Endeavor Health

EMS EDUCATION PROGRAM

Advanced Skills

Performance Manual

Paramedic Psychomotor Competency Portfolio

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National Registry of Emergency Medical Technicians®
Paramedic Psychomotor Competency Portfolio Manual

SKILLS LAB SKILL SHEETS: TABLE OF CONTENTS

OBTAIN A PATIENT HISTORY FROM AN ALERT AND ORIENTED PATIENT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Demographic data	
Age	
Weight – estimated/translated to kg	
Sex	
Ethnic origin	
Source of referral	
“Who called EMS?”	
Source of historical information	
Who is telling you the information?	
Reliability	
Do you believe the patient?	
Does the patient have appropriate decision-making capacity to consent for care?	
Is the patient oriented appropriately?	
Chief complaint	
“Why did you call us?”	
Duration of this episode/complaint	
History of the present illness	
Onset	
“When did this begin?”	
“Was it sudden or gradual?”	
Provocation	
“What brought this on?”	
“Is there anything that makes it better or worse?”	
Quality	
“How would you describe your pain or symptoms?”	
“Has there been any change in your pain or symptoms since it began?”	
Region/Radiation	
“Can you point and show me where your pain or symptoms are located?”	
“Does the pain move or radiate anywhere else?”	
Severity	
“How would you rate your level of discomfort right now on a 0 – 10 scale?”	
“Using the same scale, how bad was your discomfort when this first began?”	

Timing	
“When did your pain or symptoms begin?”	
“Is it constant or how does it change over time?”	
Setting	
Is there anything unique to place or events with this episode?	
Treatments	
“Have you taken anything to treat this problem?”	
Pertinent negatives	
Notes any signs or symptoms not present	
Converges	
Moves history from broad to focused to field impression	
Past medical history	
General health status	
What does the patient say about his/her health?	
Current medications	
“What prescribed medications do you currently take?”	
“What over-the-counter medications or home remedies do you currently take?”	
“When did you take you last dose of medications?”	
“Do you take all your medications as directed?”	
Adult illnesses	
“What other similar episodes were present?”	
“Is this an acute or chronic illness?”	
“What medical care do you currently receive for this illness?”	
“What medical care do you currently receive for other illnesses?”	
Allergies	
“Do you have any allergies to any medications, foods or other things?”	
Operations	
“What previous surgeries have you had?”	
Environmental	
Patient nutritional status	
“Do you have any habitual activities, such as drugs, alcohol or tobacco use?”	
Family history	
Questions patient about pertinent family medical history	
Psychological history	
Asks appropriate related history questions based upon patient presentation	
Verbal report	
Completes succinct report	
Identifies pertinent findings	
Identifies pertinent negatives	
Organizes report in logical sequence	
Affective	
Makes the patient feel comfortable	
Uses good eye contact	
Establishes and maintains proper distance	
Uses techniques that show interest in the patient	
Professional appearance	
Takes notes of findings during history	
Preferably uses open-ended questions	
Follows patient lead to converge questions	

Uses reflection to gain patient confidence	
Shows empathy in a professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to complete an appropriate history
_____ Failure to obtain vital information necessary for the proper assessment, management and diagnosis of the patient's condition
_____ Failure to receive a total score of 86 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

COMPREHENSIVE NORMAL ADULT PHYSICAL ASSESSMENT TECHNIQUES SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

NOTE: The student is to perform a comprehensive physical examination (well physical examination) on a patient who has no complaint or distress.

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Initial general impression	
Appearance	
Speaks when approached	
Facial expression	
Skin color	
Eye contact	
Weight - estimated/translated to kg	
Work of breathing	
Posture, ease of movement	
Odors of body or breath	
Dress, hygiene, grooming	
Level of consciousness/mental status	
Speech	
Quantity	
Rate	
Volume	
Articulation of words	
Fluency	
Mood	
Orientation	
Time	
Place	
Person	
Memory	
Recent	
Long term	
Assesses baseline vital signs	
Vital signs	
Blood pressure	
Pulses – radial, carotid	
Pulse rate	
Pulse amplification	
Respirations	
Respiratory rate	

Tidal volume	
Temperature – oral, tympanic, rectal	
SpO_2	
Secondary physical examination	
Skin	
Colors – flushed, jaundiced, pallor, cyanotic	
Moisture – dryness, sweating, oiliness	
Temperature – hot or cool to touch	
Turgor	
Lesions – types, location, arrangement	
Nails – condition, cleanliness, growth	
Head and neck	
Hair	
Scalp	
Skull	
Face	
Eyes	
Acuity – vision is clear and free of disturbance	
Appearance – color, iris clear	
Pupils – size, reaction to light	
Extraocular movements – up, down, both sides	
Ears	
External ear	
Ear canal – drainage, clear	
Hearing – present/absent	
Nose	
Deformity	
Air movement	
Mouth	
Opens willingly	
Jaw tension	
Mucosal color	
Moisture	
Upper airway patent	
Neck	
Trachea – midline	
Jugular veins – appearance with patient position	
Chest	
Chest wall movement – expansion	
Skin color – closed wounds	
Integrity	
Open wounds	
Rib stability	
Presence/absence of pain	
Lower Airway	
Auscultation – anterior and posterior	
Normal sounds and location	
Tracheal	
Bronchial	
Bronchovesicular	

Vesicular	
Heart and blood vessels	
Heart	
Apical pulse	
Sounds	
S_1	
S_2	
Arterial pulses	
Locate with each body area examined	
Abdomen	
Color – closed wounds	
Open wounds	
Size, symmetry, shape	
Scars	
Distention	
Auscultation	
Palpation – quadrants, masses, tenderness, rigidity	
Back	
Color – closed wounds	
Open wounds	
Size, symmetry, shape	
Scars	
Palpation – tenderness, rigidity, masses	
Pelvis	
Stability	
Male genitalia – inquires about:	
Wounds, rashes, external lesions	
Drainage	
Female genitalia (non-pregnant) – inquires about:	
Wounds, rashes, external lesions	
Drainage	
Asks about bleeding or discharge	
Musculoskeletal	
Legs and feet	
Symmetry	
Range of motion	
Deformity	
Skin	
Color	
Closed wounds	
Open wounds	
Pulses	
Femoral	
Popliteal	
Dorsalis pedis	
Arms and hands	
Symmetry	
Range of motion	
Deformity	
Skin	

Color	
Closed wounds	
Open wounds	
Pulses	
Brachial	
Radial	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner, i.e. uses appropriate name, explains procedures, maintains modesty	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to adequately assess airway, breathing or circulation
_____ Performs assessment in a disorganized manner
_____ Failure to assess the patient as a competent EMT
_____ Exhibits unacceptable affect with patient or other personnel
_____ Performs assessment inappropriately resulting in potential injury to the patient
_____ Failure to receive a total score of 160 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

COMPREHENSIVE NORMAL PEDIATRIC PHYSICAL ASSESSMENT TECHNIQUES SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

NOTE: The student is to perform a comprehensive physical examination (well physical examination) on a toddler or school-aged child who has no complaint or distress. ***Choose appropriate age level**

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Initial general impression	
Appearance	
Facial expression	
Skin color	
Work of breathing	
Odors of body or breath	
*If toddler or school-aged child:	
Activity level	
Speaks when addressed	
*If school-aged child:	
Eye contact	
Mood	
Orientation	
Time	
Place	
Person	
Memory	
Recent	
Long term	
Assesses baseline vital signs	
Vital signs	
Blood pressure	
Pulses – brachial, radial, carotid	
Pulse rate	
Pulse amplification	
Respirations	
Respiratory rate	
Tidal volume	
Temperature – oral, tympanic, rectal	
SpO_2	
Secondary physical examination	

Somatic growth	
Length	
Weight	
Head circumference	
Skin	
Colors – flushed, jaundiced, pallor, cyanotic	
Moisture – dryness, sweating, oiliness	
Temperature – hot or cool to touch	
Turgor	
Lesions – types, location, arrangement	
Nails – condition, cleanliness, growth	
Head and neck	
Hair	
Scalp	
Skull	
Face	
Eyes	
Acuity – vision is clear and free of disturbance	
Appearance – color, iris clear	
Pupils – size, reaction to light	
Extraocular movements – up, down, both sides	
Ears	
External ear	
Ear canal – drainage, clear	
Hearing – present/absent	
Nose	
Deformity	
Air movement	
Mouth	
Opens willingly	
Jaw tension	
Mucosal color	
Moisture	
Upper airway patent	
Neck	
Trachea – midline	
Jugular veins – appearance with patient position	
Chest	
Chest wall movement – expansion	
Skin color – closed wounds	
Integrity	
Open wounds	
Rib stability	
Presence/absence of pain	
Lower airway	
Auscultation – anterior and posterior	
Normal sounds and location	
Tracheal	
Bronchial	

Bronchovesicular	
Vesicular	
Heart and blood vessels	
Heart	
Apical pulse	
Sounds	
S_1	
S_2	
Arterial pulses	
Locate with each body area examined	
Abdomen	
Color – closed wounds	
Open wounds	
Size, symmetry, shape	
Scars	
Distention	
Auscultation	
Palpation – quadrants, masses, tenderness, rigidity	
Back	
Color – closed wounds	
Open wounds	
Size, symmetry, shape	
Scars	
Palpation – tenderness, rigidity, masses	
Pelvis	
Stability	
Male genitalia – inspects for:	
Wounds, rashes, external lesions, drainage	
Female genitalia – inspects for:	
Wounds, rashes, external lesions, drainage	
Musculoskeletal	
Legs and feet	
Symmetry	
Range of motion	
Deformity	
Skin	
Color	
Closed wounds	
Open wounds	
Pulses	
Femoral	
Popliteal	
Dorsalis pedis	
Arms and hands	
Symmetry	
Range of motion	
Deformity	
Skin	
Color	
Closed wounds	

Open wounds	
Pulses	
Brachial	
Radial	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner, i.e. uses appropriate name, explains procedures, maintains modesty	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to adequately assess airway, breathing or circulation
_____ Performs assessment in a disorganized manner
_____ Failure to assess the patient as a competent EMT
_____ Exhibits unacceptable affect with patient or other personnel
_____ Performs assessment inappropriately resulting in potential injury to the patient
_____ Failure to receive a total score of 136 (toddler)/146 (school-aged) or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

DIRECT OROTRACHEAL INTUBATION ADULT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
BVM with mask and reservoir	
Oxygen	
Airway adjuncts	
Suction unit with appropriate catheters	
Laryngoscope and blades	
ET tube and stylette	
Capnography/capnometry	
Prepares patient	
Takes appropriate PPE precautions	
Manually opens airway	
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	
Ventilates patient at a rate of 10 – 12/minute and sufficient volume to make chest rise	
Attaches pulse oximeter and evaluates SpO_2 reading	
Preoxygenates patient	
Performs intubation	
Positions head properly	
Inserts laryngoscope blade and displaces tongue	
Elevates mandible with laryngoscope	
Inserts ET tube and advances to proper depth	
Inflates cuff to proper pressure and immediately removes syringe	
Ventilates patient and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium	
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	
Assesses for hypoxia during intubation attempt	
Secures ET tube	
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	
Suctions secretions from tube	
Recognizes need to suction	
Identifies/selects flexible suction catheter	
Inserts catheter into ET tube while leaving catheter port open	
At proper insertion depth, covers port and applies suction while withdrawing catheter	
Ventilates/directs ventilation of patient as catheter is flushed with sterile water	

Reaffirms proper tube placement	
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	

Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO2 is less than 90% at any time
_____ Failure to take or verbalize appropriate PPE precautions
_____ Suctions the patient for more than 10 seconds
_____ Failure to preoxygenate patient prior to intubation
_____ If used, stylette extends beyond end of ET tube
_____ 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
_____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
_____ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
_____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
_____ Insertion or use of any adjunct in a manner dangerous to the patient
_____ Does not suction the patient in a timely manner
_____ Exhibits unacceptable affect with patient or other personnel
_____ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
_____ Uses or orders a dangerous or inappropriate intervention
_____ Failure to receive a total score of 50 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

DIRECT OROTRACHEAL INTUBATION PEDIATRIC SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
BVM with mask and reservoir	
Oxygen	
Airway adjuncts	
Suction unit with appropriate catheters	
Laryngoscope and blades	
ET tubes and stylette	
Capnography/capnometry	
Prepares patient	
Takes appropriate PPE precautions	
Manually opens airway	
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	
Ventilates patient at a rate of 12 – 20/minute and sufficient volume to make chest rise	
Attaches pulse oximeter and notes SpO_2	
Preoxygenates patient	
Performs intubation	
Places patient in neutral or sniffing position by padding between scapulae to elevate shoulders and torso **as needed**	
Inserts laryngoscope blade and displaces tongue	
Elevates mandible with laryngoscope	
Inserts ET tube and advances to proper depth	
Inflates cuff to proper pressure and immediately removes syringe (only if cuffed tube is used)	
Ventilates patient and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium	
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	
Assesses for hypoxia during intubation attempt	
Secures ET tube	
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO2 is less than 90% at any time
_____ Failure to take or verbalize appropriate PPE precautions
_____ If used, suctions the patient for more than 10 seconds
_____ If used, stylette extends beyond end of ET tube
_____ Failure to preoxygenate patient prior to intubation
_____ Failure to disconnect syringe immediately after inflating cuff of ET tube (only if cuffed tube is used)
_____ Uses teeth or gums as a fulcrum
_____ Failure to assure proper tube placement by auscultation bilaterally and over the epigastrium
_____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
_____ Failure to ventilate the patient at a rate of at least 12/minute and no more than 20/minute
_____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
_____ Insertion or use of any adjunct in a manner dangerous to the patient
_____ Attempts to use any equipment not appropriate for the pediatric patient
_____ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
_____ Exhibits unacceptable affect with patient or other personnel
_____ Uses or orders a dangerous or inappropriate intervention
_____ Failure to receive a total score of 40 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

NASOTRACHEAL INTUBATION ADULT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
BVM with mask and reservoir	
Oxygen	
Airway adjuncts	
Suction unit with appropriate catheters	
ET tubes	
Medications (viscous lidocaine, water soluble jelly, nasal spray)	
Capnography/capnometry	
Prepares patient	
Takes appropriate PPE precautions	
Inspects nostrils to determine largest and least deviated or obstructed nostril	
Inserts adjunct (nasopharyngeal airway)	
Assists patient ventilations at a rate of 10 – 12/minute and sufficient volume to make chest rise	
Attaches pulse oximeter and notes SpO_2	
Preoxygenates patient	
Auscultates breath sounds	
Performs intubation	
Lubricates tube and prepares nostril	
Positions head properly	
Inserts ET tube into selected nostril and guides it along the septum	
Pauses to assure that tip of ET tube is positioned just superior to the vocal cords (visualizes misting in the tube, hears audible breath sounds from proximal end of ET tube)	
Instructs patient to take a deep breath while passing ET tube through vocal cords	
Inflates cuff to proper pressure and immediately removes syringe	
Assists patient ventilations and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium; observes for misting; listens for audible breath sounds	
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	
Secures ET tube	
Assists patient ventilations patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Interrupts ventilations at any time when SpO2 is less than 90%
_____ Failure to take or verbalize appropriate PPE precautions
_____ If used, suctions the patient for more than 10 seconds
_____ Failure to disconnect syringe immediately after inflating cuff of ET tube
_____ Failure to assure proper tube placement by auscultation bilaterally and over the epigastrium
_____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
_____ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
_____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
_____ Insertion or use of any adjunct in a manner dangerous to the patient
_____ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
_____ Exhibits unacceptable affect with patient or other personnel
_____ Uses or orders a dangerous or inappropriate intervention
_____ Failure to receive a total score of 42 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

SUPRAGLOTTIC AIRWAY DEVICE ADULT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
BVM with mask and reservoir	
Oxygen	
Airway adjuncts	
Suction unit with appropriate catheters	
Supraglottic airway device	
Capnography/capnometry	
Prepares patient	
Takes appropriate PPE precautions	
Manually opens airway	
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	
Ventilates patient at a rate of 10 – 12/minute and sufficient volume to make chest rise	
Attaches pulse oximeter and notes SpO_2	
Preoxygenates patient	
Performs insertion of supraglottic airway device	
Lubricates distal tip of the device	
Positions head properly	
Performs a tongue-jaw lift	
Inserts device to proper depth	
Secures device in patient (inflates cuffs with proper volumes and immediately removes syringe or secures strap)	
Ventilates patient and confirms proper ventilation (correct lumen and proper insertion depth) by auscultation bilaterally over lungs and over epigastrium	
Adjusts ventilation as necessary (ventilates through additional lumen or slightly withdraws tube until ventilation is optimized)	
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	
Secures device	
Ventilates patient at proper rate and volume while observing capnography/capnometry and pulse oximeter	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO2 is less than 90% at any time
_____ Failure to take or verbalize appropriate PPE precautions
_____ If used, suctions the patient for more than 10 seconds
_____ Failure to preoxygenate the patient prior to insertion of the supraglottic airway device
_____ Failure to disconnect syringe immediately after inflating any cuff
_____ Failure to properly secure device in patient (cuff inflation or strap placement not acceptable)
_____ Failure to assure proper tube placement by auscultation bilaterally and over the epigastrium
_____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
_____ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
_____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
_____ Insertion or use of any adjunct in a manner dangerous to the patient
_____ Exhibits unacceptable affect with patient or other personnel
_____ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
_____ Uses or orders a dangerous or inappropriate intervention Failure to receive a total score of 38 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

NEEDLE CRICOTHYROTOMY (PERCUTANEOUS TRANSLARYNGEAL VENTILATION) SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Oxygen source capable of 50 psi	
Oxygen tubing	
Manual jet ventilator device (Y-connector or push button device)	
Bag-valve-mask device	
Large bore IV catheter	
10 – 20 mL syringe	
3.0 mm ET adapter	
Prepares patient	
Takes or verbalizes appropriate PPE precautions	
Places the patient supine and hyperextends the head/neck (neutral position if cervical spine injury is suspected), manages the patient's airway with basic maneuvers and supplemental oxygen	
Palpates neck locating the cricothyroid membrane (between the thyroid and cricoid cartilages)	
Performs needle cricothyrotomy	
Cleanse the insertion site with appropriate solution	
Stabilizes site and inserts needle through cricothyroid membrane at midline directing at a 45° angle caudally	
Aspirates syringe to confirm proper placement in trachea	
Advances catheter while stabilizing needle	
Removes needle and immediately disposes in sharps container	
Attaches ventilation device and begins ventilation (1 second for inflation, 2 seconds for exhalation using jet ventilator, manually triggered ventilation device, BVM)	
Secures catheter	
Observes chest rise and auscultates lungs to assess adequacy of ventilation	
Continues ventilation while observing for possible complications (subcutaneous emphysema, hemorrhage, hypoventilation, equipment failure, catheter kink, false placement)	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions

_____ Recaps contaminated needle or failure to dispose of syringe and needle in proper container

_____ Inability to assemble necessary equipment to perform procedure
_____ Failure to correctly locate the cricothyroid membrane
_____ Failure to properly cleanse site prior to needle insertion
_____ Incorrect insertion technique (directing the needle in a cephalad direction)
_____ Failure to assess adequacy of ventilation and for possible complications
_____ Failure to receive a total score of 34 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

CPAP AND PEEP SKILLS LAB FORM

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Prepares patient	
Takes or verbalizes appropriate PPE precautions	
Assures adequate blood pressure	
Positions patient in a position that will optimize ease of ventilation (high Fowler's)	
Assesses patient to identify indications for CPAP:	
Congestive heart failure	
Pulmonary edema	
Asthma	
Pneumonia	
COPD	
Assesses patient to identify contraindications for CPAP:	
Unconscious, unresponsive, inability to protect airway or inability to speak	
Inability to sit up	
Respiratory arrest or agonal respirations	
Nausea/vomiting	
Hypotension (systolic blood pressure < 90 mmHg)	
Suspected pneumothorax	
Cardiogenic shock	
Penetrating chest trauma	
Facial anomalies/trauma/burns	
Closed head injury	
Active upper GI bleeding or history of recent gastric surgery	
Selects, checks, assembles equipment	
Assembles mask and tubing according to manufacturer instructions	
Coaches patient how to breathe through mask	
Connects CPAP unit to suitable O_2 supply and attaches breathing circuit to device (not using oxygen regulator or flow meter)	
Turns on power/oxygen	
Sets device parameters:	
Turns the rate (frequency) dial to 8 – 12 per minute (based on local protocols)	
Turns the oxygen concentration dial to the lowest setting (28 – 29% oxygen)	
Titrates oxygen concentration to achieve an SpO_2 > 94%	
Sets tidal volume to 10 – 12 mL/kg (based on local protocols)	
Sets pressure relief valve at ± 4 cm/H_2O (based on local protocols)	
Occludes tubing to test for peak pressure required to activate pressure relief valve and adjusts as necessary	

Performs procedure	
Places mask over mouth and nose (leaves $EtCO_2$ nasal cannula in place)	
Titrates CPAP pressure (based on local protocols/device dependent):	
Max 5 cm H_2O for bronchospasm	
Max 10 cm H_2O for CHF, pulmonary edema and pneumonia	
Max 5 cm H_2O for pediatric patients	
Coaches patient to breathe normally and adjust to air pressure	
Frequently reassesses patient for desired effects:	
Decreased ventilatory distress	
SpO_2 > 94%	
Decreased adventitious lungs sounds	
Absence of complications (barotrauma and pneumothorax)	
Records settings/readings and documents appropriately	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to identify 2 indications
_____ Failure to identify 2 potential complications
_____ Failure to frequently reassess the patient after application of the CPAP device
_____ Failure to ensure that the patient understands the procedure
_____ Failure to set the proper parameters for the device (pressure relief, tidal volume, oxygen concentration, rate, etc.)
_____ Failure to test the pressure relief valve prior to application
_____ Exhibits unacceptable affect with patient or other personnel
_____ Failure to receive a total score of 64 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

TRAUMA ADULT PHYSICAL ASSESSMENT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Scene size-up	
Safety	
Takes appropriate PPE precautions – gloves, gown, goggles, vest, helmet	
Hazards – chemical, thermal, atmospheric, electrical, weapons	
Environment – bystanders, hostile, ambient temperature, adequate space, day/night	
Number of patients and location	
Additional resources – Hazmat, heavy rescue, power company, bystanders, historians, air medical	
Determines mechanism of injury – height of fall, intrusion, ejection, vehicle telemetry data	
Patient assessment and management	
Begins spinal precautions if indicated	
Primary survey/resuscitation	
General impression – patient appearance	
Estimates age, gender and weight of patient	
Manages any gross visible hemorrhage – direct pressure, tourniquet	
Level of responsiveness	
Awake and oriented	
Response to verbal stimuli	
Opens eyes	
Follows simple commands	
Response to painful stimuli	
Acknowledges presence of stimuli	
Responds to irritation stimuli	
Unresponsive	
Airway	
Assesses airway – position, obstructions	
Manages airway as appropriate – suction, adjunct, modified jaw thrust	
Breathing	
Exposes the chest and inspects for injuries	
Palpates for instability that impairs breathing – sternum and ribs	
Auscultates lung sounds – presence, clarity, abnormal sounds	
Notes minute volume – rate, tidal volume and equal chest rise and fall	
Manages any injury compromising ventilations	
Administers oxygen or ventilates with appropriate device – BVM, NRB	
Circulation	
Pulse	
Presence, rate, quality	
Skin	
Color, moisture, temperature	

Capillary refill	
Removes patient's clothing	
Performs a rapid, full-body sweep for major hemorrhage or other life- threatening injuries	
Controls major hemorrhage when found	
Manages life-threatening injuries if necessary	
Disability	
GCS – calculates score	
Pupils – size, equality, reactivity to light	
Transport decision	
Critical – begins immediate packaging for transport	
Non-critical – continued assessment on scene	
Vital signs	
Blood pressure	
Pulse	
Respirations	
SpO_2	
Pain – if appropriate	
Secondary assessment	
Obtains an oral history – pertinent to situation	
History of the present illness/injury	
SAMPLE – signs/symptoms; allergies; medications; past medical history; last meal; events leading up to injury	
OPQRST – onset; provocation; quality; region/radiation; severity; timing	
Head and Neck	
Immobilization as necessary	
Interviews for pain, inspects and palpates	
Scalp/skull	
Facial bones	
Jaw	
Eyes – PERLA	
Mouth	
Ears	
Nose	
Neck	
Trachea	
Jugular vein status	
Cervical spine processes	
Manages wounds or splints/supports fractures	
Chest	
Inspects	
Palpates	
Auscultates – credit awarded if already performed in Primary survey	
Inspects	
Assesses pelvic stability	
Manages any wound not previously treated	
Lower extremities	
Inspects and palpates	

Assess distal function – pulse, motor, sensory, perfusion	
Manages wounds or splints/supports fractures	
Upper extremities	
Inspects and palpates	
Assesses distal function – pulse, motor, sensory, perfusion	
Manages wounds or splints/supports fractures	
Posterior thorax, lumbar and buttocks	
Inspects and palpates posterior thorax	
Inspects and palpates lumbar and buttocks	
Transportation decision	
Verbalizes destination decision	
Other assessments and interventions	
Utilizes proper diagnostic tools at the appropriate time – ECG, glucometer, capnography	
Performs appropriate treatment at the correct time – IVs, splinting, bandaging	
Affective	
Explains verbally the use of team members appropriately	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to recognize life-threatening injuries
_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to provide spinal precautions according to scenario
_____ Failure to assess or appropriately manage problems associated with airway, breathing, hemorrhage or shock
_____ Failure to perform primary survey/management prior to secondary assessment/management
_____ Failure to attempt to determine the mechanism of injury
_____ Failure to assess, manage and package a critical patient within 10 minutes
_____ 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
_____ Failure to receive a total score of 116 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

TRAUMA ENDOTRACHEAL INTUBATION ADULT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
BVM with mask and reservoir	
Oxygen	
Airway adjuncts	
Suction unit with appropriate catheters	
Laryngoscope and blades	
ET tube and stylette	
Capnography/capnometry	
Prepares patient	
Takes appropriate PPE precautions	
Manually maintains in-line immobilization and opens airway using jaw thrust maneuver	
Inserts adjunct (oropharyngeal or nasopharyngeal airway)	
Ventilates patient at a rate of 10 – 12/minute and sufficient volume to make chest rise	
Attaches pulse oximeter and evaluates SpO_2 reading	
Preoxygenates patient	
Performs intubation	
Maintains head in neutral, in-line position	
Inserts laryngoscope blade and displaces tongue	
Elevates mandible with laryngoscope	
Inserts ET tube and advances to proper depth	
Inflates cuff to proper pressure and **immediately** removes syringe	
Ventilates patient and confirms proper tube placement by auscultation bilaterally over lungs and over epigastrium	
Verifies proper tube placement by secondary confirmation such as capnography, capnometry, EDD or colorimetric device	
Assesses for hypoxia during intubation attempt	
Secures ET tube	
Ventilates patient at proper rate and volume, observing capno and pulse oximeter	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to initiate ventilations within 30 seconds after taking PPE precautions or interrupts ventilations when SpO2 is less than 90% at any time
_____ Failure to take or verbalize appropriate PPE precautions
_____ If used, suctions the patient for more than 10 seconds
_____ Failure to preoxygenate patient prior to intubation
_____ If used, stylette extends beyond end of ET tube
_____ 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
_____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
_____ Failure to ventilate the patient at a rate of at least 10/minute and no more than 12/minute
_____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
_____ Insertion or use of any adjunct in a manner dangerous to the patient
_____ Failure to assure that the head is in a neutral, in-line position throughout
_____ Uses or orders a dangerous or inappropriate intervention
_____ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
_____ Exhibits unacceptable affect with patient or other personnel
_____ Failure to receive a total score of 40 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

PLEURAL DECOMPRESSION (NEEDLE THORACOSTOMY) SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Manages the patient's airway with basic maneuvers and supplemental oxygen; intubates as necessary	
Appropriately recognizes signs of tension pneumothorax	
Selects, checks, assembles equipment	
14 – 16 ga. X 2 inch over-the-needle catheter (adult) or 16 – 18 ga. X 1½ – 2 inch over-the-needle catheter (pediatric)	
10 mL syringe	
4x4s	
Antiseptic solution	
Tape	
Prepares patient	
Takes or verbalizes appropriate PPE precautions	
Palpates the chest locating the second or third intercostal space on the midclavicular line (the second rib joins the sternum at the angle of Louis, the second intercostal space is located between 2nd & 3rd ribs while the third intercostal space is between 3rd & 4th ribs)	
Properly cleanses the insertion site with appropriate solution	
Performs needle thoracostomy	
Reconfirms site of insertion and directs the needle over the top of the rib on the midclavicular line	
Listens for a rush of air or watches for plunger in syringe to withdraw and aspirates air	
Removes needle/syringe leaving only the catheter in place	
Disposes of the needle in proper container	
Stabilizes the catheter hub with 4x4s and tape	
Reassesses adequacy of ventilation, lung sounds, blood pressure and pulse for improvement in patient condition	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to dispose of the needle in proper container
_____ Failure to correctly locate the site for insertion
_____ Failure to properly cleanse site prior to needle insertion
_____ Incorrect procedure relating to needle insertion (inserting below the rib, incorrect anatomical location, etc.)
_____ Failure to assess the need for needle decompression (diminished or absent breath sounds, signs of hemodynamic compromise, etc.)
_____ Failure to reassess patient condition following procedure
_____ Failure to receive a total score of 30 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

SPINAL IMMOBILIZATION ADULT (SUPINE PATIENT) SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Long spine immobilization device with straps	
Cervical collar	
Head immobilizer (commercial or improvised)	
Padding material	
Immobilizes patient	
Takes or verbalizes appropriate PPE precautions	
Directs assistant to place/maintain head in the neutral, in-line position	
Directs assistant to maintain manual stabilization of the head	
Assures that patient is a reliable historian (sensorium not currently altered by drugs or alcohol; no recent loss of consciousness)	
Assesses motor, sensory and circulatory functions in each extremity	
Applies appropriately sized extrication collar	
Positions the immobilization device appropriately	
Directs movement of the patient onto the device without compromising the integrity of the spine	
Applies padding to voids between the torso and the device as necessary	
Secures the patient's torso to the device	
Evaluates and pads behind the patient's head as necessary	
Immobilizes the patient's head to the device	
Secures the patient's legs to the device	
Secures the patient's arms	
Reassesses motor, sensory and circulatory function in each extremity	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Did not immediately direct or take manual stabilization of the head

_____ Did not properly apply appropriately sized cervical collar before ordering release of manual stabilization
_____ Released or ordered release of manual stabilization before it was maintained mechanically
_____ Manipulated or moved the patient excessively causing potential for spinal compromise
_____ Head immobilized to the device before patient's torso sufficiently secured to the device
_____ 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 after securing the patient to the device
_____ Failure to receive a total score of 34 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

SPINAL IMMOBILIZATION ADULT (SEATED PATIENT) SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Short spine immobilization device with straps	
Cervical collar	
Padding material	
Immobilizes patient	
Takes or verbalizes appropriate PPE precautions	
Directs assistant to place/maintain head in the neutral, in-line position	
Directs assistant to maintain manual stabilization of the head	
Assures that patient is a reliable historian (sensorium not currently altered by drugs or alcohol; no recent loss of consciousness)	
Assesses motor, sensory and circulatory functions in each extremity	
Applies appropriately sized extrication collar	
Positions the immobilization device appropriately	
Secures the device to the patient's torso	
Evaluates torso fixation and adjusts as necessary	
Evaluates and pads behind the patient's head as necessary	
Secures the patient's head to the device	
Reevaluates and assures adequate immobilization	
Reassesses motor, sensory and circulatory functions in each extremity	
Properly moves patient onto a long backboard	
Releases/loosens leg straps	
Secures patient to the long backboard	
Reassesses motor, sensory and circulatory function in each extremity	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Did not immediately direct or take manual stabilization of the head
_____ Did not properly apply appropriately sized cervical collar before ordering release of manual stabilization
_____ Released or ordered release of manual stabilization before it was maintained mechanically
_____ Manipulated or moved the patient excessively causing potential for 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 securing the patient to the device and to the long backboard
_____ Failure to receive a total score of 36 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

JOINT SPLINTING SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:

	SCORE
Selects, checks, assembles equipment	
Cravats	
Roller gauze	
Splinting material	
Padding material	
Splints joint	
Takes or verbalizes appropriate PPE precautions	
Directs application of manual stabilization of the injury	
Assesses motor, sensory and circulatory functions in the injured extremity	
Selects appropriate splinting material	
Immobilizes the site of the injury and pads as necessary	
Immobilizes the bone above the injury site	
Immobilizes the bone below the injury site	
Secures the entire injured extremity	
Reassesses motor, sensory and circulatory functions in the injured extremity	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Did not immediately stabilize the extremity manually
_____ Grossly moves the injured extremity
_____ Did not immobilize the bones above and below the injury site
_____ Did not reassess motor, sensory and circulatory functions in the injured extremity before and after splinting
_____ Did not secure the entire injured extremity upon completion of immobilization
_____ Failure to receive a total score of 24 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

LONG BONE SPLINTING SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:

	SCORE
Selects, checks, assembles equipment	
Cravats	
Roller gauze	
Splinting material	
Padding material	
Splints long bone	
Takes or verbalizes appropriate PPE precautions	
Directs application of manual stabilization of the injury	
Assesses motor, sensory and circulatory functions in the injured extremity	
Measures the splint	
Applies the splint and pads as necessary	
Immobilizes the joint above the injury site	
Immobilizes the joint below the injury site	
Secures the entire injured extremity	
Immobilizes the hand/foot in the position of function	
Reassesses motor, sensory and circulatory functions in the injured extremity	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Did not immediately stabilize the extremity manually
_____ Grossly moves the injured extremity
_____ Did not immobilize the joint above and the joint below the injury site
_____ Did not immobilize the hand or foot in a position of function
_____ Did not reassess motor, sensory and circulatory functions in the injured extremity before and after splinting
_____ Did not secure the entire injured extremity upon completion of immobilization
_____ Failure to receive a total score of 26 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

TRACTION SPLINTING SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:

	SCORE
Selects, checks, assembles equipment	
Traction splint with all associated equipment (ankle hitch, straps, etc.)	
Padding material	
Splints femur	
Takes or verbalizes appropriate PPE precautions	
Directs application of manual stabilization of the injured leg (not necessary when using a unipolar device [Sagar® or similar] that is immediately available)	
Directs application of manual traction (not necessary when using a unipolar device, but must be applied before elevating the leg if the leg is elevated at all)	
Assesses motor, sensory and distal circulation in the injured extremity	
Prepares/adjusts the splint to proper length	
Positions the splint at the injured leg	
Applies proximal securing device (e.g., ischial strap)	
Applies distal securing device (e.g., ankle hitch)	
Applies appropriate mechanical traction	
Positions/secures support straps	
Re-evaluates proximal/distal securing devices	
Reassesses motor, sensory and circulatory functions in the injured extremity	
Secures patient to the long backboard to immobilize the hip	
Secures the traction splint/legs to the long backboard to prevent movement of the splint	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL /38

Critical Criteria

_____ Loss of traction at any point after it is assumed or applies inadequate traction
_____ Failure to apply manual traction before elevating the leg
_____ Did not reassess motor, sensory and circulatory functions in the injured extremity after splinting
_____ The foot is excessively rotated or extended after splinting
_____ Final immobilization failed to support the femur or prevent rotation of the injured leg
_____ Failure to receive a total score of 30 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

HEMORRHAGE CONTROL SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Field dressings (various sizes) Kling®, Kerlix®	
Bandages (various sizes)	
Tourniquet (commercial or improvised)	
Controls hemorrhage	
Takes or verbalizes appropriate PPE precautions	
Applies direct pressure to the wound	
Bandages the wound	
Applies tourniquet	
Properly positions the patient	
Administers high concentration oxygen	
Initiates steps to prevent heat loss from the patient	
Indicates the need for immediate transportation	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Did not administer high concentration oxygen
_____ Did not control hemorrhage using correct procedures in a timely manner
_____ Did not indicate the need for immediate transportation
_____ Failure to receive a total score of 24 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

MEDICAL AND CARDIAC PHYSICAL ASSESSMENT SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Scene size-up	
Safety	
Takes appropriate PPE precautions – gloves, gown, goggles, vest, helmet	
Hazards – chemical, thermal, atmospheric, electrical, weapons	
Environment – bystanders, hostile, ambient temperature, adequate space, day/night, patient prone to sudden behavior change	
Number of patients and location	
Clues/evidence at the scene – medication bottles, chemical containers, syringes, illicit drug paraphernalia, etc.	
Additional resources – Hazmat, heavy rescue, law enforcement, bystanders, historians, air medical	
Nature of illness – determines reason for call	
Patient assessment and management	
Begins spinal precautions if indicated	
Primary survey/resuscitation	
General impression	
Patient appearance – posture, position, obvious distress, incontinence, vomiting, odors, pain	
Estimates age, gender and weight of patient	
Manages any gross visible hemorrhage – direct pressure, tourniquet	
Level of responsiveness	
Awake and oriented	
Response to verbal stimuli	
Opens eyes	
Follows simple commands	
Responds to painful stimuli	
Acknowledges presence of stimuli	
Responds to irritation stimuli	
Unresponsive	
Airway	
Assesses airway – position, obstructions	
Manages airway as appropriate – suction, adjunct, modified jaw thrust	
Breathing	
Exposes the chest and inspects for injuries	
Auscultates lung sounds – presence, clarity, abnormal sounds	
Notes minute volume – rate, tidal volume and equal chest rise and fall	
Manages any injury compromising ventilations	
Administers oxygen or ventilates with appropriate device – BVM, NRB	

Circulation	
Pulse	
Presence, rate, quality	
Skin	
Color, moisture, temperature	
Turgor, edema	
Capillary refill	
Disability	
GCS – calculates score	
Pupils – size, equality, reactivity to light	
Chief complaint	
Determines chief complaint	
Transport decision	
Critical – begins immediate packaging for transport or resuscitation	
Non-critical – continued assessment on scene	
Vital signs	
Blood pressure	
Pulse	
Respirations	
SpO_2	
Pain – if appropriate	
Secondary assessment – performs secondary physical examination and assesses affected body part(s) or system(s)	
Obtains an oral history – pertinent to situation	
History of the present illness	
SAMPLE – signs/symptoms; allergies; medications; past medical history; last meal; events leading up to injury	
OPQRST – onset; provocation; quality; region/radiation; severity; timing	
Head and Neck	
Immobilization as necessary	
Interviews for pain, recent trauma, events	
Inspects and palpates	
Scalp/skull	
Facial bones	
Facial muscles – symmetry	
Jaw	
Eyes – PERLA, pupil size, ocular movements, visual acuity, position of eyes	
Mouth – assess tongue, says “Ah,” color of palate	
Ears – aligns to open canal, discharge	
Nose – discharge, obstruction, nasal flaring	
Neck – lumps, hard nodules	
Trachea – checks for stoma	
Jugular vein status	
Cervical spine processes	
Chest and cardiovascular	
Interviews patient – pain, history, current medications	
Inspects – rate, rhythm, depth, symmetry, effort of breathing, color, scars, lumps	
Palpates – tenderness, lumps	
Auscultates – vesicular, bronchial, bronchovesicular breath sounds in proper locations anteriorly and posteriorly, notes adventitious breath sounds	
Percussion – symmetry of sounds	

	Oxygenation/ventilation – adjusts oxygen flow, changes adjunct accordingly, administers appropriate respiratory medications	
	Auscultates heart sounds – S_1, S_2	
	Cardiac management – monitor/12-lead ECG, medications	
Abdomen and pelvis		
	Interviews patient – location, type of pain, duration, events leading up to current complaint, food or products ingested	
	Inspects – scars, distention, pulsations, color, including flanks and posterior	
	Auscultation – bowel sounds	
	Palpation – guarding, tenderness with cough or increasing pressure, pulsations, rigidity	
	Assesses pelvic stability	
Extremities		
	Interviews patient – location, type of pain, duration, events	
	Arms – pulses, edema, capillary refill, grip strength, drift	
	Legs – pulses, edema, pressure sores, extension/contraction of legs/feet	
	Manages wounds or splints/supports fractures	
Mental status examination		
	Appearance – dress, eye contact, posture, depression, violence, facial grimaces, actions, mannerisms	
	Speech – spontaneous, slow/fast, volume, clarity, appropriate	
	Mood – depressed, euphoric, manic, anxious, angry, agitated, fearful, guilty	
	Thoughts – racing, hallucinations, delusions, suicidal, unconnected, disturbed, homicidal	
Neurological		
	Interviews patient – pain, paralysis; location, duration, events leading up to, changes over time, past medical history, medications	
	Stroke scale – facial droop, arm drift, abnormal speech	
	Motor system – posturing, involuntary movements, strength, coordination, flaccid, seizures, gait	
Transportation decision		
Verbalizes destination decision		
Other assessments and interventions		
Utilizes proper diagnostic tools at the appropriate time – ECG, glucometer, capnography		
Performs appropriate treatment at the correct time – IVs, oxygenation/ventilation, medication administration		
Affective		
Explains verbally the use of team members appropriately		
Accepts evaluation and criticism professionally		
Shows willingness to learn		
Interacts with simulated patient and other personnel in professional manner		

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to recognize life-threatening injuries
_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to provide spinal precautions according to scenario
_____ Failure to assess or appropriately manage problems associated with airway, breathing, cardiac rhythm, hemorrhage or shock

_____ Failure to perform primary survey/management prior to secondary assessment/management
_____ Failure to attempt to determine the mechanism of injury
_____ Failure to properly assess, manage and package a critical patient within 10 minutes
_____ 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
_____ Failure to receive a total score of 130 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

INTRAVENOUS THERAPY SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
IV solution	
Administration set	
Catheter	
Sharps container	
Universal start kit (antiseptic swabs, gauze pads, venous tourniquet, occlusive bandage, antibiotic gel, syringe, etc.)	
Spikes bag	
Checks solution for:	
Proper solution	
Clarity or particulate matter	
Expiration date	
Protective covers on tail ports	
Checks administration set for:	
Drip rating	
Tangled tubing	
Protective covers on both ends	
Flow clamp up almost to drip chamber and closed	
Removes protective cover on drip chamber while maintaining sterility	
Removes protective cover on IV bag tail port while maintaining sterility	
Inserts IV tubing spike into IV solution bag tail port by twisting and pushing until inner seal is punctured while maintaining sterility	
Turns IV bag upright	
Squeezes drip chamber and fills half-way	
Turns on flow and bleeds line of all air while maintaining sterility	
Shuts flow off after assuring that all large air bubbles have been purged	
Performs venipuncture	
Tears sufficient tape to secure IV	
Opens antiseptic swabs, gauze pads, occlusive dressing	
Takes appropriate PPE precautions	
Identifies appropriate potential site for cannulation	
Applies tourniquet properly	
Palpates and identifies suitable vein	

Cleanses site, starting from the center and moving outward in a circular motion	
Removes IV needle and catheter from package and while maintaining sterility	
Inspects for burrs	
Loosens catheter hub with twisting motion	
Stabilizes the vein and extremity by grasping and stretching skin while maintaining sterility	
Warns patient to expect to feel the needle stick	
Inserts stylette with bevel up at appropriate angle (35 – 45°) while maintaining sterility	
Feels “pop” as stylette enters vein and observes dark, red blood in flash chamber	
Lowers stylette and inserts an additional 1/8 – 1/4"	
Stabilizes stylette and slides catheter off of stylette until hub touches skin	
Palpates skin just distal to tip of catheter and applies pressure to occlude vein	
Removes stylette and immediately disposes in sharps container	
Attaches syringe and draws venous blood sample if ordered while maintaining sterility	
Removes protective cap from IV tubing and attaches to hub of catheter while maintaining sterility	
Releases tourniquet	
Opens flow clamp and runs for a brief period to assure a patent line	
Secures catheter and IV tubing to patient	
Adjusts flow rate as appropriate	
Assesses site for signs of infiltration, irritation	
Assesses patient for therapeutic response or signs of untoward reactions	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to dispose of blood-contaminated sharps immediately at the point of use
_____ Contaminates equipment or site without appropriately correcting situation
_____ Performs improper technique resulting in potential for uncontrolled hemorrhage, catheter shear or air embolism
_____ 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
_____ Failure to receive a total score of 76 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

INTRAVENOUS BOLUS MEDICATION ADMINISTRATION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
IV medication	
Sharps container	
Alcohol swabs	
Administers medication	
Confirms medication order	
Asks patient for known allergies	
Explains procedure to patient	
Selects correct medication by identifying:	
Right patient	
Right medication	
Right dosage/concentration	
Right time	
Right route	
Assembles prefilled syringe correctly and dispels air	
Takes or verbalizes appropriate PPE precautions	
Identifies and cleanses most proximal injection site (Y-port or hub)	
Reconfirms medication	
Stops IV flow	
Administers correct dose at proper push rate	
Disposes/verbalizes proper disposal of syringe and other material in proper container	
Turns IV on and adjusts drip rate to TKO/KVO	
Verbalizes need to observe patient for desired effect and adverse side effects	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Contaminates equipment or site without appropriately correcting situation
_____ Failure to adequately dispel air resulting in the potential for air embolism
_____ Injects improper medication or dosage (wrong medication, incorrect amount, administers at an inappropriate rate)
_____ Recaps needle or failure to dispose/verbalize disposal of syringe and other material in proper container
_____ Failure to turn on IV after administering medication
_____ 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
_____ Failure to receive a total score of 36 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

INTRAVENOUS PIGGYBACK INFUSION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Clearly explains procedure to patient	
Assures that patent primary IV line is established	
Selects, checks, assembles equipment	
Medication	
IV solution	
Administration set	
Needle (if needleless set is not available)	
Sharps container	
Alcohol swabs	
Tape	
Medication label	
Adds medication to secondary IV solution and spikes bag	
Confirms medication order	
Asks patient for known allergies	
Explains procedure to patient	
Selects correct medication by identifying:	
Right patient	
Right medication	
Right dosage/concentration	
Right time	
Right route	
Clarity	
Expiration date	
Assembles prefilled syringe correctly and dispels air while maintaining sterility	
Checks IV solution for:	
Proper solution	
Clarity or particulate matter	
Expiration date	
Protective covers on tail ports	
Checks administration set for:	
Drip rating	
Tangled tubing	
Protective covers on both ends	
Flow clamp up almost to drip chamber and closed	

	Removes protective cover on secondary IV bag medication port and cleanses while maintaining sterility	
	Reconfirms medication	
	Injects medication into secondary IV bag while maintaining sterility	
	Disposes/verbalizes proper disposal of syringe in proper container	
	Gently agitates secondary bag to mix medication	
	Removes protective cover on drip chamber while maintaining sterility	
	Removes protective cover on secondary IV bag tail port while maintaining sterility	
	Inserts IV tubing spike into secondary IV bag tail port by twisting and pushing until inner seal is punctured while maintaining sterility	
	Turns secondary IV solution bag upright	
	Squeezes drip chamber and fills half-way	
	Turns on flow of secondary line and bleeds line of all air while maintaining sterility **with minimal loss of fluid**	
	Shuts flow off after assuring that all large air bubbles have been purged from secondary line	
Infuses medication		
	Attaches needle to adapter end of secondary line administration set while maintaining sterility (if needleless set is not available)	
	Takes or verbalizes appropriate PPE precautions	
	Reconfirms medication	
	Identifies and cleanses most proximal injection site of primary line (Y-port or hub if needleless set is not available)	
	Inserts needle into port of primary line while maintaining sterility	
	Turns on flow, calculates and adjusts flow rate of secondary line as necessary	
	Stops flow of primary line	
	Securely tapes needle to injection port of secondary line while maintaining sterility (if needleless set is not available)	
	Checks and adjusts flow rate of secondary line	
	Labels medication fluid bag (date, time, medication, concentration, dosage, initials)	
	Verbalizes need to observe patient for desired effect and adverse side effects	
Affective		
	Accepts evaluation and criticism professionally	
	Shows willingness to learn	
	Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to dispose of any blood-contaminated sharp immediately at the point of use
_____ Contaminates equipment or site without appropriately correcting situation
_____ Injects improper medication or dosage (wrong medication, incorrect amount, administers at an inappropriate rate)
_____ Performs any improper technique resulting in the potential for air embolism (failure to flush tubing of secondary line, etc.)
_____ 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
_____ Failure to receive a total score of 84 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

Emergency Medical Technician Psychomotor Examination INTRAOSSEOUS INFUSION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
Solution	
Administration set	
IO needle and insertion device	
Sharps container	
Antiseptic swabs, gauze pads, bulky dressing, syringe, etc.	
Spikes bag	
Checks solution for:	
Proper solution	
Clarity or particulate matter	
Expiration date	
Protective covers on tail ports	
Checks administration set for:	
Drip rating	
Tangled tubing	
Protective covers on both ends	
Flow clamp up almost to drip chamber and closed	
Removes protective cover on drip chamber while maintaining sterility	
Removes protective cover on solution bag tail port while maintaining sterility	
Inserts IV tubing spike into solution bag tail port by twisting and pushing until inner seal is punctured while maintaining sterility	
Turns solution bag upright	
Squeezes drip chamber and fills half-way	
Turns on by sliding flow clamp and bleeds line of all air while maintaining sterility	
Shuts flow off after assuring that all large air bubbles have been purged	
Performs intraosseous puncture	
Tears sufficient tape to secure IO	
Opens antiseptic swabs, gauze pads	
Takes appropriate PPE precautions	
Identifies appropriate anatomical site for IO puncture	
Cleanses site, starting from the center and moving outward in a circular motion	
Prepares IO needle and insertion device while maintaining sterility	
Inspects for burrs	
Stabilizes the site in a safe manner (if using the tibia, **does not** hold the leg in palm of hand and perform IO puncture directly above hand)	

Inserts needle at proper angle and direction (away from joint, epipheseal plate, etc.)	
Recognizes that needle has entered intermedullary canal (feels “pop” or notices less resistance)	
Removes stylette and immediately disposes in proper container	
Attaches administration set to IO needle	
Slowly injects solution while observing for signs of infiltration or aspirates to verify proper needle placement	
Adjusts flow rate as appropriate	
Secures needle and supports with bulky dressing	
Assesses patient for therapeutic response or signs of untoward reactions	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to dispose of blood-contaminated sharps immediately at the point of use
_____ Contaminates equipment or site without appropriately correcting situation
_____ Performs any improper technique resulting in the potential for air embolism
_____ Failure to assure correct needle placement
_____ Performs IO puncture in an unacceptable or unsafe manner (improper site, incorrect needle angle, holds leg in palm and performs IO puncture directly above hand, etc.)
_____ 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
_____ Failure to receive a total score of 62 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

INTRAMUSCULAR AND SUBCUTANEOUS MEDICATION ADMINISTRATION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Asks patient for known allergies	
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
Medication	
Appropriate syringe and needle(s)	
Sharps container	
Alcohol swabs	
Adhesive bandage or sterile gauze dressing and tape	
Administers medication	
Selects correct medication by identifying:	
Right patient	
Right medication	
Right dosage/concentration	
Right time	
Right route	
Clarity	
Expiration Date	
Assembles syringe and needle	
Draws appropriate amount of medication into syringe and dispels air while maintaining sterility	
Reconfirms medication	
Takes or verbalizes appropriate PPE precautions	
Identifies and cleanses appropriate injection site	
Pinches/stretches skin, warns patient and inserts needle at proper angle while maintaining sterility	
Aspirates syringe while observing for blood return before injecting IM medication	
Administers correct dose at proper push rate	
Removes needle and disposes/verbalizes proper disposal of syringe and needle in proper container	
Applies direct pressure to site	
Covers puncture site	
Verbalizes need to observe patient for desired effect and adverse side effects	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to identify acceptable injection site
_____ Contaminates equipment or site without appropriately correcting situation
_____ Failure to adequately dispel air resulting in the potential for air embolism
_____ Failure to aspirate for blood prior to injecting IM medication
_____ Injects improper medication or dosage (wrong medication, incorrect amount, administers at an inappropriate rate)
_____ Recaps needle or failure to dispose/verbalize disposal of syringe and needle in proper container
_____ Failure to observe the patient for desired effect and adverse side effects after administering medication
_____ 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
_____ Failure to receive a total score of 44 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

INTRANASAL MEDICATION ADMINISTRATION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Assures that patient is being ventilated adequately if necessary	
Asks patient for known allergies	
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
Medication Appropriate syringe, needle, mucosal atomizer device (MAD®)	
Sharps container	
Alcohol swabs	
Sterile gauze	
Administers medication	
Selects correct medication by identifying:	
Right patient	
Right medication	
Right dosage/concentration	
Right time	
Right route	
Clarity	
Expiration date	
Assembles syringe and needle while maintaining sterility	
Cleanses rubber stopper, draws appropriate amount of medication into syringe and dispels air while maintaining sterility	
Reaffirms medication	
Disposes of needle in proper container and attaches mucosal atomizer device	
Takes or verbalizes appropriate PPE precautions	
Stops ventilation of patient if necessary and removes any mask	
Inspects nostrils to determine largest and least deviated or obstructed nostril	
Inserts mucosal atomizer device into nostril and briskly depresses the syringe plunger	
Disposes/verbalizes proper disposal of syringe and mucosal atomizer device in proper container	
Resumes ventilation of the patient if necessary	
Verbalizes need to observe patient for desired effect and adverse side effects	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Contaminates equipment without appropriately correcting situation
_____ Injects improper medication or dosage (wrong medication, incorrect amount, administers at an inappropriate rate)
_____ Recaps needle or failure to dispose/verbalize disposal of needle, syringe and mucosal atomizer device in proper container
_____ Failure to observe the patient for desired effect and adverse side effects after administering medication 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
_____ Failure to receive a total score of 44 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

INHALED MEDICATION ADMINISTRATION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Assures that patient is being ventilated adequately	
Asks patient for known allergies	
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
Medication	
Nebulizer unit (medication cup, mouthpiece/mask, extension tube, etc.)	
Oxygen supply tubing	
Administers medication	
Selects correct medication by identifying:	
Right patient	
Right medication	
Right dosage/concentration	
Right time	
Right route	
Clarity	
Expiration date	
Places medication into nebulizer unit	
Reaffirms medication	
Attaches mouthpiece/mask and extension tube to the nebulizer unit	
Attaches oxygen supply tubing to nebulizer unit and turns on oxygen until tube/mask is filled with mist of medication	
Takes or verbalizes appropriate PPE precautions	
Removes oxygen mask and directs patient to firmly hold nebulizer unit	
Coaches patient how to breathe correctly to inhale all medication	
Resumes oxygen administration	
Verbalizes need to observe patient for desired effect and adverse side effects	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Administers improper medication or dosage (wrong medication, incorrect amount, administers at an inappropriate rate)
_____ Failure to coach patient to breathe correctly to inhale all medication
_____ Failure to observe the patient for desired effect and adverse side effects after administering medication
_____ 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
_____ Failure to receive a total score of 38 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

GLUCOMETER SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Identifies the need for obtaining a blood glucose level	
Identifies the normal parameters for blood glucose level	
Identifies contraindications	
Identifies potential complications:	
Erroneous reading	
BSI exposure	
Clearly explains procedure to patient	
Selects, checks, assembles equipment	
Glucometer	
Test strip	
Needle or spring-loaded puncture device	
Alcohol swabs	
Checks blood glucose level	
Takes or verbalizes appropriate PPE precautions	
Turns on glucometer and inserts test strip	
Preps fingertip with alcohol prep	
Lances the prepped site with needle/lancet device, drawing capillary blood	
Disposes/verbalizes disposal of needle/lancet in appropriate container	
Expresses blood sample and transfers it to the test strip	
Applies pressure and dresses fingertip wound	
Records reading from glucometer and documents appropriately	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to dispose of blood contaminated sharps immediately at the point of use
_____ Contaminates equipment or site without appropriately correcting situation
_____ Failure to identify 2 indications
_____ Failure to identify 2 potential complications
_____ Failure to identify normal blood glucose parameters
_____ Failure to obtain a viable capillary blood sample on first attempt
_____ Exhibits unacceptable affect with patient or other personnel
_____ Failure to receive a total score of 32 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

12-LEAD ECG SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Explains procedure to patient	
Prepares the patient (shaving and cleansing as needed)	
Places limb leads on the limbs	
Places precordial leads at their appropriate locations:	
V1 – attaches positive electrode to the right of the sternum at the 4th intercostal space	
V2 – attaches positive electrode to the left of the sternum at the 4th intercostal space	
V4 – attaches positive electrode at the midclavicular line at 5th intercostal space	
V3 – attaches positive electrode at the line midway between V2 & V4	
V5 – attaches positive electrode at the anterior axillary line at the same level as V4	
V6 – attaches positive electrode to the midaxillary line at the same levels V4	
Ensures the patient is sitting or lying still, breathing normally and not talking	
Turns on ECG machine	
Ensures all leads are still connected and no error message displayed	
Obtains 12-lead ECG recording	
Examines tracing for acceptable quality	
Interprets 12-lead ECG to local standard and reports findings as needed	
Voices repeating 12-lead ECG every 5 – 10 minutes in high risk patients and post- treatment	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to properly attach leads to patient
_____ Failure to obtain a legible 12-lead ECG recording
_____ Failure to correctly interpret 12-lead ECG recording Failure to receive a total score of 30 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

SYNCHRONIZED CARDIOVERSION SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

NOTE: A properly trained person must be present to supervise the practice of this skill.

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Monitor/defibrillator with defibrillation pads	
Medication to sedate patient (if necessary)	
Oxygen with appropriate administration device	
Performs synchronized cardioversion	
Assures adequate oxygenation and patent IV established	
Correctly identifies arrhythmia and condition that requires synchronized cardioversion	
Takes or verbalizes appropriate PPE precautions	
Assesses patient condition to include pulse and BP	
Asks patient or determines known allergies	
Considers appropriate medication to sedate patient	
Attaches defibrillation pads	
Assures safe environment – evaluates the risk of sparks, combustibles, oxygen- enriched atmosphere	
Sets cardioverter to appropriate energy setting	
Activates synchronizer mode	
Notes marker on ECG screen and adjusts amplitude until machine appropriately reads QRS complexes	
Verbalizes “All clear” and visually ensures that all individuals are clear of the patient	
Delivers shock	
Reassesses rhythm	
Reassesses patient condition to include pulse and BP	
Verbalizes need to observe patient for desired effect and adverse side effects	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions

_____ Failure to assess the patient's hemodynamic status before and after delivering the shock
_____ Failure to verify rhythm before delivering a shock
_____ Failure to ensure the safety of self and others (verbalizes "All clear" and observes)
_____ Failure to ensure a safe environment before delivering a shock (sparks, combustibles, oxygen-enriched atmosphere)
_____ Failure to resume oxygen therapy at the proper time
_____ Inability to deliver a synchronized shock (does not use machine properly)
_____ Failure to set the appropriate energy level before engaging the synchronized mode of operation
_____ Failure to demonstrate acceptable shock sequence
_____ Failure to observe the patient for desired effect and adverse side effects after delivering a shock
_____ 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
_____ Failure to receive a total score of 34 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

DEFIBRILLATION (UNWITNESSED ARREST) SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

NOTE: A properly trained person must be present to supervise the practice of this skill.

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Monitor/defibrillator with defibrillation pads	
Oxygen with appropriate administration device	
Performs defibrillation	
Takes or verbalizes appropriate PPE precautions	
Determines the scene/situation is safe	
Attempts to question bystanders about arrest events	
Checks responsiveness	
Requests additional assistance	
Assesses patient for signs of breathing [observes the patient and determines the absence of breathing or abnormal breathing (gasping or agonal respirations)]	
Checks carotid pulse (no more than 10 seconds)	
Immediately begins chest compressions	
Adequate depth and rate	
Correct compression-to-ventilation ratio	
Allows the chest to recoil completely	
Adequate volumes for each breath	
Minimal interruptions of less than 10 seconds throughout	
Attaches defibrillator	
Assures safe environment – evaluates the risk of sparks, combustibles, oxygen- enriched atmosphere	
Stops CPR and observes rhythm	
Verbalizes “All clear” and visually ensures that all individuals are clear of the patient	
Delivers shock	
Immediately resumes chest compressions	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to initiate CPR without delay
_____ Interrupts CPR for more than 10 seconds
_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to deliver shock in a timely manner
_____ Failure to demonstrate acceptable high quality adult CPR
_____ Failure to operate the defibrillator properly
_____ Failure to correctly attach the defibrillator to the patient
_____ Failure to verify rhythm before delivering a shock
_____ Failure to demonstrate acceptable shock sequence
_____ Failure to assure that all individuals were clear of patient during rhythm interpretation and before delivering shock (verbalizes “All clear” and observes)
_____ Failure to ensure a safe environment before delivering shock (sparks, combustibles, oxygen-enriched atmosphere)
_____ Failure to immediately resume chest compressions after shock delivered
_____ Failure to resume ventilation with oxygen at the proper time
_____ Failure to demonstrate the ability to manage the patient as a minimally competent EMT
_____ Exhibits unacceptable affect with patient or other personnel
_____ Uses or orders a dangerous or inappropriate intervention Failure to receive a total score of 36 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

 Successful Unsuccessful

TRANSCUTANEOUS PACING SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

NOTE: A properly trained person must be present to supervise the practice of this skill.

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Selects, checks, assembles equipment	
Monitor/defibrillator with pacing pads	
Medication to reduce pain or sedate patient (if necessary)	
Oxygen with appropriate administration device	
Assures adequate oxygenation and patent IV established	
Performs transcutaneous pacing	
Identifies arrhythmia and condition that requires transcutaneous pacing	
Takes or verbalizes appropriate PPE precautions	
Assesses patient condition to include pulse and BP	
Administers appropriate oxygen therapy	
Attaches pacing pads	
Assures safe environment – evaluates the risk of sparks, combustibles, oxygen- enriched atmosphere	
Activates pacemaker function of device	
Notes marker on ECG screen and adjusts amplitude until machine appropriately reads QRS complexes	
Sets appropriate pacer rate	
Sets current to be delivered to the minimum setting	
Gradually increase delivered current until capture is achieved (observes pacer spikes followed by wide QRS complexes at tall “T” waves)	
Reassesses patient condition to include pulse and BP	
Asks patient or determines known allergies (if considering medication administration)	
Administers appropriate medication to reduce pain or sedate patient (if necessary)	
Verbalizes need to continuously monitor the patient’s condition	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL _____

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to assess the patient's hemodynamic status before and after administering transcutaneous pacing
_____ Failure to document rhythm before administering transcutaneous pacing
_____ Failure to ensure the safety of self and others
_____ Failure to ensure a safe environment before pacing initiated (sparks, combustibles, oxygen-enriched atmosphere)
_____ Inability to deliver transcutaneous pacing (does not use machine properly)
_____ Failure to demonstrate acceptable electrical capture
_____ Failure to observe the patient for desired effect and adverse side effects
_____ 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 Failure to receive a total score of 34 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

Emergency Medical Technician Psychomotor Examination
NORMAL DELIVERY WITH NEWBORN CARE SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Takes appropriate PPE precautions	
Obtains a history relevant to the pregnancy	
Estimated date of confinement	
Frequency of contractions	
Duration of contractions	
Intensity of contractions	
Rupture of amniotic sac (time and presence of meconium)	
Previous pregnancies and deliveries (complications, vaginal delivery, C-section)	
Pre-existing medical conditions (HTN, DM, seizure, cardiac)	
Medications taken prior to labor	
Prenatal care (identified abnormalities with pregnancy)	
Vaginal bleeding	
Abdominal pain	
Assessment	
Vital signs (BP, P, R, Temperature)	
Evidence of imminent delivery (crowning, contractions, urge to push, urge to defecate)	
Prepares for delivery	
Prepares appropriate delivery area	
Removes patient's clothing	
Opens and prepares obstetric kit	
Places clean pad under patient	
Prepares bulb syringe, cord clamps, towels, newborn blanket	
Delivers newborn	
During contractions, urges patient to push	
Delivers and supports the emerging fetal head	
Checks for nuchal cord	
Manages nuchal cord if present	
Assesses for and notes the presence of meconium	
Delivers the shoulders	
Delivers the remainder of the body	
Places newborn on mother's abdomen or level with mother's uterus	
Notes the time of birth	
Controls hemorrhage as necessary	
Reassesses mother's vital signs	

Newborn care (Birth – 30 seconds postpartum):

If newborn is distressed, clears airway as necessary	
Warms and dries newborn	
Wraps newborn in blanket or towels to prevent hypothermia	
Newborn care (30 – 60 seconds postpartum):	
If heart rate is less than 100, gasping or apneic:	
Provides PPV	
Monitors SpO_2 in neonate	
Clamps and cuts umbilical cord	
Places on mother's chest to retain warmth	
Determines 1 minute APGAR score	
Newborn care (after 1 minute postpartum):	
If heart rate is less than 100:	
Takes ventilation corrective steps and continues PPV	
If heart rate is less than 60:	
Considers intubation	
Begins chest compressions	
If heart rate remains less than 60 after chest compressions and PPV:	
Administers epinephrine IO	
Determines 5 minute APGAR score	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to identify or manage a nuchal cord
_____ Failure to immediately suction the newborn nose and mouth
_____ Performs any dangerous activity during delivery (pulls on fetus, places fetus in a dangerous position, pulls on umbilical cord to deliver placenta, handles newborn inappropriately)
_____ Failure to provide appropriate newborn care
_____ 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 Failure to receive a total score of 70 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

☐ Successful ☐ Unsuccessful

ABNORMAL DELIVERY WITH NEWBORN CARE SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

Actual Time Started:	**SCORE**
Takes appropriate PPE precautions	
Obtains a history relevant to the pregnancy	
Estimated date of confinement	
Frequency of contractions	
Duration of contractions	
Intensity of contractions	
Rupture of amniotic sac (time and presence of meconium)	
Previous pregnancies and deliveries (complications, vaginal delivery, C-section)	
Pre-existing medical conditions (HTN, DM, seizure, cardiac)	
Medications taken prior to labor	
Prenatal care (identified abnormalities with pregnancy)	
Vaginal bleeding	
Abdominal pain	
Assessment	
Vital signs (BP, P, R, Temperature)	
Evidence of imminent delivery (crowning, contractions, urge to push, urge to defecate)	
Prepares for delivery	
Prepares appropriate delivery area	
Removes patient's clothing	
Opens and prepares obstetric kit	
Places clean pad under patient	
Prepares bulb syringe, cord clamps, towels, newborn blanket	
Delivers newborn	
During contractions, urges patient to push	
Delivers and supports the emerging fetal presenting part if not the head	
Recognizes abnormal presentation that requires immediate care and transport (prolapsed cord, hand, foot, shoulder dystocia)	
Delivers legs and body if possible and continues to support fetus	
Delivers head	
If fetal head is not promptly delivered, inserts gloved fingers/hand to establish a space for breathing/relieve pressure on umbilical cord	
Assesses for and notes the presence of meconium	
Initiates rapid transport	
Delivers the shoulders if not previously delivered	
Delivers the remainder of the body if not previously delivered	
Places newborn on mother's abdomen or level with mother's uterus	

Notes the time of birth	
Controls hemorrhage as necessary	
Reassesses mother's vital signs	
Newborn care (Birth – 30 seconds postpartum):	
Warm, dry, and stimulate the newborn	
Clears airway if obvious obstruction to spontaneous breathing or requires PPV	
Wraps newborn in blanket or towels to prevent hypothermia	
Newborn care (30 – 60 seconds postpartum):	
If heart rate is less than 100, gasping or apneic:	
Provides PPV without supplemental oxygen	
Monitors SpO_2 in neonate	
Clamps and cuts umbilical cord	
Places on mother's chest to retain warmth (if not actively resuscitating the neonate)	
Determines 1 minute APGAR score	
Newborn care (after 1 minute postpartum):	
If heart rate is less than 100:	
Takes ventilation corrective steps and continues PPV with supplemental oxygen	
If heart rate is less than 60:	
Considers intubation if no chest rise with PPV	
Begins chest compressions	
If heart rate remains less than 60 after chest compressions and PPV:	
Administers epinephrine IO	
Determines 5 minute APGAR score	
Affective	
Accepts evaluation and criticism professionally	
Shows willingness to learn	
Interacts with simulated patient and other personnel in professional manner	

Actual Time Ended:

TOTAL

Critical Criteria

_____ Failure to take or verbalize appropriate PPE precautions
_____ Failure to identify or appropriately manage an abnormal presentation
_____ Performs any dangerous activity during delivery (pulls on fetus, places fetus in a dangerous position, pulls on umbilical cord to deliver placenta, handles newborn inappropriately)
_____ Failure to provide appropriate newborn care (correct sequence and within recommended time limits)
_____ 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 Failure to receive a total score of 74 or greater

Comments:

STUDENT SELF-EVALUATION:

Were you successful or unsuccessful in this skill?

□ Successful □ Unsuccessful

PUSH DOSE EPINEPHRINE SKILLS LAB

Student Name: _____ Date: _____

Instructor Evaluator: _____ Student Evaluator: _____

NOTE: Push dose epinephrine is prepared from a cardiac epinephrine preload. Confirm the final concentration of 10 mcg/mL before administration, label clearly, and contact MEDICAL CONTROL as indicated.

Procedure	Possible Points	Points Awarded
Recognizes need for medication	1	
Lists SOP protocols for possible use of the medication	1	
Prepare Medication		
Take a 10 mL syringe	1	
Draw up 1 mL of EPINEPHRINE from the cardiac EPINEPHRINE preload syringe (1 mg/10 mL)	1	
Draw up 9 mL of NORMAL SALINE into the same syringe as the EPINEPHRINE for a total of 10 mL, then MIX	1	
Confirm you now have 10 mL of EPINEPHRINE at 10 mcg / 1 mL	1	
Label medication with drug information (hot pink label)	1	
Adult dose: PUSH DOSE EPINEPHRINE 50 mcg (5 mL) IVP, repeat in 5 minutes to a total of 100 mcg (10 mL), titrate to MAP 65. Contact MEDICAL CONTROL to consider additional doses	1	
Pediatric dose: PUSH DOSE EPINEPHRINE 1 mcg/kg IVP (adult maximum 50 mcg), may repeat in 5 minutes (adult maximum 100 mcg), titrate to SBP per age; refer to Pediatric Normal Vital Signs (see pg. 97). Contact MEDICAL CONTROL to consider additional doses	1	
Demonstrates how to titrate the medication	1	
TOTAL:	**10**	

Automatic Failure Criteria

1. Unable to recognize the need for the medication
2. Drawing up Normal Saline before drawing 1 mL of Epinephrine (1 mg/10 mL)
3. Did not label the medication syringe
4. Did not contact MEDICAL CONTROL before giving the medication