

EXAMINATION MARKING SHEET

The practical examination marking sheet, and accompanying grading criteria, is designed to standardize the grading of the practical examination throughout the Province of British Columbia. Injury scenarios are listed on the practical examination marking sheet and may be assigned to the candidate in any order.

The practical examination marking sheet has specific "starred" items:

Three stars (***) represent skills that constitute critical behaviour. Failure to perform such a skill could have devastating, even fatal, consequences for the patient, attendant, or both in a real situation. If a candidate does not perform a skill in the "three star" category, it will result in a 100% deduction and zeroing of the practical examination.

Two stars (**) represent skills that must be performed to provide accurate assessment of the patient, prevent deterioration or serious injury aggravation. Failure to perform such a skill could have detrimental, but not fatal consequences in a real situation. If a candidate does not perform a skill in the "two star" category, it will result in a 15% deduction from the total practical examination grade.

One star (*) represents skills that are required to provide optimal patient care. Failure to perform such a skill would pose minor discomfort to the patient or minimally aggravate an injury, but would not make the injury worse in a real situation. If a candidate does not perform a skill in the "one star" category, it will result in a 5% deduction from the total practical examination grade.

Marks deducted are accumulative throughout the examination. In order to be certified as an occupational first aid attendant (level 2 or 3) candidates must achieve 70% or more on the written and practical examinations.

Occupational First Aid Examination

Level _____

SCENARIO NUMBER 1

Injury _____

	Time	Marks Deducted	Comments
Scene Assessment/Gloves	_____	*	_____
Airway	_____	***	_____
C-Spine Control	_____	***	_____
Breathing	_____	***	_____
Circulation	_____	***	_____
Rapid Body Survey	_____	***	_____
Decision (RTC/AMB/MA/RTW)	_____	***	_____
Hard Collar	_____	***	_____
Secure to Lifting Device	_____	***	_____
Vitals	_____	***	_____
History Taking	_____	**	_____
Head to Toe	_____	**	_____
Injury Aggravation	_____	**	_____
ABC's	_____	***	_____

Version _____

Set _____

Problem

- _____ Jaw Thrust
- _____ OPA
- _____ Ass. Vent
- _____ Oxygen
- _____ Ex/Ex
- _____ DP on
- _____ PP on
- _____ Bandage
- _____ PP off

SCENARIO NUMBER 2

Injury _____

Scene Assessment/Gloves	_____	*	_____
C-Spine/Collar	_____	***	_____
Primary Survey	_____	***	_____
Oxygen	_____	**	_____
Decision (RTC/AMB/MA/RTW)	_____	**	_____
Vitals	_____	***	_____
History Taking	_____	**	_____
Head to Toe	_____	**	_____
Wound Management	_____	*	_____
Injury Aggravation	_____	**	_____
Immobilization/Securing	_____	**	_____
Reassessment	_____	**	_____
ABC's	_____	**	_____

Vital Signs For Scenario Number _____

_____	Time	**	_____
_____	Resp	**	_____
_____	Pulse	**	_____
_____	LOC	**	_____
_____	Pupils	*	_____
_____	Skin	*	_____

SCENARIO NUMBER 3

Injury _____

Mechanism	_____	*	_____
Gloves/Sterile Technique	_____	*	_____
Primary Survey	_____	**	_____
Oxygen	_____	*	_____
Decision (RTC/AMB/MA/RTW)	_____	*	_____
Vitals	_____	*	_____
History Taking	_____	*	_____
Modified Head to Toe	_____	**	_____
Wound Management	_____	*	_____
Immobilization	_____	*	_____
Reassessment	_____	*	_____
Injury Aggravation	_____	*	_____
Records	_____	*	_____

Cold Application _____ * _____

Cold Application _____ * _____

Jaw Thrust *** _____ OPA ** _____ O² Therapy ** _____ PM ** _____ BVM ** _____ Suction *** _____
 CPR/AED: 1 Operator *** _____ CPR/AED 2 Operator *** _____ Obstr. Airway: Cons. *** _____ Unresp. *** _____

TOTAL % DEDUCTED _____

 Candidate DD MM YY Evaluator

Course No. _____ ID Checked Successful Unsuccessful

 Written Practical