

West Virginia Office of Emergency Medical Services Policies and Procedures

EMR Psychomotor Skills Summary Sheet – Initial Course

Name: _____ Exam Date: ____/____/____
Last First MI

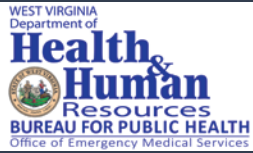
WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

Test Type: Entire Practical Retest

EMR “TESTED” Skill Station	Score	*CS	Evaluator Initials	NOTES
Patient Assessment - Trauma				
Bleeding Control/Shock Management				
Patient Assessment – Medical (Includes Baseline Vital Signs)				
Oxygen Admin, by Non-Rebreather Mask				
BVM Ventilation of an Apneic Patient				

** Any failure requires a completed skill sheet to be attached to this summary sheet.*



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Test Type: Entire Practical Retest

EMR “VERIFIED” Skill Station	Score	Pass/Fail	Date	Instructor Signature
Cardiac Arrest Management / AED				
Baseline Vital Signs				
Spinal Immobilization – Seated Patient				
Spinal Immobilization – Supine Patient				
Long Bone Immobilization				
Joint Immobilization				
Naloxone Administration				

Instructor signature verifies that the student has shown competence in the respective skill in accordance with the accompanying skill sheet.