



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

ALTERNATIVE AIRWAY DEVICE (SUPRAGLOTTIC AIRWAY)

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

NOTE: If candidate elects to initially ventilate with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by “***” so long as first ventilation is delivered within 30 seconds.

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct [oropharyngeal or nasopharyngeal airway]	1	
NOTE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
**Ventilates patient immediately with bag-valve-mask device unattached to oxygen	1	
**Ventilates patient with room air	1	
NOTE: Examiner now informs candidate that ventilation is being performed without difficulty and that pulse oximetry indicates the patient's blood oxygen saturation is 85%		
Attaches oxygen reservoir to bag-valve-mask device and connects to high-flow oxygen regulator [12 – 15 L/minute]	1	
Ventilates patient at a rate of 10 – 12/minute with appropriate volumes	1	
NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present and equal bilaterally and medical direction has ordered insertion of a supraglottic airway. The examiner must now 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 candidate is prepared to insert device.		
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	
NOTE: The examiner must now ask the candidate, “How would you know if you are delivering appropriate volumes with each ventilation?”		
Secures device or confirms that the device remains properly secured	1	
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	1	
Actual Time Ended: _____	TOTAL	19

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 10 – 12/minute
- Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- Failure to pre-oxygenate patient prior to insertion of the supraglottic airway device
- Failure to insert the supraglottic airway device at a proper depth or location within 3 attempts
- 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 and proper insertion depth) by auscultation bilaterally over 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

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



National Registry of Emergency Medical Technicians
Advanced Level Practical Examination

BLEEDING CONTROL/SHOCK MANAGEMENT

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Time Start: _____	Possible Points	
	Points	Awarded
Takes or verbalizes body substance isolation precautions	1	
Applies direct pressure to the wound	1	
NOTE: The examiner must now inform the candidate that the wound continues to bleed.		
Applies tourniquet	1	
NOTE: The examiner must now inform the candidate that the patient is exhibiting signs and symptoms of hypoperfusion.		
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	
Time End: _____	TOTAL	7

CRITICAL CRITERIA

- _____ Did not take or verbalize body substance isolation precautions
- _____ Did not apply high concentration of oxygen
- _____ Did not control hemorrhage using correct procedures in a timely manner
- _____ Did not indicate the need for immediate transportation

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

INTRAVENOUS THERAPY

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

Level of Testing: NREMT-Intermediate/85 NRAEMT NREMT-Intermediate/99 NREMT-Paramedic

Actual Time Started: _____	Possible Points	Points Awarded
Checks selected IV fluid for: -Proper fluid (1 point) -Clarity (1 point) -Expiration date (1 point)	3	
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) -Occludes vein proximal to catheter (1 point) -Removes stylette (1 point) -Connects IV tubing to catheter (1 point)	5	
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	
Actual Time Ended: _____	TOTAL	22

NOTE: Check here if candidate did not establish a patent IV within 3 attempts in 6 minutes. Do **not** evaluate the candidate in IV Bolus Medications.

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

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INTRAVENOUS BOLUS MEDICATIONS

Actual Time Started: _____	Possible Points	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

Critical Criteria

- 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

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National Registry of Emergency Medical Technicians
Advanced Level Psychomotor Examination

PATIENT ASSESSMENT - TRAUMA

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Scenario # _____

Actual Time Started: _____	NOTE: Areas denoted by "****" may be integrated within sequence of primary survey	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions		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		4	
-Assess breathing (1 point)			
-Assures adequate ventilation (1 point)			
-Initiates appropriate oxygen therapy (1 point)			
-Manages any injury which may compromise breathing/ventilation (1 point)			
Circulation		4	
-Checks pulse (1point)			
-Assess skin [either skin color, temperature, or condition] (1 point)			
-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	
Attempts to obtain sample history		1	
SECONDARY ASSESSMENT			
Head		3	
-Inspects mouth**, nose**, and assesses facial area (1 point)			
-Inspects and palpates scalp and ears (1 point)			
-Assesses eyes for PERRL** (1 point)			
Neck**		3	
-Checks position of trachea (1 point)			
-Checks jugular veins (1 point)			
-Palpates cervical spine (1 point)			
Chest**		3	
-Inspects chest (1 point)			
-Palpates chest (1 point)			
-Auscultates chest (1 point)			
Abdomen/pelvis**		3	
-Inspects and palpates abdomen (1 point)			
-Assesses pelvis (1 point)			
-Verbalizes assessment of genitalia/perineum as needed (1 point)			
Lower extremities**		2	
-Inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point/leg)			
Upper extremities		2	
-Inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point/arm)			
Posterior thorax, lumbar, and buttocks**		2	
-Inspects and palpates posterior thorax (1 point)			
-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

- ___ 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

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

SPINAL IMMOBILIZATION (SEATED PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Start: _____	Possible Points	Points Awarded
Takes or verbalizes body substance isolation 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 collar	1	
Positions the immobilization device behind the patient	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	
Verbalizes moving the patient to a long backboard	1	
Reassesses motor, sensory, and circulatory function in each extremity	1	
Actual Time End: _____	TOTAL	12

CRITICAL CRITERIA

- _____ Did not immediately direct or take manual immobilization of the head
- _____ Did not properly apply appropriately sized cervical collar before ordering release of manual immobilization
- _____ Released or ordered release of manual immobilization before it was maintained mechanically
- _____ Manipulated or moved patient excessively causing potential 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 voicing immobilization to the long backboard
- _____ 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 Level Psychomotor Examination**

SPINAL IMMOBILIZATION (SUPINE PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes body substance isolation 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 function 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	
Immobilizes 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 to the device	1	
Reassesses motor, sensory, and circulatory function in each extremity	1	
Actual Time Ended: _____	TOTAL	14

CRITICAL CRITERIA

- _____ Did not immediately direct or take manual immobilization of the head
- _____ Did not properly apply appropriately sized cervical collar before ordering release of manual immobilization
- _____ Released or ordered release of manual immobilization before it was maintained mechanically
- _____ Manipulated or moved patient excessively causing potential spinal compromise
- _____ Head immobilized to the device **before** device sufficiently secured to torso
- _____ 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 immobilizing patient to the device
- _____ 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 Level Psychomotor Examination

VENTILATORY MANAGEMENT - ADULT

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

NOTE: If candidate elects to ventilate initially with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by “**” so long as first ventilation is delivered within 30 seconds.

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct [oropharyngeal or nasopharyngeal airway]	1	
NOTE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
**Ventilates patient immediately with bag-valve-mask device unattached to oxygen	1	
**Ventilates patient with room air	1	
NOTE: Examiner now informs candidate that ventilation is being performed without difficulty and that pulse oximetry indicates the patient's blood oxygen saturation is 85%		
Attaches oxygen reservoir to bag-valve-mask device and connects to oxygen regulator [12 – 15 L/minute]	1	
Ventilates patient at a rate of 10 – 12/minute with appropriate volumes	1	
NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and medical direction has ordered intubation. The examiner must now take over ventilation.		
Directs assistant to pre-oxygenate patient	1	
Identifies/selects proper equipment for intubation	1	
Checks equipment for: -Cuff leaks (1 point) -Laryngoscope operational with bulb tight (1 point)	2	
NOTE: Examiner to remove OPA and move out of the way when candidate is prepared to intubate		
Positions head properly	1	
Inserts blade while displacing tongue	1	
Elevates mandible with laryngoscope	1	
Introduces ET tube and advances to proper depth	1	
Inflates cuff to proper pressure and disconnects syringe	1	
Directs ventilation of patient	1	
Confirms proper placement by auscultation bilaterally over each lung and over epigastrium	1	
NOTE: Examiner to ask, "If you had proper placement, what should you expect to hear?"		
Secures ET tube [may be verbalized]	1	
NOTE: Examiner now asks candidate, "Please demonstrate one additional method of verifying proper tube placement in this patient."		
Identifies/selects proper equipment	1	
Verbalizes findings and interpretations [checks end-tidal CO ₂ , colorimetric device, EDD recoil, etc.]	1	
NOTE: Examiner now states, "You see secretions in the tube and hear gurgling sounds with the patient's exhalation."		
Identifies/selects a flexible suction catheter	1	
Pre-oxygenates patient	1	
Marks maximum insertion length with thumb and forefinger	1	
Inserts catheter into the ET tube 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	
Actual Time Ended: _____	TOTAL	27

CRITICAL CRITERIA

- _____ Failure to initiate ventilations within 30 seconds after applying gloves 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 concentrations [at least 85%]
- _____ Failure to ventilate patient at a rate of 10 – 12 / minute
- _____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- _____ Failure to pre-oxygenate patient prior to intubation and suctioning
- _____ Failure to successfully intubate within 3 attempts
- _____ 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
- _____ If used, stylette extends beyond end of ET tube
- _____ Inserts any adjunct in a manner dangerous to the patient
- _____ Suctions patient excessively
- _____ Does not suction 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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