PERCOM EMS Medical Education Consortium P1/AEMT Skills Tracking Worksheet

Student Name:					
Skill:	Unsuccessful Attempts:	Successful Attempts:	Sum Successful Attempts:	Required Minimum Successful:	Simulations Permitted:
	ļ	Airway & Bro	eathing		
Airway Management: -Airway Monitoring (SpO2/EtCo2) -Airway Positioning -BLS Airway Adjuncts -Oxygen with BLS Delivery Devices -Bag Valve Mask - Adult -Basic Airway Suctioning				25	10 (BVM)
Pedi Airway Management: -Pedi BLS Airway Adjuncts - Pedi Airway Positioning -Bag Valve Mask - Pediatric				12	-
CPAP/PEEP				2	-
Adult Endotracheal Intubation (In conjunction with skills listed under "Airway management")				15	10
Pedi Endotracheal Intubation (In conjunction with skills listed under "Pedi Airway management")				12	-
Supraglottic Airway Device(s): -King Airway Device -I-Gel Airway Device -Combitube -Laryngeal Mask Airway				10	10
Pleural Decompression				4	2
Management of Trach tube emergencies				1	-
Surgical Cricothyrotomy				4	2
Needle Cricothyrotomy				4	2
Advanced Airway Suctioning: -Supraglottic devices -ET Tubes				4	2
Mechanical Ventilatory Assistance - Ventilator				1	-
Foreign Body Airway Obstruction Adult - Magill Forcep Removal				4	2
Foreign Body Airway Obstruction Pedi - Magill Forcep Removal				4	2
	Medicat	ion Access/	Administratior	ı	
Intranasal Medication Administration				2	-
Intramuscular Medication Administration Subcutaneous Medication				4	-
Administration Intravenous Access - Manikin				2	-
IV Bolus Medication					
Administration				4	-
V Access - Live				2	-
Phlebotomy - Manikin				3	-
Phlebotomy - Live				1	-
Intraosseous Infusion: -Humeral IO Access -Proximal tibial IO Access				4	2

PERCOM EMS Medical Education Consortium P1/AEMT Lab Skills Tracking Worksheet

Student Name:								
Skill:	Unsuccessful Attempts:	Successf Attempts		Required Minimum Successful:	Simulations Permitted:			
Assessment & Management								
Comprehensive Normal Adult				2	_			
Physical Assessment								
Comprehensive Normal Pediatric Physical Assessment				3	-			
Medical Including Cardiac Physical								
Assessment				4	-			
Obtain a history from an alert				2				
and oriented patient				2	-			
Assessment of a Trauma Patient				4	1 Adult			
-Rapid Trauma Survey				-	1 Pediatric			
Complicated Child Birth:								
-Breech Presentation				_	1 Breech			
-Nuchal Cord -Prolapsed Umbilical Cord				2	1 Prolapsed Cord			
-Prolapsed Umblical Cora -Meconium Staining, Etc.								
<u> </u>								
Distressed Neonate post delivery				1	2			
Normal Child Birth with Newborn				2	2			
Care								
Perform Chest Compressions - Adult				2	2			
Perform Chest Compressions - Pedi				2	1			
Perform Chest Compressions - Neonate				2	1			
Cardiac Arrest				1	1			
	Docume	entation 8	Communication	1				
Introduction to Documentation:								
-PCR Documentation				2	-			
-Narrative Documentation								
Introduction to Communication:								
-Radio report to receiving facility -Facility handoff report				2	-			
Mock PCR Narrative								
Atleast 1 attempt at writing a narrative based on a scenario to be critiqued by the instructor				1	-			
Skills Validati	on - to be com	pleted by	the instructor after	r skills testing sessio	n			
Successful testing on all required			-					
skills sheets			1	1	-			
Successful completion of Final proficiency simulation			1	1	-			

Date all skills completed:

Instructor's Signature:

Instructors - Document student attempts ensuring that there is adequate room for instructors at subsequent sessions to document further attempts as needed. Do NOT fill the entire box. Best practice is to put a diagonal line under the attempts for your session to differentiate between sessions (see below 4 attempts at session 1, 4 attempts at session 2).



PERCOM EMS Medical Education Consortium P1/AEMT Simulation/skill Worksheet

Student Name:	
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The following simulations and skills must be completed prior to completion of P1 skills. The simulations allow for a wide range of skills to be completed, and skills should **NOT** be limited to what is listed below. All appropriate and relevant treatments/interventions should be employed to treat the simulated patient. A single simulation may cover several of the criteria listed below (E.G - Adult anaphylaxis includes a state of Adult Shock, etc.)**These simulations and skills will be added to the simulations and skills in P2.**

MANDATORY: P1 students MUST Lead in specific scenarios that will count toward clinical rotations credits. Those are defined in the table below as "Required Simulations for rotations". Final attempts for **ALL required** <u>simulations for rotations</u> must be completed with minimal to no assistance as team leader.

Required Simulations for rotations - The listed simulations must be documented prior to completion of P1 Skills. The below listed simulations are required as a team leader.							
Simulation:	Initial fo	r each skill participation:	Instructor Signature: Sign when completed				
Adult trauma assessment & treatment (1)							
Pedi trauma assessment & treatment (1)							
Cardiac Arrest (1)							
Pediatric Respiratory Emergency (1)							
Complicated Child Birth - Breech (1)							
Complicated Child Birth - Prolapsed Cord (1)							
Normal Child Birth (2)							
Distressed Neonate post delivery (2)							
Other r	equired sim	ulations for formative/com	petency				
Adult Acute Abdominal Pain (1)							
Adult Anaphylaxis (1)							
Pediatric Anaphylaxis (1)							
Adult Shock - Medical/Cardiac (1)							

Student Name:

The skills listed below must be accomplished during a simulation. It is not necessary that they be completed via the simulations listed on Page 1. Simulations may incorporate as few, or as many of the listed skills as desired as well as skills that are not listed below.

Simulation Skills Proficiency									
Skill Name:	Ir	Initial all successful skills attempts:					Instructor Signature:		
Bag Valve Mask Adult (10)									
Adult Endotracheal Intubation (10)									
Supraglottic Airway Device (10)									
Surgical Cricothyrotomy (2)				1					
Needle Cricothyrotomy (2)									
Pleural Decompression (2)									
Intraosseous Access (2)									
Advanced Airway Suctioning (2)									
FBOA - Adult magill forcep removal (2)									
FBOA - Pedi magill forcep removal (2)									
Complicated child birth with newborn care (2)									
Normal child birth with newborn care (2)									
Perform Chest Compressions - Adult (2)									
Perform Chest Compressions - Pediatric (1)									
Perform Chest Compressions - Neonate (1)									
Documentation - Mock PCR (1)									

Instructors: Sign below after all simulations/skills have been validated.

Instructor Signature:

PERCOMOnline EMS Education

P1 Testing Sheets

Instructor:

Fill out the information below and all entered information should populate the appropriate fields within the form. This is limited to the start/end times, name, and date. Then scroll through the sheets, adjusting grades as indicated by performance. If applicable, use the last sheet to document any skills failures in detail. Then all sheets must be signed.

Date:

Student Name:

Cardiac Arrest/AED	Time Started:	Time Ended:
Supraglottic Airway	Time Started:	Time Ended:
Endotracheal Intubation - Adult	Time Started:	Time Ended:
Pedi Respiratory Compromise	Time Started:	Time Ended:
Endotracheal Intubation - Pedi	Time Started:	Time Ended:
Intravenous Access	Time Started:	Time Ended:
IV Bolus Medication	Time Started:	Time Ended:
Intraosseous Access	Time Started:	Time Ended:
Patient Assessment - Medical	Time Started:	Time Ended:
Patient Assessment - Trauma	Time Started:	Time Ended:
Hemorrhage Control/Shock	Time Started:	Time Ended:

Adult CPR and AED

Date:

Examiner Signature:

Student Name:

Scenario: "You arrive on the scene of 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		
Takes or verbalizes appropriate PPE Precautions	1	1
Determines the scene/situation is safe	1	1
Attempts to question any bystanders about arrests events	1	1
Checks patient responsiveness	1	1
 Assesses breathing and pulse simultaneously Assesses patient for signs of breathing [observes the patient and determines the absence of breathing or abnormal breathing (gasping or agonal respirations}] (1 point) Checks carotid pulse [no more than 10 seconds] (1 point) 	2	2
Immediately begins chest compressions [adequate depth, rate; allows for complete chest recoil]	1	1
Requests additional EMS response	1	1
Performs 2 minutes of high quality, one 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 volume 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 compression the AED.	ons while candi	date operates
Turns on power to AED	1	1
Follows prompts and correctly attaches AED to the patient	1	1
Stops CPR and ensures all individuals are clear of the patient during rhythm analysis	1	1
Ensures that all individuals are clear of the patient and delivers shock from the AED	1	1
Immediately directs rescuer to resume CPR	1	1
Time Started: Time Ended: Total:	18	18
Critical Criteria:	Pass	
Uses or orders a harmful intervention	Fail	
Exhibits unprofessional behavior		

Supraglottic Airway Device Adult

• •					
Date:	Examiner Signature:	T '	- 14. 5. 841	_	
Student Name:		<u>I ime Lin</u>	nit: 5 Minut	es	
Time Started: Time Ended:		Possible Points			
Selects, Checks, assembles equipment					
BVM with mask and reservoir.			1	1	
Oxygen tank.			1	1	
Airway Adjuncts.			1	1	
Suction unit with appropriate catheters.			1	1	
Supraglottic Airway Device (King Airway, Combi-tube, LMA, iGel).			1	1	
Capnography/Capnometry, other confirmation devices, etc.			1	1	
Prepares Patient			- I		
Takes Appropriate PPE Precautions.			1	1	
Manually Opens airway.			1	1	
Inserts Adjunct (Oropharnygeal or nasopharyngeal airway). Ventilates the patient are a rate of 10 - 12/min. and sufficient volume to	make chest risc		1	1	
Ventilates the patient are a rate of 10 - 12/min. and sufficient volume to Attaches pulse oximeter and assesses SPO2.			1	1	
Preoxygenates or directs preoxygenation of the patient.			1	1	
Performs Insertion of supraglottic airway device			•		
Lubricates the distal tip of the device.			1	1	
Positions head properly.			1	1	
Performs a tongue-jaw lift.			1	1	
nserts device to proper depth.			1	1	
Secures device in patient (inflates cuffs with proper volume(s) and removes	syringe or secures straps).		1	1	
Ventilates patient and confirms proper ventilation by auscultation over I	ungs and epigastrum.		1	1	
Adjusts placement as necessary (using secondary lumen, or withdrawir			1	1	
/erifies proper placement by secondary confirmation devices (ETCO2,	colormetric, etc.).		1	1	
Secures device.			1	1	
Ventilates patient at proper rate and volume while observing capnograp	ohy/capnometry and SPO2.		1	1	
Affective Performance			4		
Accepts evaluation and criticism professionally.			1	1	
Shows willingness to learn. Interacts with simulated patient and other personnel in professional ma	nper		1	1	
		I	I	'	
	<u>Score to pass: 21</u> Total:	25	25		
Failure to initiate ventilations within 30 seconds after taking PPE pr ventilations when Sp02 is less than 90% at any time.	recautions or interrupts	Pas:	6		
		🗌 Fail			
Failure to take or verbalize appropriate PPE precautions.	🗔 Incontion on use of once aligned in				
If used, suctions the patient for more than 10 seconds.	Insertion or use of any adjunct in Exhibits unacceptable affect with		-	e patient.	
Failure to preoxygenate the patient for more than 10 seconds.					
Failure to disconnect syringe immediately after inflating any cuff.	└─┘ minimally competent EMT.				
Failure to properly secure device in patient.	Failure to receive a total score o	of 19 or greate	er		
Failure to assure proper tube placement by auscultation bilaterally					
Failure to voice, and ultimately provide high concentration oxygen.					
Failure to ventilate the patient at a rate of atleast 10/minute and no					
Failure to provide adequate volumes per breath [maximum 2 errors	s/minute permissible]				
Other as described in the comment section.					

Endotracheal Intubation

Date:	Examiner Sig	inature:		
Student Name:		<u>Time l</u>	Limit: 5 Minu	tes
Time Started:	Time Ended:	Pass Possit		
Selects, Checks, assembles equipment				
BVM with mask and reservoir.			1	1
Oxygen tank.			1	1
Airway Adjuncts.			1	1
Suction unit with appropriate catheters.			1	1
Largyngoscope and blades			1	1
Appropriate ET tube and stylette/bougie			1	1
Capnography/Capnometry, other confirmation dev	vices, etc.		1	1
Prepares Patient				1
Takes Appropriate PPE Precautions.			1	1
Manually Opens airway.			1	1
Inserts Adjunct (Oropharnygeal or nasopharyngea			1	1
Ventilates the patient are a rate of 10 - 12/min. an	d sufficient volume to make chest ris	se.	1	1
Attaches pulse oximeter and assesses SPO2.			1	1
Preoxygenates or directs preoxygenation of the p			1	1
Performs Insertion of supraglottic airway devi	ce			
Positions patient's head/neck appropriately			1	1
Inserts blade and displaces tongue			1	1
elevates mandible with laryngoscope			1	1
Inserts ET tube and advances to proper depth			1	1
Inflates cuff to proper pressure and immediately remo			1	1
Ventilates patient and confirms placement by aus			1	1
Immediate utilization of secondary confirmation to	OIS MUST INCLUDE WAVEFORM	CAPNOGRAPHY	1	1
Assesses for hypoxia during attempt Secures device.			1	1
Ventilates patient at proper rate and volume while	charting connegraphy/connegrativ	(and SBO2	1	1
Suctions secretions from tube	observing capitography/capitometry	/ and SFO2.	1	I
Recognizes need to suction			1	1
Selects appropriate flexible suction catheter			1	1
Inserts catheter into ET tube while leaving catheter	er port open		1	1
At proper depth, applies suction while withdrawing			1	1
Immediately ventilates/directs ventilation or patier		vater	1	1
Affective			•	•
Accespts evaluation and criticism professionally			1	1
Shows willingness to learn			1	1
Interacts with simulated patient and other personr	nel in professional manner		1	1
· · ·	·	Total:	31	21
Critical Criteria: Failure to initiate ventilations within 30 second	Minimum Score to past ds after taking PPE precautions or in	<u>s: 25</u>		31 t any time.
Failure to take or verbalize appropriate PPE		f any adjunct in a manner dangero		-
If used, suctions the patient for more than 10	seconds. Exhibits una	cceptable affect with patient or per	sonnel.	
Failure to preoxygenate the patient for more t	han 10 seconds. Failure to red	ceive a total score of 25 or greater		
Failure to disconnect syringe immediately after		properly secure device in patient.		
Failure to assure proper tube placement by a				
Failure to voice, and ultimately provide high c		s described in the comment sectio	n.	
Failure to ventilate the patient at a rate of atle				
Failure to provide adequate volumes per brea	ath [maximum 2 errors/minute permis	ssible]		
If used, stylette extends beyond end of the E	T tube Uses teeth as a fu	ılcrum		

Pediatric Respiratory Compromise

Date: Exam	iner Signature:	
Student Name:	Time Limit: 5 Minutes	
Time Started: Time Ended:	Pass Possible Points Points Awarded Fail	
Takes or verbalizes appropriate PPE precautions	1 1	
Verbalizes general impression of the patient	1 1	
Determines level of consciousness	1 1	_
Assesses the airway [looks for secretions and signs of FBAO; listens for audit	le noises and voice sounds] 1 1	
Assesses breathing [rate, rhythm, chest excursion, audible noises]	1 1	
Attaches pulse oximeter and evaluates SpO2 reading	1 1	_
NOTE: Examiner now informs candidate "Pulse oximeter shows a satura	tion 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 vitals [NIBP not required and may not be obtainable in a dist	ressed and moving infant] 1 1	
NOTE: Examiner now advises candidate that patient begins to develop d bobbing, drowsiness, etc.	ecreasing SpO2, decreasing pulse rate, see-saw respirations, head	
Places patient supine and pads appropriately to maintain a sniffing position	1 1	_
Manually opens airway	1 1	
Selects appropriately sized airway adjunct	1 1	
NOTE: Examiner now informs candidate no gag reflex is present, and pa approximately 20/minute.	tient accepts airway adjunct. The patient's respiratory rate is now	
Inserts airway adjunct properly and maintains head and neck for ventilation [Anator	nical insertion without rotation] 1 1	
Selects appropriate BVM and attaches reservoir to oxygen flowing at 12-15 L/	Minute 1 1	
Assures tight mask seal	1 1	
Ventilates at sufficient volume to cause chest rise	1 1	
NOTE: Examiner must now ask the candidate, "How would you know if y	ou are delivering appropriate volumes with each ventilation?"	
Observes skin signs, capnography/capnometry, and pulse oximeter to determ	ine adequacy of ventilation 1 1	
Calls for immediate transport of the patient	1 1	
***At this point the NREMT skill is concluded but PERCOM students may	be directed to proceed to the Pediatric Endotracheal Intubation skill*	***
Critical Criteria: Minimum Score	to pass: 16	
Uses or orders a harmful intervention		
Failure to take or verbalize appropriate PPE precautions.		
Exhibits unacceptable affect with patient or personnel.	ilure to appropriately pad the shoulders/back	
Failure to receive a total score of 16 or greater	ther as described in the comment section.	

Insertion or use of any adjunct in a manner dangerous to the patient.

Pediatric Endotracheal Intubation

Date:	Examiner	Signature:		
Student Name:		Tim	e Limit: 5 M	linutes
Time Started:	Time Ended:	FdSS		vints arded
Selects, Checks, assembles equipmen	t			
BVM with mask and reservoir.			1	1
Oxygen tank.			1	1
Airway Adjuncts.			1	1
Suction unit with appropriate catheters.			1	1
Largyngoscope and blades			1	1
Appropriate ET tube and stylette/bougie			1	1
Capnography/Capnometry, other confirma	ation devices, etc.		1	1
Prepares Patient				
Takes Appropriate PPE Precautions.			1	1
Manually Opens airway *REQUIRES PAD			1	1
Inserts Adjunct (Oropharnygeal or nasoph Ventilates the patient are a rate of 10 - 12		t rico	1	1
Attaches pulse oximeter and assesses SF			1	1
Preoxygenates or directs preoxygenation			1	1
Performs Insertion of supraglottic airw			-	
Positions patient's head/neck appropriate	-		1	1
Inserts blade and displaces tongue	<u>y</u>		1	1
elevates mandible with laryngoscope			1	1
Inserts ET tube and advances to proper d	epth		1	1
Inflates cuff to proper pressure and immedia			1	1
Ventilates patient and confirms placemen		um	1	1
Immediate utilization of secondary confirm			1	1
Assesses for hypoxia during attempt			1	1
Secures device.			1	1
Ventilates patient at proper rate and volur	ne while observing capnography/capnome	etry and SPO2.	1	1
Suctions secretions from tube				
Recognizes need to suction			1	1
Selects appropriate flexible suction cather			1	1
Inserts catheter into ET tube while leaving			1	1
At proper depth, applies suction while with	-		1	1
Immediately ventilates/directs ventilation	or patient as catheter is flushed with sterile	e water	1	1
Affective	iopally		1	4
Accespts evaluation and criticism profess Shows willingness to learn	onally		1	1
Interacts with simulated patient and other	personnel in professional manner		1	1
Critical Criteria:	Minimum Score to p	Dass: 25		31
Failure to initiate ventilations within 3	0 seconds after taking PPE precautions o	r interrupts ventilations when Sp02	2 is less than 90	% at any time.
Failure to take or verbalize appropria	e PPE precautions. Insertion or use	e of any adjunct in a manner dang	erous to the pat	ient.
If used, suctions the patient for more		inacceptable affect with patient or	personnel.	
Failure to preoxygenate the patient fo		receive a total score of 25 or grea		
Failure to disconnect syringe immedi		to properly secure device in patie	nt.	
Failure to voice, and ultimately provid	ent by auscultation bilaterally and over the	e epigastrum. er as described in the comment se	ction.	
	te of atleast 10/minute and no more than			
	per breath [maximum 2 errors/minute per			
If used, stylette extends beyond end	_	opriately pad the shoulders/back		

Intravenous Therapy - Access

			Time a Line it. F AA	inutes
Student Name:			<u>Time Limit: 5 M</u>	inutes
Time Started:	Time Ended:	─────────────────────────────────────	Possible Points	Points Awarde
Clearly explains the procedure to the patient			1	1
Selects, Checks, assembles equipment				•
Intravenous Solution			1	1
Administration Set			1	1
Appropriately sized catheter			1	1
Universal start kit (Disinfectant, gauze, constricting b	and, extension set, tape/veniqua	rd)	1	1
Spikes IV bag	, , , , , , , , , , , , , , , , , , , ,	/		
Checks solution for:				
 Proper choice of solution (1 point) Clarity or particulate matter (1 point) Expiration date (1 point) Protective cover on the insertion port(s) 	(1 point)		4	4
Checks administration set for: - Drip rate (1 point) - Tubing integrity (1 point) - Protective covers on both ends (1 point) - Functionality and placement of the clamp	o (1 point)		4	4
Removes protective cover on drip chamber while ma	aintaining sterility		1	1
Removes protective cover on IV insertion point while	e maintaining sterility		1	1
Inserts IV tubing spike into IV solution bag by twistin	g until the inner seal is punctured		1	1
Turns the IV bag upright and squeezing the drip cha	mber until it is approximately half	way full	1	1
Turns on flow and purges all air from the administrat			1	1
Performs Venipuncture				
Tears sufficient tape to secure IV or prepares comm	ercial veniguard		1	1
Opens disinfectant swab and gauze while maintainir	-		1	1
Takes appropriate PPE precautions			1	1
Identifies appropriate potential site for cannulation			1	1
Applies constricting band appropriately			1	1
Palpates and identifies suitable vein			1	1
Cleanses site, starting from the center and moving o	utward in a circular motion		1	1
Removes IV needle from package while maintaining			1	1
Inspects the needle for burrs	,		1	1
Loosens the catheter hub with a twisting motion			1	1
Stabilizes the vein and extremity by grasping and str	etching the skin while maintaing	sterility	1	1
Warn the patient to expect the needle stick	5 5	,	1	1
Performs the puncture competently			1	1
After visualizing flash, advances the catheter withou	t advancing the needle any furthe	er until the hub reaches the	skin 1	1
Withdraw the needle (locks safety feature if applicab			1	1
Disposes of needle in sharps container	/1 11 / 31		1	1
Removes cap from the IV tubing and attaches to the	catheter hub while maintaining s	terility	1	1
Releases the constricting band		,	1	1
Open the clamp and allow flow of IV solution while n	nonitoring for infiltration. irritation.	etc.	1	1
Adjust flow rate as indicated and secure catheter/tub	-		1	1
Affective Performance				· ·
Accepts evaluation and criticism professionally.			1	1
Shows willingness to learn.			1	1
nteracts with simulated patient and other personnel	in professional manner.		1	1
Critical Criteria:	Minimum Score to	<u>o pass: 34</u> Tota	al: 41	41
Contamination of equipment or site without a		_	n the comment section.	

Intravenous	Bolus	Medication	Administration
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Date:	Examiner S	Signature:		
Student Name:		Time Limit: 5 Minutes		
Time Started:	Time Ended:	─	Possible Points	Points Awarded
Clearly explains the procedure to the patient			1	1
Selects, Checks, assembles equipment			L	
Appropriate IV medication			1	1
Sharps container			1	1
Alcohol prep swabs			1	1
Appropriate syringe and needle combination			1	1
Administers medication				
Confirms medication order			1	1
Asks patient for known allergies			1	1
Explains the procedure and expected outcomes/side e	ffects		1	1
) ght dosage/concentration ght documentation		6	6
Assembles syringe/needle combination, or pre-filled sy	ringe		1	1
Takes or verbalizes appropriate PPE precautions			1	1
Identifies and cleanses most proximal injection site (Y-	port or hub)		1	1
Reconfirms medication			1	1
Stops/slows IV flow rate (If applicable)			1	1
Disposes/verbalizes proper disposal of syringe and oth	er in proper containers		1	1
Turns IV on and adjusts flow to desired rate			1	1
Verbalizes need to observe patient for desired effect an	nd adverse reactions		1	1
Affective Performance				
Accepts evaluation and criticism professionally.			1	1
Shows willingness to learn.			1	1
Interacts with simulated patient and other personnel in	professional manner.		1	1
Critical Criteria:	Minimum Score to pa	ass: 19 Total:	25	25
Contamination of equipment or site without appr	opriately correcting situation			
Failure to take or verbalize appropriate PPE pre	cautions.			
Performs any improper technique resulting in the	e potential for air embolism			
Injects improper medication or dosage (wrong n	nedication, amount, or rate)			

Recaps needle or failure to dispose/verbalize disposal of syringe or other material

Failure to turn on IV after administering medication

Other as described in the comment section.

	Intraosseous	s Infusion		
Date: Examiner Signature:				
Student Name:			Time Limit: 5 Mi	nutes
Time Started:	Time Ended:	Pass Fail	Possible Points	Points Awarded
Clearly explains the procedure to the patie	ent if applicable		1	1
Selects, Checks, assembles equipment	t			
Intravenous Solution			1	1
Administration Set			1	1
IO needle and insertion device			1	1
Universal start kit (Disinfectant, gauze, co	nstricting band, extension set, tape/venig	uard)	1	1
Spikes IV bag				
Checks solution for: - Proper choice of solution (1 po - Clarity or particulate matter (1 - Expiration date (1 point) - Protective cover on the insertion	point)		4	4
Checks administration set for: - Drip rate (1 point) - Tubing integrity (1 point) - Protective covers on both end - Functionality and placement o			4	4
Removes protective cover on drip chambe	er while maintaining sterility		1	1
Removes protective cover on IV insertion	point while maintaining sterility		1	1
Inserts IV tubing spike into IV solution bag	by twisting until the inner seal is punctur	red	1	1
Turns the IV bag upright and squeezing th	e drip chamber until it is approximately h	alf way full	1	1
Turns on flow and purges all air from the a	administration set		1	1
Performs Intraosseous insertion				
Tears sufficient tape to secure IO or prepa	ares commercial securing device		1	1

Opens disintectant swab and gauze while maintaining sterility	1	1
Takes appropriate PPE precautions	1	1
Identifies appropriate potential site for IO placement	1	1
Prepares IO needle and insertion device while maintaining sterility	1	1
Stabilizes the site in a safe manner [if using the tibia, DOES NOT hold the leg in the palm of hand]	1	1
Inserts needle at proper angle and direction [away from joint, epipheseal plate, etc.]	1	1
Recognizes that needle has entered intermedullary canal [feels "pop", or notices lack of resistance]	1	1
Removes stylette and immediately disposes in proper container	1	1
Attaches extension set to the IO catheter	1	1
Slowly injects solution for signs of infiltration or aspirates to verify proper needle placement	1	1
Attaches administration set and adjusts flow rate as appropriate		1
Secures needle with bulky dressing or commercial securing device	1	1
Assesses patient for therapeutic response or signs of untoward effects	1	1
Affective Performance		
Accepts evaluation and criticism professionally.	1	1
Shows willingness to learn.	1	1
Interacts with simulated patient and other personnel in professional manner.		1
Critical Criteria:Minimum Score to pass: 30Total:	35	35

Contamination of equipment or site without appropriately correcting situation Other as described in the comment section.

Failure to take or verbalize appropriate PPE precautions. Failure to dispose of blood contaminated sharps immediately at the point of use.

Performs IO puncture in an unacceptable or unsafe manner (improper site, incorrect angle, holds leg in palm and performs IO puncture directly above hand, etc.)

Patient Assessment - Medical

Date: Examiner	Signature:		
Student Name:		Time Limit: 15 M	inutes
Scenario:	Pass Fail	Possible Points	Points Awarded
Time Started: Time Ended:			
Takes or verbalizes appropriate PPE precautions		1	1
Scene Size-Up			
Determines the scene/situation is safe		1	1
Determines the mechanism of injury/nature of illness		1	1
Determines the number of patients		1	1
Requests additional resources as indicated		1	1
Considers stabilization of spine		1	1
Primary Assessment			
Verbalizes general impression of the patient		1	1
Determines responsiveness/level of consciousness		1	1
Determines chief complaint/apparent life threats		1	1
Assesses airway and breathing: - Assessment (1 point) - Assures adequate ventilation (1 point) - Initiates appropriate oxygen therapy [if indicated] (1 point)		3	3
Assesses circulation: - Assesses/controls major bleeding (1 point) - Assesses skin [skin color, temperature, and condition] (1 point) - Assesses pulse [rate, regularity, and quality] (1 point)		3	3
Identifies priority patients/makes transport decision		1	1
History Taking and Secondary Assessment		- 1 - 1	
History of present illness: - Onset (1 point) - Severity (1 point) - Provocation (1 point) - Time (1 point) - Quality (1 point) - Clarifying questions of associated S/s as rela - Radiation (1 point)	ted to OPQRST (2 points)	8	8
Past medical history: - Allergies (1 point) - Past pertinent history (1 point) - Med - Events leading to present illness (1 point) - Last oral intake (1 point)	ications (1 point)	5	5
Performs secondary assessment [assesses affected body system or; if indicated compl - Cardiovascular - Pulmonary - Genitourinary - Neurological - Musculoskeletal - Reproductive - Integumentary - Gastrointestinal - Psychological/		5	5
	el of consciousness (1 point) e oximetry (1 point)	6	6
Diagnostics [blood glucose test, capnography/capnometry] (1 point each)		2	2
States field impression of patient		1	1
Verbalizes treatment plan for patient and calls [for appropriate intervention(s)]		1	1
Re-evaluates transport decision		1	1
Reassessment		•	
Repeats primary assessment		1	1
Repeats vital signs		1	1
Evaluates response to any interventions		1	1
Repeats secondary assessment regarding patient complaint or injuries		1	1
Critical Criteria: Minimum Score t	<u>o pass: 42</u> To	tal: 49	49
 Uses or orders a harmful intervention Exhibits unprofessional behavior 			

Other as described in the comment section.

Patient Assessment - Trauma

Date: Exar	niner Signature:		
Student Name:	<u>Tim</u>	e Limit: 15 M	inutes
Scenario:	Pass Fail	Possible Points	Points Awarded
Time Started: Time Ended:			
Takes or verbalizes appropriate PPE precautions		1	1
Scene Size-Up	· · · · · · · · · · · · · · · · · · ·		
Determines the scene/situation is safe		1	1
Determines the mechanism of injury/nature of illness		1	1
Determines the number of patients		1	1
Requests additional resources as indicated		1	1
Considers stabilization of spine		1	1
Primary Assessment			
Verbalizes general impression of the patient		1	1
Determines responsiveness/level of consciousness		1	1
Determines chief complaint/apparent life threats		1	1
Airway:			
- Opens and assesses airway (1 point) - Inserts appropriately sized ad	ljunct [if indicated](1 point)	2	2
Breathing: - Assesses breathing (1 point) - Assures adequate ventilation - Administers oxygen as indicated (1 point) - Manages any injury which may compromise breathing/ventilation (1 po		4	4
Circulation: - Checks pulse (1 point) - Assesses skin [color, temperature, and - Assesses for and controls major bleeding if present (1 point) - Initiates shock management as indicated (1 point)	condition] (1 point)	4	4
Identifies priority patients/makes transport decision based upon calculated GCS		1	1
History Taking and Secondary Assessment			
Head:			
- Inspects the head (1 point) - Palpates the skull (1 point) - Assesses eyes for reactiveness (1 point)		3	3
Neck: - Inspects position of trachea (1 point) - Inspects jugular veins (1 point) - Palpates cervical spine (1 point)		3	3
Chest: - Inspects chest (1 point) - Palpates chest (1 point) - Auscultate chest (1 point)		3	3
Abdomen/Pelvis: - Inspects abdomen (1 point) - Palpate abdomen (1 point) - Assess pelvis [priapism, blood, other fluids] (1 point)		3	3
Lower extremities: - Inspects, palpates and assesses motor sensory, and distal circulatory	functions (1 point/leg)	2	2
Upper extremities: - Inspects, palpates and assesses motor sensory, and distal circulatory	functions (1 point/arm)	2	2
Reassessment			
Repeats primary assessment		1	1
Repeats vital signs		1	1
Evaluates response to any interventions		1	1
Repeats secondary assessment regarding patient complaint or injuries		1	1
repeate secondary association regarding patient complaint or injunes		•	'

Exhibits unprofessional behavior

Other as described in the comment section.

Bleeding Control/Shock Management

Date:	Examiner	Signature:			
Student Name:			Time Lin	nit: 5 Min	utes
Time Started:	Time Ended:	Pass Fail	Possible Points	Point Award	-
Takes or verbalizes appropriate PPE	precautions			1	1
Applies direct pressure to the wound				1	1
NOTE: The examiner must now inf	form the candidate that the wound continue	es to bleed.	· · ·		
Applies tourniquet				1	1
NOTE: The examiner must now info	orm the candidate that the patient is exhibit	ting signs and symptoms	of hypoperf	usion.	
Properly positions the patient				1	1
Administers oxygen				1	1
Initiates steps to prevent heat loss fro	om the patient			1	1
Indicates the need for immediate trar	sportation			1	1
Critical Criteria:	Minimum Score to p	ass: 6	Total:	7	7
Uses or orders a harmful interve	ntion		_		
Failure to take or verbalize appro	opriate PPE precautions.				
Exhibits unacceptable affect with	ı patient or personnel.				
Failure to indicated need for imm	nediate transport				

Other as described in the comment section.

Documentation for Unsuccessful attempts

In the fields below you must factually document your rationale for checking critical criteria on any of the attached skills sheets. Provide a thorough account of inappropriate actions, interventions, or behavior for each unsuccessful attempt individually.

Skill Name: N/a

Skill Name: N/a

Skill Name: N/a

Scenario Skills

Use the following page to docun	ient testing scenarios and any	/ additional skills t	hat where performed	correctly	over the course o	f that scenario.
In the event that a student attem	pts a unlisted skill incorrectly	, that can be docu	mented on the previo	us page.		

	Pass
Scenario:	Fail

N	otos	
14	oles	••

СРАР	Intranasal Med Administration	Normal delivery with newborn care
Pleural Decompression	Intramuscular Med Administration	Abnormal delivery with newborn care
Nasotracheal Intubation	Subcutaneous Med Administration	Spinal immobilization - Seated
Needle Cricothyrotomy	Inhaled Med Administration	Spinal immobilization - Supine
Surgical Cricothyrotomy		Traction Splint
		Long Bone/Joint immobilization

Scenario Skills Use the following page to document testing scenarios and any additional skills that where performed correctly over the course of that scenario. In the event that a student attempts a unlisted skill incorrectly, that can be documented on the previous page.		
Notes:		
СРАР	Intranasal Med Administration	Normal delivery with newborn care
Pleural Decompression	Intramuscular Med Administration	Abnormal delivery with newborn care
Nasotracheal Intubation	Subcutaneous Med Administration	Spinal immobilization - Seated
Needle Cricothyrotomy	Inhaled Med Administration	Spinal immobilization - Supine
Surgical Cricothyrotomy		Traction Splint
		Long Bone/Joint immobilization