



Cardiac Arrest with an AED

	Points Possible	Points Awarded
One rescuer is already on scene performing CPR...		
Assessment		
Takes or verbalizes body substance isolation precautions	1	
Briefly questions the rescuer about arrest events	1	
Continues CPR for 2 minutes	1	
Turns on AED power	1	
Attaches defibrillator pads to the patient	1	
Directs rescuer to stop CPR and ensures that all individuals are clear of the patient	1	
Initiates analysis of the rhythm if machine has not already done so	1	
Delivers shock if directed by machine	1	
Transition		
Resumes CPR for 2 minutes	1	
Gathers additional information about the arrest event	1	
Confirms effectiveness of CPR (ventilation and compressions)	1	
Integration		
Verbalizes or directs insertion of simple airway adjunct (oral/ nasal airway)	1	
Ventilates or directs ventilation of the patient	1	
Assures high concentration of oxygen is delivered to the patient	1	
Re-evaluates patient/ CPR in approximately one minute	1	
Repeats defibrillator sequence	1	
Transport		
Verbalizes transportation of the patient	1	
Total:	16	

Bleeding Control/ Shock Management

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Applies direct pressure to the wound	1	
Elevates the extremity	1	
Note: The examiner now informs that the wound continues to bleed		
Applies an additional dressing to the wound	1	
Note: The second dressing still does not control the bleeding		
Locates and applies pressure to appropriate arterial pressure point	1	
Note: The bleeding is now controlled		
Bandages the wound	1	
Note: The patient is beginning to show signs and symptoms of shock		
Properly position the patient	1	
Applies high concentration oxygen	1	
Initiates steps to prevent heat loss	1	
Indicates the need for immediate transport	1	
Total:	10	



CPAP

	Points Possible	Points Awarded
Lists Indications for CPAP use <ul style="list-style-type: none"> - Adult patient - Conscious patient with severe dyspnea due to COPD, pulmonary edema or burn inhalation - Dyspnea with SpO2 <92% on high-flow oxygen via NRB mask 	3	
Lists Contraindications <ul style="list-style-type: none"> - Pneumothorax - Facial trauma - Inability to maintain own airway - Agitated or combative behavior - Altered mental status 	5	
Prepares equipment		
Selects proper mask size for patient	1	
Attaches adapter to tank if using portable	1	
Attaches hose to DISS port	1	
Connect circuit to CPAP machine and mask	1	
Implementation		
Takes body substance isolation precautions	1	
Explains procedure to patient	1	
Apply mask to patient and secure with included straps	1	
Titrates positive airway pressure until improvement in symptoms and SpO2 <ul style="list-style-type: none"> - Max pressure 10 cm H2O 	1	
Reassesses patient	1	
Total:	17	

KING LTS-D/ LT-D Airway

	Points Possible	Points Awarded
Lists Indications for use of King LTS-D / LT-D Airway <ul style="list-style-type: none"> - Apneic patient when endotracheal intubation is not possible or not available 	1	
Lists contraindications <ul style="list-style-type: none"> - Intact gag reflex - Known esophageal disease such as cancer - Caustic ingestion - Patient < 35 inches tall 	4	
Prepares equipment		
Chooses correct size	1	
Tests cuff for leaks	1	
Lubricates device with water-soluble lubricant	1	
Implementation		
Preoxygenates and hyperventilates the patient, if time permits	1	
Places patient in sniffing position (unless suspected trauma dictates otherwise)	1	
Opens patient's mouth and pull forward (this may be done with a laryngoscope or hand... be mindful of biting)	1	
Introduces the King LTS-D / LT-D with blue orientation line touching the corner of the mouth	1	
Rotates the device back to midline as it passes under the tongue	1	
Inflates cuffs to appropriate volume	1	
Connects BVM to device and ventilates per ventilation protocol	1	
If there is resistance to ventilation, withdraws tube slowly until ventilation pressure is relieved	1	
Assesses for adequate placement <ul style="list-style-type: none"> - equal breath sounds - no sounds over epigastric area - ETCO2 color metric device - Capnography 	4	
Secures device	1	
Total:	23	



Ventilatory Management Adult

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct (NPA or OPA)	1	
Note: Examiner informs that no gag reflex is present and patient accepts adjunct		
* Ventilates patient immediately with room air	1	
Note: Examiner informs that ventilation is being performed without difficulty, however Spo2 is only 85%		
Attaches oxygen source to reservoir and bag valve mask, sets oxygen to high flow (12-15 lpm)	1	
Ventilates patient at a rate of 10-20 per minute with appropriate tidal volume	1	
Note: Examiner reports that medical control has ordered intubation and takes over ventilation		
Directs Assistant to pre-oxygenate patient	1	
Identifies/ selects proper equipment for intubation	1	
Checks equipment for <input type="checkbox"/> cuff leaks <input type="checkbox"/> laryngoscope operational with bulb tight if applicable	2	
Note: Examiner removes NPA/ OPA and moves away when candidate is ready to intubate		
Positions head properly	1	
Inserts blade while displacing tongue	1	
Elevates mandible with laryngoscope	1	
Introduces ET tube and advances to proper depth	1	
Inflates cuff to proper pressure and disconnects syringe	1	
Directs ventilation of patient	1	
Confirms proper tube placement with auscultation over epigastrium and each lung	1	
Note: Examiner asks "What would you expect to hear with proper tube placement?"		
Secures ET tube	1	
Note: Examiner asks "What other methods are available to you for confirmation of ET tube placement?"		
<input type="checkbox"/> auscultation <input type="checkbox"/> visualization <input type="checkbox"/> 2 oz syringe method <input type="checkbox"/> ETCO2 (LP-12) <input type="checkbox"/> Colorimetric CO2 detector		
Note: Examiner states "You see secretions and hear gurgling sounds with the patient's exhalation."		
Identifies/ selects proper flexible suction catheter	1	
Pre-oxygenates patient	1	
Marks maximum insertion length with thumb and forefinger (maximum= length of ETT)	1	
Inserts catheter into the ET tube leaving catheter port open	1	
At proper insertion depth, covers catheter port and applies suction while withdrawing catheter	1	
Ventilates/ directs ventilation of patient as catheter is flushed with sterile water	1	
Total:	29	

Pediatric (<2yrs) Ventilatory Management

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct (OPA or NPA airway)	1	
Examiner, "No gag reflex is present and patient accepts adjunct"		
* Ventilates patient immediately with room air	1	
Examiner, "Ventilation is being performed without difficulty but pulse Oximetry indicates only 85% saturation"		
Attaches oxygen source to reservoir and bag valve mask, sets oxygen to high flow (12-15 lpm)	1	
Ventilates patient at a rate of 12-20 per minute with appropriate tidal volume	1	
Medical direction has ordered intubation. The examiner must now take over ventilation.		
Directs Assistant to pre-oxygenate patient	1	
Identifies/ selects proper equipment for intubation	1	
Checks laryngoscope to assure it is operational with bulb tight if applicable	1	
Note: Examiner removes NPA/ OPA and moves away when candidate is ready to intubate		
Places patient in neutral or sniffing position	1	
Inserts blade while displacing tongue	1	
Elevates mandible with laryngoscope	1	
Introduces ET tube and advances to proper depth	1	
Directs ventilation of patient	1	
Confirms proper tube placement with auscultation over epigastrium and each lung	1	
Examiner, "What would you expect to hear with proper tube placement?"		
Secures ET Tube (may be verbalized)	1	
Total:	16	



Transport Ventilator

	Points Possible	Points Awarded
Ventilator Setup		
Verifies oxygen level (minimum of 1000 psi)	1	
Attaches adapter to tank if using portable	1	
Connects supply hose to DISS port	1	
Verifies ventilator settings	1	
Connects patient hose and valve	1	
Turns on ventilator	1	
Checks manometer pressure limits	1	
Ventilator Initialization		
Examiner, "What is the indication for use of the transport ventilator?"		
<input type="checkbox"/> a patient with a secured airway requiring ventilation	1	
Takes body substance isolation precautions	1	
Sets rate and tidal volume based on protocol (adult 10-12/ min with tidal volume of 6-10 cc/kg)	1	
Checks and adjusts peak inflation pressure	1	
Connects tubing to standard 22/15 mm adapter of ET tube	1	
Examiner, "How do you know that ventilations are taking place and are effective?"		
<input type="checkbox"/> chest rise and fall <input type="checkbox"/> breath sounds <input type="checkbox"/> end tidal CO ₂ <input type="checkbox"/> pulse oximetry <input type="checkbox"/> skin color & temp	1	
Examiner, "What are the problems that can occur with mechanical ventilation?"		
<input type="checkbox"/> tube dislodgement <input type="checkbox"/> obstruction <input type="checkbox"/> pneumothorax <input type="checkbox"/> equipment failure (DOPE)	1	
	1	
	1	
Examiner, "How can you adjust for excessive or inadequate flow pressure?"		
Demonstrates ability to properly adjust manometer pressure limits	1	
Examiner, "How can you identify excessive or inadequate ventilation and correct the problem?"		
Demonstrates ability to adjust ventilation settings based on ETCO ₂ and SPO ₂	1	
Examiner, "What if the patient is fighting against the ventilator?"		
Considers contacting medical control for medication administration and dosage	1	
Total:	19	

Immobilization Skills Traction Splinting

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation	1	
Directs application of manual stabilization of the injured leg	1	
Assesses motor, sensory and circulatory function in the injured extremity	1	
Note: The examiner acknowledges that PMS are all present and normal		
Prepares/ adjusts splint to proper length	1	
Positions splint next to injured leg	1	
Applies the proximal securing device (ischial strap)	1	
Applies the distal securing device (ankle hitch)	1	
Applies mechanical traction	1	
Positions/ secures support straps	1	
Re-evaluates the proximal/ distal securing devices	1	
Reassesses motor, sensory and circulatory function in the injured extremity	1	
Note: The examiner acknowledges that PMS are all present and normal		
Note: The examiner must ask the candidate how the patient should be prepared for transport		
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:	13	



Immobilization Skills Joint Injury

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs application of manual stabilization of the shoulder injury	1	
Assesses motor, sensory and circulatory function in the injured extremity	1	
Note: Examiner acknowledges "motor, sensory and circulatory function are all 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	
Reassesses motor, sensory and circulatory function in the injured extremity	1	
Note: Examiner acknowledges "motor, sensory and circulatory function are all present and normal."		
Total:	8	

Immobilization Skills Long Bone 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 circulatory function in the injured extremity	1	
Note: Examiner acknowledges "motor, sensory and circulatory function are all present and normal."		
Measures 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 motor, sensory and circulatory function in the injured extremity	1	
Note: Examiner acknowledges "motor, sensory and circulatory function are all present and normal."		
Total:	9	



Spinal Immobilization Supine Patient

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Directs assistant to place/maintain head in the neutral in-line position	1	
Directs assistant to maintain manual immobilization of the head	1	
Assesses motor, sensory and circulatory function in each extremity	1	
Applies appropriately sized extrication collar	1	
Positions the immobilization device properly	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 board 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	
Total:	14	

Spinal Immobilization Seated Patient

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Directs assistant to place/maintain head in the neutral in-line position	1	
Directs assistant to maintain manual immobilization of the head	1	
Assesses motor, sensory and circulatory function 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	
Secure the patient's head to the device	1	
Verbalizes moving the patient to a long board	1	
Reassesses motor, sensory and circulatory function in each extremity	1	
Total:	12	



Intravenous Therapy

	Points Possible	Points Awarded
Verbalizes procedure for assembling IV set with fluid	1	
Prepares tape (or transparent occlusive dressing) at any time before venipuncture	1	
Selects appropriate catheter	1	
Takes or verbalizes body substance isolation precautions	1	
Applies tourniquet	1	
Palpates suitable vein	1	
Cleanses site appropriately	1	
Performs venipuncture <ul style="list-style-type: none"> • Inserts stylette • Notes or verbalizes flashback • Occludes vein proximal to catheter • Removes stylette • Connects IV tubing to catheter 	5	
Disposes of sharp in proper container	1	
Releases tourniquet	1	
Runs IV for a brief period to assure patent line	1	
Note: Examiner selects a medication and instructs administration of a bolus (amount)		
Asks patient for known drug allergies	1	
Selects correct medication	1	
Assures correct concentration of drug	1	
Assembles prefilled syringe or draws medication from vial properly	1	
Verbalizes procedure for medication administration including path, speed of administration	1	
Disposes of sharp in proper container	1	
Verbalizes flushing of tubing and adjustment back to KVO	1	
Verbalizes need to observe patient for desired effects/ adverse side effects	1	
Total:	23	

Intraosseous Infusion

	Points Possible	Points Awarded
Lists contraindications for EZ-IO use <ul style="list-style-type: none"> <li style="width: 50%;">- Fracture <li style="width: 50%;">- Osteogenesis Imperfecta <li style="width: 50%;">- Excessive tissue and/ or absence of anatomical landmarks <li style="width: 50%;">- IO at site within past 24 hours <li style="width: 50%;">- Infection at the area of insertion 	3	
Selects appropriate equipment to include: <ul style="list-style-type: none"> - EZ-IO Driver or Illinois Needle - IO Needle Set appropriate for weight - Syringe/ Flush 	3	
Prepares syringe and flushes extension set tubing	1	
Cuts or tears tape (at any time before IO puncture)	1	
Takes or verbalizes body substance isolation precautions	1	
Identifies proper anatomical site for IO puncture	1	
Performs IO puncture: <ul style="list-style-type: none"> - Stabilizes tibia (or humerus) - Inserts needle at 90 degree angle until needle rests on bone - Ensures that at least 5 mm of needle is visible - Penetrates bone by applying gentle pressure and squeezing the driver's trigger Stops when the desired depth is reached or a "give" or "pop" is felt as the medullary space is entered	1	
Disposes of needle in proper container	1	
Attaches extension tubing and syringe to IO needle and aspirates	1	
Slowly injects saline to assure proper placement of needle	1	
Connects administration set and adjusts flow rate as appropriate	1	
Secures needle with tape and supports with bulky dressing	1	
Considers analgesia (lidocaine 2%) given in small increments to avoid getting into central circulation	1	
Total:	17	



Life-Pak 12

	Points Possible	Points Awarded
Examiner will request each operation to be demonstrated...		
Powers unit on and runs user test	1	
NIBP		
Applies cuff to patient and obtains blood pressure reading	1	
Pulse Oximetry		
Attaches SPO ₂ probe to LifePak 12	1	
Adjusts SPO ₂ volume	1	
ECG		
Attaches limb lead cables to monitor	1	
Correctly places leads on patient, can be verbalized	1	
Select channel #1 and adjust ECG size to 1.5	1	
Select channel #2 and cascade ECG	1	
Input patient's name/ age/ sex	1	
Print ECG strip	1	
12-lead ECG		
Attach chest lead cables to monitor and patient (must be able to at least verbalize correct placement)	1	
Select channel #2 and view AVF	1	
Select channel #3 and view V6	1	
Analyze and print 12-lead ECG	1	
Transmit 12 lead ECG to hospital selected by evaluator	1	
End Tidal CO₂		
Give examples of appropriate uses for ETCO ₂	1	
Attaches the filterline tubing to the LP-12	1	
Ensure that ETCO ₂ monitor display is on	1	
Place the appropriate filterline set on the patient	1	
Display the CO ₂ waveform in channel #2 or #3	1	
Printing records		
Print vital signs for current patient	1	
Run Code Summary	1	
Print 12 lead ECG from previous patient	1	
EMT's Stop HERE		
Defibrillation/ Cardioversion		
Recognize the need for electrical therapy	1	
Attach defibrillator/ pacing pads if not already in place	1	
Charge to and deliver appropriate energy level (remember to hit or turn off sync if necessary)	1	
Pacing		
Recognize the need for the pacer	1	
Turns on pacer and attaches defibrillator/ pacing pads if not already in place	1	
Set pacer rate to 70 bpm	1	
Increase current to obtain capture	1	
Explains demand mode	1	
Total	23 / 31	



Airway Management Quick Trach®

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Inspects and assembles necessary equipment	1	
Note: Examiner asks "What are the indications for using this device?"		
<input type="checkbox"/> Inability to maintain airway with proper BLS/ ALS procedures <input type="checkbox"/> Inability to clear an upper airway obstruction	2	
Stabilizes larynx between the thumb and forefinger	1	
Locates and verbalizes the position of the cricothyroid membrane	1	
Prepares the site using aseptic technique	1	
Positions the device properly (bevel toward feet, underside of stopper showing)	1	
Inserts the device at a 90° angle, attempting to aspirate air throughout	1	
Changes angle to 60° when air is easily aspirated and advances device to the level of the stopper	1	
Removes stopper	1	
Stabilizes needle and syringe while advancing catheter until flange rests on patient's neck	1	
Removes needle and syringe	1	
Disposes of sharp in appropriate container	1	
Secures cannula to patient's neck	1	
Attaches BVM to adapter and attempts to ventilate	1	
Confirms placement of device with ETCO ₂	1	
Total:	17	

*** Note: if unable to aspirate air after advancing the device such that the stopper is touching the patient's neck, the stopper may be removed and the needle/ catheter may be advance carefully until air is aspirated.**

S.A.L.T. Airway

	Points Possible	Points Awarded
Lists Indications for use of the S.A.L.T. Airway <ul style="list-style-type: none"> - Apneic patients without an intact gag reflex - Patients who could be intubated with at least a 6.5 mm ETT 	3	
Lists contraindications <ul style="list-style-type: none"> - Patients with an intact gag reflex - Known esophageal disease - Patients who have ingested caustic substances 	3	
Opens patient's airway appropriately, placing airway in a neutral position	1	
Preoxygenates patient with BVM	1	
Lubricates the distal end of the S.A.L.T. with water-soluble lubricant	1	
Inserts supplied tongue depressor deep into patient's posterior oropharynx and pushes tongue anteriorly	1	
Inserts the S.A.L.T. as if holding a pencil, following the natural contour of the airway along the midline	1	
Advances until resistance is felt or the depth indicator ring reaches the gum line	1	
Removes tongue depressor after insertion to the proper depth	1	
Ventilates patient with BVM and observe for adequate compliance and chest rise	1	
Using the S.A.L.T. as a vehicle for insertion of ETT (paramedics)	1	
Ensures patient is well ventilated/ oxygenated	1	
Lubricates the distal end of ETT	1	
Inserts the ETT and advances to the proper depth, inflates bulb...	1	
Confirms ETT placement	1	
Secures ETT with supplied clamp and strap	1	
Total:	20	



Pediatric Assessment & Care

		✓					
Takes or verbalizes body substance isolation precautions			Vital Signs				
Scene size-up	Scene safety		RR	HR	B/P	Temp	EKG
	Number of patients						
	Nature or illness or injury						
	Additional help needed?						
Considers need for c-spine stabilization							
Obtains general impression of patient and surroundings							
Level of consciousness or responsiveness (AVPU)							
Airway	Assessment						
	Opens & clears as needed						
	Proper use of adjuncts						
			Electrical Therapy				
Breathing	Assessment		Defibrillation/ Cardioversion		Joules	EKG interpretation	
	Provides ventilation as needed			1 st			
	Initiates proper O2 therapy			2 nd			
	Secures airway if necessary			3 rd			
Circulation	Assessment		Pacing	4 th +...			
	Controls major bleeding			Rate	mA		
	Checks pulses, capillary refill						
	Skin color & temperature						
Makes initial treatment/ transport decision							
Pertinent History (If able from parents and exam)							
Signs/ Symptoms			Fluid and Drug Therapy				
Onset			Fluid/ Medication	Amount/ Dosage	Rate	Route	
Provocation/ Palliation							
Quality							
Radiation/ Region							
Severity							
Time							
Allergies							
Medications							
Past medical history							
Last intake/ output, frequency							
Events prior							
Focused Secondary Exam Completed if applicable							
Ongoing Assessment							
Repeats initial assessment							
Repeats vital signs							
Repeats focused assessment							
Consistently reevaluates patient for changes after treatments are administered			Airway & Breathing Support – Refer to Pediatric Ventilatory Checksheet				
Makes use of pediatric length-based reference tape and demonstrates adequate knowledge of its use			Vascular Access – Refer to Pediatric IO Checksheet				



Needle Thoracentesis

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Note: Examiner asks "What are the indications for using this procedure?"		
Lists at least four signs/ symptoms of pneumothorax	4	
Selects proper equipment (largest angiocath available)	1	
Identifies correct landmarks for procedure	1	
Prepares site for puncture	1	
Inserts catheter over rib and advances until 'pop' is felt	1	
Advances catheter and removes needle	1	
Checks for pressure release	1	
Note: Examiner reports there is a rush of air from the catheter		
Disposes of sharp in proper container	1	
Secures the catheter in place with tape	1	
Note: Examiner asks "What would you do if the catheter becomes clogged?"		
Verbalizes the need to redo procedure and continuously monitor for redevelopment of tension pneumothorax	1	
Total:	14	