



CPR for the Healthcare Professional: Basic Life Support (BLS) Practical Skill Evaluation Form

Student Name: _____ Date: _____ Passed (Y/N)?: _____

*Place a check (✓) mark in deficient areas ONLY.	Adult	Child	Infant
Safety of the Scene and Individuals			
<i>Verbalizes and properly addresses safety of the scene</i>			
<i>Recognizes when a scene is unsafe</i>			
<i>Verbalizes and properly addresses safety of self, others and the victim</i>			
<i>Takes appropriate precautions (gloves, etc...)</i>			
Level of Responsiveness/Consciousness			
<i>Checks to see if the victim is conscious</i>			
<i>Verbalizes the victims level of responsiveness</i>			
<i>Places/Ensures the victim is in the appropriate position</i>			
Airway & Breathing			
<i>Properly opens the airway</i>			
<i>Assesses the airway for foreign objects</i>			
<i>Looks for breathing</i>			
<i>Listens for breathing</i>			
<i>Feels for breathing</i>			
<i>Provides the appropriate number of breaths</i>			
Circulation/Signs of Movement			
<i>Checks for a pulse</i>			
<i>Provides the appropriate number of chest compressions (if applicable)</i>			

**A score of 75% or higher is required in each age group to successfully pass the evaluation. A student cannot receive more than three (3) deficiencies in each area (e.g. adult, child or infant evaluated separately) to pass.

Instructor Name: _____ Signature: _____

