



GLOBAL EMERGENCY MEDICAL REGISTRY

Splinting (Long Bone Immobilization) Skill Documentation Form

Candidate (Print): _____ Date: _____

Examiner (Instructor or Licensed Provider): _____

Examiner Signature: _____

Pass _____ Fail _____

Task:	Correct	Incorrect
Directs application of manual stabilization of the injury		
Assesses distal motor, sensory and circulatory functions in the injured extremity <i>(Examiner states circulatory and sensory function intact)</i>		
Measures the splint		
Applies splint (per manufacturer recommendations)		
Immobilizes the joint above the injury site		
Immobilizes the joint below the injury site		
Secures the entire injured extremity		
Immobilizes the hand/foot in the position of function		
Assesses distal motor, sensory and circulatory functions in the injured extremity <i>(Examiner states circulatory and sensory function intact)</i>		

Critical Failure Criteria	
	Failure to immediately stabilize the extremity manually
	Grossly moves the injured extremity
	Failure to immobilize the joint above and the joint below the injury site
	Failure to immobilize the hand or foot in a position of function
	Failure to reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting
	Failure to manage the patient as a competent healthcare provider
	Exhibits unacceptable affect with patient or other personnel
	Uses or orders a dangerous or inappropriate intervention
	Failure to complete immobilization within 15 minutes

NOTE: The “patient” should be supine or reclined, and the candidate may have up to one “assistant” to perform this skill and full immobilization supplies.

NOTE: You must factually document any “incorrect” or critical failure criteria on back of this form