



# **EMERGENCY MEDICAL SERVICES SKILLS VERIFICATION MANUAL**

**For PSFA, EMR, EMT:  
Public Safety-First Aid, Emergency Medical  
Responder, Emergency Medical Technician**

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## Introduction

This manual presents a structured, organized approach to conducting EMS skills psychomotor evaluations. Competency demonstration/verification is used for skills evaluations when recertifying as EMR/First Responder, Public Safety-First Aid (PSFA), or EMT.

Skills proficiency demonstration is an integral part of the evaluation process required of EMS responders. The individual skill sheets provide specific details for each EMS skill. Each sheet lists the critical criteria and specific steps to be completed for each skill. As such, these skill sheets serve as both a training guide and an evaluation instrument. Each student should have a set of skill sheets and should be responsible to maintain them and bring them to class as directed by the instructor. All individual skill sheets are available on [www.MCVFOA.ORG](http://www.MCVFOA.ORG)

Each skill will require a careful demonstration by the instructor in conjunction with associated lecture and simulation instruction during the course of the class. After the demonstration, students should break into small groups and practice using their own skill sheets. Careful monitoring of the individual groups will ensure the procedures are fully understood by all students. The following is a guide to assist all personnel involved in the testing process.

For every skill, the student must verbalize or utilize appropriate body substance isolation precautions. For every skill, the student will be presented with a given scenario that requires a specific performance. As the student performs the skill, the proctor will observe their performance and note either successful completion or omission of each step. Many steps have additional components, which depending on their criticality to the scenario may be required in order to successfully complete the step. The student will be required to demonstrate proficiency for each component labeled as critical criteria, failure to do so is automatic failure of that skill.

It should be understood that the following skills are not a complete description of every skill that an EMS responder is expected to perform. No realistic test would provide this wide a spectrum of examination. However, these skills do provide a method to satisfactorily ensure that EMS personnel are able to perform at a prescribed standard in most prehospital medical emergencies.

## Skills Competency Verification Process

**Skills Competency Verification shall be utilized for EMT skills recertification, EMR skills and PSFA skills.** The Skills Competency Verification method allows for some instruction or proctor input. Skills competency shall be verified by direct observation of simulated patient contact. Skills competency shall only be verified by an individual who is currently certified or licensed as an EMT, Advanced EMT, Paramedic, RN, PA, or MD, and who shall be designated by Tuolumne County EMS Agency.

## Organizing the Skills Evaluation

### Facility

Skill stations for the Competency Verification may be in direct sight of waiting students. Every effort should be taken to limit distractions during the evaluations. The facility may need to have a waiting area to accommodate the number of students scheduled to test. Each skill station should have a Proctor who will verbally instruct students on the skill being evaluated and who will directly observe each student's performance during the skill.

### Equipment List

This is an *approximate* list of equipment needed to complete EMS skills testing. You may need more than one of each listed item. See each individual "skill station management guide" for equipment needs specific to skill.

- Personal protective equipment
- Watch
- Blood pressure cuff
- Stethoscope
- Penlight
- Tape
- Pen
- Note pad
- Tables
- Chairs
- Blanket or mat for patient
- Triangular bandages (cravats)
- Oxygen tank and regulator
- Nasopharyngeal airway set
- Oropharyngeal airway set
- BVM with oxygen tubing
- Suction unit
- Airway mannequin
- CPR mannequin
- Mannequin or other device for wound treatments
- OB mannequin
- OB kit supplies (Scalpel, OB pad, blanket, towels, gauze sponges, bulb syringe, umbilical clamps, plastic bags for placenta, towelettes)
- Training automated external defibrillator (AED)
- Dressings and bandaging materials
- C-Collar adjustable
- Backboard and matching straps
- Short board OSS or KED

- Head bed or appropriate neck support
- Splinting material (cardboard, SAM splint, wire, other)
- Traction Splint (Sager, Kendrick, CT-6 or materials for improvised traction device)

### **Staff**

Whenever possible, it is recommended to form a core group of regular examination personnel. This will help promote teamwork and consistency among the examination staff. Personnel needed to complete skills testing vary depending on the number of students involved and time parameters. NREMT recommends the following examination staff:

- One (1) Examination Coordinator/Proctor
- Six (6) skill station proctors
- Three (3) EMS assistants
- Four (4) simulated patients

### **Responsibility of Exam Staff**

#### **Exam Coordinator**

Coordinators should be currently certified or licensed to perform every aspect of the exam process. The exam coordinator is responsible for the overall planning, implementation, quality control and validation of the examination process. Specific duties include orientation of the students and documentation of the examination staff

#### **Skill Station Proctors**

#### **SKILLS COMPETENCY VERIFICATION**

Proctors should have current certification or licensure to perform the skill they will be evaluating. The role as a skill station proctor is critically important. Skill station proctors must maintain a professional and impartial attitude at all times. You are to serve as an observer and recorder of the student's actions based on the criteria listed on the score sheet. You should read and understand the orientation information before entering the specific skill station you will be evaluating. Skills competency shall be verified by direct observation of an actual or simulated patient contact.

Print the student's name, your name, and the date at the top of the score sheet. Next, you should read aloud the "Instructions to the Student" for each skill and ask if there are any questions. If there are no questions, start the time clock and observe the student as he/she progresses through the procedure. Each task is given a point value of one. If a task is not completed or is completed improperly, place a zero in the "points awarded" column. You must document in the comments section the reason you marked a mandatory failure item. Additional comments are welcome, but remember to be specific.

## EMS Assistants

Assistants should be currently certified or licensed to perform the skill they will be assisting with. Assistants are required to perform as a trained EMS professional would in an actual field situation. Students may be used if they have completed the testing in the station to which they are assigned. It should be noted that a group of students performing the skills would ideally be from the same Unit/Station and they should work together as a team.

## Simulated Patients

Simulated patients should be currently certified or licensed to perform the skill they will be involved with. He / she should be thoroughly briefed on the actions expected during the student's performance. This will help ensure that the scenario and skill station are identical for each student during the day of testing. The following should be reviewed by the skill station examiner and the person serving as patient.

### *BRIEFING FOR SIMULATED PATIENT:*

“When serving as a patient for the scenario today, make every attempt to be consistent with every student in presenting the symptoms. As the student progresses with the examination, be aware of any period in which the student touched a simulated injured area. *Only respond in the situation as you feel an actual patient would.* Do not give the student any clues while you are acting as a patient. Please remember what areas have been assessed, treated, and what questions have been asked because we may need to discuss the student's performance after the student leaves the room.”

## SKILLS

- PATIENT ASSESSMENT, TRAUMA PATIENT  
#1: Patient Assessment/Management – Trauma (PSFA, EMR, EMT)
- PATIENT ASSESSMENT, MEDICAL PATIENT  
#2: Patient Assessment/Management – Medical (PSFA, EMR, EMT)
- PATIENT ASSESSMENT, ENVIRONMENTAL PATIENT  
#3: Patient Assessment/Management – Environmental (PSFA)
- AIRWAY EMERGENCIES  
#4: Upper Airway Adjuncts and Suction (PSFA, EMR)
- BREATHING EMERGENCIES  
#5: Bag-Valve-Mask Apneic Patient (PSFA, EMR, EMT)  
#6: Oxygen Administration (PSFA, EMR, EMT)
- CPR AND AED  
#7: Cardiac Arrest Management/AED (PSFA, EMR, EMT)
- CIRCULATORY EMERGENCIES  
#8A: Bleeding Control/Shock Management (PSFA, EMR, EMT)  
#8B: Hemostatic Gauze and Pressure Dressing (PSFA)
- NEUROLOGICAL EMERGENCIES  
#9: Spinal Immobilization Supine Patient (PSFA, EMR, EMT)  
#10: Spinal Immobilization Seated Patient (PSFA, EMR, EMT)
- SOFT TISSUE INJURIES  
#11: Soft Tissue Injury Open Fracture (PSFA, EMR)  
#16: Wound Cleaning and Dressing (PSFA)  
#17: Penetrating Chest Injury (PSFA, EMT)
- MUSCULOSKELETAL INJURIES  
#12: Long Bone Immobilization (PSFA, EMR)  
#13: Joint Injury (PSFA)  
#14: Traction Splinting (PSFA)
- OBSTETRICAL EMERGENCIES  
#15: Prehospital Childbirth (PSFA, EMR, EMT)
- OTHER REQUIRED SKILLS  
#18: Patient Lifts and Carries (PSFA)  
#19: Epinephrine Auto Injector Administration (PSFA, EMT)  
#20: Naloxone Administration (PSFA, EMT)

## **EMT Skills**

The numbered items are the individual skill sheets within each category. Cal EMSA and TCEMSA (LEMSA) require 10 skills for EMT skills exam and recertification competency verification.

The ten bulleted categories are required for EMT recertification and referenced in Title 22, Division 9, Chapter 2, §100080 of the 2010 regulations: individual skills for EMT are #1,2,5,6,7,8A, 9 and 10,17,15,19 and 20.

## **EMR/FR Skills**

The numbered items are the individual skill sheets within each category. TCEMSA (LEMSA) requires 10 skills for EMR/FR certifying and recertification competency verification. The individual skills for EMR/FR are: #1,2,4,6,7,8A,9 or 10,11,12 or 13, and 15.

## **PSFA Skills**

The numbered items are the individual skill sheets within each category. Cal EMSA and TCEMSA (LEMSA) require 20 skills for PSFA certifying and recertification competency verification. The twenty individual skills for PSFA are: #1 through 20.



# **SKILL STATION MANAGEMENT GUIDE**

## Skill #1, Patient Assessment Trauma

### *Personnel Requirements*

- Proctor
- One simulated patient
- At least one assistant

### *Testing Equipment*

- Personal protective equipment
- Moulage (optional)
- Blood pressure cuff
- Stethoscope
- Pulse Oximeter
- Pen
- Note pad
- Blanket or mat for patient
- Misc. equipment and supplies as required by the scenario

### *Scenario Procedures*

Each simulated patient will be presented with a copy of a script detailing various trauma injuries and complications:

- All students **MUST** state “I am using BSI, is the scene safe?” before making patient contact. If the student does not state this, the Proctor must stop the test and ask the student to begin again. No exceptions.
- Each scenario will begin with dispatch information and the initial patient presentation. This information is given to the student by the Proctor. SpO2 is also given to the student when a pulse oximeter is used.
- Each scenario is divided into SAMPLE History and corresponding Critical Criteria. If the scenario allows (i.e., the patient is not ALOC) the simulated patient will give the history information **ONLY** when asked by the student. The Proctor must not prompt the student, however since these scenarios strive for a “real-world” approach, the assistants may help the student during the assessment to the degree allowed by the Proctor.
- Critical criteria for pass/fail are included in each scenario.
- Baseline vitals are included, and will be supplied by the Proctor when asked by the student being tested. These are not to be given without the student asking for each vital sign.
- It is a part of the duty of the Proctor to determine if the student passes or fails each scenario. If it is determined that the student fails, the Proctor may allow another scenario.

The mechanism and location of the injury may vary, as long as the guidelines listed above are followed.

Since this station uses a simulated patient, the Proctor and/or patient must supply all information pertaining sight, sound, smell, or touch. This information should be given to the student **when the area of the patient is exposed or assessed**.

The Proctor must present assessment findings that are appropriate for the patient and the treatment that has been rendered. In other words, if a student has correctly treated for

hypoperfusion, do not offer assessment findings that deteriorate the patient's condition. This may cause the student to assume he/she has rendered inadequate or inappropriate care. The examiner should not offer information that overly improves or deteriorates a patient. Overly improving a patient invites the student to discontinue treatment and may lead to the student failing the examination. Overly deteriorating the patient may lead to the student initiating CPR. This station is not designed to test CPR.

***Verbal Instructions to the Student:***

“This station is designed to test your ability to perform a patient assessment of a patient of multi-system trauma and you should "voice" treat all conditions and injuries discovered. You must conduct your assessment as you would in the field including communicating with your patient and your assistant(s). As you approach the patient, you should verbalize you have taken BSI and it is in use. You should verify with the Proctor that the scene is safe. As you conduct your assessment, you should verbalize everything you are assessing. Clinical information not obtainable by visual or physical inspection will be given to you after you demonstrate how you would normally gain that information (such as blood pressure and pulse oximeter reading). You may assume that you will have at least one EMS assistant working with you and that they are correctly carrying out the verbal treatments you indicate. Do you have any questions?”

***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station.

## Skill #2, Patient Assessment Medical

### *Personnel Requirements*

- Proctor
- One simulated patient
- At least one assistant

### *Testing Equipment*

- Personal protective equipment
- Moulage (optional)
- Blood pressure cuff
- Stethoscope
- Pulse Oximeter
- Pen
- Note pad
- Blanket or mat for patient
- Misc. equipment and supplies as required by the scenario

### *Scenario Procedures*

Each simulated patient will be presented with a copy of a script detailing minimum of: a respiratory, cardiac, abdominal, altered LOC, obstetrics, behavioral problem or another medical emergency

- All students **MUST** state “I am using BSI, is the scene safe?” before making patient contact. If the student does not state this, the Proctor must stop the test and ask the student to begin again. No exceptions.
- Each scenario will begin with dispatch information and the initial patient presentation. This information is given to the student by the Proctor. SpO2 is also given to the student when a pulse oximeter is used.
- Each scenario is divided into SAMPLE History and corresponding Critical Criteria. If the scenario allows (i.e., the patient is not ALOC) the simulated patient will give the history information **ONLY** when asked by the student. The Proctor must not prompt the student, however since these scenarios strive for a “real-world” approach, the assistants may help the student during the assessment to the degree allowed by the Proctor.
- Critical criteria for pass/fail are included in each scenario.
- Baseline vitals are included, and will be supplied by the Proctor when asked by the student being tested. These are not to be given without the student asking for each vital sign.
- It is a part of the duty of the Proctor to determine if the student passes or fails each scenario. If it is determined that the student fails, the Proctor may allow another scenario.

The nature of illness may vary, as long as the guidelines listed above are followed. Since this station uses a simulated patient, the Proctor and/or patient must supply all information pertaining sight, sound, smell, or touch. This information should be given to the student **when the area of the patient is exposed or assessed**.

The Proctor must present assessment findings that are appropriate for the patient and the treatment that has been rendered. In other words, if a student has correctly treated for hypoperfusion, do not offer assessment findings that deteriorate the patient's condition. This may cause the student to assume he/she has rendered inadequate or inappropriate care. The examiner should not offer information that overly improves or deteriorates a patient. Overly improving a patient invites the student to discontinue treatment and may lead to the student failing the examination. Overly deteriorating the patient may lead to the student initiating CPR. This station is not designed to test CPR.

***Verbal Instructions to the Student:***

“This station is designed to test your ability to perform a patient assessment of a patient with a medical emergency and you should "voice" treat all conditions and injuries discovered. You must conduct your assessment as you would in the field including communicating with your patient and your assistant(s). As you approach the patient, you should verbalize you have taken BSI and it is in use. You should verify with the Proctor that the scene is safe. As you conduct your assessment, you should verbalize everything you are assessing. Clinical information not obtainable by visual or physical inspection will be given to you after you demonstrate how you would normally gain that information (such as blood pressure and pulse oximeter reading). You may assume that you will have at least one EMS assistant working with you and that they are correctly carrying out the verbal treatments you indicate. Do you have any questions?”

***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station.

## Skill #3, Patient Assessment Environmental

### *Personnel Requirements*

- Proctor
- One simulated patient
- At least one assistant

### *Testing Equipment*

- Personal protective equipment
- Moulage (optional)
- Blood pressure cuff
- Stethoscope
- Pulse Oximeter
- Pen
- Note pad
- Blanket or mat for patient
- Misc. equipment and supplies as required by the scenario

### *Scenario Procedures*

Each simulated patient will be presented with a copy of a script detailing an environmental medical emergency.

- All students **MUST** state “I am using BSI, is the scene safe?” before making patient contact. If the student does not state this, the Proctor must stop the test and ask the student to begin again. No exceptions.
- Each scenario will begin with dispatch information and the initial patient presentation. This information is given to the student by the Proctor. SpO2 is also given to the student when a pulse oximeter is used.
- Each scenario is divided into SAMPLE History and corresponding Critical Criteria. If the scenario allows (i.e., the patient is not ALOC) the simulated patient will give the history information **ONLY** when asked by the student. The Proctor must not prompt the student, however since these scenarios strive for a “real-world” approach, the assistants may help the student during the assessment to the degree allowed by the Proctor.
- Critical criteria for pass/fail are included in each scenario.
- Baseline vitals are included, and will be supplied by the Proctor when asked by the student being tested. These are not to be given without the student asking for each vital sign.
- It is a part of the duty of the Proctor to determine if the student passes or fails each scenario. If it is determined that the student fails, the Proctor may allow another scenario.

The nature of the environmental illness may vary, as long as the guidelines listed above are followed.

Since this station uses a simulated patient, the Proctor and/or patient must supply all information pertaining sight, sound, smell, or touch. This information should be given to the student **when the area of the patient is exposed or assessed**.

The Proctor must present assessment findings that are appropriate for the patient and the treatment that has been rendered. In other words, if a student has correctly treated for hypoperfusion, do not offer assessment findings that deteriorate the patient's condition. This may cause the student to assume he/she has rendered inadequate or inappropriate care. The examiner should not offer information that overly improves or deteriorates a patient. Overly improving a patient invites the student to discontinue treatment and may lead to the student failing the examination. Overly deteriorating the patient may lead to the student initiating CPR. This station is not designed to test CPR.

***Verbal Instructions to the Student:***

“This station is designed to test your ability to perform a patient assessment of a patient with an environmental emergency and you should "voice" treat all conditions and injuries discovered. You must conduct your assessment as you would in the field including communicating with your patient and your assistant(s). As you approach the patient, you should verbalize you have taken BSI and it is in use. You should verify with the Proctor that the scene is safe. As you conduct your assessment, you should verbalize everything you are assessing. Clinical information not obtainable by visual or physical inspection will be given to you after you demonstrate how you would normally gain that information (such as blood pressure and pulse oximeter reading). You may assume that you will have at least one EMS assistant working with you and that they are correctly carrying out the verbal treatments you indicate. Do you have any questions?”

***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station.

## **Skill #4, Upper Airway Adjuncts and Suction**

### ***Personnel Requirements***

- Proctor

### ***Testing Equipment***

- Personal protective equipment
- Nasopharyngeal airway set
- Oropharyngeal airway set
- BVM
- Suction unit
- Airway mannequin
- Table

### ***Scenario Procedures***

All students MUST state “I am using BSI, is the scene safe?” before starting the skill. If the student does not state this, the Proctor must stop the test and ask the student to begin again.

No exceptions

The mannequin will present with a minimum of an airway problem.

The proctor will ask the student to insert the appropriate airways into the mannequin and suction as required. The proctor will continue to follow the “note” section on the skills sheet prompting the student through the required steps.

### ***Instructions to the Student***

“This station is designed to test your ability to properly measure, insert, and remove an oropharyngeal and a nasopharyngeal airway as well as to suction a patient's upper airway. This is an isolated skills test comprised of three separate skills, so you do not need to do any patient assessment. You may use any equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **five (5) minutes** to complete these skills.

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not obtain a patent airway with the OPA
- Did not obtain a patent airway with the NPA
- Did not demonstrate an acceptable suction technique
- Inserted any adjunct in a manner dangerous to the patient



## Skill #5, Bag-Valve-Mask Apneic Patient

### ***Personnel Requirements***

- Proctor
- One assistant

### ***Testing Equipment***

- Personal protective equipment
- Airway or CPR mannequin
- Oxygen tank, regulator and wrench (if needed)
- BVM (with oxygen tubing optional)
- Table

### ***Scenario Procedures***

The mannequin will present with a simulated breathing problem, the student must provide rescue breathing utilizing a bag-valve-mask (BVM) for ventilation at a rate of 10-20 breaths per minute at a volume that is sufficient to make the mannequin's chest rise. A second rescuer will arrive at scene (EMS assistant) and should be instructed to ventilate while the student controls the mask and the airway. The proctor must witness both one and two rescuer BVM rescue breathing for at least 30 seconds.

### ***Instructions to the Student***

"This station is designed to test your ability to ventilate a patient using a bag-valve mask. As you enter the station, you will find an apneic patient with a palpable central pulse. There are no bystanders and artificial ventilation has not been initiated. The only patient intervention required is ventilatory support using a bag-valve mask. You must initially ventilate the patient for a minimum of 30 seconds. You will be evaluated on the appropriateness of ventilator volumes. I will inform you that a second rescuer has arrived and will instruct you that you must control the airway and the mask seal while the second rescuer provides ventilation. You may use only the equipment available in this room/area. Do you have any questions?"

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this procedure.

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not use "E-C" hand placement
- Did not pull face to mask (incorrectly pushed face to close-off airway)
- Ventilates with incorrect rate (too slow or too fast)

## **Skill #6, Oxygen Administration**

### ***Personnel Requirements***

- Proctor

### ***Testing Equipment***

- Personal protective equipment
- Airway or CPR mannequin
- Oxygen tank, regulator and wrench (if needed)
- Non-rebreather mask, nasal cannula

### ***Scenario Procedures***

The mannequin will present with an airway or breathing problem, the student must assemble an oxygen regulator and tank without leaks. The student will set up a non-rebreather mask with supplemental oxygen and set the flow to 10-12 liters per minute. The proctor will advise the student that the patient is not tolerating the non-rebreather mask and they need to apply a nasal cannula. The student will stop the oxygen flow, replace the NRM with the cannula on the mannequin and set the flow rate to 2-6 lpm. At the end of the skill, the student will disassemble the oxygen tank and regulator.

### ***Instructions to the Student***

“This station is designed to test your ability to correctly assemble the equipment needed to administer supplemental oxygen in the pre-hospital setting. You will be required to assemble an oxygen tank and regulator and administer oxygen to a patient using a non-rebreather mask. You will then be given instructions by the proctor to remove the rebreather mask and administer oxygen using a nasal cannula because the patient cannot tolerate the mask. You may use any equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **five (5) minutes** to complete this skill.

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not assemble the tank and regulator without leaks
- Did not prefill the NRM reservoir bag
- Did not adjust the device to the correct liter flow for the NRM or for the nasal cannula

## **Skill #7, Cardiac Arrest Management / AED**

### ***Personnel Requirements***

- Proctor
- One assistant

### ***Testing Equipment***

- Personal protective equipment
- Training automated external defibrillator (AED)
- CPR mannequin
- Oxygen tank and regulator (optional)
- BVM (with oxygen tubing optional)

### ***Scenario Procedures***

When the student arrives at scene, an EMS assistant will be performing one person CPR. The student will be given the opportunity to check the training AED prior to testing. The student's assignment is to continue patient care with the additional utilization of an AED. The proctor will follow the prompts as noted on the skills sheet for this exam. The EMS assistant must only be allowed to perform tasks as instructed by the student.

### ***Instructions to the Student***

"This station is designed to test your ability to manage a pre-hospital cardiac arrest by integrating CPR skills, AED use, and patient/scene management skills. There will be an EMS assistant in this station performing one person CPR. The assistant will only follow your verbal commands. As you arrive on the scene, you must immediately establish control of the scene and begin resuscitation of the patient with CPR and an AED. You may use any of the supplies available in this room/area. Do you have any questions?"

### ***For EMT Certifying Examination***

The student has **(15) fifteen minutes** to complete this skill station.

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not evaluate the need for immediate use of the AED
- Did not immediately direct initiation/resumption of CPR at appropriate times
- Did not assure all individuals were clear of patient before delivering a shock
- Did not operate the AED properly or safely (inability to deliver shock)
- Prevented the defibrillator from delivering any shock

## Skill #8A, Bleeding Control / Shock Management

### ***Personnel Requirements***

- Proctor
- One simulated patient

### ***Testing Equipment***

- Personal protective equipment
- Dressings and bandaging
- Tourniquet
- Chair

### ***Scenario Procedures***

The patient will present with a minimum of:

- An extremity laceration with uncontrolled bleeding amenable to tourniquet placement

The student must provide appropriate bleeding control/shock management treatment to a simulated patient with an uncontrolled bleeding extremity wound. Patient may be moulaged, if not moulaged; the proctor shall provide scenario details.

*For example: You find a patient suffering from a four-inch incision with heavy arterial bleeding on their right forearm, please provide the appropriate treatment.*

### ***Instructions to the Student***

“This station is designed to test your ability to control hemorrhage. This is a scenario-based testing station. As you progress through the scenario, you will be offered various signs and symptoms appropriate for the patient's condition. You will be required to manage the patient based on these signs and symptoms. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not apply tourniquet properly
- Did not apply/verbalize high concentration oxygen
- Did not control hemorrhage using correct procedures in a timely manner
- Did not indicate a need for immediate transportation

## Skill #8B, Hemostatic Gauze and Pressure Dressing

### ***Personnel Requirements***

- Proctor
- One simulated patient

### ***Testing Equipment***

- Personal protective equipment
- Dressings and bandaging
- Hemostatic gauze
- Training device for hemostatic gauze application

### ***Scenario Procedures***

The patient will present with a minimum of:

- An extremity laceration with uncontrolled bleeding not amenable to tourniquet placement

The student must provide appropriate bleeding control treatment to a simulated patient with an uncontrolled bleeding extremity wound that is not amenable to tourniquet placement. The proctor shall provide scenario details.

*For example: You find a patient suffering from a gunshot wound with heavy arterial bleeding on their upper arm/shoulder that is not amenable to tourniquet placement, please provide the appropriate treatment.*

### ***Instructions to the Student***

“This station is designed to test your ability to control hemorrhage. This is a scenario-based testing station. As you progress through the scenario, you will be offered various signs and symptoms appropriate for the patient's condition. You will be required to manage the patient based on these signs and symptoms. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not apply hemostatic gauze directly into wound
- Did not apply pressure for a minimum of three minutes
- Moved or unnecessarily manipulated hemostatic dressing
- Applied pressure dressing too tight or too loose

## Skill #9, Spinal Immobilization -Supine Patient

### ***Personnel Requirements***

- Proctor
- Two to four assistants
- One simulated patient or full-body mannequin

### ***Testing Equipment***

- Personal protective equipment
- Full-body Mannequin (optional)
- C-Collar adjustable or SAM Splint
- Long Spine Backboard and matching straps
- Head bed or appropriate neck support
- Padding

### ***Scenario Procedures***

The patient will be supine and present with a minimum of:

- A potential spinal injury

In this scenario, the patient has been assessed and treated. It is the student responsibility to provide spinal immobilization for the simulated patient with the help of assistants. The assistants must only follow verbal commands issued by the student.

### ***Instructions to the Student***

“This station is designed to test your ability to provide spinal immobilization on a patient using a long spine immobilization device. You arrive on the scene with EMS assistants. The scene size-up and assessments are complete. As you begin the station, there are no airway, breathing, or circulatory problems. You are required to treat the specific, isolated problem of an unstable spine using a long spine immobilization device. When moving the patient to the device, you should use the help of the EMS assistants. You are responsible for the direction and subsequent action of the assistants. You may use any equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this exam

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not direct assistant to maintain manual stabilization of the head until immobilized to the board
- Allowed patient’s torso to be moved excessively
- Did not check CSM before and after immobilization
- Applied straps to patient’s head before torso is immobilized

## Skill #10, Spinal Immobilization -Seated Patient

### ***Personnel Requirements***

- Proctor
- Two to four assistants
- One simulated patient or full-body mannequin

### ***Testing Equipment***

- Personal protective equipment
- Full-body Mannequin (optional)
- C-Collar adjustable or SAM splint
- Short spine board OSS or KED

### ***Scenario Procedures***

The patient will be supine and present with a minimum of:

- A potential spinal injury

In this scenario, the patient has been assessed and treated. It is the student responsibility to provide spinal immobilization for the simulated patient with the help of assistants. The assistants must only follow verbal commands issued by the student.

### ***Instructions to the Student***

“This station is designed to test your ability to provide spinal immobilization to a seated patient. You arrive on the scene with EMS assistants. The scene size-up, and assessment has been completed. As you begin the station, there are no airway, breathing, or circulatory problems. You are required to treat the specific, isolated problem of an unstable spine to a seated patient. When moving the patient to the device, you should use the help of the EMS assistant(s). You are responsible for the direction and subsequent action of the assistants. You may use any equipment available in this room. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this exam.

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not direct assistant to maintain manual stabilization of the head until immobilized to the board
- Allowed excessive movement of the patient
- Did not check CSM before and after immobilization
- Applied straps to patient’s head before torso is immobilized

## Skill #11, Soft Tissue Injury Open Fracture of an Extremity

### **Personnel Requirements**

- Proctor
- One assistant
- One simulated patient

### **Testing Equipment**

- Personal protective equipment
- Moulage of open fracture
- Bandaging and dressing material
- Splint (SAM splint or other)
- 2-3 Triangular bandages (cravats)

### **Scenario Procedures**

The patient will present with a minimum of:

- An open fracture of an extremity – bleeding is controllable

In this scenario, the patient has been assessed for life-threats. It is the student responsibility to provide wound management and splinting for the simulated patient with the help of assistants. The assistants must only follow verbal commands issued by the student. If moulage is not used, the proctor must provide appropriate information to the student.

For example: *This patient fell from a height and has an open fracture of their lower arm. They have been assessed; your assignment is to provide wound treatment and splinting for their lower arm.*

### **Instructions to the Student**

“This station is designed to test your ability to provide treatment of an open fracture for your patient. You arrive on the scene with EMS assistants. The scene size-up, and assessment has been completed. As you begin the station, there are no airway, breathing, or circulatory problems. You are required to treat the specific, isolated problem of an open fracture and soft tissue injury to a simulated patient. When treating the patient, you should use the help of the EMS assistant(s). You are responsible for the direction and subsequent action of the assistants. You may use any equipment available in this room. Do you have any questions?”

### **For EMT Certifying Examination**

The student has **ten (10) minutes** to complete this exam.

### **Critical Criteria**

- Did not take or verbalize BSI
- Did not direct assistant to maintain manual stabilization of the limb until immobilized to the splint
- Allowed excessive movement of the injured limb and bone ends
- Did not check CSM before and after immobilization



## Skill #12, Long Bone Immobilization

### **Personnel Requirements**

- Proctor
- One simulated patient

### **Testing Equipment**

- Personal protective equipment
- Splinting material (cardboard, SAM splint, wire, other)
- Dressings and Bandages
- 2-3 triangular bandages (cravats)

### **Scenario Procedures**

In this scenario, an initial assessment of the simulated patient has already taken place. The students are responsible for splinting a simulated long bone injury. If moulage is not used, the proctor must provide appropriate information to the student.

For example: *This patient fell from a height and may have broken their lower arm. They have been assessed; your assignment is to provide splinting for their lower arm.*

### **Instructions to the Student**

“This station is designed to test your ability to properly immobilize a closed, non-angulated long bone injury. You are required to treat only the specific, isolated injury to the extremity. The scene size-up and initial assessment have been completed and during the focused assessment a closed, non-angulated injury of the (radius, ulna, tibia, fibula) was detected. Ongoing assessment of the patient’s airway, breathing and central circulation is not necessary. You may use any equipment available in this room/area. Do you have any questions?”

### **For EMT Certifying Examination**

The student has **five (5) minutes** to complete this station.

### **Critical Criteria**

- Did not take or verbalize BSI
- Did not direct assistant to maintain manual stabilization of the limb until immobilized to the splint
- Did not fully immobilize the joint above and below the injury site
- Allowed excessive movement of the injured limb
- Did not check CSM before and after immobilization

## Skill #13, Joint Immobilization

### **Personnel Requirements**

- Proctor
- One simulated patient

### **Testing Equipment**

- Personal protective equipment
- Splinting material (cardboard, SAM splint, wire, other)
- Dressings and Bandages
- 2-3 triangular bandages (cravats)

### **Scenario Procedures**

In this scenario, an initial assessment of the simulated patient has already taken place. The students are responsible for splinting a simulated joint injury. If moulage is not used, the proctor must provide appropriate information to the student.

For example: *This patient fell from a height and may have dislocated their elbow. They have been assessed; your assignment is to provide treatment for their dislocation.*

### **Instructions to the Student**

“This station is designed to test your ability to properly immobilize a closed, dislocated joint injury. You are required to treat only the specific, isolated injury to the extremity. The scene size-up and initial assessment have been completed and during the focused assessment a closed, dislocation injury of the joint was detected. Ongoing assessment of the patient’s airway, breathing and central circulation is not necessary. You may use any equipment available in this room/area. Do you have any questions?”

### **For EMT Certifying Examination**

The student has **five (5) minutes** to complete this station.

### **Critical Criteria**

- Did not take or verbalize BSI
- Did not direct assistant to maintain manual stabilization of the limb until immobilized to the splint
- Did not fully immobilize the joint above and below the injury site
- Allowed excessive movement of the injured limb
- Did not check CSM before and after immobilization

## Skill #14, Traction Splinting

### **Personnel Requirements**

- Proctor
- One simulated patient

### **Testing Equipment**

- Personal protective equipment
- Splinting material (Sager, Kendrick, CT-6 or other traction device)
- Dressings and Bandages
- Equipment for improvised splint if needed

### **Scenario Procedures**

In this scenario, an initial assessment of the simulated patient has already taken place. The student is responsible for splinting a simulated long bone injury. If moulage is not used, the proctor must provide appropriate information to the student.

For example: *This patient fell from a height and may have broken their femur. They have been assessed; your assignment is to provide traction splinting for their upper leg*

### **Instructions to the Student**

“This station is designed to test your ability to apply a traction device to a closed, mid-shaft femur fracture. You are required to treat only the specific, isolated injury to the extremity. The scene size-up and initial assessment have been completed and during the focused assessment a closed, non-angulated injury of the femur was detected. Ongoing assessment of the patient’s airway, breathing and central circulation is not necessary. You may use any equipment available in this room/area. Do you have any questions?”

### **For EMT Certifying Examination**

The student has **ten (10) minutes** to complete this station

### **Critical Criteria**

- Did not take or verbalize BSI
- Did not direct assistant to maintain manual stabilization of the limb until immobilized to the splint
- Did not fully immobilize the joint above and below the injury site
- Allowed excessive movement of the injured limb
- Did not check CSM before and after immobilization
- Secured the leg to the splint before applying mechanical traction
- Loss of traction at any point after it was applied (manual or mechanical)

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.

## Skill #15, Prehospital Childbirth

### **Personnel Requirements**

- Proctor
- One assistant (optional)

### **Testing Equipment**

- Personal protective equipment
- OB mannequin
- OB kit supplies (Scalpel, OB pad, blankets, towels, gauze sponges, bulb syringe, umbilical clamps, plastic bags for placenta, towelettes, etc.)
- Table

### **Scenario Procedures**

The student will be presented with an OB manikin with signs of imminent prehospital delivery (crowning). The student must ask the patient (verbalize to the proctor) the appropriate questions to determine imminent delivery.

### **Appropriate Questions to determine imminent delivery**

**Memory Aid:** *Baby, Baby, Contractions, Contractions, Doctor, Doctor, Poo, Water*

*Baby* – When is the baby due?

*Baby* – How many babies have you had?

*Contractions* – When did the contractions begin?

*Contractions* – How far apart are the contractions?

*Doctor* – Are you under a doctor’s care?

*Doctor* – Does your doctor expect complications?

*Poo* – Do you feel the urge to bear down or move your bowels?

*Water* – Has your water broken?

After the infant is delivered and suctioned, the proctor will state “the infant is not breathing”, the student will be required to provide timely and appropriate care.

### **Instructions to the Student**

“This station is designed to test your ability to determine imminent delivery by asking the appropriate questions and to assist in pre-hospital normal delivery. You will also need to demonstrate care for the mother throughout the delivery process including the delivery of the afterbirth and timely care for the infant. As you progress through the scenario, you will be required to shift your focus of care between the mother and infant. You may use any equipment available in this room/area. Do you have any questions?”

### **For EMT Certifying Examination**

The student has **fifteen (15) minutes** to complete this station.

### **Critical Criteria**

- Did not take or verbalize BSI
- Did not provide post-birth care appropriately

## Skill #16, Wound Cleaning and Dressing

### ***Personnel Requirements***

- Proctor
- One simulated patient

### ***Testing Equipment***

- Personal protective equipment
- Dressings and bandaging
- Irrigation device (optional)

### ***Scenario Procedures***

The patient will present with a minimum of:

- An extremity laceration with bleeding and showing large foreign matter contamination

The student must provide appropriate bleeding control treatment and wound irrigation to a simulated patient with a contaminated extremity wound. Patient may be moulaged, if not moulaged; the proctor shall provide scenario details.

*For example: You find a patient suffering from a laceration wound with large foreign matter contamination on their lower arm, please provide the appropriate treatment.*

### ***Instructions to the Student***

“This station is designed to test your ability to control hemorrhage and appropriately clean a wound. This is a scenario-based testing station. As you progress through the scenario, you will be offered various signs and symptoms appropriate for the patient's condition. You will be required to manage the patient based on these signs and symptoms. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not apply gauze directly to wound
- Did not clean or verbalize cleaning the wound
- Applied pressure dressing too tight or too loose
- Did not assess CSM before and after dressing

## Skill #17, Penetrating Chest Injury

### **Personnel Requirements**

- Proctor
- One CPR mannikin

### **Testing Equipment**

- Personal protective equipment
- Occlusive Dressing (either commercial or improvised expired AED pads)
- Stethoscope
- Oxygen tank and NRM (optional)

### **Scenario Procedures**

The patient will present with a minimum of:

- An open chest wound

The student must provide appropriate control and treatment to a simulated patient of a GSW to the chest, demonstrating an open (“sucking”) chest wound. Mannikin may be moulaged, if not moulaged; the proctor shall provide scenario details.

*For example: You find a patient suffering from a GSW wound with signs of a sucking chest wound, please provide the appropriate treatment.*

### **Instructions to the Student**

“This station is designed to test your ability to control hemorrhage and appropriately treat a sucking chest wound using a chest seal. This is a scenario-based testing station. As you progress through the scenario, you will be offered various signs and symptoms appropriate for the patient’s condition. You will be required to manage the patient based on these signs and symptoms. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### **For EMT Certifying Examination**

The student has **ten (10) minutes** to complete this skill station

### **Critical Criteria**

- Did not take or verbalize BSI
- Did not apply the back of a gloved hand directly to wound
- Did not quickly apply a chest seal the wound within 10 seconds
- Failed to recognize and treat shock
- Failed to check for exit wound

## Skill #18, Patient Lifts and Carries

### ***Personnel Requirements***

- Proctor
- One simulated patient
- 2-4 assistants

### ***Testing Equipment***

- Personal protective equipment
- Blankets or sheets
- Long spine board

### ***Scenario Procedures***

The patient will present with a minimum of:

- A need for moving to a different location using BEAM carry, lift-and-slide to long spine board, log-roll to a long spine board, sheet carry and placing in the recovery position.

The student must provide appropriate lifts and carries with one and multiple- rescuer scenarios.

*For example: You find an unresponsive patient in an unsafe location and must assume a spine injury, please provide the appropriate movement to a safe location.*

### ***Instructions to the Student***

“This station is designed to test your ability to do a single-rescuer recovery position, as well as by moving the patient by directing your assistants. You will be required to manage the patient by yourself and by directing assistants. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station

### ***Critical Criteria***

- Did not take or verbalize BSI
- Grossly moves the patient spine
- Did not work successfully in a team situation

## **Skill #19, Epi Pen Auto Injector Administration**

### ***Personnel Requirements***

- Proctor
- One simulated patient

### ***Testing Equipment***

- Personal protective equipment
- Epi-Pen trainer

### ***Scenario Procedures***

The patient will present with a minimum of:

- Showing the signs and symptoms of anaphylactic shock in need of injectable epinephrine

The student must provide appropriate assessment and treatment for a patient with an extreme allergic reaction and anaphylactic shock.

*For example: You find a patient showing signs and symptoms of an extreme allergic reaction and must assume anaphylaxis, please provide the appropriate assessment and treatment.*

### ***Instructions to the Student***

“This station is designed to test your ability to assess and treat an extreme allergic reaction in the field. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not hold auto injector correctly (thumb over either end is an automatic failure)
- Did not verify expiration date / visual check of medication
- Did not stabilize patient’s leg prior to injection
- Did not apply injector appropriately (a “swing-and-jab” is an automatic failure)



## **Skill #20, Naloxone (Narcan) Administration IN**

### ***Personnel Requirements***

- Proctor

### ***Testing Equipment***

- Personal protective equipment
- Naloxone trainer
- One airway or CPR mannikin
- BVM

### ***Scenario Procedures***

The patient will present with a minimum of:

- Showing the signs and symptoms of an opiate overdose in need of Naloxone administration

The student must provide appropriate assessment and treatment for a patient with an opiate overdose.

*For example: You find a patient showing signs and symptoms of an opiate overdose and must assume the patient is in need of Naloxone administration, please provide the appropriate assessment and treatment.*

### ***Instructions to the Student***

“This station is designed to test your ability to assess and treat an opiate overdose in the field. You may use any of the supplies and equipment available in this room/area. Do you have any questions?”

### ***For EMT Certifying Examination***

The student has **ten (10) minutes** to complete this skill station

### ***Critical Criteria***

- Did not take or verbalize BSI
- Did not verbalize determining the need for Naloxone IN
- Did not properly administer the medication IN
- Did not verbalize reassessment of the patient

## INSTRUCTIONS FOR COMPLETION

A completed EMS Skills Verification Form is required to accompany an EMS recertification application for those individuals who are either maintaining EMS certification without a lapse or to renew EMS certification with a lapse in certification less than one year. Note that currently there are three (3) separate skills verification forms required – one for EMR/FR, one for state-certified EMT, and one for PSFA.

1. **PLEASE confirm the skills sheet you will need for each student being verified.**

**2. Name of Student**

Provide the complete name, last name first, of the EMS certificate holder who is demonstrating skills competency.

**3. Certification or License Number** – Provide the certification or license number for the individual demonstrating competency in the skills exam.

**4. Student Signature**

The signature of the EMS student (certificate holder) who is demonstrating competency. By signing this section, the EMS student is verifying that the information contained on this form is accurate and that the EMS certificate holder has demonstrated competency in the skills listed to a qualified individual.

**5. Certifying Agency**

Provide the name of the EMS certifying authority for which the individual will be certifying through. (For example: TCEMSA).

### Verification of Each Competency

1. **Date**- Enter the date the individual demonstrates competency in each skill.

2. **Name of evaluator**- Provide the name of the evaluator who is verifying competency.

3. **Signature of evaluator** - Once competency has been demonstrated by direct observation of an actual or simulated patient contact, i.e., skills station, the individual verifying competency (proctor) shall sign the EMS Skills Competency Verification Form for that skill. See appendix for forms.

4. **Approval to Verify** – provide the agency for which you are an approved Proctor (for example USFS STF, CEU Provider #55-0101)

5. **License Info** - provide your current certification number. Proctors who verify skills competency shall be currently licensed or certified as: An EMT, Paramedic, Registered Nurse, Physician Assistant, or Physician. Individual must possess full knowledge of the examination and all administration duties.

For all skills sheets and verification forms go to website [www.MCVFOA.org](http://www.MCVFOA.org)

Verification of skills competency shall be valid to apply for EMS recertification for a maximum of two years from the date of verification.

**EMT Skills Verification Form**

State of California  
 EMT Skills Competency Verification Form  
 EMSA – SCV (01/17)



See attached for instructions for completion

**This section is to be filled out by the EMT whose skills are being verified:**

I certify that I have performed the below listed skills before an approved verifier and have been found competent to perform these skills in the field.

Name as shown on California EMT Certificate	EMT Certificate Number	Signature
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**This section is to be filled out by an approved Verifier (see instructions for information on approved Verifiers).**

By filling out this section the Verifier certifies that they have, through direct observation, verified that the above EMT is competent in the skills below.

Skill Verified	Verifiers Information	
1. Trauma Assessment  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
2. Medical Assessment  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
3. Bag-Valve-Mask Ventilation  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
4. Oxygen Administration  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
5. Cardiac Arrest Management w/ AED  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
6. Hemorrhage Control & Shock Management  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
7. Spinal Motion Restriction- Supine & Seated  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
8. Penetrating Chest Injury  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
9. Epinephrine & Naloxone Administration  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:
10. Childbirth & Neonatal Resuscitation  <i>(Signature of Verification)</i>	Name of Verifier:	Date of Verification:
	Approval to Verify from:	Cert./License Info. of Verifier:

**EMR/FR Skills Verification Form**

State of California  
 EMT-I Skills Competency Verification Form  
 EMSA – SCV (07/03)



See back of form for instructions for completion

1a. Name as shown on EMT-I Certificate	1b. Certificate Number	1c. Signature
1d. Certifying Authority	1e. Date	I certify, under the penalty of perjury, that the information contained on this form is accurate.
<b>Skill</b>	<b>Verification of Competency</b>	
<b>1. Patient examination, trauma patient;</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>2. Patient examination, medical patient</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>3. Airway emergencies</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>4. Breathing emergencies</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>5. Automated external defibrillation</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>6. Circulation emergencies</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>7. Neurological emergencies</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>8. Soft tissue injury</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>9. Musculoskeletal injury</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
<b>10. Obstetrical emergencies</b>	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number



**PSFA Skills Verification Form**

**EMERGENCY MEDICAL SERVICES SKILLS EXAM/COMPETENCY VERIFICATION FORM**

Student Name:		Student Card # (if applicable):	
I certify under the penalty of perjury that the information on this form is accurate.	Student Signature:	Date	Unit

Check this box if one proctor verified all skills. The Skills Proctor’s name, certification/license number, and date of the test may be filled out **once** if the information is the same. The Skills Proctor must sign after each skill verifying competence.

SKILL	VERIFICATION OF COMPETENCY	
<b>PATIENT EXAMINATION, TRAUMA PATIENT</b> <i>Skill #1: Patient Assessment, Trauma</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>PATIENT EXAMINATION, MEDICAL PATIENT</b> <i>Skill #2: Patient Assessment, Medical</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>PATIENT EXAMINATION, ENVIRONMENTAL PATIENT</b> <i>Skill #3: Patient Assessment, Environmental</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>AIRWAY EMERGENCIES</b> <i>Skill #4: Upper Airway Adjuncts and Suction</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>BREATHING EMERGENCIES)</b> <i>Skill #5: Bag-Valve-Mask Apneic Patient</i> <i>Skill #6: Oxygen Administration;</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>CPR AND AED</b> <i>Skill #7: Cardiac Arrest Management/AED</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:

SKILL	VERIFICATION OF COMPETENCY	
<b>CIRCULATION EMERGENCIES</b> <i>Skill #8: Bleeding Control with Tourniquet and Hemostatic Dressing / Shock Management</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>NEUROLOGICAL EMERGENCIES</b> <i>Skill #9 Spinal Immobilization Supine Patient</i> <i>Skill #10: Spinal Immobilization Seated Patient</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>SOFT TISSUE INJURY</b> <i>Skill #11: Open Fracture with Avulsion or Amputation</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>MUSCULOSKELETAL INJURY</b> <i>Skill #12: Long Bone Immobilization</i> <i>Skill #13: Joint Dislocation Injury</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>OBSTETRICAL EMERGENCIES</b> <i>Skill #15: Pre-hospital Childbirth (CA Req.)</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>WOUND PACKING AND DRESSING</b> <i>Skill #16: Tactical Casualty Care (CA Req.)</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:

SKILL	VERIFICATION OF COMPETENCY	
<b>CHEST SEAL (OCCLUSIVE DRESSING)</b>  <i>Skill #17: Tactical Casualty Care (CA Req.)</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>PATIENT LIFTS AND CARRIES</b>  <i>Skill #18: Tactical Casualty Care (CA Req.)</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>EPINEPHRINE AUTO INJECTOR ADMINISTRATION</b>  <i>Skill #19: Tactical Casualty Care (CA Req.)</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>NALOXONE ADMINISTRATION (MUCOSAL ATOMIZATION DEVICE)</b>  <i>Skill #20: Tactical Casualty Care (CA Req.)</i>	Skills Proctor:	Date:
	Proctor Certificate or License Number:	Signature:
<b>SKILLS VERIFICATION COMPLETE</b>	Proctor Certificate or License Number:	Signature: