

Performance standard 1 Step omitted (or leave blank) 2 Not yet competent: Unsuccessful; required critical or excess prompting; marginal or inconsistent technique 3 Successful; competent with correct timing, sequence & technique, no prompting necessary	Attempt 1 rating	Attempt 2 rating
* Confirm tracheal placement: <input type="checkbox"/> Ensure adequate ventilations & oxygenation: 15 L O ₂ assist ventilations as needed at 10 BPM unless asthma/COPD (6-8 BPM) – observe chest rise; Auscultate over epigastrium, both midaxillary lines and anterior chest X 2 <input type="checkbox"/> Definitive confirmation: monitor ETCO₂ number & waveform. Continue to monitor continuously.		
Troubleshooting <input type="checkbox"/> *If breath sounds only on right, withdraw ETT slightly and listen again. <input type="checkbox"/> *If incorrectly placed: remove ETT, attempt to reoxygenate 30 sec; assess to determine error and take corrective action.		
* If tube placed correctly <input type="checkbox"/> *If no gastric sounds & breath sounds present and equal bilaterally, inflate cuff w/ up to 10 mL air to proper pressure (minimal leak) & remove syringe <input type="checkbox"/> Secure ETT with commercial tube holder; immobilize head. May place 4X4 around tube to help absorb bleeding; do NOT cut gauze; fibers may enter trachea		
* Reassess: Frequently monitor SpO ₂ , EtCO ₂ , tube depth, VS, & lung sounds enroute to detect displacement, complications (esp. after pt movement), or condition change Monitor insertion site for complications		
Verbalize at least 2 early complications of the procedure: <input type="checkbox"/> Prolonged execution <input type="checkbox"/> Aspiration <input type="checkbox"/> Hemorrhage <input type="checkbox"/> False placement <input type="checkbox"/> SUBQ emphysema <input type="checkbox"/> Injury to Neck structures <input type="checkbox"/> Tube obstruction <input type="checkbox"/> Asphyxia <input type="checkbox"/> Dysrhythmias/arrest		
Document: Indication for procedure, size ETT placed, how correct placement was confirmed; ongoing assessment findings; any complications, your interventions, and the patient's response.		
Critical Criteria - Check if occurred during an attempt <input type="checkbox"/> Failure to attempt ventilations within 30 sec after taking BSI precautions or interrupts ventilations for >30 sec any time <input type="checkbox"/> Failure to take or verbalize body substance isolation precautions <input type="checkbox"/> Failure to voice and ultimately provide high oxygen concentration [at least 85%] <input type="checkbox"/> Failure to attempt to pre-oxygenate patient prior to beginning procedure <input type="checkbox"/> Contaminates equipment or site without appropriately correcting situation <input type="checkbox"/> Failure to insert airway device into trachea at a proper depth or location within 2 attempts <input type="checkbox"/> Performs any improper technique resulting in potential for uncontrolled hemorrhage or in a manner dangerous to pt <input type="checkbox"/> Failure to dispose blood-contaminated sharps immediately in proper container at point of use <input type="checkbox"/> Failure to inflate ETT cuff properly and immediately remove the syringe <input type="checkbox"/> Failure to secure the airway adequately <input type="checkbox"/> Failure to confirm that patient is being ventilated properly (rate & volume) by auscultation bilaterally over lungs, over epigastrium, and confirming with capnography <input type="checkbox"/> Failure to manage the patient as a competent practitioner <input type="checkbox"/> Exhibits unacceptable affect with patient or other personnel <input type="checkbox"/> Uses or orders a dangerous or inappropriate intervention		

Factually document below your rationale for checking any of the above critical criteria.

Rating: (Select 1)

- Proficient:** Skillful and efficient; performed all steps independently in full conformity with practice standards for competency, could rapidly problem solve and integrate history, exam findings, and perform multiple tasks concurrently with contextual and adaptive competence while forming appropriate EMS impressions without assistance or instruction.
- Competent:** All key steps independently performed with correct technique, sequence and timing. All starred (*) items explained/performed correctly with no critical error; minimal coaching needed.
- Practice evolving/not yet competent:** Did not perform with correct technique, sequence, or timing; required frequent coaching or reference to procedure manual | made critical errors | recommend additional practice

Preceptor (PRINT NAME – signature)