

# Northwest Community EMS system

## Provisional Certificate EMT - QI Skill Critique Form

Name	Agency	
Date	Time in	Time out

**Complete at least one QI skill critique form for each shift – more if pt contacts exceed 5.**

**Qualified Partner-** Rate the Provisional EMT's competency in the appropriate box based on the following rating scale:

- 0 Observed only
- 1 Not yet competent: Unsuccessful; required critical or excess prompting; marginal or inconsistent technique
- 2 Successful; competent with correct timing, sequence & technique , no prompting necessary

BLS Skills	Attempt 1	Attempt 2	Attempt 3	Attempt 4	Attempt 5
<b>Patient assessment/vital signs</b>					
Selection/donning/doffing PPE					
Primary assessment					
Recognition/resuscitation of life threat					
Secondary assessment					
Reach appropriate EMT impression					
Obtaining SAMPLE history					
Pulse					
Blood pressure					
Respiratory rate					
Temperature					
Pupils: size, shape, symmetry; reactivity					
Auscultated lung sounds					
Blood glucose					
<b>Airway/Oxygen delivery</b>					
Manual airway opening maneuvers					
Obstructed airway maneuvers					
Oral pharyngeal airway					
Nasal pharyngeal airway					
O <sub>2</sub> / Nasal cannula					
O <sub>2</sub> :/ Nonrebreather Mask					
O <sub>2</sub> / BVM					
BiPAP, CPAP, PEEP					
Oral Suctioning					
Tracheal suctioning of intubated pt					
<b>Cardiac assessment/support</b>					
Application of ECG limb leads					
12L ECG acquisition and transmission					
AED use					
Initiate/Perform manual CPR					
Apply/monitor CPR device					
Spike IV bag; prime tubing for IV access					
<b>Medication Administration</b>					
Albuterol / Ipratropium Bromide HHN					
ASA PO					
Diphenhydramine PO					
Epinephrine (1 mg/1 mL) IM					

BLS Skills	Attempt 1	Attempt 2	Attempt 3	Attempt 4	Attempt 5
Glucagon IN or IM					
Naloxone – IN or IM					
Nitroglycerine SL					
Ondansetron (ODT)					
<b>Dressing &amp; bandaging</b>					
Wound or burn care/gauze dressings					
Hemostatic dressings					
Occlusive dressings/chest seals					
Application of direct pressure					
Applications of cold/hot packs					
Application/monitoring of tourniquet					
Care of amputated parts					
<b>Splinting</b>					
Traction splint					
Rigid splint					
Pelvic fx splinting					
Sling/swathe					
<b>Spine motion restriction</b>					
Sizing/application of C-Collar					
Backboard/scoop stretcher					
KED					
<b>Other</b>					
Monitoring of placed OG / NG tube					
Vaginal delivery					
Limb restraints					
<b>Patient movement/transfers</b>					
Pt transfer to EMS conveyance device					
Secure pt into the ambulance					
Pt transfer into the receiving facility					
<b>Communications</b>					
Therapeutic communication: Pt					
OLMC verbal report					
Handover report to receiving facility					
Documentation of written ePCR					
<b>Affective Behaviors</b>				<b>Meets</b>	Does not meet
Integrity: Honesty, maintains pt. confidentiality					
Empathy: Shows compassion for others					
Self-motivation: Disciplined, seeks tasks					
Appearance and personal hygiene					
Self-confidence: Aware of strengths and weaknesses					
Communications: Speaks clearly, actively listens					
Teamwork and diplomacy: Supports and respects team members					
Attitude: Demonstrates a positive attitude and accepts coaching					
Patient advocacy: Understands and defends appropriate patient management					

**Additional Comments on back**

Qualified Partner name (PRINT)

Qualified Partner signature / credentials

Date submitted