

State of New Hampshire
Department of Safety
Division of Fire Standards and Training
& Emergency Medical Services

EMT

Practical Examination



EMT Practical Examination

PATIENT ASSESSMENT / MANAGEMENT - TRAUMA

CANDIDATE #: _____

DATE: _____

EVALUATOR NAME: _____

_____ INITIAL

_____ RETEST

STOP: _____
 START: _____
 TOTAL TIME: _____

Time allowed: 10 minutes

SCENARIO # _____

CANDIDATE MUST PERFORM (*) ITEM WITHOUT ASSISTANCE

		Points Possible	Points Awarded
SCENE SIZE UP (scene information will be provided by the Evaluator)			
Verbalizes body substance isolation precautions		1	
PRIMARY ASSESSMENT			
Verbalizes general impression of the patient		1	
Stabilizes or directs stabilization of spine		1	
Determines responsiveness / level of consciousness (AVPU)		1	
Airway	Assesses	1	
	Manages	1	
Breathing	Assesses	1	
	Manages	1	
Circulation	Assesses Bleeding, Pulse & Skin (color – temp – moisture)	1	
	Manages	1	
Identifies priority patient / makes transport decision		1	
HISTORY TAKING			
Investigates chief complaint by performing appropriate exam		1	
Obtains S.A.M.P.L.E. History		1	
SECONDARY ASSESSMENT			
Performs detailed physical exam		1	
Obtains quantitative vital signs (*)		1	
Manages secondary injuries and wounds appropriately		1	
REASSESSMENT			
Verbalizes reassessment		1	
TOTAL		17	

CRITICAL CRITERIA

- _____ Did not establish spinal stabilization upon initial contact with patient
- _____ Did not maintain spinal stabilization throughout
- _____ Did not assess or manage problems associated with airway
- _____ Did not assess or manage problems associated with breathing
- _____ Did not assess or manage problems associated with bleeding, pulse and skin (color – temp – moisture)
- _____ Did not differentiate patient's need for transportation versus continued assessment at the scene
- _____ Did other physical examination before assessing and managing the airway, breathing and circulation
- _____ Obtains baseline vital signs prior to completion of primary assessment

You **must** factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.

EMT Practical Examination

CARDIAC ARREST MANAGEMENT

CANDIDATE #: _____

DATE: _____

EVALUATOR NAME: _____

_____ INITIAL

_____ RETEST

STOP: _____

START: _____

TOTAL TIME: _____

Time allowed: 10 minutes

CANDIDATE MUST PERFORM (*) ITEMS WITHOUT ASSISTANCE

	Points Possible	Points Awarded
SCENE SIZE UP (scene information will be provided by the Evaluator)		
Verbalizes body substance isolation precautions	1	
Checks patient responsiveness	1	
Assesses for breathing and pulse simultaneously	1	
Directs assistant to begin CPR starting with compressions	1	
* Turns Defibrillator power ON	1	
* Attaches automated external defibrillator pads to the patient	1	
* Initiates analysis of the rhythm and follows AED prompts	1	
* Ensures all individuals are clear of the patient	1	
* Delivers initial shock	1	
TRANSITION		
Resumes or directs resumption of CPR	1	
INTEGRATION		
* Verbalizes insertion of a simple airway adjunct	1	
* Ventilates to chest rise	1	
* Verbalizes high concentration of oxygen is delivered to patient	1	
* Assures CPR continues without a >10 second interruption	1	
* Initiates analysis of the rhythm and follows AED prompts, does not turn AED off	1	
CONVERSION – Evaluator states signs of life are present * Candidate must reassess the following:		
* Checks circulation	1	
* Checks airway	1	
* Checks breathing	1	
Performs two (2) person BVM ventilation for 30 seconds (5 - 6 breaths)	1	
TOTAL	19	

CRITICAL CRITERIA

- _____ Did not assure all individuals were clear of patient while analyzing each rhythm
- _____ Did not assure all individuals were clear of patient before delivering shock
- _____ Did not apply oxygen / minimum 15 LPM
- _____ During CPR, did not ventilate the mannequin to chest rise at a rate of 10 breaths in 2 minutes (maximum 4 errors in 2 minutes).
- _____ During rescue breathing, did not ventilate at a rate of 10 – 12 times per minute (maximum of 4 errors per minute)
- _____ CPR continued or shock attempted after detection of pulse
- _____ Did not perform or direct CPR / AED application to standards as appropriate
- _____ Performs skill in manner that would be harmful to the patient.

You **must** factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.

EMT Practical Examination

AIRWAYS – SUCTION – OXYGEN

CANDIDATE #: _____

DATE: _____

EVALUATOR NAME: _____

_____ INITIAL

_____ RETEST

STOP: _____

START: _____

TOTAL TIME: _____

Time allowed: 10 minutes

OROPHARYNGEAL and NASOPHARYNGEAL AIRWAYS	Points Possible	Points ORAL	Points NASAL
Verbalizes body substance isolation precautions	1		
Measures airway	1 each		
Selects appropriately sized airway	1 each		
Inserts airway without pushing tongue posteriorly	1		
Advise Candidate to insert other airway			
Removes oropharyngeal airway	1		
Verbalizes lubrication of nasal airway	1		
Inserts nasal airway	1		

SUCTION

Advise Candidate to suction the mannequin's airway			
Turns on / prepares suction device	1		
Assures presence of mechanical suction	1		
Inserts suction tip without suctioning	1		
Applies suction to the oropharynx for 10-15 seconds	1		

OXYGEN ADMINISTRATION

Cracks tank valve	1		
Assembles the regulator to the tank	1		
Opens tank – Checks for leaks – Checks tank pressure (1 point each)	3		
Adjusts liter flow to minimum 10 liters / minute	1		
Attaches non-rebreather mask to O ₂ regulator and pre fills reservoir (1 point each)	2		
Applies and adjusts mask to mannequin's face	1		
Advise Candidate to apply a nasal cannula			
Removes non-rebreather, attaches nasal cannula to O ₂ regulator	1		
Adjust liter flow to six (6) or less	1		
Applies nasal cannula to mannequin	1		
Advise Candidate to discontinue oxygen therapy			
Removes nasal cannula	1		
Shuts off tank, relieves pressure within the regulator (1 point each)	2		
TOTAL ORAL+NASAL+SUCTION+O₂	28		

CRITICAL CRITERIA

- _____ Did not select or properly insert proper size airway (oral or nasal)
- _____ Did not provide proper O₂ flow rate (10 liters / minute minimum for NRB, six (6) liters or less for nasal)
- _____ Suctioned for greater than 15 seconds
- _____ Did not pre fill reservoir
- _____ Failure to correct conditions that result in tank / regulator leaks

You **must** factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.

EMT Practical Examination

FEMUR FRACTURE

CANDIDATE #: _____

DATE: _____

EVALUATOR NAME: _____

PLEASE WRITE LEGIBLY

_____ INITIAL

_____ RETEST

STOP: _____

START: _____

TOTAL TIME: _____

Time allowed: 10 minutes

Device Used: - HARE - - SAGER - - KTD - - OTHER - (Circle One)

	Points Possible	Points Awarded
Verbalizes body substance isolation precautions	1	
Directs application of manual stabilization to the injured leg	1	
Assesses pulse, motion and sensation function in the injured extremity	1	
Note: The Evaluator acknowledges "pulse, movement and sensation are present and normal"		
Directs the application of manual traction **	1	
Prepares / adjusts splint to the length necessary to apply mechanical traction	1	
Positions the splint under / next to the injured leg	1	
Applies the ischial strap	1	
Applies the ankle hitch	1	
Applies the mechanical traction	1	
Positions / secures the support straps	1	
Re-evaluates the ischial and ankle securing devices	1	
Reassesses pulse, movement and sensation in the injured extremity	1	
Note: The Evaluator acknowledges "pulse, movement and sensation are present and normal"		
Note: The Evaluator must ask the Candidate how he/she would prepare the patient for transportation		
Verbalizes securing the torso to a long board to immobilize the hip	1	
Verbalizes securing the splint to the long board to prevent it from moving	1	
TOTAL	14	

CRITICAL CRITERIA

- _____ Lost traction at any point after it was applied
- _____ Failed to maintain stabilization during application of device
- _____ Did not secure the proximal strap before taking mechanical traction
- _____ Secured the leg to the splint before applying mechanical traction
- _____ Failed to immobilize adjacent joints
- _____ Immobilization process allowed for excessive movement

****Note:** If the Sager splint or Kendrick Traction Device is used without elevating the patient's leg, application of manual traction is not necessary and the candidate will be awarded the one (1) point for manual traction. If however, the leg is elevated at all, manual traction must be applied before elevating the leg. The ankle hitch may be applied prior to elevating and used to provide manual traction.

You **must** factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.

EMT Practical Examination

SPLINTING SKILLS

LONG BONE FRACTURE

CANDIDATE #: _____

DATE: _____

EVALUATOR NAME: _____

_____ INITIAL

_____ RETEST

STOP: _____
 START: _____
 TOTAL TIME: _____

Time allowed: 10 minutes

Bone Tested: - RADIUS - - ULNA - - TIBIA - - FIBULA - (Circle One)

	Points Possible	Points Awarded
Verbalizes body substance isolation precautions	1	
Directs application of manual stabilization to the injury	1	
Assesses pulse, movement and sensation in the injured extremity	1	
Note: The Evaluator acknowledges "pulse, movement and sensation are present and normal"		
Prepares and measures the splint (one point each)	2	
Applies and secures the splint (one point each)	2	
Secures the entire injured extremity	1	
Immobilizes the joint above the injury site	1	
Immobilizes the joint below the injured site	1	
Immobilizes the hand / foot in the position of function	1	
Reassesses pulse, movement and sensation in the injured extremity	1	
Note: The Evaluator acknowledges "pulse, movement and sensation are present and normal"		
TOTAL	12	

CRITICAL CRITERIA

- _____ Failed to maintain stabilization during application of splint
- _____ Did not immobilize the broken bone
- _____ Splinting device not secure
- _____ Did not immobilize the joints above and below to the injury site
- _____ Immobilization process allowed for excessive movement

You **must** factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.

EMT Practical Examination

SPLINTING SKILLS

SHOULDER DISLOCATION

CANDIDATE #: _____

DATE: _____

EVALUATOR NAME: _____

_____ INITIAL

_____ RETEST

STOP: _____

START: _____

TOTAL TIME: _____

Time allowed: 10 minutes

	Points Possible	Points Awarded
Verbalizes body substance isolation precautions	1	
Directs application of manual stabilization to the injury	1	
Assesses pulse, movement and sensation in the injured extremity	1	
Note: The Evaluator acknowledges "pulse, movement and sensation are present and normal"		
Selects the proper splinting material	1	
Immobilizes the site of the injury	1	
Immobilizes below the injured joint	1	
Reassesses pulse, movement and sensation in the injured extremity	1	
Note: The Evaluator acknowledges "pulse, movement and sensation are present and normal"		
TOTAL	7	

CRITICAL CRITERIA

- _____ Immobilization process allowed for excessive movement
- _____ Immobilization did not support the weight of the distal extremity
- _____ Did not immobilize below the injured site

You **must** factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.