

ALTERNATIVE AIRWAY DEVICE (SUPRAGLOTTIC AIRWAY)

Candidate:Exa	aminer:		
Date: Sig	nature:		
Device:			
NOTE: If candidate elects to initially ventilate with BVM attached to reservoi	r and oxygen, full credit must be awa	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 p			
**Ventilates patient immediately with bag-valve-mask device unattached to		1	
**Ventilates patient with room air	oxygen	1	
•	rmad without difficulty and that no	<u> </u>	v indicates
NOTE: Examiner now informs candidate that ventilation is being performs patient to blood express activation in 95%	rmea without announty and that pu	iise oxiiiietr	y indicates
the patient's blood oxygen saturation is 85%	January and an analysis and a second at a		
Attaches oxygen reservoir to bag-valve-mask device and connects to high-	low 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 soun		and medica	al direction
has ordered insertion of a supraglottic airway. The examiner must now	v 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 candid	date 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 immediate	ly removes syringe or		
secures strap]	, ,	1	
Ventilates patient and confirms proper ventilation [correct lumen and proper	insertion depth1 by auscultation	4	
bilaterally over lungs and over epigastrium		1	
Adjusts ventilation as necessary [ventilates through additional lumen or slig	htly withdraws tube until	1	
ventilation is optimized]		ı	
Verifies proper tube placement by secondary confirmation such as capnogr	aphy, capnometry, EDD or	1	
colorimetric device	3,	'	
NOTE: The examiner must now ask the candidate, "How would you kn	ow if you are delivering appropriate	te volumes v	with
each ventilation?"			
Secures device or confirms that the device remains properly secured		1	
Ventilates patient at proper rate and volume while observing capnography/o	apnometry and pulse oximeter	1	
Actual Time Ended:	TOTAL	19	
Onthinal Outhania			
Critical Criteria Failure to initiate ventilations within 30 seconds after taking body substance	isolation precautions or interrupts vent	ilations for an	eater than 30
seconds at any time	isolation precautions of interrupts vent	liations for give	cater than 50
Failure to take or verbalize body substance isolation precautions			
Failure to voice and ultimately provide high oxygen concentration [at least 8]	5%]		
Failure to ventilate the patient at a rate of 10 – 12/minute	•		
Failure to provide adequate volumes per breath [maximum 2 errors/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	within 3 attempts		
Failure to inflate cuffs properly and immediately remove the syringe			
Failure to secure the strap (if present) prior to cuff inflation	d proper insertion death) by augustication	n hilatorally a	vor lungs and
Failure to confirm that patient is being ventilated properly (correct lumen an over epigastrium	u proper insertion deptir) by auscultatio	n bhaterany 0	ver rungs and
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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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		



DYNAMIC CARDIOLOGY

Candidate: Examiner:_		
Date: Signature:_		
SET #		
Level of Testing: NREMT-Intermediate/99 NR-Paramedic		
Actual Time Started:	Possible Points	Points Awarded
Takes or verbalizes infection control precautions	1	
Checks patient responsiveness	1	
Checks ABCs [responsive patient] – or – checks breathing and pulse [unresponsive patien	tl 1	
Initiates CPR if appropriate [verbally]	1	
Attaches ECG monitor in a timely fashion [patches, pads, or paddles]	1	
A constitution of the state of		
Notes change in thuthm	4	
Charles nations condition to include nules and if appropriate DD	4	
Checks patient condition to include pulse and, if appropriate, BP		
Correctly interprets second rhythm		
Appropriately manages second rhythm	2	
Notes change in rhythm	1	
Checks patient condition to include pulse and, if appropriate, BP	1	
Correctly interprets third rhythm	1	
Appropriately manages third rhythm	2	
Notes change in rhythm	1	
Checks patient condition to include pulse and, if appropriate, BP	1	
Correctly interprets fourth rhythm	1	
Appropriately manages fourth rhythm	2	
Orders high percentages of supplemental oxygen at proper times	1	
Actual Time Ended:	TOTAL 24	
CRITICAL CRITERIA		
Failure to deliver first shock in a timely manner		
Failure to verify rhythm before delivering each shock		
Failure to ensure the safety of self and others [verbalizes "All clear" and observes]		
Inability to deliver DC shock [does not use machine properly]		
Failure to demonstrate acceptable shock sequence		
Failure to order initiation or resumption of CPR when appropriate		
Failure to order correct management of airway [ET when appropriate]		
Failure to order administration of appropriate oxygen at proper time		
Failure to diagnose or treat 2 or more rhythms correctly		
Orders administration of an inappropriate drug or lethal dosage		
Failure to correctly diagnose or adequately treat v-fib, v-tach, or asystole		
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		



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)	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)		
-Removes stylette (1 point) -Connects IV tubing to catheter (1 point)		
Disposes/verbalizes proper disposal of needle in proper container	1	
Releases tourniquet	1 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: TOTA	L 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 N	/ledications
Critical Criteria	20.00	
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 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



ORAL STATION

Candidate:	Examiner:		
Date:	Signature:		
Scenario:		Possible	Points
Actual Time Started:		Points	Awarded
Scene Management			
Thoroughly assessed and took deliberate actions		3	
Assessed the scene, identified potential hazards danger	, did not put anyone in	2	
Incompletely assessed or managed the scene		1	
Did not assess or manage the scene		0	
Patient Assessment			
Completed an organized assessment and integra	ated findings to expand		
further assessment		3	
Completed primary survey and secondary asses		2	
Performed an incomplete or disorganized assess	sment	1	
Did not complete a primary survey		0	
Patient Management			
Managed all aspects of the patient's condition ar	•	3	
Appropriately managed the patient's presenting		2	
Performed an incomplete or disorganized manage	gement	1	
Did not manage life-threatening conditions		0	
Interpersonal relations			
Established rapport and interacted in an organize		3	
Interacted and responded appropriately with pati	ent, crew, and bystanders	2	
Used inappropriate communication techniques		1	
Demonstrated intolerance for patient, bystanders	s, and crew	0	
Integration (verbal report, field impression, and trar	nsport decision)		
Stated correct field impression and pathophysiol succinct and accurate verbal report including soc and considered alternate transport destinations	•	3	
Stated correct field impression, provided succinc report, and appropriately stated transport decision		2	
Stated correct field impression, provided inappro transport decision	priate verbal report or	1	
Stated incorrect field impression or did not provide	de verbal report	0	
Actual Time Ended:	TOTAL	. 15	

Failure to appropriately address any of the scenario's "Mandatory Actions"

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 - 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	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:		
Date:	Signature:		
Actual Time Started:	•	Possible Points	Points Awarded
Checks selected IV fluid for:			
-Proper fluid (1 point)		0	
-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 tu	bing]	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 pre	cautions [prior to IO puncture]	1	
Identifies proper anatomical site for IO puncture		1	
Cleanses site appropriately		1	
Performs IO puncture:	and "aupping" log (1 paint)		
-Stabilizes tibia without placing hand under puncture site and -Inserts needle at proper angle (1 point)	and cupping leg (1 point)	ļ	
-Advances needle with twisting motion until "pop" is felt or	notices sudden lack of resistance	4	
(1 point)	notices sudden lack of resistance		
-Removes stylette (1 point)			
Disposes/verbalizes proper disposal of needle in proper cont	ainer	1	
Attaches syringe and extension set to IO needle and aspirate			
between administration set and IO needle and aspirates; or a		1	
[aspiration is not required for any of these as many IO sticks			
Slowly injects saline to assure proper placement of needle		1	
Adjusts flow rate/bolus as appropriate		1	
Secures needle and supports with bulky dressing [tapes secu	rely or verbalizes]	1	
		0.4	
Actual Time Ended:	TOTAL	24	
		!	
Critical Criteria			
Failure to establish a patent and properly adjusted IO line v		O	_
Failure to take or verbalize appropriate body substance iso Contaminates equipment or site without appropriately correct		o punctur	е
Performs any improper technique resulting in the potential	•		
Failure to assure correct needle placement [must aspirate		ation1	
Failure to successfully establish IO infusion within 2 attempt			
Performs IO puncture in an unacceptable manner [imprope	r site, incorrect needle angle, holds leg	j in palm a	and
performs IO puncture directly above hand, etc.]	-		
Failure to properly dispose/verbalize disposal of blood-conf	aminated sharps immediately in prope	r containe	er at the
point of use			
Failure to manage the patient as a competent EMT	ı		
Exhibits unacceptable affect with patient or other personneUses or orders a dangerous or inappropriate intervention	I		
0303 of orders a dangerous of mappropriate intervention			



PEDIATRIC (<2 yrs.) VENTILATORY MANAGEMENT

Candid	dateExaminer		
Date:_	Signature:		
NOTE If candidate elects to ventilate initially with BVM attached to reservoir and oxygen, full credit must awarded for steps denoted by "**" so long as first ventilation is delivered within 30 seconds.			be
	Time Started:		Points Awarded
Takes of	or verbalizes body substance isolation precautions	1	
Opens	the airway manually	1	
	es tongue, inserts simple adjunct [oropharyngeal or nasopharyngeal airway]	1	
	TE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
	ates patient immediately with bag-valve-mask device unattached to oxygen	1	
	ates patient with room air	1	
NO	TE: Examiner now informs candidate that ventilation is being performed without difficulty ar	nd that p	ulse
	oximetry indicates the patient's blood oxygen saturation is 85%		
	es oxygen reservoir to bag-valve-mask device and connects to oxygen regulator [12 – 15 L/minute]	1	
	tes patient at a rate of 12 – 15/minute and assures visible chest rise	1	
NO	TE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bi		and
	medical direction has ordered intubation. The examiner must now take over ventilation.		
	assistant to pre-oxygenate patient	1	
	es/selects proper equipment for intubation	1	
	s laryngoscope to assure operational with bulb tight	1	
	TE: Examiner to remove OPA and move out of the way when candidate is prepared to intuba	1	ı
	patient in neutral or sniffing position	1	
	blade while displacing tongue	1	
	es mandible with laryngoscope	1	
	ces ET tube and advances to proper depth	1	
	ventilation of patient	1	
	ns proper placement by auscultation bilaterally over each lung and over epigastrium	1	
	TE: Examiner to ask, "If you had proper placement, what should you expect to hear?"		1
Secure	s ET tube [may be verbalized]	1	
Actual	Time Ended:	. 17	
Actual	Time Ended: TOTAL	. 17	
CRITIC	CAL 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 pad under the torso to allow neutral head position or sniffing position		
	Failure to voice and ultimately provide high oxygen concentrations [at least 85%]		
	Failure to ventilate patient at a rate of 12 – 15/minute		
	Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]		
	Failure to pre-oxygenate patient prior to intubation Failure to successfully intubate within 3 attempts		
	Uses gums as a fulcrum		
	Failure to assure proper tube placement by auscultation bilaterally and over the epigastrium		
	Inserts any adjunct in a manner dangerous to the nation		
	Inserts any adjunct in a manner dangerous to the patient Attempts to use any equipment not appropriate for the pediatric 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		
	oses of orders a dangerous of inappropriate intervention		



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 th	ne neutral, in-line position	1	
Directs assistant to maintain manual immobil	lization of the head	1	
Reassesses motor, sensory, and circulatory t	functions in each extremity	1	
Applies appropriately sized extrication collar		1	
Positions the immobilization device behind the	ne patient	1	
Secures the device to the patient's torso		1	
Evaluates torso fixation and adjusts as neces		1	
Evaluates and pads behind the patient's hea	d as necessary	1	
Secures the patient's head to the device		1	
Verbalizes moving the patient to a long backl	board	1	
Reassesses motor, sensory, and circulatory t	function in each extremity	1	
Actual Time End:	T	OTAL 12	
CRITICAL CRITERIA Did not immediately direct or take ma Did not properly apply appropriately s immobilization			nanual
Released or ordered release of manual Manipulated or moved patient excessions. Head immobilized to the device before Device moves excessively up, down, Head immobilization allows for excessions.	ively causing potential spinal or e device sufficiently secured to left, or right on the patient's tor sive movement	compromise o torso rso	nanically
Torso fixation inhibits chest rise, result			
Upon completion of immobilization, he	-		
Did not reassess motor, sensory, and	circulatory functions in each e	xtremity after voice	cing
immobilization to the long backboard			
Failure to manage the patient as a co	•		
Exhibits unacceptable affect with patie	•		
Uses or orders a dangerous or inappr	onriate 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 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	



National Registry of Emergency Advanced Level Psychomotor Examination

STATIC CARDIOLOGY

Candidate:	Examiner:			
Date:	Signature:			
SET #				
Level of Testing: □ NREM	MT-Intermediate/99 □ NREMT-Paramedic			
	nay be awarded if the diagnosis is incorrect.			
-	ct responses in spaces provided.	Poss	sible	Points
Actual Time Started:		Poir	nts	Awarded
STRIP #1				
			1	
Treatment:			2	
STRIP #2				
Diagnosis:			1	
Treatment:			2	
STRIP #3				
Diagnosis:			1	
Treatment:			2	
STRIP #4				
Diagnosis:			1	
Treatment:			2	
Actual Time Ended:		TOTAL 1	2	



VENTILATORY MANAGEMENT - ADULT

Cariu	idate: Examiner:		
Date:	Signature:		
	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.	or Possible	Points
	I Time Started:	Points	Awarded
	or verbalizes body substance isolation precautions the airway manually	1	
	es tongue, inserts simple adjunct [oropharyngeal or nasopharyngeal airway]	1	
	TE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct	-	
**Vent	ilates patient immediately with bag-valve-mask device unattached to oxygen	1	
**Venti	ilates 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%			
Attach	es oxygen reservoir to bag-valve-mask device and connects to oxygen regulator [12 – 15 L/minute]	1	
	ites patient at a rate of 10 – 12/minute with appropriate volumes	1	
	TE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and n		
direction has ordered intubation. The examiner must now take over ventilation.			
	s assistant to pre-oxygenate patient	1	
	es/selects proper equipment for intubation	1	
	s equipment for: -Cuff leaks (1 point) -Laryngoscope operational with bulb tight (1 point)	2	
	TE: Examiner to remove OPA and move out of the way when candidate is prepared to intubate	4	
	ons head properly s blade while displacing tongue	1	
	es mandible with laryngoscope	1	
	uces ET tube and advances to proper depth	1	
	s cuff to proper pressure and disconnects syringe	1	
	s ventilation of patient	1	
	ms proper placement by auscultation bilaterally over each lung and over epigastrium	1	
	TE: Examiner to ask, "If you had proper placement, what should you expect to hear?"		
	es ET tube [may be verbalized]	1	
NC	TE: Examiner now asks candidate, "Please demonstrate one additional method of verifying proper tube		
	placement in this patient."		
	es/selects proper equipment	1	
verbal	izes findings and interpretations [checks end-tidal CO ₂ , colorimetric device, EDD recoil, etc.]	1	
	TE: Examiner now states, "You see secretions in the tube and hear gurgling sounds with the patient's exhibites/selects a flexible suction catheter	aiation."	
	ygenates patient	1	
	maximum insertion length with thumb and forefinger	1	
	s catheter into the ET tube leaving catheter port open	1	
	per insertion depth, covers catheter port and applies suction while withdrawing catheter	1	
	tes/directs ventilation of patient as catheter is flushed with sterile water	1	
		ı	
Actua	I Time Ended: TOTAL	27	
CRITIC	CAL CRITERIA		
	Failure to initiate ventilations within 30 seconds after applying gloves or interrupts ventilations for greater than 30 se	conde at an	v time
	Failure to take or verbalize body substance isolation precautions	conus at an	y time
	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		
Vc	uses of orders a dangerous of mappropriate intervention	. fa	