

**Foothill College EMS Programs  
CPAP AIRWAY DEVICE  
Skills Competency Verification Form**

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

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

Signature

Print

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

Actual Time Started: \_\_\_\_\_

	SCORE	
	Points Possible	Points Awarded
States: "I would perform PENMAN and reports patient's general impression – I would wear an N-95 mask for nebulizer medication	1	
<b>Patient:</b>		
<b>States:</b> "Hello, my name is _____, I'm an EMT. I am going to help you."	1	
Verbalize performing primary assessment	1	
Verbalize providing supplemental oxygen or respiratory support as needed.	1	
<b>States:</b> "I would obtain a set of Vital Signs and SpO <sub>2</sub> ." And "I would assess lung sounds."	1	
Positions patient in a position that will optimize ease of ventilation (high Fowler's)	1	
<b>Assesses patient to identify indications for CPAP: States Minimum of 4:</b>		
(Patient is at least 8 years old) (Congestive Heart Failure) (Pulmonary edema, Asthma) (Pneumonia) ( COPD) (Patient with a valid DNR/POLST with "Comfort Care is in force)	5	
<b>Assesses patient to identify contraindications for CPAP: States Minimum of 4</b>		
(Patient is less than 8 years old ) (Severe Respiratory distress) (Severe LOC) (Respiratory/Cardiac arrest /agonal respirations) (Nausea/vomiting) (Unable to maintain patent airway, or increased risk of aspiration) (Hypotension - systolic blood pressure < 90 mmHg) (Major trauma, head, face, and thorax)	7	
<b>Relative Contraindications-Additional caution include - States:</b>		
1. History of pulmonary fibrosis	1	
2. Decreased LOC	1	
3. Inability to tolerate a mask after the first few minutes and COPD patients which have recently experienced an exacerbation of their condition." ("brittle" COPD)	1	
<b>Perform: Selects, Checks, Assembles, Equipment</b>		
Assembles mask and tubing according to manufacturer instructions	1	
Coaches patient how to breathe through mask	1	
Connects CPAP unit to O <sub>2</sub> supply, using oxygen regulator	1	
Turns on power/oxygen	1	
Sets device parameters:	1	
Turns the rate (frequency) dial to 7.5 cm H <sub>2</sub> O (based on local protocols)	1	
<b>Performs Procedure</b>		
Places mask over mouth and nose	1	
Coaches patient to breathe normally and adjust to air pressure	1	
Frequently reassesses patient for desired effects:	1	
Decreased respiratory distress	1	
SpO <sub>2</sub> > 92%	1	
Decreased adventitious lungs sounds	1	
Absence of complications (barotrauma and pneumothorax)	1	
Records settings/readings and documents appropriately	1	
<b>Evaluation and Support</b>		

Verbalize I would continually reassess observing for signs of improvement or worsening of respiratory status until patient is transferred to ALS	1	
Verbalize I would complete a secondary assessment	1	
<b>Affective</b>		
Accepts evaluation and criticism professionally	1	
Shows willingness to learn	1	
Interacts with simulated patient and other personnel in professional manner	1	

**Actual Time Ended:** \_\_\_\_\_

**Critical Criteria:**

**TOTAL**

/39 80%= 31
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- \_\_\_ Failure to take or verbalize appropriate PENMAN precautions
- \_\_\_ Failure to identify 4 indications
- \_\_\_ Failure to identify 4 potential complications
- \_\_\_ Failure to frequently reassess the patient after application of the CPAP device
- \_\_\_ Failure to ensure that the patient understands the procedure
- \_\_\_ Exhibits unacceptable affect with patient or other personnel
- \_\_\_ Failure to manage patient as a competent EMT
- \_\_\_ Fails to apply CPAP in 15 minutes

<b>Performance Objective</b>
Verbalize identifying the need for CPAP
Demonstrate proficiency in setting up, and applying CPAP correctly on a simulated patient
<b>Testing Conditions</b>
The student will identify the indications and contraindications
Apply CPAP device correctly onto patient and set appropriate O2 flow
<b>Equipment</b>
Patient, CPAP equipment
<b>Perform all *Criteria – Overall Score: Pass or Fail</b>
<b>Comments: Pro's and Con's</b>

Was student?  Successful  
 Unsuccessful

Evaluator's signature: \_\_\_\_\_