Thank you for serving as a Skill Examiner at today’s examination. Please take a few moments to review the instructions for your station.

**Skill Examiner Responsibilities**

- Act in a professional and unbiased manner toward everyone involved in the exam, including candidates.
- Limit conversation with candidates to instructions and answering exam-related questions.
- Do not behave in a way that is discriminatory or perceived as harassment, and immediately report all instances of discrimination or harassment to the National Registry Representative.
- Maintain control of your scenario.
  - Familiarize yourself with the details of the scenario.
  - Brief simulated patients and assistants.
  - Make sure all equipment is functional.
- Be sure that all exam materials always remain in a secure place.
- Return all exam materials to the National Registry Representative.
  - Include all notes taken by the candidate.
- Thoroughly document justification for the candidate's score, especially if any Critical Criteria are identified.
- Do not give verbal or physical cues to the candidate to indicate their performance at your station. Remain neutral and objective in your conduct.

**Skill Examiner Key Points**

- Candidates are expected to choose equipment and medications based on current evidence-based guidelines and the national scope of practice for the level for which the candidate is testing.
- The chronological order in which a candidate performs each step for a skill is only important if performing steps out of order would cause harm.
- Reasonable equipment substitutions are acceptable. Direct any questions regarding equipment substitutions to the National Registry Representative.
- Report all equipment failures immediately to the National Registry Representative, and promptly replace defective equipment.
- If a candidate is unsuccessful in completing the Intravenous Therapy skill, they may move on to the Intravenous Bolus Medication skill. It is then acceptable to initiate the IV for the candidate or have a separate IV line solely for the Intravenous Bolus Medication skill.
Intravenous Therapy

Intravenous Therapy Key Points

- If flashback does not occur due to an equipment abnormality, but should have occurred based on the candidate's performance, simply tell the candidate that they observe flashback.
- If the candidate does not successfully initiate the IV, they can still move on to the Intravenous Bolus Medications skill station.

Intravenous Bolus Medications

Intravenous Bolus Medications Key Points

- An array of medications in prefilled syringes should be presented to the candidate to allow the candidate to choose the appropriate medication.
- The prefilled syringes should be filled with water, saline, or IV solution and must be refilled and repackaged before each candidate is permitted to enter the room.
- Interact with the candidate as if you are the patient and be sure to give clear information.
- The actual amount of drug dispelled from the syringe is what verifies the dosage administered, regardless of the verbally stated dosage.

Pediatric Intraosseous Infusion

Pediatric Intraosseous Infusion Key Points

- Manually inserted devices, spring-loaded devices, and electric drill-type devices which are approved for use in pediatric patients are permitted in this skill.
- This skill must be performed on a manikin designed to accept an intraosseous device. Biological tissue (i.e. chicken legs) is prohibited.
- Ensure that safe practices are followed that include proper hand placement during stabilization and needle insertion.
Equipment List

Do not allow candidates into the skill station until the following equipment is available. Ensure that all equipment is working properly throughout the exam.

- Personal protective equipment
- IV infusion arms
- Intraosseous infusion manikin with replacement tibias (6 – 8 sticks/tibia)
- Selection of IV solutions (may be expired)
- Selection of IV Administration sets [must include microdrip tubing (60 gtt/cc)]
- IV extension tubing or 3-way stopcock
- Selection of IV catheters (can use small (20 – 22 ga.)
- Intraosseous needles
- IV push medications (selection of prefilled syringes) *
- Tape
- Gauze pads (2x2, 4x4, etc.)
- Bulky dressings
- Syringes (various sizes)
- Tourniquet
- Alcohol preps or similar substitute
- Approved sharps container

*Must include naloxone, and dextrose 50% plus several others
Read the following instructions to all Advanced EMT candidates:

Instructions to the Advanced EMT Psychomotor Skills Candidate for the Intravenous Therapy Skill

Welcome to the Intravenous Therapy Skill station.

In this skill station you are required to establish an IV just as you would in the field. You will have three attempts within a 6-minute time limit to establish the IV. Although we are using the manikin arm, you should conduct yourself as if this were a real patient. You should assume that I am the actual patient and may ask me any questions you would normally ask a patient in this situation. Do you have any questions?
Instructions to the Advanced EMT Psychomotor Skills Candidate for the Intravenous Bolus Medication Skill

Welcome to the Intravenous Bolus Medication Skill station.

You will be given a patient scenario and will be required to administer an IV Bolus of medication just as you would in the field. Although we are using the manikin arm, you should conduct yourself as if this were a real patient. You should assume that I am the actual patient and may ask me any questions you would normally ask a patient in this situation. You will have three minutes to begin administration of the medication bolus. Do you have any questions?

The patient you are treating is… [Alternate scenarios below between each candidate:]

- unresponsive and breathing at a rate of 6 with shallow respirations. His pupils are 2 mm and do not respond to light.

- confused and is being transported from an extended care facility for evaluation. Medical direction has ordered you to administer 12.5 grams of dextrose 50% IV.
INSTRUCTIONS TO THE PSYCHOMOTOR SKILLS CANDIDATE FOR PEDIATRIC INTRAOSSEOUS INFUSION

Welcome to the Pediatric Intraosseous Infusion skill station. This skill is designed to test your ability to establish an intraosseous infusion for a pediatric patient just as you would in the field. You will have a maximum of two attempts to establish a patent and flowing intraosseous infusion within a 6-minute time limit. Within this time limit, you will be required to properly administer fluid to a pediatric patient just as you would in the field based on a given scenario. Although we are using the manikin, you should conduct yourself as if this were a real patient. You should assume that I am the parent of this patient and may ask me any questions you would normally ask in this situation. Do you have any questions?

The patient you are treating is… [Alternate scenarios below between each candidate:]

-A 6-month-old child who was just removed from a burning house. The patient has deep superficial and full thickness burns to the arms and chest. The patient is tachycardic with other signs of inadequate perfusion. Your partner has secured an airway and your standing orders require fluid to be administered through an intraosseous IV catheter at a rate of 20 mL/kg. The child weighs 15 pounds.

-An 8-month-old child who has had diarrhea and decreased fluid intake for the past two days. There are signs of circulatory compromise and your standing orders require fluid to be administered through an intraosseous IV catheter at a rate of 20 mL/kg. The child weighs 20 pounds.