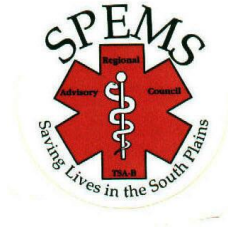


# **SPEMS SKILLS PROFICIENCY CRITERIA**

## **Emergency Medical Technician-Intermediate (EMT-I)**



The following skills are required at the EMT-I Level:

1. AED
2. King Airway
3. IV
4. Endotracheal Intubation
5. Adult EZ IO
6. Pedi EZ IO
7. Pleural Decompression
8. IM Injection (If Epinephrine is carried by the EMS service)

The following criteria will be used for all SPEMS Protocol required skills proficiency evaluations at the Emergency Medical Technician-Intermediate (EMT-I) Level.

### **Automated External Defibrillator (AED)**

1. Checks patient's responsiveness
2. Assess for breathing and carotid pulse (no more than 10 seconds)
3. Immediately begins chest compressions
4. Performs 2 minutes of high quality CPR
  - If witnessed arrest, defibrillation should occur as soon as possible but CPR should continue until AED is properly applied
  - Rate between 100 and 120
  - Correct depth (at least 2" but not greater than 2.4")
  - Compression to ventilation ratio of 30:2
  - Adequate volume for each breath (visible rise in chest)
  - Minimal interruption of less than 10 seconds throughout
5. Turns on power to AED
6. Follows prompts and correctly attaches AED to patient
7. Stops CPR and ensures all personnel are clear of patient during rhythm analysis
8. Ensures all personnel are clear of the patient
9. Delivers shock(s) as directed by voice prompts
10. Immediately resumes CPR

## **King Airway Device**

1. Assures proper pre-oxygenation
  - Ventilates at 10-12 breaths per minute for adult or 12-20 for child with BVM attached to oxygen at 10-15lpm
2. Selects/Prepares equipment
  - Selects proper size based on patient's height
  - Securing device/tape
  - Proper size syringe
  - Assure no air leaks by testing cuffs
  - Lubricates distal tip
3. Performs tongue-jaw lift
4. Inserts to proper depth
  - Does not force
  - Advances until base of connector aligns with teeth or gums
  - Inflates cuff based on listed volumes for the tube size
  - Attach BVM and ventilates patient
  - If ventilation is difficult, pull device out very slightly until ventilation is performed easily
5. Verifies proper tube placement
  - Rise and fall of chest
  - Bilateral breath sounds
  - Absent epigastric sounds
6. Secures tube
7. Ventilates at appropriate rate of 10-12 breaths per minute for adult or 12-20 for child

## IV Therapy

1. Prepares Equipment
  - Appropriate IV fluid
  - Administration set
  - IV catheters
  - Alcohol prep
  - Tape or other securing device
  - Sharps container
  - Tourniquet
2. Checks fluid for expiration date and clarity
3. Properly connects administration set to IV bag
4. Fills drip chamber to proper level
5. Flushes tubing to expel air
6. Locates appropriate vein
7. Applies tourniquet
8. Cleanses skin
9. Performs venipuncture
  - Inserts at proper angle
  - Notes flashback
  - Occludes vein proximal to catheter
  - Removes stylet
  - Connects tubing to catheter
10. Disposes of needle in proper container
11. Releases tourniquet
12. Runs IV fluid briefly while monitoring for signs of infiltration
13. Secures catheter
14. Adjusts to appropriate flow rate

## **Endotracheal Intubation**

1. Assures proper pre-oxygenation
  - Ventilates at 10-12 breaths per minute for adult or 12-20 for infant or child with BVM attached to oxygen at 10-15lpm
2. Selects/Prepares equipment
  - Proper size tube
  - Laryngoscope and blade with properly functioning light
  - Stylet
  - 10cc syringe
  - Securing device/tape
3. Checks cuff for leak
4. Performs procedure
  - Positions head properly
  - Inserts blade while displacing tongue
  - Elevates mandible with laryngoscope
  - Introduces ET tube between vocal cords and advances to proper depth
  - Inflates cuff to proper pressure and disconnects syringe
  - Ventilates patient
5. Verifies proper tube placement
  - Rise and fall of chest
  - Bilateral breath sounds
  - Absent epigastric sounds
  - Capnography device
6. Secures tube
7. Ventilates at appropriate rate of 10-12 breaths per minute for adult or 12-20 for infant or child

## **EZ IO (Adult and Pediatric)**

1. Prepares Equipment
  - Appropriate IV fluid
  - Administration set
  - EZ IO driver
  - Appropriately sized EZ IO catheter and extension set
  - EZ IO Stabilizer or bulky dressing/tape to secure catheter
  - Sharps container
  - Alcohol preps or betadine cleaning swabs
  - Syringe with saline flush solution
2. Checks fluid for expiration date and clarity
3. Properly connects administration set to IV bag
4. Fills drip chamber to proper level
5. Flushes tubing to expel air
6. Identifies appropriate anatomical site for IO puncture
7. Cleanses site appropriately with alcohol or betadine
8. Performs IO puncture
  - Stabilizes area without placing hand under puncture site
  - Inserts needle at proper angle (90°)
  - Powers driver with direct pressure until “pop” is felt or a sudden lack of resistance occurs
  - Removes stylet and dispose into sharps container
9. Attaches syringe and extension set to IO needle and flushes slowly with saline solution while monitoring for signs of infiltration
10. Connects IV tubing
11. Adjusts flow as required (Attaches pressure bag as needed)
12. Secures needle with EZ IO stabilizer or with bulky dressings and tape

## **Pleural Decompression**

1. Manages patient's airway with basic and/or ALS procedures
2. Recognizes need for pleural decompression
  - Absent lung sounds on affected side
  - Hollow sound when percussed
  - Possible tracheal deviation away from affected side (late sign)
3. Prepares Equipment
  - 14ga X 2" (or longer) IV catheter
  - Antiseptic solution (alcohol or betadine)
  - 4 X 4's
  - Tape
4. Locates appropriate site at the 2<sup>nd</sup> or 3<sup>rd</sup> intercostal space on the midclavicular line
5. Cleanses site appropriately
6. Inserts catheter over the top of the rib
7. Listens for rush of air
8. Removes needle leaving catheter in place and leaves catheter hub open
9. Disposes of needle in sharps container
10. Stabilizes the catheter hub as needed with 4 X 4's and tape
11. Continually reassess adequacy of ventilation, lung sounds, and tracheal position

## **Intramuscular (IM) Injection**

If IM Epinephrine is carried

1. Verifies proper indication for Epinephrine
  - Severe allergic reaction
  - Systolic BP < 90mmHg; or online physician's order
2. Inquiries about potential allergies
3. Selects and prepares proper equipment
  - Epinephrine medication
  - Appropriate syringe and needle
  - Sharps container
  - Alcohol swabs
4. Checks medication for
  - Clarity
  - Expiration date
5. Assembles syringe and needle
6. Draws up appropriate medication
  - If from vial:
    - Removes protective cap and clean medication top
    - Injects appropriate air volume into vial
    - Withdraws appropriate amount of medication
    - Replaces needle with proper IM needle
    - Dispels air
  - If from ampule:
    - Holding ampule upright, taps ampule to dislodge any trapped solution from neck
    - Uses protective device for breaking of ampule neck (gauze pad, alcohol prep, etc.)
    - Withdraws appropriate amount of medication
    - Dispels air
7. Selects and cleanses appropriate injection site
  - Deltoid
  - Dorsal gluteal
  - Vastus lateralis
  - Rectus femoris
8. Stretches skin, informs patient of stick
9. Inserts needle at a 90° angle with fast motion
10. Aspirates syringe while observing for blood return before injecting medication
11. Administers correct dosage at proper rate
12. Removes needle and disposes of syringe and needle appropriately
13. Applies direct pressure to injection site
14. Covers injection site as needed
15. Monitors patient for desired and adverse effects