



Southern Nevada Health District
Office of Emergency Medical Services & Trauma System

EMT Practical Examination Report Form

Course ID#: _____

Course Completion Date: _____

Name: _____
Last
First
Middle Initial

Address: _____

Training Institution: _____

Exam Site: _____ Date: _____

Station	Skill	Attempt #1	Attempt #2
Station #1	Patient Assessment/Management-Trauma	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Station #2	Patient Assessment/Management-Medical	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Station #3	Cardiac Arrest Management/AED	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Station #4	BVM Ventilation Adult Apenic Pt	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Station #5	O ₂ Admin by NRB	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Station #6	Spinal Immobilization (Supine)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Station #7	Random Basic Skill	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Candidates failing three (3) or less stations are eligible for a retest of the skills failed. Failing a same day retest will require the candidate to retest only those skills failed on a different day with a different examiner. A candidate is allowed to test a single skill a maximum of three (3) times before he/she must retest the entire practical examination. Failing four (4) or more stations constitutes a complete failure of the practical examination. A complete failure of the practical examination will require the candidate to document remedial training over all skills before re-attempting all stations of the practical examination. Candidates are allowed a maximum of three (3) complete examination attempts. Failure to pass all stations by the end of three (3) full examination attempts constitutes a complete failure of the testing process and will require the candidate to complete a new Health District approved EMT training program.

Random EMT Skills are either: Bleeding Control Shock Management, Joint Immobilization, Long Bone Immobilization or Spinal Immobilization (Seated). Random Skill can be assigned by the coordinator.

By my signature below, I acknowledge that I have read, understand and agree to the Southern Nevada Health District Office of Emergency Medical Services EMT Pass/Fail testing criteria listed above.

EMT Candidate: _____
Legal Signature
Print Name

Instructor: _____
Legal Signature
Print Name

Representative's Comments:

Representative's Signature: _____