



GLOBAL EMERGENCY MEDICAL REGISTRY

Obtaining Respiratory Rate Skill Documentation Form

Candidate (Print): _____ Date: _____

Examiner (Instructor or Licensed Provider): _____

Examiner Signature: _____

Pass _____ Fail _____

Task	Correct	Incorrect
Dons appropriate PPE and explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible		
Watches patient breathing, effort, and chest rise		
Count respirations for 30 seconds		
Multiples counted respirations by two (2) to estimate current respiratory rate per minute		
Record rate and effort		

Critical Failure Criteria

Failure to complete within 40 second time limit
Failure to take appropriate PPE precautions
Contaminates equipment or site without appropriately correcting the situation
Failure to manage the patient as a competent provider
Exhibits unacceptable affect with patient or other personnel
Uses or orders a dangerous or inappropriate intervention

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