

National Registry Skill Sheets

Airway, Oxygen and Ventilation Skills/Upper Airway Adjuncts and Suction

Bag-Valve-Mask/Apneic Patient

Bleeding Control/Shock Management

Cardiac Arrest Management/AED

Immobilization Skills/Joint Injury

Immobilization Skills/Long Bone Injury

Immobilization Skills/Traction Splinting

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Ventilatory Management/Endotracheal Intubation

Ventilatory Management/Esophageal Obturator Airway Insertion Following an Unsuccessful Endotracheal Intubation Attempt

Airway, Oxygen and Ventilation Skills

Upper Airway Adjuncts and Suction

Start Time: _____ Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
OROPHARYNGEAL AIRWAY		
Takes, or verbalizes, body substance isolation precautions	1	
Selects appropriately sized airway	1	
Measures airway	1	
Inserts airway without pushing the tongue posteriorly	1	
<i>Note: The examiner must advise the candidate that the patient is gagging and becoming conscious</i>		
Removes the oropharyngeal airway	1	
SUCTION		
<i>Note: The examiner must advise the candidate to suction the patient's airway</i>		
Turns on/prepares suction device	1	
Assures presence of mechanical suction	1	
Inserts the suction tip without suction	1	
Applies suction to the oropharynx/nasopharynx	1	
NASOPHARYNGEAL AIRWAY		
<i>Note: The examiner must advise the candidate to insert a nasopharyngeal airway</i>		
Selects appropriately sized airway	1	
Measures airway	1	
Verbalizes lubrication of the nasal airway	1	
Fully inserts the airway with the bevel facing toward the septum	1	
TOTAL:	13	

CRITICAL CRITERIA

- _____ Did not take, or verbalize, body substance isolation precautions
- _____ Did not obtain a patent airway with the oropharyngeal airway
- _____ Did not obtain a patent airway with the nasopharyngeal airway
- _____ Did not demonstrate an acceptable suction technique
- _____ Inserted any adjunct in a manner dangerous to the patient

Bag-Valve-Mask Apneic Patient

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Voices opening the airway	1	
Voices inserting an airway adjunct	1	
Selects appropriately sized mask	1	
Creates a proper mask-to-face seal	1	
Ventilates patient at no less than 800 ml volume <i>(The examiner must witness for at least 30 seconds)</i>	1	
Connects reservoir and oxygen	1	
Adjusts liter flow to 15 liters/minute or greater	1	
<i>The examiner indicates arrival of a second EMT. The second EMT is instructed to ventilate the patient while the candidate controls the mask and the airway</i>		
Voices re-opening the airway	1	
Creates a proper mask-to-face seal	1	
Instructs assistant to resume ventilation at proper volume per breath <i>(The examiner must witness for at least 30 seconds)</i>	1	
TOTAL:	11	

CRITICAL CRITERIA

- _____ Did not take, or verbalize, body substance isolation precautions
- _____ Did not immediately ventilate the patient
- _____ Interrupted ventilations for more than 20 seconds
- _____ Did not provide high concentration of oxygen
- _____ Did not provide, or direct assistant to provide, proper volume/ breath (more than two (2) ventilations per minute are below 800 ml)
- _____ Did not allow adequate exhalation

Bleeding Control/Shock Management

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	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 must now inform the candidate that the wound continues to bleed.		
Applies an additional dressing to the wound	1	
Note: The examiner must now inform the candidate that the wound still continues to bleed. The second dressing does not control the bleeding.		
Locates and applies pressure to appropriate arterial pressure point	1	
Note: The examiner must now inform the candidate that the bleeding is controlled		
Bandages the wound	1	
Note: The examiner must now inform the candidate the patient is now showing signs and symptoms indicative of hypoperfusion		
Properly positions the patient	1	
Applies high concentration oxygen	1	
Initiates steps to prevent heat loss from the patient	1	
Indicates the need for immediate transportation	1	
TOTAL:	10	

CRITICAL CRITERIA

- _____ Did not take, or verbalize, body substance isolation precautions
- _____ Did not apply high concentration of oxygen
- _____ Applied a tourniquet before attempting other methods of bleeding control
- _____ Did not control hemorrhage in a timely manner
- _____ Did not indicate a need for immediate transportation

Cardiac Arrest Management/AED With Bystander CPR in Progress

Start Time: _____ Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
ASSESSMENT		
Takes, or verbalizes, body substance isolation precautions	1	
Briefly questions the rescuer about arrest events	1	
Turns on AED power	1	
Attached AED to the Patient	1	
Directs rescuer to stop CPR and ensures all individuals are clear of the patient	1	
Initiates analysis of the rhythm	1	
Delivers shock	1	
Directs resumption of CPR	1	
TRANSITION		
Gathers additional information about arrest event	1	
Confirms effectiveness of CPR (ventilation and compressions)	1	
INTEGRATION		
Verbalizes or directs insertion of a 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	
Assures adequate CPR continues without unnecessary/prolonged interruption	1	
Continues CPR for 2 minutes	1	
Directs rescuer to stop CPR and ensures all individuals are clear of the patient	1	
Initiates analysis of the rhythm	1	
Delivers shock	1	
Directs resumption of CPR	1	
TRANSPORTATION		
Verbalizes transportation of patient	1	
TOTAL:	20	

CRITICAL CRITERIA

- _____ Did not take, or verbalize, body substance isolation precautions
- _____ Did not evaluate the need for immediate use of the AED
- _____ Did not immediately direct initiation/resumption of ventilation/compressions at appropriate times
- _____ Did not assure all individuals were clear of patient before delivering each shock
- _____ Did not operate the AED properly (inability to deliver shock)
- _____ Prevented the defibrillator from delivering indicated stacked shocks

Immobilization Skills

Joint Injury

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	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: The examiner acknowledges "motor, sensory and circulatory function are present and normal!"		
Selects the proper splinting material	1	
Immobilizes the site of the injury	1	
Immobilizes the bone above the injured joint	1	
Immobilizes the bone below the injured joint	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!"		
TOTAL:	8	

CRITICAL CRITERIA

_____ Did not support the joint so that the joint did not bear distal weight

_____ Did not immobilize the bone above and below the injured site

_____ Did not reassess motor, sensory and circulatory function in the injured extremity before and after splinting

Immobilization Skills Long Bone Injury

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	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	
<i>Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"</i>		
Measures the splint	1	
Applies 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	
<i>Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"</i>		
TOTAL:	10	

CRITICAL CRITERIA

_____ Grossly moves the injured extremity

_____ Did not immobilize the joint above and the joint below the injury site

_____ Did not reassess motor, sensory and circulatory function in the injured extremity before and after splinting

Immobilization Skills

Traction Splinting

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Directs application of manual stabilization of the injured leg	1	
Directs the application of manual traction	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"		
Prepares/adjusts splint to the proper length	1	
Positions the splint next to the injured leg	1	
Applies the proximal securing device (e.g., ischial strap)	1	
Applies the distal securing device (e.g., ankle hitch)	1	
Applies mechanical traction	1	
Positions/secures the 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 "motor, sensory and circulatory function are present and normal"		
Note: The examiner must ask the candidate how he/she would prepare the patient for transportation		
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:	14	

CRITICAL CRITERIA

- _____ Loss of traction at any point after it was applied
- _____ Did not reassess motor, sensory and circulatory function in the injured extremity before and after splinting
- _____ The foot was excessively rotated or extended after splint was applied
- _____ Did not secure the ischial strap before taking traction
- _____ Final immobilization failed to support the femur or prevent rotation of the injured leg
- _____ Secured the leg to the splint before applying mechanical traction

Note: If the Sagar splint or the Kendricks Traction Device is used without elevating the patient's leg, application of manual traction is not necessary. The candidate should be awarded one (1) point as if manual traction were applied.

Note: If the leg is elevated at all, manual traction must be applied before elevating the leg. The ankle hitch may be applied before elevating the leg and used to provide manual traction.

Mouth to Mask With Supplemental Oxygen

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Connects one-way valve to mask	1	
Opens patient's airway or confirms patient's airway is open (manually or with adjunct)	1	
Establishes and maintains a proper mask to face seal	1	
Ventilates the patient at the proper volume and rate (800-1200 ml per breath/10-20 breaths per minute)	1	
Connects the mask to high concentration of oxygen	1	
Adjusts flow rate to at least 15 liters per minute	1	
Continues ventilation of the patient at the proper volume and rate (800-1200 ml per breath/10-20 breaths per minute)	1	
Note: The examiner must witness ventilations for at least 30 seconds		
TOTAL:	8	

CRITICAL CRITERIA

_____ Did not take, or verbalize, body substance isolation precautions

_____ Did not adjust liter flow to at least 15 liters per minute

_____ Did not provide proper volume per breath (more than 2 ventilations per minute were below 800 ml)

_____ Did not ventilate the patient at a rate a 10-20 breaths per minute

_____ Did not allow for complete exhalation

Oxygen Administration

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Assembles the regulator to the tank	1	
Opens the tank	1	
Checks for leaks	1	
Checks tank pressure	1	
Attaches non-rebreather mask to oxygen	1	
Prefills reservoir	1	
Adjusts liter flow to 12 liters per minute or greater	1	
Applies and adjusts the mask to the patient's face	1	
Note: The examiner must advise the candidate that the patient is not tolerating the non-rebreather mask. The medical director has ordered you to apply a nasal cannula to the patient.		
Attaches nasal cannula to oxygen	1	
Adjusts liter flow to six (6) liters per minute or less	1	
Applies nasal cannula to the patient	1	
Note: The examiner must advise the candidate to discontinue oxygen therapy		
Removes the nasal cannula from the patient	1	
Shuts off the regulator	1	
Relieves the pressure within the regulator	1	
TOTAL:	15	

CRITICAL CRITERIA

_____ Did not take, or verbalize, body substance isolation precautions

_____ Did not assemble the tank and regulator without leaks

_____ Did not prefill the reservoir bag

_____ Did not adjust the device to the correct liter flow for the non-rebreather mask (12 liters per minute or greater)

_____ Did not adjust the device to the correct liter flow for the nasal cannula (6 liters per minute or less)

Patient Assessment/Management—Medical

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

		Points Possible	Points Awarded				
Takes, or verbalizes, body substance isolation precautions		1					
SCENE SIZE-UP							
Determines the scene is safe		1					
Determines the mechanism of injury/nature of illness		1					
Determines the number of patients		1					
Requests additional help if necessary		1					
Considers stabilization of spine		1					
INITIAL ASSESSMENT							
Verbalizes general impression of the patient		1					
Determines responsiveness/level of consciousness		1					
Determines chief complaint/apparent life threats		1					
Assesses airway and breathing	Assessment Indicates appropriate oxygen therapy Assures adequate ventilation	1 1					
Assesses circulation	Assesses/controls major bleeding Assesses pulse Assesses skin (color, temperature, and condition)	1 1 1					
Identifies priority patients/makes transport decisions		1					
FOCUSED HISTORY AND PHYSICAL EXAMINATION/RAPID ASSESSMENT							
Signs and symptoms (Assess history of present illness)		1					
Respiratory	Cardiac	Altered Mental Status	Allergic Reaction	Poisoning/Overdose	Environmental Emergency	Obstetrics	Behavioral
<ul style="list-style-type: none"> Onset? Provokes? Quality? Radiates? Severity? Time? Interventions? 	<ul style="list-style-type: none"> Onset? Provokes? Quality? Radiates? Severity? Time? Interventions? 	<ul style="list-style-type: none"> Description of the episode. Onset? Duration? Associated Symptoms? Evidence of Trauma? Interventions? Seizures? Fever? 	<ul style="list-style-type: none"> History of allergies? What were you exposed to? How were you exposed? Effects? Progression? Interventions? 	<ul style="list-style-type: none"> Substance? When did you ingest/become exposed? How much did you ingest? Over what time period? Interventions? Estimated weight? 	<ul style="list-style-type: none"> Source? Environment? Duration? Loss of consciousness? Effects—general or local? 	<ul style="list-style-type: none"> Are you pregnant? How long have you been pregnant? Pain or contractions? Bleeding or discharge? Do you feel the need to push? Last menstrual period? 	<ul style="list-style-type: none"> How do you feel? Determine suicidal tendencies. Is the patient a threat to self or others? Is there a medical problem? Interventions?

Patient Assessment/Management—Medical (continued)

Allergies	1	
Medications	1	
Past pertinent history	1	
Last oral intake	1	
Event leading to present (rule out trauma)	1	
Performs focused physical examination (assesses affected body part/system or, if indicated, completes rapid assessment)	1	
Vitals (obtains baseline vital signs)	1	
Interventions (obtains medical direction or verbalizes standing order for medication interventions and verbalizes proper additional intervention/treatment)	1	
Transport (re-evaluates the transport decision)	1	
Verbalizes the consideration for completing a detailed physical examination	1	
ONGOING ASSESSMENT (verbalized)		
Repeats initial assessment	1	
Repeats vital signs	1	
Repeats focused assessment regarding patient complaint or injuries	1	
TOTAL:	30	

CRITICAL CRITERIA

- _____ Did not take, or verbalize, body substance isolation precautions when necessary
- _____ Did not determine scene safety
- _____ Did not obtain medical direction or verbalize standing orders for medical interventions
- _____ Did not provide high concentration of oxygen
- _____ Did not find or manage problems associated with airway, breathing, hemorrhage or shock (hypoperfusion)
- _____ Did not differentiate patient's need for transportation versus continued assessment at the scene
- _____ Did detailed or focused history/physical examination before assessing the airway, breathing and circulation
- _____ Did not ask questions about the present illness
- _____ Administered a dangerous or inappropriate intervention

Patient Assessment/Management—Trauma

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

		Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions		1	
SCENE SIZE-UP			
Determines the scene is safe		1	
Determines the mechanism of injury		1	
Determines the number of patients		1	
Requests additional help if necessary		1	
Considers stabilization of spine		1	
INITIAL ASSESSMENT			
Verbalizes general impression of the patient		1	
Determines responsiveness/level of consciousness		1	
Determines chief complaint/apparent life threats		1	
Assesses airway and breathing	Assessment	1	
	Initiates appropriate oxygen therapy	1	
	Assures adequate ventilation	1	
	Injury management	1	
Assesses circulation	Assesses/controls major bleeding	1	
	Assesses pulse	1	
	Assesses skin (color, temperature and condition)	1	
Identifies priority patients/makes transport decision		1	
FOCUSED HISTORY AND PHYSICAL EXAMINATION/RAPID ASSESSMENT			
Selects appropriate assessment (focused or rapid assessment)		1	
Obtains, or directs assistance to obtain, baseline vital signs		1	
Obtains S.A.M.P.L.E. history		1	
DETAILED PHYSICAL EXAMINATION			
Assesses the head	Inspects and palpates the scalp and ears	1	
	Assesses the eyes	1	
	Assesses the facial areas including oral and nasal areas	1	
Assesses the neck	Inspects and palpates the neck	1	
	Assesses for JVD	1	
	Assesses for tracheal deviation	1	
Assesses the chest	Inspects	1	
	Palpates	1	
	Auscultates	1	
Assesses the abdomen/pelvis	Assesses the abdomen	1	
	Assesses the pelvis	1	
	Verbalizes assessment of genitalia/perineum as needed	1	

Patient Assessment/Management—Trauma (continued)

Assesses the extremities	1 point for each extremity includes inspection, palpation, assessment of motor, sensory and circulatory function	4	
Assesses the posterior	Assesses thorax Assesses lumbar	1 1	
Manages secondary injuries and wounds appropriately 1 point for appropriate management of the secondary injury/wound		1	
Verbalizes re-assessment of the vital signs		1	
TOTAL:		40	

CRITICAL CRITERIA

- _____ Did not take, or verbalize, body substance isolation precautions
- _____ Did not determine scene safety
- _____ Did not assess for spinal protection
- _____ Did not provide for spinal protection when indicated
- _____ Did not provide high concentration of oxygen
- _____ Did not find, or manage, problems associated with airway, breathing, hemorrhage or shock (hypoperfusion)
- _____ Did not differentiate patient's need for transportation versus continued assessment at the scene
- _____ Did other detailed physical examination before assessing the airway, breathing and circulation
- _____ Did not transport patient within (10) minute time limit

Spinal Immobilization Seated Patient

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	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	
Reassesses 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	
Secures 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	

CRITICAL CRITERIA

- _____ Did not immediately direct, or take, manual immobilization of the head
- _____ Released, or ordered release of, manual immobilization before it was maintained mechanically
- _____ Patient manipulated, or moved excessively, causing potential spinal compromise
- _____ Device moved 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 the neutral position
- _____ Did not assess motor, sensory and circulatory function in each extremity after voicing immobilization to the long board
- _____ Immobilized head to the board before securing the torso

Spinal Immobilization Supine Patient

Start Time: _____

Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	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	
Reassesses motor, sensory and circulatory function in each extremity	1	
Applies appropriately sized extrication collar	1	
Positions the immobilization device appropriately	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	

CRITICAL CRITERIA

- _____ Did not immediately direct, or take, manual immobilization of the head
- _____ Released, or ordered release of, manual immobilization before it was maintained mechanically
- _____ Patient manipulated, or moved excessively, causing potential spinal compromise
- _____ 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 the neutral position
- _____ Did not assess motor, sensory and circulatory function in each extremity after immobilization to the device
- _____ Immobilized head to the board before securing the torso

Ventilatory Management Dual Lumen Device Insertion Following an Unsuccessful Endotracheal Intubation Attempt

Start Time: _____ Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

		Points Possible	Points Awarded
Continues body substance isolation precautions		1	
Confirms the patient is being properly ventilated with high percentage oxygen		1	
Directs the assistant to hyper-oxygenate the patient		1	
Checks/prepares the airway device		1	
Lubricates the distal tip of the device (may be verbalized)		1	
Note: The examiner should remove the OPA and move out of the way when the candidate is prepared to insert the device			
Positions the patient's head properly		1	
Performs a tongue-jaw lift		1	
USES COMBITUBE	USES THE PTL		
Inserts device in the mid-line and to the depth so that the printed ring is at the level of the teeth	Inserts the device in the mid-line until the bite block flange is at the level of the teeth	1	
Inflates the pharyngeal cuff with the proper volume and removed the syringe	Secures the strap	1	
Inflates the distal cuff with the proper volume and removes the syringe	Blows into tube #1 to adequately inflate both cuffs	1	
Attaches/directs attachment of BVM to the first (esophageal placement) lumen and ventilates		1	
Confirms placement and ventilation through the correct lumen by observing chest rise, auscultation over the epigastrium and bilaterally over each lung		1	
Note: The examiner states, "You do not see rise and fall of the chest and hear sounds only over the epigastrium!"			
Attaches/directs attachment of BVM to the second (endotracheal placement) lumen and ventilates		1	
Confirms placement and ventilation through the correct lumen by observing chest rise, auscultation over the epigastrium and bilaterally over each lung		1	
Note: The examiner states, "You see rise and fall of the chest, there are no sounds over the epigastrium and breath sounds are equal over each lung!"			
Secures device or confirms that the device remains properly secured		1	
TOTAL:		15	

Ventilatory Management Dual Lumen Device Insertion Following an Unsuccessful Endotracheal Intubation Attempt (continued)

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation precautions
- Did not initiate ventilations within 30 seconds
- Interrupted ventilations for more than 30 seconds at any time
- Did not hyper-oxygenate the patient prior to placement of the dual lumen airway device
- Did not provide adequate volume per breath (maximum 2 errors/minute permissible)
- Did not ventilate the patient at a rate of at least 10 breaths per minute
- Did not insert the dual lumen airway device at a proper depth or at the proper place within 3 attempts
- Did not inflate both cuffs properly
- Combitube—Did not remove the syringe immediately following the inflation of each cuff
- PTL—Did not secure the strap prior to cuff inflation
- Did not confirm, by observing chest rise and auscultation over the epigastrium and bilaterally over each lung, that the proper lumen of the device was being used to ventilate the patient
- Inserted any adjunct in a manner that was dangerous to the patient

Ventilatory Management Endotracheal Intubation

Start Time: _____ Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

Note: If a candidate elects to initially ventilate the patient with a BVM attached to a reservoir and oxygen, full credit must be awarded for steps denoted by "***" provided the first ventilation is delivered within the initial 30 seconds

	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates the patient's tongue and inserts a simple airway adjunct (oropharyngeal/nasopharyngeal airway)	1	
Note: The examiner must now inform the candidate "no gag reflex is present and the patient accepts the airway adjunct"		
**Ventilates the patient immediately using a BVM device unattached to oxygen	1	
**Hyperventilates the patient with room air	1	
Note: The examiner must now inform the candidate that ventilation is being properly performed without difficulty		
Attaches the oxygen reservoir to the BVM	1	
Attaches the BVM to high flow oxygen (15 liter per minute)	1	
Ventilates the patient at the proper volume and rate (800-1200 ml/breath and 10-20 breaths/minute)	1	
Note: After 30 seconds, the examiner must auscultate the patient's chest and inform the candidate that breath sounds are present and equal bilaterally and medical direction has ordered endotracheal intubation. The examiner must now take over ventilation of the patient.		
Directs assistant to hyper-oxygenate the patient	1	
Identifies/selects the proper equipment for endotracheal intubation	1	
Checks equipment	1	
Checks for cuff leaks Checks laryngoscope operation and bulb tightness	1	
Note: The examiner must remove the OPA and move out of the way when the candidate is prepared to intubate the patient.		
Positions the patient's head properly	1	
Inserts the laryngoscope blade into the patient's mouth while displacing the patient's tongue laterally	1	
Elevates the patient's mandible with the laryngoscope	1	
Introduces the endotracheal tube and advances the tube to the proper depth	1	
Inflates the cuff to the proper pressure	1	
Disconnects the syringe from the cuff inlet port	1	
Directs assistant to ventilate the patient	1	
Confirms proper placement of the endotracheal tube by auscultation bilaterally and over the epigastrium	1	
Note: The examiner must ask, "If you had proper placement, what would you expect to hear?"		
Secures the endotracheal tube (may be verbalized)	1	
TOTAL:	21	

Ventilatory Management Endotracheal Intubation (continued)

CRITICAL CRITERIA

- Did not take or verbalize body substance isolation precautions when necessary
- Did not initiate ventilation within 30 seconds after applying gloves or interrupts ventilations for greater than 30 seconds at any time
- Did not voice or provide high oxygen concentrations (15 liter/minute or greater)
- Did not ventilate the patient at a rate of at least 10 breaths per minute
- Did not provide adequate volume per breath (maximum of 2 errors per minute permissible)
- Did not hyper-oxygenate the patient prior to intubation
- Did not successfully intubate the patient within 3 attempts
- Used the patient's teeth as a fulcrum
- Did not assure proper tube placement by auscultation bilaterally over each lung **and** over the epigastrium
- The stylette (if used) extended beyond the end of the endotracheal tube
- Inserted any adjunct in a manner that was dangerous to the patient
- Did not immediately disconnect the syringe from the inlet port after inflating the cuff

Ventilatory Management Esophageal Obturator Airway Insertion Following an Unsuccessful Endotracheal Intubation Attempt

Start Time: _____ Date: _____

Stop Time: _____

Candidate's Name: _____

Evaluator's Name: _____

	Points Possible	Points Awarded
Continues body substance isolation precautions	1	
Confirms the patient is being ventilated with high percentage oxygen	1	
Directs the assistant to hyper-oxygenate the patient	1	
Identifies/selects the proper equipment for insertion of EOA	1	
Assembles the EOA	1	
Tests the cuff for leaks	1	
Inflates the mask	1	
Lubricates the tube (may be verbalized)	1	
Note: The examiner should remove the OPA and move out of the way when the candidate is prepared to insert the device		
Positions the head properly with the neck in the neutral or slightly flexed position	1	
Grasps and elevates the patient's tongue and mandible	1	
Inserts the tube in the same direction as the curvature of the pharynx	1	
Advances the tube until the mask is sealed against the patient's face	1	
Ventilates the patient while maintaining a tight mask-to-face seal	1	
Directs confirmation of placement of EOA by observing for chest rise and auscultation over the epigastrium and bilaterally over each lung	1	
Note: The examiner must acknowledge adequate chest rise, bilateral breath sounds and absent sounds over the epigastrium		
Inflates the cuff to the proper pressure	1	
Disconnects the syringe from the inlet port	1	
Continues ventilation of the patient	1	
TOTAL:	17	

CRITICAL CRITERIA

- _____ Did not take or verbalize body substance isolation precautions
- _____ Did not initiate ventilations within 30 seconds
- _____ Interrupted ventilations for more than 30 seconds at any time
- _____ Did not direct hyper-oxygenation of the patient prior to placement of the EOA
- _____ Did not successfully place the EOA within 3 attempts
- _____ Did not ventilate at a rate of at least 10 breaths per minute
- _____ Did not provide adequate volume per breath (maximum 2 errors/minute permissible)
- _____ Did not assure proper tube placement by auscultation bilaterally and over the epigastrium
- _____ Did not remove the syringe after inflating the cuff
- _____ Did not successfully ventilate the patient
- _____ Did not provide high flow oxygen (15 liters per minute or greater)
- _____ Inserted any adjunct in a manner that was dangerous to the patient