

PALS Case Scenario Testing Checklist

Respiratory Case Scenario Upper Airway Obstruction



American Heart
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American Academy
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DEDICATED TO THE HEALTH OF ALL CHILDREN®

Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|---|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen or supplemental oxygen as needed to support oxygenation | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs and symptoms of upper airway obstruction | | |
| Categorizes as respiratory distress or failure | | |
| Directs administration of nebulized epinephrine and corticosteroid (for croup), or IM epinephrine and IV corticosteroid (for anaphylaxis) | | |
| States indications for bag-mask ventilation and/or other airway or ventilation support | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question:</i> <i>"What are the indications for bag-mask ventilation and/or other airway or ventilation support?"</i></p> | | |
| Directs establishment of IV or IO access, if indicated | | |
| Directs reassessment of patient in response to treatment | | |
| Case Conclusion/Debriefing | | |
| <p><i>The following step is evaluated only if the student's scope of practice applies</i></p> | | |
| Describes how to estimate correct endotracheal tube size for this patient | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question:</i> <i>"How would you estimate the endotracheal tube size for this infant with upper airway obstruction?"</i></p> | | |

STOP TEST

| Instructor Notes | | |
|--|---|---|
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist

Respiratory Case Scenario Lower Airway Obstruction



American Heart
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American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen or supplemental oxygen as needed to support oxygenation | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs and symptoms of lower airway obstruction | | |
| Categorizes as respiratory distress or failure | | |
| Directs administration of albuterol and corticosteroids (for asthma) or suctioning or possible additional laboratory studies (for bronchiolitis) | | |
| States indications for bag-mask ventilation and/or other airway or ventilation support | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question: "What are the indications for bag-mask ventilation and/or other airway or ventilation support?"</i></p> | | |
| Directs establishment of IV or IO access, if appropriate | | |
| Directs reassessment of patient in response to treatment | | |
| Case Conclusion/Debriefing | | |
| <p><i>The following step is evaluated only if the student's scope of practice applies</i></p> | | |
| States indications for advanced airway management | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question: "What are the indications for endotracheal intubation?"</i></p> | | |

STOP TEST

| Instructor Notes | | |
|--|---|---|
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist

Respiratory Case Scenario Lung Tissue Disease



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DEDICATED TO THE HEALTH OF ALL CHILDREN®

Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen (or supplemental oxygen as needed to support oxygenation) and evaluates response | | |
| Identifies indications for bag-mask ventilation and/or additional airway or ventilation support | | |
| Describes methods to verify that bag-mask ventilation is effective | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs and symptoms of lung tissue disease | | |
| Categorizes as respiratory distress or failure | | |
| Directs establishment of IV or IO access | | |
| Directs reassessment of patient in response to treatment | | |
| Identifies need for involvement of advanced provider with expertise in pediatric intubation and mechanical ventilation | | |
| Case Conclusion/Debriefing | | |
| <i>The following step is evaluated only if the student's scope of practice applies</i> | | |
| States indications for advanced airway management | | |
| <i>If the student does not verbalize the above, prompt the student with the following question: "What are the indications for advanced airway management?"</i> | | |

STOP TEST

| | | |
|--|---|---|
| Instructor Notes | | |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist

Respiratory Case Scenario Disordered Control of Breathing



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen (or supplemental oxygen as needed to support oxygenation) and evaluates response | | |
| Identifies indications for bag-mask ventilation and/or additional airway or ventilation support | | |
| Describes methods to verify that bag-mask ventilation is effective | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs of disordered control of breathing | | |
| Categorizes as respiratory distress or failure | | |
| Directs establishment of IV or IO access | | |
| Directs reassessment of patient in response to treatment | | |
| Identifies need for involvement of advanced provider with expertise in pediatric intubation and mechanical ventilation | | |
| Case Conclusion/Debriefing | | |
| <i>The following step is evaluated only if the student's scope of practice applies</i> | | |
| States indications for advanced airway management | | |
| <i>If the student does not verbalize the above, prompt the student with the following question: "What are the indications for advanced airway management?"</i> | | |

STOP TEST

| | | |
|--|---|---|
| Instructor Notes | | |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist Shock Case Scenario Hypovolemic Shock



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs and symptoms of hypovolemic shock | | |
| Categorizes as compensated or hypotensive shock | | |
| Directs establishment of IV or IO access | | |
| Directs rapid administration of a 20 mL/kg fluid bolus of isotonic crystalloid over 10 minutes if hypotensive and over 20 minutes if compensated; repeats as needed to treat signs of shock | | |
| Reassesses patient during and after each fluid bolus; stops fluid bolus if signs of heart failure develop (ie, if vital signs fail to improve, respiratory distress worsens, hepatomegaly or rales/crackles develop) | | |
| Directs reassessment of patient in response to each treatment | | |
| Case Conclusion/Debriefing | | |
| States therapeutic end points during shock management | | |
| <i>If the student does not verbalize the above, prompt the student with the following question: "What are the therapeutic end points during shock management?"</i> | | |

STOP TEST

| | | |
|--|---|---|
| Instructor Notes | | |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist Shock Case Scenario Obstructive Shock



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Verbalizes DOPE mnemonic for intubated patient who deteriorates | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following questions:</i> <i>"What mnemonic is helpful to recall when the intubated patient deteriorates? What does this mnemonic mean?"</i></p> | | |
| Identifies signs and symptoms of obstructive shock | | |
| States at least 2 causes of obstructive shock | | |
| <p><i>If the student does not state the above, prompt the student with the following statement:</i> <i>"Tell me at least 2 causes of obstructive shock."</i></p> | | |
| Categorizes as compensated or hypotensive shock | | |
| Directs establishment of IV or IO access, if needed | | |
| Directs rapid administration of a fluid bolus of 5-20 mL/kg over 10-20 minutes of isotonic crystalloid, if needed (ie, for cardiac tamponade, massive pulmonary embolus) | | |
| Directs appropriate treatment for obstructive shock (needle decompression for tension pneumothorax; fluid bolus, and pericardiocentesis for cardiac tamponade; oxygen, ventilatory support, fluid bolus, and expert consultation for massive pulmonary embolus; prostaglandin infusion and expert consultation for neonate with ductal-dependent congenital heart disease and constriction/closure of the ductus arteriosus) | | |
| Directs reassessment of patient in response to treatment | | |
| Case Conclusion/Debriefing | | |
| States therapeutic end points during shock management | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question:</i> <i>"What are the therapeutic end points during shock management?"</i></p> | | |

STOP TEST

| Instructor Notes | | |
|--|---|---|
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario

Testing Checklist

Shock Case Scenario

Distributive Shock



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs and symptoms of distributive (septic) shock | | |
| Categorizes as compensated or hypotensive shock | | |
| Directs establishment of IV or IO access | | |
| Directs rapid administration of a 10-20 mL/kg fluid bolus of isotonic crystalloid for septic shock and 20 mL/kg fluid bolus of isotonic crystalloid over 5-20 minutes for anaphylactic shock; repeats as needed (with careful reassessment) to treat shock | | |
| Reassesses patient during and after each fluid bolus; stops fluid bolus if signs of heart failure develop (ie, if vital signs fail to improve, respiratory distress worsens, hepatomegaly or rales/ crackles develop) | | |
| Directs initiation of vasoactive drug therapy within first hour of care for fluid-refractory shock | | |
| Directs reassessment of patient in response to treatment | | |
| Directs early administration of antibiotics (within first hour after shock is identified) | | |
| Case Conclusion/Debriefing | | |
| States therapeutic end points during shock management | | |
| <i>If the student does not verbalize the above, prompt the student with the following question: "What are the therapeutic end points during shock management?"</i> | | |

STOP TEST

| Instructor Notes | | |
|--|---|---|
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist Shock Case Scenario Cardiogenic Shock



American Heart
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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|---|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs administration of 100% oxygen | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Identifies signs and symptoms of cardiogenic shock | | |
| Categorizes as compensated or hypotensive shock | | |
| Directs establishment of IV or IO access | | |
| Directs slow administration of a 5 to 10 mL/kg fluid bolus of isotonic crystalloid over 10 to 20 minutes and reassesses patient during and after fluid bolus; stops fluid bolus if signs of heart failure worsen (ie, if vital signs fail to improve, respiratory distress worsens, hepatomegaly or rales/crackles develop) | | |
| Directs reassessment of patient in response to treatment | | |
| Recognizes the need to obtain expert consultation from pediatric cardiologist | | |
| Identifies need for inotropic/vasoactive drugs during treatment of cardiogenic shock | | |
| <p><i>If the student does not indicate the above, prompt the student with the following question: "What are the indications for inotropic/vasoactive drugs during cardiogenic shock?"</i></p> | | |
| Case Conclusion/Debriefing | | |
| States therapeutic end points during shock management | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question: "What are the therapeutic end points during shock management?"</i></p> | | |

STOP TEST

| | | |
|--|---|---|
| Instructor Notes | | |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario

Testing Checklist

Cardiac Case Scenario

Supraventricular Tachycardia



American Heart
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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Directs administration of supplemental oxygen | | |
| Identifies narrow-complex tachycardia (ie, SVT with adequate perfusion) and verbalizes how to distinguish between ST and SVT | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question: "How do you distinguish between ST and SVT?"</i></p> | | |
| Directs performance of appropriate vagal maneuvers | | |
| Directs establishment of IV or IO access | | |
| Directs preparation and administration of appropriate doses (first and, if needed, second) of adenosine | | |
| States the rationale for the strong recommendation for expert consultation before providing synchronized cardioversion if the stable child with SVT fails to respond to vagal maneuvers and adenosine | | |
| Directs or describes appropriate indications for and safe delivery of attempted cardioversion at 0.5-1 J/kg (subsequent doses increased by 0.5-1 J/kg, not to exceed 2 J/kg) | | |
| Performs reassessment of patient in response to treatment | | |
| Case Conclusion/Debriefing | | |
| Discusses indications and appropriate energy doses for synchronized cardioversion | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following question: "What are the indications and appropriate energy doses for synchronized cardioversion?"</i></p> | | |

STOP TEST

| | | |
|--|---|---|
| Instructor Notes | | |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist Cardiac Case Scenario Bradycardia



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|---|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Directs assessment of airway, breathing, circulation, disability, and exposure, including vital signs | | |
| Identifies bradycardia associated with cardiopulmonary compromise/failure | | |
| Directs initiation of bag-mask ventilation with 100% oxygen | | |
| Directs application of cardiac monitor and pulse oximetry | | |
| Reassesses heart rate and systemic perfusion after initiation of bag-mask ventilation | | |
| Recognizes indications for high-quality CPR (chest compressions plus ventilation) in a bradycardic patient | | |
| <p><i>If the student does not indicate the above, prompt the student with the following question: "What are the indications for high-quality CPR in a bradycardic patient?"</i></p> | | |
| Directs establishment of IV or IO access | | |
| Directs or discusses preparation for and appropriate administration and dose (0.01 mg/kg IV/IO [0.1 mg/kg concentration]) of epinephrine | | |
| Performs reassessment of patient in response to treatment | | |
| Case Conclusion/Debriefing | | |
| Verbalizes consideration of 3 potential causes of bradycardia in infants and children | | |
| <p><i>If the student does not verbalize the above, prompt the student with the following statement: "Tell me 3 potential causes of bradycardia in infants and children."</i></p> | | |

STOP TEST

| | | |
|--|---|---|
| Instructor Notes | | |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |

PALS Case Scenario Testing Checklist Cardiac Case Scenario Asystole/PEA



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|--|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Identifies cardiac arrest | | |
| Directs immediate initiation of high-quality CPR, and ensures performance of high-quality CPR at all times | | |
| Directs placement of pads/leads and activation of monitor/defibrillator | | |
| Identifies asystole or PEA | | |
| Directs establishment of IO or IV access | | |
| Directs preparation and administration of appropriate dose of epinephrine at appropriate intervals | | |
| Directs checking rhythm approximately every 2 minutes while minimizing interruptions in chest compressions | | |
| Case Conclusion/Debriefing | | |
| Verbalizes at least 3 reversible causes of PEA or asystole | | |
| <i>If the student does not verbalize the above, prompt the student with the following statement: "Tell me at least 3 reversible causes of PEA or asystole."</i> | | |

STOP TEST

| |
|--|
| Instructor Notes |
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). |
| Test Results Check PASS or NR to indicate pass or needs remediation: <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ Instructor Number _____ Date _____ |

PALS Case Scenario Testing Checklist Cardiac Case Scenario VF/Pulseless VT



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Student Name _____ Date of Test _____

| Critical Performance Steps | | Check if done correctly |
|---|--|--------------------------------|
| Team Leader | | |
| Assigns team member roles | | |
| Uses effective communication throughout | | |
| Patient Management | | |
| Identifies cardiac arrest | | |
| Directs immediate initiation of high-quality CPR, and ensures performance of high-quality CPR at all times | | |
| Directs placement of pads/leads and activation of monitor/defibrillator | | |
| Identifies VF or pulseless VT cardiopulmonary arrest | | |
| Directs safe performance of attempted defibrillation at 2 J/kg | | |
| After delivery of every shock, directs immediate resumption of CPR, beginning with chest compressions | | |
| Directs establishment of IO or IV access | | |
| Directs preparation and administration of appropriate dose of epinephrine at appropriate intervals | | |
| Directs safe delivery of second shock at 4 J/kg (subsequent doses 4-10 J/kg, not to exceed 10 J/kg or standard adult dose for that defibrillator) | | |
| Directs preparation and administration of appropriate dose of antiarrhythmic (amiodarone or lidocaine) at appropriate time | | |
| Case Conclusion/Debriefing | | |
| Verbalizes possible need for additional doses of epinephrine and antiarrhythmic (amiodarone or lidocaine), and consideration of reversible causes of arrest (H's and T's) | | |
| <i>If the student does not verbalize the above, prompt the student with the following question: "If VF persists despite the therapies provided, what else should you administer or consider?"</i> | | |

STOP TEST

| Instructor Notes | | |
|--|---|---|
| <ul style="list-style-type: none"> Place a check in the box next to each step the student completes successfully. If the student does not complete all steps successfully (as indicated by at least 1 blank check box), the student must receive remediation. Make a note here of which skills require remediation (refer to instructor manual for information about remediation). | | |
| Test Results | Check PASS or NR to indicate pass or needs remediation: | <input type="checkbox"/> PASS <input type="checkbox"/> NR |
| Instructor Initials _____ | Instructor Number _____ | Date _____ |