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| **Evaluation Sheet: 2-201** | **Sling SCOTT AIR-PAK X3** |

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| **Objective: Demonstrate proficiency donning an SCBA prior to entering an IDLH fire environment. The time standard is 1:00. Do you have any questions?** | | | | | | | |
| **Standards:** WAC 296-305-04001 (15)  NFPA 1001 2019 Edition 4.1.2, 4.3.1 | | | **Reference:** Scott Safety Operating and Maintenance Instructions | | | | |
| **Task: Sling SCBA and go on air.** | | | | | | | |
| **Performance Outcome:** The candidate will successfully demonstrate the ability to properly don an SCBA. | | | | | | | |
| **Conditions:** Given a SCOTT AIR-PAK X3 SCBA, and full PPE (radio, turnouts, hood, helmet, gloves) the candidate will: | | | | | | | |
| **No.** | **Task Steps** | | | **First Test** | | **Retest** | |
| **Pass** | **Fail** | **Pass** | **Fail** |
|  | Pressurize system **TIME STARTS:** Time starts when instructor states “Go”.   1. Turn cylinder completely on. 2. Check and state **“amount of air”** in cylinder. 3. Confirm VIBRALERT activation and PAK-ALERT startup, state **“PASS”.** | | |  |  |  |  |
|  | Sling the AIR-PAK X3.   1. Use coat method over left shoulder. 2. Do not wildly swing in a manner that will damage any equipment. | | |  |  |  |  |
|  | Secure AIR-PAK X3.   1. Tension shoulder straps. 2. Connect and tension waist straps. | | |  |  |  |  |
|  | Cover.   1. Remove helmet (helmet may be placed behind the head, over the arm or placed on the ground in a controlled manner). 2. Secure facepiece against face. 3. Pull head net on and tighten all straps, starting from the bottom. 4. Check seal, use exposed hand and state **“SEAL”.** | | |  |  |  |  |
|  | Hood and helmet.   1. Pull hood into place with no skin or straps visible. 2. Replace helmet and snug chin strap. 3. Pull down ear flaps. 4. Connect FMR to facepiece and breathe air. 5. **TIME STOPS:** (after gloves are removed from right pocket and held in the air). | | |  |  |  |  |
|  | Gloves.   1. Don both firefighting gloves. | | |  |  |  |  |
| **Retest**  **Approved By:** | | **SFD TIME GOAL: 1:00** | |  |  |  |  |

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| Instructor/Candidate Comments: |  |
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| **Instructor (Print & Sign)** |  | **Date** |  | **Candidate** |  | **Date** |
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| **Retest:** |  |  |  |  |  |  |
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