

Yakima County Fire District 5

Practical Skills Evaluation MSA G-1 Pack

NAME: _____ ID# _____ DATE: _____

VISUALLY INSPECT YOUR MASK FOR THE FOLLOWING:		COMMENTS
1.	Check Straps; Make sure they aren't broken/frayed, hardware is working properly	
2.	Check lens for scratches and marks	
3.	Head net is in good shape with no holes or tears	
4.	Make sure all rubber seal areas are in good shape with no tears or cracks	

NOTE: Personnel may use either the over-the-head method or the coat method of donning SCBA

SCBA DONNING

PERFORMANCE STEPS		ATTEMPTS	
		1	2
1.	Did candidate properly prepare & inspect SCBA		
2.	Did candidate open main cylinder valve to full open position, <i>Includes:</i>		
	a. Inspecting and verbalizing the air pressure reading		
	b. Verifying low air alarm operation, if operating, by verbalizing "Bell"		
	c. Verifying PASS device operation, if operating, by verbalizing "PASS"		
3.	Did candidate properly don SCBA backpack, chest strap is not mandatory		
4.	Did candidate properly don SCBA facepiece and hood, <i>Includes:</i>		
	a. Testing for adequate facepiece seal, if sealed, verbalizing "Seal"		
	b. Donning protective hood over head with no skin showing, verbalizing "Skin"		
5.	Did candidate properly insert regulator by placing on slide and insert to the "click"		
6.	Was candidate able to change heads up display to "always on" setting		
7.	Did candidate properly and completely don the SCBA within 60 seconds		
Donning Time			

SCBA EMERGENCY PROCEDURES (Requires two personnel)

PERFORMANCE STEPS		ATTEMPTS	
		1	2
1.	Was candidate able to locate and operate SCBA bypass valve		
	a. Communicating to partner		
2.	Was candidate able to perform filter breathing procedures, <i>Includes:</i>		
	a. Communicating to partner		
	b. IN ORDER: remove glove; remove regulator; cover & seal port OR		
	c. Pull the bottom of hood up and over the regulator opening,		
3.	Was candidate able to operate their PASS device manually, <i>Includes:</i>		
	a. Communicating to partner – when accessible		
4.	Was candidate able to breathe directly from regulator (Facepiece Failure)		
	a. Did candidate communicate to partner		
	b. Was candidate able to exhale through nose while maintaining a seal		

Comments: _____

DOFF AND PLACE SCBA IN-SERVICE PROCEDURES

PERFORMANCE STEPS		ATTEMPTS	
		1	2
1.	Did candidate properly doff SCBA following use, <i>Includes:</i>		
	a. Securing regulator in waist strap mount		
	b. Fully extending waist and shoulder straps		
	c. Properly bleed off air and turn off the PASS device		
2.	Did candidate demonstrate the ability to properly place SCBA in-service		
	a. Did they ensure that all straps were fully extended		
	b. Were they able to replace a low cylinder (below 4000 psi)		
	c. Did they slowly bleed off air pressure to test the low air alarm		
	d. Did they ensure that all valves were positioned correctly		
	e. Did they properly inspect, clean, and service the regulator		
	f. Did they properly restore regulator to waist mount		
	g. Did they perform a complete visual inspection of SCBA		
	h. Did they clean SCBA – clean, sanitize, and dry facepiece		
	i. Were they able to properly store SCBA on apparatus		

Comments: _____

Evaluator: _____ Date: _____

Student Signature: _____ Date: _____