

CIVIL AIR PATROL RANGER PROGRAM FIELD MEDIC QUALIFICATION

CAPID	GRADE	NAME (LAST NAME, FIRST NAME, MI)		
HOME UNIT (XX-000)	COMPLETE MAILING ADDRESS		EMAIL ADDRESS	

First and foremost, ranger medical personnel maintain all necessary qualifications as a CAP Ground Team Member with additional emphasis on emergency medical care and support of team health and welfare. Only Senior medics and above may sign off on Field Medic administrative requirements, practical skills and PT requirements

Administrative Requirements- All certifications must have a current expiration date upon form submission.

Wright Brothers Award <i>(attach copy)</i>	CAPID	DATE	Ranger Second Class <i>(attach copy)</i>	CAPID	DATE
	SIGNATURE			SIGNATURE	
CAPF 101 GTM2 or Higher <i>(attach copy)</i>	CAPID	DATE	Adult CPR with AED <i>(attach copy)</i>	CAPID	DATE
	SIGNATURE			SIGNATURE	
Emergency Medical Responder Certification <i>(attach copy)</i>	CAPID	DATE	Completion of Field Medic Course	CAPID	DATE
	SIGNATURE			SIGNATURE	
Satisfactory Log book from field exercise including patient interaction documentation	CAPID	DATE			
	SIGNATURE				

PRACTICAL SKILLS

Emergency Medical Care

Perform patient assessment and complete vital signs for trauma, medical & pediatric patients	CAPID	DATE	Perform spinal immobilization and safe patient packaging	CAPID	DATE
	SIGNATURE			SIGNATURE	
Demonstrate proper ventilation of a patient using a pocket mask or BVM device	CAPID	DATE	Demonstrate proper splinting of extremity injuries	CAPID	DATE
	SIGNATURE			SIGNATURE	
Demonstrate/discuss use of suctioning and the insertion of oral and nasal airways	CAPID	DATE	Demonstrate ability to improvise 3 pieces of medical equipment	CAPID	DATE
	SIGNATURE			SIGNATURE	
Demonstrate/discuss 4 bleeding control methods and shock management	CAPID	DATE	Demonstrate/discuss oxygen delivery devices and portable oxygen systems	CAPID	DATE
	SIGNATURE			SIGNATURE	
Demonstrate good interpersonal skills and effective communication techniques	CAPID	DATE	Demonstrate ability to assess physical and emotional health of charges	CAPID	DATE
	SIGNATURE			SIGNATURE	
Demonstrate ability to teach preventative care at the team and individual level	CAPID	DATE			
	SIGNATURE				

Field Sanitation Demonstrate ability to utilize proper field sanitation practices for:

Water site selection and purification	CAPID	DATE	Food prep considerations	CAPID	DATE
	SIGNATURE			SIGNATURE	
Personal hygiene	CAPID	DATE	Latrine construction and management	CAPID	DATE
	SIGNATURE			SIGNATURE	
Vector Control	CAPID	DATE	Waste Disposal	CAPID	DATE
	SIGNATURE			SIGNATURE	

PHYSICAL FITNESS

30 sit ups in 2 minutes	CAPID	DATE	20 Push-Ups	CAPID	DATE
	SIGNATURE			SIGNATURE	
1 mile run in 10 minutes or less	CAPID	DATE	100 meter sprint with medical bag	CAPID	DATE
	SIGNATURE			SIGNATURE	
100 meter fireman's carry of person of like weight	CAPID	DATE			
	SIGNATURE				

Notes/Comments:**STANDARDIZATION AND EVALUATION SECTION USE ONLY**

I certify that the member has completed all requirements and is awarded the proficiency grade of Field Medic.

MEDICAL STAN/EVAL AUTHORIZED SIGNATURE

DATE