

Training and Certification Committee Minutes
Embassy Suites, 2925 Emerywood Parkway, Richmond, VA 23294
Wednesday, October 2, 2019 – 10:30 am

Members Present	Members Absent	Staff	Others
R. Jason Ferguson – Chair William Akers Craig Evans Christopher Kroboth Brian McIntosh Dr. Charles Lane Larry Oliver Billy Fritz	Dr. Robin Foster Scott Davis	Debbie Akers Chad Blosser Gary Brown Dr. George Lindbeck Wanda Street David Edwards Tim Perkins Chris Vernovai	Tom Olander Donna Galganski Pabst Cathy Cockrell Jeremy Wampler Amy Howard Damien Coy Kerry Henderson Michael McDonald Tracey Senate Michelle Ludeman Jason Ambrose Ashley Dye Jason Rodman Steve Powell Nakia James Charles Earley Chris Christensen

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Welcome	R. Jason Ferguson, Chair, called the meeting to order at 10:34 a.m.	
II. Introductions	Everyone around the room introduced themselves.	
III. Approval of Agenda	The Committee reviewed the Agenda for today’s meeting. (Attached)	Approved by consensus
IV. Approval of Minutes	The Committee reviewed the minutes of the July 10, 2019 Quarterly Meeting. Minutes available online: http://www.vdh.virginia.gov/emergency-medical-services/education-certification/training-certification-committee-standing/ .	Approved by consensus

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
V. Reports of Committee Members	<p>A. Reports of Committee Members</p> <ol style="list-style-type: none"> 1. Chairman Report – R. Jason Ferguson <ol style="list-style-type: none"> a. An Advisory Board Retreat was held in Richmond on Sept. 16-17. There was discussion about the composition of the Advisory Board. A suggestion was made to merge committees. Discussion to possibly merge Provider Health and Safety, Workforce Development and TCC since their work is closely related. A mediator was present to facilitate the meeting and a report will be submitted. Bill Akers wondered if this merge will dilute the education focus which is primary. Larry Oliver also expressed concern about merging committees together and the potential for dilution of the purpose of the TCC Committee. b. Committee Membership - There are three positions coming up for reappointment: EMS for Children, VAVRS, and Non-VCCS Accredited Programs. Nominations will be sent out Monday. 2. Medical Direction Committee – Dr. Charles Lane <ol style="list-style-type: none"> a. A motion was made at Medical Direction to use the National Scope of Practice as an education minimum and the Virginia Scope of Practice as a practice maximum. 3. Committee Members: <ol style="list-style-type: none"> a. Non-VCCS EMS Program – Billy Fritz – No report. b. VCCS – Bill Akers – G3 Initiative–Free tuition/education for folks in the Commonwealth in high demand areas such as EMS. We will begin implementing tuition free EMS education if General Assembly approves. Google VCCS G3 Initiative for more information. c. VAVRS – Scott Davis – Absent. d. Regional EMS Council Executive Directors – Craig Evans – No report. e. EMSC – Dr. Robin Foster – Absent. f. VAGEMSA – Larry Oliver – No report. g. Fire Based Organization – Christopher Kroboth – No report. h. Educators – Brian McIntosh – No report. <p>B. Office of EMS</p> <ol style="list-style-type: none"> 1. Division of Accreditation, Certification & Education (ACE) <ol style="list-style-type: none"> a. Education Program Manager – Chad Blosser, OEMS <ol style="list-style-type: none"> a. OEMS Construction Update – Construction is complete. All staff have moved into their spaces. b. Education Coordinator Process Update <ol style="list-style-type: none"> i. OIM Updates - Workgroup has been monitoring the education coordinator process change which took place on August 26. There is a reduction in EMT hours to 50 and 10 administrative hours. c. EMS Scholarship Program – (Attached). We have spent more money in the first quarter than we did all of last fiscal year. The majority of the funds has been at the paramedic level followed by EMT level. 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>d. Psychomotor Exam Workgroup Update – Chad has been working with Chris Kroboth to schedule and it will not happen this month based on everyone’s schedules. Chad will send out a poll for other dates in November or December.</p> <p>b. Manager, ACE Division – Debbie Akers, OEMS</p> <p>a. Accreditation – (Report attached). The number of programs coming on at the psychomotor competency EMT level has increased exponentially. We have 10 intermediate programs still recognized in the Commonwealth. All I-99s have a deadline of December 31. All of the accredited intermediate programs show an expiration date of December 31. Because the Accreditation Manager position has not been filled, these will be moved to the AEMT level and extend them for one year. The Accreditation Program Manager is in final stages of approval. Posting will be advertised soon.</p> <p>b. NR Pass Rates – (Attached). As of Oct. 1, National Registry has removed restriction of certification of under 18. No more assessment exams. National Registry’s recertification cycle opened yesterday (Oct. 1). Quick guide has been removed from OEMS website. The new Quick Guide for 2020 will be updated by next week. Back to what Dr. Lane reported. The Medical Direction Committee has removed the Virginia Scope of Practice as an education minimum. Tomorrow and Friday Debbie will be in Washington, DC for the National Education Standards Workgroup meeting.</p> <p>c. BLS Certification Testing - The Division of Consolidated Testing and Video Production has now transitioned to ACE due to retirements – Warren Short and Terry Coy have retired. Peter Brown has also retired as of September 30. This will be part of the responsibility of the Accreditation Program Manager. When the BLS scenarios were rewritten, they were rewritten based on the Virginia Scope of Practice. We will have to look at the scenarios and figure out what direction we are going based on current and future Scope of Practice. If you have any questions about testing, reach out to Debbie.</p> <p>d. Educator Complaints - There has been complaints about educators falsely giving CE to providers and teaching classes they are not authorized to teach. One barcode scanning will not be allowed anymore. The master barcode will be removed. A guidance document will be sent out to all educators.</p> <p>2. State Medical Director – Dr. George Lindbeck – No report.</p> <p>3. EMS for Children – Dave Edwards, OEMS – Annually, from Jan.-Mar. there will be a National Survey of EMS agencies. It is very short and focuses on two EMSC performance measures: pediatric champion and EMS equipment. David is looking for one or two people from this committee to consult with on those two performance measures. He also has more symposium registration awards. They must be signed up for at least three pediatric courses and the \$195 registration fee will be waived.</p> <p>4. Regulation & Compliance – Ron Passmore – Not present.</p> <p>5. Director/Asst. Director – Gary Brown/Scott Winston – Gary gave a shout out to Debbie and Chad for managing the new ACE Division. Their commitment, skills and knowledge is evident. Gary announced several</p>	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>retirements, Warren Short, Terry Coy, Peter Brown, and Heather Phillips. He also announced that Irene Hamilton will retire the end of November. The 40th Annual Symposium is next month. We have expanded to a third hotel – The Main. An exhibit hall will be there as well as at the Marriott. We will have over 150 exhibitors.</p> <p>6. Other Office Staff – Tim Perkins of the Community Health and Technical Resources (CHaTR) Division announced that the EMS Officer I pilot phase is almost complete and will be rolled out next year. Work will begin shortly for EMS Officer II. The next Mobile Integrated Healthcare and Community Paramedicine (MIH-CP) Workgroup meeting will be held on October 23, here at the Embassy.</p>	
<p>VI. Committee Discussion Items</p>	<p>A. TR-90a Review Workgroup Update – R. Jason Ferguson Jason thanked the workgroup which consisted of himself, Billy Fritz, Daniel Linkins, Kari Whitney, Jason Ambrose, Debbie and Chad. The current TR90A is very cumbersome and has over 400 items on it. The workgroup felt that it could be condensed by focusing on quality over quantity. We also wanted to develop it into more a critical thinking tool. There are three different levels with skills accordingly. Jason quickly explained the function and purpose of the documents.</p> <p>Bill Akers made a motion to approve the TR90A as presented. Larry Oliver seconded the motion. All committee members were in favor of the motion.</p> <p>The committee answered a few questions and had more discussion on the revised TR90A.</p>	
<p>VII. Previous Business</p>	<p>None.</p>	
<p>VIII. New Business</p>	<p>None.</p>	
<p>XI. Public Comment</p>	<p>Chris Kroboth stated at the MDC tomorrow, Dr. Scott Weir will be going over the EPI study that we did with about 400 providers. There was no training but about 90% didn't need prompting and the overall drill took about 6 minutes. Sadly, the BLS providers draw up meds better than the ALS providers.</p>	
<p>X. Dates for 2020 Meetings</p>	<p>A. Next Meeting: 1. Regularly scheduled meeting was January 8, 2020. This has been moved to January 15, 2020 due to Medical Directions' inability to meet. Location will be announced.</p> <p>B. Scheduled dates for 2020 meetings. April 1, July 1, Oct. 7</p>	
<p>XI. Adjourn</p>	<p>1. Motion to adjourn. Meeting adjourned at 1:32 pm.</p>	<p>Motion by Bill Akers, second by Chris Kroboth.</p>

DRAFT

Respectfully submitted by:
Wanda Street
Secretary Sr., OEMS
October 2, 2019



COMMONWEALTH of VIRGINIA
Department of Health

M. NORMAN OLIVER, MD, MA
STATE HEALTH COMMISSIONER

Gary R. Brown
Director

P. Scott Winston
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Training & Certification Committee

Wednesday, October 2, 2019 – 10:30 AM

Embassy Suites by Hilton
2925 Emerywood Pkwy
Richmond, VA 23294

Meeting Agenda

- I. **Welcome**
- II. **Introductions**
- III. **Approval of Agenda**
- IV. **Approval of Minutes from July 10, 2019**
- V. **Reports of Committee Members**
 - A. **Reports of Committee Members**
 1. Chairman Report
 2. Medical Direction Committee
 3. Committee Members
 - B. **Office of EMS**
 1. Division of Accreditation, Certification & Education (ACE)
 - a. Education Program Manager – Chad Blosser, OEMS
 - a. OEMS Construction Update
 - b. Education Coordinator Process Update
 - i. OIM Updates – Psychomotor and hour requirements
 - c. EMS Scholarship Program
 - d. Psychomotor Exam Workgroup Update
 - b. Manager, ACE Division – Debbie Akers, OEMS
 - a. Accreditation
 - b. NR Pass Rates
 - c. BLS Certification Testing
 2. State Medical Director – Dr. George Lindbeck

3. EMS for Children – Dave Edwards, OEMS
4. Regulation & Compliance – Ron Passmore, OEMS
5. Director/Asst. Director – Gary Brown/Scott Winston, OEMS
6. Other Office Staff

VI. Committee Discussion Items

- A. TR-90A Review Workgroup and proposed revisions – Jason Ferguson

VII. Previous Business

VIII. New Business

IX. Public Comment

X. Dates for 2019 Quarterly Meetings

- A. Scheduled dates:
 1. January 8th, 2020
- B. Schedule dates for 2020 meetings.

XI. Adjourn

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**Attachment A to the
October 3, 2019 TCC Minutes**

National Registry Statistics

EMT Statistics

As of 10/01/2019

Virginia:

Report Date: 10/1/2019 2:16:43 PM
Report Type: State Report (VA)
Registration Level: EMT
Course Completion Date: 4th Quarter 2016 to 4th Quarter 2019
Training Program: All

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The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
8342	70% (5863)	80% (6662)	80% (6702)	0% (4)	14% (1129)	6% (511)

National Registry Statistics:

Report Date: 10/1/2019 2:14:01 PM
Report Type: National Report
Registration Level: EMT
Course Completion Date: 4th Quarter 2016 to 4th Quarter 2019
Training Program: All

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The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
232375	69% (160691)	80% (186215)	81% (187677)	0% (203)	13% (30304)	6% (14326)

Individual Instructor Statistics are available on the OEMS webpage at the following link: <http://www.vdh.virginia.gov/content/uploads/sites/23/2018/07/07-10-2018-EMT-Pass-Rates-Publish.pdf>

**Attachment B to the
October 3, 2019 TCC Minutes**

Accreditation Report

Accredited Training Site Directory

As of October 1, 2019



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Accredited Paramedic Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Blue Ridge Community College</i>	79005	Yes*	--	CoAEMSP - LOR	
<i>Central Virginia Community College</i>	68006	Yes*	--	National – Continuing	CoAEMSP
<i>ECPI University</i>	70017	Yes*	--	CoAEMSP - LOR	
<i>J. Sargeant Reynolds Community College</i>	08709	No	2	National – Continuing	CoAEMSP
<i>John Tyler Community College</i>	04115	Yes*	--	National - Initial	CoAEMSP
<i>Lord Fairfax Community College</i>	06903	Yes**	--	National – Initial	CoAEMSP
<i>Loudoun County Fire & Rescue</i>	10704	Yes**	--	National – Continuing	CoAEMSP
<i>Northern Virginia Community College</i>	05906	Yes**	--	National – Continuing	CoAEMSP
<i>Patrick Henry Community College</i>	08908	No	--	CoAEMSP – Initial	CoAEMSP
<i>Piedmont Virginia Community College</i>	54006	Yes	1	National – Continuing	CoAEMSP
<i>Prince William County Dept of Fire and Rescue</i>	15312	Yes*	--	CoAEMSP – Initial	CoAEMSP
<i>Radford University Carilion</i>	77007	Yes*	--	National – Continuing	CoAEMSP
<i>Rappahannock Community College</i>	11903	Yes	--	CoAEMSP – Initial	CoAEMSP
<i>Southside Virginia Community College</i>	18507	Yes**	--	National – Continuing	CoAEMSP
<i>Southwest Virginia Community College</i>	11709	Yes*	3	National – Continuing	CoAEMSP
<i>Stafford County & Associates in Emergency Care</i>	15319	Yes*	5	National – Continuing	CoAEMSP
<i>Thomas Nelson Community College</i>	83012	Yes*	--	CoAEMSP – LOR	
<i>Tidewater Community College</i>	81016	Yes*	--	National – Continuing	CoAEMSP
<i>VCU School of Medicine Paramedic Program</i>	76011	Yes	1	National – Continuing	CoAEMSP

Programs accredited at the Paramedic level may also offer instruction at EMT- I, AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- ECPI University accreditation site visit was conducted on June 25 & 26, 2019.
- Thomas Nelson Community College under Letter of Review to conduct their first cohort class.
- Stafford County & Associates in Emergency Care CoAEMSP site visit for continued accreditation was conducted in August, 2018. Awaiting report.
- Lord Fairfax Community College site visit for continued accreditation was conducted in September 2018. Awaiting report.
- Patrick Henry Community College site visit for continued accreditation was conducted in November 2018. Awaiting report.
- Jefferson College of Health Sciences is now Radford University – Carilion.

*** Indicates program has been approved for in-house psychomotor competency verification.**

**** Indicates program has been approved for initial cohort class prior to approval for in-house psychomotor competency verification.**

Accredited Intermediate Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Central Shenandoah EMS Council</i>	79001	Yes	4	State – Full	December 31, 2019
<i>Danville Area Training Center</i>	69009	No	--	State – Full	December 31, 2019
<i>Hampton Fire & EMS</i>	83002	No	--	State – Full	December 31, 2019
<i>Henrico County Fire Training</i>	08718	Yes*	--	State – Full	August 31, 2020
<i>James City County Fire Rescue</i>	83002	Yes*	--	State – Full	December 31, 2019
<i>Norfolk Fire Department</i>	71008	Yes**	--	State – Full	July 31, 2021
<i>Paul D. Camp Community College</i>	62003	Yes	--	State – Full	May 31, 2021
<i>Southwest Virginia EMS Council</i>	52003	Yes*	--	State – Full	December 31, 2019
<i>UVA Prehospital Program</i>	54008	No	--	State – Full	December 31, 2019
<i>WVEMS – New River Valley Training Center</i>	75004	No	--	State – Full	June 30, 2022

Programs accredited at the Intermediate level may also offer instruction at AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- All accredited programs whose expiration date was less than December 31, 2019 has been extended until that time based on the end date established by National Registry for I-99 testing. If these programs desire to remain accredited, they will be required to submit an AEMT reaccreditation self-study.

*** Indicates program has been approved for in-house psychomotor competency verification.**

**** Indicates program has been approved to offer initial cohort prior to approval for in-house psychomotor competency verification.**

Accredited AEMT Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Accomack Co – Eastern Shore FTC</i>	00121	No	--	State – LOR	August 31, 2020
<i>Fauquier County Fire & Rescue – Warrenton</i>	06125	Yes**	--	State – LOR	June 30, 2020
<i>Frederick County Fire & Rescue</i>	06906	Yes*	--	State – Full	July 31, 2020
<i>Hampton Roads Regional EMS Academy</i>	74039	Yes**	--	State – LOR	December 31, 2020
<i>Newport News Fire Training</i>	70007	No	--	State – LOR	June 30, 2020

* Indicates program has been approved for in-house psychomotor competency verification.

** Indicates program has been approved to offer initial cohort prior to approval for in-house psychomotor competency verification.

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Rockingham County Dept of Fire & Rescue</i>					

Above Programs are under final review for the issuance of a Letter of Review for the initial cohort.

Accredited EMT Training Programs in the Commonwealth

Site Name	Site Number	# of Alternate Sites	Accreditation Status	Expiration Date
Arlington County Fire Training	01305	-	State – Letter of Review	July 31, 2020
Navy Region Mid-Atlantic Fire EMS	71006	--	State – Full	July 31, 2020
City of Virginia Beach Fire and EMS	81004*	--	State – Full	July 31, 2020
Chesterfield Fire & EMS	04103*	--	State – Full	July 31, 2020

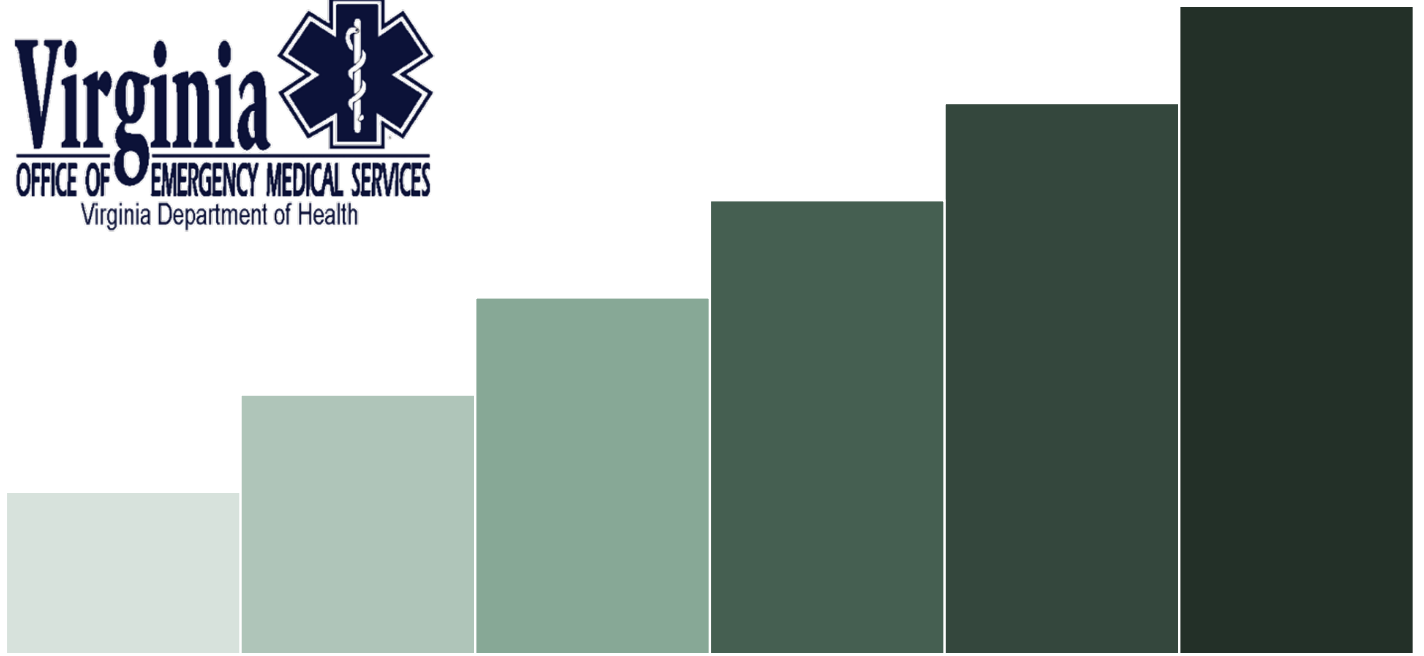
* Indicates program has been approved for in-house psychomotor competency verification.

Site Name	Site Number	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Augusta County Fire-Rescue</i>				
<i>Gloucester Volunteer Fire & Rescue</i>				
<i>Rockingham County Dept of Fire & Rescue</i>				

Above Programs are under final review for the issuance of a Letter of Review for the initial cohort.

**Attachment C to the
October 3, 2019 TCC Minutes**

Virginia EMS Scholarship Report



Quarterly Report

Virginia EMS Scholarship Program

Q1 – FY20

Division of Educational Development

Background & Initial Launch

The Virginia EMS Scholarship Program (EMSSP) is managed by the Virginia Office of Emergency Medical Services providing scholarship awards to current Virginia EMS Providers and those seeking to become EMS providers in the Commonwealth.

The EMSSP supports students who are accepted into an eligible Virginia approved initial certification program—EMR, EMT, AEMT and Paramedic.

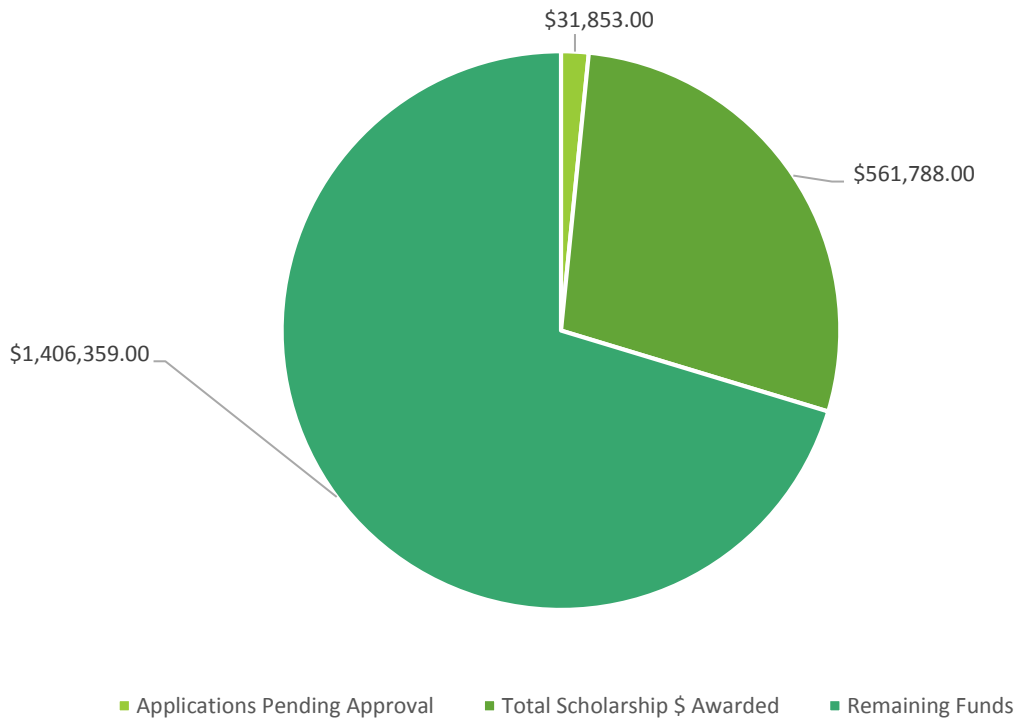
The scholarship program is not designed to provide 100% funding for a training program.

FY20 Scholarship Budget

The FY20 budget for the Virginia EMS Scholarship Program is \$2,000,000.00. The following chart shows a breakdown of funding based on three (3) categories: 1) Applications Pending Approval, 2) Total Scholarship \$ Awarded, and Remaining Funds.

- **Application Pending Approval** – this category includes the total dollar value for all applications received from June 5, 2019 through September 30, 2019. This covers the first quarter of FY20.
- **Total Scholarship \$ Awarded** – this category is the total dollar value for all scholarship applications which have been approved and are in the process of being paid. Since the Virginia EMS Scholarship module is new, OEMS staff have only approved a small group of test applications as we work through the payment processes with the VDH Office of Financial Management.
- **Remaining Funds** – this category is the total dollar value of funds remaining in the scholarship program and available for to students for the remainder of the fiscal year.

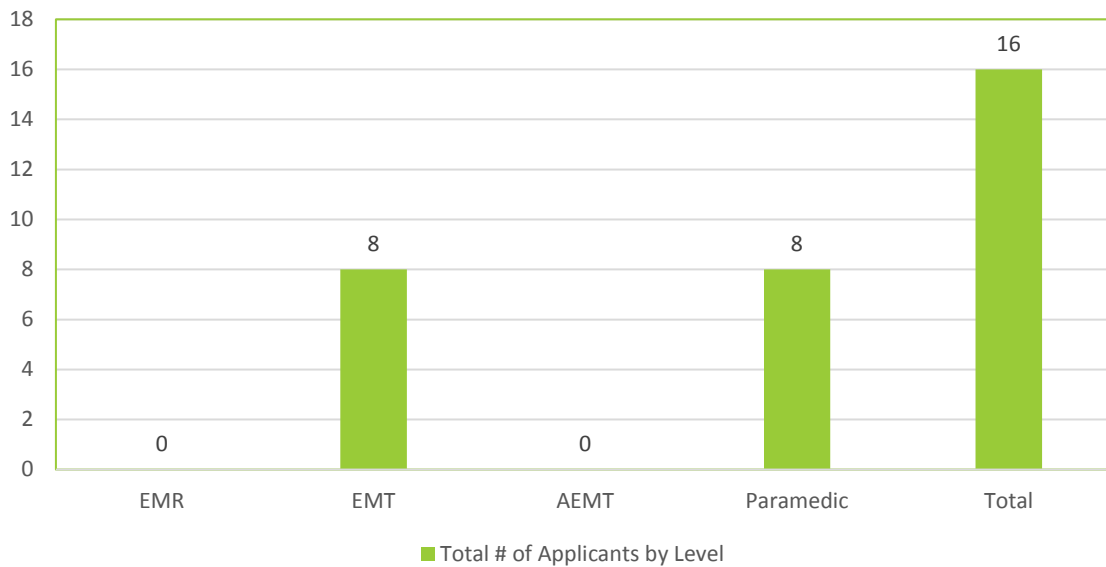
Scholarship Funding Overview



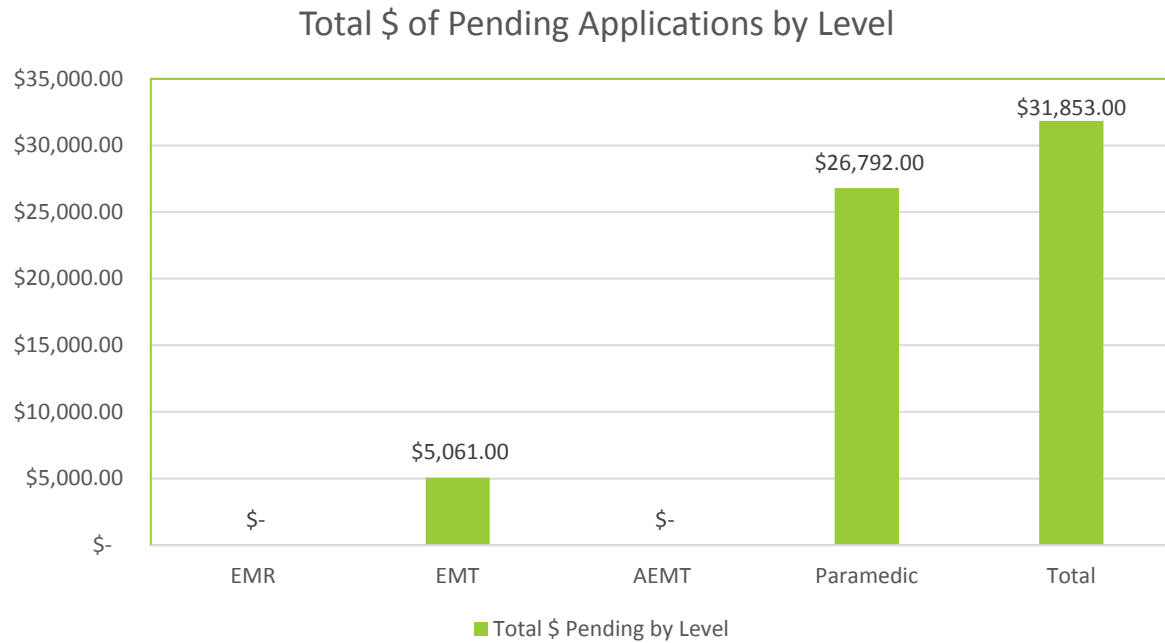
Breakdown of Pending Applications

The following chart show of pending scholarship applications by training level. This includes all pending applications for students enrolled in eligible initial certification courses from June 5, 2019 through September 30, 2019.

Total # of Pending Applicants by Level

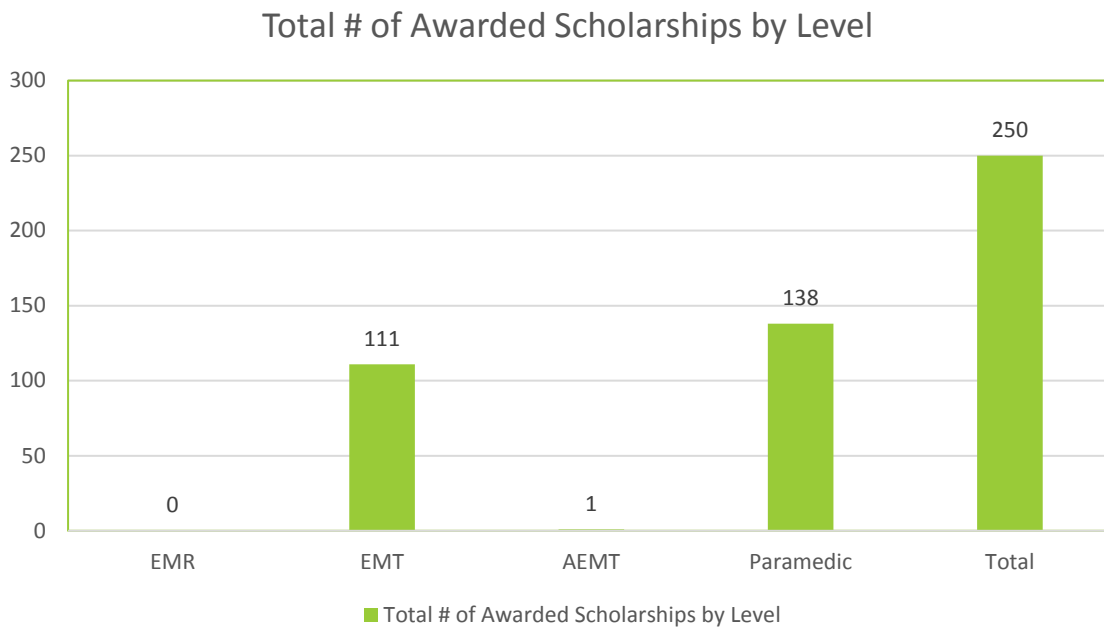


The following chart show of pending scholarship applications by training level. This includes all pending applications for students enrolled in eligible initial certification courses from June 5, 2019 through September 30, 2019.



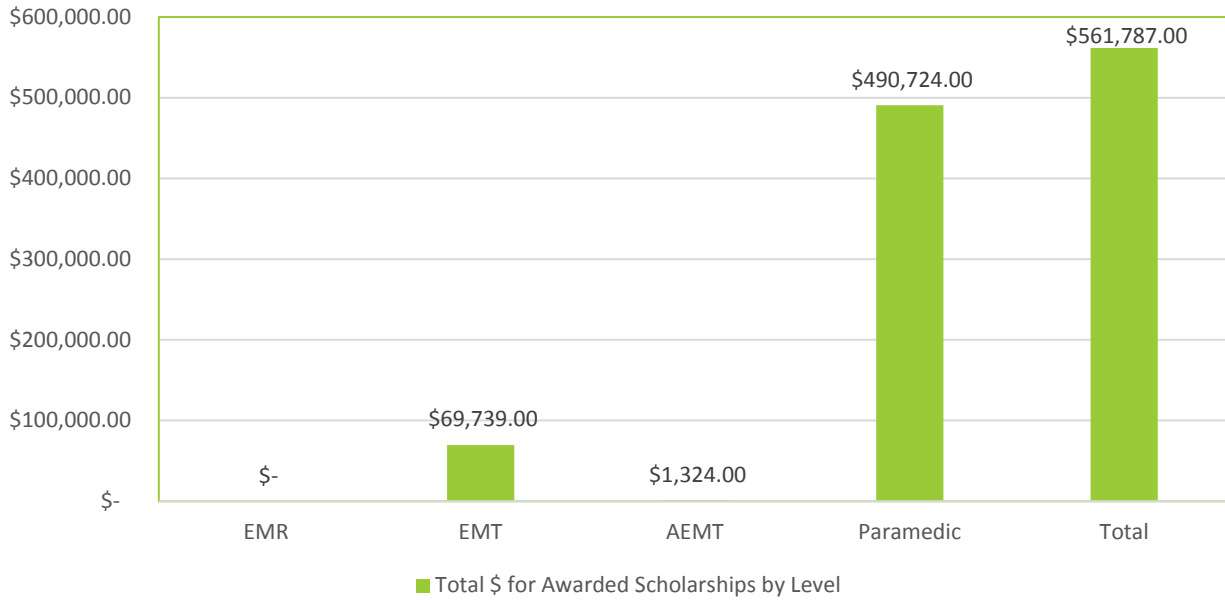
Breakdown of Awarded Scholarships

The following chart shows data for all scholarship applications which have been awarded by training level. This includes all awarded applications for students enrolled in eligible initial certification courses from June 5, 2019 through September 30, 2019.



The following chart shows data for all scholarship applications which have been awarded by training level. This includes all pending applications for students enrolled in eligible initial certification courses from June 5, 2019 through September 30, 2019.

Total \$ for Awarded Scholarships by Level



**Attachment D to the
October 3, 2019 TCC Minutes**

TR90A Workgroup Proposal



TR90A EMT Competency Tracking Requirements

for Accredited EMT Programs in Virginia



EMT Competency Tracking

Purpose

The purpose of this document is to establish educational minimums for accredited, competency-based EMT programs established from the National EMS Scope of Practice Model. It is up to the individual program based on the recommendations of its Advisory Committee and/or Medical Director to determine the applicability of skills, competencies and information not included in the TR-90A.

Table 1

This table is divided into three sections:

Individual Skill Evaluation

The individual skill evaluation will track successful performance of each individual student in a laboratory setting. While the Virginia Office of EMS only requires one successful documentation of skills, it should be understood that students will likely need repetition of these skills prior to demonstrating competency. An evaluator must verify competency via a tracking mechanism used by the program. Verification must include at a minimum, the date of successful completion and the evaluator's initials.

All skills in this area must be completed individually with the exception of the following skills that require multiple students. For the following skills, credit can be awarded to a maximum of two students at a time upon successful completion:

- Operate a stretcher
- Operate a stair chair
- Provide proper patient lifting and moving techniques
- Perform a physical restraint
- Secure a patient with a suspected spinal injury to a long board
- Perform a seated spinal motion restriction (SMR)
- Perform emergency moves for endangered patients

Individual Skill Scenario (Optional)

The individual skill scenario is suggested for student progression, but documentation of student progress is not required. Once a student has shown competency in performing an individual skill, the student may be placed in an abbreviated scenario to illustrate how the skill may be used.

If the program chooses to use the Individual Skill Scenario, verification must include at a minimum, the date of successful completion and the evaluator's initials.

Comprehensive Scenario

The comprehensive scenario provides a way to evaluate multiple skills and the critical thinking required of the student to implement these skills. During comprehensive scenarios, skills and competencies will be awarded to the Team Leader, who

is ultimately responsible to ensure all skills were performed correctly and appropriately. Team Members will assist during this scenario, but will not receive credit for skills performed. Verification must include at a minimum, the date of successful completion and the evaluator's initials.

Comprehensive Scenario & Definitions

Table 2

This table lists the required minimum number and topics to be included for each student in a comprehensive scenario setting. Only the Team Leader can receive credit for the scenario(s). Students may be given credit for no more than two patient complaints in the same scenario.

Examples

Individual Skill Evaluation

Student A applies a traction splint based on the criteria of an established checklist. Student B pulls traction while Student A applies the traction splint. Only Student A should be evaluated and receive credit upon successful completion of the skill.

Individual Skill Scenario (Optional)

A brief scenario is given to the student such as, "Your patient has a fractured femur and you are now ready to splint the fracture. Please demonstrate how you would appropriately manage this injury." Student B pulls traction while Student A applies the traction splint. Only Student A should be evaluated and receive credit upon successful completion of the skill.

Student A is the Team Leader and will be given a comprehensive scenario that requires a full assessment and critical thinking to determine a potential femur fracture is present and how to appropriately manage the injury. Student B is the Team Member for this scenario.

During a comprehensive scenario, only Student A will receive credit for skills performed. Up to two patient complaints from Table 2 may be used during a single scenario. For example, a patient in active childbirth may also have abdominal pain and suffer an asthma attack, but only credit may be awarded for two of the three complaints listed. Programs are encouraged to include multiple skills within a comprehensive scenario. See the attached mapped scenario for more details.

Team Leader

Creates an action plan; communicates accurately and concisely while listening and encouraging feedback; receives, processes, verifies, and prioritizes information; reconciles incongruent information; demonstrates confidence, compassion, maturity and command presence; takes charge; maintains accountability for team's actions/outcomes; assess situation and resources and modifies accordingly.

The student has successfully led the team if he or she conducted a comprehensive physical assessment. This may include the direction of other Team Members to perform parts of the interview and/or physical exam. The student should formulate and implement an appropriate treatment plan for the patient. This means that most, if not all of

the decisions have been made by the student, especially the formulation of a field impression, direction of treatment, determination of acuity, disposition, appropriate delegation, and when applicable, packaging/ moving the patient. A successful rating also infers that minimal to no prompting was provided by the evaluator. At no time should an action have been initiated/ performed that endangered the physical or psychological safety of the patient, bystanders, other responders, or the crew. Evaluators should not assign a successful rating unless the student performed adequately as an entry-level EMT. (NREMT, 2012)

Team Member

Demonstrates followership – is receptive to leadership; performs functions using situational awareness and maintains it; utilizes appreciative inquiry; avoids freelance activity; listens actively using closed-loop communication and reports progress on tasks; performs tasks accurately and in a timely manner; advocates for safety and is safety conscious at all times; leaves ego/rank at the door (NREMT, 2012)

DRAFT

Trauma	Fall w/ Wrist fracture-Geriatric DLOC Jane Smith, 70 y.o. female Retired secretary
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Case Overview: This case presents as a 70 year old white female who is confused, with a visible contusion to the R forehead and obvious deformity to R wrist, following a fall from a standing position.

Dispatch Information: You are dispatched to a single family residence for an injury from a fall. You are the lead EMT for an EMS crew on a BLS ambulance in a suburban area. You have a BLS partner to assist you. You are dispatched as a single unit and are 20 minutes from the local community hospital (with PCI and Stroke capability). You are 40 minutes from the nearest level 1 trauma center.

Time / Weather: It is 10 PM on a Thursday evening in the winter. The temp is 30 degrees with a slight wind chill and light ice patches on the ground.

Scene Information: You arrive on scene to a small home in a suburban neighborhood. There is a porch light on, dim and inadequate

General Impression You approach the residence to find a woman sitting on the ground of a dark driveway, with a man kneeling beside her. The man waves you over.

Patient Information You see a moderately overweight, approximately 200 lbs, white female sitting on the ground outside in slacks and a thin sweater and slippers.

Primary / Initial Assessment ****Only give the following information if the learner asks about it or verbalizes what they see regarding each finding.***

Mental Status:	CAO x 2 (person, place, time) -Does not remember the fall-appears confused
Chief Complaint:	"My wrist hurts. What happened?"
Airway:	Patent
Breathing rate / rhythm / quality:	Tachypneic without any accessory muscle use. Non-labored.
Initial Lung Sounds:	Clear bilaterally.
Pulse rate / rhythm / quality:	Weak, regular, rapid
Skin color / temperature / condition / bleeding:	Pale, cool and dry

Secondary Assessment:			
Subjective (Interviewing)	Subjective (Interviewing)	Objective (Physical Findings)	
Objective (Physical Findings)			
Onset	Husband states the patient was just walking to the mailbox when she fell.	Head	Large 2" contusion to R side of forehead
		Neck	Normal exam
		Thorax	Normal exam
Provocation	Head- nothing.Wrist- movement	Abdomen	Normal exam
Quality	Head- dull aching at site. Wrist- sharp upon movement	Pelvis	Normal exam
Radiation	None	Left Leg	Normal exam
Severity	Pt. appears confused by pain scale question, but says "it hurts!"	Right Leg	Normal exam
Time since onset	20 minutes	Left Arm	Normal exam
Signs and Symptoms	Pain and deformity of the right wrist and a large 2" contusion to the R forehead. No nausea, vomiting, dizziness or blurred vision, chest pain, syncope, or difficulty breathing.	Right Arm	Obvious deformity to wrist, PMS present
Allergies	NKDA	Posterior	Normal exam
Medications	Remicade, Fluoxetine, Glucophage, calcium supplement, Colace, Duragesic, Inderal	12 Lead	N/a
Past medical history	Diabetes, Appendectomy, GERD, Osteoporosis, chronic back pain, HTN, depression		
Last oral intake	Dinner at 6:30. Chicken casserole.		
Events Leading Up to	Walking to mailbox		

Trauma

**Fall w/ Wrist fracture-Geriatric DLOC
Jane Smith, 70 y.o. female
Retired secretary**

Vital Signs & Reassessment Info

	1st set	Removal from cold	Splint wrist	Glucose Admin	2 mins post Glucose	
Mental Status / Neuro	CAO x 2 (does not remember fall)	No change	No change	No change	CAOx3	
Pupils	PERRL – 4 mm	No change	No change			
Heart Rate	124 S Tach	No change	130 S Tach		114	
Blood Pressure	110/82	No change	106/88		108/84	
RR	24	No change	22		18	
SpO2	97%	98%	98%		97%	
EtCO2	35 square	No change	No change			
Lung Sounds	Clear bilaterally	No change	No change			
Severity Rating	N/A	No change	no change		6 out of 10	
Skin	Pale, cool, dry	Pale, warm, dry	Pink, warm, dry			
Temperature	97.2	No change	98.4			
Blood Glucose	48	no change	no change		122	
Capillary refill	4 sec	no change	no change			
Major Life Threats:	Hypoglycemia					
Correct Treatment:	Immobilization of pt's wrist, Glucose administration					
Diagnosis:	Confusion due to hypoglycemic event, which led to a fall.					



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Accredited Program #:

Sponsor/Institution Name:

Programs must track at least all of the procedures listed below.

The tables below have been populated with the OEMS Required Minimum Numbers of student competencies for each listed category. If the program required minimum number(s) differ(s) from the OEMS Required Minimum Number(s), the number(s) in the Program Required Minimum Numbers column should be adjusted accordingly. If desired, programs can determine their own required minimum number for any student competency category that does not contain a OEMS Recommended Minimum Number.

Programs must establish and require minimum numbers of student competencies (i.e., skills, patient ages, differential diagnosis or complaints, team leads, etc). The minimum competency numbers must be approved by the Medical Director, endorsed by the Advisory Committee, and documented in Advisory Committee minutes. Program tracking documentation must show 100% of program graduates have met 100% of the program minimums. There must be documented periodic evaluation of the established minimums to determine ongoing graduate competency.

NOTE: Programs holding the status of Letter of Review (LoR) MUST also establish and track minimum competencies to ensure graduate competency.

TABLE 1

Sequence of Learning Progression:		Individual Skill Evaluation		Individual Skill Scenario		"Putting it all together" Evaluation of Skills in a Comprehensive Laboratory Scenario	
		Number of Successful Times an Individual Student Competency Evaluation in the Laboratory (Min # of Times)		Individual Student Competency Evaluation in a Laboratory Scenario (Min # of Times)		Comprehensive Skill Competency Performed and Evaluated in a Laboratory Scenario (Total Min # of Times)	
Competency Number	Required Competencies and Skills *must have at least one successful instructor evaluated and documented performance before starting the related individual skill scenario	VAOEMS Required	Program Required Minimum	VAOEMS Recommended	Program Required Minimum	VAOEMS Required	Program Required Minimum
		Preparatory					
P1	Select, don, doff and properly/safely discard PPE	1		1		2	
P2	Determine a patient's level of consciousness	1		1		2	
P3	Assess a patient for a patent airway	1		1		2	
P4	Assess a patient for breathing and provide depth, rate, quality	1		1		2	
P5	Acquire a pulse and provide rate, rhythm, and strength	1		1		2	
P6	Assess the skin color, temp, and moisture, turgor and external bleeding	1		1		2	
P7	Assess capillary refill	1		1		2	
P8	Assess the pupils as to equality, size, reactivity, accommodation	1		1		2	
P9	Obtain an automated blood pressure	1		1		2	
P10	Obtain a manual blood pressure	1		1		2	
P11	Obtain a SAMPLE history	1		1		2	
P12	*Operate a stretcher	1		1		2	
P13	*Operate a stair chair	1		1		2	
P14	*Provide proper patient lifting and moving techniques	1		1		2	
P15	Perform a simulated, organized, concise radio transmission (lab setting)	1		1		2	
P16	Perform patient report that would be given to staff at receiving facility (lab setting)	1		1		2	



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P17	Perform report that would be given to ALS provider in (lab setting)	1		1		2	
P18	Complete pre-hospital care report (lab setting)	1		1		2	
Airway							
A1	Perform head tilt, chin-lift maneuver	1		1		2	
A2	Perform a jaw thrust maneuver	1		1		2	
A3	Perform upper airway suctioning using soft/rigid suction devices	1		1		2	
A4	Assemble and operate an oxygen tank	1		0		0	
A5	Ventilate using a BVM at the appropriate rate	1		1		2	
A6	Ventilate patient with a stoma	2		0		0	
A7	Insert an OP airway during an airway	1		1		2	
A8	Insert a NP airway during an airway	1		1		2	
A9	Use a non-rebreather and adjust oxygen flow requirements needed	1		1		2	
A10	Use a nasal cannula and adjust oxygen flow requirements needed	1		1		2	
A11	Use and interpret pulse oximetry	1		1		2	
A12	Apply CPAP	1		1		2	
Medical							
M1	Administer a meter dose inhaler	1		1		2	
M2	Administer a aerosolized/nebulizer medication	1		1		2	
M3	Administer an intramuscular medication via auto-injector	1		1		2	
M4	Administer an intramuscular medication - premeasured unit-dose	1		1		2	
M5	Administer intranasal medication - premeasured unit-dosed	1		1		2	
M6	Administer mucosal/sublingual medication	1		1		2	
M7	Administer oral medication	1		1		2	
M8	Apply and obtain a 12 lead ECG	1		1		2	
M9	Perform blood glucose monitoring	1		1		2	
M10	Assist with a normal delivery	1		1		1	
M11	Assist with a complicated delivery	1		1		1	
M12	*Perform a physical restraint	1		1		2	
Trauma							
T1	Perform hemorrhage control – direct pressure	1		1		2	
T2	Perform hemorrhage control – tourniquet	1		1		2	
T3	Perform hemorrhage control – wound packing	1		1		2	



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T4	Provide care for eye injuries	1		1		2	
T5	Provide care for epistaxis	1		1		2	
T6	Provide care for an open neck wound	1		1		2	
T7	Provide care for an open chest wound	1		1		2	
T8	Provide care for an open abdominal wounds	1		1		2	
T9	Provide care for an open junctional injury	1		1		2	
T10	Provide care for an impaled object	1		1		2	
T11	Provide care for a patient with an amputation and the amputated part	1		1		2	
T12	Provide care for a patient with burns	1		1		2	
T13	Perform immobilization of a long bone - traction	1		1		1	
T14	Perform immobilization of a long bone - rigid	1		1		1	
T15	Perform immobilization of a long bone - soft	1		1		1	
T16	Perform immobilization of a joint - pillow	1		1		1	
T17	Perform immobilization of a joint - sling & swathe	1		1		1	
T18	Perform immobilization of a joint - rigid	1		1		1	
T19	Provide care for a patient with a suspected hip/pelvis fracture	1		1		2	
T20	*Secure a patient with a suspected spinal injury to a long spine board	1		1		2	
T21	*Perform seated SMR (KED, etc.)	1		1		2	
T22	*Perform emergency moves for endangered patients	1		1		2	
T23	Manage a patient with a helmet	1		1		2	
Totals		66	0	63	0	118	0



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TABLE 2		
Simulation Pathology or Patient Complaint (these simulations must be high fidelity, comprehensive simulations using high fidelity manikins or programmed patients with appropriate accessory equipment to actually perform required skills).	Program Required Minimum #	
	Pediatric	Adult / Geriatric
Abdominal Pain	1	1
Allergic Reaction		1
Anaphylaxis with epi administration	1	1
Chest Pain with ASA/NTG Administration		2
Chest Pain with NTG Contraindicated		1
Delivery with Neonatal Resuscitation	2	
Hypoglycemia - Conscious with glucose administration		2
Hypoglycemia or DKA or HHNS - Unconscious	1	1
Obstetric or Gynecologic		2
Overdose (non-opioid)		1
Overdose with opioid antagonist administration	1	2
Poisoning with antidote administration		1
Psychiatric	1	2
Respiratory Distress and/or Failure - Asthma/COPD with bronchodilator administration	1	1
Respiratory Distress and/or Failure - CHF		2
Seizure	1	1
Sepsis	1	1
Shock	1	1
Stroke-Hemorrhagic		1
Stroke-Occlusive (LVO)		1
Trauma (blunt, penetrating, burns, or hemorrhage)	2	4
Total number of scenarios required for each student:	42	

Medical Director Approval Required

Printed Name	Signature	Date

Program Director Approval Required

Printed Name	Signature	Date

Advisory Committee Endorsement Required

Minutes where endoresment approved	
	Date



TR90A EMT Student Competency Tracking Form

Student Name _____

OEMS Student Certification # _____

Instructions

The student will be evaluated on each competency, at a minimum, as listed in the attached table. The evaluator will award a score from the list below, initial, and date the appropriate block. At the course completion, all skill areas must be completed to signify eligibility for certification testing.

Scoring

Pass Successful/Competent; no prompting necessary – The student performed at the entry-level of competency as judged by the preceptor. Entry-level of competency takes into account the amount of education the student has undergone at the time of education.

Fail Unsuccessful – required critical or excessive prompting; inconsistent; not yet competent; this includes “Not attempted” when the student was expected to try. The student performed with some errors of commission or omission that would lead the preceptor to a conclusion that the student did not meet competency in the skill being evaluated.

Example

Preparatory Competencies

		Individual Skill Evaluation	Individual Skill Scenario	Comprehensive Scenario				
Demonstrates the ability to correctly:		Performed				Remediation, as needed		
P1	Select, don, doff and properly/safely discard PPE	WWD 12/01/19 <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	WWD 01/05/20 <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	WWD 01/09/20 <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail			

Preparatory Competencies							
		Individual Skill Evaluation	Individual Skill Scenario	Comprehensive Scenario			
Demonstrates the ability to correctly:		Performed				Remediation, as needed	
P1	Select, don, doff and properly/safely discard PPE	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P2	Determine a patient's level of consciousness	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P3	Assess a patient for a patent airway	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P4	Assess a patient for breathing and provide depth, rate, quality	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P5	Acquire a pulse and provide rate, rhythm, and strength	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P6	Assess the skin color, temp, and moisture, turgor and external bleeding	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P7	Assess capillary refill	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P8	Assess the pupils as to equality, size, reactivity, accommodation	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P9	Obtain an automated blood pressure	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P10	Obtain a manual blood pressure	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P11	Obtain a SAMPLE history	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P12	*Operate a stretcher	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		
P13	*Operate a stair chair	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail		



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P14	*Provide proper patient lifting and moving techniques	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
P15	Perform a simulated, organized, concise radio transmission (lab setting)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
P16	Perform patient report that would be given to staff at receiving facility (lab setting)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
P17	Perform report that would be given to ALS provider in (lab setting)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
P18	Complete pre-hospital care report (lab setting)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			

Airway Oxygen & Ventilation Competencies

		Individual Skill Evaluation	Individual Skill Scenario	Comprehensive Scenario				
Demonstrates the ability to correctly:		Performed				Remediation, as needed		
A1	Perform head tilt, chin-lift maneuver	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A2	Perform a jaw thrust maneuver	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A3	Perform upper airway suctioning using soft/rigid suction devices	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A4	Assemble and operate an oxygen tank	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A5	Ventilate using a BVM at the appropriate rate	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A6	Ventilate patient with a stoma	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A7	Insert an OP airway during an airway	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A8	Insert a NP airway during an airway	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			



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A9	Use a non-rebreather and adjust oxygen flow requirements needed	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A10	Use a nasal cannula and adjust oxygen flow requirements needed	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A11	Use and interpret pulse oximetry	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
A12	Apply CPAP	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			

Medical, Behavioral & OB/GYN Competencies

		Individual Skill Evaluation	Individual Skill Scenario	Comprehensive Scenario				
Demonstrates the ability to correctly:		Performed				Remediation, as needed		
M1	Administer a meter dose inhaler	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M2	Administer a aerosolized/nebulizer medication	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M3	Administer an intramuscular medication via auto-injector	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M4	Administer an intramuscular medication - premeasured unit-dose	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M5	Administer intranasal medication - premeasured unit-dosed	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M6	Administer mucosal/sublingual medication	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M7	Administer oral medication	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M8	Apply and obtain a 12 lead ECG	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M9	Perform blood glucose monitoring	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			



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M10	Assist with a normal delivery	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M11	Assist with a complicated delivery	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
M12	*Perform a physical restraint	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
Trauma Competencies								
		Individual Skill Evaluation	Individual Skill Scenario	Comprehensive Scenario				
Demonstrates the ability to correctly:		Performed			Remediation, as needed			
T1	Perform hemorrhage control – direct pressure	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T2	Perform hemorrhage control – tourniquet	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T3	Perform hemorrhage control – wound packing	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T4	Provide care for eye injuries	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T5	Provide care for epistaxis	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T6	Provide care for an open neck wound	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T7	Provide care for an open chest wound	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T8	Provide care for an open abdominal wounds	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T9	Provide care for an open junctional injury	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T10	Provide care for an impaled object	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			



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T11	Provide care for a patient with an amputation and the amputated part	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T12	Provide care for a patient with burns	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T13	Perform immobilization of a long bone - traction	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T14	Perform immobilization of a long bone - rigid	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T15	Perform immobilization of a long bone - soft	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T16	Perform immobilization of a joint - pillow	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T17	Perform immobilization of a joint - sling & swathe	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T18	Perform immobilization of a joint - rigid	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T19	Provide care for a patient with a suspected hip/pelvis fracture	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T20	*Secure a patient with a suspected spinal injury to a long spine board	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T21	*Perform seated SMR (KED, etc.)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T22	*Perform emergency moves for endangered patients	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			
T23	Manage a patient with a helmet	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			