

See attached for instructions for completion

This section is to be filled out by the EMT whose skills are being verified:

I certify that I have performed the below listed skills before an approved verifier and have been found competent to perform these skills in the field.

Name as shown on California EMT Certificate	EMT Certificate Number	Signature

This section is to be filled out by an approved Verifier (see instructions for information on approved Verifiers). By filling out this section the Verifier certifies that they have, through direct observation, verified that the above EMT is competent in the skills below.

Skill Verified

Verifiers Information

1. Trauma Assessment	Name of Verifier:	Date of Verification:
	A constant to Marife forms	Cert./License Info. of Verifier:
(0)	Approval to Verify from:	Cert./License into. of verifier:
(Signature of Verification) 2. Medical Assessment	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
3. Bag-Valve-Mask Ventilation	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)	, approval to volley from:	
4. Oxygen Administration	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
5. Cardiac Arrest Management w/ AED	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
6. Hemorrhage Control & Shock Management	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
7. Spinal Motion Restriction- Supine & Seated	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
8. Penetrating Chest Injury	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
(Signature of Verification) 9. Epinephrine & Naloxone Administration	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		
10. Childbirth & Neonatal Resuscitation	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
(Signature of Verification)		



INSTRUCTIONS FOR COMPLETION OF EMT SKILLS COMPETENCY VERIFICATION FORM

- 1. A completed EMT Skills Verification Form (EMSA-SCV 01/17) is required for those individuals who are either renewing or reinstating their EMT certification. This verification form must accompany the application.
- 2. Verification of skills competency shall be accepted as valid to apply for EMT renewal or reinstatement for a maximum of two (2) years from the date of skill verification.
- 3. The EMT that is being skills tested shall provide their complete name as shown on their California EMT certification, the EMT certificate number and signature in the spaces provided.

4. Verification of Competency

Once skills competency has been demonstrated by direct observation of an actual or simulated patient contact, i.e. skills station, the individual verifying competency shall:

- a. Sign the EMT Skills Competency Verification Form for that skill.
- b. Print their name on the EMT Skills Competency Verification Form for that skill.
- c. Enter the date that the individual demonstrated the competency of the skill.
- d. Provide the name of the organization that has approved them to verify skills.
- e. Provide their certification or license type and number.
- 5. In order to be an approved skills verifier you must meet the following qualifications:
 - a. Be currently licensed or certified as an EMT, AEMT, Paramedic, Registered Nurse, Physician Assistant, or Physician, and
 - b. Be approved to verify by:
 - EMT training program, or
 - AEMT training program, or
 - Paramedic training program, or
 - Continuing education providers, or
 - EMS service provider (including but limited to public safety agencies, private ambulance providers, and other EMS providers).



PATIENT ASSESSMENT/MANAGEMENT - TRAUMA

Candidate: Examiner:		
Date: Signature:		
Scenario #		
Actual Time Started: Note: Areas denoted by "**" may be integrated within sequence of Primary Survey/Resuscitation	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions	1	
SCENE SIZE-UP		
Determines the scene/situation is safe	1	
Determines the mechanism of injury/nature of illness	1	
Determines the number of patients	1	
Requests additional EMS assistance if necessary	1	
Considers stabilization of the spine PRIMARY SURVEY/RESUSCITATION		
Verbalizes general impression of the patient	1	
Determines responsiveness/level of consciousness	1	
Determines chief complaint/apparent life-threats	1	
Airway		
-Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point)	2	
Breathing		
-Assures adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1 point) -Manages any injury which may compromise breathing/ventilation (1 point)	4	
-Initiates appropriate oxygen therapy (1 point) -Manages any injury which may compromise breathing/ventilation (1 point) Circulation		
-Checks pulse (1point)		
-Assess skin [either skin color, temperature or condition] (1 point)	4	
-Assesses for and controls major bleeding if present (1 point)		
-Initiates shock management [positions patient properly, conserves body heat] (1 point)		
Identifies patient priority and makes treatment/transport decision (based upon calculated GCS)	1	
HISTORY TAKING		
Obtains baseline vital signs [must include BP, P and R] (1 point)	1	
Attempts to obtain SAMPLE history	1	
SECONDARY ASSESSMENT Head		
-Inspects and palpates scalp and ears (1 point) ** -Assesses eyes (1 point) -Inspects mouth**, nose** and assesses facial area (1 point)	3	
Neck** -Checks position of trachea (1 point) -Checks jugular veins (1 point) -Palpates cervical spine (1 point)	3	
Chest**		
-Inspects chest (1 point) -Palpates chest (1 point) -Auscultates chest (1 point)	3	
Abdomen/pelvis**		
-Inspects and palpates abdomen (1 point) -Assesses pelvis (1 point)	3	
-Verbalizes assessment of genitalia/perineum as needed (1 point)		
Lower extremities** -Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/leg)	2	
Upper extremities		
-Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/arm)	2	
Posterior thorax, lumbar and buttocks**	2	
-Inspects and palpates posterior thorax (1 point) -Inspects and palpates lumbar and buttocks areas (1 point) Manages secondary injuries and wounds appropriately	1	
REASSESSMENT	ı	
Demonstrates how and when to reassess the patient	1	
Actual Time Ended: TOTAL	42	
	72	
CRITICAL CRITERIA Failure to initiate or call for transport of the patient within 10 minute time limit		
Failure to take or verbalize appropriate PPE precautions		
Failure to determine scene safety		
Failure to assess for and provide spinal protection when indicated		
Failure to voice and ultimately provide high concentration oxygen		
Failure to assess/provide adequate ventilation Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock		
Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene		
Performs other assessment before assessing/treating threats to airway, breathing and circulation		
Failure to manage the patient as a competent EMT		
Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention		



PATIENT ASSESSMENT/MANAGEMENT - MEDICAL

Candidate:		_ Examine	er:		
Date:		Signatur	e:		
Scenario #					
Actual Time Started:		_		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions				1	
SCENE SIZE-UP					
Determines the scene/situation is safe				1	
Determines the mechanism of injury/nature of illness				1	
Determines the number of patients				1	
Requests additional EMS assistance if necessary				1	
Considers stabilization of the spine				1	
PRIMARY SURVEY/RESUSCITATION					
Verbalizes the general impression of the patient				1	
Determines responsiveness/level of consciousness (AVF	PU)			1	
Determines chief complaint/apparent life-threats				1	
Assesses airway and breathing					
-Assessment (1 point) -Assures adequate ventila	ation (1 point)	-Initiates app	propriate oxygen therapy (1 point)	3	
Assesses circulation					
-Assesses/controls major bleeding (1 point)		-Checks puls	se (1 point)	3	
-Assesses skin [either skin color, temperature or condition					
Identifies patient priority and makes treatment/transport	decision			1	
HISTORY TAKING					
History of the present illness					
-Onset (1 point) -Quality (1 point)		-Severity (1 p			
-Provocation (1 point) -Radiation (1 point)		-Time (1 poin	t)	8	
-Clarifying questions of associated signs and symptoms	related to OPQ	RST (2 points)			
Past medical history				_	
-Allergies (1 point) -Past pertinent histo		-Events leadi	ng to present illness (1 point)	5	
-Medications (1 point) -Last oral intake (1	point)				
SECONDARY ASSESSMENT					
Assesses affected body part/system	La Caraciana de	1	Demonstration	_	
-Cardiovascular -Neurological	-Integumen	itary	-Reproductive	5	
-Pulmonary -Musculoskeletal	-GI/GU		-Psychological/Social		
VITAL SIGNS		Daaninatan	unto and availted (4 maint analy)		T
-Blood pressure (1 point) -Pulse (1 point)		-Respiratory i	rate and quality (1 point each)	4	
States field impression of patient				1	
Interventions [verbalizes proper interventions/treatment]				1	
REASSESSMENT				Ι .	T
Demonstrates how and when to reassess the patient to o	determine chan	ges in condition	1	1	
Provides accurate verbal report to arriving EMS unit				1	
Actual Time Ended:			TOTAL	42	
CRITICALCRITERIA					
Failure to initiate or call for transport of the patient with	hin 15 minute tin	ne limit			
Failure to take or verbalize appropriate PPE precaution	ons				
Failure to determine scene safety before approaching	patient				
Failure to voice and ultimately provide appropriate oxy	ygen therapy				
Failure to assess/provide adequate ventilation					
Failure to find or appropriately manage problems asso			•		
Failure to differentiate patient's need for immediate tra	•				
Performs secondary examination before assessing an	nd treating threat	ts to airway, brea	athing and circulation		
Orders a dangerous or inappropriate intervention					
Failure to provide accurate report to arriving EMS unit	Į.				
Failure to manage the patient as a competent EMT	annal				
Exhibits unacceptable affect with patient or other pers					
Uses or orders a dangerous or inappropriate intervent	uon				

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



BVM VENTILATION OF AN APNEIC ADULT PATIENT

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:	<u> </u>	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Checks responsiveness		1	
Requests additional EMS assistance		1	
Checks breathing and pulse simultaneously		1	
NOTE: After checking responsiveness, then checking breathing	and pulse for no more than 10 seconds, ex	aminer info	rms
candidate, "The patient is unresponsive, apneic and has a weak	pulse of 60."		
Opens airway properly		1	
NOTE: The examiner must now inform the candidate, "The mouth	is full of secretions and vomitus."		
Prepares rigid suction catheter		1	
Turns on power to suction device or retrieves manual suction device		1	
Inserts rigid suction catheter without applying suction		1	
Suctions the mouth and oropharynx		1	
NOTE: The examiner must now inform the candidate, "The mouth	n and oropharynx are clear."		
Opens the airway manually		1	
Inserts oropharyngeal airway		1	
NOTE: The examiner must now inform the candidate, "No gag re-	· · · · · · · · · · · · · · · · · · ·	airway adjui	nct."
**Ventilates the patient immediately using a BVM device unattached t			
[**Award this point if candidate elects to ventilate initially with BVM at	ached to reservoir and oxygen so long as	1	
first ventilation is delivered within 30 seconds.]			
NOTE: The examiner must now inform the candidate that ventilate	ion is being properly performed without d	1	I
Re-checks pulse for no more than 10 seconds		1	
Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L/m	nute]	1	
Ventilates the patient adequately			
-Proper volume to cause visible chest rise (1 point)		2	
-Proper rate [10 – 12/minute (1 ventilation every 5 – 6 seconds)] (1 po	•		
Note: The examiner must now ask the candidate, "How would yo each ventilation?"	u know if you are delivering appropriate vo	olumes with	
	TOTAL	40	
Actual Time Ended:	TOTAL	16	
CRITICAL CRITERIA			
After suctioning the patient, failure to initiate ventilations within 30	seconds or interrupts ventilations for greater the	an 30 second	s at any time
Failure to take or verbalize appropriate PPE precautions			
Failure to suction airway before ventilating the patient			
Suctions the patient for an excessive and prolonged time			
Failure to check responsiveness, then check breathing and pulse			
Failure to voice and ultimately provide high oxygen concentration			
Failure to ventilate the patient at a rate of 10 – 12/minute (1 ventilate the patient	· · · · · · · · · · · · · · · · · · ·		
Failure to provide adequate volumes per breath [maximum 2 error			
Insertion or use of any adjunct in a manner dangerous to the patie	nt		
Failure to manage the patient as a competent EMT			
Exhibits unacceptable affect with patient or other personnel			
Uses or orders a dangerous or inappropriate intervention			



OXYGEN ADMINISTRATION BY NON-REBREATHER MASK

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



CARDIAC ARREST MANAGEMENT / AED

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Determines the scene/situation is safe		1	
Checks patient responsiveness		1	
Direct assistant to retrieve AED		1	
Requests additional EMS assistance		1	
Checks breathing and pulse simultaneously		1	
NOTE: After checking responsiveness, then checking breathing examiner informs candidate, "The patient is unresponsive, apne		ds,	
Immediately begins chest compressions [adequate depth and rate; allo	ws the chest to recoil completely]	1	
Performs 2 minutes of high-quality, 1-rescuer adult CPR -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds throughout (1 point)	pint)	5	
NOTE: After 2 minutes (5 cycles), candidate assesses patient ar candidate operates AED.	d second rescuer resumes compress	sions while	
Turns on power to AED		1	
Follows prompts and correctly attaches AED to patient		1	
Stops CPR and ensures all individuals are clear of the patient during rh		1	
Ensures that all individuals are clear of the patient and delivers shock f	rom AED	1	
Immediately directs rescuer to resume chest compressions		1	
Actual Time Ended:	TOTAL	17	
Critical Criteria Failure to take or verbalize appropriate PPE precautions Failure to check responsiveness, then check breathing and pulse Failure to immediately begin chest compressions as soon as puls Failure to demonstrate acceptable high-quality, 1-rescuer adult Cl Interrupts CPR for more than 10 seconds at any point Failure to correctly attach the AED to the patient Failure to operate the AED properly Failure to deliver shock in a timely manner Failure to ensure that all individuals are clear of patient during rhy [verbalizes "All clear" and observes] Failure to immediately resume compressions after shock delivered Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	elessness is confirmed PR thm analysis and before delivering shock		



BLEEDING CONTROL/SHOCK MANAGEMENT

Candidate:	Examiner:		
Date:	Signature:		
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Applies direct pressure to the wound		1	
NOTE: The examiner must now inform candidate that the wour	nd continues to bleed.		
Applies tourniquet		1	
NOTE: The examiner must now inform candidate that the patie	nt is exhibiting signs and symptoms of hy	poperfusion.	
Properly positions the patient		1	
Administers high concentration oxygen		1	
Initiates steps to prevent heat loss from the patient		1	
Indicates the need for immediate transportation		1	
Actual Time Ended:	TOTAL	7	
CRITICAL CRITERIA Failure to take or verbalize appropriate PPE precautions Failure to administer high concentration oxygen Failure to control hemorrhage using correct procedures in a tim Failure to indicate the need for immediate transportation Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention	nely manner		



SPINAL IMMOBILIZATION (SUPINE PATIENT)

Examiner:		
Signature:		
	Possible Points	Points Awarded
	1	
ne position	1	
ad	1	
h extremity	1	
	1	
	1	
empromising the integrity of the spine	1	
as necessary	1	
	1	
у	1	
	1	
	1	
	1	
h extremity	1	
TOTAL	14	
tion of the head collar before ordering release of manual stabilization refore it was maintained mechanically grotential spinal compromise ently secured to the torso ne device reutral, in-line position rections in each extremity after immobilizing patient to the connel tion	he device	
	ne position ad h extremity mpromising the integrity of the spine as necessary y TOTAL ion of the head collar before ordering release of manual stabilization efore it was maintained mechanically g potential spinal compromise ently secured to the torso ne device eutral, in-line position actions in each extremity after immobilizing patient to the sonnel	Possible Points In proposition In position In positio



SPINAL IMMOBILIZATION (SEATED PATIENT)

Candidate:	Examiner:		
Date:			
Actual Time Started:		Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions		1	
Directs assistant to place/maintain head in the neutral, in	n-line position	1	
Directs assistant to maintain manual stabilization of the	nead	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 necess	sary	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 e	ach extremity	1	
Actual Time Ended:	TOTAL	12	
CRITICAL CRITERIA Failure to immediately direct or take manual stabilization. Failure to properly apply appropriately sized cervication. Released or ordered release of manual stabilization. Manipulated or moved patient excessively causing. Head immobilized to the device before device suffiction. Device moves excessively up, down, left or right or Head immobilization allows for excessive movement. Torso fixation inhibits chest rise, resulting in respiration. Upon completion of immobilization, head is not in a Failure to reassess motor, sensory and circulatory in Failure to manage the patient as a competent EMT. Exhibits unacceptable affect with patient or other personal contents.	al collar before ordering release of manual stabilization in before it was maintained mechanically potential spinal compromise ciently secured to the torso in the patient's torso into tory compromise neutral, in-line position functions in each extremity after voicing immobilization to the patient of the p	o the long back	board



Penetrating Chest Injury

Start Time:	_	
Stop Time:	Date:	
Candidate's Name:		
Evaluator's Name:		

Examiner states: "You arrive to find this patient who was involved in an	Points	Points
altercation and was shot in the chest" Begin your assessment.	Possible	Awarded
Takes, or verbalizes, body substance isolation (BSI)	1	
Assessment of the primary survey	1	
Maintains an open airway and provides basic life support if necessary	1	
Assesses breathing and visualizes chest during primary assessment	1	
Recognizes and seals open chest wound as quickly as possible. Places gloved hand over wound.	1	
Applies an occlusive dressing to wound	1	
Assesses lung sounds	1	
Administers appropriate 02 delivery	1	
Reassesses for pneumothorax	1	
Removes dressing as appropriate to relieve pneumothorax	1	
Treats for shock if appropriate	*	
Places patient in position of comfort to allow for best breathing, maintaining best	1	
position for injury		
Determines appropriate transport method	1	
Did not successfully complete the station within 10 minutes		
TOTAL:	12	

Critical Failures:

Failure to take standard precautions prior to small
Failure to identify wound within 10 seconds
Failure to occlude wound as soon as possible
Failure to apply occlusive dressing and/or occluding all four sides
Failure to recognize shock
Failure to position patient based on need for spinal precautions, if neede
Failure to manage patient as a competent EMT

EPINEPHRINE AUTO-INJECTOR

tudent Name I	Date	
P	Points Possible	Points Awarded
Takes or verbalizes body substance isolation	1	
Contacts medical direction for authorization	1	
Obtains patient's auto-injector	1	
Assures injector is prescribed for the patient	1	
Checks medication for expiration date	1	
Checks medication for cloudiness or discoloration	1	
Removes safety cap from the injector	1	
Selects appropriate injection site (thigh or shoulder)	1	
Pushes injector firmly against site	1	
Holds injector against site for a minimum of ten (10) sec	onds 1	
Properly discards auto-injector	1	
Verbalizes monitoring the patient while transporting	1	
ТО	TAL: 12	

____Did not contact medical direction for authorization ____Did not check medication for prescription, cloudiness or discoloration ____Did not use an appropriate injection site ____Used the injector against the injection site for ten (10) seconds or longer ____Did not discard auto-injector into appropriate container

Evaluator Initials: _____

Intranasal Naloxone Validation

PERFORMANCE CRITERIA: 100% accuracy required on all items marked with an *

Before administering a medication the PSP, EMT, AEMT, or paramedic must:

Points	Score	Performance Steps	Additional Information
1		Prepare universal precautions *	Gloves at a minimum should be worn. Eye protection could be warranted.
1		Review the six patient rights * (Determine need for intranasal naloxone).	 Right medication Right patient Right Dose Right Time Right Route Right Documentation Additional "rights" to consider: Right to refuse Right to be informed of medication Name of medication Goal of medication administration What patient can expect from medication, positive and negative Right indication
1		Ascertain the patient's allergies, including food, latex and medications	a. As able based on patient condition
1		Prepare and assemble intranasal device *	 a. Review expiration date – medication should not be expired. b. Open package and connect atomizer and container as needed.
1		Check medication for Drug, Dose, Integrity, Clarity, and Expiration date (DDICE) 3 times *	a. When you select the medicationb. As you are drawing it upc. Just before administering medication
1		Ensure that appropriate 9-1-1 response is activated. *	Request paramedic response for continued medical evaluation.

While administering a medication the PSP, EMT, AEMT, or paramedic must:

Points	Score	Performance Steps	Additional Information		
1		Take or verbalize body substance isolation *	Selection: gloves, goggles, mask, gown, booties, P100 as needed		
1		Maintain an aseptic environment*	a. Select most appropriate nostril for administration – intact, open, no blood/body fluids		
1		Administer naloxone*	 a. Using the atomizer device, insert into nostril and depress plunger with firm pressure until empty. b. Hold atomizer in nostril for addition 5 seconds. c. Monitor for naloxone drainage. 		
1		Reassess the patient after administration for response to medication *	 a. Improved respirations b. Improvements in mental status c. Monitor for precipitous withdrawal / agitation / aggressive behavior 		

1	Dispose of contaminated items/sharps appropriately*	a. Dispose of medical waste in appropriate container.b. Sharp disposal in appropriate sharps container.
1	Perform documentation and inform responding paramedics of naloxone administration*	Document all information concerning the patient and the medication including: 1. Indication for medication administration 2. Dosage and route delivered 3. Patient response to the medication; positive, negative, or none 4. Patient's condition before and after medication administration 5. Respirations and mental status before and after medication administration

Critical Failure Criteria

 _railure to review the six patient rights.
_Failure to check medication (DDICE) three times.
_Failure to take or verbalize BSI appropriate to the skill prior to performing the skill.
_Failure to maintain an aseptic environment.
_Failure to use the appropriate route of medication administration.
_Failure to reassess the patient after administration for response to medication.
_Failure to perform documentation
_Failure to share naloxone administration with responding paramedics.
Any procedure that would have harmed the patient.



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

NORMAL DELIVERY WITH NEWBORN CARE SKILLS LAB

C4 1. 4 NT		EIVERT WITH NEW BO		io Laid
Student Na	me:		Date:	
Instructor Evaluator:		Stude	ent Evaluator:	
		Signature		Signature
		SCORING		
N/A	Not applicable for the	-		
0		ed critical or excessive pro		
1	*	narginal or inconsistent, the		tempts
2	Successful; compete	nt; no prompting necessary	,	
Actual Tim				SCORE
	priate PPE precaution			
	nistory relevant to th			
	mated date of confine	nent		
	juency of contractions			
	ation of contractions			
	nsity of contractions			
		ime and presence of mecon		
		deliveries (complications,		section)
		itions (HTN, DM, seizure,	cardiac)	
	lications taken prior to			
		onormalities with pregnanc	<i>x</i> y)	
	inal bleeding			
	ominal pain			
Assessmen				
	l signs (BP, P, R, Ten			
		very (crowning, contraction	ons, urge to push, urg	ge to
	cate)			
Prepares fo				
	pares appropriate deliv			
	noves patient's clothin			
	ns and prepares obster			
	es clean pad under pa			
		d clamps, towels, newborn	blanket	
Delivers ne				
	ing contractions, urge	<u> </u>	_	
	vers and supports the	emerging fetal head	_	
	cks for nuchal cord		_	
	nages nuchal cord if pr		_	
		presence of meconium		
	vers the shoulders	.1 1 1	_	
	vers the remainder of	•	.1. 2	
		's abdomen or level with r	nother's uterus	
	es the time of birth			
Con	trols hemorrhage as n	PCESSATV		

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	/92
	772
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 dangerou	s 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 (The examiner is to ask the student to reflect on his/her per and document his/her response to the following question:)	