State of Wisconsin

EMT Basic

BVM AND NON-VISUALIZED AIRWAY DEVICE

Practical Skills Checklist Points	Possible	Earned					
Takes or verbalizes standard precautions (BSI) prior to patient contact *	1 *						
Opens the airway manually	1						
Elevates tongue, inserts simple adjunct (oropharyngeal or nasopharyngeal airway) *	1 *						
Evaluator states "no gag reflex is present and patient accepts adjunct."							
Ventilates patient with BVM at rate of 10-12/minute (must ventilate within 30 seconds of start time) *	1 *						
Verbalizes attachment of high-flow oxygen and continues ventilations for 30 seconds *	1 *						
Evaluator states "patient is being ventilated without difficulty, breath sounds are present bilaterally with equal chest rise and fall."							
Directs assistant to ventilate patient *	1 *						
Evaluator assumes ventilations and removes airway adjunct when prompted.							
Selects non-visualized airway device checks and prepares for insertion	1						
Places head in neutral position	1						
Performs tongue-jaw lift	1						
Inserts device to appropriate depth * Device used:	1 *						
Secures device (inflates cuffs and removes syringe(s), if applicable)	1						
Ventilates to confirm proper placementover each lung*over epigastrum*	2 *						
Adjusts device to maximize effectivenss of ventilations	1						
Secures device in place, if applicable*	1 *						
Continues ventilations	1 *						
TOTAL TIME: : Points Possible / Earned	16						

* Critical Criteria (Comment Required)

Failure to verbalize or take standard precautions (BSI) prior to patient contact	
Failure to initiate ventilations within 30 seconds after taking standard precautions	
Interrupts ventilations for greater than 30 seconds at any time	
Failure to ventilate patient at a rate of 10-12/minute	
Failure to voice and ultimately provide high oxygen concentrations (12-15 L/minute)	
ilure to provide adequate volumes per breath (maximum 2 errors/minute permissible)	
Failure to direct oxygenation of patient prior to insertion of airway device	
Inserts any adjunct in an incorrect manner	
Failure to properly insert the device within 3 attempts	
Failure to secure device properly (if applicable)	
uffs properly and/or remove syringe immediately after inflation of cuff(s), if applicable	Failure to i
Failure to confirm device placement	
Failure to continue ventilations	

Comments (required for Critical Criteria): (Continue on back if necessary)

NREMT EXA	MINER ONLY
PASS	FAIL

STATION - E

NON-VISUALIZED AIRWAY DEVICE

DATE:	
CANDIDATE'S NUMBER:	
CANDIDATE'S NAME:	
PRINT EVALUATOR'S NAME:	
EVALUATOR'S SIGNATURE:	
COMMENTS:	