



Emergency Medical Technician Psychomotor Examination  
Traction



Candidate: \_\_\_\_\_ Examiner: \_\_\_\_\_

Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Takes or verbalizes appropriate body substance isolation	1	
Directs application of manual stabilization of the injury	1	
Directs the application of manual traction	1	
Assesses distal motor, sensory, and circulatory functions in the injured extremity	1	
<b>NOTE : The examiner acknowledges, Motor, Sensory, and Circulatory functions present and normal</b>		
Prepares/adjusts splint to the proper length	1	
Positions the splint next to the injured leg		
Applies the proximal securing device (e.g. ischial strap)	1	
Applies the distal securing device (e.g. ankle hitch)	1	
Applies mechanical traction	1	
Positions/secures the support straps	1	
Re-evaluates the proximal/distal securing devices	1	
Reassess the distal motor, sensory, and circulatory functions in the injured extremity	1	
<b>NOTE : The examiner acknowledges, Motor, Sensory, and Circulatory functions present and normal</b>		
<b>Note: The examiner must ask the candidate how he/she would prepare the patient for transportation</b>		
Verbalizes securing the torso to the long bone board to immobilize the hip	1	
Verbalizes securing the splint to the long board to prevent movement of the splint	1	
<b>TOTAL</b>	<b>14</b>	

Critical Criteria

- \_\_\_\_\_ Loss of traction at any point after it was applied
- \_\_\_\_\_ Did not reassess motor, sensory and circulatory function in the injured extremity before and after splinting
- \_\_\_\_\_ The foot was excessively rotated or extended after splint was applied
- \_\_\_\_\_ Did not secure the ischial strap before taking traction
- \_\_\_\_\_ Final immobilization failed to support the femur or prevent rotation of the injured leg
- \_\_\_\_\_ Secured the leg to the splint before applying mechanical traction
- \_\_\_\_\_ Exhibits unacceptable affect with patient or other personnel
- \_\_\_\_\_ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on this form in the space below

CANDIDATE NAME:	COMMENTS:

Evaluators Signature \_\_\_\_\_

**Note:** If the Sagar splint or the Kendricks Traction Device is used without elevating the patient's leg, application of manual tractions is not necessary. The candidate should be awarded one (1) point as if manual traction were applied

**Note:** If the leg is elevated at all, manual traction must be applied before elevating the leg. The ankle hitch may be applied before elevating the leg and used to provide manual traction.