

Skills

PATIENT ASSESSMENT/MANAGEMENT – TRAUMA

		Points Possible	Points Awarded
Takes or verbalizes body substance isolation precaution		1	
SCENE SIZE-UP		1	
Determines the scene is safe		1	
Determines the mechanism of injury		1	
Determines the number of patients		1	
Requests additional help if necessary		1	
Considers stabilization of spine		1	
INITIAL ASSESSMENT		1	
Verbalizes general impression of patient		1	
Determines responsiveness		1	
Determines chief complaint apparent life threats		1	
Assesses airway and breathing	Assessment	1	
	Initiates appropriate oxygen therapy	1	
	Assures adequate ventilation	1	
	Injury management	1	
Assesses circulation	Assesses for and controls major bleeding	1	
	Assesses pulse	1	
	Assesses skin color, temperature & condition	1	
Identifies priority patients / makes transport decision		1	
FOCUSED HISTORY AND PHYSICAL EXAM/RAPID TRAUMA ASSESSMENT		1	
Selects appropriate assessment (focused or rapid assessment)		1	
Obtains or directs assistant to obtain baseline vital signs		1	
Obtains SAMPLE history		1	
DETAILED PHYSICAL EXAMINATION		1	
Assesses the head	Inspects and palpates the scalp and ears	1	
	Assesses the eyes	1	
	Assesses the facial area including oral and nasal area	1	
Assesses the neck	Inspects and palpates the neck	1	
	Assesses for JVD	1	
	Assesses for tracheal deviation	1	
Assesses the chest	Inspects	1	
	Palpates	1	
	Auscultates the chest	1	
Assesses the abdomen / pelvis	Assesses the abdomen	1	
	Assesses the pelvis	1	
	Verbalizes assessment of genitalia/perineum as needed	1	
Assesses the extremities	1 point for each extremity	1	
	Includes inspection, palpation, and assessment of pulses, sensory and motor activity	1	
		1	
Assesses the posterior	Assesses thorax	1	
	Assesses lumbar	1	
Manages secondary injuries and wounds appropriately		1	
1 point for appropriate management of secondary injury/wound		1	
Verbalizes reassessment of the vital signs		1	
TOTAL		40	

CRITICAL CRITERIA

- Did not take or verbalized body substance isolation precautions
- Did not assess for spinal protection
- Did not provide for spinal protection when indicated
- Did not provide high concentration of oxygen
- Did not find or manage problems associated with airway, breathing, hemorrhage, or shock (hypoperfusion)
- Did not differentiate patients needing transportation versus continued on scene assessment
- Did not other detailed physical examination before assessing airway, breathing, and circulation
- Did not transport patient within ten (10) minute time limit

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL

								Points Possible	Points Awarded
Takes or verbalizes body substance isolation precaution								1	
SCENE SIZE-UP								1	
Determines the scene is safe								1	
Determines the mechanism of injury, nature of illness								1	
Determines the number of patients								1	
Requests additional help if necessary								1	
Considers stabilization of spine								1	
INITIAL ASSESSMENT								1	
Verbalizes general impression of patient								1	
Determines responsiveness level of consciousness								1	
Determines chief complaint apparent life threats								1	
Assesses airway and breathing				Assessment				1	
				Initiates appropriate oxygen therapy				1	
				Assures adequate ventilation				1	
Assesses circulation				Assesses controls major bleeding				1	
				Assesses pulse				1	
				Assesses skin color, temperature & condition				1	
Identifies priority patients makes transport decision								1	
FOCUSED HISTORY AND PHYSICAL EXAM/RAPID TRAUMA ASSESSMENT								1	
Signs and symptoms / Assesses history of present illness)								1	
Respiratory	Cardiac	Altered Mental Status	Allergic Reaction	Poisoning/ Overdose	Environmental Emergency	Obstetrics	Behavioral		
Onset? Provokes? Quality? Radiates? Severity? Time? Interventions?	Onset? Provokes? Quality? Radiates? Severity? Time? Interventions?	Description of the episode Onset? Duration? Associated symptoms? Evidence of trauma? Interventions? Seizures? Fever?	History of allergies? What were you exposed to? How were you exposed? Effects? Progression? Interventions?	Substance? When did you ingest/become exposed? How much did you ingest? Over what time period? Interventions? Estimated weight? Effects?	Source? Environment? Duration? Loss of consciousness? Effects – General or local?	Are you pregnant? How long have you been pregnant? Pain or contractions? Bleeding or discharge? Do you feel the need to push? Last menstrual period Crowning?	How do you feel? Determine suicidal tendencies Is the patient a Threat to self or others? Is there a medical problem? Interventions?		
Allergies								1	
Medications								1	
Past pertinent history								1	
Last oral intake								1	
Events leading to present illness (rule out trauma)								1	
Performs focused physical examination Assesses affected body part system or, if indicated, completes rapid assessment								1	
Vitals (Obtains baseline vital signs)								1	
Interventions Obtains medical direction or verbalizes standing order for medication interventions and Verbalizes proper additional intervention treatment								1	
Transport (Re-evaluates transport decision)								1	
Verbalizes the consideration for completing a detailed physical examination								1	
Ongoing Assessment (verbalized)									
Repeats initial assessment								1	
Repeats vital signs								1	
Repeats focused assessment regarding patient complaint or injuries								1	
Checks interventions								1	
CRITICAL CRITERIA								TOTAL	34

- Did not take or verbalized body substance isolation precautions if necessary
- Did not determine scene safety
- Did not obtain medical direction or verbalize standing orders for medication interventions
- Did not provide high concentration of oxygen
- Did not evaluate and find conditions of airway, breathing, circulation
- Did not find or manage problems associated with airway, breathing, hemorrhage, or shock (hypoperfusion)
- Did not differentiate patients needing transportation versus continued assessment at the scene
- Did not do detailed or focused history physical examination before assessing airway, breathing, and circulation
- Did not ask questions about the present illness
- Administered a dangerous or inappropriate intervention

**BAG-VALVE-MASK
APNEIC PATIENT**

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Voices opening the airway	1	
Voices inserting an airway adjunct	1	
Selects appropriate size mask	1	
Creates a proper mask-to-face seal	1	
Ventilates patient at no less than 800 ml volume <i>(The examiner must witness for at least 20 seconds)</i>	1	
Connects reservoir and oxygen	1	
Adjusts liter flow to 15 liters/minute or greater	1	
<i>The examiner indicates the arrival of second EMT. The second EMT is instructed to ventilate the patient while the candidate controls the mask and the airway.</i>		
Voices re-opening the airway	1	
Creates a proper mask-to-face seal	1	
Instructs assistant to resume ventilation at proper volume per breath <i>(The examiner must witness for at least 30 seconds)</i>	1	
	11	

CRITICAL CRITERIA

- ___ Did not take or verbalize body substance isolation precautions
- ___ Did not immediately ventilate the patient
- ___ Interrupted ventilations for more than 20 seconds
- ___ Did not provide high concentration of oxygen
- ___ Did not provide or direct assistant to provide proper volume breath
(more than 2 ventilations per minute are below 800 ml)
- ___ Did not allow adequate exhalation

**AIRWAY, OXYGEN, AND VENTILATION SKILLS
UPPER AIRWAY ADJUNCTS AND SUCTION
OROPHARYNGEAL AIRWAY**

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Select appropriate size airway	1	
Measures airway	1	
Inserts airway without pushing the tongue posteriorly	1	
<i>NOTE: The examiner must advise the candidate that the patient is gagging and becoming conscious.</i>		
Removes oropharyngeal airway	1	

SUCTION

<i>Note: The examiner must advise the candidate to suction the patient's oropharynx/nasopharynx</i>		
Turns on / prepares suction device	1	
Assures presence of mechanical suction	1	
Inserts suction tip without suction	1	
Applies suction to the oropharynx / nasopharynx	1	

NASOPHARYNGEAL AIRWAY

<i>NOTE: The examiner must advise the candidate to insert a nasopharyngeal airway.</i>		
Selects appropriate airway	1	
Measures airway	1	
Verbalizes lubrication of the nasal airway	1	
Fully inserts the airway with the bevel facing toward the septum	1	
	13	

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation precautions
- Did not obtain a patent airway with the oropharyngeal airway
- Did not obtain a patent airway with the nasopharyngeal airway
- Did not demonstrate an acceptable suction technique
- Inserted any adjunct in a manner dangerous to the patient

CARDIAC ARREST MANAGEMENT / AED

	Points Possible	Points Awarded
ASSESSMENT		
Takes or verbalizes body substance isolation precautions	1	
Briefly questions rescuer about arrest events	1	
Directs rescuer to stop CPR	1	
Verifies absence of spontaneous pulse <i>(skill station examiner states "no pulse")</i>	1	
Turns defibrillator power	1	
Attaches automated defibrillator to patient	1	
Ensures all individuals are standing clear of the patient	1	
Initiates analysis of rhythm	1	
Delivers shock (up to three successive shocks)	1	
Verifies absence of spontaneous pulse <i>(skill station examiner states "no pulse")</i>	1	
TRANSITION		
Directs resumption of CPR	1	
Gathers additional information on arrest event	1	
Confirms effectiveness of CPR (ventilation and compressions)	1	
INTEGRATION		
Directs insertion of a simple airway adjunct (oropharyngeal/nasopharyngeal)	1	
Directs ventilation of patient	1	
Assures high concentration of oxygen connected to the ventilatory adjunct	1	
Assures CPR continues without unnecessary prolonged interruption	1	
Re-evaluates patient / CPR in approximately one minute	1	
Repeats defibrillator sequence	1	
TRANSPORTATION		
Verbalizes transportation of patient	1	
TOTAL	20	

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation precautions
- Did not evaluate the need for immediate use of the AED
- Did not direct initiation / resumption of ventilation / compressions at appropriate times
- Did not assure all individuals were clear of patient before delivering each shock
- Did not operate the AED properly (inability to deliver shock)

BLEEDING CONTROL / SHOCK MANAGEMENT

	Points Possible	Points Awarded
Takes or verbalizes body substance precautions	1	
Applies direct pressure to the wound	1	
Elevates the extremity	1	
<i>NOTE: The examiner must now inform the candidate that the wound continues to bleed</i>		
Applies an additional dressing to the wound	1	
<i>NOTE: The examiner must now inform the candidate that the wound still continues to bleed. The second dressing does not control the bleeding.</i>		
Locates and applies pressure to appropriate arterial pressure point.	1	
<i>NOTE: The examiner must now inform the candidate that the bleeding is controlled</i>		
Bandages the wound	1	
<i>NOTE: The examiner must not inform the candidate that the patient is showing signs and symptoms indicative of hypoperfusion</i>		
Properly positions the patient	1	
Applies high-concentration oxygen	1	
Initiates steps to prevent heat loss from the patient	1	
Indicates need for immediate transportation	1	
TOTAL	10	

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation precautions
- Did not apply high concentration of oxygen
- Applied tourniquet before attempting other methods of bleeding control
- Did not control hemorrhage in a timely manner
- Did not indicate a need for immediate transportation

EMERGENCY CHILDBIRTH

Examination Steps and Procedure	PC	PO
1. Introduce self, reassure patient and request consent to treat.	_____	_____
2. Ask "Are you under a doctor's care?"	_____	_____
3. Ask "when is your baby due?"	_____	_____*
4. Ask "Does your doctor expect any problems with the delivery?"	_____	_____*
5. Ask "Is this your first baby?"	_____	_____*
6. Ask "How far apart are your contractions?"	_____	_____*
7. Examine reassure patient – crowning, abnormal bleeding.	_____	_____*
8. Report to evaluator presence or absence of prolapsed cord/abnormal presentations.	_____	_____
9. Open OB kit (if available).	_____	_____
10. Wash hands and put on sterile gloves.	_____	_____
11. Attempt to cleanse area and drape.	_____	_____
12. Use sterile technique as much as possible.	_____	_____
13. With one hand, gently apply pressure to baby's head to prevent explosive delivery.	_____	_____*
14. As head emerges, using other hand, apply gentle downward pressure to the perineum directly below vaginal opening to prevent tearing.	_____	_____*
15. Report to scorer presence or absence of cord around baby's neck when the head becomes visible.	_____	_____*
16. If cord is present, loosen from around baby's neck.	_____	_____*
17. Slip cord over baby's head.	_____	_____*
18. As soon as head is available, clear airway by suctioning baby's mouth and nose with bulb syringe. Air is expelled from syringe before syringe enters mouth and nose.	_____	_____*

	PC	PO
19. Gently apply downward pressure on head to release upper shoulder.	_____	_____
20. Gently apply upward pressure on head to release lower shoulder	_____	_____
21. Hold baby securely with firm but gentle grip	_____	_____
22. Again, suction airway with bulb syringe. Air must first be expelled from syringe before suctioning mouth and nose.	_____	_____*
EVALUATOR STATES, "BABY IS OUT, NOT BREATHING BUT HAS A PULSE."		
23. Stimulate baby by vigorously drying or rubbing back or flicking bottom of baby's foot.	_____	_____*
24. Wrap baby in clean blanket for warmth.	_____	_____*
25. Double clamp cord. First clamp should be six to eight inches from baby. Second clamp should be two to four inches from first clamp toward mother.	_____	_____*
26. Cut cord between the two clamps as desired. (use sterile scissors or blade.)	_____	_____
27. If cord is cut, dress both ends with sterile dressing.	_____	_____
28. Give baby to mother.	_____	_____
29. Externally massage uterus.	_____	_____
30. Place placenta in plastic bag in preparation for transport.	_____	_____
31. Station successfully completed within 10 minutes.	_____	_____*

IMMOBILIZATION SKILLS

TRACTION SPLINTING

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs application of manual stabilization of the injured leg	1	
Directs the application of manual traction	1	
Assesses motor, sensory, and distal circulation	1	
NOTE: The examiner acknowledges presents and normal.		
Prepares / adjusts splint to the proper length	1	
Positions the splint on the injured leg	1	
Applies the proximal securing device (e.g., ischial strap)	1	
Applies the distal securing device (e.g., ankle hitch)	1	
Applies mechanical traction	1	
Positions / secures the support straps	1	
Re-evaluates the proximal / distal securing devices	1	
Reassesses motor, sensory, and distal circulation	1	
NOTE: The examiner acknowledges present and normal.		
NOTE: The examiner must ask candidate how he / she would prepare the patient for transportation.		
Verbalizes securing the torso to the long board to immobilize the hip	1	
Verbalizes securing the splint to the long board to prevent movement of the splint	1	
TOTAL:	14	

CRITICAL CRITERIA

- Loss of traction at any point after it is assumed
- Did not reassess motor, sensory, and distal circulation before and after splinting
- The foot is excessively rotated or extended after splinting
- Did not secure the ischial strap before taking traction
- Final immobilization failed to support the femur or prevent rotation of the injured leg
- Secured leg to splint before applying mechanical traction

NOTE: If the Sager splint or Kendrick Traction Device is used without elevating the patient's leg, application of manual traction is not necessary. The candidate should be awarded 1 point as if manual traction were applied.

NOTE: If the leg is elevated at all, manual traction must be applied before elevating the leg. The ankle hitch may be applied before elevating the leg and used to provide manual traction.

JOINT INJURY

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs application of manual stabilization of the injury	1	
Assesses motor, sensory, and distal circulation	1	
NOTE: The examiner acknowledges present and normal.		
Selects proper splinting material	1	
Immobilizes the site of the injury	1	
Immobilizes bone above injured joint	1	
Immobilizes bone below injured joint	1	
Reassesses motor, sensory, and distal circulation	1	
NOTE: The examiner acknowledges present and normal		
TOTAL:	8	

CRITICAL CRITERIA

- Did not support the joint so that the joint did not bear distal weight
- Did not immobilize bone above and below injured joint
- Did not reassess motor, sensory, and distal circulation before and after splinting

IMMOBILIZATION SKILLS LONG BONE

	Points Possible	Points
Takes or verbalizes body substance isolation precautions	1	
Directs application of manual stabilization	1	
Assesses motor, sensory, and distal circulation	1	
NOTE: The examiner acknowledges present and normal.		
Measures splint	1	
Applies splint	1	
Immobilizes the joint above the injury site	1	
Immobilizes the joint below the injury site	1	
Secures the entire injured extremity	1	
Immobilizes hand/foot in the position of function	1	
Reassesses motor, sensory, and distal circulation	1	
NOTE: The examiner acknowledge present and normal		
TOTAL:	10	

CRITICAL CRITERIA

- Grossly moves injured extremity
- Did not immobilize adjacent joints
- Did not assess motor, sensory, and distal circulation before and after splinting

SPINAL IMMOBILIZATION SEATED PATIENT

	Point Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs assistant to place / maintain head in neutral in-line position	1	
Directs assistant to maintain manual immobilization of the head	1	
Reassesses motor, sensory, and distal circulation in extremities	1	
Applies appropriate size extrication collar	1	
Positions the immobilization device behind the patient	1	
Secures the device to the patient's torso	1	
Evaluates torso fixation and adjusts as necessary	1	
Evaluates and pads behind the patient's head as necessary	1	
Secures the patient's head to the device	1	
Verbalizes moving the patient to a long board	1	
Reassesses motor, sensory, and distal circulation in extremities	1	
TOTAL:	12	

CRITICAL CRITERIA

- Did not immediately direct or take manual immobilization of the head
- Released or ordered release of manual immobilization before it was maintained mechanically
- Patient manipulated or moved excessively, causing potential spinal compromise
- Device moves excessively up, down, left, or right on 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 the neutral position
- Did not reassess motor, sensory, and distal circulation after voicing immobilization to the long board
- Immobilized head to the board before securing to torso

**SPINAL IMMOBILIZATION
SUPINE PATIENT**

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs assistant to place maintain head in neutral in-line position	1	
Directs assistant to maintain manual immobilization of the head	1	
Assesses motor, sensory, and distal circulation in extremities	1	
Applies appropriate size extrication collar	1	
Positions the immobilization device appropriately	1	
Directs movement of the patient onto device without compromising the integrity of the spine	1	
Applies padding to voids between the torso and the board as necessary	1	
Immobilizes the patient's torso to the device	1	
Evaluates the pads behind the patient's head as necessary	1	
Immobilizes the patient's head to the device	1	
Secures the patient's legs to the device	1	
Secures the patient's arms to the device	1	
Reassesses motor, sensory, and distal circulation in extremities	1	
TOTAL:	14	

CRITICAL CRITERIA

- Did not immediately direct or take manual immobilization of the head
- Released or ordered release of manual immobilization before it was maintained mechanically
- Patient manipulated or moved excessively, causing potential spinal compromise
- 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 the neutral in-line position
- Did not reassess motor, sensory, and distal circulation after immobilization to the device
- Immobilized head to the board before