



# EMR/EMT Psychomotor Examination Report Form

Name: \_\_\_\_\_  
 Last Name First Name Middle Initial

Address: \_\_\_\_\_  
 Number & Street

City State Zip Code

Exam Site: \_\_\_\_\_ Date: \_\_\_\_\_

| EMR/EMT SKILLS                                 | RESULTS OF FULL ATTEMPT | RESULTS OF RETEST #1   | RESULTS OF RETEST #2   |
|--|-------------------------|------------------------|------------------------|
| 1 Patient Assessment/Management – Trauma       | PASS FAIL               | PASS FAIL              | PASS FAIL              |
| 2 Patient Assessment/Management – Medical      |                         |                        |                        |
| 3 BVM Ventilation of an Apneic Adult Patient   |                         |                        |                        |
| 4 Oxygen Administration by Non-rebreather Mask |                         |                        |                        |
| 5 Cardiac Arrest Management/ AED               |                         |                        |                        |
| 6 Spinal Immobilization (Supine Patient)       |                         |                        |                        |
| <b>Random Skill is required for EMT only</b>   |                         |                        |                        |
| 7 Random EMT Skills: Test (1) of the following |                         |                        |                        |
| Spinal Immobilization (Seated Patient)         |                         |                        |                        |
| Bleeding Control/ Shock Management             |                         |                        |                        |
| Long Bone Immobilization                       |                         |                        |                        |
| Joint Immobilization                           |                         |                        |                        |
| <b>YOUR OVERALL RESULTS TODAY ARE:</b>         | PASS<br>RETEST<br>FAIL  | PASS<br>RETEST<br>FAIL | PASS<br>RETEST<br>FAIL |

- You are eligible to retest if you fail three (3) or less skills when taking a full attempt.
- You cannot retest today if you fail four (4) or more skills when taking a full attempt.
- If you are eligible for retest, you must retest all skill(s) marked as fail.
- Only one (1) retest attempt can be completed at this examination today if one is offered. Failure of any skill on Retest #2 constitutes complete failure of the entire psychomotor examination.
- Failure of the entire psychomotor examination requires remedial training before attempting the entire psychomotor examination (all seven [7] skills) on another date.
- Passed examination results are only valid for up to 24 months from the date of the examination, provided all other "Entry Requirements" for NREMT are met.

Examination Coordinator: \_\_\_\_\_  
 Signature Date

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

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
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