

Republic of the Philippines
Department of Education
REGION IV-A CALABARZON



ESSD-RM-2025-623

15 August 2025

Regional Memorandum

No. 623 s. 2025

ADDENDUM TO REGIONAL MEMORANDUM NO. 288 S. 2025

To **Schools Division Superintendents**

1. Relative to Regional Memorandum No. 288, s. 2025¹, this Office, through the Education Support Services Division, informs the Schools Division Offices that the date for the 2025 Regional Disaster Risk Reduction and Management Olympics is moved to September 27, 2025; 7:00 AM, and the venue is Alcala Sports Complex, Quezon.
2. Attached are the comprehensive event mechanics for the Fire Hose relay, Bucket relay, and BLS and rescue Olympics for information and proper guidance. Refer to Enclosure B.
3. SDO participants who will travel on September 26, 2025, due to long travel time may avail of overnight accommodation at the billeting area of Quezon Science High School. They are expected to bring their own beddings, and only dinner will be served to the delegates.
4. SDO Participants that will arrive on the day of the event are advised to proceed directly to the venue, Alcala Sports Complex, Quezon.
5. Division DRRM Focal and Administrative Support II shall be the members of Technical Working Group, and are expected to be at the venue on September 26, 2025 at 1:00 PM, for Physical arrangements and other necessary preparations. Refer to Enclosure A.
6. Permanent personnel are entitled to Compensatory Time-Off for attending in this activity, while COS (AS II) of the Division may file for overtime compensation, subject to the approval of the Schools Division Superintendent.
7. All other provisions stated in the previous memorandum remain in effect.
8. Travel and other incidental expenses shall be charged to DRRM local funds subject to the usual auditing and accounting rules and regulations.

¹ 2025 Regional Disaster Risk Reduction and Management Olympics



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Certificate No. PHP QMS
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9. For more details, contact Wilbert C. Ulpindo, PDO II of the Education Support Services Division at (02) 8682-2114 loc 430 or email essd.calabarzon@deped.gov.ph.

10. Immediate dissemination of this Memorandum is desired.


ATTY. ALBERTO T. ESCOBARTE, CESO II
Regional Director 

03/ROE6

ENCLOSURE A: Technical Working Group and Working Committees**ADMINISTRATIVE COMMITTEE**

	Designation	Name	Position
1.	Chairperson	Atty. Alberto T. Escobarte	Regional Director
2.	Vice Chairperson	Loida T. Nidea	Asst. Regional Director
3.	Executive Officer	Eduarda M. Zapanta	Chief, ESSD
4.	Deputy Executive Officer	Juanito A. Merle	Chief, SGOD Quezon
5.	Asst. Deputy Executive Officer	Wilbert C. Ulpindo	PDO II - DRRM
6.	Associate Deputy Executive Officer	Arvin P. Repaso	PDO II – SDO Quezon

REGISTRATION, PROGRAMS AND AWARDS COMMITTEE

	Designation	Name	SDO/Office
	Chairperson	Wilbert C. Ulpindo	Regional Office
	Vice Chairperson	Arvin P. Repaso	Quezon
7.	Member	Trisha Mae M. Josef	Regional Office
8.	Member	Lealyn C. Sanita	Regional Office
9.	Member	Marivic P. Pedrialva	Regional Office

LOGISTICS AND FOOD COMMITTEE

	Designation	Name	SDO/Office
10.	Chairperson	Preciosa Marie T. Alba	Lucena City
11.	Vice Chairperson	Ariel T. Cabuyao	Tayabas City
12.	Member	Carol E. Delos Santos	Laguna
13.	Member	Armida E. Quindara	Bacoor City
14.	Member	Edellyn H. Jamilan	Calaca City

GAME MANAGEMENT COMMITTEE

First Aid and Life Support Relay			
	Designation	Name	SDO/Office
15.	Chairperson Facilitator	Jesselle Mark P. Reyes	Cavite
16.	Vice Chairperson Facilitator	Jeremiah Oliver P. Arciaga	Dasmariñas City
17.	Co-facilitator	Anthony D. Bungay	Imus City
18.	Co-facilitator	Lea Imelda E. Ibayán	Santa Rosa City

Fire Hose Relay			
	Designation	Name	SDO/Office
19.	Chairperson Facilitator	Manfredo Z. Guitang	San Pablo City
20.	Vice Chairperson	Noel C. Meriño	Antipolo City

	Facilitator		
21.	Co-facilitator	James Angelo T. Año	Batangas
22.	Co-facilitator	Ariel DP. Antonio	Calamba City

Bucket Relay

	Designation	Name	SDO/Office
23.	Chairperson Facilitator	Raymund P. Bautista	Lipa City
24.	Vice Chairperson Facilitator	Caren Joy B. Zerna	Cavite City
25.	Co-facilitator	Henry C. Ramirez	Batangas City
26.	Co-facilitator	Jomar D. Flores	Cabuyao City

Documentation

	Designation	Name	SDO/Office
27.	Chairperson Facilitator	Jerome Q. Jasa	San Pedro City
28.	Vice Chairperson Facilitator	Adriane R. Aragon	Quezon
29.	Co-facilitator	June Ruel E. Magallon	Tanauan City
30.	Co-facilitator	Richard P. Duque	General Trias City
31.	Co-facilitator	Arlen Dean H. Adams	Sto. Tomas City

UMPIRE

	Designation	Name	SDO/Office
	Chairperson Facilitator	Trisha Mae M. Josef	Regional Office
32.	Vice Chairperson Facilitator	Dominic Jenel C. Dela Rosa	Antipolo City
33.	Member	Jericho D. Andal	Batangas
34.	Member	Jim Carlon R. Ambayec	Biñan City
35.	Member	Erica Shaina Castor	Cabuyao City
36.	Member	Ian Wilton C. Baybay	Cavite
37.	Member	Ma. Karla Danica C. Viray	Dasmariñas City
38.	Member	Myke Darylle P. Averion	Laguna
39.	Member	Mirasol L. Mendoza	Lipa City
40.	Member	Mark Angelo A. Villabroza	Lucena City
41.	Member	Ralph Angelo E. Gallardo	Quezon
42.	Member	John Marfred C. Samonte	Rizal
43.	Member	Ian Samuel R. Delos Santos	Sto. Tomas City
44.	Member	Windel M. Ibarrientos	Tanauan City

SECURITY, SAFETY, AND EMERGENCY RESPONSE COMMITTEE

	Designation	Name	SDO/Office
	Chairperson	Arvin P. Repaso	Quezon
45.	Vice Chairperson	Jon Daryl D. Espiritu	Rizal
	Members	All PDO II	

ENCLOSURE B. DRRM Olympics – Game Mechanics**EVENT MECHANICS**

(adopted from the Bureau of Fire and Quezon Province PDRRMO)

1. FIRE HOSE RELAY**TEAM COMPOSITION**

Each team shall consist of the following members: (Must be G11-G12 of two males and two females)

- 2 Hose Handlers
- 1 Nozzle Handler
- 1 Engine Operator

TEAM RESPONSIBILITIES**Hose Handlers**

- Lay out and couple two (2) **50-foot** fire hoses, to be laid out 45 ft and 25 ft from the starting point consecutively.
- Ensure that **proper techniques** in laying, rolling, and coupling the hoses are observed.

Nozzle Handler

- Attach the **nozzle** securely to the coupled hoses.
- **Fire water at the target**, following the correct sequence and timing, and with backup.

Engine Operator

- Operate the fire truck's water valve. (with the guidance of the official firefighter – BFP)
- Ensure **controlled opening and closing** of the valve as needed during the task.

GAME MECHANICS

1. **Start Signal**
 - One (1) whistle will signal the official start of the event.
2. **Sequence of Tasks**
 - The event begins with donning a complete fire suit (Helmet, trousers, bunker, Fire Boots). Ensure all players wear long socks
 - This is followed by hose laying, target hitting, hose rolling, and restoring all PPE and equipment to their original positions, replicating the start setup.
3. **Target Hitting**
 - The nozzle man must hit the designated targets **consecutively and in the correct sequence** (25ft from the designated line of nozzle man), open the nozzle once back-up is in position, and visor down.
4. **Water Supply Requirement**
 - The engine operator must maintain a water pressure between **85 to 100 PSI** throughout the event, assisted by the BFP.
5. **Safety and Error Protocol**
 - The umpire has the authority to **stop the event** if a team commits **three consecutive errors** or engages in **unsafe procedures**.
6. **End Signal**
 - The event concludes when the umpire blows the one (1) whistle to signal a stop in time.

GENERAL RULES**1. Start and End Signal**

The game shall officially start and end with one (1) whistle.

2. **Point System**

Scoring shall be based on:

- Speed
- Approach
- Proper use and handling of medical equipment
- Correct execution of techniques

Points may be added or deducted based on the specific event rules and regulations.

3. **Preparation Time**

Each team will be given **5 minutes** for preparation before their performance.

4. **Task Time & Penalties**

- Each team has **5 minutes** to complete the assigned task.
- Errors and infractions will incur a **10-second penalty** per incident and per individual, to be added to the team's final time.
- Specific errors and infractions will be explained during the participant orientation.

5. **Team Standing**

Final standings will be determined by:

- The team's clock performance (completion time)
- Penalties imposed by the Tournament Event Judges

6. **Coach/Adviser Role**

- The official team coach/adviser is allowed inside the playing area **only during their team's turn**.
- They may **give verbal guidance and instructions only** and must **not physically assist** players or interact with any equipment or personnel.
- Any violation will result in penalties.

7. **Tie-Breaker**

In the event of a tie, **game umpires from the Bureau of Fire Protection** will review:

- Scores
- Errors
- Execution
- Safety practices

The **umpires' decision is final**.

8. **Proper Conduct**

Participants must exhibit proper conduct and discipline **before, during, and after** the competition.

9. **Camaraderie and Sportsmanship**

Participants are encouraged to practice **camaraderie and sportsmanship**.

Limit protests or complaints; the event's primary aim is **education over competition**.

10. **Non-Playing Participants**

Non-playing individuals must stay **behind the designated line**.

Each violation will incur a **20-second penalty per individual**, added to the team's clock.

11. **Unsportsmanlike Behavior**

Unsportsmanlike conduct by any team member will result in a **10-second penalty per infraction**, added to the team's clock performance.

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12. Disqualification

Any unruly or undisciplined player may be disqualified at the discretion of the **Tournament Chairman**, subject to **Regional Committee review**.

PENALTIES

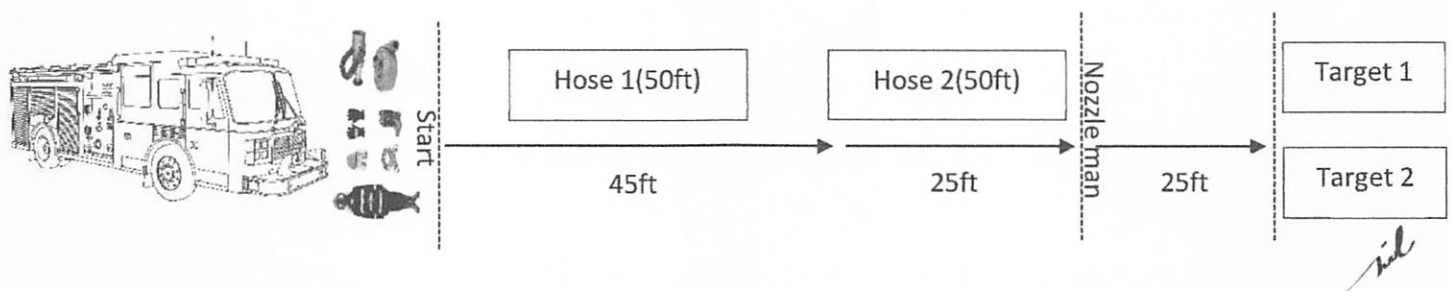
A **ten (10) seconds penalty** shall be added to the team's actual performance time for each of the following infractions:

1. Exceeded the allowable preparation time – +60 seconds
2. Unofficial adjustment of throttle – +60 seconds
3. Exceeded the five (5) minutes maximum playing time
 - o The committee shall stop the team's performance.
 - o Maximum Penalty: Performance is stopped and considered equivalent to 5 minutes.
4. Stepping on the line
5. False start or beginning before the official "GO SIGNAL"
6. Dropping of nozzle, fire hose couplings, or personal protective equipment during or before the end of the performance
7. Improper placement of hose or coupling connections outside the marked area
8. No assistance provided behind the nozzle man before both fire targets are hit
9. Nozzle man goes beyond the marked area
10. Improper DONING of PPE (unattached Velcro, straps, and the like)
11. Fail to place the vizor down during firefighting
12. Official Team Coach assists players by physically holding/touching personnel, equipment, or accessories

FIRE SUIT AND MATERIALS



OVERVIEW



2. BUCKET RELAY

TEAM COMPOSITION

Each team shall consist of the following members: (Must be G7-G10 of four males and four females)

TEAM RESPONSIBILITIES

1. Shooter – The individual stationed at the front whose task is to transfer water from the pail into the designated drum, ensuring it is filled within the specified time limit.
2. Runner – Responsible for retrieving empty pails from the front area to refill.
3. Scooper – Member of the team who is situated on the last line, responsible for filling the empty pail with water and passing it on to their team.

GAME MECHANICS

1. **Start Signal**
 - One (1) whistle will signal the official start of the event.
2. **Sequence of Tasks**
 - The event shall commence in two phases that shall be completed within 1 minute.
 - Phase 1, all team members shall take a bucket, fill it with water, and throw it inside the designated drum.
 - Phase 2, bucket relay, all members shall line up from the scooper to the thrower, assisted by the bucket runners.
3. **End signal**
 - The event concludes when the umpire blows one (1) whistle to signal a stop in time.

GENERAL RULES

1. One (1) minute performing time shall be given for each team to perform both phases and water transfer from a water-filled fire drum to an empty fire drum with the use of ten (10) construction buckets.
2. When the tournament official signals “GO” (**by a WHISTLE**),
 - a. The players should run to get the empty buckets then.
 - b. Fill the bucket with water from the drum.
 - c. Each member will throw away the water from the bucket into the empty drum at a distance of 5 ft and place down the bucket.
 - d. The players should position themselves to perform the relay operation, with one (1) or two (2) assigned as bucket runners.
 - e. Transfer the buckets filled with water in sequential order.
3. Once the time signals “STOP”, only **one (1) pail** from the last man shall be allowed to be poured.
4. The level of water transferred to the empty drum shall be measured using a meter stick (Metric Measurement).
5. The SDO may opt to provide fir boots to their participants.

PENALTIES

Penalties of two [5] centimeters of water shall be deducted for every infraction committed by every player of the team:

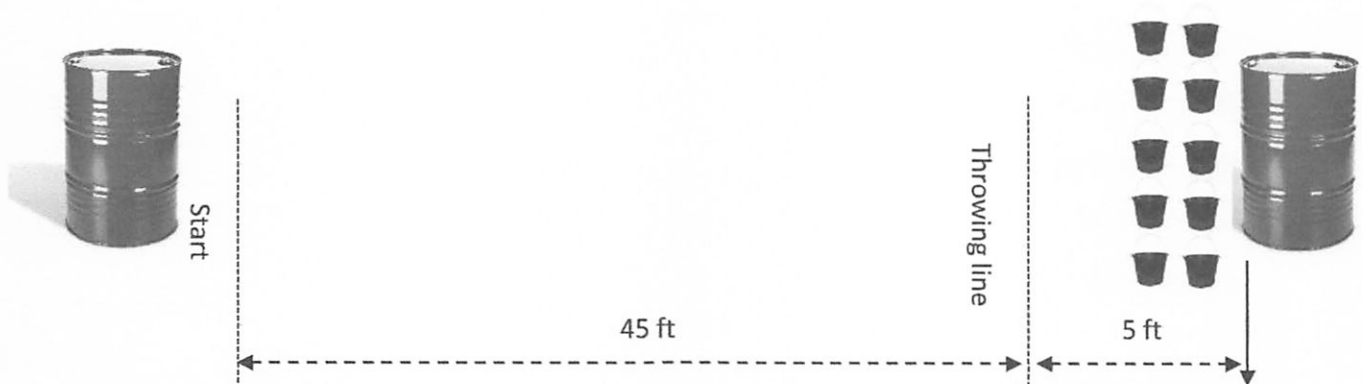
- a. False starting or running ahead of time before the tournament official declares the GO signal “by a WHISTLE” per team member.

- b. Throwing of a bucket [with or without water] inside the drum.
- c. A maximum of **two (2) runners** is allowed to return the used buckets; otherwise, a penalty shall be imposed per additional runner.
- d. Wrong sequence (**bypass**)
- e. Dropping and accidental falling of bucket/s
- f. Stepping on the line at the marked throwing area
- g. The highest level of water transferred, after the imposition of the penalty, shall be declared the winner.

MATERIALS



OVERVIEW



3. BASIC FIRST AID AND RESCUE OLYMPICS

TEAM COMPOSITION

- Team coach - One (1)
- Players (Grade 7-10, One (1) per level equal number of males and females) - Four (4)

PROPOSED ACTIVITIES

The Rescue Olympics will consist of several stations or challenges, each simulating a specific emergency scenario. Sample activities include:

- Basic First Aid Relay – Learners demonstrate CPR, wound dressing, bandaging, and splinting
- Safe transport of the patient.

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- Emergency Communication Task – Learners relay critical information

FIRST AID AND RESCUE STATIONS

All participating teams will undergo a series of skill-based stations designed to test emergency response competencies.

1. One Man Carry
2. Two-Man Carry
3. Three-Man/Group Carry
4. Compression Only CPR
5. One-man CPR
6. Two-Man Adult CPR
7. Bleeding Control and Bandaging Techniques
8. Splinting and Immobilization
9. Spine Board Management

Note: All stations will be equipped with appropriate materials, mannequins, and volunteer patients. Teams will rotate through each station and be assessed based on execution time, technique, and completeness.

GENERAL RULES

1. Attire – the players must wear white shirts and jogging pants (any color)
2. Team Holding Protocol - All team members must remain in their designated holding or billeting areas. Only the team scheduled to perform may enter the working/scenario area.
3. Pre-Challenge Orientation - An orientation will be conducted prior to the challenge proper.
4. Documentation – A committee shall be organized to document the event.
5. Conduct and Sportsmanship - Use of foul language or unsportsmanlike behavior will result in a deduction of ten (10) points per violation.
6. Safety Enforcement - Umpires will stop and correct any unsafe actions. Time will continue to run during the correction.
7. Umpire Communication - Only active participants are allowed to approach the umpires during the event.
2. Spectator Guidelines - All spectators must stay within the designated viewing areas.
3. Outside Assistance - No outside assistance is allowed. Violators will be immediately disqualified.
4. Equipment Handling - Teams must carry and manage their own equipment when moving between stations.
5. Station Flow - Teams may proceed to the next station only after the previous team has cleared it.
6. Time Limits - Each station has a maximum allotted time. Incomplete tasks within this limit will result in point deductions.
7. Gadget Policy - All personal gadgets (phones, tablets, etc.) will be confiscated before entry into the holding area.
8. Scoring and Safety Oversight - Each station will have assigned umpires and timers responsible for scoring and safety enforcement.
9. Injury Protocol - Injured players may be replaced with alternative from the players of Fire Hose Relay; only one player is allowed to be replaced, provided they are examined and cleared by a medical officer.
10. Force Majeure Clause - In case of force majeure (e.g., extreme weather), the event will pause or resume upon advisory.
11. Critical Procedures - Critical procedures will be graded on an all-or-nothing basis.

12. Tie-Breaker Policy - Ties will be resolved through a score panel re-computation.
13. Winning Criteria - The team with the highest overall score will be declared the winner.
14. Awards - Winners will receive trophies and certificates
15. Camaraderie and Sportsmanship - Participants are encouraged to practice **camaraderie and sportsmanship. Limit protests or complaints;** the event's primary aim is **education over competition.**

DISQUALIFICATION GROUNDS

- Receiving help from non-team members during execution
- Violation of communication protocols in the holding area
- Exposure of scenario details before official execution

AWARDS AND RECOGNITION

- Champion Team: Trophy / Plaque and Certificate
- Best in Team Coordination (Special Award)
- Best in Scenario Execution (Per Station)
- Best Team Leader (Special Individual Recognition)

PERSONNEL PROTECTIVE EQUIPMENT

- Helmet
- Goggles and mask
- Knee pads and elbow pads
- Boots/ safety shoes / Rubber shoes (the least)
- First Aid Kits
- Cleaned/ Surgical Gloves
- Disposable Face Mask

OPERATIONAL REQUIREMENT AND EQUIPMENT

Particulars	Quantity
Mannequin	4 Unit (Adult)
Bag Valve Mask Device	1 (Adult)
Triangular Bandage	36 Pieces
Mechanical Splint (Rigid)	1 Set
Cervical Collar	1 Piece
Spine/ Long Board	1 Unit

SCORE GUIDE

Round I: Elimination (Skills-Stations)

- STATION 1: One-Man Carry
 STATION 2: Two-Man Carry
 STATION 3: Three/Group Carry
 STATION 4: Compression Only CPR
 STATION 5: One-Man Adult CPR
 STATION 6: Two-Man Adult CPR
 STATION 7: Bleeding Control and Bandaging Techniques
 STATION 8: Splinting / Immobilization
 STATION 9: Spine Board Management

STATION 1 ANAD 2

ONE-MAN CARRY / TWO-MAN CARRY

ONE-MAN CARRY / TWO-MAN CARRY

TEAM NO.:	POINT DEDUCTION:						
RATER:							
POINTS FOR SCORING	SCORE GUIDE					SCORE	REMARKS
Execution of command/method.	Commands/methods are delivered with full clarity, strong confidence, and precise accuracy	Mostly clear and confident; minor errors or hesitations	Adequate execution; some lack of clarity or precision	Unclear or hesitant execution; noticeable errors	Commands/methods are confusing, imprecise, or lack confidence	10	
	10	8	6	4	2		
Care of victim. (Inform patient before moving, ensure smooth, coordinated movement and avoid rough handling)	Always informs patient clearly before moving; movement is smooth, coordinated, and gentle	Usually informs patient; movement is mostly smooth and coordinated	Sometimes informs patient; movement may lack coordination or gentleness	Rarely informs patient; movement is rough or poorly coordinated	Does not inform patient; movement is abrupt, rough, or unsafe	10	
	10	8	6	4	2		
Proper lifting and moving. (Technique, Coordination and gentleness)	Uses correct lifting technique; movement is well-coordinated and gentle at all times	Minor lapses in technique or coordination; generally gentle	Acceptable technique; some roughness or lack of coordination	Frequent errors in technique; movement is rough or poorly coordinated	Incorrect technique; movement is abrupt, unsafe, or careless	20	
	20	16	12	8	4		
Proper body mechanics.	Maintains correct posture and alignment at all times; movements are smooth and safe	Minor lapses in posture or movement; generally safe and effective	Acceptable posture; occasional awkward or unsafe movements	Frequent posture issues; movements lack control or safety	Poor posture and alignment; movements are unsafe or careless	10	
	10	8	6	4	2		
						50	TOTAL SCORE

STATION 3
THREE / GROUP CARRY

TEAM NO.:		POINT DEDUCTION:					
RATER:							
CRITERIA		SCORE GUIDE				SCORE	REMARKS
Execution of command / method.	Executes the command/method accurately, promptly, and with proper technique.	Executes with minor errors or slight delay; overall effective.	Execution shows noticeable errors or hesitation; partially effective.	Poor execution with frequent mistakes; effectiveness is limited.	Fails to execute the command/method correctly or safely.	10	
	10	8	6	4	2		
Care of victim. (Inform patient before moving, ensure smooth, coordinated movement and avoid rough handling)	Clearly informs the victim before moving, uses smooth and coordinated movements, and avoids any rough handling.	Informs the victim and moves with care; minor issues in coordination or handling.	Attempts to inform and move gently but shows noticeable errors or roughness.	Poor communication and rough or uncoordinated movement; may cause discomfort.	No communication; movement is rough and careless, risking harm or distress.	10	
	10	8	6	4	2		
Proper lifting and moving.	Uses correct lifting technique with smooth, coordinated movement; ensures victim safety and comfort.	Lifts and moves properly with minor issues in coordination or posture.	Attempts proper technique but shows noticeable errors or discomfort to victim.	Poor lifting posture or rough movement; risks injury or distress.	Unsafe lifting and moving; causes harm or shows lack of technique.	20	
	20	16	12	8	4		
Proper body mechanics.	Uses correct posture and technique consistently (e.g., straight back, bent knees, stable footing); ensures safety and efficiency.	Mostly uses proper body mechanics; minor posture issues but no safety risk.	Shows some understanding but with noticeable posture or technique errors.	Frequently uses poor posture or unsafe technique; risk of strain or injury.	Consistently incorrect posture and technique; unsafe and ineffective.	10	
	10	8	6	4	2		
						50	TOTAL SCORE

POINTS:

- Perform the 6 step ground to stand
- Correct method of carry
- Proper command
- Proper cadence
- Coordination of foot movement
- Perform power grip
- Perform power lift
- Back straight, bend knees
- Avoid twisting
- Keep body as close as possible to victim when lifting

STATION 4
COMPRESSION ONLY CPR

COMPRESSION ONLY CPR

TEAM NO.:	POINT DEDUCTION:						
RATER:							
CRITERIA	SCORE GUIDE					SCORE	REMARKS
ABILITY TO INITIATE BLS							
Check for scene safety	Always checks carefully and quickly safeAlways ensures safety for everyone	Usually checks with minor delay Mostly keeps area safe	Sometimes checks but misses some hazards Tries to keep safe but misses some risks	Rarely checks or unsure what to look for Unsafe actions or poor awareness	Does not check for danger at all Creates danger or acts without care	5	
	5	4	3	2	1		
Introduce yourself and check for responsiveness by tapping shoulders and simultaneously look for breathing and movement.	Speaks clearly and confidently Taps both shoulders gently and asks loudly	Speaks clearly but a bit shy Taps one shoulder and asks	Speaks but not clearly Taps but does not ask	Mumbles or forgets to introduce Asks but does not tap	Does not introduce self Does not check responsiveness	5	
	5	4	3	2	1		
If victim is UNRESPONSIVE, Shout for nearby HELP or activate emergency response	Shouts clearly and activates help right away	Shouts and tries to get help	Shouts but forgets next steps	Hesitates or unsure what to do	Does not call for help or take action	10	
	10	8	6	4	2		
Cover the victim's mouth and nose with mask or cloth.	Uses a clean, breathable mask or cloth to fully and securely cover both mouth and nose; ensures the victim can breathe comfortably and monitors for distress.	Covers both mouth and nose with a mostly clean material; minor gaps or slight discomfort may be present but breathing is still adequate.	Covers mouth and nose but with noticeable gaps or questionable material; limited attention to victim's comfort or breathing.	Covers only mouth or nose, or uses inappropriate material; victim may have difficulty breathing.	Fails to cover properly or causes harm/distress to the victim.	5	
	5	4	3	2	1		
ABILITY TO DELIVER HIGH-QUALITY CPR							
CORRECT HAND PLACEMENT AND COMPRESSION SITE	Fingers fully interlocked, firm grip Perfect placement at center chest	Mostly interlocked, slight adjustment needed Slightly off-center but safe	Partially interlocked Needs guidance to find correct spot	Poor grip or unsure Incorrect placement	Hands not interlocked No attempt to place hands correctly	10	
	10	8	6	4	2		
ADEQUATE RATE: Compression at 200-240 for 2 minutes	Maintains compression rate consistently between 200-240/min for the full 2 minutes.	Compression rate mostly within range; minor fluctuations but overall effective.	Compression rate occasionally within range; noticeable inconsistencies.	Compression rate frequently outside the target range; effectiveness reduced.	Compression rate far below or above target; not sustained for 2 minutes.	15	
	15	12	9	6	3		
ADEQUATE DEPTH: Delivers compressions at least 2 inches - 2.4 inches/ 5 to 6 cm in depth	Delivers compressions consistently within the 2-2.4 inch (5-6 cm) depth range throughout.	Depth mostly within range; minor inconsistencies but generally effective.	Depth occasionally within range; noticeable variation affecting effectiveness.	Depth frequently too shallow or too deep; reduced effectiveness.	Depth consistently incorrect; compressions ineffective or potentially harmful.	15	
	15	12	9	6	3		
ALLOWS COMPLETE CHEST RECOIL	Fully releases pressure after each compression, allowing complete chest recoil consistently.	Mostly allows chest recoil; occasional minor pressure remains.	Inconsistent recoil; noticeable pressure remains during several compressions.	Frequently fails to allow chest recoil; compressions are rushed or incomplete.	Does not allow chest recoil; compressions are continuous without release.	15	
	15	12	9	6	3		

MINIMIZE INTERRUPTIONS	Performs compressions continuously with no interruptions for the full 2 minutes.	Very few brief interruptions; overall performance remains effective.	Some interruptions noted; may affect overall compression quality.	Frequent interruptions; significantly impacts effectiveness.	Constant interruptions; compressions are not sustained or effective.	10	
	10	8	6	4	2		
ABILITY TO PLACE THE VICTIM IN RECOVERY POSITION							
If the victim becomes responsive place the victim in Recovery Position.	Immediately places the responsive victim in the correct recovery position with proper technique and care.	Places victim in recovery position with minor errors in technique or delay.	Attempts recovery position but with noticeable mistakes or hesitation.	Delayed or improper positioning; may compromise victim's safety.	Fails to place victim in recovery position despite signs of responsiveness.	10	
	10	8	6	4	2		
						100	TOTAL SCORE

STATION 5 AND 6

ONE MAN AND TWO MAN CPR

TEAM NO.:

POINT DEDUCTION:

RATER:

CRITERIA	SCORE GUIDE					SCORE	REMARKS
ABILITY TO INITIATE BLS							
Check for scene safety	Always checks carefully and quickly safeAlways ensures safety for everyone	Usually checks with minor delay Mostly keeps area safe	Sometimes checks but misses some hazards Tries to keep safe but misses some risks	Rarely checks or unsure what to look for Unsafe actions or poor awareness	Does not check for danger at all Creates danger or acts without care	10	
	10	8	6	4	2		
Introduce yourself and check for responsiveness by tapping shoulders.	Speaks clearly and confidently Taps both shoulders gently and asks loudly	Speaks clearly but a bit shy Taps one shoulder and asks	Speaks but not clearly Taps but does not ask	Mumbles or forgets to introduce Asks but does not tap	Does not introduce self Does not check responsiveness	5	
	5	4	3	2	1		
If victim is UNRESPONSIVE, Shout for nearby HELP or activate emergency response	Shouts clearly and activates help right away	Shouts and tries to get help	Shouts but forgets next steps	Hesitates or unsure what to do	Does not call for help or take action	10	
	10	8	6	4	2		
Locate and check the carotid pulse for no more than 10 seconds.	Finds pulse spot quickly and accurately Checks pulse calmly within time limit	Finds pulse with minor adjustment Slightly exceeds time but stays focused	Finds pulse with help or delay Takes too long or seems unsure	Struggles to find correct spot Very slow or distracted	Does not locate pulse Does not check pulse at all	5	
	5	4	3	2	1		
ABILITY TO DELIVER HIGH-QUALITY CPR FOR 5 CYCLES							
CPR 1 CORRECT HAND PLACEMENT AND COMPRESSION SITE: (Hands interlocked placed on the center of the victim's chest)	Fingers fully interlocked, firm grip Perfect placement at center chest	Mostly interlocked, slight adjustment needed Slightly off-center but safe	Partially interlocked Needs guidance to find correct spot	Poor grip or unsure Incorrect placement	Hands not interlocked No attempt to place hands correctly	10	
	10	8	6	4	2		
CPR 2 ADEQUATE RATE: Compression at 100-120/min (delivers each set of 30 chest compressions in 15-20 seconds)	120/min)Completes 30 compressions in 15-18 seconds consistently	Slightly faster or slower but still effective	Noticeably off pace, needs imp	needs improvement/Vary slow or very fast, ineffective	No attempt or incorrect technique	10	
	10	8	6	4	2		
CPR 3 ADEQUATE DEPTH: Delivers compressions at least 2 inches - 2.4 inches/ 5 to 6 cm in depth (at least 27 compressions)	Delivers 27-30 compressions at correct depth	Delivers 24-26 compressions correctly	Delivers 20-23 compressions correctly	Delivers 15-19 compressions correctly	Fewer than 15 compressions at correct depth or no attempt	10	
	10	8	6	4	2		
CPR 4 ALLOWS COMPLETE CHEST RECOIL (at least 27 complete chest recoil out of 30)	27-30 compressions with full recoil	24-26 with full recoil	20-23 with full recoil	15-19 with full recoil	Fewer than 15 or no attempt to allow recoil	10	
	10	8	6	4	2		
CPR 5 MINIMIZE INTERRUPTIONS (less than 10 seconds between cycle of chest compressions)	No pause or <10 seconds between cycles	Slight delay (10-12 seconds)	Moderate delay (13-15 seconds)	Long delay (>15 seconds)	No attempt to continue compressions or excessive pause	10	
	10	8	6	4	2		
CPR 6 NO EXCESSIVE VENTILATION (each breathe done in 1 second)	Both breaths are delivered in 1 second each	Slightly longer but still effective	One breath too long or too forceful	Both breaths too long or forceful	No attempt or incorrect technique	10	
	5	4	3	2	1		

STATION 7

BLEEDING CONTROL AND BANDAGING TECHNIQUES

TEAM NO.:		POINT DEDUCTION:					
RATER:							
CRITERIA		SCORE GUIDE				SCORE	REMARKS
Appropriate bandage technique for the type of injury.	Selects and applies the correct bandage type and technique for the injury; secure, clean, and promotes healing.	Bandage is appropriate and mostly well-applied; minor issues in fit or technique.	Bandage type is acceptable but application has noticeable errors or lacks security.	Bandage is poorly chosen or applied; may not protect or support the injury properly.	Bandage is inappropriate or incorrectly applied; may cause harm or discomfort.	50	
	50	40	30	20	10		
The applied bandage is snugly fit (not too tight and not too loose)	Bandage is snugly fitted—secure, comfortable, not too tight or too loose; promotes proper circulation and protection.	Bandage is mostly snug; minor tightness or looseness but still effective.	Fit is inconsistent; may be slightly too tight or loose, affecting comfort or function.	Bandage is clearly too tight or too loose; may cause discomfort or reduce effectiveness.	Bandage is improperly fitted; risks harm or fails to protect the injury.	10	
	10	8	6	4	2		
The bandage covers the wound.	Bandage fully and securely covers the entire wound area, providing proper protection.	Bandage covers the wound with minor gaps or slight misalignment.	Bandage partially covers the wound; protection may be compromised.	Bandage poorly covers the wound; large areas exposed.	Bandage does not cover the wound at all or is applied incorrectly.	20	
	20	16	12	8	4		
The applied bandage always ends with a square knot.	Always finishes the bandage with a secure and correctly tied square knot.	Usually ends with a square knot; minor errors in tying but still secure.	Attempts a square knot but with noticeable mistakes or looseners.	Uses an incorrect knot or ties loosely; may come undone.	Does not use a square knot; bandage is insecure or improperly finished.	10	
	10	8	6	4	2		
Handling of injured victim.	Handles the victim gently and confidently, ensuring safety, comfort, and proper support at all times.	Generally careful and supportive; minor lapses in technique or communication.	Shows basic care but with noticeable errors or lack of coordination.	Rough or uncoordinated handling; may cause discomfort or risk further injury.	Mishandles the victim; unsafe, careless, or causes harm.	10	
	10	8	6	4	2		
						100	TOTAL SCORE

POINTS:

Perform the 6 step ground to stand

Correct method of carry

Proper command

Proper cadence

Coordination of foot movement

Perform power grip

Perform power lift

Back straight, bend knees

Avoid twisting

Keep body as close as possible to victim when lifting

STATION 8
SPLINTING / IMMOBILIZATION

TEAM NO.:		POINT DEDUCTION:					
RATER:							
CRITERIA		SCORE GUIDE				SCORE	REMARKS
Splint is appropriate for the type of injury (including pads/rolls, as needed).	Selects and applies the correct splint type with proper padding/rolls; fully supports and protects the injury.	Splint is appropriate and mostly well-applied; minor issues with padding or positioning.	Splint type is acceptable but application has noticeable errors or lacks adequate padding.	Splint is poorly chosen or applied; may not support or protect the injury properly.	Splint is inappropriate or incorrectly applied; risks further injury or discomfort.	50	
	50	40	30	20	10		
The applied splint successfully immobilizes (does not move easily) the injured area.	Splint fully immobilizes the injured area; no movement observed and injury is well-supported.	Splint mostly immobilizes the area; slight movement but still provides adequate support.	Splint provides partial immobilization; noticeable movement reduces effectiveness.	Splint is loosely applied; injured area moves easily and is poorly supported.	Splint fails to immobilize the area; injury is unprotected and at risk of further harm.	20	
	20	16	12	8	4		
Proper positioning of knots.	Knot is correctly positioned—secure, comfortable, and does not interfere with the injury or circulation.	Knot is well-positioned with minor adjustment needed; does not cause discomfort.	Knot placement is acceptable but may affect comfort or stability slightly.	Knot is poorly positioned; may cause discomfort or reduce bandage effectiveness.	Knot is incorrectly placed; causes discomfort, instability, or risk to the injury.	10	
	10	8	6	4	2		
Neatness.	Work is very neat, clean, and well-organized; no loose ends or mess.	Mostly neat and organized; minor imperfections present.	Acceptably neat but with noticeable untidiness or disorganization.	Work is messy or poorly organized; affects clarity or effectiveness.	Very untidy and disorganized; difficult to understand or use.	10	
	10	8	6	4	2		
Handling of injured victim.	Handles the victim gently, confidently, and safely; ensures comfort and avoids further injury.	Generally careful and supportive; minor lapses in technique or communication.	Shows basic care but with noticeable errors or lack of coordination.	Rough or uncoordinated handling; may cause discomfort or risk further injury.	Mishandles the victim; unsafe, careless, or causes harm.	10	
	10	8	6	4	2		
						100	TOTAL SCORE

POINTS:

Appropriate immobilization technique
All knots are close to splint
Excess bandages are tucked in
Complete safe handling/ care

STATION 9

SPINE BOARD MANAGEMENT

TEAM NO.:		POINT DEDUCTION:					
RATER:							
CRITERIA		SCORE GUIDE				SCORE	REMARKS
Perform assessment of the severity of the injury.	Accurately assesses the injury's severity using appropriate methods; identifies signs and symptoms clearly and responds accordingly.	Assesses severity with minor errors or omissions; response is mostly appropriate.	Basic assessment performed; some important signs or symptoms may be missed.	Incomplete or unclear assessment; may lead to inappropriate response.	Fails to assess injury severity; no clear understanding or action taken.	10	
	5	4	3	2	1		
Apply manual stabilization.	Applies manual stabilization correctly and consistently; maintains control and prevents movement of the injured area.	Stabilization is mostly correct; minor adjustments needed but injury remains supported.	Basic stabilization applied; some movement or technique errors observed.	Poor stabilization; frequent movement or lack of control.	No effective stabilization; injury is unsupported and at risk of further harm.	10	
	5	4	3	2	1		
Proper placement of cervical collar.	Cervical collar is placed correctly—centered, snug, and supports the neck without causing discomfort or restricting breathing.	Collar is mostly well-positioned; minor adjustments needed but still effective.	Collar placement is acceptable but may affect comfort or support slightly.	Collar is poorly positioned; may cause discomfort or reduce effectiveness.	Collar is incorrectly placed; risks further injury or does not support the neck properly.	10	
	5	4	3	2	1		
Appropriate loading technique applied.	Applies correct loading technique—safe, smooth, coordinated, and ensures victim comfort and stability.	Loading is mostly correct; minor issues in coordination or positioning.	Basic technique used; noticeable errors or discomfort to the victim.	Poor technique; risks injury or causes discomfort during loading.	Unsafe or incorrect loading; victim is mishandled or at risk.	10	
	10	8	6	4	2		
Proper transfer performed.	Transfer is smooth, safe, and well-coordinated; ensures victim comfort and avoids further injury.	Transfer is mostly correct; minor issues in coordination or technique.	Basic transfer performed; noticeable errors or discomfort to the victim.	Poor technique; risks injury or causes discomfort during transfer.	Unsafe or incorrect transfer; victim is mishandled or at risk.	10	
	5	4	3	2	1		
Execution of command / method.	Executes the command/method accurately, confidently, and without hesitation; follows correct procedure.	Executes correctly with minor errors or slight hesitation.	Basic execution with noticeable errors or lack of confidence.	Poor execution; multiple errors or unclear understanding of the method.	Fails to execute the command/method or performs it incorrectly.	10	
	5	4	3	2	1		
Care of victim. (Inform patient before moving, ensure smooth, coordinated movement and avoid rough handling)	Clearly informs the victim before moving, uses smooth and coordinated movements, and avoids any rough handling.	Generally careful and communicative; minor issues in coordination or handling.	Basic care shown; some errors in communication or movement technique.	Poor communication or rough/uncoordinated handling; may cause discomfort.	No communication; movement is rough and careless, risking harm or distress.	10	
	5	4	3	2	1		