



Mountain-Valley

Emergency Medical Services Agency

Adult Intubation Skill Sheet

Name: _____ Examiner: _____

Date: _____ Signature: _____

A check (✓) denoted satisfactory performance. Documentation for any item not receiving a (✓) in the Rating Column will be provided in the Comments Section. A (***) denotes a Critical Action, failure to perform this skill will require additional training/testing.

| Performance Criteria | Rating |
|--|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Opens the airway manually and inserts an oral airway *** | |
| 3. Ventilates the patient with BVM attached to oxygen at 15 lpm *** | |
| 4. Directs assistant to oxygenate the patient | |
| 5. Selects proper equipment for endotracheal intubation | |
| 6. Checks equipment for proper operation | |
| 7. Positions the patient's head properly | |
| 8. Inserts the laryngoscope blade into the patient's mouth | |
| 9. Elevates the patient's mandible with the laryngoscope and identifies the proper landmarks | |
| 10. Introduces the endotracheal tube and advances the proper depth | |
| 11. Inflates the cuff to the proper pressure | |
| 12. Disconnects syringe from the cuff inlet point | |
| 13. Directs assistant to ventilate the patient | |
| 14. Confirms proper placement by auscultation bilaterally, and over the epigastrium *** | |
| 15. Attaches end tidal CO2 detector, EDD, and or capnometer *** | |
| 16. Secures the endotracheal tube and documents depth at lip line | |

Comments:



Mountain-Valley

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Pediatric Intubation Skill Sheet

Name: _____ Examiner: _____

Date: _____ Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Opens the airway manually and inserts an oral airway *** | |
| 3. Ventilates the patient with BVM attached to oxygen at 15 lpm *** | |
| 4. Directs assistant to oxygenate the patient | |
| 5. Determines proper equipment for endotracheal intubation including the size and type, cuffed vs non-cuff | |
| 6. Checks equipment for proper operation | |
| 7. Positions the patient's head properly | |
| 8. Inserts the laryngoscope blade into the patient's mouth | |
| 9. Elevates the patient's mandible with the laryngoscope and identifies the proper landmarks | |
| 10. Introduces the endotracheal tube and advances the proper depth | |
| 11. Inflates the cuff to the proper pressure, if applicable | |
| 12. Disconnects syringe from the cuff inlet point, if applicable | |
| 13. Directs assistant to ventilate the patient | |
| 14. Confirms proper placement by auscultation bilaterally, and over the epigastrium *** | |
| 15. Attaches end tidal CO2 detector, EDD, and or capnometer *** | |
| 16. Secures the endotracheal tube and documents depth at lip line | |

Comments:



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Emergency Medical Services Agency

Combitube

Skill Sheet

Name: _____

Examiner: _____

Date: _____

Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Checks Combitube for integrity of balloons *** | |
| 3. Lubricate tube with water soluble lubricant | |
| 4. Place patient in neutral position and open airway | |
| 5. Insert tube until teeth are aligned with back rings printed on tube | |
| 6. Inflate the tube pilot balloon with 100 ml of air for the adult tube and 85 ml of air for the small adult tube | |
| 7. Inflate the white pilot balloon with 15 ml of air for the adult tube and 12 ml of air for the small adult tube | |
| 8. Attach the EDD | |
| 9. Attach a BVM to the blue tube and begin ventilating. If auscultation of breath sounds is positive, the auscultation of gastric insufflation is negative, you have achieved an esophageal placement and you should continue ventilating. *** | |
| 10. If auscultation of breath sounds is negative, with no chest rise and gastric insufflation is negative, you have achieved a tracheal intubation. Disconnect from the blue tube and ventilate through the clear tube. | |
| 11. If tracheal intubation has occurred, attach an end tidal CO2 detector, EDD, and/or capnometer. *** | |

Comments:



Pleural Decompression

Skill Sheet

Name: _____

Examiner: _____

Date: _____

Signature: _____

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| Performance Criteria | Rating |
|---|--------|
| 1. Takes or verbalizes infection control precautions/BSI. | |
| 2. Assesses the patient for traumatic pneumothorax: ALOC, poor ventilation, JVD, tracheal deviation, absent or decreased breath sounds on affected side, hypotension. | |
| 3. Maintain an open airway and provide ventilatory assistance with 100% high flow oxygen. *** | |
| 4. Fine the 2 nd and 3 rd intercostals space on the affected side. | |
| 5. Clean site with antiseptic. | |
| 6. Insert the needle (10-12 gauge and a minimum 2 inches in length) into the skin over the top of the 3 rd rib, midclavicular line and insert into the intercostals space. *** | |
| 7. Advance the plastic catheter and remove needle. *** | |
| 8. Tape bulky dressing around the catheter to stabilize. | |
| 9. Reassess the patient's respiratory effort and support as needed. | |

Comments:



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Transcutaneous Pacing Skill Sheet

Name: _____

Examiner: _____

Date: _____

Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Is able to state rationale for pacing of patient. | |
| 2. Assemble ECG electrodes, monitor, and pacing cable. Assemble pacing electrodes and cable. | |
| 3. Explains procedure to patient and family, and note to patient and family that discomfort may occur secondary to nerve stimulation or muscle contraction. If the patient experiences any discomfort, sedation will be addressed. | |
| 4. Places ECG electrodes on patient chest and far away from the pacing electrode placement to assure clear signal. During demand pacing, ECG electrodes must be attached. Demonstrates knowledge of cleansing of skin. | |
| 5. Demonstrates proper placement of pacing electrodes either anterior-lateral when using combo-patches where defibrillation may be necessary or lateral to the sternum and a V6 electrode position. *** | |
| 6. Properly selects pacing mode | |
| 7. Properly selects patient rate common rate is 80 BPM in adults. *** | |
| 8. Selects and sets current to 10 mA and increases by 10 mA increments while assessing mechanical capture. After achieving mechanical capture, adjust to lowest current that maintains capture. *** | |
| 9. Is able to state when capture of electrical stimulus occurs, recognizes capture on the ECG. *** | |
| 10. Able to recognize mechanical capture by patient evaluation of cardiac output, pulses, increase of blood pressure, and improved circulatory status. *** | |
| 11. Is able to distinguish failure to capture, under-sensing, or over-sensing. | |

Comments:



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Cricothyrotomy Skill Sheet

Name: _____ Examiner: _____

Date: _____ Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Verbalizes knowledge of indications, contraindications, and complications | |
| 2. Takes or verbalizes infection control precautions/BSI | |
| 3. Puts patient in Supine Position | |
| 4. Locates cricothyroid membrane *** | |
| 5. Preps the skin of the anterior neck utilizing aseptic technique | |
| 6. Stabilizes and palpates cricothyroid membrane | |
| 7. Inserts needle through lower ½ of membrane and 45 degree angle toward the feet *** | |
| 8. Aspirates air | |
| 9. Advances catheter downward, removing the syringe and needle | |
| 10. Attaches high pressure 50 PSI tubing with release valve attached to an O ₂ tank | |
| 11. Ventilates at 100% oxygen at 20 ventilations/minute with an inspiratory/expiratory ratio of 1:3. (Adult 50 PSI, Pediatric 20PSI) *** | |

Comments:



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Intraosseous Infusion Skill Sheet

Name: _____

Examiner: _____

Date: _____

Signature: _____

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| Performance Criteria | Rating |
|---|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Identifies proper anatomical site for IO puncture *** | |
| 3. Cleanses site appropriately | |
| 4. Lowers the depth guard of the needle to cover about ¼ to ½ of the needle | |
| 5. Inserts the 15-18 gauge needle into bone marrow through the skin at a slight angle away from the knee/growth plate *** | |
| 6. Uses a boring or screwing motion until a give or “pop” is felt | |
| 7. Removes the stylet *** | |
| 8. Determines proper placement by attempting to flush the needle with IV solution *** | |
| 9. Attaches IV tubing with a stop cock | |
| 10. Secures needle with tape and supports with bulky dressing | |

Comments:



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External Jugular Vein Cannulation

Skill Sheet

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Examiner: _____

Date: _____

Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Ensures patient is in a supine position, preferable with head down | |
| 3. Ensure proper head position a. Verbalized consideration of cervical spine injury *** | |
| 4. Identifies proper anatomical site for EJ puncture *** | |
| 5. Presses finger on the vein just above the clavicle | |
| 6. Cleanses site appropriately | |
| 7. Insert 14-18 gauge (largest length) cannula *** | |
| 8. Ensures proper placement with blood aspiration | |
| 9. Secures IV tubing | |
| 10. Tapes down line securely | |

Comments:



Mountain-Valley

Emergency Medical Services Agency

Huber Needle

Skill Sheet

Name: _____

Examiner: _____

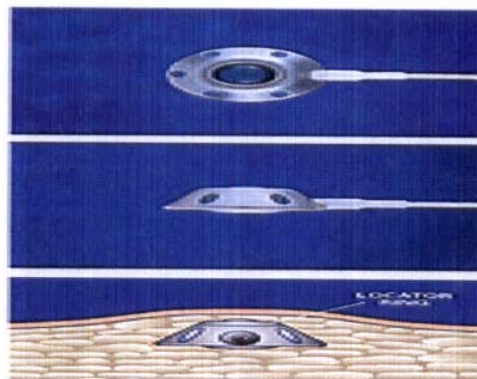
Date: _____

Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Successfully demonstrates locating the port. *** | |
| 3. Cleanses site appropriately | |
| 4. Successfully demonstrates flushing tubing | |
| 5. Demonstrates inserting needle perpendicular to port. *** | |
| 6. Verifies Correct needle placement by blood aspiration *** | |
| 7. Demonstrates proper securing of needle | |

Comments:





Mountain-Valley

Emergency Medical Services Agency

Mark-1 Kit

Skill Sheet

Name: _____

Examiner: _____

Date: _____

Signature: _____

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| Performance Criteria | Rating |
|--|--------|
| 1. Takes or verbalizes infection control precautions/BSI | |
| 2. Obtain Auto Injector: Check for expiration, cloudiness, discoloration *** | |
| 3. Removes safety cape from Injector | |
| 4. Selects appropriate injection site *** | |
| 5. Pushes Injector firmly against site | |
| 6. Holds Injector against site for a minimum of 10 seconds *** | |
| 7. Properly discards Auto-Injector | |

Comments:
