

See back of form for instructions for completion

1a. Name as shown on EMT-I Certificate	1b. Certificate Numb	er
	To. Continuato Name	GI
1c. Certifying Authority	•	
Skill	Verification of Competency	
1. Patient examination, trauma patient;	Affiliation	Date
*0		
Signature of Person Verifying Competency	Print Name	Certification / License Number
2. Patient examination, medical patient	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
3. Airway emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
4. Breathing emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
5. AED and CPR	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
6. Circulation emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
7. Neurological emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
8. Soft tissue injury	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
9. Musculoskeletal injury	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number
10. Obstetrical emergencies	Affiliation	Date
Signature of Person Verifying Competency	Print Name	Certification / License Number

California Code of Regulations Title 22, Division 9, Chapter 2 Emergency Medical Technician

Section 100080

- (g) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be verified by direct observation of an actual or simulated patient contact. Skills competency shall be verified by an individual who is currently certified or licensed as an EMT, EMT-II, Paramedic, Registered Nurse, Physician's Assistant, or Physician and who shall be designated by an EMS approved training program (EMT training program, paramedic training program or CE provider) or an EMS service provider; EMS service providers include, but are not limited to public safety agencies, private ambulance providers and other EMS providers. Verification of skills competency shall be valid for a maximum of two (2) years for the purpose of applying for recertification. The skills requiring verification of competency are:
- (1) Patient examination, trauma patient
- (2) Patient examination, medical patient
- (3) Airway emergencies
- (4) Breathing emergencies
- (5) CPR and AED
- (6) Circulation emergencies
- (7) Neurological emergencies
- (8) Soft tissue injuries
- (9) Musculoskeletal injuries
- (10) Obstetrical emergencies