

Community College of Aurora
Practical Exam Skill Sheet
Pediatric (<2 yrs.) Ventilatory Management - ALS
 Modeled after the National Registry of Emergency Medical Technicians Advanced Level Practical Examination

Student name: _____ Date: _____

Examiner: _____

Signature: _____

NOTE: If candidate elects to ventilate initially with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by "*" so long as first ventilation is delivered within 30 seconds

	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct {oropharyngeal or nasopharyngeal airway]	1	
Note: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
"*" Ventilates patient immediately with bag-valve-mask device unattached to oxygen	1	
"*" Hyperventilates patient with room air	1	
Note: Examiner now informs candidate that ventilation is being performed without difficulty and that pulse oximetry indicates the patient's blood oxygen saturation is 85%		
Attaches oxygen reservoir to bag-mask device and connects to high flow oxygen regulator [12-15 L/min]	1	
Ventilates patient at a rate of 20-30/minute and assures adequate chest expansion	1	
Note: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and medical direction has ordered intubation. The examiner must now take over ventilation		
Directs assistant to pre-oxygenate patient	1	
Identifies/selects proper equipment for intubation	1	
Checks laryngoscope to assure operational with bulb tight	1	
Note: Examiner to remove OPA and move out of the way when candidate is prepared to intubate		
Places patient in neutral or sniffing position	1	
Inserts blade while displacing tongue	1	
Elevates mandible with laryngoscope	1	
Introduces ET tube and advances to proper depth	1	
Directs ventilation of patient	1	

Confirms proper placement by auscultation bilaterally over each lung and over epigastrium	1	
Note: Examiner to ask "If you had proper placement, what should you expect to hear?"		
Secures ET tube (may be verbalized)	1	
Total	17	
CRITICAL CRITERIA		
	Failure to initiate ventilations within 30 seconds after applying gloves or interrupts ventilations for greater than 30 seconds at any time	
	Failure to take or verbalize body substance isolation precautions	
	Failure to pad under the torso to allow neutral head position or sniffing position	
	Failure to voice and ultimately provide high oxygen concentration [at least 85%]	
	Failure to ventilate patient at a rate of at least 20/minute	
	Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]	
	Failure to pre-oxygenate patient prior to intubation	
	Failure to successfully intubate within 3 attempts	
	Uses teeth as a fulcrum	
	Failure to assure proper tube placement by auscultation bilaterally and over the epigastrium	
	Inserts any adjunct in a manner dangerous to the patient	
	Attempts to use any equipment not appropriate for the pediatric patient	

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.