



Immobilization Skills – Traction Splint

Random
Station #:

Date: ___/___/___ Test Site Location: _____

Candidate's Name: _____ #: _____ End Time: _____

Evaluator's Name: _____ Start Time: _____

Total Time: _____

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Candidate takes manual stabilization of the injured leg	1	
Directs assessment of motor, sensory and circulatory function of the injured extremity	1	
Note: The evaluator acknowledges "motor, sensory and circulatory function are present and normal"		
Directs application of the ankle hitch	1	
Directs the application of manual traction	1	
Candidate prepares/adjusts splint to proper length using uninjured leg	1	
Candidate positions the splint next to the injured leg	1	
Candidate applies splint and ischial strap	1	
Candidate applies mechanical traction	1	
Candidate secures the leg to the splint	1	
Candidate re-evaluates that ischial strap and ankle hitch are secure	1	
Candidate reassesses motor, sensory and circulatory function in the injured extremity	1	
Note: The evaluator acknowledges "motor, sensory and circulatory function are present and normal"		
Note: The evaluator must ask the candidate how he/she would prepare the patient for transportation		
Verbalizes securing the torso to the long board to immobilize the hip	1	
Verbalizes securing the splint to the long board to prevent movement of the splint	1	
TOTAL:	14	

Critical Criteria: (You must thoroughly explain your reason for checking any critical criteria on the back of this sheet)

- 161- Directs or causes a loss of traction at any point after it was applied
- 162- Did not assess motor, sensory and circulatory function in the injured extremity prior to and after splinting
- 163- The foot was excessively rotated or extended after splint was applied
- 164- Did not secure the ischial strap before applying mechanical traction
- 165- Final immobilization failed to support the femur or prevent rotation of the injured leg
- 166- Did not obtain 11 or more points

□P □F

OEMS Examiner Review Initials: _____
Bubble 7 on Scanform if Failed