



**PHECC National Qualification in Emergency Medical Technology (NQEMT)
Objective Structured Clinical Examination (OSCE) Assessment Sheets**

Level 4 – Emergency Medical Technician (EMT)

This section of the NQEMT-EMT examination consists of eight (8) OSCE stations in total.

Primary stations

Four (4) OSCEs will be drawn from the skills objectives relating to PHECC's Education and Training Standards, 2011, Learning Outcome 1, Domain 1; and Learning Outcome 1, Domain 2.

AND

Secondary stations

Four (4) secondary OSCEs will be drawn randomly from the skills & objectives relating to PHECC's Education and Training Standards, 2011.

General notes

OSCE assessment sheets for inclusion in an NQEMT examination will be available on www.phecc.ie for a minimum of sixty (60) days prior to the examination.

White text on a black background indicates either an instruction to the examiner/candidate or separates two distinct skills on the assessment sheet.

Successful completion of each OSCE requires the candidate to score 80% of each station's elements. Critical elements, which the candidate must successfully achieve in order to successfully complete the station, are marked with an asterisk (*) on the assessment sheet. There are no critical elements on secondary assessment sheets.

Primary Assessment Sheets

Patient Assessment

Assessment Name: Vital Signs
Unique Identifier: EMT_SSMA_P001
Level / Section: EMT / Patient Assessment
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

Candidate is requested to demonstrate the following skills.		
Radial pulse		
1	Locate radial artery	
2	Count pulsations for at least 15 seconds (Examiner to confirm)	
3	State minute rate (within +/- 4 beats/min)	*
4	Report quality (strength) and rhythm (regular/irregular)	
Carotid pulse		
5	Locate the carotid artery	
6	Count pulsations for at least 15 seconds (Examiner to confirm)	
7	State minute rate (within +/- 4 beats/min)	*
8	Report quality (strength) and rhythm (regular/irregular)	
CSM		
9	Palpate the relevant peripheral pulse and count aloud/or capillary refill (Examiner to confirm)	
10	Assess sensory function	
11	Assess motor function	
AVPU		
12	Assess the AVPU scale	
13	Correct category assigned	
Respiratory rate		
14	Use recognised technique to identify a respiratory cycle	
15	Count respiratory cycle for at least 30 seconds	
16	State the minute rate (within +/- 2)	
17	Report rhythm (regular, irregular)	
18	Report quality (normal, shallow, laboured, noisy)	
19	Candidate demonstrated good communication with patient during assessment	
Capillary refill		
Examiner will ensure the patient has a clean nail surface		
20	Explain procedure to patient	
21	Depress nail bed for 5 seconds	
22	Upon release determine capillary refill	
23	State to examiner capillary refill time	
Stop station		
EXAMINER NOTE:		

Rule: Sum line 3 and 7 = 2

Assessment Name: Medical / Cardiac or Respiratory
Unique Identifier: EMT_SSMA_P002
Level / Section: EMT / Patient Assessment
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

Candidate will be given a scenario regarding a medical incident – The patient is responsive.

1	State initial impression (Verbalise)	
2	Assess responsiveness	
Breathing Assessment		
3	Assess breathing effort (Verbalise) (Examiner Note: Examiner to supply information)	
4	Consider oxygen therapy	*
Circulation Assessment		
5	Assess pulse (Quality)	
6	Capillary refill	
7	Assessment of skin (Verbalise)	
Disability		
8	AVPU, PERRL as appropriate	
9	State clinical status (as per PCR)	
10	Request advanced life support attendance, as appropriate	
Secondary Survey		
11	Vital signs (Verbalise) (Examiner Note: Examiner to supply information)	
Focused Medical History – respiratory or cardiac		
12	Onset	
13	Provocation	
14	Quality	
15	Radiation	
16	Severity	
17	Time	
18	Interventions	
Assess History		
19	Allergy	
20	Medications	
21	Last meal	
22	Pertinent medical history	
23	Events	
Interventions		
24	State treatment plan (Verbalise)	
25	Initiate cardiac monitoring (Verbalise)	
26	Determine SpO ₂ measurement	
27	Correct pharmacological intervention identified	
28	Reassess patient's clinical status	
29	Candidate demonstrated good communication with patient during assessment	

EXAMINER NOTE:

Rule: Line 4 = 1

Assessment Name: Initial Patient Assessment, Trauma - Unresponsive
Unique Identifier: EMT_PSTA_P001
Level / Section: EMT / Patient Assessment
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

Candidate will be given a scenario regarding a trauma incident – The patient is unresponsive		
1	Check for catastrophic haemorrhage (Verbalise)	
2	State initial impression (Verbalise)	
3	Apply manual in-line immobilisation	
4	Assess responsiveness	
Airway		
5	Open airway - does not compromise c-spine	*
6	Instruct assisting EMT to control C-Spine (Examiner Note: Assisting EMT now controls the head)	
7	Suction airway if appropriate (Verbalise)	
8	Inserts airway adjunct (Verbalise)	
Breathing		
9	Determine presence of adequate ventilation (Examiner Note: Examiner to supply rate)	
10	Observe for major chest injury	
11	Treat major injury, if found (Verbalise)	
12	Consider Oxygen therapy	
Circulation		
13	Assess pulse (Quality)	
14	Control major bleeding, if appropriate	
15	Assess perfusion, skin colour, temperature, condition	
16	Assess capillary refill	
Clinical Status		
17	Clinical status condition as per PCR (Verbalise)	
18	Request ALS attendance (Verbalise)	
Stabilise C-Spine		
19	Apply cervical collar correctly	
20	No unnecessary neck movement	
LOC		
21	AVPU assessment	
22	Correct category	
Rapid Trauma Assessment		
23	Perform rapid physical assessment, 60 - 90 seconds	
24	Assess vital signs (Verbalise)	
25	Cover patient to minimise heat loss	
26	Perform secondary survey (Verbalise)	
Stop station		
EXAMINER NOTE:		

Rule: Line 5= 1

Respiratory Emergencies

Assessment Name: Trauma airway
Unique Identifier: EMT_AAMA_P001
Level / Section: EMT / Respiratory Emergencies
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

Candidate is requested by examiner to demonstrate the following individual skills.

Trauma Jaw Thrust		
1	Hand position on jaw	
2	Jaw lift/open mouth	*
3	Head movement minimised	
Oral Suctioning		
4	Test suction device to ensure suction is being provided	
5	Demonstrate correct method for measurement of suction catheter	
6	Advance suction tip into mouth under direct visualisation	
7	Apply suction	
8	Suction is provided for 15 seconds maximum	
9	Ensure ventilation or oxygenation as appropriate	
Oropharyngeal Airway		
10	Select appropriate size OPA	
11	Measure OPA	
12	Open mouth	
13	Inserts OPA with tip towards roof of mouth	
14	Rotate OPA 180°	
15	OPA flange rests on lips	
Examiner states - "Patient begins to gag"		
16	Removes oropharyngeal airway	
Supraglottic Airway		
17	Select correct size SGA	
18	Lubricate the SGA	
19	Insert the SGA correctly	
20	Confirm placement by adequate chest rise	*
21	Secure SGA in place	
Stop station		
EXAMINER NOTE:		

Rule: Sum line 2 and 20 = 2

Assessment Name: Medical airway
Unique Identifier: EMT_AAMA_P002
Level / Section: EMT / Respiratory Emergencies
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

Candidate is requested by examiner to demonstrate the following individual skills.

Head Tilt-Chin Lift		
1	Hand position forehead	
2	Hand position chin	
3	Perform head tilt / chin lift	*
4	Open mouth	
Oral Suctioning		
5	Test suction device to ensure suction is being provided	
6	Demonstrate correct method for measurement of suction catheter	
7	Advance suction tip into mouth under direct visualisation	
8	Apply suction	
9	Suction is provided for 15 seconds maximum	
10	Ensure ventilation or oxygenation as appropriate	
Oropharyngeal Airway		
11	Select appropriate size OPA	
12	Measure OPA	
13	Open the mouth	
14	Inserts OPA with tip towards roof of mouth	
15	Rotate OPA 180°	
16	OPA flange rests on lips	
Examiner states - "Patient begins to gag"		
17	Removes oropharyngeal airway	
Supraglottic Airway		
18	Select correct size SGA	
19	Lubricate the SGA	
20	Insert the SGA correctly	
21	Confirm placement by adequate chest rise	*
22	Secure SGA in place	
Stop station		
EXAMINER NOTE:		

Rule: Sum line 3 and 21 = 2

Medical Emergencies

Assessment Name: AED / Shockable
Unique Identifier: EMT_BLSA_P001
Level / Section: EMT / Medical Emergencies
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

The candidate is read a scenario relating to a cardiac arrest he/she has witnessed		
1	Assemble equipment (Connect O ₂ and reservoir to BVM)	
2	Check responsiveness	
3	Open airway	
4	Assess breathing and pulse (5-10 seconds) (Examiner Note: No breathing, no pulse)	
5	Request ALS and additional personnel	
6	Prepare patient's chest (Appropriate checks)	
7	Place left defibrillation pad in correct location	
8	Place right defibrillation pad in correct location	
9	Press to analyse (Examiner Note: Shock advised)	
10	CPR while charging (Appropriate to AED)	
11	Defibrillate	
12	Commence CPR immediately	
13	2 minutes of CPR	
14	Consider OPA/advanced airway (Verbalise)	
15	Press to analyse (Shock advised)	
16	CPR while charging (Appropriate to AED)	
17	Defibrillate	
18	Resume CPR immediately	
19	2 minutes of CPR	
20	Press to analyse (Examiner Note: No Shock advised)	
21	Assess pulse (Examiner Note: Pulse Present)	
22	Support ventilation while delivering 100% O ₂ (Verbalise)	
23	Monitor ECG and SpO ₂ (Verbalise)	
24	Commence active cooling (Verbalise)	
25	Check with control re: the availability of appropriate practitioner (Verbalise)	
Practitioner available / not available		
26	Candidate makes correct transport decision	
27	During assessment the candidate minimised "hands-off chest" time	*
28	During assessment of AED the candidate ensures safety of personnel and others	*
29	During assessment of CPR the compressions were effective (Rate 100 to 120 per min)	
30	During assessment of CPR the ventilations make chest rise (1 second duration)	
Stop station		
EXAMINER NOTE:		

Rule: Sum line 27 and 28 = 2

Assessment Name: AED / Non Shockable
Unique Identifier: EMT_BLSA_P002
Level / Section: EMT / Medical Emergencies
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

The candidate is read a scenario relating to a cardiac arrest he/she has not witnessed		
1	Assemble equipment (Connect O ₂ and reservoir to BVM)	
2	Check responsiveness	
3	Turn on defibrillator (Early in sequence)	
4	Open airway	
5	Assess breathing and pulse (5-10 seconds) (Examiner Note: No breathing, no pulse)	
6	Request ALS and additional personnel	
7	Prepare patient's chest (Appropriate checks)	
8	Place left defibrillation pad in correct location	
9	Place right defibrillation pad in correct location	
10	Press to analyse (Examiner Note: No shock advised)	
11	Resume CPR immediately	
12	2 minutes of CPR	
13	Consider OPA/advanced airway (Verbalise)	
14	Press to analyse (Examiner Note: No shock advised)	
15	Assess pulse (5 to 10 sec) (Examiner Note: No Pulse)	
Candidate advised that "resuscitation is ongoing for 20 minutes"		
16	Check with control re: the availability of appropriate practitioner (Verbalise)	
Practitioner available / not available		
17	Candidate makes correct transport decision	
18	During assessment the candidate minimised "hands-off chest" time	*
19	During assessment of AED the candidate ensures safety of personnel and others	*
20	During assessment of CPR the compressions were effective (Rate 100 to 120 per min)	
21	During assessment of CPR the ventilations make chest rise (1 second duration)	
Stop station		
EXAMINER NOTE:		

Rule: Sum line 18 and 19 = 2

Assessment Name: Adult FBAO and Recovery Position
Unique Identifier: EMT_FBAOA_P001
Level / Section: EMT / Medical Emergencies
Current Version: Version 2 (August 2011)



Candidate Number:		Assessment Date:
Candidate is read an appropriate scenario Recovery position		
1	Check responsiveness	
2	Open airway	*
3	Check breathing	
Candidate is advised - "Patient is breathing adequately"		
4	Check pulse	
Candidate is advised - "Pulse present"		
5	Inspect and prepare immediate area (safety)	
6	Physically assess patient for objects that may cause harm	
7	Remove unsafe objects for patient's safety	
8	Roll patient laterally	
9	Support the head as patient is turned	
10	Ensure the uppermost arm supports the body	
11	Ensure the uppermost leg supports the body	
12	Maintain an open airway	
13	Check breathing	
Candidate is advised - "Patient is breathing adequately"		
14	Check pulse	
Candidate is advised - "Pulse present"		

FBAO		
15	Confirm airway obstruction	*
16	Position and perform up to 5 back blows	
17	Correct hand position during back blows	
18	Perform up to 5 abdominal thrusts (or chest thrusts if obese/pregnant)	
19	Correct hand position during thrusts	
20	Continue until effective or patient collapse	
Candidate is advised - "Patient becomes unresponsive"		
21	Patient lowered safely to the ground	
22	Request ALS	
23	Commence CPR with compressions	
24	Inspect airway before each ventilation	
Candidate is advised - "The object has become visible" (after one cycle approx)		
25	Perform finger sweep	
26	Check breathing	
27	Consider O ₂ therapy	
Candidate is advised - "Patient is breathing"		
28	Check circulation	
Candidate is advised - "Adequate pulse present"		
29	During performance of CPR compressions were effective	
	STOP STATION	
EXAMINER NOTE:		

Rule: Sum line 2 and 15 = 2

Assessment Name: Paediatric FBAO and Adult Recovery
Position
Unique Identifier: EMT_FBAOP_P001
Level / Section: EMT / Medical Emergencies
Current Version: Version 3 (August 2011)



Candidate Number: _____ **Assessment Date:** _____

Candidate is read an appropriate scenario and is advised of two separate skills		
Recovery position		
1	Check responsiveness	
2	Open airway	*
3	Check breathing	
Candidate is advised - "Patient is breathing adequately"		
4	Check pulse	
Candidate is advised - "Pulse present"		
5	Inspect and prepare immediate area (safety)	
6	Physically assess patient for objects that may cause harm	
7	Remove unsafe objects for patient's safety	
8	Roll patient laterally	
9	Support the head as patient is turned	
10	Ensure the uppermost arm supports the body	
11	Ensure the uppermost leg supports the body	
12	Maintain an open airway	
13	Check breathing	
Candidate is advised - "Patient is breathing adequately"		
14	Check pulse	
Candidate is advised - "Pulse present"		

Paediatric FBAO		
15	Confirm airway obstruction	*
16	Position and perform up to 5 back blows	
17	Correct hand position during back blows	
18	Perform up to 5 abdominal thrusts (or chest thrusts on infant)	
19	Correct hand position during thrusts	
20	Continue until effective or patient collapse	
Candidate is advised - "Patient becomes unresponsive"		
21	Patient lowered safely to the ground	
22	Request ALS	
23	Inspect airway and remove if visualised	
24	Attempt up to 5 rescue breaths	
25	Commence CPR with compressions	
26	Inspect airway before each ventilation	
Candidate is advised - "The object has become visible" (after one cycle approx)		
27	Perform finger sweep	
28	Check breathing	
Candidate is advised - "Patient is breathing"		
29	Consider O ₂ therapy	
30	Check circulation	
Candidate is advised - "Adequate pulse present"		
31	During performance of CPR compressions were effective	
STOP STATION		
EXAMINER NOTE:		

Rule: Sum line 2 and 15 = 2

Trauma

Assessment Name: Haemorrhage Control
Unique Identifier: EMT_EHA_P001
Level / Section: EMT / Trauma
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

The candidate is given a scenario relating to a patient who has a limb injury with significant blood loss		
1	Position patient sitting/lying	
2	Examine wound	
3	Elevate the extremity	
4	Apply secure sterile dressing to the wound	*
Examiner states "Wound is still bleeding"		
5	Apply additional dressing(s)	
Examiner states "Bleeding has stopped, however the patient is in compensatory shock"		
6	Apply Oxygen via appropriate delivery mask	
7	Appropriate patient position	
8	Prevent heat loss	
Examiner states "the victim is in decompensated shock "		
9	Assess that dressing/bandages are controlling haemorrhage	
10	S _p O ₂ and ECG Monitor (Verbalise)	
11	State clinical status as per PCR	
12	Advise "Transport and treat"	
13	Candidate demonstrated good communication with patient during assessment	
14	CSMs appropriately assessed during assessment	
Stop station		
EXAMINER NOTE:		

Rule: Line 4 = 1

Paediatric Emergencies

Assessment Name: Initial Patient Assessment, Trauma - Unresponsive
Unique Identifier: EMT_PSMP_P001
Level / Section: EMT / Paediatric Emergencies
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

Candidate will be given a scenario regarding a trauma incident – The patient is unresponsive		
1	State initial impression (Verbalise)	
2	Apply manual in-line immobilisation	
3	Assess responsiveness (Unresponsive)	
Airway		
4	Open airway - does not compromise c-spine	*
5	Instruct assisting EMT to control C-Spine (Examiner Note: Assisting EMT now controls the head)	
6	Suction airway if appropriate (Verbalise)	
7	Inserts airway adjunct (Verbalise)	
Breathing		
8	Determine presence of adequate ventilation (Examiner Note: Examiner to supply rate)	
9	Observe for major chest injury	
10	Treat major injury, if found (Verbalise)	
11	Consider Oxygen therapy	
Circulation		
12	Assess pulse (Quality)	
13	Control major bleeding if appropriate	
14	Assess perfusion, skin colour, temp, condition	
15	Assess capillary refill	
Clinical Status		
16	Clinical status condition as per PCR (Verbalise)	
17	Request ALS attendance (Verbalise)	
Stabilise C-Spine		
18	Apply cervical collar correctly	
19	No unnecessary neck movement	
LOC		
20	AVPU	
Rapid Trauma Assessment		
21	Perform rapid physical assessment, 60 - 90 seconds	
22	Assess vital signs (Verbalise)	
23	Cover patient to minimise heat loss	
24	Perform secondary survey (Verbalise)	
Stop station		
EXAMINER NOTE:		

Rule: Line 4 = 1

Secondary Assessment Sheets

Introduction to Pre-Hospital Care

Patient Assessment

Assessment Name: Vital Signs
Unique Identifier: EMT_SSMA_S001
Level / Section: EMT / Patient Assessment
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

Candidate is asked to assess a patient for responsiveness.		
AVPU		
1	Assess responsiveness verbally	
2	Assess responsiveness by applying a low level of pain	
3	Assign the patient correct category on the AVPU scale	
Pupil assessment (The patient will be responsive for the remainder of this assessment)		
4	Explain procedure to the patient	
5	Determine size of pupil 1	
6	Determine reaction of pupil 1 to light	
7	Determine reaction of pupil 2 to illumination of pupil 1	
8	Determine size of pupil 2	
9	Determine reaction of pupil 2 to light	
10	Determine reaction of pupil 1 to illumination of pupil 2	
11	State condition of pupils	
Examiner will show candidate picture of pupils. Candidate to state common cause of pupil appearance		
12	Describe pupils as presented	
Blood Pressure		
13	Explains procedure to the patient	
14	Place BP cuff around the patient's upper arm	
15	Place the diaphragm of the stethoscope over the area of the brachial artery	
16	Inflate the cuff to at least 20 mmHg above point when pulse sounds disappear	
17	Deflate the cuff slowly	
18	Report the obtained measurement	
Temperature		
19	Switch on tympanic thermometer	
20	Place disposable probe cover on earpiece	
21	Explain procedure to patient	
22	Insert thermometer into ear	
23	Remove thermometer at appropriate moment	
24	State patient's temperature	
25	Dispose of cover in appropriate bin	
Communication		
26	Candidate displayed good communication with patient throughout assessment	
Stop station		
EXAMINER NOTE:		

Medical Emergencies

Assessment Name: Altered Level of Consciousness (ALOC)
Unique Identifier: EMT_ALOCA_S001
Level / Section: EMT /Medical Emergencies
Current Version: Version 1 (July 2009)



Candidate Number:	Assessment Date:

Candidate is read a scenario which relates to a medical case-the primary survey has been completed -the patient has an altered level of consciousness and is V, P or U on the AVPU scale.

Initial Assessment completed - ABC intact		
1	Initial impression	
2	Maintain airway	
3	AVPU assessment	
4	Correct AVPU assessment	
P or U - request ALS or V - consider Paramedic		
5	Correct assistance request made	
6	Place patient in recovery position	
7	Obtain SAMPLE history from bystander (Verbalise)	
8	Apply ECG (Verbalise)	
9	Apply SpO ₂ (Verbalise)	
10	Assess temperature	
11	Assess pupils	
12	Assess for skin rash	
13	Assess for medication carried	
14	Assess for medication alert jewellery	
Blood Glucose		
15	Prepare test site	
16	Confirm glucometer reading (Examiner Note: Examiner supply reading)	
Candidate identifies provisional working diagnosis		
17	Correct working diagnosis identified	
18	Candidate demonstrated good communication with patient during assessment	
Stop station		
EXAMINER NOTE:		

Assessment Name: Cardiac Chest Pain / Pharmacology
Unique Identifier: EMT_CCPACS_S001
Level / Section: EMT / Medical Emergencies
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

The candidate is read a scenario regarding a patient whose chief complaint is chest pain.		
1	Assess airway	
2	Assess breathing	
3	Consider O ₂ Administration	
4	Correct dose (Verbalise)	
5	Assess circulation	
6	Initial clinical impression	
7	Request ALS attendance	
Focused History and Physical Examination		
8	Place patient in position of comfort	
9	Provide reassurance	
10	Assess skin colour, temperature and condition	
11	Apply 3 lead ECG monitoring	
12	Print strip and assess rhythm	
13	Gather SAMPLE history (Examiner Note: Examiner supply information)	
14	Gather OPQRST information (Examiner Note: Examiner supply information)	
15	Consider Aspirin administration	
16	Rule out contraindications (Examiner Note: Examiner supply information)	
17	Correct dose (Verbalised)	
18	Correct method of administration (Verbalised)	
19	Assess vital signs (Examiner Note: Examiner supply information)	
20	Consider GTN administration	
21	Rule out contraindications with patient (Examiner Note: Examiner supply information)	
22	Correct dose (Verbalised)	
23	Correct method of administration (Verbalised)	
24	Consider side effects (Verbalised)	
25	Repeat GTN dose indication (Verbalised)	
26	Maximum dose (Verbalised)	
27	Commence transport of patient (Verbalised)	
28	Monitor vital signs (Examiner Note: Examiner supply information)	
29	Candidate demonstrated good communication with the patient during the assessment	
Stop station		

EXAMINER NOTE:

NB. No actual medication to be administered to patient during assessment.

If contraindication precludes the administration of medication, the candidate will be awarded all points relevant to that medication.

Assessment Name: Rhythm recognition
Unique Identifier: EMT_BLSA_S001
Level / Section: EMT / Medical Emergencies
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

Candidate is expected to identify specific ECG rhythms – The candidate will identify each rhythm twice.

The seven (7) rhythms assessed in this OSCE are:

Normal Sinus Rhythm, Sinus Bradycardia, Sinus Tachycardia, Sinus Rhythm with Premature Ventricular Contractions, Ventricular Fibrillation, Ventricular Tachycardia, Asystole.

1	Rhythm 1 (print-out)	
2	Rhythm 2 (print-out)	
3	Rhythm 3 (print-out)	
4	Rhythm 4 (print-out)	
5	Rhythm 5 (print-out)	
6	Rhythm 6 (print-out)	
7	Rhythm 7 (print-out)	
8	Rhythm 8 (dynamic)	
9	Rhythm 9 (dynamic)	
10	Rhythm 10 (dynamic)	
11	Rhythm 11 (dynamic)	
12	Rhythm 12 (dynamic)	
13	Rhythm 13 (dynamic)	
14	Rhythm 14 (dynamic)	

Stop station

EXAMINER NOTE:

Assessment Name: ECG Monitoring and Recognition
Unique Identifier: EMT_BLSA_S002
Level / Section: EMT / Medical Emergencies
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

The candidate is asked to obtain an ECG reading from a patient and asked to identify it correctly.		
1	Explain procedure to patient	
2	Turn on monitor	
3	Ensure AED is set to monitoring function	
4	Ensure monitoring cable connected to AED	
5	Ensure AED is on lead II	
6	Attach ECG electrodes to cables	
7	Attach RA Cable	
8	Attach LA Cable	
9	Attach LL Cable	
10	Attach earth cable (Examiner Note: Point awarded - if no earth cable)	
11	Electrodes connected in appropriate position	
12	Confirm screen display (Verbalise)	
Examiner will show candidate rhythm to identify		
13	Identify rhythm	
14	Confirm mechanical output matches on-screen rhythm	
15	Print 6 sec ECG rhythm strip	
16	Ensure patient identity is entered on ECG rhythm strip	
17	Enter rhythm details on PCR (Verbalise)	
18	Maintains the modesty of the patient during process (Verbalise)	
Stop station		
EXAMINER NOTE:		

Trauma

Assessment Name: Limb Fracture
Unique Identifier: EMT_LFA_S001
Level / Section: EMT / Trauma
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

Candidate is read a scenario which involves a possible limb fracture.

initial assessment completed - the patient is stable		
1	Consider pain relief (Verbalise)	
2	Explain procedure to patient	
3	Direct assistant EMT to apply manual stabilisation to affected limb	
4	Expose and examine limb	
5	Dress Open Fracture (verbalise)	
6	Assess Circulation, Sensory and Motor function	
7	Select appropriate splinting device	
8	Splinting device applied correctly	
9	Assess Circulation, Sensory and Motor function	
10	No unnecessary movement during procedure	
11	Necessary padding in place	
12	Immobilisation is adequate, in relation to joint above fracture	
13	Immobilisation is adequate, in relation to joint below fracture	
14	Reassess CSMs	
15	Position of function maintained	
16	Candidate demonstrated good communication with patient	
Stop station		
EXAMINER NOTE:		

Assessment Name: Helmet Removal / Cervical Collar
Unique Identifier: EMT_SIA_S001
Level / Section: EMT / Trauma
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

**Instruction to Examiner: Intact full face helmet to be used and there is an assisting EMT.
 Appropriate patient assessment completed – patient is stable**

1	Perform manual immobilisation of the head and neck	
2	Explain the procedure to the patient	
3	State contraindications to moving head into neutral alignment (Verbalise)	
4	Head brought into neutral position	
5	Direct assisting EMT to undo the chinstrap	
6	Direct assisting EMT to take over in-line immobilisation of the head from the side	
7	Reposition hands so the fingers are covered around the lowered edge of the helmet	
8	Advise assisting EMT on hand changes required	
9	Good communication with assisting EMT	
10	Remove the helmet in incremental stages	
11	Minimise head movement during procedure	
12	When the helmet is removed retake manual immobilisation	
13	Head brought into neutral alignment	
14	Assisting EMT is directed to fill in dead space between head and ground with suitable material (If applicable)	

**Candidate is read appropriate scenario.
 Cervical Collar application**

15	Requests assisting practitioner to maintain c-spine control	
16	Ensure head is in neutral position	
17	Explain procedure to patient	
18	Perform CSM assessment in all limbs (Verbalise)	
19	Measure patient for collar size	
20	Match key dimensions with collar	
21	Select collar	
22	Assemble collar	
23	Slide collar under neck	
24	Close Velcro® strap (Open and re-adjust if necessary)	
25	No unnecessary neck movement during application	
26	Perform CSM assessment in all limbs (Verbalise)	
27	Appropriately fitted collar (Correct size)	

**Stop station
 EXAMINER NOTE:**

Paediatric Emergencies

Assessment Name: Stridor - Paediatric
Unique Identifier: EMT_SP_S001
Level / Section: EMT / Paediatric Emergencies
Current Version: Version 3 (August 2011)



Candidate Number:	Assessment Date:

Candidate will be read an appropriate scenario		
1	General impression	
2	Confirm absence of foreign body	
3	Assess and maintain airway	
4	Obtain SAMPLE History	
5	Assess temperature (Examiner Note: Temperature is normal)	
6	Consider presence of Croup or Epiglottitis (Verbalise) (Examiner Note: Confirm conditions are not present)	
7	State clinical impression	
8	Reassure patient and guardian	
9	Verbalise need for humidified O ₂	
10	Select water to be nebulised	
11	Perform appropriate checks on container	
12	Select appropriate nebuliser mask	
13	Apply sterilised water to chamber	
14	Set appropriate flow rate	
15	Attach ECG monitor	
16	Attach SpO ₂ device	
17	Verbalise transport in position of comfort	
18	Appropriate communication with patient and guardian	
Stop station		
EXAMINER NOTE:		

Pre-Hospital Emergency Care Operations

Assessment Name: Radio Messages / Phonetic Alphabet
Unique Identifier: EMT_MEPPPOS_S001
Level / Section: EMT / Pre-Hospital Emergency Care Operations
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

Candidate is given 1 minute to read a scenario card which can be referred to during the assessment .		
1	Candidate requests to speak to control using proper radio communications	
2	Candidate informs control to standby for ASHICE Message	
3	Report "A" Age	
4	Report "S" Sex	
5	Report "H" History	
6	Report "I" Illness-Injury	
7	Report "C" Condition (Vital signs and reason for pre-alerting ED)	
8	Report "E" Estimated Time of Arrival	
9	Confirms message is understood	
Control requests candidate to spell a word used in transmission - using phonetic alphabet		
10	Letter 1	
11	Letter 2	
12	Letter 3	
13	Letter 4	
14	Letter 5	
15	Letter 6	
16	Word related correctly	
17	Candidate confirms message received	
Stop station		
EXAMINER NOTE:		

Assessment Name: Triage Sieve
Unique Identifier: EMT_TS_S001
Level / Section: EMT / Pre-Hospital Emergency Care Operations
Current Version: Version 1 (July 2009)



Candidate Number:	Assessment Date:

Candidate is given a scenario to indicate that a major emergency is in place- Examiner will supply all relevant patient information as requested

1	Establish presence of walking patients	
2	Attach Priority 3 label	
3	Identifies a safe location for victim to go to	
4	Patient instructed to remain at specified location	
Patient		
5	Assess breathing	
6	Open airway (If appropriate)	
7	Assess respiratory rate	
8	Assess capillary refill or pulse rate (If appropriate)	
9	Attach priority category/label (Examiner Note: 1-Immediate, 2-Urgent, 3-Delayed, 4-Dead)	
Patient		
10	Assess breathing	
11	Open airway (If appropriate)	
12	Assess respiratory rate	
13	Assess capillary refill or pulse rate (If appropriate)	
14	Attach priority category/label (Examiner Note: 1-Immediate, 2-Urgent, 3-Delayed, 4-Dead)	
Patient		
15	Assess breathing	
16	Open airway (If appropriate)	
17	Assess respiratory rate	
18	Assess capillary refill or pulse rate (If appropriate)	
19	Attach priority category/label (Examiner Note: 1-Immediate, 2-Urgent, 3-Delayed, 4-Dead)	

Notes:

- 1 If the patient is Green the candidate will be awarded marks for the elements checking breathing, respiratory rate and capillary refill if they are not checked and conversely will not be awarded marks if they are checked.
- 2 If the patient is White the above will apply except for the element check breathing.
- 3 If the patient is Red the candidate is required to check the various elements until one of the elements indicates Red. If the candidate continues checking beyond this indication the marks will not be awarded for those elements and conversely will be awarded marks if the elements are not checked.

Using a scenario card the candidate will deliver a radio report to ambulance control regarding the incident

20	M – Major Incident	(declared or standby)	
21	E – Exact Location	(grid reference, landmark)	
22	T – Type of incident	(rail, air, road)	
23	H – Hazards	(present or potential)	
24	A – Access	(direction of approach)	
25	N – Number of casualties	(severity and or type)	
26	E – Emergency services	(present or required)	

Stop station

Clinical Procedures

Assessment Name: Healthcare risk waste management, glove removal, disposal and hand washing

Unique Identifier: EMT_PSMA_S001

Level / Section: EMT / Clinical Procedures

Current Version: Version 2 (August 2011)



Candidate Number:

Assessment Date:

Candidate is read a scenario relating to a clinical incident having taken place. The candidate must "clean up/make safe" the area.

1	Scene safety	
2	Candidate selects and puts gloves on	
3	Correct sized glove selected	
4	Place sharps in the sharps box	
5	Place healthcare risk waste material in appropriate waste container	
6	Place non-healthcare risk waste into the appropriate bin	
7	Wipe contaminated surfaces/disinfect area using an appropriate cleansing agent	
Glove Removal		
8	Outside surface of the gloves not allowed to come in contact with skin during removal	
9	Glove gently removed to avoid pathogen spray	
10	Dispose of soiled gloves in the healthcare risk waste bin	
Candidate demonstrates and verbalises hand washing technique		
11	Remove hand and wrist jewellery	
12	Wet hands under running water	
13	Apply soap/antiseptic soap (Press dispenser with heel of hand)	
14	Wet hands and rub palm to palm (5 times)	
15	Rub right palm over back of left hand (5 times)	
16	Rub left palm over back of right hand (5 times)	
17	Rub left fingers over back of right fingers (5 times)	
18	Rub right fingers over back of left fingers (5 times)	
19	Rub palm to palm with fingers interlaced (5 times)	
20	Rub left thumb (rotating movement) (5 times)	
21	Rub right thumb (rotating movement) (5 times)	
22	Rub tips of right fingers against opposite palm using circular movement (5 times)	
23	Rub tips of left fingers against opposite palm using circular movement (5 times)	
24	Rinse hands thoroughly	
25	Turn off taps without contaminating hands	
26	Dry hands using paper towel	
27	Discard paper towel in waste bin	

Stop station

EXAMINER NOTE: Reference- Handwashing information – HSE - Health Protection Surveillance Centre. <http://www.ndsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/Posters/>

Assessment Name: Pharmacology, Selection and Administration
Unique Identifier: EMT_CPG_S001
Level / Section: EMT / Clinical Procedures
Current Version: Version 2 (August 2011)



Candidate Number:	Assessment Date:

The candidate is read a scenario directly relating to any relevant clinical situation. The candidate then selects the appropriate medication for the situation.

The candidate will be given two (2) separate clinical scenarios during this assessment.

- Aspirin
- Glucose gel
- Glyceryl Trinitrate
- Adrenaline (1:1 000) - *auto injector*
- Entonox
- Oxygen
- Salbutamol -*inhaled aerosol*
- Paracetamol
- Glucagon

All medications as per S.I. 510 - 2006

Scenario 1

1	Correct medication selection	
2	Check expiry date (Verbalise)	
3	Contraindications (Verbalise)	
4	Identify appropriate dose (Verbalise)	
5	Re-confirm correct selection	
6	Identify Route	
7	State potential adverse side effects (Verbalise)	
8	State repeat administration instructions (Verbalise)	
9	Record administration (Demonstrate)	

Scenario 2

10	Correct medication selection	
11	Check expiry date (Verbalise)	
12	Contraindications (Verbalise)	
13	Identify appropriate dose (Verbalise)	
14	Re-confirm correct selection	
15	Identify Route	
16	State potential adverse side effects (Verbalise)	
17	State repeat administration instructions (Verbalise)	
18	Record administration (Demonstrate)	

Stop station

EXAMINER NOTE:

NB - The candidate will demonstrate I.M injections using a substitute for IM location. If re-constituting med then no points for same.

Assessment Name: IM Injection (Ampoule)
Unique Identifier: EMT_A_S001
Level / Section: EMT / Clinical Procedures
Current Version: Version 1 (August 2011)



Candidate Number:	Assessment Date:

Candidate is read appropriate scenario.		
IM injection preparation		
1	Select appropriate needle	
2	Select appropriate syringe	
3	Select drawing up/blunt needle	
4	Assemble syringe and drawing up/blunt needle	
5	Select appropriate medication	
Confirm 6 rights of medication administration		
6	Patient	
7	Medication	
8	Dose	
9	Route	
10	Time	
11	Documentation	
12	Break tip of ampoule safely	
13	Dispose of tip in appropriate container	
14	Discard needle in appropriate container	
15	Assemble administration needle and syringe	
16	Expel excess air	
IM injection Procedure		
17	Explain procedure to patient/seek consent	
18	Identify three recognised sites for IM injection to examiner	
19	Uncover the selected injection site	
20	Cleanse site	
21	Confirm allergies or contraindications present	
22	Stretch the skin over injection site	
Examiner redirects candidate to training aid and specifies volume to be injected		
23	Pierce skin/needle at 90° angle	
24	Aspirate before injecting (demonstrate and verbalise)	
25	Administer required dose	
26	Withdraw the needle and syringe	
27	Discard in a sharps container	
28	Release the skin over injection site	
29	Massage the area	
30	Document medication administration on PCR	
Stop station		
EXAMINER NOTE:		