EMERGENCY MEDICAL TECHNICIAN (EMT) PSYCHOMOTOR SKILLS **EXAMINATION REPORT**

State Form 54502 (R7 / 10-19)

INDIANA DEPARTMENT OF HOMELAND SECURITY EMERGENCY MEDICAL SERVICES CERTIFICATION

302 West Washington Street, Room E239 Indianapolis, IN 46204 Telephone: 1-800-666-7784



INSTRUCTIONS: 1. Please type or print clearly.

2. Candidates must read and sign where indicated before examination begins.

			REGISTRANT I	NFORMATION			
Course	numbe	er					
Name (last, firs	st, middle initial)			Public Safety Ide	entification (PSID) number	
Address	s (numl	ber and street, city, state, an	d ZIP code)				
Date of	birth (n	nonth, day, year)	E-mail address		(elephone number	
Name o	f trainir	ng institution		Examination site			
			EXAMINATIO	ON RESULTS			
		Date of examination	n (month, day, year):	Initial:		Retest number:	
Section	n 1	Patient Assessment	/ Management - Trauma	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
Section	n 2	Patient Assessment	/ Management - Medical	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
Section	n 3	Cardiac Arrest Mana	agement / AED	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
Section	n 4	BVM Ventilation of a	n Apneic Adult Patient	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
Section	n 5	Supraglottic Airway l	Device	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
Section	n 6	Spinal Immobilization	n (Supine)	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
Section	n 7	Bleeding Control / S	hock Management	☐ Pass	☐ Fail	☐ Pass ☐ Fail	
			PRACTICAL SKILLS EXAMINA	ATION PASS / FAII	CRITERIA		
1.	Can	didates failing three (3	B) or fewer stations may re-test the			examination.	
2.	Can	didates failing a same	day re-test must re-test those faile	d skills on a different	day with a diffe	rent examiner.	
3.		didates failing a single	e skill three (3) times, or fails four (4) or more stations co	nstitutes failure	of the practical skills	
4.	Can	didates who fail the Pi	ractical Skills Examination may re-to	est the entire examin	ation only after	documented remedial traini	ng.
5.	Can	didates who must take	e the entire Practical Skills Examina	tion a second time, it	tems 1-3 above	apply.	
6.			al Skills Examination a second time entire EMT Training Program over.	e constitutes failure o	f the Practical S	kills Examination and requi	res
7.	Test results announced on the day of the examination are PRELIMINARY AND UNOFFICIAL. Results are not final until			ıt			
			EMERGENCY MEDICAL SERVIO	CES REGISTRANT S	SIGNATURE		
By my	signa	ature below, I acknow	ledge that I have read and understa			ed in items 1-7 above.	
Signatu	re of El	MT candidate			Date (month, da	y, year)	
State re	presen	tative comments:			•		
Signatu	re of re	presentative			Date (month, da	y, year)	
			500 05510F	LICE ON Y			
		_	FOR OFFICE	Staff initials	T r	Date (month, day, year)	
		☐ Pass	☐ Fail			(, 22), 5041/	

What You Need To Know as an Indiana EMT Practical Exam Candidate

Your Indiana Practical Exam Representatives and the Indiana Department of Homeland Security want to wish you well in the practical exam process. We understand that this is a stressful process. It is our job to ensure that the practical exam is well-conducted, which will reduce the stress you experience. However, this is still a testing process so there must be some ground rules. Please review this document and comply with these rules. Doing so will help us make your practical exam as successful as possible.

Ground rules

- 1. The following behavior may result in your removal from the practical exam and will constitute a failure of the entire exam:
 - a. **Use of an electronic device in any way (phone calls, texting, internet, etc.).** Electronic devices must be left at home or in your vehicle.
 - b. **Leaving the practical exam before completion of the full exam.** You may not proceed to any station until directed to do so. You may not leave the candidate staging area without permission. Going outside to smoke is not permitted. Only one person may go to the restroom at any given time.
 - c. Discussing the practical exam or what happens in any particular station with other candidates.
 - d. Failure to comply with rules as directed by the Practical Exam Representative.
- 2. You may review your skill sheets when in the candidate staging area. You may not take your skill sheets to a station.
- 3. Any notes that you take in a station must be left in that station. You may not leave a station with any materials.
- 4. Station evaluators are not permitted to comment on your performance.
- 5. Unprofessional behavior will not be tolerated. This includes cheating, displaying anger or aggressive behavior, and being impaired in any way. Unprofessional behavior may lead to loss of all future test attempts and certification in Indiana.
- 6. The following guidelines apply to retesting failed stations:
 - a. Failure of three (3) or less skill stations entitles you to a retest of those skills failed. Retests may or may not be offered the day you take your initial practical exam. If you have elected to retest, you must retest all failed stations, and retests must be taken with a different examiner. Failure of a same-day retest entitles you to a retest of those skills failed on a different date with a different examiner. Failure of the retest on a different date constitutes a complete failure of the practical exam.
 - b. Failures of four (4) or more skill stations constitutes complete failure of the entire practical exam and the student is required to have remediation by a primary instructor before you are allowed to test again.
 - c. You are allowed to test a single skill station a maximum of three (3) times before you must retest the entire practical exam. You must document remedial training over all skills before re-attempting the entire practical exam.
 - d. Failure to pass all stations by the end of two (2) full exam attempts constitutes a complete failure of the skills testing process, and you must complete a new EMT training program to be eligible for future testing for certification.
- 7. If you wish to file a complaint concerning the practical exam, you must do so with the Practical Exam Representative as soon as you leave that skill station. You may file a complaint for only two (2) reasons:
 - a. You feel you have been discriminated against or have any concern regarding the skill station. Any situation in which you feel an unfair evaluation of your abilities occurred may be considered discriminatory.
 - b. There was an equipment problem or malfunction in your station.

If you feel either of these two things occurred, you must contact the Practical Exam Representative immediately to initiate the written complaint process. The Practical Examination Representative, Exam Coordinator, and the Medical Director will review your concerns and determine how the issue will be resolved.

Practical exam tips

- 1. Don't expect to do well by simply memorizing the forms. You need to be able to perform the skills properly, explain what you are doing and why, and determine the correct course of treatment. Memorizing the form won't get you there.
- 2. Once you finish a station, move on. There is no benefit to dwelling on things you think you did wrong or right in a station.
- 3. If there is a problem with equipment or a station, report it to the Indiana Practical Exam Representative immediately.
- 4. Pay attention to instructions, scenarios, and equipment in the room.
- 5. Be confident. Take your time. Verbalize everything you are doing and why.
- 6. Most failures involve critical criteria. Know them ... and avoid them.
- 7. Don't be offended if the evaluator does not appear overly friendly in the station. Don't try to gauge your success on the evaluator's behavior.

I understand these rules and agree to abide by them. I understand that violation of these rules may lead to a loss of the test attempt and possibly loss of future test attempts.

Signature	Date (month, day, year)
Printed name	Public Safety Identification (PSID) number

INDIANA EMERGENCY I	MEDICAL TECHNICIAN (EMT) PSYCHOMOTOR S	KILLS EXAMINATION
PA [*]	TIENT ASSESSMENT / MANAGEMENT - TRAUMA	4
Name of candidate	Name of examiner	
Signature of examiner	Date (month, day, year)	Scenario number
Note: Areas denoted by "**" may be integrate	d within sequence of Primary Survey / Resuscitation.	

Actual time	started	:	Points Possible	Points Awarded
Takes or verl	balizes a	appropriate personal protective equipment (PPE) precautions.	1	
Scene Size-	up			
Determines t	he scen	e / situation is safe.	1	
Determines t	he mecl	nanism of injury / nature of illness.	1	
Determines t	he num	ber of patients.	1	
Requests ad	ditional	EMS assistance, if necessary.	1	
Considers sta	abilizatio	on of the spine.	1	
Primary Surv				
Verbalizes ge	eneral ir	npression of the patient.	1	
Determines r	esponsi	veness / level of consciousness.	1	
Determines of	chief cor	nplaint / apparent life threats.	1	
Airway	- Open	s and assesses the airway (1 point) Inserts an adjunct as indicated (1 point).	2	
Breathing		sses breathing (1 point) Assures adequate ventilation (1 point). s appropriate oxygen therapy (1 point).	4	
Breatining		es any injury which may compromise breathing / ventilation (1 point).	7	
		s pulse (1 point).		
		ses skin (either skin color, temperature, or condition) (1 point).		
Circulation		ses for and controls major bleeding, if present (1 point).	4	
		s shock management (positions patient properly, conserves body heat) (1 point).		
Identifies natio		y and makes treatment / transport decision (based upon calculated Glasgow Coma Scale (GCS)).	1	
History Takir		y and makes treatment? transport decision (based upon calculated Glasgow Coma Scale (GCS)).	ı	
•	_	Il signs (must include blood pressure, pulse, and respiration)	1	
		SAMPLE history.	<u>'</u> 1	
Secondary A			ı	
Secondary A	ssessin	- Inspects and palpates scalp and ears** (1 point) Assesses eyes (1 point).		1
Head		- 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) Ausculates chest (1 point).	3	
Abdomen / P	elvis**	- Inspects and palpates abdomen (1 point) Assesses pelvis (1 point) Verbalizes assessment of genitalia / perineum, as needed (1 point).	3	
Lower Extrem	nities**	Inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point per leg).	2	
Upper Extren		Inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point per arm).	2	
Posterior thor		Inspects and palpates posterior thorax (1 point).		
		Inspects and palpates lumbar and buttocks areas (1 point).	2	
		injuries and wounds appropriately.	1	
Reassessme) Lbb		
		nd when to reassess the patient.	1	
Actual time	enaea:	TOTAL:	42	

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$\boldsymbol{\sim}$	-:4:		-	-:4-	
u	ш	Ca	ı	rite	ria:

☐ Failure to initiate or call for transport of the patient within ten (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

Critical Criteria explanation:	
OR	
Signature of examiner	Date (month, day, year)
	(/ // 3 /
Notes or elevifications	
Notes or clarifications:	

INDIANA EMERGENCY MEDICAL TECHNICIAN	(EMT) PSYCHOMOTOR SKILLS	EXAMINATION
PATIENT ASSESSMENT /	MANAGEMENT - MEDICAL	
Name of candidate	Name of examiner	
Signature of examiner	Date (month, day, year)	Scenario number

Actual time started:		Points Possible	Points Awarded
Takes or verbalizes a	appropriate personal protective equipment (PPE) precautions.	1	
Scene Size-up			
Determines the scene	e / situation is safe.	1	
Determines the mech	nanism of injury / nature of illness.	1	
Determines the numb		1	
Requests additional F	EMS assistance, if necessary.	1	
Considers stabilization		1	
Primary Survey / Res			
Verbalizes general im	npression of the patient.	1	
Determines responsi	veness / level of consciousness (Alert, Voice, Pain, Unresponsive)	1	
Determines chief con	nplaint / apparent life threats.	1	
Assesses Airway and Breathing	 - Assessment (1 point). - Assures adequate ventilation (1 point). - Initiates appropriate oxygenation or therapy based upon scenario (1 point). 	3	
	- Assesses / controls major bleeding (1 point) Checks for pulse (1 point) Assesses skin (either skin color, temperature, or condition) (1 point).	3	
	rity and makes treatment / transport decision.	1	
History Taking			
History of the Present Illness	- Onset (1 point) - Quality (1 point) - Severity (1 point) - Provocation (1 point) - Radiation (1 point) - Time (1 point) Clarifying questions of associated signs and symptoms related to OPQRST (2 points)	8	
Past Medical History	- Allergies (1 point) - Medications (1 point) - Last oral intake (1 point) - Past pertinent medical history (1 point) - Events leading to present illness (1 point)	5	
Secondary Assessm	ent		
Assesses Affected Body Part / System	- Cardiovascular - Neurological - Integumentary - Pulmonary - Musculoskeletal - Reproductive - Gastrointestinal (GI) / Genitourinary (GU) - Psychological / Social	5	
Vital Signs			
- Blood pressure (1 p		4	
States field impression	·	1	
Interventions (Verbal	izes proper interventions / treatment.)	1	
Reassessment			
	nd when to reassess the patient to determine changes in condition.	1	
Provides accurate ve	rbal report to arriving EMS unit.	1	
Actual time ended:	TOTAL:	42	

Critical	Crite	eri	a:

☐ Failure to initiate or call for transport of the patient within fifteen (15) minute time limit
Failure to take or verbalize appropriate PPE precautions
Failure to determine scene safety before approaching patient
Failure to voice and ultimately provide appropriate oxygen therapy
Failure to assess/provide adequate ventilation
Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
Failure to differentiate patient's need for immediate transportation versus continued assessment or treatment at the scene
Performs secondary examination before assessing and treating threats to airway, breathing and circulation
☐ Orders a dangerous or inappropriate intervention
Failure to provide accurate report to arriving EMS unit
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

Critical Criteria explanation:	
OR	
Signature of examiner	Date (month, day, year)
	(/ // 3 /
Notes or elevifications	
Notes or clarifications:	

INDIANA EMERGENCY MEDICAL TECHNICIAN (EMT) PSYCHOMOTOR SKILLS EXAMINATION				
CARDIAC ARREST MANAGEMENT / A	AUTOMATED EXTERNAL DEFIBRILLATO	R (AED)		
Name of candidate	Name of examiner			
Signature of examiner	Date (month, day	year)		
	-			
Actual time started:		Points	Points	
Actual time started:		Possible	Awarded	
Takes or verbalizes appropriate personal protective equipmer	nt (PPE) precautions.	1		
Determines the scene / situation is safe.		1		

Actual time started.		Possible	Awarded	
Takes or verbalizes appropriate personal protective equipment (PPE) precauti	ons.	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 and puls the examiner informs the candidate: "The patient is unresponsive, apnei		onds,		
Immediately begins chest compressions (adequate depth and rate; allows the	chest to recoil completely).	1		
Performs two (2) minutes of high quality, one-rescuer adult CPR.				
- Adequate depth and rate (1 point)				
- Correct compression-to-ventilation ratio (1 point)		5		
- Allows the chest to recoil completely (1 point)		3		
- Adequate volumes for each breath (1 point)				
- Minimal interruptions of no more than ten (10) seconds throughout (1 points)	nt)			
NOTE: After two (2) minutes (five (5) cycles), the candidate reassesses the patient and a second rescuer resumes compressions while the candidate operates the 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 a	nalysis.	1		
Ensures that all individuals are clear of the patient and delivers shock from AE	D.	1		
Immediately directs rescuer to resume chest compressions.		1		
Actual time ended:	TOTAL:	17		

Critical Criteria:

ontious ontonius
☐ Failure to take or verbalize appropriate PPE precautions
Failure to check responsiveness, then check breathing and pulse simultaneously for no more than ten (10) seconds
Failure to immediately begin chest compressions as soon as pulselessness is confirmed
Failure to demonstrate acceptable high-quality, one-rescuer adult CPR
☐ Interrupts CPR for more than ten (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 rhythm analysis and before delivering shock
(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

Critical Criteria explanation:	
OR	
Signature of examiner	Date (month, day, year)
Notes or clarifications	
Notes or clarifications:	

INDIANA EMERGENCY MEDICAL TECHNICIAN (EMT) PSYCHOMO			
		NATION	
BAG VALVE MASK (BVM) VENTILATION OF AN APNEI	C ADULT PATIENT		
Name of candidate Name of examiner			
Signature of examiner	Date (month, day, year	·)	
Actual time started:		Points Possible	Points Awarded
Takes or verbalizes appropriate personal protective equipment (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 the examiner informs the candidate: "The patient is unresponsive, apneic, and has			
Opens airway properly.	•	1	
NOTE: The examiner must now inform the candidate: "The mouth is full of secreti	ons 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 now clear."		
Opens the airway manually.		1	
Inserts oropharyngeal airway.		1	
NOTE: The examiner must now inform the candidate: "No gag reflex is present an	d the patient accepts	the airway a	adjunct."
Ventilates the patient immediately using a BVM device unattached to oxygen.** ** Award this point if candidate elects to ventilate initially with BVM attached to reservoir As first ventilation is delivered within thirty (30) seconds.	and oxygen so long	1	
NOTE: The examiner must now inform the candidate that ventilation is being prop	erly performed witho	ut difficulty.	
Rechecks pulse for no more than ten (10) seconds.		1	
Attaches the BVM assembly (mask, bag, and reservoir) to oxygen (fifteen (15) liters per	minute)	1	
Ventilates the patient adequately			
- Proper volume to cause visible chest rise (1 point)		2	
- Proper rate of ten (10) to twelve (12) per minute (one (1) ventilation every five (5) to six ((6) seconds) (1 point)		
NOTE: The examiner must now ask the candidate: "How would you know if you are delivering appropriate volumes with each ventilation?			
Actual time ended:	TOTAL:	16	
Critical Criteria: ☐ After suctioning the patient, failure to initiate ventilations within thirty (30) seconds or thirty (30) seconds 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 simultaneously for	·	•	an

After suctioning the patient, failure to initiate ventilations within thirty (30) seconds or interrupts ventilations for greater than
thirty (30) seconds 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 simultaneously for no more than 10 seconds
Failure to voice and ultimately provide high oxygen concentration [at least 85%]
Failure to ventilate the patient at a rate of ten (10) to twelve (12) per minute (one (1) ventilation every five (5) to six (6) seconds
Failure to provide adequate volumes per breath (maximum two (2) errors per minute permissible)
Insertion or use of any adjunct in a manner dangerous to the patient
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

Critical Criteria explanation:	
OR	
Signature of examiner	Date (month, day, year)
Notes or clarifications:	<u> </u>
Notes or clarifications:	

INDIANA EMERGENCY MEDICAL TECHNICIAN	(EMT) PSYCHOMOTOR SKILLS E	XAMI	NATION	
	AIRWAY DEVICE			
Name of candidate	Name of examiner			
Signature of examiner	Date (month, day, year)	Device		
NOTE: If candidate elects to initially ventilate with a bag valve mask (B steps denoted by "**" so long as first ventilation is delivered within thi		full cre	edit must be a	warded for
Actual time started:			Points Possible	Points Awarded
Takes or verbalizes appropriate personal protective equipment (PP	E) precautions.		1	
Opens the airway manually.			1	
Elevates tongue, inserts simple adjunct (oropharyngeal or nasopha			1	
NOTE: The examiner must now inform the candidate: "No gag		cepts		djunct."
Ventilates the patient immediately using a BVM device unattached to	to oxygen.**		1	
Ventilates the patient with room air.**	1-4::	:41	1	1 41
NOTE: The examiner must now inform the candidate that ventil pulse oximetry indicates the patient's blood oxygen saturation	is 85%.	witho	ut aimicuity a	and the
Attaches oxygen reservoir to BVM device and connects to high-flow (twelve (12) to fifteen (15) liters per minute).	30 0		1	
Ventilates patient at a rate of ten (10) to twelve (12) per minute (one seconds) with appropriate volumes	e (1) ventilation every five (5) to six (6	5)	1	
NOTE: After thirty (30) seconds, examiner auscultates and report medical direction has ordered insertion of a supraglottic airwa				and
Checks / prepares supraglottic airway device.			1	
Lubricates distal tip of the device (may be verbalized).			1	
NOTE: The examiner must remove the oropharyngeal airway (Cinsert the device.	OPA) and move out of the way whe	n the	candidate is	prepared to
Positions head properly.			1	
Performs a tongue-jaw lift.			1	
Inserts device to proper depth.			1	
Secures device in patient (inflates cuffs with proper volumes and imme			1	
Ventilates patient and confirms proper ventilation (correct lumen an bilaterally over lungs and over the epigastrium.	, .	tion	1	
Adjusts ventilation as necessary (ventilates through additional lume ventilation is optimized).	n or slightly withdraws tube until		1	
Verifies proper tube placement by secondary confirmation such as colorimetric device.	error detecting device (EDD) or		1	
NOTE: The examiner must now ask the candidate: "How would ventilation?	I you know if you are delivering ap	propri	iate volumes	with each
Secures device or confirms that the device remains properly secure	ed.		1	
Ventilates patient at proper rate and volume while observing pulse of			1	
Actual time ended:	TO:	ΓAL:	18	
Critical Criteria: Failure to initiate ventilations within thirty (30) seconds after taking for greater than thirty (30) seconds at any time Failure to take or verbalize appropriate PPE precautions Failure to voice and ultimately provide high oxygen concentration Failure to ventilate the patient at a rate of ten (10) to twelve (12) Failure to provide adequate volumes per breath (maximum two (Failure to pre-oxygenate patient prior to insertion of the supragion of Failure to insert the supragion aliminately remove the symposition of inflate cuff(s) properly and immediately remove the symposition of the supragion over lungs and over the epigastrium Insertion or use of any adjunct in a manner dangerous to the patent of the patent o	n (at least 85%) per minute (one (1) ventilation every (2) errors per minute permissible ottic airway device or location within three (3) attempts ringe et lumen and proper insertion depth)	five (5	i) to six (6) se	conds)

Critical Criteria explanation:	
OR	
Signature of examiner	Date (month, day, year)
Notes or clarifications	
Notes or clarifications:	

INDIANA EMERGENCY MEDICAL TECHNICIA		SKILLS EXAMIN	NATION	
	TION (SUPINE PATIENT)			
Name of candidate	Name of examiner			
Signature of examiner	Di	ate (month, day, year,)	
Actual time started:			Points Possible	Points Awarded
Takes or verbalizes appropriate personal protective equipment (PF	PE) precautions.		1	
Directs assistant to place / maintain head in the neutral, in-line pos			1	
Directs assistant to maintain manual stabilization of the head.			1	
Reassesses motor, sensory, and circulatory function in each extre	nity.		1	
Applies appropriately sized extrication collar.			1	
Positions the immobilization device appropriately.			1	
Directs movement of the patient onto the device without compromi	sing the integrity of the spin	ie.	1	
Applies padding to the void between the torso and the device as n	ecessary.		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 extre	nity.		1	
Actual time ended:		TOTAL:	14	
Failure to immediately direct or take manual stabilization of the head Failure to 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 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 Failure to reassess motor, sensory and circulatory functions in each extremity after immobilizing patient to the device Failure to manage the patient as a competent EMT Exhibits unacceptable affect with patient or other personnel Uses or orders a dangerous or inappropriate intervention You must factually document your rationale for checking any of the above Critical Criteria in the box provided on this form. Critical Criteria explanation:				
OR				
Signature of examiner	Di	ate (month, day, year,)	
Makes an abuiltiesticus				
Notes or clarifications:				

INDIANA EMERGENCY MEDICAL TECHNICIAN (EMT) PSYCHOMOTOR SKILLS EXAMINATION						
BLEEDING CONTROL / SHOCK MANAGEMENT Name of candidate Name of examiner						
Name of candidate						
Signature of examiner Date (month, day, ye	ear)					
Succession States (month, day, your)						
Actual time started:	Points Possible	Points Awarded				
Takes or verbalizes appropriate personal protective equipment (PPE) precautions.	1					
Applies direct pressure to the wound.	1					
Note: The examiner must now inform the candidate that the wound continues to heavily bleed.						
Applies tourniquet.	1					
Note: The examiner must now inform the candidate that the patient is now showing signs and symptoms inc		perfusion.				
Properly positions the patient.	1 1					
Administers high concentration of oxygen.	1					
Initiates steps to prevent heat loss from the patient.	1					
Indicates 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 timely manner 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 You must factually document your rationale for checking any of the above Critical Criteria in the box provided on this form. Critical Criteria explanation:						
OR Signature of examiner Date (month, day, yet)	ar)					
·						
Notes or clarifications:						