UC DAVIS HEALTH | Center for Professional Practice of Nursing

Emergency Department Adult Skills

Name:	**Employee ID#:**
Unit:	**Title:**
Due Date: _____ (new hires: prior to end of orientation period)	

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Skill/Learning **Not all skills are applicable to all Nursing areas – if not applicable mark as N/A**	**Skill Code** (For CPPN Use Only)	**Date Completed (or N/A)**	**Verifier Initials**
Adult Respiratory Assessment Skills Checklist	DAHS-NSCARA14		
Arterial Pressure Monitoring Skills Checklist: Performs per UC Davis Health Policy 13010: Arterial Line Management	DAHS-NSCAPM14		
Basic Dysrhythmia Detection and Treatment Skills Checklist	DAHS-NSCBDDT15		
Belmont Fluid Management System Skills Checklist	DAHS-NSCBFM16		
Bi-PAP Skills Checklist	DAHS-NSCBP14		
BloodTrack HaemoBank Skills Checklist	DAHS-NSCBTHB22		
Burn Resuscitation Skills Checklist: Performs per UC Davis Health Policy 12018: Fluid Resuscitation for Burns	DAHS-NSCBR14		
Cardiac Pain Assessment & Management Skills Checklist	DAHS-NSCCPAM14		
Cardiac Tamponade Skills Checklist	DAHS-NSCCT14		
Central Venous Pressure Monitoring in the Emergency Department Skills Checklist	DAHS-NSCCVPMED16		
Cervical Collar Skills Checklist: Performs per UC Davis Health Policies 14003: Cervical Collar Change Procedure and 4041: Spinal Precautions	DAHS-NSCCC14		
Chest Tube Skills: Performs per UC Davis Health Policy 17002 Chest Tube Management	DAHS-NSCCT13		
ED Lab Draw and Labeling Process Skills Checklist	DAHS-NSC2EDLABDLP		
Endotracheal Intubation and Mechanical Ventilation Skills Checklist	DAHS-NSCEIMV14		
End-tidal carbon dioxide monitoring Skills Checklist	DAHS-NSCETCDM15		
Fluid Resuscitation Skills Checklist	DAHS-NSCFR14		
Gastrostomy Tube Skills Checklist Performs per Clinical Policies 8011, Enteral Nutrition for Adult Patients, and 4055, Medication Administration	DAHS-NSCGT14		
HOTLINE® Fluid Warmer Equipment Skills Checklist	DAHS-NSCHFWE16		

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Skill/Learning Not all skills are applicable to all Nursing areas – if not applicable mark as N/A	Skill Code (For CPPN Use Only)	Date Completed (or N/A)	Verifier Initials
Intoximeter Skills Checklist	DAHS-NGNISC18		
Lumbar Puncture and/or Drain Skills Checklist: Performs per UC Davis Health Policies 15008, Assisting with Diagnostic Lumbar Puncture and 15007, Care of the Patient with a Lumbar Catheter	DAHS-NSCLPD14		
MDI with Spacer Skills Checklist	DAHS-NSCMDIS14		
Neuromuscular Blocking Agents (NMBA) Skills Checklist: Performs per UC Davis Health Policy 13036: Monitoring And Care Of The Adult ICU Patient On Neuromuscular Blocking Agent	DAHS-NSCNBA14		
Nurse Swallow Screen in Patients with Stroke Skills: Performs per policy 15017 Dysphagia (Swallow) Screen for Adult Patients with Stroke	DAHS-NSCNSSPS15		
Obtaining a 12-Lead ECG Skills Checklist	DAHS-NSCOLE14		
Organ Procurement (Adult) Skills Checklist	DAHS-NSCOPA14		
Precipitous Delivery Skills Checklist: Performs per UC Davis Health Policy 16001, Birth Outside of Labor and Delivery (L&D)	DAHS-NSCPD14		
Rapid Sequence Intubation (RSI) in the ED Skills Checklist	DAHS-NSCRSIED		
Respiratory Emergencies and Equipment Skills Checklist	DAHS-NSCREE14		
Temporary Transvenous /Epicardial Pacemaker Skills Checklist	DAHS-NSCTTEP14		
Thrombolytic Therapy (Tenecteplase or Alteplase) Administration and Monitoring for Acute Ischemic Strokes	DAHS-NGNTNK21		
Tracheostomy Care Skills Checklist: Performs per UC Davis Health Policy 17003, Airway Management for Adult Inpatients	DAHS-NSCTC15		
Transporting Critical Care Patients to Procedure or Diagnostic Study Skills Checklist	DAHS-NSCTCCPPDS14		
Using the Clipper Skills Checklist	DAHS-NSCUTC17		
Vasoactive Cardiac Medications, Parental Administration Skills Checklist	DAHS-NSCVCMPA14		
Zoll R Series ALS Skills Checklist	DAHS-NSCRSALS17		

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SIGNATURE PAGE:

Signature and Printed Name of Verifier (preceptor or other verified personnel) who have initialed on this form:

Initial:	Print Name:	Signature:

PRECEPTEE STATEMENT AND SIGNATURE:

I have read and understand the appropriate UC Davis Health Policies and Procedures and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and I have the knowledge of the resources available to answer questions.

Name Signature and Date

Scan Page 1, 2, and 3 ONLY and email to: hs-cppn@ucdavis.edu

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	Date	**Verifier Initials**
Adult Respiratory Assessment Skills Checklist #DAHS-NSCARA14		
Note type of oxygen delivery system, method of airway management and/or mode of ventilation		
Make general observation of patient's overall status		
Observe for rate, depth, pattern, symmetry, and effort of respirations. Observe for use of accessory muscles		
Observe for color and pallor of skin and mucous membranes		
Observe for color, quantity, odor and consistency of secretions		
Observe position of trachea		
Auscultate in an orderly manner all lung fields and describe lung sounds appropriately		
Palpate neck, chest, and shoulders to assess for the presence of subcutaneous air		
Monitor and document oxygen saturations and End Tidal CO2 levels when appropriate		
Describe/demonstrate method for contacting respiratory therapy		
Have available in the patient's room, and know how to use, necessary respiratory equipment		
Locate/describe emergency respiratory equipment		
Document all pertinent information in the appropriate locations		
Basic Dysrhythmia Detection and Treatment Skills Checklist #DAHS-NSCBDDT15		
References: 1. Cardiovascular Nursing Practice, Jacobson, C. et. al., CNEA, 2007. 2. Elsevier Skills for review: Cardiac Monitor Setup and Lead Placement 3. Elsevier Nursing Consult - Clinical Updates CE: Differentiating Dysrhythmias Part 1: Recognizing and Treating Atrial Dysrhythmias		
Successful completion of CPPN ECG Interpretation Course OR ECG Challenge Exam #DAHS-NGNECGICE20 may be used in place of this skill checklist.		
Describe the electrical conduction system of the heart		
Explain the waves and intervals of the normal ECG and their significance		
Identify sinus dysrhythmia and discuss the causes/treatments		
Identify atrial dysrhythmia and discuss the causes/treatments		
Identify junctional dysrhythmia and discuss the causes/treatments		
Identify Supraventricular dysrhythmias and discuss the causes/treatments		

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	Date	**Verifier Initials**
***Basic Dysrhythmia Detection and Treatment Skills Checklist, continued* #DAHS-NSCBDDT15**		
Identify ventricular dysrhythmias and discuss the causes/treatment.		
Identify Torsade de pointes and discuss the causes/treatments.		
Identify life-threatening dysrhythmias and discuss the causes/treatments.		
Identify heart blocks and discuss the causes/treatments.		
Belmont Fluid Management System #DAHS-NSCBFM16		
References: 1. UC Davis Health Policy 13012: Administration of Blood and Blood Components		
Properly installs disposable set to Belmont FMS 2000 fluid management system (rapid infuser)		
Demonstrates turning power on, priming system/patient line and connecting system to patient		
Demonstrates how to adjust infusion rate		
States when to replace reservoir chamber		
Identifies operational, heating and internal system fault alarms and troubleshooting – refers to Operator's Manual or Quick Reference Guide as needed		
Bi-PAP Skills Checklist #DAHS-NSCBP14		
References:		
Describe BiPAP.		
Identify the most common indications for BiPAP use.		
State contraindications for BiPAP use.		
State patient characteristics for successful use of BiPAP.		
Monitor the patient and assess for possible complications.		
Identify the most common reasons for alarms.		
Identify criteria to discontinue BiPAP.		

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BloodTrack HaemoBank Skills #DAHS-NSCBTHB22

References:
1. UC Davis Health Policy 13012: Administration of Blood and Blood Components, Attachment 5, Remote Blood Storage and Provision
2. ED HaemoBank Competency Study Guide

	Date	Verifier Initials
Watches BloodTrack training video (3 minutes)		
Successfully signs in to BloodTrack kiosk		
Removes products from the Bloodtrack Haemobank following the appropriate workflow		
Returns previously removed products		
Implements the workflow for initiating additional blood products, when needed		
Utilizes the workflow for when the Bloodtrack system is not functioning appropriately or Epic downtime occurs		

Cardiac Pain Assessment & Management Skills Checklist # DAHS-NSCCPAM14

References:
1. Advanced Cardiac Life Support (ACLS) Provider Manuel, 2010Edition
2. Frishman, William H., & Sica, Domenic A., Cardiovascular Pharmacotherapeutics. 3rd Edition, Cardiotext Publishing, May, 2011.
3. Davis, L. 2004. Cardiovascular Nursing Secrets. Mosby.
4. JCAHO Core Measures 2011
5. UC Davis Health Standardized Procedure 322: Nursing Intervention in the Event of Certain Medical Emergencies in Adult Patients (Main Hospital)

Assess the chest pain to determine if it is cardiac ischemic in origin. Utilize the 0-10 pain scale and the PQRST scale.		
Diagnostics and Interventions: a. Place patient on cardiac, pulse oximetry and automatic BP monitor. b. Obtain/review 12-lead ECG during chest pain episode. c. Assess for signs of hypoxemia; administer oxygen therapy as indicated. d. Establish IV and draw and review cardiac labs.		
Administer medications as MD ordered: Nitroglycerin sublingual or spray; IV Nitroglycerin infusion; Morphine Sulfate IV, ASA, and beta-blockers, if stable. State the rationale of the above treatment and the patient monitoring requirements.		
Provide continuous ECG monitoring to evaluate ST, T-wave changes and detect dysrhythmia development.		
State the overall goals of treatment in the management of pain related to myocardial ischemia.		
Assess level of anxiety and indicate means to alleviate it.		
Reassess patient after each intervention. Alert MD if no improvement.		
Anticipate other medications and interventions that might be indicated.		
Document all assessments, interventions, medications and responses.		

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	Date	**Verifier Initials**
Cardiac Tamponade Skills Checklist # DAHS-NSCCT14		
References: 1. Critical Care Nursing, second edition. Cloochesy, Breu, Cardin, Whittaker and Rudy. 2. Thelan's Critical Care Nursing fifth edition. Urdenm Stacy, and Lough 3. Cardiac Nursing fifth edition. Woods, Froelicher, Motzer, Bridges. 4. Textbook of Medical Physiology. Guyton and Hall. 5. The ICU Book, second edition. Paul Marino.		
Discuss the mechanism of cardiac tamponade. Identify who is at risk and why.		
Identify clinical signs and symptoms of cardiac tamponade.		
Discuss situations that would lead the nurse to suspect cardiac tamponade in the cardiac surgery patients. What measures should be instituted to confirm the diagnosis?		
What is the treatment for cardiac tamponade?		
Central Venous Pressure Monitoring in the Emergency Department #DAHS-NSCCVPMED16		
Identify 4 indications in which a central venous pressure (CVP) line might be indicated/used		
List equipment needed for setting up and monitoring CVP through a non-tunneled infusion central venous catheter		
State where above equipment is located in the emergency department		
Identify 4 locations a non-tunneled infusion central venous catheter can be inserted to effectively monitor CVP		
Identify which port is used to monitor the CVP on a non-tunneled infusion central venous catheter		
Demonstrate/Explain the setup of the CVP line and indications for calibrating (zeroing) the line, and correct placement level of the transducer		
Identify a CVP waveform on the monitor		
Discuss the expected normal values for CVP and what abnormal values may indicate.		

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ED Lab Draw and Labeling Process Skills Checklist #DAHS-NSC2EDLABDLP

References

1. UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric)
2. UC Davis Health Policy 13029: Venipuncture Verification and Blood Withdrawal
3. UC Davis Health ED Departmental Policy: Lab Draw & Labeling Process
4. NCCLS (CLSI) clinical laboratory guideline
5. UCDH Laboratory Users Guide

	Date	Verifier Initials
State the importance of correct serum lab specimen collection		
Select appropriate blood specimen tubes/medium, obtain correct labels		
Choose appropriate method of blood draw: venipuncture, arterial puncture, central or arterial line draw		
Verify identify of patient		
Explain the procedure to the patient		
Verbalizes appropriate specimen collection and lab labeling workflow per Emergency Department Policy Lab Draw and Labeling Process		
Observe standard precautions and use of appropriate safety devices		
Handle specimen appropriately		
Compare lab results to normal values and the patient's previous results		
Appropriate documentation in the electronic health record (examples: collection, critical lab value reporting)		
Performs **FIVE (5) successful lab draws** per policy under direct observation of preceptor, Clinical Nurse Leader (CNL), Clinical Nurse III (CN3), or Clinical Nurse Educator (CNE).		
Lab Draw #1		
Lab Draw #2		
Lab Draw #3		
Lab Draw #4		
Lab Draw #5		

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Endotracheal Intubation and Mechanical Ventilation Skills Checklist #DAHS-NSCEIMV14

References:
UC Davis Health Clinical Policy 17003: Airway Management for Adult Inpatients
UC Davis Health Clinical Policy 17038: Pediatric and Neonatal Airway

	Date	Verifier Initials
Identify indications for endotracheal intubation and mechanical ventilation.		
Assemble the necessary equipment for the insertion of the ETT.		
State nursing responsibilities during intubation.		
Confirm ETT placement		
Assess proper cuff inflation.		
Describe various modes/methods of ventilation.		
Perform ventilator checks and breathe sound auscultation every two hours and document appropriately.		
Perform alarm checks for all ventilation parameters.		
Auscultate breath sounds and vital signs every two hours.		
Suction patient as needed.		
Monitor for changes in oxygenation saturations.		
Properly and safely stabilize airway.		
Administer paralytics and sedatives as ordered.		
State conditions to be reported to physician.		
Describe screening criteria for SBT.		
Monitor patient carefully during SBT.		
Assemble equipment necessary for extubation.		
Perform extubation.		
Assess the patient after extubation and initiate post-extubation care.		
Document all pertinent data.		

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End-Tidal Carbon Dioxide Monitoring Skills Checklist #DAHS-NSCETCDM15		
References: 1. Elsevier Skills • Capnometry and Capnography 2. End-Tidal Carbon Dioxide Measurement: Continuous Monitoring		
If the patient was not intubated, applied the ETCO2-nasal cannula and connected it to the capnograph.		
If the patient is intubated, assembled the airway adapter, and connected it to the patient circuit as close as possible to the patient's ventilator connection.		
Observed waveform for quality.		
Fluid Resuscitation Skills Checklist #DAHS-NSCFR14		
References: 1. ATLS, Advanced Trauma Life Support for Doctors, 8th Ed., 2008 2. TNCC, Trauma Nursing Core Course, Provider Manual, 6th Ed., 2007		
Assess for signs/symptoms of hypovolemia.		
Notify charge nurse and MD of evidence of hypovolemia.		
Administer fluids as ordered. State rationale, volume and rate for each. (Crystalloids, Colloids, Blood Products)		
Obtain and review any additional hemodynamic, lab, and diagnostic assessments.		
HeartMate II VAD Aware Training Online Module #DAHS-NGNVADA15		
Completion of HeartMate II VAD Aware Training **Online Module** #DAHS-NGNVADA15		

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HOTLINE® Fluid Warmer Equipment Checklist #DAHS-NSCHFWE16		
References: 1. HOTLINE® Blood and Fluid Warmer Operator's Manual		
Check fluid reservoir, ensure level of fluid is above minimum indicator (add recirculating solutions to the reservoir through the fill port if required).		
Plug in HOTLINE® - does not contain batteries		
Remove the reflux plug from socket on right side of HOTLINE® Warmer		
Plug the twin-Tube Connector on the HOTLINE® Fluid Warming Set into the socket		
Turn ON the power switch (green operating LED illuminates, the recirculating temperature display will begin to increase, the recirculating solution path in the HOTLINE® will automatically prime). Ensure recirculating path is fully primed before connecting to IV fluid.		
Remove the end cap of warming set and inspect tubing; confirm integrity of the IV pathway. Ensure these is no breach between the recirculating solution path and the patient's IV path		
Connect the IV fluid and IV administration set to the HOTLINE® Fluid Warming Set		
Fully prime the IV administration set, the HOTLINE® Fluid Warming Set, and patient extension set (if used)		
Connect the distal end of the HOTLINE® Fluid Warming Set to the patient's IV access site without entrapping air		
WARNINGS; 1. Remove all air in lines 2. Do not stick the HOTLINE® Fluid Warming Set with needles 3. Do not use if temperature rises above 42°C 4. Do not use with pressure devices generating over 300 mmHg. See Operator's Manual for additional information		
After Use: Turn OFF power switch, insert reflux plug into socket, dispose of blood tubing, wipe down external surfaces with mild liquid detergent soap and warm tap water and soft cloth		
Intoximeter Skills Checklist #DAHS-DAHS-NGNISC18		
Review education module.		
Demonstrate the Intoximeter device components and their function.		
Demonstrate proper use of the intoximeter device using the manual sampling method.		
Document result in the POCT section of the EMR		
State how to care for the device which includes cleaning, storage and changing the batteries (two AA)		

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MDI with Spacer Skills Checklist #DAHS-NSCMDIS14		
References: 1. UC Davis Health Policy 17020: Inhaled Pulmonary Drug Administration (Excluding Pentamidine/Ribavirin/Surfactant)		
Demonstrate knowledge of how the Pharmacy is notified for MDI.		
Verbalize how to administer MDI with Spacer correctly.		
Prior to and immediately after use of inhaled bronchodilators, antibiotics and steroids, the patient's pulse, respiratory rate and breath sounds are assessed. Also, any cough or mucous production may be noted.		
Verbalize when to notify Respiratory Therapy or Pharmacy.		
Demonstrate documentation of teaching.		
Obtaining a 12-Lead ECG Skills Checklist #DAHS-NSCOLE14		
References: 1. Structure Standards: Critical Care, Telemetry, Maternal Child Health 2. GE Marquette Resting ECG Analysis System Operator's Manual		
Demonstrate use of 12-lead ECG available in area.		
Place patient supine and provide for patient privacy.		
Enter patient data prior to obtaining 12-lead ECG.		
Correctly place leads, ensure that there is no tension on the cable.		
Obtain 12-lead reading, recognize proper tracing, trouble-shooting artifact.		
Organ Procurement (Adult) Skills Checklist #DAHS-NSCOPA14		
References: 1. UC Davis Health Policy 4090: Organ Donation After Circulatory Death 2. UC Davis Health Policy 1562: Anatomical Donations		
Identify the causes, clinical criteria and diagnostic tests for brain death.		
Identify potential donors.		
Describe how to notify the regional organ procurement center, the role of the transplant coordinator		
Identify, perform and document goals of management for the potential organ donor patient.		
Notify the physician of any changes in patient condition.		
Document all pertinent information.		

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Rapid Sequence Intubation (RSI) in the ED Skills Checklist #DAHS-NSCRSIED		
References: 1. Complete RSI Skill Quiz 2. ACLS and PALS Certified 3. UC Davis Health Policy 17003: Airway Management for Adult Patients 4. UC Davis Health Policy 13035: Administration of Medications for Rapid Sequence Intubation (RSI)		
Ensures all appropriate size emergency equipment is available and functional. Place all monitoring equipment on the patient correctly.		
Administer medications as ordered by physician.		
Verify endotracheal tube placement (CO_2 detector or capnography, symmetrical chest rise, bilateral breath sounds) and document all pertinent information.		
Demonstrate understanding of drugs used for RSI by passing Skill quiz with at least 80% accuracy.		
Respiratory Emergencies and Equipment Skills Checklist #DAHS-NSCREE14		
References 1. UC Davis Health Policy 17020: Inhaled Pulmonary Drug Administration (Excluding Pentamidine/Ribavirin/Surfactant) 2. Textbook of Advanced Cardiac Life Support, 2006 3. UC Davis Health Policy 13035: Administration of Medications for Rapid Sequence Intubation in Adults 4. Wells and Murphy, Manual of Emergency Airway Management, 2004		
Demonstrate ability to regulate oxygen flow via thumbscrew controller of O_2 flow meter; identify types of patients likely in need of O_2 administration.		
Describe use of and demonstrates proficiency in use of O_2 equipment		
Demonstrate setup for endotracheal intubation including equipment and drugs commonly used and state indication for ET intubation per Policy 13035		
Identify basic concepts of what alarms indicate and rationale for never turning alarms off.		
Describe or demonstrate preparation of a patient for emergent cricothyrotomy or tracheostomy; locates essential equipment		
Successfully demonstrate ET tube, tracheal and nasal/oral suctioning of airways using correct equipment and technique.		
Describe or demonstrate preparation of patient for a thoracentesis including obtaining necessary equipment; state indications for procedure and function.		
Document all respiratory treatments, medications, related procedures, assessments, interventions, and the effects of each. Re-assess patient's status PRN as indicated by the patient's condition. Obtain MD order for paralytics and sedatives in order to maintain control of patient, patient's airway, and patient's comfort.		
Demonstrate use of pulse oximetry for monitoring patient.		

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Temporary Transvenous/Epicardial Pacemaker Skills Checklist #DAHS-NSCTTEP14		
References: 1. Medtronic Technical Manual Model #5388		
Identify indications for temporary pacing.		
Set up equipment necessary for insertion of transvenous pacemaker.		
Prepare skin around insertion site.		
Assist physician with insertion of transvenous pacemaker.		
Initiation of temporary transvenous pacing or epicardial pacing		
Determine the stimulation (capture) threshold (output/mA) once a shift and PRN		
Determine the sensing threshold (sensitivity/mV) once a shift and PRN		
Set the rate and the A-V interval (if A-V sequential).		
Monitor the patient's ECG for proper pacer functioning (troubleshoot for loss of capture, sensing or failure to fire).		
Monitor the patient's response to pacing.		
Document all pertinent information.		
Thrombolytic Therapy (Tenecteplase or Alteplase) Administration and Monitoring for Acute Ischemic Strokes # DAHS-NGNTNK21		
References: UC Davis Health Clinical Policy 15019 Acute Management of Stroke		
States the “golden hour” for evaluating and treating acute stroke and the time frame for starting thrombolytic (TNK or tPA) administration with eligible patients		
Identifies when the patient was last seen without stroke symptoms		
Ensures a thorough assessment, including a complete history and physical examination, and ensured that a non-contrast head CT scan or other appropriate radiographic study was performed and interpreted		
Assesses the patient for specific contraindications prior to receiving thrombolytic therapy and advise the practitioner accordingly.		
Assesses blood glucose and treats hypoglycemia if present		
Articulates when and where to obtain a consent form for thrombolytic therapy if requested by MD		

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	Date	**Verifier Initials**
Thrombolytic Therapy (Tenecteplase or Alteplase) Administration and Monitoring for Acute Ischemic Strokes # DAHS-NGNTNK21, continued		
Provides routine stroke care as prescribed		
Establishes two IV access sites when indicated		
Establishes continuous cardiac monitoring		
Demonstrates proper calculation, preparation, and infusion of thrombolytic medication. Identifies the correct dose based on the patient's weight. Ensures that the total dose does not exceed maximum parameters.		
States importance of and frequency of vital signs, neurological checks, and other assessments BEFORE, DURING and POST infusion of thrombolytic medication.		
Institutes fibrinolytic bleeding precautions and verbalizes what actions to take if adverse reaction(s) noted (neurological changes, BP, bleeding, etc.) with thrombolytic administration.		
Discusses patient/caregiver education for thrombolytic administration.		
States the most common complications encountered during thrombolytic therapy.		
States the desired systolic and diastolic BP for patients undergoing treatment for an acute ischemic stroke.		
Documents all pertinent data accurately.		
Transporting Critical Care Patients to Procedure or Diagnostic Study Skills Checklist #DAHS- NSCTCCPPDS14		
References: 1. Critical Care Nurse 2010 Vol 30, No. 4, Keeping Patients Safe during Intrahospital Transport. 2. Critical Care Medicine 2004 Vol 32, No. 1 Guidelines for the Inter- and Intrahospital transport of the critically ill patients. 3. Critical Care Nurse 2010 Vol 30, No. 4, Keeping Patients Safe during Intrahospital Transport.		
Identify the circumstances, which may prohibit the transport of a patient or require physician attendance.		
Contact the procedure area and all personnel needed to coordinate the transport.		
Assemble the necessary equipment and medications for transport, including patient's chart		
Ensure that all IV lines, catheters, tubes and wires are secure.		
Accompany the patient during transport and continually monitor the patient.		

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Using the Clipper #DAHS-NSCUTC17		
Describes the indications and contraindications for clipper use in the ED.		
Assesses patient's skin prior to clipping for skin tags, warts, moles or other skin anomalies.		
States the most common complications encountered during clipper use and the nursing interventions required.		
Demonstrates proper use of the clipper which includes cleaning and storage of the clipper.		
Vasoactive Cardiac Medications, Parental Administration Skills Checklist #DAHS-NSCVCMPA14		
References: 1. UC Davis Health Policy 13033: Administration of Adult and Pediatric IV Medications 2. Micromedex (Healthcare Series)		
Identify indications, mode of action, contraindications, and adverse reactions of common parenteral vasoactive cardiac medications.		
Determine the concentration and rate of medication infusion. State the therapeutic range of the infusion.		
Administer medication via an infusion pump. Infuse via a central venous line whenever possible.		
Perform systemic assessment prior to initiation and during administration of medication.		
Continuously monitor the ECG and frequently monitor the arterial pressure.		
Titrate the infusion to obtain the desired hemodynamic or cardiac effects.		
Zoll R Series ALS Skills Checklist # DAHS-NSCRSALS17		
Completed the assigned ZOLL R Series ALS Defibrillator **Online Modules** in UC Learning.		
TEST MODE		
Successfully demonstrates 30 Joule defibrillator test.		
Can check and change paper.		
AED/MANUAL MODE		
Can turn on device and convert from AED to manual mode.		
MONITOR MODE		
Applies 3-lead or 12-lead ECG.		
Locates Recorder key and prints a strip.		
Access HR menu and demonstrate how to change settings.		

Emergency Department Adult Skills

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	Date	**Verifier Initials**
Zoll R Series ALS Skills Checklist # DAHS-NSCRSALS17, Monitor Mode, continued		
Locate NIBP soft key and activate manual BP measurement.		
Access NIBP menu and verbalize options.		
Demonstrate how to change NIBP alarm settings.		
Change NIBP mode from Manual to Automatic.		
Change Automatic mode intervals.		
Access SpO_2 menu and verbalize options.		
Access CO_2 menu and verbalize options.		
MANUAL DEFIBRILLATION		
Locates multifunction cable.		
Confirms shockable rhythm.		
Selects defibrillator mode (red).		
Presses Energy Select or Charge button.		
Tells everyone to stand clear.		
Delivers shock at desired energy level.		
Defines and adjusts energy levels for Adults (120,150, 200J) and Pediatrics (2-4J/kg).		
CPR FEEDBACK		
Demonstrates steps to fill CPR Index™ – understands proper rate/depth.		
Shows that if rate is too slow, metronome beeps and Rate prompt appears.		
Speeds up to silence metronome and allow the Rate prompt to disappear.		
Shows that if depth is too shallow, the Depth prompt appears on the screen.		
Pushes hard to allow Depth prompt to disappear.		
Demonstrates understanding of See-Thru CPR® filtered ECG.		
SYNCHRONIZED CARDIOVERSION		

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	Date	**Verifier Initials**
Zoll R Series ALS Skills Checklist # DAHS-NSCRSALS17, Synchronized Cardioversion (Continued)		
Puts device into SYNC mode.		
Selects desired energy.		
Presses charge button.		
Tells everyone to stand clear.		
Delivers synchronized shock.		
States and demonstrates that SYNC must be activated for each and every synchronous cardioversion.		
PACING		
Turns up pacing output (mA) until capture is achieved – identifies capture.		
Adjusts pace rate.		
Understands pausing for visualizing patients underlying rhythm.		
PADS		
Connects OneStep™ pads to OneStep cable (or other pads/paddles if applicable).		
Opens OneStep packaging correctly		
Demonstrates proper pad placement for defibrillation, pacing, and cardioversion.		
Identifies CPR Sensor and explains its purpose.		
INTERNAL PADDLES		
Understands how to connect internal paddles to OneStep™ cable.		
Selects defibrillator mode (red).		
Understands 10J default energy level with range of 1 to 50 Joules.		
SUPERUSER/TRAINER		
Demonstrate how to use additional options (Mentor mode, Set the clock, etc.).		
Understands how to change parameter settings (NIBP, EtCO2, SpO2).		
Understands purpose of Code Marker.		
Can access data from the code (Print Chart, Print Log, or Transfer Data).		