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Pulmonary Services Lab Skills			
Name:	Employee ID #:		
Unit:	Title:		
Due Date:			
PERFORMANCE CRITERIA - Unless otherwise specified all skills will be demonstrated in accordance with the appropriate UC Davis Health Policy and Procedure.			
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Skill/Learning Not all skills are applicable to all Nursing areas – if not applicable mark as N/A	Completed Online Module	Date Completed (or N/A)	Verifier Initials
Adult Respiratory Assessment Skills Checklist #DAHS-NSCARA14			
Arterial Puncture and Blood Gas Interpretation #DAHS-NSAPBGI21 Performs per Clinical Policy 17012 Arterial Puncture - Adults and Children			
Bronchoscopy Assistance Skills Checklist #DAHS-NSCBABD14			
Cardiopulmonary Exercise Testing (CPET) Skills Checklist # DAHS-NSCPET21			
Exercise Induced Bronchospasm (EIB) or (EIA) Skills Checklist # DAHS-NSCEIB21			
High Altitude Simulation Testing (HAST) Skills Checklist #DAHS-NSCHAST21			
MDI with Spacer Skills Checklist #DAHS-NSCMDIS14			
Metabolic Measurements - Resting Energy Expenditure/Vd/Vt Skills Checklist #DAHS-NSCMMREEVDVT14			
Pulmonary Function Testing Skills Checklist #DAHS-NSCPFT14			
Six Minute Walk (6MWT) Skills Checklist #DAHS-NSC6MWT21			



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ПЕА	Fractice of Nursing	Page 2 of 7
Pulmon	ary Services Lab Skills	
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		SIGNATURE PAGE:
Signature	and Printed Name of Verifier (preceptor or other	er verified personnel) who have initialed on this form:
Initial:	Print Name:	Signature:
PRECEPT	EE STATEMENT AND SIGNATURE:	
		s and Procedures and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and
	knowledge of the resources available to answer questions	

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Signature

Printed Name

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Pulmonary Services Lab Skills			
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	Date	Verifier Initials
Adult Respiratory Assessment Skills Checklist #DAHS-NSCARA14		
References: 1. Elsevier Clinical Skills: Oxygen Therapy and Oxygen Delivery (Pediatric) 2. Elsevier Clinical Skills: Oxygen Therapy and Oxygen Delivery (Respiratory Therapy)		
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 emergency respiratory equipment.		
Locate/describe emergency respiratory equipment.		
Document all pertinent information in the appropriate locations.		

Bronchoscopy Assistance Checklist #DAHS-NSCBABD14

References:

- 1. UC Davis Health Pulmonary Services Laboratory Policy and Procedure: Standard Bronchoscopy Assistance Procedure
- 2. Olympus Bronchoscope user'sguidebook
- 3. Olympus NStream manual
- 4 Elsevier Clinical Skills: Bronchoscopy (Pediatric)
- 5. Elsevier Clinical Skills: Flexible Bronchoscopy (Respiratory Therapy)

Demonstrate appropriate monitoring and assessment of patient pre, during and post procedure.

Assist with patient preparation.

Pulmonary Services Lab Skills

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Bronchoscopy Assistance Checklist #DAHS-NSCBABD14	, continued	Date	Verifier Initials
Assist with medications and equipment as required.			
Process, clean and disinfect bronchoscope according to departmen	t policies and procedures.		
Complete procedure documentation accurately and route appropria	tely.		
Work as a team member in procedure planning, implementation, an	d follow-up.		
Cardiopulmonary Exercise Testing (CPET) Skills Checklist	#DAHS-NSCPET21		
References: 1. American Thoracic Society, & American College of Chest Physmedicine, 167(2), 211–277. https://doi.org/10.1164/rccm.1672. Cardiopulmonary Exercise Testing (CPET)	sicians (2003). ATS/ACCP Statement on cardiopulmonary exercise testing. America 7.2.211	an journal of respiratory a	and critical care
Review relative and absolute contraindications-consult MD if neede	d.		
Place ECG leads, size patient to equipment based on order.			
Perform necessary pretesting assessments including vitals, SVC, s Pulmonary Function Testing: Spirometry (Respiratory Therapy).	pirometry, and maximum voluntary ventilation (MVV), according to Elsevier skills-		
Select protocol with MD based on exercise tolerance.			
Encourage patient during each stage, baseline, freewheel, exercise	and recovery.		
Address RPE at peak exercise.			
Recover and rest patient, and release.			
Disconnect equipment and clean as necessary.			
Document the procedure in the patient's electronic chart.			
Exercise Induced Bronchospasm Skills Checklist #DAHS-I	NSCEIB21		
Obtain pre-exercise vitals and spirometry according to Elsevier skills	s-Pulmonary Function Testing: Spirometry (Respiratory Therapy).		
Exercise patient for 4-8 minutes, with nose clips, based on patient's	predicted workload at different increments.		
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Pulmonary Services Lab Skills			
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Exercise Induced Bronchospasm Skills Checklist #DAHS		Date	Verifier Initials
Post exercise obtain spirometry according to Elsevier skills-Pulmon	ary Function Testing: Spirometry (Respiratory Therapy) at timed increments.		
If appropriate, give bronchodilator, according to Elsevier skills-Medi	cation Administration: Metered-Dose Inhalers (Respiratory Therapy).		
Document the procedure in the patient's EMR. Complete appropriat	e billing.		
Clean equipment according to manufacturer's instructions.			
High Altitude Simulation Testing (HAST) Skills Checklist #	DAHS-NSCHAST21		
References:			
1. Department Policy III-08 High Altitude Simulation Testin 2. Department policy II-1 Infection Control	<u>ng</u>		
Performs per Departmental Policy III-08 High Altitude Simulation Te	esting		
Demonstrate appropriate monitoring and assessment of patient pre	, during and post procedure.		
Complete procedural documentation accurate and appropriate.			
Clean and disinfect surfaces and equipment according to Departme Control.	ent Policy III-8 High Altitude Simulation Testing and department policy II-1 Infection		
MDI with Spacer Skills Checklist #DAHS-NSCMDIS14			
References: 1. UC Davis Health Policy 17020: Inhaled Pulmonary Drug Admin 2. Elsevier skills-Medication Administration: Metered-Dose Inhale	istration (Excluding Pentamidine/Ribavirin/Surfactant) ers (Respiratory Therapy)		
Demonstrate knowledge of when to give bronchodilator in the Pulm	nonary Service Lab		
Verbalize how to administer MDI with Spacer correctly.			
Prior to and immediately after use of inhaled bronchodilators, antibi assessed. Also, any cough or mucus production may be noted.	otics and steroids, the patient's pulse, respiratory rate, and breath sounds are		
Demonstrate documentation of teaching			

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Pulmonary Services Lab Skills				
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Date Verifier Initials				
Metabolic Measurem	ents - Resting Energy Expenditure/Vo	I/Vt Skills Checklist #DAHS-NSCMMREEVDVT14		

Metabolic Measurements - Resting Energy Expenditure/vd/vt Skills Checklist #DAHS-NSCMMREEVDV114	
References: 1. UC Davis Health Pulmonary Services Laboratory Policy and Procedure VIII-1: Metabolic Measurements (REE) 2. Refer to MGC Ultima Series Cardiorespiratory Diagnostic Systems Manual: Indirect Calorimeter 3. UC Davis Health Policy 2002: Aerosol Transmissible Diseases Control Plan 4. Elsevier skills-Mechanical Ventilation: Metabolic Measurement Using Indirect Calorimetry (Respiratory Therapy)	
Coordinate with patient's nurse for optimal testing environment (as required).	
Safely apply collection circuit or face tent.	
Collect data accurately for required time period. Obtain ABG sample as indicated and ordered per Clinical Policy 17012 Arterial Puncture - Adults and Children	
Continuously monitor patient during testing.	
Document procedure and process reports completely.	
Clean equipment according to manufacturer's instructions.	
References: 1. UC Davis Health Pulmonary Services Laboratory Policy and Procedure III-1: Pulmonary Function Testing. 2. UC Davis Health Policy 2001: Blood-Borne Pathogen Exposure Control Plan 3. UC Davis Health Policy 2002: Airborne Pathogen Exposure Control Plan	
 Elsevier Skills: Pulmonary Function Testing: Spirometry Testing for the Pediatric Patient (Respiratory Therapy) Elsevier Skills: Pulmonary Function Testing: Spirometry (Respiratory Therapy) Elsevier Skills: Pulmonary Function Testing: Body Plethysmography (Respiratory Therapy) Elsevier Skills: Pulmonary Function Testing: Lung Diffusing Capacity Measurement in Pediatric Patients (Respiratory Therapy) Elsevier Skills: Pulmonary Function Testing: Nitrogen Washout Testing (Respiratory Therapy) Elsevier Skills: Pulmonary Function Testing: Lung-Diffusing Capacity Measurement (Respiratory Therapy) 	
 Elsevier Skills: <u>Pulmonary Function Testing: Lung Diffusing Capacity Measurement (Respiratory Therapy)</u> Elsevier Skills: <u>Pulmonary Mechanics (Respiratory Therapy)</u> 	
Complete equipment calibration sequences as required, and document as required.	
Select appropriate testing equipment for patient diagnosis and ability.	
Assemble breathing circuit including bacteria filter.	

Perform Pulmonary Function Test utilizing ATS guidelines and Departmental Policy III-1 Pulmonary Function Testing

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<u> </u>				
Pulmonary Function Testing Skills Checklist #DAHS-NS	CPFT14 Continued	Date	Verifier Initials	
Ensure data obtained is reliable and accurate.				
Triage complications appropriately, should any occur.				
Generate and route result reports appropriately.				
Document procedure and process reports completely.				
Clean equipment according to manufacturer's instructions.				
Six Minute Walk Test (6MWT) Skills Checklist #DAHS-N	SC6MWT21			
References: 1. Elsevier Skills- 6-Minute Walk Test (Respiratory Therapy) 2. ATS Committee on Proficiency Standards for Clinical Pulmor care medicine, 166(1), 111–117. https://doi.org/10.1164/ajrcc	nary Function Laboratories (2002). ATS statement: guidelines for the six-minute walk to cm.166.1.at1102	est. American journal of r	espiratory and critical	
Review relative contraindications-consult MD if needed.				
Perform pre-assessment, review patient's walking stability.				
Prepare the patient for testing.				
Read ATS statement for 6MWT in even tones, demonstrate walking.				
Track vitals, number of laps and partial laps completed.				
Recover and rest patient.				
Document the procedure in the patient's electronic record.				