

NREMT PSYCHOMOTOR EXAMINATION RESULTS SUMMARY

DHSEXAMINATION #: _____ (LMS Exam Assignment)

NAME _____

EMAIL _____

PHONE _____

DOB _____

TYPE OF EXAM COMPLETED

_____ ORIGINAL EXAM
_____ STATION(S) RETEST
_____ FIRST RETEST EXAM
_____ SECOND RETEST EXAM

REPORT OF STATION PERFORMANCE

Assessment Station	Initial Examination	Retest Examination
Adult Assessment Station	PASS FAIL	PASS FAIL
Geriatric Assessment Station	PASS FAIL	PASS FAIL
Pediatric Assessment Station	PASS FAIL	PASS FAIL

- Candidates failing 2 or less stations are eligible for a same day retest of the failed station(s)
- Candidates failing same day retest(s) are allowed 1 last attempt. A third time failure requires a total retest
- Candidates failing 3 stations the first time constitutes a complete failure requiring a total retest
- Candidates failing 3 stations a second time constitutes a complete failure requiring a total retest
- Candidates failing 3 stations a third time constitutes a complete failure requiring remedial education

Initial Station Examination Results	Retest Station Results
_____ PASS _____ FAIL _____ RETEST	_____ PASS _____ FAIL

Signature of examiner designee verifying results are true and accurate.

Date

Printed Name of Examiner