

**Emergency Medical Technician Psychomotor  
Examination**

**SPINAL IMMOBILIZATION (SUPINE PATIENT)**

Candidate: \_\_\_\_\_ Examiner: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Actual Time Started: _____	Possible Points	Points Awarded
Takes or verbalizes appropriate PPE precautions	1	
Directs assistant to place/maintain head in the neutral, in-line position	1	
Directs assistant to maintain manual stabilization of the head	1	
Reassesses motor, sensory and circulatory function in each extremity	1	
Applies appropriately sized extrication collar	1	
Positions the immobilization device appropriately	1	
Directs movement of the patient onto the device without compromising the integrity of the spine	1	
Applies padding to void between the torso and the device as necessary	1	
Immobilizes the patient's torso to the device	1	
Evaluates and pads behind the patient's head as necessary	1	
Immobilizes the patient's head to the device	1	
Secures the patient's legs to the device	1	
Secures the patient's arms to the device	1	
Reassesses motor, sensory and circulatory function in each extremity	1	
Actual Time Ended: _____	<b>TOTAL</b> 14	

**CRITICAL CRITERIA**

- \_\_\_\_ Failure to immediately direct or take manual stabilization of the head
- \_\_\_\_ Failure to properly apply appropriately sized cervical collar before ordering release of manual stabilization
- \_\_\_\_ Released or ordered release of manual stabilization before it was maintained mechanically
- \_\_\_\_ Manipulated or moved the patient excessively causing potential spinal compromise
- \_\_\_\_ Head immobilized to the device **before** device sufficiently secured to the torso
- \_\_\_\_ Patient moves excessively up, down, left or right on the device
- \_\_\_\_ Head immobilization allows for excessive movement
- \_\_\_\_ Upon completion of immobilization, head is not in a neutral, in-line position
- \_\_\_\_ Failure to reassess motor, sensory and circulatory functions in each extremity after immobilizing patient to the device
- \_\_\_\_ Failure to manage the patient as a competent EMT
- \_\_\_\_ Exhibits unacceptable affect with patient or other personnel
- \_\_\_\_ Uses or orders a dangerous or inappropriate intervention

***You must factually document your rationale for checking any of the above critical items on the reverse side of this form.***