

# Oral Station

## Instructions to Skill Examiners

Thank you for serving as a Skill Examiner at today's examination. Before you read the instructions for the skill you will be evaluating today, please take a few moments to review your general responsibilities as a Skill Examiner:

- Conducting examination-related activities on an equal basis for all candidates, paying particular attention to eliminate actual or perceived discrimination based on race, color, national origin, religion, gender, age, disability, position within the local EMS system, or any other potential discriminating factors. The Skill Examiner must help ensure that the EMT Assistant and/or Simulated Patient conduct himself/herself in a similar manner throughout the examination.
- Objectively observing and recording each candidate's performance
- Acting in a professional, unbiased, non-discriminating manner, being cautious to avoid any perceived harassment of any candidate
- Providing consistent and specific instructions to each candidate by reading the "Instructions to the Psychomotor Skills Candidate" exactly as printed in the material provided by the National Registry. Skill Examiners must limit conversation with candidates to communication of instructions and answering of questions. All Skill Examiners must avoid social conversation with candidates or making comments on a candidate's performance.
- Recording, totaling, and documenting all performances as required on all skill evaluation forms
- Thoroughly reading the instructions for the assigned skill before actual evaluation begins
- Checking all equipment, props, and moulage prior to and during the examination
- Briefing any Simulated Patient and EMT Assistant for the assigned skill
- Ensuring professional conduct of all personnel involved with the particular skill throughout the examination
- Maintaining the security of all issued examination material during the examination and ensuring the return of all material to the National Registry Representative

This skill is designed to assess the candidate's ability to critically think through and clinically manage two specific patient presentations. Each candidate will be given a maximum of fifteen (15) minutes to complete each case that **two separate Skill Examiners will evaluate.** Candidates are permitted to take notes, but all recordings must be collected and secured before the candidate leaves the room. Before you open this skill for testing, you must spend a significant amount of time (1 hour or more) reviewing the case and preparing to evaluate the candidates.

As the candidate enters your room, introduce yourself. Be sure the candidate introduces him/herself so that you can accurately fill in the information on the evaluation form. Do not ask candidates other personal questions, including questions related to training or current practice location. Clarify any specific questions the candidate may ask about how to interact with you during this skill. Try to put them at ease before starting the evaluation while maintaining an appropriate professional Skill Examiner distance. Be sure to provide the candidate with one sheet of blank paper and a pen or pencil to record information throughout the case.

The 15 minute time limit will begin when you hand the candidate the "Background and Dispatch Information" provided with the testing case. Tell the candidate to read this information aloud. The candidate should verbally seek scene size-up information, request patient assessment findings including past medical history, indicate his/her patient management plan, transportation decisions, and how he/she would conclude the call. Remember that candidates are told to assume the role of team leader and that no treatments or interventions will be performed unless he/she orders or directs the actions. If a candidate does not begin the case after 30 seconds, you should state, "What would you like to do now?" It is imperative to move candidates expeditiously through the case. It is your responsibility to provide the candidate with every reasonable

opportunity to complete all required actions in the case. If the candidate hesitates or stalls during his/her performance, you should ask, "What would you do next?" to move him/her along. Some candidates may ask questions or give orders in rapid-fire sequence. This can make it difficult for you to give all needed information and may also lead to misunderstandings about what was ordered or performed. Please discourage any candidate from asking too many questions or ordering too many interventions at once by simply responding, "One thing at a time, please." Some candidates may get too involved with such a secondary assessment of an area with no significant findings that time is unnecessarily spent in these non-significant areas. To move the candidate on in a timely fashion in this instance, you should provide a general response such as, "The HEENT is normal in this patient."

As the Skill Examiner, you will need to provide appropriate scene size-up information as you are asked. Once contact is made with the patient, you should play the role of the patient, bystander, family member, etc., by providing answers to any questions you may be asked. When you are to respond as a patient or other party, primary responses are listed in the case within quotations, such as, "My chest really hurts." You should also act like a patient with chest pain when exhibiting these signs and symptoms. Please dramatize and role-play, within reason. Many candidates will ask for additional information not specifically provided in the case. Based on your expertise, you should respond appropriately just as a patient would in a real situation. Be sure to state your responses using typical layperson language and by responding in the first person. If there are unique role-playing responsibilities for you, they will be identified in the case.

You must supply all physical examination information and other patient data which the candidate requests. Please acknowledge successful completion of any treatments ordered by the candidate. You should also play the role of any other professional caregiver by reporting any patient data or acknowledging successful completion of any assigned task throughout the skill. Remember to provide information on the patient's response to any interventions at the appropriate time the specific response would be observed in the typical field situation. You should continue providing an appropriate clinical presentation of the patient based on the information listed in the case until the candidate initiates appropriate management. We depend on your expertise in presenting vital information at any point requested that would reflect an appropriate patient response, either positive or negative, to the treatment(s) the candidate has ordered and provided to that point. It is essential that you do not present a "physiological miracle" by improving the patient too much at too early a step. If on the other hand no or inappropriate treatments are rendered, you should supply clinical information representing a deteriorating patient. However, do not deteriorate the patient to the point where the candidate elects to initiate CPR.

The candidate is to be specific in his/her questions, orders, and procedures. If necessary, you should remind him/her of this requirement. For example, when a candidate inquires about pain, he/she must ask for characteristics, radiation, aggravation, etc., separately before you should answer with appropriate information. If the candidate requests information on an area that has no significance to the case, do not force the candidate to waste time with non-essential items. In this instance a simple response to a general question would be appropriate. Be specific when providing information but don't provide more information than the candidate asked for. Provide information that is a reasonable response to candidate-initiated requests. For example, if a candidate asks for the general impression of the patient, state what would be obvious to a medically trained observer. Do not make information difficult to obtain. Candidates should be given or allowed to easily obtain any information he/she would normally see in a real patient in the typical field setting.

All essential information has been provided in the case. Any unremarkable or normal findings in the "Examination Findings" section of the prepared case has been identified with "---." However, it is possible for a candidate to ask for additional information not provided in the materials. In such cases, you should apply one of the following:

1. Supply your own information that would reasonably fit the case. Do not complicate or alter the case in any way.
2. If the request is for data which was not supplied, you can respond by either stating, "The order has been given" but assume the results won't be available during the remainder of the case, or state, "The findings are normal" if appropriate.
3. As a last resort, simply state, "That information is not available at this time."

Do not cue candidates that a response is incomplete or incorrect. For example, if a candidate has failed to completely investigate a past medical history, you should not respond by stating, "Is there anything else in the past medical history you would like to know?" Be careful not to lead the candidate with either verbal or non-verbal cues. Avoid phrases such as, "OK," "Fine," "Right," "Oh, really?" or provide visual cues such as broad smiles, frowns, or other body language. Your most appropriate responses should be neutral when confirming that an action has been accomplished by replying, "That is done." Candidates are advised that medical direction grants permission for any intervention requested throughout the case. If the candidate pauses or waits, simply ask, "What would you do next?" It is your responsibility as the Skill Examiner to ensure that the candidate has every opportunity to move through the case within the 15 minute time limit.

At the end of the case, you may need to ask the candidate, "Please state your field impression of this patient." You will also need to ask a related pathophysiological question listed at the end of the case. These questions are designed to assist with your evaluation and rating of the candidate's knowledge and are specifically listed in the case. The candidate must also make a verbal report to the receiving facility when transporting the patient. You should play the role of the receiving facility during this report but may not direct patient care or order additional treatments or interventions.

When the candidate has completed the case or the 15 minutes have expired, you should state, "That completes this Oral Case. Please leave all of your materials on the table in front of you. Report back to the staging area." Be sure that all materials are left in the room and that no candidate leaves the examination room with any notes, copies, or recordings of your case. Be sure he/she returns the "Background and Dispatch Information" provided with the case. Complete your evaluation form and prepare the room to appear in a consistent fashion before accepting another candidate into your room for evaluation. Do not discuss any performance with anyone other than the National Registry Representative if you have questions.

As you review the evaluation form, there are five categories in which performances are evaluated. Each scoring category has four related statements with assigned point values to help you consistently award the appropriate points for each performance. In each category, a score of "2" represents the performance of a minimally competent entry level candidate who has demonstrated that he/she could safely and effectively provide care in a field situation. Scores of less than "2" in any category represent a marginal or seriously deficient performance. A score of greater than "2" should be awarded whenever outstanding or exemplary performance is observed in any category. Keep in mind that your judgment of performances should be based on the care that a recent graduate should be expected to provide rather than that of a "seasoned veteran" with many years of field experience and patient contact.

After all points have been awarded and totaled, please review the "Critical Criteria" statements printed at the bottom of the evaluation instrument. If the candidate failed to appropriately address any of the "Mandatory Actions" listed in the case, you must document and factually describe the omission. You must also document any harmful or dangerous action that the candidate either performed or ordered to be performed. Some examples of potentially harmful/dangerous actions are listed in the case as a guideline to assist in your evaluation but are not all encompassing. We depend on your expertise to make appropriate judgments based on the actual patient care that would have been delivered. When in doubt, please consult the National Registry Representative for clarification or additional assistance.

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## Equipment List

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Do not open this skill for testing until the National Registry Representative has provided you with a case for the Oral Station and you are situated in a quiet, secure room. You must be able to sit directly across the table from the candidate with the provided divider separating you. In addition, the following supplies must be available:

- Tablet paper for candidate (All notes ***must*** be collected before dismissing the candidate from the room.)
- Pen or pencil for candidate
- Divider barrier that prohibits candidate from observing any printed case materials or documentation
- Watch or visible clock with a second hand

## Instructions to the Psychomotor Skills Candidate Oral Station

This is the Oral Station in which you are responsible for all aspects of scene management and patient care for a given case. You will have 15 minutes to verbally complete a simulated out-of-hospital patient encounter. Remember that since we cannot see the patient you must verbalize every action. I will provide assessment findings and other information only at your request. Conduct yourself as if I am the patient and ask me any questions you would normally ask a patient in this situation. I will also play the role of bystanders or other health care providers. Verbalize all interventions, ask any questions, and verbalize any orders you would normally give in the field just as if this were a real call. Throughout the case, assume that medical direction grants permission for you to perform any interventions you request.

The make-up of your crew will be explained as part of the background information you'll read in a few moments. You are the team leader and are responsible for directing the actions of your assistants. They will not do anything without your direction. I will acknowledge your interventions and may ask you for additional information if needed. You will also be required to complete a simulated radio report of this call just like you would in the field. I will act as the receiving facility whenever you are ready to contact them.

Throughout the case you may take notes. Paper and a pen or pencil are provided for this purpose. At the completion of this case, leave all of your notes in this room. Please remember that you are not permitted to discuss any specific details of this station with anyone at any time. Do you have any questions?

Your 15 minute time limit will begin as soon as I hand you the case. Please read this information out loud to me and be sure to return the case before leaving the room.

[The Skill Examiner now provides the candidate with the "Background and Dispatch Information" and begins the 15 minute time limit.]