



**RESCUE TECHNICIAN PROFESSIONAL QUALIFICATION**  
**CHAPTER 7 SKILL STATION MENU**

**CONFINED SPACE RESCUE TECHNICIAN**

Technician Level I

B	AIR MONITORING AND VENTILATION- Tech I	MANDATORY STATION
D	ENTRY OPERATIONS- Tech I	MANDATORY STATION
E	VICTIM PACKAGING AND REMOVAL- Tech I	MANDATORY STATION
F	RESCUER REMOVAL AND TERMINATION- Tech I	MANDATORY STATION

Technician Level II

A	SCENE SIZE-UP AND INITIAL ACTIONS – Tech II	MANDATORY STATION
C	HAZARD CONTROL – Tech II	MANDATORY STATION
G	PREPLAN OF A CONFINED SPACE INCIDENT – Tech II	MANDATORY STATION

**TESTING REQUIREMENTS – 7 Stations**

**Technician Level I – B, D, E and F**

**Technician Level II – A, C, G**

<b>NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNICIAN LEVEL II STATION A- SCENE SIZE-UP AND INITIAL ACTIONS</b>	<b>Test Date</b>	<b>Candidate #</b>
	<b>Reference NFPA 1006 - (2008 Edition), Chapter 7 Mandatory Station JPR 7.2.2</b>	

**Directions:** You have been dispatched to the scene of a confined space emergency. For this exercise you are to conduct a size-up so that existing and potential conditions are evaluated within the space and the rescue area; witnesses are interviewed; hazards are identified and mitigated; the probability of victim existence, number, condition, and location is determined; potential for rapid non-entry rescues or victim self rescue is recognized; and a risk benefit analysis is performed

**Performance Outcome:** Pass/ Fail will be determined by 16 of the 16 items being performed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Establishes and utilizes an Incident Management System				
2.	Ensures proper use of Personal Protective Equipment (PPE).				
3.	Utilizes a personnel accountability system				
4.	Performs size-up using observations, victims, bystanders, entry				
5.	Establishes safe operating zones.				
6.	Appropriately places barricades or scene control tape to limit access				
7.	Implements appropriate atmospheric monitoring				
8.	Provides for ventilation of the space				
9.	Controls sources of hazardous energy within the space and surroundings				
10.	Identifies and safely controls all present and potential hazards				
11.	Determines all potential victim locations				
12.	Performs a risk/benefit analysis and evaluates rescue vs. recovery				
13.	Provides for non-entry and/or self rescue of victim				
14.	Evaluates rescue options				
15.	Identifies needed resources to accomplish rescue/recovery				
16.	Were all tasks completed in a SAFE manner? ("NO" indicates automatic failure				

PASS ____	PASS ____
FAIL ____	FAIL ____

**Evaluator**

**Comments:** \_\_\_\_\_

**Evaluator Signature:** \_\_\_\_\_

**Re-Test Evaluator Signature:** \_\_\_\_\_

**NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNCIAN LEVEL I**

<b>STATION B- AIR MONITORING AND VENTILATION</b>	<b>Test Date</b>	<b>Candidate #</b>
<b>Reference NFPA 1006 - (2008 Edition), Chapter 7 Mandatory Station JPR 7.1.1</b>	<b>Test Site</b>	

**Directions:** You have been dispatched to the scene of a confined space rescue incident. For this exercise you are to implement atmospheric monitoring, interpret the monitoring data, and establish ventilation in support of the rescue operation

**Performance Outcome:** Pass/ Fail will be determined by 12 of the 12 items being preformed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Ensures proper/continued use of Personal Protective Equipment (PPE).				
2.	Selects appropriate air-monitoring equipment				
3.	Checks and assures proper operation of selected equipment				
4.	Provides a fresh air set-up or zeroes monitor per the manufacturer's recommendations				
5.	Monitors general area of the confined space starting on the upwind side				
6.	Monitors atmosphere in space at appropriate levels				
7.	Records findings on entry permit or atmospheric monitoring log				
8.	Selects appropriate ventilation equipment				
9.	Assures proper operation of ventilation equipment				
10.	Properly establishes positive pressure ventilation of space				
11.	Continues to monitor atmosphere in space and record findings				
12.	Were all tasks completed in a SAFE manner? ("NO" indicates automatic failure				

<b>PASS</b> _____	<b>PASS</b> _____
<b>FAIL</b> _____	<b>FAIL</b> _____

**Evaluator Comments:** \_\_\_\_\_

**Evaluator Signature:** \_\_\_\_\_

**Re-Test Evaluator Signature:** \_\_\_\_\_

**NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNICIAN LEVEL II**

<b>STATION C - HAZARD CONTROL</b>	<b>Test Date</b>	<b>Candidate #</b>
<b>Reference NFPA 1006 - (2008 Edition), Chapter 7 Mandatory Station JPR 7.2.3, 7.2.2</b>	<b>Test Site</b>	

**Directions:** You are operating on the scene of a confined space rescue incident and have been given the assignment of isolating forms of hazardous energy (electrical, mechanical, pneumatic, hydraulic) in support of the rescue operation. You are to apply appropriate isolation techniques to the scenario presented utilizing the equipment provided.

**Performance Outcome:** Pass/ Fail will be determined by of the items being preformed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Ensures proper/continued use of Personal Protective Equipment (PPE).				
2.	Appropriately identifies sources of hazardous energy to be isolated				
3.	Selects appropriate equipment and/or techniques to isolate				
4.	Applies selected equipment or techniques to hazards so as to isolate/control hazards and render equipment/space safe in accordance with manufacturer’s directions or procedures  Equipment/Techniques Utilized (check as appropriate)  <ul style="list-style-type: none"> <li>- Lock-Out/Tag-Out _____</li> <li>- Double Block and Bleed _____</li> <li>- Misalignment _____</li> <li>- Blinding/Blanking _____</li> </ul>				
5.	Confirms that hazard(s) have been isolated				
6.	Informs Incident Commander when tasks are complete				
7.	Were all tasks completed in a SAFE manner? (“NO” indicates automatic failure				

<b>PASS</b> _____	<b>PASS</b> _____
<b>FAIL</b> _____	<b>FAIL</b> _____

**Evaluator Comments:** \_\_\_\_\_

**Evaluator Signature:** \_\_\_\_\_

**Re-Test Evaluator Signature:** \_\_\_\_\_

**NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNICIAN LEVEL I**

<b>STATION –D ENTRY OPERATIONS</b>	<b>Test Date</b>	<b>Candidate #</b>
<b>Reference NFPA 1006 - (2008 Edition), Chapter 7 Mandatory Station JPR 7.1.2 , 7.1.3</b>	<b>Test Site</b>	

**Directions:** You are operating on the scene of a confined space rescue incident and have been tasked with entering the space to perform the rescue operation. Functioning as a team you are to perform pre-entry medical screening of all entrants, determine rescuer suitability, properly don all related equipment, enter the confined space and locate the victim or victims

**Performance Outcome:** Pass/ Fail will be determined by 15 of the 15 items being preformed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Ensures proper/continued use of Personal Protective Equipment (PPE).				
2.	Pre-entry medical screening of rescuers performed to include baseline pulse, respiration, blood pressure measurement and general health				
3.	Rescuers not suitable for entry operations identified (if applicable).				
4.	Appropriate fall arrest/retrieval equipment selected and donned				
5.	Appropriate respiratory protection (SCBA, SABA) selected and donned				
6.	Communication plan and/or equipment identified				
7.	Emergency evacuation signal identified				
8.	Personal lighting equipment identified and utilized				
9.	Retrieval line attached to harness and running end secured outside				
10.	Pre-entry briefing performed				
11.	Appropriate point of entry selected				
12.	Opening negotiated and space entered without significant difficulty				
13.	Victim contacted and communication established.				
14.	Incident command notified of status				
15.	Were all tasks completed in a SAFE manner? (“NO” indicates automatic failure				

<b>PASS</b> _____	<b>PASS</b> _____
<b>FAIL</b> _____	<b>FAIL</b> _____

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**Evaluator Signature:** \_\_\_\_\_

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**NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNICIAN LEVEL I**

<b>STATION E – VICTIM ASSESSMENT, PACKAGING AND REMOVAL</b>	<b>Test Date</b>	<b>Candidate #</b>
<b>Reference NFPA 1006 - (2008Edition), Chapter 7 Mandatory Station JPR 7.1.6, 7.1.7, 7.1.8, 7.1.4</b>	<b>Test Site</b>	

**Directions:** You are operating on the scene of a confined space rescue incident and have made victim contact after initial entry operations. You are now tasked with assessing, treating as appropriate, packaging and removing the victim from the space

**Performance Outcome:** Pass/ Fail will be determined by 6 of the 6 items being performed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Ensures proper/continued use of Personal Protective Equipment				
2.	Patient contact made and communication established				
3.	Patient assessed for life threatening injuries				
4.	Appropriate treatment initiated based on patient's condition				
5.	Appropriate removal device or method selected				
6.	Patient packaged and immobilized as best possible given size and configuration of space				
7.	RRand configuration of space				
8.	or excessively aggravating injuries				
9.					
10.					
11.					
12.					

<b>PASS</b> ____	<b>PASS</b> ____
<b>FAIL</b> ____	<b>FAIL</b> ____

**Evaluator Comments:** \_\_\_\_\_

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**Re-Test Evaluator Signature:** \_\_\_\_\_

**NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNICIAN I**

<b>STATION F- RESCUER REMOVAL AND TERMINATION</b>	<b>Test Date</b>	<b>Candidate #</b>
<b>Reference NFPA 1006 - (2008 Edition), Chapter 7 Mandatory Station JPR 7.1.5</b>	<b>Test Site</b>	

**Directions:** You have just completed removal of a patient from a confined space rescue incident. For this portion of the exercise working as a team you are to remove all entrants from the space and properly terminate the incident.

**Performance Outcome:** Pass/ Fail will be determined by 12 of 12the items being preformed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Ensures proper/continued use of Personal Protective Equipment (PPE).				
2.	Maintains contact and communication with entrants.				
3.	Assures retrieval line/system is attached correctly and entrants are				
4.	Operates selected retrieval system correctly				
5.	Retrieval lines and air hoses managed during retrieval				
6.	All entrants removed from space and disconnected from retrieval system				
7.	Personnel and equipment decontaminated				
8	Patient information relayed to EMS personnel				
9	All equipment returned to state of readiness				
10	Space is secured and scene is rendered safe				
11	Confined space entry permit and/or other documentation completed				
12	Were all tasks completed in a SAFE manner? ("NO" indicates automatic failure				

<b>PASS</b> _____	<b>PASS</b> _____
<b>FAIL</b> _____	<b>FAIL</b> _____

**Evaluator Comments:** \_\_\_\_\_  
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**Evaluator Signature:** \_\_\_\_\_

**Re-Test Evaluator Signature:** \_\_\_\_\_

**NFPA 1006 - CHAPTER 7 SKILL PERFORMANCE CHECKLIST TECHNICIAN II**

<b>STATION G – PRE-PLAN A CONFINED SPACE INCIDENT</b>	<b>Test Date</b>	<b>Candidate #</b>
<b>Reference NFPA 1006 - (2008 Edition), Chapter 7 Mandatory Station JPR 7.2.1, 7.2.2</b>	<b>Test Site</b>	

**Directions:** Given a scenario involving an injured entrant pre-plan a confined space incident given applicable guidelines, regulations and preplan forms. Then use the pre-plan to assess the incident and identify rescue needs including additional resources.

**Performance Outcome:** Pass/ Fail will be determined by 10 of the 10 items being performed correctly

No.	Task Steps	Initial Test		Retest	
		Yes	No	Yes	No
1.	Site specific hazards and isolation methods are identified and documented				
2.	All ingress and egress types and locations are identified and documented				
3.	Draft/Draw a sketch of confined space				
4.	Resources are identified and documented				
5.	Appropriate PPE is identified				
6.	Risk benefit analysis is done				
7.	Interviews were conducted				
8.	Monitoring equipment identified				
9.	Rescue systems for entry and retrieval for rescuers and victims identified/evaluated.				
10.	Were all tasks completed in a SAFE manner? (“NO” indicates automatic failure				

<b>PASS</b> _____	<b>PASS</b> _____
<b>FAIL</b> _____	<b>FAIL</b> _____

**Evaluator Comments:** \_\_\_\_\_  
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**Evaluator Signature:** \_\_\_\_\_

**Re-Test Evaluator Signature:** \_\_\_\_\_