 - Delivers breaths that produce visible chest rise
 - Avoids excessive ventilation
 - Resumes chest compressions in less than 10 seconds
- 4. Performs same steps for compressions and breaths for Cycle 2**
- 5. AED use**
 - Powers on AED
 - Turns AED on by pushing button or lifting lid as soon as it arrives
 - Correctly attaches pads
 - Places proper-sized (adult) pads for victim's age in correct location
 - Clears for analysis
 - Clears rescuers from victim for AED to analyze rhythm (pushes analyze button if required by device)
 - Communicates clearly to all other rescuers to stop touching victim
 - Clears to safely deliver shock
 - Communicates clearly to all other rescuers to stop touching victim
 - Delivers a shock
 - Resumes chest compressions immediately after shock delivery
 - Does *not* turn off AED during CPR
- 6. Resumes compressions**
 - Ensures that high-quality chest compressions are resumed immediately after shock delivery
 - Performs same steps for compressions

Child CPR Skills Testing Checklist



Student Name _____ Date of Test _____

Scenario: "You are home alone with a child, and the child suddenly collapses in front of you. The scene is safe and you have a cell phone with you, but no AED nearby. Demonstrate what you would do next."

Assessment and Activation

☐ Checks responsiveness ☐ Shouts for help/Phones 9-1-1 on cell phone ☐ Checks breathing

Cycle 1 of CPR (30:2) **CPR feedback devices preferred for accuracy*

Child Compressions

- ☐ Performs high-quality compressions*:
- Hand placement on lower half of breastbone
 - 30 compressions in no less than 15 and no more than 18 seconds
 - Compresses at least one third the depth of the chest, about 2 inches (5 cm)
 - Complete recoil after each compression

Child Breaths

- ☐ Gives 2 breaths with a barrier device:
- Each breath given over 1 second
 - Visible chest rise with each breath
 - Gives 2 breaths in less than 10 seconds

Cycle 2 of CPR (repeats steps in Cycle 1) *Only check box if step is successfully performed*

☐ Gives 30 high-quality compressions ☐ Gives 2 effective breaths

Cycle 3 of CPR (repeats steps in Cycle 1) *Only check box if step is successfully performed*

☐ Gives 30 high-quality compressions ☐ Gives 2 effective breaths

Instructor says, "EMS has arrived and is taking over."

STOP TEST

Instructor Notes

- Place a ✓ in the box next to each step the student completes successfully.
- If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to Instructor Manual for information about remediation).

Test Results Check **PASS** or **NR** to indicate pass or needs remediation:

PASS ☐ **NR** ☐

Instructor _____ Instructor Name _____ Date _____

Child CPR

Skills Testing Critical Skills Descriptors

- 1. Assesses victim and activates emergency response system (this *must* precede starting compressions) within a maximum of 30 seconds. After determining that the scene is safe:**
 - Checks for responsiveness by tapping and shouting
 - Shouts for help and phones 9-1-1
 - Checks for no breathing or no normal breathing (only gasping)
 - Scans from the head to the chest for a minimum of 5 seconds and no more than 10 seconds
- 2. Cycle 1: Performs high-quality chest compressions (initiates compressions immediately after recognition of cardiac arrest)**
 - Correct hand placement
 - Lower half of breastbone
 - 1- or 2-handed (second hand on top of the first)
 - Compression rate of 100 to 120/min
 - Delivers 30 compressions in 15 to 18 seconds
 - Compression depth and recoil—compress at least one third the depth of the chest, about 2 inches (5 cm)
 - Use of a commercial feedback device/manikin is highly recommended
 - Complete chest recoil after each compression
- 3. Cycle 1: Provides 2 breaths by using a barrier device**
 - Opens airway adequately
 - Uses a head tilt–chin lift maneuver
 - Delivers each breath over 1 second
 - Delivers breaths that produce visible chest rise
 - Avoids excessive ventilation
 - Resumes chest compressions in less than 10 seconds
- 4. Cycle 2: Performs same steps for compressions and breaths as in Cycle 1**
- 5. Cycle 3: Performs same steps for compressions and breaths as in Cycle 1**

Infant CPR

Skills Testing Checklist (1 of 2)



Student Name _____

Date of Test _____

Hospital Scenario: "You are working in a hospital or clinic when a woman runs through the door, carrying an infant. She shouts, 'Help me! My baby's not breathing.' You have gloves and a pocket mask. You send your coworker to activate the emergency response system and to get the emergency equipment."

Prehospital Scenario: "You arrive on the scene for an infant who is not breathing. No bystander CPR has been provided. You approach the scene and ensure that it is safe. Demonstrate what you would do next."

Assessment and Activation

- ☐ Checks responsiveness ☐ Shouts for help/Activates emergency response system ☐ Checks breathing
☐ Checks pulse

Once student shouts for help, instructor says, "Here's the barrier device."

Cycle 1 of CPR (30:2) *CPR feedback devices preferred for accuracy

Infant Compressions

- ☐ Performs high-quality compressions*:
- Placement of 2 fingers in the center of the chest, just below the nipple line
 - 30 compressions in no less than 15 and no more than 18 seconds
 - Compresses at least one third the depth of the chest, about 1½ inches (4 cm)
 - Complete recoil after each compression

Infant Breaths

- ☐ Gives 2 breaths with a barrier device:
- Each breath given over 1 second
 - Visible chest rise with each breath
 - Resumes compressions in less than 10 seconds

Cycle 2 of CPR (repeats steps in Cycle 1) Only check box if step is successfully performed

- ☐ Compressions ☐ Breaths ☐ Resumes compressions in less than 10 seconds

Rescuer 2 arrives with bag-mask device and begins ventilation while Rescuer 1 continues compressions with 2 thumb-encircling hands technique.

Cycle 3 of CPR

Rescuer 1: Infant Compressions

- ☐ Performs high-quality compressions*:
- 15 compressions with 2 thumb-encircling hands technique
 - 15 compressions in no less than 7 and no more than 9 seconds
 - Compresses at least one third the depth of the chest, about 1½ inches (4 cm)
 - Complete recoil after each compression

Rescuer 2: Infant Breaths

This rescuer is not evaluated.

(continued)

Infant CPR

Skills Testing Checklist (2 of 2)



Student Name _____ Date of Test _____

Cycle 4 of CPR

Rescuer 2: Infant Compressions

This rescuer is not evaluated.

Rescuer 1: Infant Breaths

- ☐ Gives 2 breaths with a bag-mask device:
- Each breath given over 1 second
 - Visible chest rise with each breath
 - Resumes compressions in less than 10 seconds

STOP TEST

Instructor Notes

- Place a ✓ in the box next to each step the student completes successfully.
- If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to Instructor Manual for information about remediation).

Test Results Check **PASS** or **NR** to indicate pass or needs remediation:

PASS

☐

NR

☐

Instructor _____ Instructor Name _____ Date _____

Infant CPR

Skills Testing Critical Skills Descriptors

- 1. Assesses victim and activates emergency response system (this *must* precede starting compressions) within a maximum of 30 seconds. After determining that the scene is safe:**
 - Checks for responsiveness by tapping and shouting
 - Shouts for help/directs someone to call for help *and* get emergency equipment
 - Checks for no breathing or no normal breathing (only gasping)
 - Scans from the head to the chest for a minimum of 5 seconds and no more than 10 seconds
 - Checks brachial pulse
 - Can be done simultaneously with check for breathing
 - Checks for a minimum of 5 seconds and no more than 10 seconds
- 2. Performs high-quality chest compressions during 1-rescuer CPR (initiates compressions within 10 seconds of identifying cardiac arrest)**
 - Correct placement of hands/fingers in center of chest
 - 1 rescuer: 2 fingers just below the nipple line
 - Compression rate of 100 to 120/min
 - Delivers 30 compressions in 15 to 18 seconds
 - Adequate depth for age
 - Infant: at least one third the depth of the chest (about 1½ inches [4 cm])
 - Use of a commercial feedback device or high-fidelity manikin is highly recommended
 - Complete chest recoil after each compression
 - Appropriate ratio for age and number of rescuers
 - 1 rescuer: 30 compressions to 2 breaths
 - Minimizes interruptions in compressions
 - Delivers 2 breaths so less than 10 seconds elapses between last compression of one cycle and first compression of next cycle
- 3. Provides effective breaths with bag-mask device during 2-rescuer CPR**
 - Opens airway adequately
 - Delivers each breath over 1 second
 - Delivers breaths that produce visible chest rise
 - Avoids excessive ventilation
 - Resumes chest compressions in less than 10 seconds
- 4. Switches compression technique at appropriate interval as prompted by the instructor (for purposes of this evaluation). Switch should take no more than 5 seconds.**
- 5. Performs high-quality chest compressions during 2-rescuer CPR**
 - Correct placement of hands/fingers in center of chest
 - 2 rescuers: 2 thumb–encircling hands just below the nipple line
 - Compression rate of 100 to 120/min
 - Delivers 15 compressions in 7 to 9 seconds
 - Adequate depth for age
 - Infant: at least one third the depth of the chest (about 1½ inches [4 cm])
 - Complete chest recoil after each compression
 - Appropriate ratio for age and number of rescuers
 - 2 rescuers: 15 compressions to 2 breaths
 - Minimizes interruptions in compressions
 - Delivers 2 breaths so less than 10 seconds elapses between last compression of one cycle and first compression of next cycle



**National Registry of Emergency Medical Technicians
Advanced Emergency Medical Technician Psychomotor Examination**

CARDIAC ARREST MANAGEMENT / AED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	1
Determines the scene/situation is safe	1	1
Attempts to question any bystanders about arrest events	1	1
Checks patient responsiveness	1	1
Assesses patient for signs of breathing [observes the patient and determines the absence of breathing or abnormal breathing (gaspings or agonal respirations)]	1	1
Checks carotid pulse [no more than 10 seconds]	1	1
Immediately begins chest compressions [adequate depth and rate; allows the chest to recoil completely]	1	1
Requests additional EMS response	1	1
Performs 2 minutes of high quality, 1-rescuer adult CPR Adequate depth and rate (1 point) Correct compression-to-ventilation ratio (1 point) Allows the chest to recoil completely (1 point) Adequate volumes for each breath (1 point) Minimal interruptions of less than 10 seconds throughout (1 point)	5	5
NOTE: After 2 minutes (5 cycles), patient is assessed and second rescuer resumes compressions while candidate operates AED.		
Turns-on power to AED	1	1
Follows prompts and correctly attaches AED to patient	1	1
Stops CPR and ensures all individuals are clear of the patient during rhythm analysis	1	
Ensures that all individuals are clear of the patient and delivers shock from AED	1	1
Immediately directs rescuer to resume chest compressions	1	1
Actual Time Ended: _____	TOTAL	18

Critical Criteria

- ☐ Failure to take or verbalize appropriate body substance isolation precautions
- ☐ Failure to immediately begin chest compressions as soon as pulselessness is confirmed
- ☐ Failure to deliver shock in a timely manner
- ☐ Interrupts CPR for more than 10 seconds at any point
- ☐ Failure to demonstrate acceptable high quality, 1-rescuer adult CPR
- ☐ Failure to operate the AED properly
- ☐ Failure to correctly attach the AED to the patient
- ☐ Failure to assure that all individuals are clear of patient during rhythm analysis and before delivering shock(s) [verbalizes "All clear" and observes]
- ☐ Failure to immediately resume compressions after shock delivered
- ☐ Failure to manage the patient as a competent EMT
- ☐ Exhibits unacceptable affect with patient or other personnel
- ☐ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

SUPRAGLOTTIC AIRWAY DEVICE ADULT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Selects, checks, assembles equipment

BVM with mask and reservoir	1
Oxygen	1
Airway adjuncts	1
Suction unit with appropriate catheters	1
Supraglottic airway device	1
Capnography/capnometry	1

Prepares patient

Takes appropriate PPE precautions	1
Manually opens airway	1
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	1
Ventilates patient at a rate of 10 – 12/minute and sufficient volume to make chest rise	1
Attaches pulse oximeter and notes SpO ₂	1
Preoxygenates patient	1

Performs insertion of supraglottic airway device

Lubricates distal tip of the device	1
Positions head properly	1
Performs a tongue-jaw lift	1
Inserts device to proper depth	1
Secures device in patient (inflates cuffs with proper volumes and immediately removes syringe or secures strap)	1
Ventilates patient and confirms proper ventilation (correct lumen and proper insertion depth) by auscultation bilaterally over lungs and over epigastrium	1
Adjusts ventilation as necessary (ventilates through additional lumen or slightly withdraws tube until ventilation is optimized)	1
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	1
Secures device	1
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1

Affective

Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

Critical Criteria

- ___ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO₂ is less than 90% at any time
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ If used, suctions the patient for more than 10 seconds
- ___ Failure to preoxygenate the patient prior to insertion of the supraglottic airway device
- ___ Failure to disconnect syringe **immediately** after inflating any cuff
- ___ Failure to properly secure device in patient (cuff inflation or strap placement not acceptable)
- ___ Failure to assure proper tube placement by auscultation bilaterally **and** over the epigastrium
- ___ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- ___ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
- ___ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- ___ Insertion or use of any adjunct in a manner dangerous to the patient
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 19 or greater

Comments:[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

	Successful	Unsuccessful
Successful	10	10
Unsuccessful	10	10

CPAP AND PEEP – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Prepares patient	
Takes or verbalizes appropriate PPE precautions	1
Assures adequate blood pressure	1
Positions patient in a position that will optimize ease of ventilation (high Fowler's)	1
Assesses patient to identify indications for CPAP:	
Congestive heart failure	1
Pulmonary edema	1
Asthma	1
Pneumonia	1
COPD	1
Assesses patient to identify contraindications for CPAP:	
Unconscious, unresponsive, inability to protect airway or inability to speak	1
Inability to sit up	1
Respiratory arrest or agonal respirations	1
Nausea/vomiting	1
Hypotension (systolic blood pressure < 90 mmHg)	1
Suspected pneumothorax	1
Cardiogenic shock	1
Penetrating chest trauma	1
Facial anomalies/trauma/burns	1
Closed head injury	1
Active upper GI bleeding or history of recent gastric surgery	1
Selects, checks, assembles equipment	
Assembles mask and tubing according to manufacturer instructions	1
Coaches patient how to breathe through mask	1
Connects CPAP unit to suitable O ₂ supply and attaches breathing circuit to device (not using oxygen regulator or flow meter)	1
Turns on power/oxygen	1
Sets device parameters:	
Turns the rate (frequency) dial to 8 – 12 per minute (based on local protocols)	1
Turns the oxygen concentration dial to the lowest setting (28 – 29% oxygen)	1
Titrates oxygen concentration to achieve an SpO ₂ > 92%	1
Sets tidal volume to 10 – 12 mL/kg (based on local protocols)	1
Sets pressure relief valve at \pm 4 cm/H ₂ O (based on local protocols)	1
Occludes tubing to test for peak pressure required to activate pressure relief valve and adjusts as necessary	1

Performs procedure	
Places mask over mouth and nose (leaves EtCO ₂ nasal cannula in place)	
Titrate CPAP pressure (based on local protocols/device dependent):	
Max 5 cm H ₂ O for bronchospasm	
Max 10 cm H ₂ O for CHF, pulmonary edema and pneumonia	
Max 5 cm H ₂ O for pediatric patients	
Coaches patient to breathe normally and adjust to air pressure	
Frequently reassesses patient for desired effects:	
Decreased ventilatory distress	
SpO ₂ > 92%	
Decreased adventitious lungs sounds	
Absence of complications (barotrauma and pneumothorax)	
Records settings/readings and documents appropriately	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 42 /42

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to identify 2 indications
- ___ Failure to identify 2 potential complications
- ___ Failure to frequently reassess the patient after application of the CPAP device
- ___ Failure to ensure that the patient understands the procedure
- ___ Failure to set the proper parameters for the device (pressure relief, tidal volume, oxygen concentration, rate, etc.)
- ___ Failure to test the pressure relief valve **prior to** application
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Failure to receive a total score of 32 or greater

Comments:

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill? ☐ Successful
☐ Unsuccessful

Nasogastric Tube Insertion

Student Name

Date

Instructor Signature

Takes/verbalizes body substance isolation precautions	<u>1</u>
Explains procedure to patient	<u>1</u>
Measures and marks the NG tube to proper length	<u>1</u>
Positions patient in upright or semi-sitting position	<u>1</u>
Lubricates distal 3-6" of NG tube	<u>1</u>
Slightly flexes patient's head	<u>1</u>
Inserts tube into widest nostril and advances straight back until tube is visible in oropharynx	<u>1</u>
Instructs patient to repeatedly swallow or sip water while continuing to advance the tube	<u>1</u>
Inserts tube until mark reaches outer edge of nostril	<u>1</u>
Injects 20-35 ml of air into tube while auscultating epigastrium to confirm proper placement	<u>1</u>
Secures tube	<u>1</u>
Total	<u>11</u>

Critical Criteria

- ☐ Failure to take or verbalize body substance isolation precautions
- ☐ Failure to explain procedure to patient before attempting to place the tube
- ☐ Failure to measure and mark NG tube to proper length before insertion
- ☐ Failure to verify proper placement by auscultation over epigastrium Attempts to insert tube in a manner dangerous to the patient

Comments

DIRECT OROTRACHEAL INTUBATION ADULT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Selects, checks, assembles equipment	
BVM with mask and reservoir	1
Oxygen	1
Airway adjuncts	1
Suction unit with appropriate catheters	1
Laryngoscope and blades	1
ET tube and stylette	1
Capnography/capnometry	1
Prepares patient	
Takes appropriate PPE precautions	1
Manually opens airway	1
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	1
Ventilates patient at a rate of 10 – 12/minute and sufficient volume to make chest rise	1
Attaches pulse oximeter and evaluates SpO ₂ reading	1
Preoxygenates patient	1
Performs intubation	
Positions head properly	1
Inserts laryngoscope blade and displaces tongue	1
Elevates mandible with laryngoscope	1
Inserts ET tube and advances to proper depth	1
Inflates cuff to proper pressure and immediately removes syringe	1
Ventilates patient and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium	1
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	1
Assesses for hypoxia during intubation attempt	1
Secures ET tube	1
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1
Suctions secretions from tube	
Recognizes need to suction	1
Identifies/selects flexible suction catheter	1
Inserts catheter into ET tube while leaving catheter port open	1
At proper insertion depth, covers catheter port and applies suction while withdrawing catheter	1
Ventilates/directs ventilation of patient as catheter is flushed with sterile water	1

Reaffirms proper tube placement	1
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 33 /33

Critical Criteria

- ___ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO₂ is less than 90% at any time
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Suctions the patient for more than 10 seconds
- ___ Failure to preoxygenate patient prior to intubation
- ___ If used, stylette extends beyond end of ET tube
- ___ Failure to disconnect syringe **immediately** after inflating cuff of ET tube
- ___ Uses teeth as a fulcrum
- ___ Failure to assure proper tube placement by auscultation bilaterally **and** over the epigastrium
- ___ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- ___ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
- ___ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- ___ Insertion or use of any adjunct in a manner dangerous to the patient
- ___ Does not suction the patient in a timely manner
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 25 or greater

Comments:

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?
☐ Successful
☐ Unsuccessful

DIRECT OROTRACHEAL INTUBATION PEDIATRIC – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Selects, checks, assembles equipment	
BVM with mask and reservoir	1
Oxygen	1
Airway adjuncts	1
Suction unit with appropriate catheters	1
Laryngoscope and blades	1
ET tubes and stylette	1
Capnography/capnometry	1
Prepares patient	
Takes appropriate PPE precautions	1
Manually opens airway	1
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	1
Ventilates patient at a rate of 12 – 20/minute and sufficient volume to make chest rise	1
Attaches pulse oximeter and notes SpO ₂	1
Preoxygenates patient	1
Performs intubation	
Places patient in neutral or sniffing position by padding between scapulae to elevate shoulders and torso as needed	1
Inserts laryngoscope blade and displaces tongue	1
Elevates mandible with laryngoscope	1
Inserts ET tube and advances to proper depth	1
Inflates cuff to proper pressure and immediately removes syringe (only if cuffed tube is used)	1
Ventilates patient and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium	1
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	1
Assesses for hypoxia during intubation attempt	1
Secures ET tube	1
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

Critical Criteria

- ___ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO₂ is less than 90% at any time
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ If used, suctions the patient for more than 10 seconds
- ___ If used, stylette extends beyond end of ET tube
- ___ Failure to preoxygenate patient prior to intubation
- ___ Failure to disconnect syringe **immediately** after inflating cuff of ET tube (only if cuffed tube is used)
- ___ Uses teeth or gums as a fulcrum
- ___ Failure to assure proper tube placement by auscultation bilaterally **and** over the epigastrium
- ___ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- ___ Failure to ventilate the patient at a rate of at least 12/minute and no more than 20/minute
- ___ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- ___ Insertion or use of any adjunct in a manner dangerous to the patient
- ___ Attempts to use any equipment not appropriate for the pediatric patient
- ___ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 20 or greater

Comments:[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

Successful

Unsuccessful

TRAUMA ENDOTRACHEAL INTUBATION ADULT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Selects, checks, assembles equipment

BVM with mask and reservoir	1
Oxygen	1
Airway adjuncts	1
Suction unit with appropriate catheters	1
Laryngoscope and blades	1
ET tube and stylette	1
Capnography/capnometry	1

Prepares patient

Takes appropriate PPE precautions	1
Manually maintains in-line immobilization and opens airway using jaw thrust maneuver	1
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	1
Ventilates patient at a rate of 10 – 12/minute and sufficient volume to make chest rise	1
Attaches pulse oximeter and evaluates SpO ₂ reading	1
Preoxygenates patient	1

Performs intubation

Maintains head in neutral, in-line position	1
Inserts laryngoscope blade and displaces tongue	1
Elevates mandible with laryngoscope	1
Inserts ET tube and advances to proper depth	1
Inflates cuff to proper pressure and immediately removes syringe	1
Ventilates patient and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium	1
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	1
Assesses for hypoxia during intubation attempt	1
Secures ET tube	1
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1

Affective

Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

Critical Criteria

- ___ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO₂ is less than 90% at any time
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ If used, suctions the patient for more than 10 seconds
- ___ Failure to preoxygenate patient prior to intubation
- ___ If used, stylette extends beyond end of ET tube
- ___ Failure to disconnect syringe **immediately** after inflating cuff of ET tube
- ___ Uses teeth as a fulcrum
- ___ Failure to assure proper tube placement by auscultation bilaterally **and** over the epigastrium
- ___ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- ___ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
- ___ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- ___ Insertion or use of any adjunct in a manner dangerous to the patient
- ___ Failure to assure that the head is in a neutral, in-line position throughout
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Failure to receive a total score of 20 or greater

Comments:[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

Successful

Unsuccessful

NASOTRACHEAL INTUBATION ADULT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Selects, checks, assembles equipment	
BVM with mask and reservoir	1
Oxygen	1
Airway adjuncts	1
Suction unit with appropriate catheters	1
ET tubes	1
Medications (viscous lidocaine, water soluble jelly, nasal spray)	1
Capnography/capnometry	1
Prepares patient	
Takes appropriate PPE precautions	1
Inspects nostrils to determine largest and least deviated or obstructed nostril	1
Inserts adjunct (nasopharyngeal airway)	1
Assists patient ventilations at a rate of 10 – 12/minute and sufficient volume to make chest rise	1
Attaches pulse oximeter and notes SpO ₂	1
Preoxygenates patient	1
Auscultates breath sounds	1
Performs intubation	
Lubricates tube and prepares nostril	1
Positions head properly	1
Inserts ET tube into selected nostril and guides it along the septum	1
Pauses to assure that tip of ET tube is positioned just superior to the vocal cords (visualizes misting in the tube, hears audible breath sounds from proximal end of ET tube)	1
Instructs patient to take a deep breath while passing ET tube through vocal cords	1
Inflates cuff to proper pressure and immediately removes syringe	1
Assists patient ventilations and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium; observes for misting in tube; listens for audible breath sounds from proximal end of ET tube; and assures that patient is aphonic	1
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	1
Secures ET tube	1
Assists patient ventilations patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1



**National Registry of Emergency Medical Technicians
Advanced Emergency Medical Technician Psychomotor Examination**

PEDIATRIC RESPIRATORY COMPROMISE

Candidate: _____ Examiner: _____
Date: _____ Signature: _____

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions	1	1
Verbalizes general impression of patient from a distance before approaching or touching the patient	1	1
Determines level of consciousness	1	1
Assesses the airway [looks for secretions and signs of foreign body airway obstruction; listens for audible noises and voice sounds]	1	1
Assesses breathing [checks rate, rhythm, chest excursion, audible noises]	1	1
Attaches pulse oximeter and evaluates SpO ₂ reading	1	1
NOTE: Examiner now informs candidate, "Pulse oximeter shows a saturation of 82%."		
Selects proper delivery device and attaches to oxygen	1	1
Administers oxygen at proper flow rate [blow-by oxygen, non-rebreather mask]	1	1
Checks pulse	1	1
Evaluates perfusion [skin color, temperature, condition; capillary refill]	1	1
Obtains baseline vital signs	1	1
NOTE: Examiner now advises candidate that patient begins to develop decreasing SpO₂, decreasing pulse rate, see-saw respirations, head bobbing, drowsiness, etc.)		
Places patient supine and pads appropriately to maintain a sniffing position	1	1
Manually opens airway	1	1
Considers airway adjunct insertion based upon patient presentation [oropharyngeal or nasopharyngeal airway]	1	1
NOTE: Examiner now informs candidate no gag reflex is present and patient accepts airway adjunct. The patient's respiratory rate is now 20/minute.		
Inserts airway adjunct properly and positions head and neck for ventilation	1	1
Selects appropriate BVM and attaches reservoir to oxygen flowing at 12 – 15 L/minute	1	1
Assures tight mask seal to face	1	1
Assists ventilations at a rate of 20/minute and with sufficient volume to cause visible chest rise	1	1
Ventilates at proper rate and volume while observing changes in capnometry/capnography, pulse oximeter, pulse rate, level of responsiveness	1	1
NOTE: The examiner must now ask the candidate, "How would you know if you are ventilating the patient properly?"		
Calls for immediate transport of patient	1	1
Actual Time Ended: _____	TOTAL	20

Critical Criteria

- ☐ Failure to initiate ventilations within 30 seconds after taking body substance isolation precautions or interrupts ventilations for greater than 30 seconds at any time
- ☐ Failure to take or verbalize body substance isolation precautions
- ☐ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- ☐ Failure to ventilate the patient at a rate of 20/minute
- ☐ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- ☐ Failure to recognize and treat respiratory failure in a timely manner
- ☐ Insertion or use of any airway adjunct in a manner dangerous to the patient
- ☐ Failure to manage the patient as a competent EMT
- ☐ Exhibits unacceptable affect with patient or other personnel
- ☐ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

PLEURAL DECOMPRESSION (NEEDLE THORACOSTOMY) – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

	SCORE
Manages the patient's airway with basic maneuvers and supplemental oxygen; intubates as necessary	1
Appropriately recognizes signs of tension pneumothorax	1
Selects, checks, assembles equipment	
14 – 16 ga. X 2 inch over-the-needle catheter (adult) or 16 – 18 ga. X 1½ – 2 inch over-the-needle catheter (pediatric)	1
10 mL syringe	1
4x4s	1
Antiseptic solution	1
Tape	1
Prepares patient	
Takes or verbalizes appropriate PPE precautions	1
Palpates the chest locating the second or third intercostal space on the midclavicular line (the second rib joins the sternum at the angle of Louis, the second intercostal space is located between 2 nd & 3 rd ribs while the third intercostal space is between 3 rd & 4 th ribs)	1
Properly cleanses the insertion site with appropriate solution	1
Performs needle thoracostomy	
Reconfirms the site of insertion and directs the needle over the top of the rib on the midclavicular line	1
Listens for a rush of air or watches for plunger in syringe to withdraw and aspirates air	1
Removes needle/syringe leaving only the catheter in place	1
Disposes of the needle in proper container	1
Stabilizes the catheter hub with 4x4s and tape	1
Reassesses adequacy of ventilation, lung sounds, blood pressure and pulse for improvement in patient condition	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 19 /19

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to dispose of the needle in proper container

- ___ Failure to correctly locate the site for insertion
- ___ Failure to properly cleanse site prior to needle insertion
- ___ Incorrect procedure relating to needle insertion (inserting below the rib, incorrect anatomical location, etc.)
- ___ Failure to assess the need for needle decompression (diminished or absent breath sounds, signs of hemodynamic compromise, etc.)
- ___ Failure to reassess patient condition following procedure
- ___ Failure to receive a total score of 15 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill? ☐ Successful
☐ Unsuccessful

NEEDLE CRICOTHYROTOMY (PERCUTANEOUS TRANSLARYNGEAL VENTILATION) – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____
Signature Signature

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Selects, checks, assembles equipment	
Oxygen source capable of 50 psi	1
Oxygen tubing	1
Manual jet ventilator device (Y-connector or push button device)	1
Bag-valve-mask device	1
Large bore IV catheter	1
10 – 20 mL syringe	1
3.0 mm ET adapter	1
Prepares patient	
Takes or verbalizes appropriate PPE precautions	1
Places the patient supine and hyperextends the head/neck (neutral position if cervical spine injury is suspected), manages the patient's airway with basic maneuvers and supplemental oxygen	1
Palpates neck locating the cricothyroid membrane (between the thyroid and cricoid cartilages)	1
Performs needle cricothyrotomy	
Cleanse the insertion site with appropriate solution	1
Stabilizes site and inserts needle through cricothyroid membrane at midline directing at a 45° angle caudally	1
Aspirates syringe to confirm proper placement in trachea	1
Advances catheter while stabilizing needle	1
Removes needle and immediately disposes in sharps container	1
Attaches ventilation device and begins ventilation (1 second for inflation, 2 seconds for exhalation using jet ventilator, manually triggered ventilation device, BVM)	1
Secures catheter	1
Observes chest rise and auscultates lungs to assess adequacy of ventilation	1
Continues ventilation while observing for possible complications (subcutaneous emphysema, hemorrhage, hypoventilation, equipment failure, catheter kink, false placement)	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

22 / 22

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Recaps contaminated needle or failure to dispose of syringe and needle in proper container
- ___ Inability to assemble necessary equipment to perform procedure
- ___ Failure to correctly locate the cricothyroid membrane
- ___ Failure to properly cleanse site prior to needle insertion
- ___ Incorrect insertion technique (directing the needle in a cephalad direction)
- ___ Failure to assess adequacy of ventilation and for possible complications
- ___ Failure to receive a total score of 17 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

Successful

Unsuccessful

SURGICAL CRICOTHYROTOMY

Student Name: _____

Date: _____

1	Maintain aseptic technique and avoid contamination.	1
2	*Instruct partner to pre-oxygenate patient if at all possible prior to procedure. Continue oxygenation of patient throughout procedure.	1
3	*Prepare equipment.	1
	1. Give 1 points if prepares scalpel, alcohol prep, BVM, O2,	
	2. Give 0 point if preparation is incomplete or haphazard in any	
4	*Locate cricothyroid membrane and cleanses site.	1
	1. Give 1 points if cleanses with circular motion outward.	
	2. Give 0 point if any other non-approved cleansing procedure.	
5	*Make a small horizontal incision across the cricothyroid membrane while stabilizing the cricoid cartilage.	1
6	Palpate the membrane and gently slice through it until the membrane is breached.	1
7	Widen the opening and hold it open with forceps.	1
8	Insert ETT to just above the Angle of Louis.	1
9	*Begin ventilation of patient with BVM at appropriate rate.	1
10	*Assess breath sounds and confirm placement with ETCO2.	1
11	*Secure device in place.	1
12	*Dispose of sharps in appropriate container.	1

10/12 to Pass

Points: 12

Fail: ☐

Pass: ☐

Instructor Signature: _____

GLUCOMETER – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

	SCORE
Identifies the need for obtaining a blood glucose level	1
Identifies the normal parameters for blood glucose level	1
Identifies contraindications	1
Identifies potential complications:	
Erroneous reading	1
BSI exposure	1
Clearly explains procedure to patient	1
Selects, checks, assembles equipment	
Glucometer	1
Test strip	1
Needle or spring-loaded puncture device	1
Alcohol swabs	1
Checks blood glucose level	
Takes or verbalizes appropriate PPE precautions	1
Turns on glucometer and inserts test strip	1
Preps fingertip with alcohol prep	1
Lances the prepped site with needle/lancet device, drawing capillary blood	1
Disposes/verbalizes disposal of needle/lancet in appropriate container	1
Expresses blood sample and transfers it to the test strip	1
Dresses fingertip wound with pressure and alcohol prep	1
Records reading from glucometer and documents appropriately	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 21 /21

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to dispose of blood contaminated sharps immediately at the point of use
- ___ Contaminates equipment or site without appropriately correcting situation
- ___ Failure to identify 2 indications
- ___ Failure to identify 2 potential complications
- ___ Failure to identify normal blood glucose parameters
- ___ Failure to obtain a viable capillary blood sample on first attempt

- ___ Exhibits unacceptable affect with patient or other personnel
___ Failure to receive a total score of 16 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

Successful	Unsuccessful
------------	--------------

Venipuncture Checkoff

Name of Student: _____

Place 1 point in right column for each step completed.	
1 *Put on gloves.	1
2 Position the patient.	1
3 Position equipment in appropriate place close to patient. Verify that necessary tubes are present. Apply needle to vacutainer holder or syringe.	1
4 Select site for venipuncture (NOT ABOVE IV INFUSION) and apply tourniquet.	1
5 Palpate for vein. (NEVER LEAVE THE TOURNIQUET ON FOR LONGER THAN 2 MINUTES.)	1
6 Release tourniquet.	1
7 *Clean venipuncture site with an alcohol pad and allow to air dry.	1
8 Assemble equipment.	1
9 Reapply tourniquet and have patient clench fist. DO NOT HAVE PATIENT PUMP HAND.	1
1 Grasp patient's arm approximately 1-2 inches below the venipuncture site and anchor vein between thumb and index finger. It is okay to just use the thumb.	1
1 *Puncture the vein (needle bevel up) at approximately 15° angle to the patient's arm and in a direct line with the vein.	1
1 Do not switch hands more than once.	1
1 If using vacutainer holder, fill tubes in correct order of draw.	1
1 *Mix tubes immediately but gently.	1
1 Have patient open hand.	1
1 Release tourniquet.	1
1 *Place a square of gauze or cotton over the puncture site, quickly remove the needle and IMMEDIATELY activate needle safety device.	1
1 Apply pressure immediately until the bleeding has	1

stopped.	
1 *If a syringe was used, remove needle and attach blood transfer device, fill tube(s) in proper order allowing the vacuum to fill the tubes. Mix gently. NOTE: NEVER insert needle into tubes held in your hand. If safety transfer device NOT available place tubes in rack. NEVER apply pressure to syringe, blood will automatically be pulled into tube by the vacuum.	1
2 Apply a bandage when bleeding stops. DO NOT BANDAGE A PUNCTURE SITE THAT IS STILL BLEEDING.	1
2 Correctly label tubes with appropriate information at the bedside.	1
2 *Discard used equipment properly.	1
2 Remove gloves and wash hands if gloves were contaminated.	1

<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Signature	Total	23 <hr style="border: none; border-top: 1px solid black; margin-top: -5px;"/> Date
PASS <input type="checkbox"/>		FAIL <input type="checkbox"/>

Grading Criteria:

1. All items completed successfully should receive one (1) point. Students must have a total minimum of thirteen (13) points to pass.
2. All steps with an asterisk (*) in them MUST be completed successfully for the student to pass.

INTRAVENOUS THERAPY – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

	SCORE
Clearly explains procedure to patient	1
Selects, checks, assembles equipment	
IV solution	1
Administration set	1
Catheter	1
Sharps container	1
Universal start kit (antiseptic swabs, gauze pads, venous tourniquet, occlusive bandage, antibiotic gel, syringe, etc.)	1
Spikes bag	
Checks solution for:	
Proper solution	1
Clarity or particulate matter	1
Expiration date	1
Protective covers on tail ports	1
Checks administration set for:	
Drip rating	1
Tangled tubing	1
Protective covers on both ends	1
Flow clamp up almost to drip chamber and closed	1
Removes protective cover on drip chamber while maintaining sterility	1
Removes protective cover on IV bag tail port while maintaining sterility	1
Inserts IV tubing spike into IV solution bag tail port by twisting and pushing until inner seal is punctured while maintaining sterility	1
Turns IV bag upright	1
Squeezes drip chamber and fills half-way	1
Turns on flow and bleeds line of all air while maintaining sterility	1
Shuts flow off after assuring that all large air bubbles have been purged	1
Performs venipuncture	
Tears sufficient tape to secure IV	1
Opens antiseptic swabs, gauze pads, occlusive dressing	1
Takes appropriate PPE precautions	1
Identifies appropriate potential site for cannulation	1
Applies tourniquet properly	1
Palpates and identifies suitable vein	1
Cleanses site, starting from the center and moving outward in a circular motion	1

Removes IV needle and catheter from package and while maintaining sterility	1
Inspects for burrs	1
Loosens catheter hub with twisting motion	1
Stabilizes the vein and extremity by grasping and stretching skin while maintaining sterility	1
Warns patient to expect to feel the needle stick	1
Inserts stylette with bevel up at appropriate angle (35 – 45°) while maintaining sterility	1
Feels “pop” as stylette enters vein and observes dark, red blood in flash chamber	1
Lowers stylette and inserts an additional 1/8 – 1/4"	1
Stabilizes stylette and slides catheter off of stylette until hub touches skin	1
Palpates skin just distal to tip of catheter and applies pressure to occlude vein	1
Removes stylette and immediately disposes in sharps container	1
Attaches syringe and draws venous blood sample if ordered while maintaining sterility	1
Removes protective cap from IV tubing and attaches to hub of catheter while maintaining sterility	1
Releases tourniquet	1
Opens flow clamp and runs for a brief period to assure a patent line	1
Secures catheter and IV tubing to patient	1
Adjusts flow rate as appropriate	1
Assesses site for signs of infiltration, irritation	1
Assesses patient for therapeutic response or signs of untoward reactions	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL	50	/50
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Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to dispose of blood-contaminated sharps **immediately at the point of use**
- ___ Contaminates equipment or site without appropriately correcting situation
- ___ Performs any improper technique resulting in the potential for uncontrolled hemorrhage, catheter shear or air embolism
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 38 or greater

Comments (CONTINUED ON NEXT PAGE):

Intramuscular and Subcutaneous Medication Administration

Student Name:

Date:

Instructor Signature:

Start time:

Scoring

N/A = Not applicable for this patient
0 = Unsuccessful; required critical or excessive prompting
1 = Successful; competent; no prompting necessary

Asks patient for known allergies	1
Clearly explains procedure to patient	1

Selects, checks, and assembles equipment

Medication	1
Appropriate syringe and needle	1
Sharps container	1
Alcohol swabs	1
Adhesive bandage or sterile gauze dressing and tape	1

Administers medication

Selects correct medication by identifying:	1
Right patient	1
Right medication	1
Right dosage/concentration	1
Right time	1
Right route	1

Also checks medication for:

Clarity	1
---------	---

Expiration date	<u>1</u>
Assembles syringe and needle	<u>1</u>
Draws appropriate amount of medication into syringe and dispels air while maintaining sterility	<u>1</u>
Reconfirms medication	<u>1</u>
Takes or verbalizes appropriate PPE precautions	<u>1</u>
Identifies and cleanses appropriate injection site	<u>1</u>
Pinches/stretches skin, warns patient and inserts needle at proper angle while maintaining sterility	<u>1</u>
Aspirates syringe while observing for blood return before injecting IM medication	<u>1</u>
Administers correct dose at proper push rate	<u>1</u>
Removes needle and disposes/verbalizes proper disposal of syringe and needle in proper container	<u>1</u>
Applies direct pressure to site	<u>1</u>
Covers puncture site	<u>1</u>
Verbalizes need to observe patient for desired effect and adverse side effects	<u>1</u>

Affective

Accepts evaluation and criticism professionally	<u>1</u>
Shows willingness to learn	<u>1</u>
Interacts with simulated patient and other personnel in professional manner	<u>1</u>
Total	<u>30</u>

Critical Criteria

<input type="checkbox"/>	Failure to take or verbalize appropriate PPE precautions
<input type="checkbox"/>	Failure to identify acceptable injection site
<input type="checkbox"/>	Contaminates equipment or site without appropriately correcting situation
<input type="checkbox"/>	Failure to adequately dispel air resulting in the potential for air embolism
<input type="checkbox"/>	Failure to aspirate for blood prior to injecting medication
<input type="checkbox"/>	Injects improper medication or dosage (wrong medication, incorrect amount, or administers at an inappropriate rate)
<input type="checkbox"/>	Recaps needle or failure to dispose/verbalize disposal of syringe and needle in proper container
<input type="checkbox"/>	Failure to observe the patient for desired effect and adverse side effects after administering medication
<input type="checkbox"/>	Failure to manage the patient as a competent EMT
<input type="checkbox"/>	Failure to observe the patient for desired effects and adverse side effects after administering medication
<input type="checkbox"/>	Uses or orders a dangerous or inappropriate intervention

Comments:

INTRAVENOUS BOLUS MEDICATION ADMINISTRATION – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

SCORE

Clearly explains procedure to patient	1
---------------------------------------	---

Selects, checks, assembles equipment

IV medication	1
Sharps container	1
Alcohol swabs	1

Administers medication

Confirms medication order	1
Asks patient for known allergies	1
Explains procedure to patient	1
Selects correct medication by identifying:	
Right patient	1
Right medication	1
Right dosage/concentration	1
Right time	1
Right route	1
Assembles prefilled syringe correctly and dispels air	1
Takes or verbalizes appropriate PPE precautions	1
Identifies and cleanses most proximal injection site (Y-port or hub)	1
Reconfirms medication	1
Stops IV flow	1
Administers correct dose at proper push rate	1
Disposes/verbalizes proper disposal of syringe and other material in proper container	1
Turns IV on and adjusts drip rate to TKO/KVO	1
Verbalizes need to observe patient for desired effect and adverse side effects	1

Affective

Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 24 /24

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Contaminates equipment or site without appropriately correcting situation
- ___ Failure to adequately dispel air resulting in the potential for air embolism

- ___ Injects improper medication or dosage (wrong medication, incorrect amount, administers at an inappropriate rate)
- ___ Recaps needle or failure to dispose/verbalize disposal of syringe and other material in proper container
- ___ Failure to turn on IV after administering medication
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 18 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill? ☐ Successful
☐ Unsuccessful

INTRANASAL MEDICATION ADMINISTRATION

Student Name: _____

Date: _____

	Scoring	
	N/A = Not applicable for this patient 0 = Unsuccessful; required critical or excessive prompting 1 = Successful; competent; no prompting necessary	
	1. Assures that patient is being ventilated adequately	1
	2. Asks patient for known allergies	1
	3. Clearly explains procedure to patient	1
	4. Selects, checks, and assembles equipment	1
	5. Medication	1
	6. Appropriate syringe, needle, and mucosal atomizer	1
	7. Sharps container	1
	8 Alcohol swabs	1
	9. Sterile gauze	1
	10.Administers medication	1
	11.Selects correct medication by identifying:	
	Right patient	1
	Right medication	1
	Right dosage/concentration	1
	Right time	1
Right route	1	
	12.Also checks medication for:	
	Clarity	1
	Expiration Date	1

INTRANASAL MEDICATION ADMINISTRATION

Student Name: _____

13.Assembles syringe and needle while maintaining sterility.	1
14.Cleanses rubber stopper, draws appropriate amount of medication into syringe and dispels air while maintaining sterility.	1
15.Reaffirms medication.	1
16.Disposes of needle in proper container and attaches mucosal atomizer.	1
17.Takes or verbalizes PPE precautions.	1
18.Stops ventilation of patient and/or removes any mask.	1
19.Inpects nostrils to determine largest and least deviated or obstructed nostril.	1
20.Inserts mucosal atomizer device into nostril and briskly depresses the syringe plunger.	1
21.Disposes/verbalizes proper disposal of syringe and atomizer device in proper container.	1
22.Resumes ventilation or oxygenation of patient.	1
23.Verblizes need to observe patient for desired effects or side effects.	1

Affective Behaviors:

Accepts evaluation and criticism professionally.	1
Shows willingness to learn.	1
Interacts with simulated patient and other personnel in professional manner.	1

Critical Criteria (checking any box before constitutes failure of the skills regardless of score)

<input type="checkbox"/>	<input type="checkbox"/>	Failure to take or verbalize appropriate PPE precautions.
<input type="checkbox"/>	<input type="checkbox"/>	Contaminates equipment without appropriately correcting situation.
<input type="checkbox"/>	<input type="checkbox"/>	Injects improper medication or dosage or at inappropriate rate.

INTRANASAL MEDICATION ADMINISTRATION

Student Name: _____

		Recaps needle or failure to dispose/verbalize disposal of needle, syringe and/or atomizer in proper container.
		Failure to observe the patient for effects after administering the medication.
		Failure to manage the patient as a competent EMT.
		Exhibits unacceptable affect with patient or other personnel.
		Uses or orders a dangerous or inappropriate intervention.

Comments:

--

Student Self-Evaluation

As the student who performed this skill, I feel that I:	1
---	---

1=completed this skill successfully.

0=was unsuccessful in completing this skill.

Score

Total Points Possible: 32 Minimum Required to Pass: 28

Total: 32 of 32

		Pass
--	--	------

		Fail
--	--	------

Instructor Signature: _____

INTRAOSSEOUS INFUSION – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Clearly explains procedure to patient	1
Selects, checks, assembles equipment	
Solution	1
Administration set	1
IO needle and insertion device	1
Sharps container	1
Antiseptic swabs, gauze pads, bulky dressing, syringe, etc.	1
Spikes bag	
Checks solution for:	
Proper solution	1
Clarity or particulate matter	1
Expiration date	1
Protective covers on tail ports	1
Checks administration set for:	
Drip rating	1
Tangled tubing	1
Protective covers on both ends	1
Flow clamp up almost to drip chamber and closed	1
Removes protective cover on drip chamber while maintaining sterility	1
Removes protective cover on solution bag tail port while maintaining sterility	1
Inserts IV tubing spike into solution bag tail port by twisting and pushing until inner seal is punctured while maintaining sterility	1
Turns solution bag upright	1
Squeezes drip chamber and fills half-way	1
Turns on by sliding flow clamp and bleeds line of all air while maintaining sterility	1
Shuts flow off after assuring that all large air bubbles have been purged	1
Performs intraosseous puncture	
Tears sufficient tape to secure IO	1
Opens antiseptic swabs, gauze pads	1
Takes appropriate PPE precautions	1
Identifies appropriate anatomical site for IO puncture	1
Cleanses site, starting from the center and moving outward in a circular motion	1
Prepares IO needle and insertion device while maintaining sterility	1
Inspects for burrs	1
Stabilizes the site in a safe manner (if using the tibia, does not hold the leg in palm of hand and perform IO puncture directly above hand)	1

PERCOM EMS Medical Education Consortium

FOLEY CATHETERIZATION

Name: _____

Date: _____

<u>1</u>	Verifies protocol or order
<u>1</u>	Explains procedure to patient
<u>1</u>	*Washes hands and assembles equipment
<u>1</u>	Positions and drapes patient properly
<u>1</u>	*Places catheter set between patients legs and opens field without contamination
<u>1</u>	*Dons sterile gloves without contamination
<u>1</u>	*Opens betadine solution saturating 3 cotton balls
<u>1</u>	Tests balloon leaving syringe in place
<u>1</u>	*Lubricates catheter
<u>1</u>	*Opens labia minora with non-dominate hand and keeps open until catheter has been introduced
<u>1</u>	*Uses dominate hand to clean and dry meatus with cotton balls held with forceps
<u>1</u>	*Does not cross sterile field with contaminated balls – discards
<u>1</u>	*Inserts catheter into meatus to proper distance without contamination
<u>1</u>	*Inflates balloon – keeping plunger off syringe depressed, pulls back gently and checks placement, removes syringe
<u>1</u>	Connects catheter to bedside or foot of bed and secures to bed linen with clamp
<u>1</u>	Makes patient comfortable
<u>1</u>	Charts procedure to include time of procedure, size of catheter, color and amount of urine returned, size balloon and amount of water instilled in balloon and any difficulties encountered
Total <u>17</u>	

_____ Pass _____ Fail

(Pass is indicated if candidate completes procedure without missing any criticals marked by

“*”). Instructor Signature

JOINT SPLINTING – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Selects, checks, assembles equipment	
Cravats	1
Roller gauze	1
Splinting material	1
Padding material	1
Splints joint	
Takes or verbalizes appropriate PPE precautions	1
Directs application of manual stabilization of the injury	1
Assesses motor, sensory and circulatory functions in the injured extremity	1
Selects appropriate splinting material	1
Immobilizes the site of the injury and pads as necessary	1
Immobilizes the bone above the injury site	1
Immobilizes the bone below the injury site	1
Secures the entire injured extremity	1
Reassesses motor, sensory and circulatory functions in the injured extremity	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 16 /16

Critical Criteria

- ___ Did not immediately stabilize the extremity manually
- ___ Grossly moves the injured extremity
- ___ Did not immobilize the bones above and below the injury site
- ___ Did not reassess motor, sensory and circulatory functions in the injured extremity **before and after** splinting
- ___ Did not secure the entire injured extremity upon completion of immobilization
- ___ Failure to receive a total score of 12 or greater

Comments:

LONG BONE SPLINTING – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Selects, checks, assembles equipment	
Cravats	1
Roller gauze	1
Splinting material	1
Padding material	1
Splints long bone	
Takes or verbalizes appropriate PPE precautions	1
Directs application of manual stabilization of the injury	1
Assesses motor, sensory and circulatory functions in the injured extremity	1
Measures the splint	1
Applies the splint and pads as necessary	1
Immobilizes the joint above the injury site	1
Immobilizes the joint below the injury site	1
Secures the entire injured extremity	1
Immobilizes the hand/foot in the position of function	1
Reassesses motor, sensory and circulatory functions in the injured extremity	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 17 /17

Critical Criteria

- ___ Did not immediately stabilize the extremity manually
- ___ Grossly moves the injured extremity
- ___ Did not immobilize the joint above and the joint below the injury site
- ___ Did not immobilize the hand or foot in a position of function
- ___ Did not reassess motor, sensory and circulatory functions in the injured extremity **before and after** splinting
- ___ Did not secure the entire injured extremity upon completion of immobilization
- ___ Failure to receive a total score of 13 or greater

Comments (CONTINUED ON BACK):

TRACTION SPLINTING – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Selects, checks, assembles equipment	
Traction splint with all associated equipment (ankle hitch, straps, etc.)	1
Padding material	1
Splints femur	
Takes or verbalizes appropriate PPE precautions	1
Directs application of manual stabilization of the injured leg (not necessary when using a unipolar device [Sagar® or similar] that is immediately available)	1
Directs application of manual traction (not necessary when using a unipolar device, but must be applied before elevating the leg if the leg is elevated at all)	1
Assesses motor, sensory and distal circulation in the injured extremity	1
Prepares/adjusts the splint to proper length	1
Positions the splint at the injured leg	1
Applies proximal securing device (e.g., ischial strap)	1
Applies distal securing device (e.g., ankle hitch)	1
Applies appropriate mechanical traction	1
Positions/secures support straps	1
Re-evaluates proximal/distal securing devices	1
Reassesses motor, sensory and circulatory functions in the injured extremity	1
Secures patient to the long backboard to immobilize the hip	1
Secures the traction splint/legs to the long backboard to prevent movement of the splint	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 19 /19

Critical Criteria

- ___ Loss of traction at any point after it is assumed or applies inadequate traction
- ___ Failure to apply manual traction before elevating the leg
- ___ Did not reassess motor, sensory and circulatory functions in the injured extremity **after** splinting
- ___ The foot is excessively rotated or extended after splinting
- ___ Final immobilization failed to support the femur or prevent rotation of the injured leg
- ___ Failure to receive a total score of 15 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

Successful

Outcome	Successful	Unsuccessful
1. The project was completed on time and within budget.	Yes	No
2. The project met the client's requirements.	Yes	No
3. The project was completed with high quality.	Yes	No
4. The project was completed with minimal risk.	Yes	No
5. The project was completed with minimal cost.	Yes	No
6. The project was completed with minimal impact on the environment.	Yes	No
7. The project was completed with minimal impact on the community.	Yes	No
8. The project was completed with minimal impact on the economy.	Yes	No
9. The project was completed with minimal impact on the culture.	Yes	No
10. The project was completed with minimal impact on the society.	Yes	No

SPINAL IMMOBILIZATION ADULT (SUPINE PATIENT) – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

SCORE

Selects, checks, assembles equipment	
Long spine immobilization device with straps	1
Cervical collar	1
Head immobilizer (commercial or improvised)	1
Padding material	1
Immobilizes patient	
Takes or verbalizes appropriate PPE precautions	1
Directs assistant to place/maintain head in the neutral, in-line position	1
Directs assistant to maintain manual stabilization of the head	1
Assures that patient is a reliable historian (sensorium not currently altered by drugs or alcohol; no recent loss of consciousness)	1
Assesses motor, sensory and circulatory functions in each extremity	1
Applies appropriately sized extrication collar	1
Positions the immobilization device appropriately	1
Directs movement of the patient onto the device without compromising the integrity of the spine	1
Applies padding to voids between the torso and the device as necessary	1
Secures the patient's torso to the device	1
Evaluates and pads behind the patient's head as necessary	1
Immobilizes the patient's head to the device	1
Secures the patient's legs to the device	1
Secures the patient's arms	1
Reassesses motor, sensory and circulatory function in each extremity	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 22 /22

Critical Criteria

- ___ Did not immediately direct or take manual stabilization of the head
- ___ Did not properly apply appropriately sized cervical collar before ordering release of manual stabilization
- ___ Released or ordered release of manual stabilization before it was maintained mechanically

- ___ Manipulated or moved the patient excessively causing potential for spinal compromise
- ___ Head immobilized to the device **before** patient's torso sufficiently secured to the device
- ___ Patient moves excessively up, down, left or right on the device
- ___ Head immobilization allows for excessive movement
- ___ Upon completion of immobilization, head is not in a neutral, in-line position
- ___ Did not reassess motor, sensory and circulatory functions in each extremity after securing the patient to the device
- ___ Failure to receive a total score of 17 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill? ☐ Successful
☐ Unsuccessful

SPINAL IMMOBILIZATION ADULT (SEATED PATIENT) – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Selects, checks, assembles equipment	
Short spine immobilization device with straps	1
Cervical collar	1
Padding material	1
Immobilizes patient	
Takes or verbalizes appropriate PPE precautions	1
Directs assistant to place/maintain head in the neutral, in-line position	1
Directs assistant to maintain manual stabilization of the head	1
Assures that patient is a reliable historian (sensorium not currently altered by drugs or alcohol; no recent loss of consciousness)	1
Assesses motor, sensory and circulatory functions in each extremity	1
Applies appropriately sized extrication collar	1
Positions the immobilization device appropriately	1
Secures the device to the patient's torso	1
Evaluates torso fixation and adjusts as necessary	1
Evaluates and pads behind the patient's head as necessary	1
Secures the patient's head to the device	1
Reevaluates and assures adequate immobilization	1
Reassesses motor, sensory and circulatory functions in each extremity	1
Properly moves patient onto a long backboard	1
Releases/loosens leg straps	1
Secures patient to the long backboard	1
Reassesses motor, sensory and circulatory function in each extremity	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 23 /23

Critical Criteria

- ___ Did not immediately direct or take manual stabilization of the head
- ___ Did not properly apply appropriately sized cervical collar before ordering release of manual stabilization
- ___ Released or ordered release of manual stabilization before it was maintained mechanically

- ___ Manipulated or moved the patient excessively causing potential for spinal compromise
- ___ Head immobilized to the device **before** device sufficiently secured to torso
- ___ Device moves excessively up, down, left or right on the patient's torso
- ___ Head immobilization allows for excessive movement
- ___ Torso fixation inhibits chest rise, resulting in respiratory compromise
- ___ Upon completion of immobilization, head is not in a neutral, in-line position
- ___ Did not reassess motor, sensory and circulatory functions in each extremity after securing the patient to the device and to the long backboard
- ___ Failure to receive a total score of 18 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill? ☐ Successful
☐ Unsuccessful

HEMORRHAGE CONTROL – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

SCORE

Selects, checks, assembles equipment

Field dressings (various sizes)	1
Kling [®] , Kerlix [®] , etc.	1
Bandages (various sizes)	1
Tourniquet (commercial or improvised)	1

Controls hemorrhage

Takes or verbalizes appropriate PPE precautions	1
Applies direct pressure to the wound	1
Bandages the wound	1
Applies tourniquet	1
Properly positions the patient	1
Administers high concentration oxygen	1
Initiates steps to prevent heat loss from the patient	1
Indicates the need for immediate transportation	1

Affective

Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 15 /15

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Did not administer high concentration oxygen
- ___ Did not control hemorrhage using correct procedures in a timely manner
- ___ Did not indicate the need for immediate transportation
- ___ Failure to receive a total score of 12 or greater

Comments (CONTINUED ON BACK):

NORMAL DELIVERY WITH NEWBORN CARE – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Takes appropriate PPE precautions	1
Obtains a history relevant to the pregnancy	
Estimated date of confinement	1
Frequency of contractions	1
Duration of contractions	1
Intensity of contractions	1
Rupture of amniotic sac (time and presence of meconium)	1
Previous pregnancies and deliveries (complications, vaginal delivery, C-section)	1
Pre-existing medical conditions (HTN, DM, seizure, cardiac)	1
Medications taken prior to labor	1
Prenatal care (identified abnormalities with pregnancy)	1
Vaginal bleeding	1
Abdominal pain	1
Assessment	
Vital signs (BP, P, R, Temperature)	1
Evidence of imminent delivery (crowning, contractions, urge to push, urge to defecate)	1
Prepares for delivery	
Prepares appropriate delivery area	1
Removes patient's clothing	1
Opens and prepares obstetric kit	1
Places clean pad under patient	1
Prepares bulb syringe, cord clamps, towels, newborn blanket	1
Delivers newborn	
During contractions, urges patient to push	1
Delivers and supports the emerging fetal head	1
Checks for nuchal cord	1
Manages nuchal cord if present	1
Assesses for and notes the presence of meconium	1
Delivers the shoulders	1
Delivers the remainder of the body	1
Places newborn on mother's abdomen or level with mother's uterus	1
Notes the time of birth	1
Controls hemorrhage as necessary	1
Reassesses mother's vital signs	1

Newborn care (Birth – 30 seconds postpartum):	
If newborn is distressed, clears airway as necessary	1
Warms and dries newborn	1
Wraps newborn in blanket or towels to prevent hypothermia	1
Newborn care (30 – 60 seconds postpartum):	
If heart rate is less than 100, gasping or apneic:	
Provides PPV	1
Monitors SpO ₂ in neonate	1
Clamps and cuts umbilical cord	1
Places on mother's chest to retain warmth	1
Determines 1 minute APGAR score	1
Newborn care (after 1 minute postpartum):	
If heart rate is less than 100:	
Takes ventilation corrective steps and continues PPV	1
If heart rate is less than 60:	
Considers intubation	1
Begins chest compressions	1
If heart rate remains less than 60 after chest compressions and PPV:	
Administers epinephrine IO	1
Determines 5 minute APGAR score	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL	46	/46
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Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to identify or manage a nuchal cord
- ___ Failure to immediately suction the newborn nose and mouth
- ___ Performs any dangerous activity during delivery (pulls on fetus, places fetus in a dangerous position, pulls on umbilical cord to deliver placenta, handles newborn inappropriately)
- ___ Failure to provide appropriate newborn care
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 35 or greater

Comments (CONTINUED ON NEXT PAGE):

ABNORMAL DELIVERY WITH NEWBORN CARE – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Takes appropriate PPE precautions	1
Obtains a history relevant to the pregnancy	
Estimated date of confinement	1
Frequency of contractions	1
Duration of contractions	1
Intensity of contractions	1
Rupture of amniotic sac (time and presence of meconium)	1
Previous pregnancies and deliveries (complications, vaginal delivery, C-section)	1
Pre-existing medical conditions (HTN, DM, seizure, cardiac)	1
Medications taken prior to labor	1
Prenatal care (identified abnormalities with pregnancy)	1
Vaginal bleeding	1
Abdominal pain	1
Assessment	
Vital signs (BP, P, R, Temperature)	1
Evidence of imminent delivery (crowning, contractions, urge to push, urge to defecate)	1
Prepares for delivery	
Prepares appropriate delivery area	1
Removes patient's clothing	1
Opens and prepares obstetric kit	1
Places clean pad under patient	1
Prepares bulb syringe, cord clamps, towels, newborn blanket	1
Delivers newborn	
During contractions, urges patient to push	1
Delivers and supports the emerging fetal presenting part if not the head	1
Recognizes abnormal presentation that requires immediate care and transport (prolapsed cord, hand, foot, shoulder dystocia)	1
Delivers legs and body if possible and continues to support fetus	1
Delivers head	1
If fetal head is not promptly delivered, inserts gloved fingers/hand to establish a space for breathing/relieve pressure on umbilical cord	1
Assesses for and notes the presence of meconium	1
Initiates rapid transport	1
Delivers the shoulders if not previously delivered	1
Delivers the remainder of the body if not previously delivered	1

Places newborn on mother's abdomen or level with mother's uterus	1
Notes the time of birth	1
Controls hemorrhage as necessary	1
Reassesses mother's vital signs	1
Newborn care (Birth – 30 seconds postpartum):	
If newborn is distressed, clears airway as necessary	1
Warms and dries newborn	1
Wraps newborn in blanket or towels to prevent hypothermia	1
Newborn care (30 – 60 seconds postpartum):	
If heart rate is less than 100, gasping or apneic:	
Provides PPV	1
Monitors SpO ₂ in neonate	1
Clamps and cuts umbilical cord	1
Places on mother's chest to retain warmth	1
Determines 1 minute APGAR score	1
Newborn care (after 1 minute postpartum):	
If heart rate is less than 100:	
Takes ventilation corrective steps and continues PPV	1
If heart rate is less than 60:	
Considers intubation	1
Begins chest compressions	1
If heart rate remains less than 60 after chest compressions and PPV:	
Administers epinephrine IO	1
Determines 5 minute APGAR score	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 49 /49

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to identify or appropriately manage an abnormal presentation
- ___ Performs any dangerous activity during delivery (pulls on fetus, places fetus in a dangerous position, pulls on umbilical cord to deliver placenta, handles newborn inappropriately)
- ___ Failure to provide appropriate newborn care (correct sequence and within recommended time limits)
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 37 or greater

CONTINUED ON NEXT PAGE

Comments:

OBTAIN A PATIENT HISTORY FROM AN ALERT AND ORIENTED PATIENT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Demographic data		SCORE
Age		1
Weight – estimated/translated to kg		1
Gender		1
Ethnic origin		1
Source of referral		
“Who called EMS?”		1
Source of historical information		
Who is telling you the information?		1
Reliability		
Do you believe the patient?		1
Does the patient have appropriate decision-making capacity to consent for care?		1
Is the patient oriented appropriately?		1
Chief complaint		
“Why did you call us?”		1
Duration of this episode/complaint		1
History of the present illness		
Onset		
“When did this begin?”		1
“Was it sudden or gradual?”		1
Provocation		
“What brought this on?”		1
“Is there anything that makes it better or worse?”		1
Quality		
“How would you describe your pain or symptoms?”		1
“Has there been any change in your pain or symptoms since it began?”		1
Region/Radiation		
“Can you point and show me where your pain or symptoms are located?”		1
“Does the pain move or radiate anywhere else?”		1
Severity		
“How would you rate your level of discomfort right now on a 1 – 10 scale?”		1
“Using the same scale, how bad was your discomfort when this first began?”		1
Timing		

“When did your pain or symptoms begin?”	1
“Is it constant or how does it change over time?”	1
Setting	
Is there anything unique to place or events with this episode?	1
Treatments	
“Have you taken anything to treat this problem?”	1
Pertinent negatives	
Notes any signs or symptoms not present	1
Converges	
Moves history from broad to focused to field impression	1
Past medical history	
General health status	
What does the patient say about his/her health?	1
Current medications	
“What prescribed medications do you currently take?”	1
“What over-the-counter medications or home remedies do you currently take?”	1
“When did you take you last dose of medications?”	1
“Do you take all your medications as directed?”	1
Adult illnesses	
“What other similar episodes were present?”	1
“Is this an acute or chronic illness?”	1
“What medical care do you currently receive for this illness?”	1
“What medical care do you currently receive for other illnesses?”	1
Allergies	
“Do you have any allergies to any medications, foods or other things?”	1
Operations	
“What previous surgeries have you had?”	1
Environmental	
Patient nutritional status	1
“Do you have any habitual activities, such as drugs, alcohol or tobacco use?”	1
Family history	
Questions patient about pertinent family medical history	1
Psychological history	
Asks appropriate related history questions based upon patient presentation	1
Verbal report	
Completes succinct report	1
Identifies pertinent findings	1
Identifies pertinent negatives	1
Organization	
Organizes report in logical sequence	1
Affective	
Makes the patient feel comfortable	1
Uses good eye contact	1
Establishes and maintains proper distance	1
Uses techniques that show interest in the patient	1
Professional appearance	1
Takes notes of findings during history	1
Preferably uses open-ended questions	1
Follows patient lead to converge questions	1

Uses reflection to gain patient confidence	1
Shows empathy in a professional manner	1

Actual Time Ended:

TOTAL	56	/56
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Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to complete an appropriate history
- ___ Failure to obtain vital information necessary for the proper assessment, management and diagnosis of the patient's condition
- ___ Failure to receive a total score of 43 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

<input type="checkbox"/>	Successful
<input type="checkbox"/>	Unsuccessful

COMPREHENSIVE NORMAL ADULT PHYSICAL ASSESSMENT TECHNIQUES – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

NOTE: The student is to perform a comprehensive physical examination (well physical examination) on a patient who has no complaint or distress.

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____ **SCORE**

Initial general impression	
Appearance	
Speaks when approached	1
Facial expression	1
Skin color	1
Eye contact	1
Weight - estimated/translated to kg	1
Work of breathing	1
Posture, ease of movement	1
Odors of body or breath	1
Dress, hygiene, grooming	1
Level of consciousness/mental status	
Speech	
Quantity	1
Rate	1
Loudness	1
Articulation of words	1
Fluency	1
Mood	1
Orientation	
Time	1
Place	1
Person	1
Memory	
Recent	1
Long term	1
Assesses baseline vital signs	
Vital signs	
Blood pressure	1
Pulses – radial, carotid	
Pulse rate	1
Pulse amplification	1
Respirations	

Respiratory rate	1
Tidal volume	1
Temperature – oral, tympanic, rectal	1
SpO ₂	1
Secondary physical examination	
Skin	
Colors – flushed, jaundiced, pallor, cyanotic	1
Moisture – dryness, sweating, oiliness	1
Temperature – hot or cool to touch	1
Turgor	1
Lesions – types, location, arrangement	1
Nails – condition, cleanliness, growth	1
Head and neck	
Hair	1
Scalp	1
Skull	1
Face	1
Eyes	
Acuity – vision is clear and free of disturbance	1
Appearance – color, iris clear	1
Pupils – size, reaction to light	1
Extraocular movements – up, down, both sides	1
Ears	
External ear	1
Ear canal – drainage, clear	1
Hearing – present/absent	1
Nose	
Deformity	1
Air movement	1
Mouth	
Opens willingly	1
Jaw tension	1
Mucosal color	1
Moisture	1
Upper airway patent	1
Neck	
Trachea – midline	1
Jugular veins – appearance with patient position	1
Chest	
Chest wall movement – expansion	1
Skin color – closed wounds	1
Integrity	
Open wounds	1
Rib stability	1
Presence/absence of pain	1
Lower Airway	
Auscultation – anterior and posterior	
Normal sounds and location	
Tracheal	1

Bronchial	1
Bronchovesicular	1
Vesicular	1
Heart and blood vessels	
Heart	
Apical pulse	1
Sounds	
S ₁	1
S ₂	1
Arterial pulses	
Locate with each body area examined	1
Abdomen	
Color – closed wounds	1
Open wounds	1
Size, symmetry, shape	1
Scars	1
Distention	1
Auscultation	1
Palpation – quadrants, masses, tenderness, rigidity	1
Back	
Color – closed wounds	1
Open wounds	1
Size, symmetry, shape	1
Scars	1
Palpation – tenderness, rigidity, masses	1
Pelvis	
Stability	1
Male genitalia – inquires about:	
Wounds, rashes, external lesions	1
Drainage	1
Female genitalia (non-pregnant) – inquires about:	
Wounds, rashes, external lesions	1
Drainage	1
Asks about bleeding or discharge	1
Musculoskeletal	
Legs and feet	
Symmetry	1
Range of motion	1
Deformity	1
Skin	
Color	1
Closed wounds	1
Open wounds	1
Pulses	
Femoral	1
Popliteal	1
Dorsalis pedis	1
Arms and hands	
Symmetry	1

Range of motion	1
Deformity	1
Skin	
Color	1
Closed wounds	1
Open wounds	1
Pulses	
Brachial	1
Radial	1
Affective	
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner, i.e. uses appropriate name, explains procedures, maintains modesty	1

Actual Time Ended: _____

TOTAL 104 /104

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to adequately assess airway, breathing or circulation
- ___ Performs assessment in a disorganized manner
- ___ Failure to assess the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Performs assessment inappropriately resulting in potential injury to the patient
- ___ Failure to receive a total score of 80 or greater

Comments:

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill? ☐ Successful ☐ Unsuccessful

MEDICAL AND CARDIAC SCENARIO ASSESSMENT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Scene size-up	
Safety	
Takes appropriate PPE precautions – gloves, gown, goggles, vest, helmet	1
Hazards – chemical, thermal, atmospheric, electrical, weapons	1
Environment – bystanders, hostile, ambient temperature, adequate space, day/night, patient prone to sudden behavior change	1
Number of patients and location	1
Clues/evidence at the scene – medication bottles, chemical containers, syringes, illicit drug paraphernalia, etc.	1
Additional resources – Hazmat, heavy rescue, law enforcement, bystanders, historians, air medical	1
Nature of illness – determines reason for call	1
Patient assessment and management	
Begins spinal precautions if indicated	1
Primary survey/resuscitation	
General impression	
Patient appearance – posture, position, obvious distress, incontinence, vomiting, odors, pain	1
Estimates age, gender and weight of patient	1
Manages any gross visible hemorrhage – direct pressure, tourniquet	1
Level of responsiveness	
Awake and oriented	1
Response to verbal stimuli	
Opens eyes	1
Follows simple commands	1
Responds to painful stimuli	
Acknowledges presence of stimuli	1
Responds to irritation stimuli	1
Unresponsive	1
Airway	
Assesses airway – position, obstructions	1
Manages airway as appropriate – suction, adjunct, modified jaw thrust	1
Breathing	
Exposes the chest and inspects for injuries	1
Auscultates lung sounds – presence, clarity, abnormal sounds	1
Notes minute volume – rate, tidal volume and equal chest rise and fall	11

Manages any injury compromising ventilations	1
Administers oxygen or ventilates with appropriate device – BVM, NRB	1
Circulation	
Pulse	
Presence, rate, quality	1
Skin	
Color, moisture, temperature	1
Turgor, edema	1
Capillary refill	1
Disability	
GCS – calculates score	1
Pupils – size, equality, reactivity to light	1
Chief complaint	
Determines chief complaint	1
Transport decision	
Critical – begins immediate packaging for transport or resuscitation	1
Non-critical – continued assessment on scene	1
Vital signs	
Blood pressure	1
Pulse	1
Respirations	1
SpO ₂	1
Pain – if appropriate	1
Secondary assessment – performs secondary physical examination and assesses affected body part(s) or system(s)	
Obtains an oral history – pertinent to situation	1
History of the present illness	
SAMPLE – signs/symptoms; allergies; medications; past medical history; last meal; events leading up to injury	1
OPQRST – onset; provocation; quality; region/radiation; severity; timing	1
Head and Neck	
Immobilization as necessary	1
Interviews for pain, recent trauma, events	1
Inspects and palpates	
Scalp/skull	1
Facial bones	1
Facial muscles – symmetry	1
Jaw	1
Eyes – PERLA, pupil size, ocular movements, visual acuity, position of eyes	1
Mouth – assess tongue, says “Ah,” color of palate	1
Ears – aligns to open canal, discharge	1
Nose – discharge, obstruction, nasal flaring	1
Neck – lumps, hard nodules	1
Trachea – checks for stoma	1
Jugular vein status	1
Cervical spine processes	1
Chest and cardiovascular	

Interviews patient – pain, history, current medications	1
Inspects – rate, rhythm, depth, symmetry, effort of breathing, color, scars, lumps	1
Palpates – tenderness, lumps	1
Auscultates – vesicular, bronchial, bronchovesicular breath sounds in proper locations anteriorly and posteriorly, notes adventitious breath sounds	1
Percussion – symmetry of sounds	1
Oxygenation/ventilation – adjusts oxygen flow, changes adjunct accordingly, administers appropriate respiratory medications	1
Auscultates heart sounds – S ₁ , S ₂	1
Cardiac management – monitor/12-lead ECG, medications	1
Abdomen and pelvis	
Interviews patient – location, type of pain, duration, events leading up to current complaint, food or products ingested	1
Inspects – scars, distention, pulsations, color, including flanks and posterior	1
Auscultation – bowel sounds	1
Palpation – guarding, tenderness with cough or increasing pressure, pulsations, rigidity	1
Assesses pelvic stability	1
Extremities	
Interviews patient – location, type of pain, duration, events	1
Arms – pulses, edema, capillary refill, grip strength, drift	1
Legs – pulses, edema, pressure sores, extension/contraction of legs/feet	1
Manages wounds or splints/supports fractures	1
Mental status examination	
Appearance – dress, eye contact, posture, depression, violence, facial grimaces, actions, mannerisms	1
Speech – spontaneous, slow/fast, volume, clarity, appropriate	1
Mood – depressed, euphoric, manic, anxious, angry, agitated, fearful, guilty	1
Thoughts – racing, hallucinations, delusions, suicidal, unconnected, disturbed, homicidal	1
Neurological	
Interviews patient – pain, paralysis; location, duration, events leading up to, changes over time, past medical history, medications	1
Stroke scale – facial droop, arm drift, abnormal speech	1
Motor system – posturing, involuntary movements, strength, coordination, flaccid, seizures, gait	1
Transportation decision	
Verbalizes destination decision	1
Other assessments and interventions	
Utilizes proper diagnostic tools at the appropriate time – ECG, glucometer, capnography	1
Performs appropriate treatment at the correct time – IVs, oxygenation/ventilation, medication administration	1
Affective	
Explains verbally the use of team members appropriately	1

Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL	86	/86
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Critical Criteria

- ___ Failure to recognize life-threatening injuries
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to provide spinal precautions according to scenario
- ___ Failure to assess or appropriately manage problems associated with airway, breathing, cardiac rhythm, hemorrhage or shock
- ___ Failure to perform primary survey/management prior to secondary assessment/management
- ___ Failure to attempt to determine the mechanism of injury
- ___ Failure to properly assess, manage and package a critical patient within 10 minutes
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 65 or greater

[illegible]

STUDENT SELF-EVALUATION (The examiner is to ask the student to reflect on his/her performance and document his/her response to the following question:)

Were you successful or unsuccessful in this skill?

	Successful
	Unsuccessful

TRAUMA ADULT PHYSICAL ASSESSMENT – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Scene size-up	
Safety	
Takes appropriate PPE precautions – gloves, gown, goggles, vest, helmet	1
Hazards – chemical, thermal, atmospheric, electrical, weapons	1
Environment – bystanders, hostile, ambient temperature, adequate space, day/night	1
Number of patients and location	1
Additional resources – Hazmat, heavy rescue, power company, bystanders, historians, air medical	1
Determines mechanism of injury – height of fall, intrusion, ejection, vehicle telemetry data	1
Patient assessment and management	
Begins spinal precautions if indicated	1
Primary survey/resuscitation	
General impression – patient appearance	
Estimates age, gender and weight of patient	1
Manages any gross visible hemorrhage – direct pressure, tourniquet	1
Level of responsiveness	
Awake and oriented	1
Response to verbal stimuli	
Opens eyes	1
Follows simple commands	1
Response to painful stimuli	
Acknowledges presence of stimuli	1
Responds to irritation stimuli	1
Unresponsive	1
Airway	
Assesses airway – position, obstructions	1
Manages airway as appropriate – suction, adjunct, modified jaw thrust	1
Breathing	
Exposes the chest and inspects for injuries	1
Palpates for instability that impairs breathing – sternum and ribs	1
Auscultates lung sounds – presence, clarity, abnormal sounds	1
Notes minute volume – rate, tidal volume and equal chest rise and fall	1
Manages any injury compromising ventilations	1
Administers oxygen or ventilates with appropriate device – BVM, NRB	1

Circulation	
Pulse	
Presence, rate, quality	1
Skin	
Color, moisture, temperature	1
Capillary refill	1
Removes patient's clothing	1
Performs a rapid, full-body sweep for major hemorrhage or other life-threatening injuries	1
Controls major hemorrhage when found	1
Manages life-threatening injuries if necessary	1
Disability	
GCS – calculates score	1
Pupils – size, equality, reactivity to light	1
Transport decision	
Critical – begins immediate packaging for transport	1
Non-critical – continued assessment on scene	1
Vital signs	
Blood pressure	1
Pulse	1
Respirations	1
SpO ₂	1
Pain – if appropriate	1
Secondary assessment	
Obtains an oral history – pertinent to situation	1
History of the present illness/injury	
SAMPLE – signs/symptoms; allergies; medications; past medical history; last meal; events leading up to injury	1
OPQRST – onset; provocation; quality; region/radiation; severity; timing	1
Head and Neck	
Immobilization as necessary	1
Interviews for pain, inspects and palpates	
Scalp/skull	1
Facial bones	1
Jaw	1
Eyes – PERLA	1
Mouth	1
Ears	1
Nose	1
Neck	
Trachea	1
Jugular vein status	1
Cervical spine processes	1
Manages wounds or splints/supports fractures	1
Chest	
Inspects	1
Palpates	1
Auscultates – credit awarded if already performed in Primary survey	1

Manages any wound not previously treated	1
Abdomen and pelvis	
Inspects	1
Assesses pelvic stability	1
Manages any wound not previously treated	1
Lower extremities	
Inspects and palpates	1
Assess distal function – pulse, motor, sensory, perfusion	1
Manages wounds or splints/supports fractures	1
Upper extremities	
Inspects and palpates	1
Assesses distal function – pulse, motor, sensory, perfusion	1
Manages wounds or splints/supports fractures	1
Posterior thorax, lumbar and buttocks	
Inspects and palpates posterior thorax	1
Inspects and palpates lumbar and buttocks	1
Transportation decision	
Verbalizes destination decision	1
Other assessments and interventions	
Utilizes proper diagnostic tools at the appropriate time – ECG, glucometer, capnography	1
Performs appropriate treatment at the correct time – IVs, splinting, bandaging	1
Affective	
Explains verbally the use of team members appropriately	1
Accepts evaluation and criticism professionally	1
Shows willingness to learn	1
Interacts with simulated patient and other personnel in professional manner	1

Actual Time Ended: _____

TOTAL 76 /76

Critical Criteria

- ___ Failure to recognize life-threatening injuries
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to provide spinal precautions according to scenario
- ___ Failure to assess or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- ___ Failure to perform primary survey/management prior to secondary assessment/management
- ___ Failure to attempt to determine the mechanism of injury
- ___ Failure to assess, manage and package a critical patient within 10 minutes
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention
- ___ Failure to receive a total score of 58 or greater

Comments (CONTINUED ON BACK):

COMPREHENSIVE NORMAL PEDIATRIC PHYSICAL ASSESSMENT TECHNIQUES – SKILL LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

NOTE: The student is to perform a comprehensive physical examination (well physical examination) on a toddler or school-aged child who has no complaint or distress.
*Choose appropriate age level

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____

SCORE

Initial general impression

Appearance	
Facial expression	1
Skin color	1
Work of breathing	1
Odors of body or breath	1
*If toddler or school-aged child:	
Activity level	1
Speaks when addressed	1
*If school-aged child:	
Eye contact	1
Mood	1
Orientation	
Time	1
Place	1
Person	1
Memory	
Recent	1
Long term	1

Assesses baseline vital signs

Vital signs	
Blood pressure	1
Pulses – brachial, radial, carotid	
Pulse rate	1
Pulse amplification	1
Respirations	
Respiratory rate	1
Tidal volume	1
Temperature – oral, tympanic, rectal	1
SpO ₂	1

Secondary physical examination

Somatic growth	
Length	1
Weight	1
Head circumference	1
Skin	
Colors – flushed, jaundiced, pallor, cyanotic	1
Moisture – dryness, sweating, oiliness	1
Temperature – hot or cool to touch	1
Turgor	1
Lesions – types, location, arrangement	1
Nails – condition, cleanliness, growth	1
Head and neck	
Hair	1
Scalp	1
Skull	1
Face	1
Eyes	
Acuity – vision is clear and free of disturbance	1
Appearance – color, iris clear	1
Pupils – size, reaction to light	1
Extraocular movements – up, down, both sides	1
Ears	
External ear	1
Ear canal – drainage, clear	1
Hearing – present/absent	1
Nose	
Deformity	1
Air movement	1
Mouth	
Opens willingly	1
Jaw tension	1
Mucosal color	1
Moisture	1
Upper airway patent	1
Neck	
Trachea – midline	1
Jugular veins – appearance with patient position	1
Chest	
Chest wall movement – expansion	1
Skin color – closed wounds	1
Integrity	
Open wounds	1
Rib stability	1
Presence/absence of pain	1
Lower airway	
Auscultation – anterior and posterior	
Normal sounds and location	
Tracheal	1
Bronchial	1

Bronchovesicular	1
Vesicular	1
Heart and blood vessels	
Heart	
Apical pulse	1
Sounds	
S ₁	1
S ₂	1
Arterial pulses	
Locate with each body area examined	1
Abdomen	
Color – closed wounds	1
Open wounds	1
Size, symmetry, shape	1
Scars	1
Distention	1
Auscultation	1
Palpation – quadrants, masses, tenderness, rigidity	1
Back	
Color – closed wounds	1
Open wounds	1
Size, symmetry, shape	1
Scars	1
Palpation – tenderness, rigidity, masses	1
Pelvis	
Stability	1
Male genitalia – inspects for:	
Wounds, rashes, external lesions, drainage	1
Female genitalia – inspects for:	
Wounds, rashes, external lesions, drainage	1
Musculoskeletal	
Legs and feet	
Symmetry	1
Range of motion	1
Deformity	1
Skin	
Color	1
Closed wounds	1
Open wounds	1
Pulses	
Femoral	1
Popliteal	1
Dorsalis pedis	1
Arms and hands	
Symmetry	1
Range of motion	1
Deformity	1
Skin	
Color	1

FORMATIVE TEAM MEMBER EVALUATION – SCENARIO LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
Assures scene and crew safety by following instructions of Team Leader or suggesting corrective action as needed	1
Anticipates needs of the Team Leader by preparing equipment based upon patient information obtained by the Team Leader	1
Performs tasks correctly when directed by Team Leader	1
Performs all skills in an acceptable manner based on related skill evaluation instruments	1
Demonstrates respect for position as a team member by not interfering with Team Leader's assessment or management plan unless dangerous, speaking up only when spoken to, etc.	1
Immediately suggests correct management if Team Leader errs in a manner which could cause harm to the patient	1
Communicates clearly and professionally with Team Leader, crew, bystanders and others	1
Maintains professionalism and demonstrates appropriate affect toward patient and other team members	1

Actual Time Ended: _____

TOTAL 8 /8

Critical Criteria

- ___ Failure to recognize life-threatening injuries or illness
- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to address safety concerns
- ___ Failure to correct any dangerous or inappropriate intervention
- ___ Performs any action or uses any equipment in a dangerous or inappropriate manner
- ___ Failure to suggest corrective action if a harmful intervention is ordered/performed by others
- ___ Failure to function as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Failure to receive a total score of 6 or greater

Comments (CONTINUED ON BACK):

FORMATIVE TEAM LEADER EVALUATION – SCENARIO LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Signature _____ Student Evaluator: _____ Signature _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Successful; competent; no prompting necessary

Actual Time Started: _____	SCORE
SCENE SIZE-UP	
Took appropriate safety precautions and began to manage scene by delegating tasks and requesting necessary resources <i>Critical Prompts by team:</i> <input type="checkbox"/> Safety <input type="checkbox"/> PPE <input type="checkbox"/> Number of patients <input type="checkbox"/> Additional resources	1
PATIENT ASSESSMENT AND MANAGEMENT	
PRIMARY SURVEY/RESUSCITATION (3 minutes to complete) Addresses spinal stabilization; airway, ventilation, oxygenation, circulation and hemorrhage management <i>Critical Prompts by team:</i> <input type="checkbox"/> AVPU <input type="checkbox"/> Airway/Reposition/Adjunct Breathing/O ₂ /BVM <input type="checkbox"/> Pulse check/CPR start	1
HISTORY TAKING Determines chief complaint, mechanism of injury, associated symptoms	1
SECONDARY ASSESSMENT Obtains vital signs; assesses and manages injuries to HEENT, thorax, abdomen, pelvis, extremities, posterior body; identifies pertinent negatives <i>Critical Prompts by team:</i> <input type="checkbox"/> BP, P, R <input type="checkbox"/> SpO ₂ <input type="checkbox"/> Lung sounds <input type="checkbox"/> ECG <input type="checkbox"/> 12-lead	1
PERTINENT PAST MEDICAL HISTORY Obtains pertinent SAMPLE/OPQRST history	1
FIELD IMPRESSION AND TREATMENT PLAN	
DIFFERENTIAL DIAGNOSIS Creates an appropriate list of differential diagnoses <i>Critical Prompts by team:</i> _____ <i>Critical Differential (specify in comments)</i> _____	1
ACUITY Makes accurate clinical judgments about patient acuity <i>Critical Prompts by team:</i> <input type="checkbox"/> Critical <input type="checkbox"/> Not Critical (specify in comments) _____	1
THERAPEUTIC INTERVENTIONS AND MONITORING Develops treatment plan and implements appropriate treatments based on history, physical exam and monitoring devices <i>Critical Prompts by team:</i> <input type="checkbox"/> Treatment (specify in comments) _____	1
LEADERSHIP	
COORDINATION OF TREATMENT Directs team members to perform tasks with appropriate timeliness, prioritization/sequence <i>Critical Prompts by team:</i> <input type="checkbox"/> Timeliness <input type="checkbox"/> Sequence <input type="checkbox"/> Transport decision (specify in comments) _____	1

