



**National Registry of Emergency Medical Technicians®  
Paramedic Psychomotor Competency Portfolio Manual**

**MEDICAL AND CARDIAC PHYSICAL ASSESSMENT SKILLS LAB**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor Evaluator: \_\_\_\_\_ Student Evaluator: \_\_\_\_\_  
Signature Signature

SCORING	
N/A	Not applicable for this patient
0	Unsuccessful; required critical or excessive prompting; inconsistent; not yet competent
1	Not yet competent, marginal or inconsistent, this includes partial attempts
2	Successful; competent; no prompting necessary

**Actual Time Started:** \_\_\_\_\_ **SCORE**

Scene size-up		SCORE
<b>Safety</b>		
Takes appropriate PPE precautions – gloves, gown, goggles, vest, helmet		
Hazards – chemical, thermal, atmospheric, electrical, weapons		
Environment – bystanders, hostile, ambient temperature, adequate space, day/night, patient prone to sudden behavior change		
Number of patients and location		
Clues/evidence at the scene – medication bottles, chemical containers, syringes, illicit drug paraphernalia, etc.		
Additional resources – Hazmat, heavy rescue, law enforcement, bystanders, historians, air medical		
Nature of illness – determines reason for call		
<b>Patient assessment and management</b>		
Begins spinal precautions if indicated		
<b>Primary survey/resuscitation</b>		
General impression		
Patient appearance – posture, position, obvious distress, incontinence, vomiting, odors, pain		
Estimates age, gender and weight of patient		
Manages any gross visible hemorrhage – direct pressure, tourniquet		
Level of responsiveness		
Awake and oriented		
Response to verbal stimuli		
Opens eyes		
Follows simple commands		
Responds to painful stimuli		
Acknowledges presence of stimuli		
Responds to irritation stimuli		
Unresponsive		
Airway		
Assesses airway – position, obstructions		
Manages airway as appropriate – suction, adjunct, modified jaw thrust		
Breathing		
Exposes the chest and inspects for injuries		
Auscultates lung sounds – presence, clarity, abnormal sounds		
Notes minute volume – rate, tidal volume and equal chest rise and fall		

Manages any injury compromising ventilations	
Administers oxygen or ventilates with appropriate device – BVM, NRB	
Circulation	
Pulse	
Presence, rate, quality	
Skin	
Color, moisture, temperature	
Turgor, edema	
Capillary refill	
Disability	
GCS – calculates score	
Pupils – size, equality, reactivity to light	
Chief complaint	
Determines chief complaint	
Transport decision	
Critical – begins immediate packaging for transport or resuscitation	
Non-critical – continued assessment on scene	
<b>Vital signs</b>	
Blood pressure	
Pulse	
Respirations	
SpO <sub>2</sub>	
Pain – if appropriate	
<b>Secondary assessment</b> – performs secondary physical examination and assesses affected body part(s) or system(s)	
Obtains an oral history – pertinent to situation	
History of the present illness	
SAMPLE – signs/symptoms; allergies; medications; past medical history; last meal; events leading up to injury	
OPQRST – onset; provocation; quality; region/radiation; severity; timing	
Head and Neck	
Immobilization as necessary	
Interviews for pain, recent trauma, events	
Inspects and palpates	
Scalp/skull	
Facial bones	
Facial muscles – symmetry	
Jaw	
Eyes – PERLA, pupil size, ocular movements, visual acuity, position of eyes	
Mouth – assess tongue, says “Ah,” color of palate	
Ears – aligns to open canal, discharge	
Nose – discharge, obstruction, nasal flaring	
Neck – lumps, hard nodules	
Trachea – checks for stoma	
Jugular vein status	
Cervical spine processes	

<b>Chest and cardiovascular</b>	
Interviews patient – pain, history, current medications	
Inspects – rate, rhythm, depth, symmetry, effort of breathing, color, scars, lumps	
Palpates – tenderness, lumps	
Auscultates – vesicular, bronchial, bronchovesicular breath sounds in proper locations anteriorly and posteriorly, notes adventitious breath sounds	
Percussion – symmetry of sounds	
Oxygenation/ventilation – adjusts oxygen flow, changes adjunct accordingly, administers appropriate respiratory medications	
Auscultates heart sounds – S <sub>1</sub> , S <sub>2</sub>	
Cardiac management – monitor/12-lead ECG, medications	
<b>Abdomen and pelvis</b>	
Interviews patient – location, type of pain, duration, events leading up to current complaint, food or products ingested	
Inspects – scars, distention, pulsations, color, including flanks and posterior	
Auscultation – bowel sounds	
Palpation – guarding, tenderness with cough or increasing pressure, pulsations, rigidity	
Assesses pelvic stability	
<b>Extremities</b>	
Interviews patient – location, type of pain, duration, events	
Arms – pulses, edema, capillary refill, grip strength, drift	
Legs – pulses, edema, pressure sores, extension/contraction of legs/feet	
Manages wounds or splints/supports fractures	
<b>Mental status examination</b>	
Appearance – dress, eye contact, posture, depression, violence, facial grimaces, actions, mannerisms	
Speech – spontaneous, slow/fast, volume, clarity, appropriate	
Mood – depressed, euphoric, manic, anxious, angry, agitated, fearful, guilty	
Thoughts – racing, hallucinations, delusions, suicidal, unconnected, disturbed, homicidal	
<b>Neurological</b>	
Interviews patient – pain, paralysis; location, duration, events leading up to, changes over time, past medical history, medications	
Stroke scale – facial droop, arm drift, abnormal speech	
Motor system – posturing, involuntary movements, strength, coordination, flaccid, seizures, gait	
<b>Transportation decision</b>	
Verbalizes destination decision	
<b>Other assessments and interventions</b>	
Utilizes proper diagnostic tools at the appropriate time – ECG, glucometer, capnography	
Performs appropriate treatment at the correct time – IVs, oxygenation/ventilation, medication administration	

