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

Emergency Medical Responder
Practical Examination

JULY 2020
Emergency Medical Responder Practical Examination

PATIENT ASSESSMENT / MANAGEMENT - TRAUMA

CANDIDATE #: ___________________________ DATE: ________________

EVALUATOR NAME: ___________________________

_____ INITIAL _____ RETEST

Time allowed: 10 minutes

SCENARIO #: _______________

CANDIDATE MUST PERFORM (*) ITEM WITHOUT ASSISTANCE

<table>
<thead>
<tr>
<th>Points Possible</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

SCENE SIZE UP (scene information will be provided by the Evaluator)

- Verbalizes body substance isolation precautions
- Requests additional help

PRIMARY ASSESSMENT

- Verbalizes general impression of the patient
- Stabilizes or directs stabilization of spine
- Determines responsiveness / level of consciousness (AVPU)

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</tr>
</tbody>
</table>

Airway

- Assesses
- Manages

Breathing

- Assesses
- Manages

Circulation

- Assesses Bleeding, Pulse & Skin (color – temp – moisture)
- Manages

- Identifies priority patient / makes transport decision

HISTORY TAKING

- Obtains S.A.M.P.L.E. History

SECONDARY ASSESSMENT

- Assesses the Head
  - Inspect and Palpate
- Assesses the Neck
  - Inspect and Palpate
- Assesses the Chest
  - Inspect and Palpate
- Assesses the Abdomen
  - Inspect and Palpate
- Assesses the Pelvis
  - Inspect and Palpate
- Assess the Extremities
  - One (1) point for each Extremity
- Obtains quantitative vital signs (*)
- Manages secondary injuries and wounds appropriately

REASSESSMENT

- Verbalizes reassessment

- TOTAL 1

CRITICAL CRITERIA

- Did not establish spinal stabilization upon initial contact with patient
- Did not maintain spinal stabilization throughout
- Did not identify need for immediate transport
- Did not evaluate and find conditions of airway, breathing, circulation (hypoperfusion)
- Did not manage / provide airway, breathing, hemorrhage control or treatment for shock (hypoperfusion)
- Did other physical examination before assessing and managing the airway, breathing and circulation
- Obtains baseline vital signs prior to completion of primary assessment

You must factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.
Emergency Medical Responder Practical Examination

**BLEEDING CONTROL / SHOCK MANAGEMENT**

CANDIDATE #:_________________________________________  DATE:____________

EVALUATOR NAME:________________________________________

_______ INITIAL  ________ RETEST

Time allowed: 10 minutes

SCENARIO #:______________

<table>
<thead>
<tr>
<th>Points Possible</th>
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<td></td>
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</table>

Verbalizes body substance isolation precautions
Applies direct pressure to the wound

**Note: The Evaluator must now inform the candidate that the wound continues to bleed**
Applies an additional dressing to the wound

**Note: The Evaluator must now inform the candidate that the bleeding is controlled**
Applies a pressure dressing to the wound
Bandages the wound

**Note: The Evaluator must now inform the candidate that the bleeding is controlled and that the patient is showing signs and symptoms indicative of shock**
Properly positions the patient
Initiates steps to prevent heat loss from the patient
Verbalizes high-concentration oxygen is delivered to patient
Indicates need for immediate transportation
Treats any additional injuries that may be present

TOTAL 10

**CRITICAL CRITERIA**

_____ Did not control bleeding in a timely manner
_____ Did not indicate a need for immediate transportation
_____ Did not administer high flow O₂

You must factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.
Emergency Medical Responder Practical Examination

UPPER AIRWAY – SUCTION – OXYGEN

CANDIDATE #: __________________________________________ DATE: ________________

EVALUATOR NAME: ____________________________________________

_______ INITIAL _________ RETEST

Time allowed: 10 minutes

OROPHARYNGEAL AIRWAY

<table>
<thead>
<tr>
<th>Advise Candidate to insert airway</th>
<th>Points Possible</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbalizes body substance isolation precautions</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Measures airway</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Selects appropriately sized airway</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Inserts airway without pushing tongue posteriorly</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Removes oropharyngeal airway</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

SUCTION

<table>
<thead>
<tr>
<th>Advise Candidate to suction the mannequin’s airway</th>
<th>Points Possible</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turns on / prepares suction device</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Assures presence of mechanical suction</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Inserts suction tip without suctioning</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Applies suction to the oropharynx for 10-15 seconds</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

OXYGEN ADMINISTRATION

| Cracks tank valve | 1 |
| Assembles the regulator to the tank | 1 |
| Opens tank – Checks for leaks – Checks tank pressure (1 point each) | 3 |
| Adjusts liter flow to minimum 10 liters / minute | 1 |
| Attaches non-rebreather mask to O₂ regulator and pre-fills reservoir (1 point each) | 2 |
| Applies and adjusts mask to mannequin’s face | 1 |

<table>
<thead>
<tr>
<th>Advise Candidate to apply a nasal cannula</th>
<th>Points Possible</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removes non-rebreather, attaches nasal cannula to O₂ regulator</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Adjust liter flow to six (6) or less</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Applies nasal cannula to mannequin</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Advise Candidate to discontinue oxygen therapy</th>
<th>Points Possible</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removes nasal cannula</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Shuts off tank, relieves pressure within the regulator (1 point each)</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL ORAL+SUCTION+O₂ 24

CRITICAL CRITERIA

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

You must factually document on the back of the sheet the reason(s) for not awarding points or for checking any critical criteria.
Emergency Medical Responder Practical Examination

MOUTH–TO–MASK

CANDIDATE: ________________________________ DATE: ______________
EVALUATOR: ______________________________

______ INITIAL ________ RETEST

Time allowed: 5 minutes

JULY 2020:
This “Mouth-to-Mask” skill is no longer being evaluated at the NH EMS BLS Practical Examination for the Emergency Medical Responder. All skills involved herein must have been completed during the EMS training program.

<table>
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<tr>
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</thead>
<tbody>
<tr>
<td>Verbalizes body substance isolation precautions</td>
<td>1</td>
</tr>
<tr>
<td>Connects one-way valve to mask</td>
<td>1</td>
</tr>
<tr>
<td>Opens airway (manually or with adjunct)</td>
<td>1</td>
</tr>
<tr>
<td>Establishes and maintains a proper mask to face seal</td>
<td>1</td>
</tr>
<tr>
<td>Ventilates the patient at the proper volume and rate (adequate chest rise / 10 - 20 breaths per minute)</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: The Evaluator must witness ventilations for at least 30 seconds

TOTAL 5

CRITICAL CRITERIA

_____ Did not maintain mask-to-face seal
_____ Did not provide proper volume per breath (more than two (2) ventilations per minute are below 800 ml)
_____ Did not ventilate the patient at 10 – 20 breaths per minute (more than one (1) error in 30 seconds)
_____ Did not allow for complete exhalation

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