



Emergency Medical Technician Student Skill Sheets

General Information

Description

These skill sheets have been designed to assist EMT students in studying and developing proficiency in the practical skills required by the West Virginia Office of EMS for practicing EMT's.

Expectations and Goals

EMT students should practice skills in a variety of settings. Skill session and scenarios should increase in difficulty and realism as competence increases. Skill sheets that deal with particular steps of a process (i.e. administration of a specific medication) should be practiced as a complete patient care scenario.

The lead instructor is expected to assess each EMT student on their proficiency of the skills during the EMT initial course and provide feedback on how to improve those skills.

Practical skills testing for certification on the required skills will occur at the conclusion of the course.

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PRACTICAL SKILL SHEETS FOR CERTIFICATION TESTING



Cardiac Arrest Management/Automatic External Defibrillator

Candidate:	Date:
Evaluator:	Start Time:
	End Time:

Actions	Points Possible	Points Awarded
Assessment		
Takes or verbalizes body substance isolation precautions	1	
Briefly questions the bystanders about arrest events	1	
Performs two (2) minutes of high quality CPR	2	
Turns CPR over to another rescuer	1	
Turns on AED power	1	
Attaches AED to the patient	1	
Initiates analysis of the rhythm	1	
Directs rescuer to stop CPR and ensures all individuals are clear of the patient	1	
Delivers shock	1	
Directs resumption of CPR	1	
Integration		
Verbalizes or directs insertion of a simple airway adjunct (oral/nasal)	1	
Ventilates or directs ventilation of the patient	1	
Assures high concentration of oxygen is delivered to the patient	1	
Assures adequate CPR continues without unnecessary/prolonged interruption	1	
Directs rescuer to continues CPR for two (2) minutes	1	
Initiates analysis of the rhythm	1	
Directs rescuer to stop CPR and ensures all individuals are clear of the patient	1	
Delivers shock	1	
Directs resumption of CPR	1	
Transportation		
Verbalizes transportation of the patient	1	
Total	21	

<input checked="" type="checkbox"/>	Critical Criteria
	Did not take or verbalize body substance isolation precautions
	Did not complete two (2) minutes of CPR prior to using the AED
	Did not immediately initiate/resume CPR at appropriate times
	Did not assure all individuals were clear of patient before delivering a shock
	Did not operate the AED properly or safely (inability to deliver shock)
	Prevented the defibrillator from delivering any shock
	Interrupted CPR unnecessarily



Airway Management

Candidate:		Date:	
Evaluator:		Start Time:	End Time:
Actions		Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions		1	
Opens the airway manually		1	
Connects one-way valve to mask		1	
Establishes and maintains a proper mask to face seal		1	
Ventilates the patient at the proper volume and rate		1	
Connects the mask to high concentration or oxygen		1	
Switch to bag/valve mask			
Ventilate patient at a rate of 10-20 per minute with appropriate volumes via bag/valve mask		1	
Directs assistant to assume ventilation and pre-oxygenate patient		1	
Student may use either Combitube® or King® Airway			
Combitube		King Airway	
Checks/prepares Combitube	Checks/prepares King Airway	1	
Lubricates distal tip of the device	Lubricates distal tip and posterior aspect of the tube	1	
Positions head properly	Positions head properly	1	
Performs a tongue-jaw lift	Performs chin-lift unless contraindicated	1	
Inserts device in mid-line to depth so printed ring is at level of teeth	Rotate 45 to 90 degrees so blue line is touching the corner of mouth	1	
Inflates pharyngeal cuff with proper volume and removes syringe	As tube passes tongue rotate tube back to midline	1	
Inflates distal cuff with proper volume and removes syringe	Advance airway until base of connector aligns with teeth and gums	1	
Attaches BVM to the first (esophageal lumen) and ventilates	Inflate cuff using appropriate air volume	1	
Examiner states, "You do not see rise and fall of the chest and you only hear sounds over the epigastrium."			
Attaches BVM to the second (endotracheal placement) lumen and ventilates		1	
Confirms placement and ventilation through correct lumen by observing chest rise, auscultation over the epigastrium, and bilaterally over each lung		1	
Note: The examiner confirms adequate chest rise, absent sounds over the epigastrium, and equal bilateral breath sounds.			
Attaches CO ² detector, confirms appropriate reading or color change		1	
Confirms that device remains properly secured		1	
Total		18/20	



X	Critical Criteria
	Failure to initiate ventilations within 30 seconds after taking BSI precautions or interrupts ventilations for greater than 30 seconds at any time.
	Failure to take or verbalize BSI precautions.
	Failure to voice and ultimately provide high oxygen concentrations.
	Failure to ventilate patient at a rate of at least 10/minute.
	Failure to provide adequate volume per breath (maximum 2 errors/minute permissible).
	Failure to preoxygenate patient prior to insertion of the device.
	Failure to insert the device to the proper depth or at proper place within 3 attempts.
	Failure to inflate cuff(s) properly.
	Failure to remove the syringe immediately after inflation of cuff(s).
	Failure to confirm that the proper lumen of the device is being ventilated by observing chest rise, auscultation over the epigastrium, and bilaterally over each lung.
	Inserts adjunct in a manner dangerous to the patient.



Patient Assessment/Management - Medical

Candidate:		Date:		
Evaluator:		Start Time:	End Time:	
Actions			Points Possible	Points Awarded
Takes or verbalizes, body substance isolation precautions			1	
Scene Size-Up				
Determines the scene is safe			1	
Determines the mechanism of injury/nature of illness			1	
Determines the number of patients			1	
Requests additional EMS assistance if necessary			1	
Considers stabilization of spine			1	
Primary Survey/Resuscitation				
Verbalizes general impression of the patient			1	
Determines responsiveness/level of consciousness (AVPU)			1	
Determines chief complaint/apparent life threats			1	
Assesses airway and breathing				
-Assessment (1 point) -Assures adequate ventilation (1 point)				
-Initiates appropriate oxygen therapy (1 point)			3	
Assesses circulation				
- Assesses/controls major bleeding (1 point) -Checks pulse (1 point)				
-Assesses skin [either skin color, temperature or condition] (1 point)			3	
Identifies priority patients/makes transport decisions			1	
History Taking				
History of present illness				
-Onset (1 point) -Quality (1 point) -Severity (1 point)				
-Provocation (1 point) -Radiation (1 point) -Time (1 point)				
-Clarifying questions of associated signs and symptoms related to OPQRST (2 points)			8	
Respiratory	Cardiac	Altered Mental Status	Allergic Reaction	
*Onset *Provokes *Quality *Radiates *Severity *Time *Interventions Refer to Nebulizer	*Onset *Provokes *Quality *Radiates *Severity *Time *Interventions Refer to Nitroglycerin	*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 *Interventions Refer to Epinephrine (May use either Epi-pen or Epi 1:1000 injection)	
Past medical history				
-Allergies (1 point) -Past pertinent history (1 point) -Events leading to present illness (1 point)				
Medications (1 point) -Last oral intake (1 point)			5	
Secondary Assessment				
Assesses affected body part/system				
-Cardiovascular	-Neurological	-Integumentary	-Reproductive	
-Pulmonary	-Musculoskeletal	-GI/GU	-Psychological/Social	5
Vital Signs				
-Blood pressure (1 point) -Pulse (1 point) -Respiratory rate and quality (1 point each)			4	
States field impression of patient			1	
Interventions [verbalizes proper interventions/treatment]			1	
Reassessment				
Demonstrates how and when to reassess the patient to determine changes in condition			1	
Provides accurate verbal report to arriving EMS unit			1	
Total			42	
<input checked="" type="checkbox"/>	Critical Criteria			
	Failure to initiate or call for transport of the patient within 15 minute time limit			
	Failure to take, or verbalize, body substance isolation precautions			
	Failure to determine scene safety before approaching patient			
	Failure to voice and ultimately provide appropriate oxygen therapy			
	Failure to assess/provide adequate ventilation			
	Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock			
	Failure to differentiate patient's need for immediate transportation versus continued assessment or treatment at the scene			
	Performs secondary examination before assessing and treating threats to airway, breathing and circulation			
	Orders a dangerous or inappropriate intervention			
	Failure to provide accurate report to arriving EMS unit			



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Office of Emergency Medical Services



	Failure to manage the patient as a competent EMT
	Exhibits unacceptable affect with patient or other personnel
	Uses or orders a dangerous or inappropriate intervention

Patient Assessment – Medical Skill Sheet
Updated: 11/21/13



Oral Glucose Administration

Candidate:		Date:	
Evaluator:		Start Time:	End Time:
Actions		Points Possible	Points Awarded
Take BSI precautions		1	
Perform blood glucose check			
Prepare glucometer and supplies		1	
Cleanse site		1	
Lance site		1	
Apply blood to test strip		1	
Apply direct pressure to site		1	
Read results		1	
Determine appropriate indications for glucose administration			
Level of consciousness		1	
History		1	
Contact medical command if patient condition permits		1	
Confirm the expiration date on the oral glucose		1	
Check the 5 rights of drug administration			
Right patient		1	
Right drug		1	
Right dose		1	
Right route		1	
Right time		1	
Position the patient appropriately		1	
Explain the procedure to the patient		1	
Place glucose between cheek and gum		1	
Recheck the patient's blood glucose within 5 minutes of administration		1	
If no improvement with treatment, contact medical command, request ALS backup, transport and meet enroute		1	
Document the procedure		1	
Total		22	
<input checked="" type="checkbox"/>	Critical Criteria		
	Failure to take, or verbalize, BSI precautions		
	Failure to consult with Medical Command at the appropriate time		
	Missed more than 3 of the 5 rights of medication administration		
	Failure to determine patient' blood glucose prior to, or after, administration of glucose gel		



Nitroglycerin Administration

Candidate:		Date:	
Evaluator:		Start Time:	End Time:
Actions		Points Possible	Points Awarded
Take BSI precautions		1	
Consult with Medical Command		1	
Confirm the expiration date on the NTG		1	
Confirm patient has no allergies to the medication		1	
Confirm that patient's systolic BP is above required limit (100 systolic)		1	
Determine when or if the patient previously took NTG		1	
Check the 5 rights of drug administration			
Right patient		1	
Right drug		1	
Right dose		1	
Right route		1	
Right time		1	
Place the patient in a comfortable position		1	
Explain possible side effects of NTG administration		1	
Instruct patient to place tablet under tongue and allow to dissolve		1	
Recheck the patient's blood pressure within 3 minutes of administration		1	
If patient is still in pain, administer additional NTG per protocol and Medical Command direction		1	
Document the procedure		1	
Total		17	
Critical Criteria			
<input checked="" type="checkbox"/>	Failure to take, or verbalize, BSI precautions		
<input type="checkbox"/>	Failure to consult with Medical Command		
<input type="checkbox"/>	Missed more than 3 of the 5 rights of medication administration		
<input type="checkbox"/>	Failure to determine patient's blood pressure prior to, or after, administration of NTG		



Nebulized Medication Administration

Candidate:	Date:		
Evaluator:	Start Time:	End Time:	
Actions	Points Possible	Points Awarded	
Take BSI precautions	1		
Assess the patient's ability to use the nebulizer	1		
Consult with Medical Command	1		
Explain the procedure to the patient	1		
Confirm patient has no allergies to the medication	1		
Check the 5 rights of drug administration			
Right patient	1		
Right drug	1		
Right dose	1		
Right route	1		
Right time	1		
Prepare medication and nebulizer			
Unscrew lid of nebulizer chamber	1		
Add medication as directed	1		
Reattach lid	1		
Fasten the T-tube to the nebulizer chamber	1		
Connect the mouth piece to the T-tube and flex tube to the other end	1		
Attach oxygen to the nebulizer			
Confirm 8 -10 liters per minute oxygen flow	1		
Confirm mist coming out of flex tube and mouth piece	1		
Confirm patient is sitting upright (as much as possible)	1		
Administer medication to the patient			
Instruct patient to hold nebulizer in their hand	1		
Place firmly in mouth, with lips sealed around mouthpiece	1		
Instruct patient to breathe deeply and slowly	1		
Confirm all medication tapped down from sides of the chamber	1		
Continue treatment until all medication is gone	1		
Monitor patient's condition and vital signs after administration	1		
Document the procedure	1		
Total	25		
<input checked="" type="checkbox"/>	Critical Criteria		
	Failure to take, or verbalize, BSI precautions		
	Failure to consult with Medical Command		
	Missed more than 2 of the 5 Rights of medication administration		
	Failure to deliver all medication		
	Failure to monitor patient's condition and vital signs		



Epinephrine Auto-Injector Administration

Candidate:		Date:	
Evaluator:		Start Time:	End Time:
Actions		Points Possible	Points Awarded
Take BSI precautions		1	
Consult with Medical Command		1	
Explains the procedure to the patient		1	
Confirm patient has no allergies to the medication		1	
Check the 5 rights of drug administration			
Right patient		1	
Right drug		1	
Right dose		1	
Right route		1	
Right time		1	
Remove the cap from the auto-injector		1	
Expose the thigh area (verbalize)		1	
Place auto-injector on lateral thigh, midway between knee and thigh		1	
Explain to patient that they will feel a stick from the needle		1	
In a smooth, firm, fashion push the injector until the click is heard		1	
Hold the auto-injector against the thigh for 10 seconds		1	
Dispose of auto-injector in sharps container		1	
Monitor patient's condition and vital signs after administration		1	
Document the procedure		1	
Total		18	

<input checked="" type="checkbox"/>	Critical Criteria
<input type="checkbox"/>	Failure to take, or verbalize, BSI precautions
<input type="checkbox"/>	Failure to consult with Medical Command
<input type="checkbox"/>	Missed more than 2 of the 5 rights of medication administration
<input type="checkbox"/>	Failure to monitor patient's condition and vital signs



Epinephrine 1:1000 – Administration from an Ampule

Candidate:		Date:	
Evaluator:		Start Time:	End Time:
Actions		Points Possible	Points Awarded
Takes or verbalizes, body substance isolation precautions	1		
Appropriately determines the need for Epinephrine (Anaphylaxis Respiratory Distress – Bronchospasm)	1		
Contacts Medical Command for authorization	1		
Selects correct medication (concentration)	1		
Checks medication for expiration date	1		
Checks medication for cloudiness or discoloration	1		
Selects proper needle and syringe	1		
Opens ampule correctly	1		
Lightly taps the upright ampule to force any trapped medication from the ampule neck and top	1		
Cleans neck of ampule with alcohol sponge (prep pad)	1		
Wraps neck of ampule with same sponge (prep pad)	1		
Grasps ampule with both hands and snaps the neck by bending it away from the break line (the narrowest portion of the ampule neck is the weakest point and breaks easily); directs breaking ampule away from self and others	1		
Holds ampule to light – inspect for minute glass particles. If glass is present, discards and replaces	1		
Picks up assembled needle and syringe in dominant hand and removes protective cover with free hand	1		
Holds ampule vertically with non-dominant hand or place the ampule upright on a flat surface. Inserts the needle and withdraw the medication	1		
Withdraws the prescribed medication, being careful not to touch the outside edge or bottom of the ampule with the needle	1		
Withdraws the needle and verifies the correct dosage	1		
Holds the syringe with the needle pointing up and pulls back on the plunger slightly to clear all the medication from the needle shaft	1		
Taps the barrel lightly to force bubbles to the top of the barrel	1		
Pushes the plunger forward until the solution is in the needle hub, clearing it of bubbles	1		
Rechecks the ampule label to verify that the correct medication and dosage is drawn	1		
Selects and cleans the appropriate site on the patient	1		
Inserts the needle at a 90 degree angle (intramuscular)	1		
Aspirates for the absence of blood return	1		
Injects medication	1		
Total	25		
<input checked="" type="checkbox"/>	Critical Criteria		
<input type="checkbox"/>	Failure to take or verbalize appropriate body substance isolation precautions		
<input type="checkbox"/>	Failure to appropriately determine the need for Epinephrine		
<input type="checkbox"/>	Failure to select correct medication concentration		
<input type="checkbox"/>	Failure to check medication for expiration date		
<input type="checkbox"/>	Failure to medication for cloudiness or discoloration		
<input type="checkbox"/>	Failure to select proper needle and syringe		
<input type="checkbox"/>	Placed cap on needle in a dangerous or unsafe manner		
<input type="checkbox"/>	Contaminated needle and did not take appropriate action		
<input type="checkbox"/>	Failure to select appropriate injection site		
<input type="checkbox"/>	Failure to clean appropriate injection site		
<input type="checkbox"/>	Failure to insert needle at a 90 degree angle (Intramuscular)		
<input type="checkbox"/>	Failure to aspirate for absence of blood		
<input type="checkbox"/>	Failure to inject medication		
<input type="checkbox"/>	Failure to withdraw needle after administration		
<input type="checkbox"/>	Failure to apply pressure over the injection site after withdrawing needle		
<input type="checkbox"/>	Failure to discard needle in appropriate container		
<input type="checkbox"/>	Failure to verbalize reassessment of patient		
<input type="checkbox"/>	Exhibits unacceptable affect with patient or other personnel		
<input type="checkbox"/>	Uses or orders a dangerous or inappropriate intervention		
<input type="checkbox"/>	Failure to manage the patient as a competent EMT		



Patient Assessment/Management – Trauma

Candidate:		Date:	
Evaluator:		Start Time:	End Time:
Actions		Points Possible	Points Awarded
Takes or verbalizes, body substance isolation precautions		1	
Scene Size-Up			
Determines the scene is safe		1	
Determines the mechanism of injury/nature of illness		1	
Determines the number of patients		1	
Requests additional EMS assistance if necessary		1	
Considers stabilization of spine		1	
Primary:Survey/Resuscitation			
Verbalizes general impression of the patient		1	
Determines responsiveness/level of consciousness		1	
Determines chief complaint/apparent life threats		1	
Airway		2	
-Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point)			
Breathing		4	
-Assess breathing (1 point) -Assures adequate ventilation (1 point)			
-initiates appropriate oxygen therapy (1 point)			
-Manages any injury which may compromise breathing/ventilation (1 point)			
Circulation		4	
-Checks pulse (1 point)			
-Assess skin [either skin color, temperature or condition] (1 point)			
-Assesses for and controls major bleeding if present (1 point)			
Initiates shock management [positions patient properly, conserves body heat] (1 point)			
Identifies patient priority and makes treatment/transport decision (based upon calculated GCS)		1	
History-Taking			
Attempts to obtain SAMPLE history		1	
Secondary:Assessment			
Assesses the head		3	
-Inspects and palpates the scalp and ears (1 point) -Assesses eyes (1 point)			
-Inspects mouth, nose and assesses facial area (1 point)			
Assesses the neck		3	
-Checks position of trachea (1 point) -Checks jugular veins (1 point) -Palpates cervical spine (1 point)			
Assesses the chest		3	
-Inspects chest (1 point) - Palpates chest (1 point) -Auscultates chest (1 point)			
Assesses the abdomen/pelvis		3	
-Inspects and palpates abdomen (1 point) - Assesses pelvis (1 point)			
-Verbalizes assessment of genitalia/perineum as needed (1 point)			
Assesses Lower extremities		2	
-Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/leg)			
Assesses Upper extremities		2	
- Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/arm)			
Assesses the posterior thorax, lumbar and buttocks		2	
-Inspects and palpates posterior thorax (1 point) -Inspects and palpates lumbar and buttocks areas (1 point)			
Vital Signs		2	
Obtains baseline vital signs [must include BP, P and R] (1 point)			
Manages secondary injuries and wounds appropriately (1 point)			
Reassessment		1	
Demonstrates how and when to reassess the patient			
Total		42	
<input checked="" type="checkbox"/> Critical Criteria			
Failure to take or verbalize appropriate body substance isolation precautions			
Failure to initiate or call for transport of the patient within 10 minute time limit			
Failure to determine scene safety			
Failure to assess for and provide spinal protection when indicated			
Failure to voice and ultimately provide high concentration of oxygen			
Failure to assess/provide adequate ventilation			
Failure to find or manage problems associated with airway, breathing, hemorrhage or shock			
Failure to differentiate patient's need for immediate transport versus continued assessment/treatment at the scene			
Performs other assessment before assessing/treating threats to airway, breathing and circulation			
Failure to manage the patient as a competent EMT			
Exhibits unacceptable affect with patient or other personnel			
Uses or orders a dangerous or inappropriate intervention			



Bleeding Control/Shock Management

Candidate:	Date:	
Evaluator:	Start Time:	
	End Time:	
Actions	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Applies direct pressure to the wound	1	
Assess effectiveness of intervention	1	
Note: The examiner must now inform the candidate that the wound continues to bleed		
Applies pressure dressing to the wound	1	
Assess effectiveness of intervention	1	
Note: The examiner must now inform the candidate that the wound continues to bleed		
Applies tourniquet	1	
Assess effectiveness of intervention	1	
Documents time of tourniquet application	1	
Note: The examiner advises the candidate that the patient is now pale and diaphoretic with a rapid, weak pulse		
Properly positions the patient	1	
Administers high concentration oxygen	1	
Initiates steps to prevent heat loss from the patient	1	
Indicates the need for immediate transportation	1	
Total	12	

<input checked="" type="checkbox"/>	Critical Criteria
	Did not take or verbalize body substance isolation precautions
	Did not use correct procedures to control bleeding in a timely manner
	Did not apply high concentration oxygen
	Did not indicate a need for immediate transportation

EMT STUDENT COURSE COMPETENCY SKILL SHEETS



Baseline Vital Signs

Candidate:	Date:	
Evaluator:	Start Time:	
	End Time:	
Actions	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Blood Pressure (palpation):		
Apply blood pressure cuff 1" above the antecubital space <ul style="list-style-type: none"> • not over clothing • snug fit • center bladder over artery 	1	
Palpate radial or brachial artery	1	
Inflate cuff rapidly to at least 20mm Hg above the point where the pulse is lost	1	
Slowly deflate the cuff	1	
Report/record palpable systolic blood pressure when the pulse returns (margin + / - 4mm Hg)	1	
Blood Pressure (auscultation):		
Apply blood pressure cuff 1" above the antecubital space <ul style="list-style-type: none"> • not over clothing • snug fit • center bladder over artery 	1	
Hyperextend extremity and palpate brachial artery	1	
Place diaphragm of stethoscope over brachial artery	1	
Inflate cuff rapidly to at least 20mm Hg above palpated blood pressure	1	
Slowly deflate the cuff	1	
Report/record auscultated blood pressure (margin + / - 4mm Hg)	1	
Pulse:		
Palpate with 2 fingers (index and middle) over radial artery	1	
Count palpated pulse for a minimum of 30 seconds and multiply times 2	1	
Assess the following: <ul style="list-style-type: none"> • Rate • Rhythm (regular / irregular) • Quality (strong / weak) 	1 1 1	
Report / record pulse findings (margin + / - 4)	1	
Respirations:		
Observe rise and fall of the chest or abdomen	1	
Count respiratory rate for at least 30 seconds and multiply times 2	1	
Assess the following: <ul style="list-style-type: none"> • Rate • Rhythm (regular / irregular) 	1 1	



• Quality (shallow, deep, normal)	1	
Report / record respiration findings (margin + / - 2)	1	
Total	24	

Baseline Vital Signs continued

Candidate:	Date:
Evaluator:	Start Time:
	End Time:

Actions	Points Possible	Points Awarded
Skin signs (assess the following):		
Skin Color: (observe the patient) <ul style="list-style-type: none"> • Normal • Cyanosis • Jaundice • Ashen • Paleness • Flushing 	1	
Skin Temperature: (touch the patient) <ul style="list-style-type: none"> • Normal (warm) • Cool • Cold • Hot 	1	
Skin Moisture: (touch the patient) <ul style="list-style-type: none"> • Normal • Moist • Diaphoretic 	1	
TOTAL	27	

<input checked="" type="checkbox"/> Critical Criteria
Did not take or verbalize body substance isolation precautions
Did not palpate / auscultate blood pressure
Did not verbalize rate, rhythm, quality of pulse
Did not verbalize rate, rhythm, quality of respirations
Did not verbalize color, temperature, moisture of skin signs
Did not accurately determine pulse, respirations or blood pressure within required ranges



West Virginia Department of Education/RESA

ORAL MEDICATION ADMINISTRATION

Actions	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Identifies indications for administration of the medication	1	
Consult with Medical Command	1	
Confirm patient has no allergies to the medication	1	
Confirm expiration date of medication	1	
Check the 5 rights of drug administration		
Right patient	1	
Right drug	1	
Right dose	1	
Right route	1	
Right time	1	
Place the patient in a comfortable position	1	
Explain the possible side effects of the medication	1	
Instruct the patient to place the medication in the mouth and to swallow/allow to dissolve	1	
Monitor patient's condition and vital signs after administration	1	
Provides proper documentation	1	
Total	15	

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate body substance isolation precautions
- _____ Failure to consult with Medical Command
- _____ Missed more than 2 of the 5 rights of medication administration
- _____ Failure to monitor patient's condition and vital signs



West Virginia Department of Education/RESA

Continuous Positive Airway Pressure (CPAP)

Actions	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Directs initial application of high flow oxygen	1	
Obtains basic assessments (vital signs, SPO2, ETCO2, lung sounds)	1	
Identifies indications for utilization of CPAP	1	
Identifies contraindications for utilization of CPAP	1	
Identifies potential cautions and complications of CPAP	1	
Explains procedure to the patient	1	
Assembles CPAP generator correctly	1	
Assembles mask and tubing according to manufacturer's instructions	1	
Sets device parameters (based on protocols)	1	
Applies device to patient obtaining good face seal	1	
Adjusts/ titrates pressure	1	
Reassess patient's condition and vital signs	1	
Provides proper documentation	1	
Total	14	

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate body substance isolation precautions
- _____ Initial assessment not performed or performed in an inadequate manner
- _____ Failure to adequately maintain Airway, Breathing or Circulation at any time throughout scenario
- _____ Inappropriate treatment performed (dose of CPAP, etc.)
- _____ Failure to assemble oxygen in a safe manner
- _____ Failure to correctly assemble and apply CPAP
- _____ Failure to monitor patient's condition and vital signs
- _____ Failure to recognize complication/ need for further intervention



West Virginia Department of Education/RESA

12 Lead EKG Acquisition

Actions	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Identifies indications for 12 lead acquisition	1	
Explains procedure to patient	1	
Prepares EKG monitor and connects patient cable with electrodes	1	
Exposes patient's chest and preps as necessary	1	
Properly applies chest leads (V1, V2, V3, V4, V5, V6) V1: right 4 th intercostal space, just to right of sternum V2: left 4 th intercostal space, just to left of sternum V4: left 5 th intercostal space, midclavicular V3: halfway between V2 and V4 V5: horizontal to V4, anterior axillary line V6: horizontal to V5, mid-axillary line	6	
Properly applies extremity leads (RA,RL,LA,LL)	1	
Instructs patient to remain still	1	
Acquires 12 lead EKG	1	
Transmits EKG tracing to facility	1	
Reassesses the patient	1	
Confirms transmission of the EKG	1	
Provides proper documentation	1	
Total	18	

CRITICAL CRITERIA

- Failure to take or verbalize appropriate body substance isolation precautions
- Did not identify indications for 12 Lead acquisition
- Did not properly apply chest leads
- Did not properly apply extremity leads
- Did not confirm transmission of 12 lead EKG



Naloxone Intranasal Administration

Actions	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Obtain baseline mental status, pupil size, respiratory rate and effort	2	
Supports respirations as needed	1	
Perform rapid glucose determination to rule out hypoglycemia	1	
Verbalize signs of opioid overdose	1	
Consult with Medical Command	1	
Check the 5 rights of drug administration		
Right patient	1	
Right drug	1	
Right dose	1	
Right route	1	
Right time	1	
Select the proper medication and check concentration/color/clarity	2	
Selects the proper syringe and appropriate vial adaptor	2	
Using aseptic technique, draw up medication	1	
Place tip of nasal atomizer against nostril, aiming upward and outward	1	
Compress syringe delivering 1 mg (1/2 dose) of medication	2	
Repeat delivery of remaining medication in other nostril	1	
Monitor patient's condition and vital signs after administration	1	
Document the procedure	1	
Total	23	

CRITICAL CRITERIA

- ___ Failure to take or verbalize appropriate body substance isolation precautions
- ___ Failure to consult with Medical Command
- ___ Missed more than 2 of the 5 rights of medication administration
- ___ Failure to select the correct concentration of medication
- ___ Failure to support respirations as needed
- ___ Failure to monitor patient's condition and vital signs



West Virginia Department of Education/RESA

**MORGAN LENS IRRIGATION/
TETRACAINE OPHTHALMIC ADMINISTRATION**

Actions	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Identifies indications for use of Morgan Eye Lens	1	
Identifies contraindications for use of Morgan Eye Lens	1	
Explains procedure to the patient	1	
Positions patient to allow flow away from patients face	1	
Confirms expiration date of ocular anesthetic (Tetracaine©)	1	
Checks the 5 rights of drug administration		
Right patient	1	
Right drug	1	
Right dose	1	
Right route	1	
Right time	1	
Administers 2 drops of ocular anesthetic per eye being irrigated	1	
Attaches IV tubing to saline bag	1	
Attaches Morgan Lens Delivery Set to IV tubing	1	
Confirms fluid flow through device	1	
With patient looking down, retract upper eye lid and insert Morgan Lens under upper lid	1	
Releases upper lid and has patient look up	1	
Retracts lower lid and drop lens in place	1	
Adjusts flow to irrigate	1	
Completes irrigation and removes lens by retracting lower lid and sliding lens out	1	
Terminates flow of irrigation fluid	1	
Documents the procedure	1	
Total	22	

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate body substance isolation precautions
- _____ Failure to identify expiration date of medication
- _____ Missed more than 2 of the 5 medication administration rights
- _____ Failure to prepare equipment in a safe manner
- _____ Failure provide continuous fluid while irrigation in place
- _____ Failure to dispose of Tetracaine safely
- _____ Failure to monitor patient's condition and vital signs



**National Registry of Emergency Medical Technicians®
Emergency Medical Technician Psychomotor Examination**

SPINAL IMMOBILIZATION (SUPINE PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Directs assistant to place/maintain head in the neutral, in-line position	1	
Directs assistant to maintain manual stabilization of the head	1	
Reassesses motor, sensory and circulatory function in each extremity	1	
Applies appropriately sized extrication collar	1	
Positions the immobilization device appropriately	1	
Directs movement of the patient onto the device without compromising the integrity of the spine	1	
Applies padding to voids between the torso and the device as necessary	1	
Immobilizes the patient's torso to the device	1	
Evaluates and pads behind the patient's head as necessary	1	
Immobilizes the patient's head to the device	1	
Secures the patient's legs to the device	1	
Secures the patient's arms to the device	1	
Reassesses motor, sensory and circulatory function in each extremity	1	
Actual Time Ended: _____	14	
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 the torso
- ___ Patient moves excessively up, down, left or right on the device
- ___ Head immobilization allows for excessive movement
- ___ Upon completion of immobilization, head is not in a neutral, in-line position
- ___ Did not reassess motor, sensory and circulatory functions in each extremity after immobilizing patient to the device
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention

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



**National Registry of Emergency Medical Technicians®
Emergency Medical Technician Psychomotor Examination**

SPINAL IMMOBILIZATION (SEATED PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Directs assistant to place/maintain head in the neutral, in-line position	1	
Directs assistant to maintain manual stabilization of the head	1	
Reassesses motor, sensory and circulatory functions in each extremity	1	
Applies appropriately sized extrication collar	1	
Positions the immobilization device behind the patient	1	
Secures the device to the patient's torso	1	
Evaluates torso fixation and adjusts as necessary	1	
Evaluates and pads behind the patient's head as necessary	1	
Secures the patient's head to the device	1	
Verbalizes moving the patient to a long backboard	1	
Reassesses motor, sensory and circulatory function in each extremity	1	
Actual Time Ended: _____	TOTAL	12

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 patient excessively causing potential spinal compromise
- ___ Head immobilized to the device before device sufficiently secured to the torso
- ___ Device moves excessively up, down, left or right on the patient's torso
- ___ Head immobilization allows for excessive movement
- ___ Torso fixation inhibits chest rise, resulting in respiratory compromise
- ___ Upon completion of immobilization, head is not in a neutral, in-line position
- ___ Did not reassess motor, sensory and circulatory functions in each extremity after voicing immobilization to the long backboard
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention

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



**National Registry of Emergency Medical Technicians®
Emergency Medical Technician Psychomotor Examination**

LONG BONE IMMOBILIZATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Directs application of manual stabilization of the injury	1	
Assesses distal motor, sensory and circulatory functions in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal."		
Measures the splint	1	
Applies the splint	1	
Immobilizes the joint above the injury site	1	
Immobilizes the joint below the injury site	1	
Secures the entire injured extremity	1	
Immobilizes the hand/foot in the position of function	1	
Reassesses distal motor, sensory and circulatory functions in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal."		
Actual Time Ended: _____	TOTAL	10

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 distal motor, sensory and circulatory functions in the injured extremity before and after splinting
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention

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



**National Registry of Emergency Medical Technicians®
Emergency Medical Technician Psychomotor Examination**

JOINT IMMOBILIZATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

	Possible Points	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions	1	
Directs application of manual stabilization of the injury	1	
Assesses distal motor, sensory and circulatory functions in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal."		
Selects the proper splinting material	1	
Immobilizes the site of the injury	1	
Immobilizes the bone above the injury site	1	
Immobilizes the bone below the injury site	1	
Secures the entire injured extremity	1	
Reassesses distal motor, sensory and circulatory functions in the injured extremity	1	
NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal."		
Actual Time Ended: _____	TOTAL	9

Critical Criteria

- ___ Did not immediately stabilize the extremity manually
- ___ Grossly moves the injured extremity
- ___ Did not immobilize the bone above and below the injury site
- ___ Did not reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention

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

IMMOBILIZATION SKILLS TRACTION SPLINTING

Start Time: _____

Stop Time: _____

Date: _____

Candidate's Name: _____

Evaluator's Name: _____

	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 circulatory function in the injured extremity	1	
<i>NOTE: The examiner acknowledges "motor, sensory and circulatory function are present and normal"</i>		
Prepares/adjusts splint to the proper length	1	
Positions the splint next to 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 circulatory function in the injured extremity	1	
<i>NOTE: The examiner acknowledges "motor, sensory and circulatory function are present and normal"</i>		
<i>NOTE: The examiner must ask the candidate how he/she would prepare the patient for transportation</i>		
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 was applied
- _____ Did not reassess motor, sensory and circulatory function in the injured extremity before and after splinting
- _____ The foot was excessively rotated or extended after splint was applied
- _____ Did not secure the ischial strap before taking traction
- _____ Final immobilization failed to support the femur or prevent rotation of the injured leg
- _____ Secured the leg to the splint before applying mechanical traction

NOTE: If the Sagar splint or the Kendricks Traction Device is used without elevating the patient's leg, application of manual traction is not necessary. The candidate should be awarded one (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.