

New York State Department of Health Bureau of Emergency Medical Services

Adapted from NREMT NATIONAL REGISTRY OF EMERGENCY MEDICAL TECHNICIANS

station 3 - B

Advanced Level Practical Examination PEDIATRIC (<2 YRS.) VENTILATORY MANAGEMENT

Candidate:	Examiner	
Date:	Signature:	
NOTE: If candidate elects to ventilate with BVM must be awarded for steps denoted by ** so long seconds.	I attached to reservoir and oxygen, f as first ventilation is delivered within	ull credit initial 30
Takes or verbalizes infection control precautions	1 1	
Opens the airway manually		
Elevates tongue, inserts simple adjunct [either oropharyngeal or	r nasopharyngeal airwayl 1	
NOTE: Examiner now informs candidate no gag reflex is p	present and patient accepts adjunct	
**Ventilated patient immediately with bag-valve-mask device un	attached to oxygen 1	20,000,000,000
**Hyperventilates patient with room air	attached to oxygen 1	
NOTE: Examiner now informs candidate that ventilation is	hoing ports made with out difficulty and the	
oximetry indicates the patient's blood oxygen saturation is	85%	at puise
Attaches oxygen reservoir to bag-valve-mask device and conne	ects to high flow oxygen regulator	16.
[12-15 liters/min.]	1 '	
Ventilates patient as a rate of 20-30/minute with appropriate vol	umes 1	
NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and		
medical control has ordered intubation. The examiner mus		
Directs assistant to pre-oxygenate patient		
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		
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 and over	epigastrium 1	
NOTE: Examiner to ask "If you had proper placement, wha	it would you hear?"	
Secures ET tube [may be verbalize]	1	
	TOTAL TO PASS 12 17	
CRITICAL FAILURE Failure to initiate ventilations within 30 seconds af than 30 seconds at any time Failure to take or verbalize body substance isolatic Failure to pad under the torso to allow neutral hea Failure to voice and ultimately provide high oxyger Failure to ventilate patient at rate of at least 20/min Failure to provide adequate volumes per breath [In Failure to pre-oxygenate patient prior to intubation Failure to successfully intubate within 3 attempts Uses jums as a fulcrum Failure to assure proper tube placement by auscul Inserts any adjunct in a manner dangerous to patient Attempts to use any equipment not appropriate for You must factually document your rationale for checking	on precautions and position or sniffing position an concentration [at least 85%] an anaximum 2 errors/minute permissible] altation bilaterally and over the epigastrium ent. ar the pediatric patient	
side of this form.	gany of the above critical items on the rev	erse