

USCG EMS School



NREMT SKILL SHEETS

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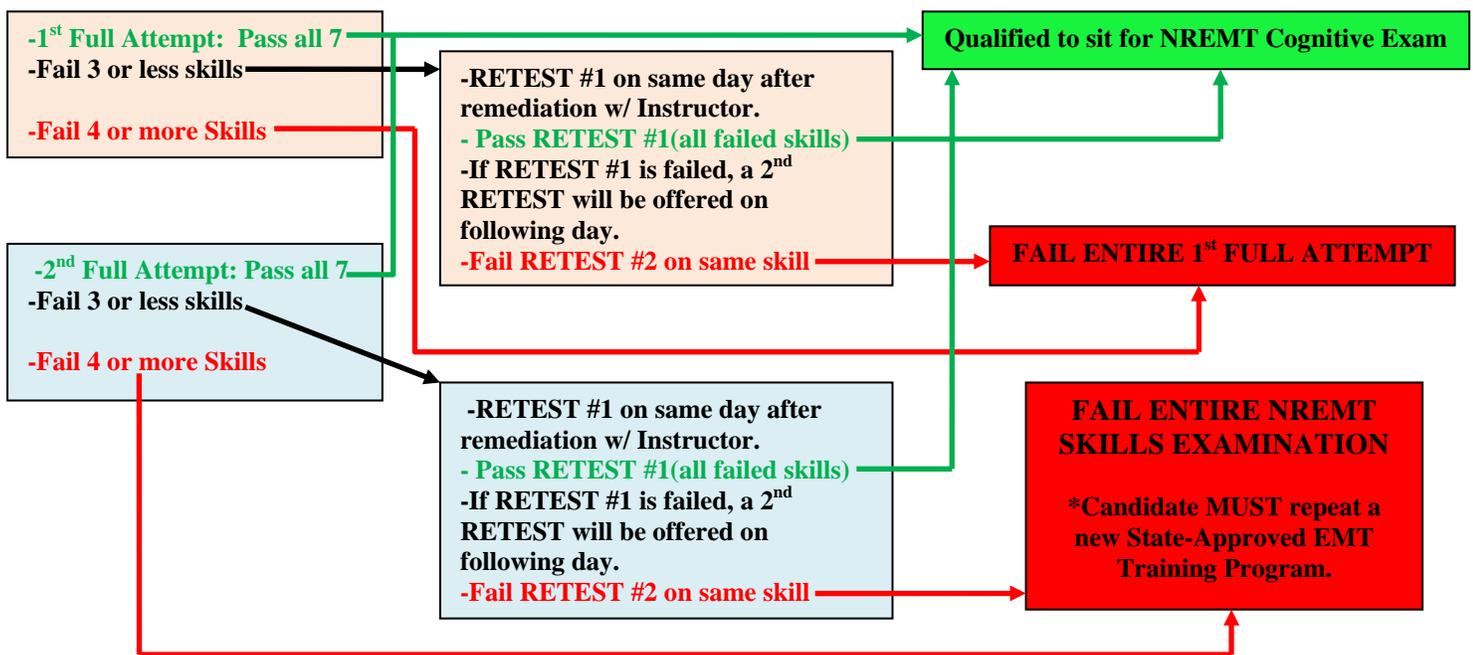
Student Name: _____

National Registry Practical Skills Exam

The National Registry Skills Exam is the first portion of the NREMT testing process. After successful completion of a State approved EMT Program, in this case CG EMS School, you will be authorized to participate in the practical skills exam. Upon successful completion of the skills portion, you will then be authorized to take the NREMT Cognitive Exam. This cognitive exam is computer based and is an adaptive test, meaning, as you take the test, it adapts to your specific knowledge level. A more thorough explanation of this will be given closer to the end of EMT school.

As far as the skills portion of your tests goes, here is a little breakdown for understanding the process:

- You will be tested on all **6 REQUIRED** skill stations and only **1 RANDOM** skill, listed below.
- You get **2 Full Attempts** to pass skills (1 Full Attempt = **6 Required Skills** and **1 Random Skill**)
- You'll get **2 Retests** on a single skill, if needed, due to an initial skill failure.



REQUIRED Skill Stations	Time Allowed	Total Possible Pts.	Min. Passing Pts.
Patient Assessment- Trauma	10 min	46	37
Patient Assessment- Medical	15 min	46	37
Cardiac Arrest/AED	10 min	18	14
BVM Ventilation of an Apneic Adult Patient	05 min	18	14
Oxygen Administration by Non-Rebreather Mask	05 min	11	8
Spinal Immobilization- Supine Patient	10 min	14	11

RANDOM Skill Stations	Time Allowed	Total Possible Pts.	Min. Passing Pts.
Bleeding Control/ Shock Management	10 min	8	6
Long Bone Immobilization	05 min	10	9
Joint Immobilization	05 min	9	7
Spinal Immobilization- Seated Patient	10 min	12	9

*Any Item on skill sheets marked with (****) is an automatic failure!*

PATIENT ASSESSMENT / MANAGEMENT—TRAUMA

Date:		Candidate:		Evaluator:				
Time:	Score:	Pass:	Fail:	Retest:	1	2	Points Possible	Points Awarded
Takes or verbalizes appropriate body substance isolation precautions.							** 1 **	
SCENE SIZE-UP								
Determines the scene is safe.							** 1 **	
Determines the mechanism of injury (MOI).							1	
Determines the numbers of patients.							1	
Requests additional assistance (ALS, Fire, LE).							1	
Considers stabilization of the 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 (if applicable).							1	
Assesses Airway:	Opens airway - jaw thrust / head tilt – chin lift Assesses airway- look, listen, feel Inserts adjunct- OPA / NPA						** 1 **	
Assesses Breathing:	Exposes chest Assesses for adequate ventilation – hands-on (Adequate rate, rhythm, quality, tidal volume?) Manages injuries which may compromise breathing and/or ventilation Initiates appropriate oxygen therapy						** 1 **	
Assesses Circulation:	Assesses/controls major bleeding if present Assesses central pulses, i.e. carotid/femoral Assesses skin (color, temperature, condition) Verbalizes need for shock management if indicated (positions patient, conserves heat)						** 1 **	
Identifies priority patients and verbalizes transport decision.							** 1 **	
HISTORY TAKING								
Attempts to obtain sample history from family or bystanders.							1	
SECONDARY ASSESSMENT (verbalizes checking for DCAP-BTLS and crepitus)								
Assesses the head:	Inspects mouth, nose, and assesses facial area Inspects and palpates scalp and ears Assesses eyes for equality, reactivity, shape (PERRL)						1	
Assesses the neck :	Inspects and palpates the neck Assesses for JVD and tracheal deviation Applies cervical immobilization device (C-Collar)						1	
Assesses the chest:	Inspects Palpates Auscultates						1	
Assesses the abdomen/pelvis:	Inspects and palpates the abdomen Assesses the pelvis Verbalizes assessment of genitalia/perineum						1	
Assesses the extremities:	1 point for each extremity, includes inspection, palpation, and assessment of motor, sensory, and circulatory function						1	1
Assesses the posterior:	Inspects and palpates posterior thorax Inspects and palpates lumbar spine/buttocks						1	
Obtains baseline vitals (must include BP, P, R).							1	
Verbalizes contacting med control and provides initial patient report to include baseline vitals.							1	
Manages secondary injuries and wounds appropriately.							1	
REASSESSMENT								
Verbalizes repeating primary assessment.							1	
Verbalizes repeating focused assessment on chief complaint OR secondary assessment in unresponsive patient.							1	
Verbalizes obtaining a second set of vital signs to verify trending.							1	
Minimum passing: 37							TOTAL:	46

CRITICAL CRITERIA:

- Did not initiate or call for transport of the patient within 10 minute time limit
- Did not take or verbalize body substance isolation precautions
- Did not determine scene safety
- Did not assess for and provide spinal protection when indicated
- Did not voice and ultimately provide high concentration of oxygen
- Did not assess/provide adequate ventilation
- Did not find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- Did not differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene
- Performed other assessment before assessing/treating threats to airway, breathing and circulation
- Exhibited unacceptable affect with patient or other personnel
- Used or ordered a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items below or on the back of this form.

PATIENT ASSESSMENT / MANAGEMENT—MEDICAL

Date:		Candidate:		Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1 2	Points Possible	Points Awarded	
Takes or verbalizes appropriate body substance isolation precautions.						** 1 **	
SCENE SIZE-UP							
Determines the scene is safe.						** 1 **	
Determines the nature of illness (NOI).						1	
Determines the numbers of patients.						1	
Requests additional help if necessary (ALS, Fire, LE).						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	NOTE: The instructor will give credit for airway if student states, "The patient is talking to me, so the airway is patent."		Open - Jaw Thrust / Head Tilt – Chin Lift Assess - Look, Listen, Feel Adjunct - OPA/NPA		1 1 1		
Assesses Breathing	NOTE: The instructor will give credit for breathing if the student states, "I am observing the patient for adequate rate, rhythm, and tidal volume of breathing."		Expose Chest (Pacemaker, Medication Patch) Rise & Fall - Hands on (Adequate rate, rhythm, quality, tidal volume?) Injury Management O2 administration via NRB, BVM, or cannula (choose appropriately)		1 ** 1 ** ** 1 ** ** 1 **		
Assesses Circulation	NOTE: The instructor will give credit for bleeding if student asks the patient, "Are you bleeding anywhere?"		Assess / control major bleeding Assess pulse Assess skin (color, temperature, condition) Verbalizes need for shock management if indicated		1 1 1 ** 1 **		
Identifies patient priority and verbalizes transport decision.						** 1 **	
HISTORY TAKING							
Obtains (S) signs / symptoms and history of present illness (ea question in a category = 1pt)						8	
Respiratory	Cardiac	ALOC	Allergic Reaction	Poisoning / Overdose	Environmental Emergency	Obstetrics/GYN	Behavioral
Onset?	Onset?	Description of the episode?	Onset?	Onset of symptoms?	Source?	Are you pregnant?	Current experience?
Provokes?	Provokes?	Quality?	Severity of symptoms?	Substance?	Environment?	How far along?	Drugs or alcohol?
Quality?	Quality?	Radiates?	History of allergies?	How did the substance enter the body?	Onset of symptoms?	Pain or contractions?	Seeing strange things or distorted vision?
Radiates?	Radiates?	Onset?	What were you exposed to?	When did the substance enter the body?	Duration?	Severity of pain?	Thoughts of suicide?
Severity?	Severity?	Duration?	How were you exposed and how long ago were you exposed?	How much entered the body?	Loss of consciousness?(2)	Bleeding or discharge?	Reaction to event or circumstance?
Time?	Time?	Associated symptoms?	Evidence of trauma?	Over what time period?	Effects – general or local?	Need to push?	Is patient a threat to self or others?
Has this happened before?	Has this happened before?	Seizures?	Effects?	Self Tx?	Self Tx?	Last menstrual period?	Is there a medical problem?
Self Tx?	Self Tx?	Fever?	Progression?	Estimated body weight?	Self Tx?	Self Tx?	Self Tx?
Determines Allergies (1), Medications (1), Past pertinent history (1), Last oral intake (1), Events leading up to illness – rule out trauma (1)						** 5 **	
SECONDARY ASSESSMENT							
Performs focused physical examination on affected body part. (1pt./EA: Inspect, Palpate, & Auscultate – if applicable)						3	
VITAL SIGNS							
Obtains baseline vital signs – Pulse rate (1 point), Respiratory rate and quality (1 point each), Blood pressure (1 point)						3	
States field impression of patient.						1	
Verbalizes contacting medical control then follows standing orders.						** 1 **	
Verbalizes proper interventions/ treatment.						1	
REASSESSMENT							
Repeats primary assessment (1), obtains second set of vitals and compares to first (1), repeats focused assessment to identify changes (1)						3	
Minimum passing: 37				TOTAL:		46	

CRITICAL CRITERIA

- Did not initiate or call for transport of the patient within 15 minute time limit
- Did not take or verbalize appropriate body substance isolation precautions
- Did not determine scene safety before approaching patient
- Did not voice assess/provide adequate ventilation and ultimately provide appropriate oxygen therapy
- Did not find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- Did not differentiate patient's need for immediate transportation versus continued assessment or treatment at the scene
- Performed secondary examination before assessing and treating threats to airway, breathing and circulation
- Ordered a dangerous or inappropriate intervention
- Exhibited 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 below or on the back of this form.

CARDIAC ARREST MANAGEMENT / AED

Date:		Candidate:		Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1 2	Points Possible	Points Awarded	

Takes or verbalizes appropriate body substance isolation precautions.	**1**	
Determines the scene / situation is safe.	**1**	
Attempts to question bystanders about arrest events.	1	
Checks patient responsiveness.	1	
NOTE: The examiner must now inform the candidate, "The patient is unresponsive."		
Assesses the patient for signs of breathing - observes the patient and determines the absence of breathing or presence of abnormal breathing (gaspings or agonal respirations).	1	
NOTE: The examiner must now inform the candidate, "The patient is apneic" or "The patient has gasping, agonal respirations."		
Checks for carotid pulse (no more than 10 seconds).	1	
NOTE: The examiner must now inform the candidate, "The patient is pulseless."		
Immediately begins chest compressions (adequate depth and rate; allows the chest to recoil completely).	**1**	
Requests additional EMS response.	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 for chest to recoil completely (1 point) Adequate volume for each breath (1 point) Minimal interruptions of less than 10 seconds throughout (1 point)	5	
NOTE: The examiner must now inform the candidate of the arrival of a second rescuer. Candidate verbalizes that after 2 minutes (5 cycles) patient is reassessed and the second rescuer resumes compressions while candidate operates AED.		
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 rhythm analysis.	**1**	
Ensures that all individuals are clear of patient and delivers shock from AED.	**1**	
Immediately directs rescuer to resume chest compressions.	**1**	
Minimum passing: 14	TOTAL:	18

CRITICAL CRITERIA

- Did not immediately begin chest compressions as soon as absence of pulse is confirmed
- Did not deliver shock in a timely manner
- Interrupted CPR for more than 10 seconds at any point
- Did not demonstrate acceptable high-quality, 1-rescuer adult CPR
- Did not operate the AED properly
- Did not correctly attach the AED to the patient
- Did not assure that all individuals are clear of patient during rhythm analysis **and** before delivering shock(s) [verbalizes "All clear" and observes]
- Did not immediately resume compressions after the shock was delivered
- Exhibited unacceptable affect with patient or other personnel
- Used or ordered a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items below or on the back of this form.

BVM VENTILATION OF AN APNEIC ADULT PATIENT

Date:		Candidate:		Evaluator:				
Time:	Score:	Pass:	Fail:	Retest:	1	2	Points Possible	Points Awarded

Takes or verbalizes appropriate body substance isolation precautions.				**1**			
Checks responsiveness (1)		NOTE: After checking responsiveness and breathing for at least 5 but no more than 10 seconds, examiner informs the candidate, "The patient is unresponsive and apneic."		**2**			
Checks breathing (1)							
NOTE: After checking responsiveness and breathing for at least 5 but no more than 10 seconds, examiner informs the candidate, "The patient is unresponsive and apneic."							
Requests additional EMS assistance.				1			
Checks pulse for at least 5 but no more than 10 seconds.				**1**			
NOTE: The examiner must now inform the candidate, "You palpate a weak carotid pulse at a rate of 60."							
Opens airway with head tilt-chin lift or jaw thrust.				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 and oropharynx are clear."							
Opens the airway manually.				1			
Selects, sizes, and inserts oropharyngeal airway.				1			
NOTE: The examiner must now inform the candidate, "No gag reflex is present and the patient accepts the airway adjunct."							
Places mask of BVM on patient's face and ensures a tight seal.				1			
Ventilates the patient, 1 breath every 5 to 6 seconds, ensuring proper chest rise and fall during each ventilation and ensuring no leaks around the mask.				1			
Attaches BVM to oxygen and sets flow rate to 15LPMs.				**1**			
Ventilates patient with high flow O ₂ , 1 breath every 5 to 6 seconds (1), ensuring proper chest rise (1) and fall and ensuring no leaks around the mask.				**2**			
NOTE: The examiner must not inform the candidate that ventilation is being properly performed without difficulty.							
Re-checks pulse for at least 5 but no more than 10 seconds.				1			
Minimum passing:		14		TOTAL:		18	

Critical Criteria

- After suctioning the patient, did not initiate ventilations within 30 seconds or interrupts ventilations for greater than 30 seconds at any time
- Did not take or verbalize body substance isolation precautions
- Did not suction airway **before** ventilating the patient
- Suctions the patient for an excessive and prolonged time
- Did not check responsiveness and breathing for at least 5 seconds but no more than 10 seconds
- Did not check pulse for at least 5 seconds but no more than 10 seconds
- Did not voice and ultimately provide high oxygen concentration [at least 85%]
- Did not ventilate the patient at a rate of at least 10/minute and no more than 12/minute
- Did not provide adequate volumes per breath [maximum 2 errors/minute permissible]
- Insertion or use of any adjunct in a manner dangerous to the patient
- Exhibited 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 below or on the back of this form.

OXYGEN ADMINISTRATION BY NON-REBREATHER MASK

Date:		Candidate:			Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1	2	Points Possible	Points Awarded	

Takes or verbalizes appropriate body substance isolation 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 for leaks.	1	
Checks tank pressure.	1	
Attaches non-rebreather mask to correct port of regulator.	1	
Adjusts regulator to assure oxygen flow rate of at least 10L/min.	**1**	
Turns on oxygen flow to pre-fill reservoir bag.	**1**	
Attaches mask to patient's face and adjusts to fit snugly.	**1**	
Minimum passing: 8	TOTAL:	11

CRITICAL CRITERIA

- Did not take or verbalize appropriate body substance isolation precautions
- Did not assemble the oxygen tank and regulator without leaks
- Did not pre-fill the reservoir bag
- Did not adjust the oxygen flow rate to the non-rebreather mask of at least 10 L/minute
- Did not assure a tight mask seal to patient's face
- Exhibited unacceptable affect with patient or other personnel
- Used or ordered a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items below or on the back of this form.

SPINAL IMMOBILIZATION SUPINE PATIENT

Date:		Candidate:		Evaluator:				
Time:	Score:	Pass:	Fail:	Retest:	1	2	Points Possible	Points Awarded

Takes or verbalizes, body substance isolation precautions.	**1**	
Directs assistant to place/maintain head in neutral in-line position.	1	
Directs assistant to maintain manual immobilization of the head.	**1**	
Assesses distal circulation, sensation, and motor function in each extremity.	1	
Applies appropriately sized cervical collar.	**1**	
Positions the backboard appropriately alongside the patient.	1	
Directs movement of the patient onto the board without compromising integrity of the spine.	1	
Pads voids between the torso and the board as necessary.	1	
Secures patient's torso to the board.	1	
Secures patient's legs to the board.	1	
Secures patient's head to the board, padding behind the head as necessary.	2	
Secures the patient's arms to the board.	1	
Reassesses distal circulation, sensation, and motor function in each extremity.	**1**	
Minimum passing: 11	TOTAL:	14

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
- Immobilized head 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
- Exhibited unacceptable affect with patient or other personnel
- Used or ordered a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items below or on the back of this form.

SPINAL IMMOBILIZATION SEATED PATIENT

Date:		Candidate:		Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1 2	Points Possible	Points Awarded	

Takes or verbalizes body substance isolation precautions.	**1**	
Directs assistant to place/maintain head in neutral in-line position.	**1**	
Directs assistant to maintain manual immobilization of the head.	**1**	
Assesses distal circulation, sensation, and motor function in each extremity.	1	
Applies appropriately sized cervical collar.	**1**	
Positions the Kendrick's Extrication Device properly behind the patient.	1	
Secures the device to the patient's torso, including leg straps.	1	
Evaluates proper fit of device 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 distal circulation, sensation, and motor function in each extremity.	**1**	
Minimum passing: 9	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 the 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
- 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 below or on the back of this form.

BLEEDING CONTROL/SHOCK MANAGEMENT (Extremity)

Date:		Candidate:		Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1 2	Points Possible	Points Awarded	

Takes or verbalizes body substance isolation precautions.	**1**	
Applies manual direct pressure to the wound.	1	
Applies pressure dressing to wound.	1	
Note: The examiner must now inform the candidate that the wound continues to bleed.		
Applies tourniquet.	1	
Note: The examiner must now inform the candidate that the patient is showing signs and symptoms of hypoperfusion (shock).		
Properly positions the patient.	1	
Administers high concentration oxygen.	**1**	
Initiates steps to prevent heat loss from the patient.	1	
Indicates need for immediate transportation.	**1**	
Minimum passing: 6	TOTAL:	8

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation precautions
- Did not administer high concentration of oxygen
- Did not control hemorrhage using correct procedures in a timely manner
- Did not indicate the need for immediate transportation
- Exhibited unacceptable affect with patient or other personnel
- Used or ordered a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items below or on the back of this form.

IMMOBILIZATION SKILLS LONG BONE

Date:		Candidate:		Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1 2		Points Possible	Points Awarded

Takes or verbalizes body substance isolation precautions.	**1**	
Directs application of manual stabilization.	1	
Assesses motor, sensory and circulatory function in the injured extremity.	**1**	
NOTE: The examiner acknowledges "motor, sensory, and circulatory function are present and normal"		
Measures splint.	1	
Applies splint.	1	
Immobilizes the joint above the injury site.	**1**	
Immobilizes the joint below the injury site.	**1**	
Secures the entire injured extremity.	1	
Immobilizes hand/foot in the position of function.	1	
Reassesses motor, sensory and circulatory function in the injured extremity.	**1**	
Note: The examiner acknowledges present and normal		
Minimum passing: 8	TOTAL:	10

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation
- Did not immediately stabilize the extremity manually
- Grossly moved 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
- Secures leg to splint before applying mechanical traction
- Exhibited unacceptable affect with patient or other personnel
- Used or ordered a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items below or on the back of this form.

IMMOBILIZATION SKILLS JOINT INJURY

Date:		Candidate:		Evaluator:			
Time:	Score:	Pass:	Fail:	Retest: 1 2	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: The examiner acknowledges "motor, sensory, and circulatory function are present and normal."		
Selects proper splinting material.	1	
Immobilizes the site of the injury.	1	
Immobilizes bone above injured joint.	**1**	
Immobilizes bone below injured joint.	**1**	
Secures entire injured extremity.	1	
Reassesses motor, sensory and circulatory function in the injured extremity.	**1**	
NOTE: The examiner acknowledges "motor, sensory, and circulatory function are present and normal."		
Minimum passing: 7	TOTAL:	9

CRITICAL CRITERIA

- Did not immediately stabilize the extremity manually
- Grossly moved 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
- 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 below or on the back of this form.

NOTES: