

PATIENT ASSESSMENT/MANAGEMENT - TRAUMA

Candidate: Examiner:		
Date: Signature:		
Scenario #		
Actual Time Started: Note: Areas denoted by "**" may be integrated within sequence of Primary Survey/Resuscitation	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE 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 EMS assistance if necessary	1	
Considers stabilization of the spine	1	
PRIMARY SURVEY/RESUSCITATION		
Verbalizes general impression of the patient	1	
Determines responsiveness/level of consciousness	1	
Determines responsive resolver of consciousness Determines chief complaint/apparent life-threats	1	
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Airway -Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point)	2	
Breathing -Assures adequate ventilation (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 [positions patient properly, conserves body heat] (1 point)		
Identifies patient priority and makes treatment/transport decision (based upon calculated GCS)	1	
	<u> </u>	
HISTORY TAKING	4	
Obtains baseline vital signs [must include BP, P and R] (1 point)	1	
Attempts to obtain SAMPLE history	1	
SECONDARY ASSESSMENT		
Head -Inspects and palpates scalp and ears (1 point) ** -Assesses eyes (1 point) -Inspects mouth**, nose** and assesses facial area (1 point)	3	
Neck** -Checks position of trachea (1 point) -Checks jugular veins (1 point) -Palpates cervical spine (1 point)	3	
Chest** -Inspects chest (1 point) -Palpates chest (1 point) -Auscultates chest (1 point)	3	
Abdomen/pelvis**		
-Inspects and palpates abdomen (1 point) -Assesses pelvis (1 point) -Verbalizes assessment of genitalia/perineum as needed (1 point)	3	
Lower extremities**		
-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 areas (1 point)	2	
Manages secondary injuries and wounds appropriately	1	
REASSESSMENT		
Demonstrates how and when to reassess the 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 appropriate PPE precautions Failure to determine scene safety Failure to assess for and provide spinal protection when indicated Failure to voice and ultimately provide high concentration oxygen Failure to assess/provide adequate ventilation Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene Performs other assessment 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		

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



PATIENT ASSESSMENT/MANAGEMENT - MEDICAL

Candidate:	Examiner:		
Date:	Signature:		
Scenario #			
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE 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 EMS assistance if necessary		1	
Considers stabilization of the spine		1	
PRIMARY SURVEY/RESUSCITATION			
Verbalizes the general impression of the patient		1	
Determines responsiveness/level of consciousness (AVPU)		1	
Determines chief complaint/apparent life-threats		1	
Assesses airway and breathing			
-Assessment (1 point) -Assures adequate ventilation (1 point)	nt) -Initiates appropriate oxygen therapy (1 point)	3	
Assesses circulation			
-Assesses/controls major bleeding (1 point)	-Checks pulse (1 point)	3	
-Assesses skin [either skin color, temperature or condition] (1 point)			
Identifies patient priority and makes treatment/transport decision		1	
HISTORY TAKING			
History of the present illness			
-Onset (1 point) -Quality (1 point)	-Severity (1 point)		
-Provocation (1 point) -Radiation (1 point)	-Time (1 point)	8	
-Clarifying questions of associated signs and symptoms related to C	DPQRST (2 points)		
Past medical history			
-Allergies (1 point) -Past pertinent history (1 point	t) -Events leading to present illness (1 point)	5	
-Medications (1 point) -Last oral intake (1 point)			
SECONDARY ASSESSMENT			
Assesses affected body part/system			
	ımentary -Reproductive	5	
-Pulmonary -Musculoskeletal -GI/GU	J -Psychological/Social		
VITAL SIGNS			
-Blood pressure (1 point) -Pulse (1 point)	-Respiratory rate and quality (1 point each)	4	
States field impression of patient		1	
Interventions [verbalizes proper interventions/treatment]		1	
REASSESSMENT			
Demonstrates how and when to reassess the patient to determine of	changes in condition	1	
Provides accurate verbal report to arriving EMS unit		1	
Actual Time Ended:	TOTAL	42	
CRITICALCRITERIA			<u> </u>
Failure to initiate or call for transport of the patient within 15 minut	te time limit		
Failure to take or verbalize appropriate PPE precautions			
Failure to determine scene safety before approaching patient			
Failure to voice and ultimately provide appropriate oxygen therap	y		
Failure to assess/provide adequate ventilation	•		
Failure to find or appropriately manage problems associated with	airway, breathing, hemorrhage or shock		
Failure to differentiate patient's need for immediate transportation	n versus continued assessment or treatment at the scenee		
Performs secondary examination before assessing and treating the	hreats to airway, breathing and circulation		
Orders a dangerous or inappropriate intervention			
Failure to provide accurate report to arriving EMS unit			
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			



OXYGEN ADMINISTRATION BY NON-REBREATHER MASK

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Gathers appropriate equipment		1	
Cracks valve on the oxygen tank		1	
Assembles the regulator to the oxygen tank		1	
Opens the oxygen tank valve		1	
Checks oxygen tank pressure		11	
Checks for leaks		1	
Attaches non-rebreather mask to correct port of regulator		1	
Turns on oxygen flow to prefill reservoir bag		1	
Adjusts regulator to assure oxygen flow rate of at least 10 L/minute		1	
Attaches mask to patient's face and adjusts to fit snugly		1	
Actual Time Ended:	TOTAL	. 11	
CRITICAL CRITERIA			
Failure to take or verbalize appropriate PPE precautions			
Failure to assemble the oxygen tank and regulator without leaks			
Failure to prefill the reservoir bag			
Failure to adjust the oxygen flow rate to the non-rebreather mas	c of at lease 10 L/minute		
Failure to ensure a tight mask seal to patient's face			
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			



BVM VENTILATION OF AN APNEIC ADULT PATIENT

Candidate:	_ Examiner:	 	
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Checks responsiveness		1	
Requests additional EMS assistance		1	
Checks breathing and pulse simultaneously		1	
NOTE: After checking responsiveness, then checking breathing	g and pulse for no more than 10 seconds, ex	kaminer info	rms
candidate, "The patient is unresponsive, apneic and has a wea	k pulse of 60."		
Opens airway properly		1	
NOTE: The examiner must now inform the candidate, "The mo	uth is full of secretions and vomitus."		
Prepares rigid suction catheter		1	
Turns on power to suction device or retrieves manual suction device	e	1	
Inserts rigid suction catheter without applying suction		1	
Suctions the mouth and oropharynx		1	
NOTE: The examiner must now inform the candidate, "The mo	uth and oropharynx are clear."		
Opens the airway manually		1	
Inserts oropharyngeal airway		1	
NOTE: The examiner must now inform the candidate, "No gag	reflex is present and the patient accepts the	airway adjui	nct."
Ventilates the patient immediately using a BVM device unattache [Award this point if candidate elects to ventilate initially with BVM		1	
first ventilation is delivered within 30 seconds.]	attached to reservoir and oxygen so long as	'	
NOTE: The examiner must now inform the candidate that venti	lation is being properly performed without d	lifficulty	
Re-checks pulse for no more than 10 seconds	idion is being properly performed without d	1	Τ
Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L	/minutel	1	
Ventilates the patient adequately	minutej	'	
-Proper volume to cause visible chest rise (1 point)		2	
-Proper rate [10 – 12/minute (1 ventilation every 5 – 6 seconds)] (1	noint)		
Note: The examiner must now ask the candidate, "How would		olumes with	
each ventilation?"	you know it you are delivering appropriate v	oranics with	
Actual Time Ended:	TOTAL	16	
CRITICAL CRITERIA			
After suctioning the patient, failure to initiate ventilations within 3	30 seconds or interrupts ventilations for greater th	an 30 second	s at any time
Failure to take or verbalize appropriate PPE precautions			y
Failure to suction airway before ventilating the patient			
Suctions the patient for an excessive and prolonged time			
Failure to check responsiveness, then check breathing and puls	se simultaneously for no more than 10 seconds		
Failure to voice and ultimately provide high oxygen concentration	•		
Failure to ventilate the patient at a rate of 10 – 12/minute (1 ven			
Failure to provide adequate volumes per breath [maximum 2 er			
Insertion or use of any adjunct in a manner dangerous to the pa			
	ilioni.		
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

SUPRAGLOTTIC AIRWAY DEVICE

Candidate: E	xamıner:		
Date: S	ignature:		
Device:			
NOTE: If candidate elects to initially ventilate with BVM attached to reserv	oir and oxygen, full credit must be awa	rded for step	s denoted by
"**" so long as first ventilation is delivered within 30 seconds.			
A 4 177 O4 4 1		Possible	Points
Actual Time Started:		Points	Awarded
Takes or verbalizes appropriate PPE precautions		1	
Opens the airway manually		1	
Elevates tongue, inserts simple adjunct [oropharyngeal or nasopharyngea	ıl airway]	1	
NOTE: Examiner now informs candidate no gag reflex is present and	l patient accepts adjunct		
**Ventilates patient immediately with bag-valve-mask device unattached t		1	
**Ventilates patient with room air	73	1	
NOTE: Examiner now informs candidate that ventilation is being per	formed without difficulty and that pr	ulse oximetr	v indicates
the patient's blood oxygen saturation is 85%	omica marcat amically and mat po		, maroutoc
Attaches oxygen reservoir to bag-valve-mask device and connects to high	a-flow oxygen regulator	I	Τ
[12 – 15 L/minute]	Thow oxygen regulator	1	
Ventilates patient at a rate of 10 – 12/minute (1 ventilation every 5 – 6 sec	anda) with appropriate volumes	1	+
			- 1 - 1: 4:
NOTE: After 30 seconds, examiner auscultates and reports breath southers are reported insertion of a supreglattic single. The examiner must be	•	y and medica	ıı airection
has ordered insertion of a supraglottic airway. The examiner must no	ow take over ventilation.		
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 cand	lidate 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 immedia	tely removes syringe or		
secures strap]	3.	1	
Ventilates patient and confirms proper ventilation [correct lumen and prop	er insertion depth) by auscultation		+
bilaterally over lungs and over the epigastrium	or inscribin depth j by adseditation	1	
Adjusts ventilation as necessary [ventilates through additional lumen or sl	ightly withdraws tube until		+
ventilation is optimized]	ightiy withdraws tube until	1	
	graphy connemetry EDD or		+
Verifies proper tube placement by secondary confirmation such as capno	graphy, caphometry, EDD or	1	
colorimetric device			
NOTE: The examiner must now ask the candidate, "How would you I	mow if you are delivering appropria	te volumes i	vith
each ventilation?"		Ι .	1
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	18	
Critical Criteria			
Failure to initiate ventilations within 30 seconds after taking body substan	ce isolation precautions or interrupts ven	tilations for gr	eater than 30
seconds at any time	·	_	
Failure to take or verbalize appropriate PPE 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 (1 ventilation ev			
Failure to provide adequate volumes per breath [maximum 2 errors/minut			
Failure to pre-oxygenate patient prior to insertion of the supraglottic airwa			
Failure to insert the supraglottic airway device at a proper depth or location	n 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 a	and proper insertion depth) by auscultation	on bilaterally o	ver lungs and
over the 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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CARDIAC ARREST MANAGEMENT / AED

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Determines the scene/situation is safe		1	
Checks patient responsiveness		1	
Direct assistant to retrieve AED		1	
Requests additional EMS assistance		1	
Checks breathing and pulse simultaneously		1	
NOTE: After checking responsiveness, then checking breathing a examiner informs candidate, "The patient is unresponsive, apnei		ds,	
Immediately begins chest compressions [adequate depth and rate; allow	s the chest to recoil completely]	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 no more than 10 seconds throughout (1 point)	nt)	5	
NOTE: After 2 minutes (5 cycles), candidate assesses patient and candidate operates AED.	l second rescuer resumes compress	sions while	
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 patient during rhy	thm analysis	1	
Ensures that all individuals are clear of the patient and delivers shock from	om AED	1	
Immediately directs rescuer to resume chest compressions		1	
Actual Time Ended:	TOTAL	17	
Critical Criteria Failure to take or verbalize appropriate PPE precautions Failure to check responsiveness, then check breathing and pulse s Failure to immediately begin chest compressions as soon as pulsel Failure to demonstrate acceptable high-quality, 1-rescuer adult CPI Interrupts CPR for more than 10 seconds at any point Failure to correctly attach the AED to the patient Failure to operate the AED properly Failure to deliver shock in a timely manner Failure to ensure that all individuals are clear of patient during rhyth [verbalizes "All clear" and observes] Failure to immediately resume compressions after shock delivered Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	essness is confirmed R		



BLEEDING CONTROL/SHOCK MANAGEMENT

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Applies direct pressure to the wound		1	
NOTE: The examiner must now inform candidate that the woun	d continues to bleed.		
Applies tourniquet		1	
NOTE: The examiner must now inform candidate that the patier	nt is exhibiting signs and symptoms of hyp	operfusion.	
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	
Actual Time Ended:	TOTAL	7	
CRITICAL CRITERIA Failure to take or verbalize appropriate PPE precautions Failure to administer high concentration oxygen Failure to control hemorrhage using correct procedures in a tim Failure to indicate the need for immediate transportation 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	ely manner		



JOINT IMMOBILIZATION

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Directs application of manual stabilization of the injury	,	1	
Assesses distal motor, sensory and circulatory function	ons in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sens	ory and circulatory functions are present and no	ormal."	
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 fund	ctions in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sen	sory and circulatory functions are present and	l normal."	
Actual Time Ended:	TC	OTAL 9	
Critical Criteria Failure to immediately stabilize the extremity many grossly moves the injured extremity Failure to immobilize the bone above and below Failure to reassess distal motor, sensory and circum Failure to manage the patient as a competent EN Exhibits unacceptable affect with patient or other Uses or orders a dangerous or inappropriate interests.	the injury site culatory functions in the injured extremity before and MT	after splinting	



LONG BONE IMMOBILIZATION

Candidate:	Examiner:			
Date:	Signature:			
Actual Time Started:		Possible Points	Points Awarded	
Takes or verbalizes appropriate PPE precautions		1		
Directs application of manual stabilization of the injury		1		
Assesses distal motor, sensory and circulatory functions in the inj	ured extremity	1		
NOTE: The examiner acknowledges, "Motor, sensory and circ	ulatory functions are present and norm	al."		
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 functions in the injured extremity		1		
NOTE: The examiner acknowledges, "Motor, sensory and circ	ulatory functions are present and norm	al."		
Actual Time Ended:	TOTAL	10		
Critical Criteria Failure to immediately stabilize the extremity manually Grossly moves the injured extremity Failure to immobilize the joint above and the joint below the injury site Failure to immobilize the hand or foot in a position of function Failure to reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting 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				