

ALTERNATIVE AIRWAY DEVICE (SUPRAGLOTTIC AIRWAY)

Candidate:Ex	aminer:		
Date: Signature	gnature:		
Device:			
NOTE: If candidate elects to initially ventilate with BVM attached to reservo	ir and oxygen, full credit must be awar	rded for step	s denoted by
"**" so long as first ventilation is delivered within 30 seconds.			
		Possible	Points
Actual Time Started:		Points	Awarded
Takes or verbalizes body substance isolation precautions		1	
Opens the airway manually		1	
Elevates tongue, inserts simple adjunct [oropharyngeal or nasopharyngeal	airwavl	1	
NOTE: Examiner now informs candidate no gag reflex is present and			
**Ventilates patient immediately with bag-valve-mask device unattached to		1	
**Ventilates patient with room air	Oxygen	1	
·			
NOTE: Examiner now informs candidate that ventilation is being perfectly the metion to blood anymon participate 25%	ormea without αιπισμίτy and that pu	ilse oximetr	y indicates
the patient's blood oxygen saturation is 85%			
Attaches oxygen reservoir to bag-valve-mask device and connects to high-	flow oxygen regulator	1	
[12 – 15 L/minute]			
Ventilates patient at a rate of 10 – 12/minute with appropriate volumes		1	
NOTE: After 30 seconds, examiner auscultates and reports breath soul		and medica	l direction
has ordered insertion of a supraglottic airway. The examiner must no	w take over ventilation.		
Directs assistant to pre-oxygenate patient		1	
Checks/prepares supraglottic airway device		1	
Lubricates distal tip of the device [may be verbalized]		1	
NOTE: Examiner to remove OPA and move out of the way when candi	data is propared to insert device	<u>'</u>	
Positions head properly	uate is prepared to misert device.	1	
		1	
Performs a tongue-jaw lift		1	
Inserts device to proper depth		1	
Secures device in patient [inflates cuffs with proper volumes and immediate	ely removes syringe or	1	
secures strap]			
Ventilates patient and confirms proper ventilation [correct lumen and prope	r insertion depth] by auscultation	1	
bilaterally over lungs and over epigastrium			
Adjusts ventilation as necessary [ventilates through additional lumen or slig	htly withdraws tube until	1	
ventilation is optimized]			
Verifies proper tube placement by secondary confirmation such as capnog	raphy, capnometry, EDD or	1	
colorimetric device	3, 1	'	
NOTE: The examiner must now ask the candidate, "How would you ki	now if you are delivering appropriat	te volumes v	vith
each ventilation?"	to the second second second		
Secures device or confirms that the device remains properly secured		1	
Ventilates patient at proper rate and volume while observing capnography/	cannometry and pulse oximeter	1	
volunated parions at proportate and volume wine observing supriographly	saprioritotaly and pales extinicion		
Actual Time Ended:	TOTAL	19	
Actual Time Ended:	TOTAL	19	
Critical Criteria			
Failure to initiate ventilations within 30 seconds after taking body substanc	e isolation precautions or interrupts vent	ilations for gre	eater than 30
seconds at any time			
Failure to take or verbalize body substance isolation precautions	050/1		
Failure to voice and ultimately provide high oxygen concentration [at least	35%]		
Failure to ventilate the patient at a rate of 10 – 12/minute Failure to provide adequate volumes per breath [maximum 2 errors/minute	normicciblol		
Failure to provide adequate volumes per breath [maximum 2 ends/minute Failure to pre-oxygenate patient prior to insertion of the supraglottic airway			
Failure to insert the supraglottic airway device at a proper depth or location			
Failure to inflate cuffs properly and immediately remove the syringe			
Failure to secure the strap (if present) prior to cuff inflation			
Failure to confirm that patient is being ventilated properly (correct lumen ar	id proper insertion depth) by auscultation	n bilaterally o	ver lungs and
over epigastrium	. , .	-	-
Insertion or use of any 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			
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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 pr	ecautions	1	
Determines the scene/situation is safe		1	
Attempts to question any bystanders about arrest events		1	
Checks patient responsiveness		1	
Assesses patient for signs of breathing [observes the patien of breathing or abnormal breathing (gasping or agonal respi	t and determines the absence rations)]	1	
Checks carotid pulse [no more than 10 seconds]		1	
Immediately begins chest compressions [adequate depth ar recoil completely]	nd rate; allows the chest to	1	
Requests additional EMS response		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		5	
NOTE: After 2 minutes (5 cycles), patient is assessed ar	nd second rescuer resumes com	pressions	while
candidate operates AED.			
Turns-on power to AED		1	
Follows prompts and correctly attaches AED to patient		1	
Stops CPR and ensures all individuals are clear of the patie		1	
Ensures that all individuals are clear of the patient and deliv	ers shock from AED	1	
Immediately directs rescuer to resume chest compressions		1	
Actual Time Ended:	TOTAL	18	
Critical Criteria Failure to take or verbalize appropriate body substance Failure to immediately begin chest compressions as so 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-rescuence 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 shock(s) [verbalizes "All clear" and observes] Failure to immediately resume compressions after sho Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personutes. Uses or orders a dangerous or inappropriate intervention	oon as pulselessness is confirmed uer adult CPR to during rhythm analysis and befor ck delivered	e deliverinç	3



INTRAVENOUS THERAPY

Candidate: Examiner:		
Date: Signature:		
Level of Testing: ☐ NREMT-Intermediate/85 ☐ NRAEMT ☐ NREMT-Intermediate/99 ☐ NREMT-Paramediate/99 ☐ NREMT-Paramed	Possible Points	Points Awarded
Checks selected IV fluid for:		
-Proper fluid (1 point)		
-Clarity (1 point)	3	
-Expiration date (1 point)		
Selects appropriate catheter	1	
Selects proper administration set	1	
Connects IV tubing to the IV bag	1	
Prepares administration set [fills drip chamber and flushes tubing]	1	
Cuts or tears tape [at any time before venipuncture]	1	
Takes or verbalizes body substance isolation precautions [prior to venipuncture]	1	
Applies tourniquet	1	
Palpates suitable vein	1	
Cleanses site appropriately	1	
Performs venipuncture		
-Inserts stylette (1 point)		
-Notes or verbalizes flashback (1 point)	5	
-Occludes vein proximal to catheter (1 point) -Removes stylette (1 point)		
-Connects IV tubing to catheter (1 point)		
Disposes/verbalizes proper disposal of needle in proper container	1	
Releases tourniquet	1	
Runs IV for a brief period to assure patent line	1	
Secures catheter [tapes securely or verbalizes]	1	
Adjusts flow rate as appropriate	1	
	TOTAL 22	
NOTE: Check here ☐ if candidate did not establish a patent IV within 3 attempts in 6 minutes. Do not evaluate the can	didate in IV Bolus N	/ledications
Critical Criteria		
Failure to establish a patent and properly adjusted IV within 6 minute time limit		
Failure to take or verbalize appropriate body substance isolation precautions prior to performing venipuncture Contaminates equipment or site without appropriately correcting the situation		
Performs any improper technique resulting in the potential for uncontrolled hemorrhage, catheter shear, or air embolism		
Failure to successfully establish IV within 3 attempts during 6 minute time limit		
Failure to dispose/verbalize disposal of blood-contaminated sharps immediately in proper container at the point of use 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 rationals for checking any of the above critical items on the reverse side of this form		

INTRAVENOUS BOLUS MEDICATIONS		Possible	Points
Actual Time Started:		Points	Awarded
Asks patient for known allergies		1	
Selects correct medication		1	
Assures correct concentration of medication		1	
Assembles prefilled syringe correctly and dispels air		1	
Continues to take or verbalize body substance isolation precautions		1	
Identifies and cleanses injection site closest to the patient [Y-port or hub]		1	
Reaffirms medication		1	
Stops IV flow		1	
Administers correct dose at proper push rate		1	
Disposes/verbalizes proper disposal of syringe and needle 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	
Actual Time Ended:	TOTAL	12	
Pritical Critoria			

- Failure to continue to take or verbalize appropriate body substance isolation precautions
- Failure to begin administration of medication within 3 minute time limit
- Contaminates equipment or site without appropriately correcting the situation
- Failure to adequately dispel air resulting in potential for air embolism
 Injects improper medication or dosage [wrong medication, incorrect amount, or pushes at inappropriate rate]
- Failure to turn-on IV after injecting medication
- Recaps needle or failure to dispose/verbalize disposal of syringe and other material in proper container
- 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



PATIENT ASSESSMENT - MEDICAL

Candidate:	Examiner:		
Date:	Signature:		
Scenario:		Doosible	Doints
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions		1	Awarueu
SCENE SIZE-UP		<u>'</u>	
Determines the scene/situation is safe		1	
Determines the sceneralization is sale Determines the mechanism of injury/nature of illness		1	
Determines the number of patients		1	
Requests additional help if necessary		1	
Considers stabilization of spine		1	
PRIMARY SURVEY		•	
Verbalizes general impression of the patient		1	
Determines responsiveness/level of consciousness		1	
Determines chief complaint/apparent life-threats		1	
Assesses airway and breathing		•	
-Assessment (1 point)			
-Assures adequate ventilation (1 point)		3	
-Initiates appropriate oxygen therapy (1 point)			
Assesses circulation			
-Assesses/controls major bleeding (1 point) -Assesses skin [either sk	in color, temperature, or condition (1 point)	3	
-Assesses pulse (1 point)	co.o., topo.ata.o, o. coa.a.o] (· pot)	l	
Identifies priority patients/makes transport decision		1	
HISTORY TAKING AND SECONDARY ASSESSMENT			
History of present illness			
-Onset (1 point) -Severity (1 point)			
-Provocation (1 point) -Time (1 point)		8	
	d symptoms as related to OPQRST (2 points)		
-Radiation (1 point)	a symptoms as related to or QNOT (2 points)		
Past medical history			
·	Events leading to present illness (1 point)	5	
-Medications (1 point) -Last oral intake (1 point)	verte leading to procent infloce (1 point)		
Performs secondary assessment [assess affected body part/system or, if indicated by the control of the control	ted_completes_rapid_assessment1		
-Cardiovascular -Neurological -Integumentary		5	
-Pulmonary -Musculoskeletal -GI/GU	-Psychological/Social		
Vital signs	1 of chological coolar		
-Pulse (1 point) -Respiratory rate and quality (1 point of	each)	5	
-Blood pressure (1 point) -AVPU (1 point)	,		
Diagnostics [must include application of ECG monitor for dyspnea and chest pa	in]	2	
States field impression of patient	,	1	
Verbalizes treatment plan for patient and calls for appropriate intervention(s)		1	
Transport decision re-evaluated		1	
REASSESSMENT		·	
Repeats primary survey		1	
Repeats vital signs		1	
Evaluates response to treatments		1	
Repeats secondary assessment regarding patient complaint or injuries		1	
Actual Time Ended:		· · ·	
CRITICAL CRITERIA	TOTAL	48	
Failure to initiate or call for transport of the patient within 15 minute time		40	
Failure to take or verbalize body substance isolation precautions			
Failure to determine scene safety before approaching patient			
Failure to voice and ultimately provide appropriate oxygen therapy			
Failure to assess/provide adequate ventilation			
	breathing hemorrhage or sheek (bynenerfysis	nn]	
Failure to find or appropriately manage problems associated with airway,		_	
Failure to differentiate patient's need for immediate transportation versus			
Does other detailed history or physical examination before assessing and	u treating timeats to all way, preatiling, and circl	JIAUUII	
Failure to determine the patient's primary problem			
Orders a dangerous or inappropriate intervention Failure to provide for spinal protection when indicated			
i anute to provide for spirial protection when indicated			



PATIENT ASSESSMENT - TRAUMA

Candidate Examiner		
Date: Signature:		
Scenario #	Donoible	Points
Actual Time Started: NOTE: Areas denoted by "**" may be integrated within sequence of primary survey	Possible Points	Awarded
Takes or verbalizes body substance isolation precautions	1	1
SCENE SIZE-UP		
Determines the scene/situation is safe	1	
Determines the mechanism of injury/nature of illness	1	
Determines the number of patients	1	
Requests additional help if necessary	1	
Considers stabilization of spine	1	
PRIMARY SURVEY/RESUSCITATION		
Verbalizes general impression of the patient	1	
Determines responsiveness/level of consciousness	1	
Determines chief complaint/apparent life-threats	1	
Airway	2	
-Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point)		
Breathing		
-Assess breathing (1 point)		
-Assures adequate ventilation (1 point)	4	
-Initiates appropriate oxygen therapy (1 point)		
-Manages any injury which may compromise breathing/ventilation (1 point)		
Circulation		
-Checks pulse (1point)		
-Assess skin [either skin color, temperature, or condition] (1 point)	4	
-Assesses for and controls major bleeding if present (1 point)		
-Initiates shock management (1 point)		
Identifies priority patients/makes transport decision based upon calculated GCS	1	
HISTORY TAKING Obtains, or directs assistant to obtain, baseline vital signs	1 1	T
Attempts to obtain sample history	1	
SECONDARY ASSESSMENT		
Head		1
-Inspects mouth**, nose**, and assesses facial area (1 point)		
-Inspects and palpates scalp and ears (1 point)	3	
-Assesses eyes for PERRL** (1 point)		
Neck**		
-Checks position of trachea (1 point)		
-Checks jugular veins (1 point)	3	
-Palpates cervical spine (1 point)		
Chest**		
-inspects chest (1 point)		
-Palpates chest (1 point)	3	
-Auscultates chest (1 point)		
Abdomen/pelvis**		
-Inspects and palpates abdomen (1 point)		
-Assesses pelvis (1 point)	3	
-Verbalizes assessment of genitalia/perineum as needed (1 point)		
Lower extremities**		
-Inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point/leg)	2	
Upper extremities	2	
-Inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point/arm)	2	
Posterior thorax, lumbar, and buttocks**		
-Inspects and palpates posterior thorax (1 point)	2	
-Inspects and palpates lumbar and buttocks area (1 point)		
Manages secondary injuries and wounds appropriately	1	
Reassesses patient	1	
Actual Time Ended:	TOTAL 42	
CRITICAL CRITERIA		
CRITICAL CRITERIA		
Failure to initiate or call for transport of the patient within 10 minute time limit		
Failure to take or verbalize body substance isolation precautions		
Failure to determine scene safety		
Failure to assess for and provide spinal protection when indicated		
Failure to voice and ultimately provide high concentration of oxygen		
Failure to assess/provide adequate ventilation		
Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock [hypoperfusion]		
Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene		
Does other detailed history or physical exam before assessing/treating threats to airway, breathing, and circulation		
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		



PEDIATRIC INTRAOSSEOUS INFUSION

Candidate:	Examiner:		
	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Checks selected IV fluid for:			
-Proper fluid (1 point)		3	
-Clarity (1 point)		3	
-Expiration date (1 point)			
Selects appropriate equipment to include:			
-IO needle (1 point)			
-Syringe (1 point)		4	
-Saline (1 point)			
-Extension set or 3-way stopcock (1 point)			
Selects proper administration set		1	
Connects administration set to bag		1	
Prepares administration set [fills drip chamber and flushes tub	ing]	1	
Prepares syringe and extension tubing or 3-way stopcock		1	
Cuts or tears tape [at any time before IO puncture]		1	
Takes or verbalizes appropriate body substance isolation pred	autions [prior to IO puncture]	1	
Identifies proper anatomical site for IO puncture		1	
Cleanses site appropriately		1	
Performs IO puncture:	nd "aupping" log (4 point)	ļ	
 -Stabilizes tibia without placing hand under puncture site a -Inserts needle at proper angle (1 point) 	nd cupping leg (1 point)	ļ	
-Advances needle with twisting motion until "pop" is felt or	notices sudden lack of resistance	4	
(1 point)	Totices sudden lack of resistance		
-Removes stylette (1 point)			
Disposes/verbalizes proper disposal of needle in proper conta	iner	1	
Attaches syringe and extension set to IO needle and aspirates			
between administration set and IO needle and aspirates; or a		1	
[aspiration is not required for any of these as many IO sticks a		ļ	
Slowly injects saline to assure proper placement of needle	1	1	
Adjusts flow rate/bolus as appropriate		1	
Secures needle and supports with bulky dressing [tapes secu	rely or verbalizes]	1	
· · · · · · · · · · · · · · · · · · ·	-		
Actual Time Ended:	TOTAL	24	
		ı	
Critical Criteria			
Failure to establish a patent and properly adjusted IO line w			
Failure to take or verbalize appropriate body substance isola		O punctur	e
Contaminates equipment or site without appropriately correctly	•		
 Performs any improper technique resulting in the potential feature to assure correct needle placement [must aspirate or 		ationl	
Failure to successfully establish IO infusion within 2 attempt		ationj	
Performs IO puncture in an unacceptable manner [improper		ı in palm a	and
performs IO puncture directly above hand, etc.]	,	, p	
Failure to properly dispose/verbalize disposal of blood-conta	aminated sharps immediately in prope	r containe	er at the
point of use			
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			



Candidata:

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

PEDIATRIC RESPIRATORY COMPROMISE

Evaminar:

Date: Signature:			
Date:			
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions		1	
Verbalizes general impression of patient from a distance before approaching or touching the patient	g	1	
Determines level of consciousness		1	
Assesses the airway [looks for secretions and signs of foreign body airway obstruction;		<u>I</u>	
listens for audible noises and voice sounds]		1	
Assesses breathing [checks rate, rhythm, chest excursion, audible noises]		1	
Attaches pulse oximeter and evaluates SpO ₂ reading		1	
NOTE: Examiner now informs candidate, "Pulse oximeter shows a saturation of 8.	2%."		T .
Selects proper delivery device and attaches to oxygen		1	
Administers oxygen at proper flow rate [blow-by oxygen, non-rebreather mask]		1	
Checks pulse		1	
Evaluates perfusion [skin color, temperature, condition; capillary refill]		1	
Obtains baseline vital signs		1	
NOTE: Examiner now advises candidate that patient begins to develop decreasing	$g SpO_2$,	decreasi	ng
pulse rate, see-saw respirations, head bobbing, drowsiness, etc.)			
Places patient supine and pads appropriately to maintain a sniffing position		1	
Manually opens airway		1	
Considers airway adjunct insertion based upon patient presentation [oropharyngeal or		1	
nasopharyngeal airway]			
NOTE: Examiner now informs candidate no gag reflex is present and patient acceptive patient's respiratory rate is now 20/minute.	pts airv	way adjur	ict.
Inserts airway adjunct properly and positions head and neck for ventilation		1	
Selects appropriate BVM and attaches reservoir to oxygen flowing at 12 – 15 L/minute		1	
Assures tight mask seal to face		1	
Assists ventilations at a rate of 20/minute and with sufficient volume to cause visible che	est	4	
rise		1	
Ventilates at proper rate and volume while observing changes in capnometry/capnograph	ohy,	1	
pulse oximeter, pulse rate, level of responsiveness		1	
NOTE: The examiner must now ask the candidate, "How would you know if you ar	e venti	lating the	;
patient properly?"			
Calls for immediate transport of patient		1	
Actual Time Ended: TO	TAL	20	
Critical Criteria			
Failure to initiate ventilations within 30 seconds after taking body substance isolation	on prece	autione or	
interrupts ventilations for greater than 30 seconds at any time	JII PICCE	autions of	
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 permiss	siblel		
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			



side of this form.

National Registry of Emergency Medical Technicians Advanced Level Psychomotor Examination

SPINAL IMMOBILIZATION (SUPINE PATIENT)

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes body substance isolation precaut		1	
Directs assistant to place/maintain head in the neutra		1	
Directs assistant to maintain manual immobilization of		1	
Reassesses motor, sensory, and circulatory function i	n each extremity	1	
Applies appropriately sized extrication collar		1	
Positions the immobilization device appropriately		1	
Directs movement of the patient onto the device with of the spine	out compromising the integrity	1	
Applies padding to voids between the torso and the c	levice as necessary	1	
Immobilizes the patient's torso to the device		1	
Evaluates and pads behind the patient's head as nec	essary	1	
Immobilizes the patient's head to the device		1	
Secures the patient's legs to the device		1	
Secures the patient's arms to the device		1	
Reassesses motor, sensory, and circulatory function i	n each extremity	1	
Actual Time Ended:	TOTAL	14	
CRITICAL CRITERIA			
Did not immediately direct or take manual immobilizated Did not properly apply appropriately sized cervical of Released or ordered release of manual immobilizated Manipulated or moved patient excessively causing Head immobilized to the device before device sufficed Patient moves excessively up, down, left, or right or Head immobilization allows for excessive movement Upon completion of immobilization, head is not in a Did not reassess motor, sensory, and circulatory fur to the device Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other per Uses or orders a dangerous or inappropriate intervents.	collar before ordering release of nation before it was maintained med potential spinal compromise ciently secured to torso in the device at neutral, in-line position actions in each extremity after impressionnel	hanically	



BLEEDING CONTROL/SHOCK MANAGEMENT

Candidate:	Examiner:		
Date:	Signature:		
Time Start:		Possible Points	Points Awarded
Takes or verbalizes body substance isola	tion precautions	1	
Applies direct pressure to the wound		1	
NOTE: The examiner must now inform	the candidate that the wound continues to	o bleed.	
Applies tourniquet		1	
NOTE: The examiner must now inform symptoms of hypoperfusion.	the candidate that the patient is exhibiting	y signs a	ind
Properly positions the patient		1	
Administers high concentration oxygen		1	
Initiates steps to prevent heat loss from the	ne patient	1	
Indicates the need for immediate transpor	tation	1	
Time End:	TOTAL	. 7	
	oxygen orrect procedures in a timely manner		
Did not indicate the need for immed	liate transportation		



JOINT IMMOBILIZATION

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolatio	n precautions	1	
Directs application of manual stabilization of the injury	•	1	
Assesses distal motor, sensory, and circulatory functions	s in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensory and normal."	y, and circulatory functions are pr	esent	
Selects the proper splinting material		1	
Immobilizes the site of the injury		1	
Immobilizes the bone above the injury site		1	
Immobilizes the bone below the injury site		1	
Secures the entire injured extremity		1	
Reassesses distal motor, sensory, and circulatory functi	ons in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensor and normal."	y, and circulatory functions are pr	esent	
Actual Time Ended:	TOTAL	9	
Critical Criteria Did not immediately stabilize the extremity manuall Grossly moves the injured extremity Did not immobilize the bone above and below the iDid not reassess distal motor, sensory, and circula after splinting Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other p	njury site tory functions in the injured extremit	y before and	

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

Uses or orders a dangerous or inappropriate intervention



LONG BONE IMMOBILIZATION

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation p	precautions	1	
Directs application of manual stabilization of the injury		1	
Assesses distal motor, sensory, and circulatory functions in	n the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensory,	and circulatory functions are pre	sent	
and normal."			
Measures the splint		1	
Applies the splint		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 distal motor, sensory, and circulatory function		1	
NOTE: The examiner acknowledges, "Motor, sensory, and normal."	and circulatory functions are pre	esent	
Actual Time Ended:	TOTAL	10	
Critical Criteria Did not immediately stabilize the extremity manually Grossly moves the injured extremity Did not immobilize the joint above and the joint below Did not immobilize the hand or foot in a position of fu Did not reassess distal motor, sensory, and circulator after splinting Failure to manage the patient as a competent EMT	nction	before and	

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

Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention



SPINAL IMMOBILIZATION (SEATED PATIENT)

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Start:		Possible Points	Points Awarded
Takes or verbalizes body substance isolation	on precautions	1	
Directs assistant to place/maintain head in the neutral, in-line position		1	
Directs assistant to maintain manual immobilization of the head		1	
Reassesses motor, sensory, and circulatory functions in each extremity		1	
Applies appropriately sized extrication colla	r	1	
Positions the immobilization device behind	the patient	1	
Secures the device to the patient's torso		1	
Evaluates torso fixation and adjusts as nec		1	
Evaluates and pads behind the patient's head as necessary		1	
Secures the patient's head to the device		1	
Verbalizes moving the patient to a long bac	kboard	1	
Reassesses motor, sensory, and circulatory	/ function in each extremity	1	
Actual Time End:	Т	OTAL 12	
CRITICAL CRITERIA Did not immediately direct or take models in the property apply appropriately immobilization			nanual
Released or ordered release of man Manipulated or moved patient exces Head immobilized to the device beform Device moves excessively up, down Head immobilization allows for excessively	sively causing potential spinal core device sufficiently secured to , left, or right on the patient's tor	compromise torso	nanically
Torso fixation inhibits chest rise, resu			
Upon completion of immobilization, h			
Did not reassess motor, sensory, and	-		cing
immobilization to the long backboard	=	,	5
Failure to manage the patient as a c			
Exhibits unacceptable affect with part	•		
Uses or orders a dangerous or inant	•		