



Florida Department of Law Enforcement

# FIRST AID PERFORMANCE EVALUATION

Incorporated by Reference in Rule 11B-35.0024(3)(f)2., F.A.C.



CJSTC  
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1. AGENCY OR TRAINING SCHOOL NAME: \_\_\_\_\_ 2. CLASS NUMBER: \_\_\_\_\_

3. STUDENT'S PRINTED NAME: \_\_\_\_\_ 4. STUDENT'S IDENTIFICATION NUMBER: \_\_\_\_\_

5. PROFICIENCY DEMONSTRATION NUMBER: FIRST ATTEMPT  OR SECOND ATTEMPT

6. THE STUDENT IS A: BASIC RECRUIT STUDENT  OR INSTRUCTOR STUDENT

7. BASIC RECRUIT STUDENT PERFORMANCE REQUIREMENTS AND RE-TEST:

- **DEMONSTRATION OF PROFICIENCY:** Once testing on a proficiency skill has begun, no additional training, assistance, or practice is allowed on that proficiency skill. A basic recruit student shall demonstrate all the required First Aid High Liability Proficiency Skills at 100% to receive a passing score with the results recorded on this form.
- **WRITTEN END-of-Course Examination:** A basic recruit student shall achieve a score of no less than 80% on the required written end-of-course examination.
- **RETEST:** A basic recruit student shall be given the opportunity for one additional attempt at the required demonstration of first aid proficiency skills or one re-examination of required written end-of-course examination for the First Aid for Criminal Justice Officers.  
A basic recruit student, who has failed to pass the required written end-of-course examination or the required demonstration of proficiency after a second attempt, shall be deemed to have failed the First Aid for Criminal Justice Officers Course.

• **REMEDIAN PLAN ATTACHED:** YES

If a basic recruit student was not successful in the first attempt to demonstrate the required proficiency skills, attach a remediation plan. Student retesting shall be documented on this form. The basic recruit student is only required to retest in the proficiency requirements failed.

8. INSTRUCTOR STUDENT PERFORMANCE REQUIREMENTS:

- **DEMONSTRATION OF PROFICIENCY:** An instructor student is not required to demonstrate proficiency skills in CPR. Once testing on a proficiency skill has begun, no additional training, assistance, or practice is allowed on that proficiency skill. An instructor student shall demonstrate all the required First Aid High-Liability Proficiency Skills at 100% with the results recorded on this form. No retest allowed.
- **WRITTEN END-of-Course Examination:** An instructor student shall achieve a minimum score of no less than 85% on the first aid written end-of-course examination. No retest is allowed.

An instructor student who fails either the demonstration of proficiency or the written end-of-course examination shall be deemed to have failed the First Aid Instructor Course.

9. **INSTRUCTOR TO STUDENT RATIO:** For instruction of the First Aid for Criminal Justice Officers Course or First Aid Instructor Course, at least one Commission-certified First Aid Instructor shall be required for every ten students actively engaged in the practical and performance areas of the training. Instructors shall hold a current CPR Instructor Certification from an entity referenced in Rule 64J-1.022, F.A.C. **Actively engaged** is defined as "a student involved in the practical performance of any first aid skills training." For CPR instruction, follow the guidelines of your instructor's certifying agency affiliation instructor to student ratio.

10. DATE THE FIRST EVALUATION WAS COMPLETED: \_\_\_\_\_ DATE THE SECOND EVALUATION WAS COMPLETED: \_\_\_\_\_

11. FIRST AID DEMONSTRATION: FIRST ATTEMPT: PASS  OR FAIL   
SECOND ATTEMPT (BASIC RECRUIT ONLY): PASS  OR FAIL

12. WRITTEN END-OF-COURSE EXAMINATION:

- **WRITTEN EXAMINATION:** PASS  OR FAIL
- **WRITTEN EXAMINATION RETEST (BASIC RECRUIT ONLY):** PASS  OR FAIL

13. FAILURE OF COURSE:

- The basic recruit student has failed the First Aid for Criminal Justice Officers Course.
- The instructor student has failed the First Aid Instructor Course.

14. STUDENT'S SIGNATURE: \_\_\_\_\_ 15. DATE: \_\_\_\_\_

16. LEAD INSTRUCTOR'S PRINTED NAME: \_\_\_\_\_

17. AGENCY ADMINISTRATOR, TRAINING CENTER DIRECTOR, OR DESIGNEE'S PRINTED NAME: \_\_\_\_\_

18. AGENCY ADMINISTRATOR, TRAINING CENTER DIRECTOR OR DESIGNEE'S SIGNATURE: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

STUDENT IDENTIFICATION NUMBER: \_\_\_\_\_

AGENCY OR TRAINING SCHOOL: \_\_\_\_\_

CLASS NUMBER: \_\_\_\_\_

**EVALUATION:** Evaluate the student on each performance listed at the end of each lesson, unit, or at the end of the course. Instructor(s) shall mark the appropriate box for Pass (P) or Fail (F). Instructors shall print and sign their name for the performance(s) they observe and rate. Comments may be used at any time, but are required for a failure.

I. BODY SUBSTANCE ISOLATION (BSI)		
	DATE OF FIRST ATTEMPT: _____	DATE OF SECOND ATTEMPT: _____
1. Properly put on protective gloves, checking for correct size and defects.	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
2. Properly remove and dispose of contaminated protective gloves without contaminating self or others.	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
FIRST ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		COMMENTS
SECOND ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		
<b>II. CARDIOPULMONARY RESUSCITATION:</b> The required topics shall include foreign body airway obstruction, rescue breathing, and CPR on an adult, child, and infant, and shall include AED training. A basic recruit student is required to successfully complete CPR/AED training to pass the course. <b>DESIGNATED CPR ASSOCIATED STANDARDS.</b> The standards for performance for CPR are determined by the lead CPR instructor's affiliated certifying association guidelines from the American Heart Association (AHA), American Red Cross (ARC), American Safety & Health Institute (ASHI), or other entity referenced in the Department of Health Rule 64J-1.022, F.A.C. The lead CPR instructor's affiliated association shall set the CPR performance criteria and cognitive CPR examination. A <b>basic recruit student</b> who does not meet the designated association CPR standards shall not be permitted to take the end-of-course examination for the First Aid for Criminal Justice Officer Course.		
DATE: _____	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	_____ LEAD INSTRUCTOR'S PRINTED NAME _____ LEAD INSTRUCTOR'S SIGNATURE _____ _____ CPR INSTRUCTOR CERTIFICATION EXPIRATION DATE Instructors shall possess and maintain a valid CPR Instructor Certification from an entity referenced in Rule 64J-1.022, F.A.C. _____ CPR Certifying Entity
<b>III. PATIENT ASSESSMENT: USING PPE, PERFORM AN ASSESSMENT FOR:</b>		
	DATE OF FIRST ATTEMPT: _____	DATE OF SECOND ATTEMPT: _____
1. Scene size-up	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
2. LOC-AVPU	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
3. Airway	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
4. Breathing, including rate	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
5. Circulation, including pulse rate	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
6. Skin color and condition	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
7. Pupils	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
8. Physical assessment (DOTS/SAMPLE)	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
9. On-going assessment	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
FIRST ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		COMMENTS
SECOND ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		

STUDENT NAME: \_\_\_\_\_

STUDENT IDENTIFICATION NUMBER: \_\_\_\_\_

AGENCY OR TRAINING SCHOOL: \_\_\_\_\_

CLASS NUMBER: \_\_\_\_\_

IV. SHOCK: USING PPE, TREAT PATIENT FOR SHOCK BY:		
	DATE OF FIRST ATTEMPT: _____	DATE OF SECOND ATTEMPT: _____
1. Monitoring ABC's	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
2. Positioning patient properly	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
3. Maintaining normal body temperature	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
FIRST ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		COMMENTS
SECOND ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		
V. BLEEDING: USING PPE, CONTROL BLEEDING BY: PERFORM #1, #2, #3 AND ON #4 CHOOSE EITHER CHEST, NECK, OR ABDOMINAL		
	DATE OF FIRST ATTEMPT: _____	DATE OF SECOND ATTEMPT: _____
1. Direct pressure	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
2. Dressing/bandage	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
3. Tourniquet	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
4. Occlusive	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
<ul style="list-style-type: none"> <li>• Chest</li> <li>• Neck</li> <li>• Abdominal</li> </ul>	COMMENTS	COMMENTS
FIRST ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		COMMENTS
SECOND ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		
VI. Musculoskeletal and Soft Tissue Injures: Using PPE, perform emergency care for:		
	DATE OF FIRST ATTEMPT: _____	DATE OF SECOND ATTEMPT: _____
1. Splint and stabilize upper extremity	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
2. Splint and stabilize lower extremity	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
FIRST ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		COMMENTS
SECOND ATTEMPT: _____ INSTRUCTOR'S PRINTED NAME _____ INSTRUCTOR'S SIGNATURE _____		
VII. MOVING PATIENTS: PERFORM # 1, AND ONE OF THE FOLLOWING ON # 2 AND # 3		
	DATE OF FIRST ATTEMPT: _____	DATE OF SECOND ATTEMPT: _____
1. WALKING ASSIST	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
2. EMERGENCY DRAG: Using PPE, perform one of the following:	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>
<ul style="list-style-type: none"> <li>• One-person or Two-person Drag</li> <li>• Blanket Drag</li> <li>• Shoulder Drag</li> </ul>	COMMENTS	COMMENTS

STUDENT NAME: \_\_\_\_\_

STUDENT IDENTIFICATION NUMBER: \_\_\_\_\_

AGENCY OR TRAINING SCHOOL: \_\_\_\_\_

CLASS NUMBER: \_\_\_\_\_

3. EMERGENCY LIFT OR CARRY: Using PPE, perform one of the following:	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
<ul style="list-style-type: none"><li>• Two-person Extremity Lift</li><li>• SEAL Team 3 Carry</li></ul>	COMMENTS		COMMENTS	
FIRST ATTEMPT: _____	INSTRUCTOR'S PRINTED NAME		INSTRUCTOR'S SIGNATURE	
SECOND ATTEMPT: _____	INSTRUCTOR'S PRINTED NAME		INSTRUCTOR'S SIGNATURE	
<b>VIII. SPINAL CORD INJURIES: USING PPE, EVALUATE STUDENT WHILE AT THE PATIENT'S HEAD:</b>				
	DATE OF FIRST ATTEMPT: _____		DATE OF SECOND ATTEMPT: _____	
1. Apply manual stabilization to cervical spine	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
2. Perform log roll maneuver	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
FIRST ATTEMPT: _____	INSTRUCTOR'S PRINTED NAME		INSTRUCTOR'S SIGNATURE	
SECOND ATTEMPT: _____	INSTRUCTOR'S PRINTED NAME		INSTRUCTOR'S SIGNATURE	
COMMENTS				