

## PATIENT ASSESSMENT VITAL SIGNS

CANDIDATE=S NAME:		DATE:
__ ECA	__ EMT	__ EMTI
__ ECA	__ EMT	__ EMTI
__ INITIAL	__ RENEWAL	__ EQUIVALENCY
__ INITIAL	__ RENEWAL	__ EQUIVALENCY
STATION TIME 5 MINUTES	START TIME:	END TIME:

- |   |   |   |  |                 |                  |
|---|---|---|--|-----------------|------------------|
| 0 | 1 | 2 | *1. Calculates and reports pulse                       | Candidate _____ | Difference _____ |
|   |   |   |  | Examiner _____  |                  |
| 0 | 1 | 2 | *2. Calculates and reports respiratory rate            | Candidate _____ | Difference _____ |
|   |   |   |  | Examiner _____  |                  |
| 0 | 1 | 2 | *3. Palpates and reports systolic blood pressure       | Candidate _____ | Difference _____ |
|   |   |   |  | Examiner _____  |                  |
| 0 | 1 | 2 | *4. Auscultates and reports auscultated blood pressure | Candidate _____ | Systolic _____   |
|   |   |   |  | Examiner _____  | Difference _____ |
|   |   |   |  | Candidate _____ | Diastolic _____  |
|   |   |   |  | Examiner _____  | Difference _____ |

____ Candidate=s Total Points (Minimum passing total: 6 points)	
Absolutes satisfied: ____ Yes ____ No (Must have at least one point for each step marked with an *)	____ Pass ____ Fail
Examiner:	Cert. No. (if assigned):

**Documenting Comments:**