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| UCDAVIS | Center for Professional |
|----------------|-------------------------|
| HEALTH | Practice of Nursing |

| 2024 POINT OF CARE TESTING- For Emergency Department Only | | | | | | |
|------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------|----------------------------------|---------------------------|---------|--|
| Name: Employee ID#: | | | | | | |
| Unit: | Title: | | | | | |
| Due Date: | | | | | | |
| This skill will be considered complete when a | ill below performance | criteria are completed and page 1 has | been scanned and emailed | d to: <u>hs-cppn@ucda</u> | vis.edu | |
| | | | 1 | | | |
| Skill/Learning Not all skills are applicable to all Nursing a | ole mark as N/A | Completed Online Module | Date Completed (or N/A) | Verifier Initials | | |
| Cobas® Liat® System Checklist 2024 | | DAHS-NSCCOBAS24-POCT | | | | |
| ColoScreen Checklist 2024 | | DAHS-NSCCOLO24-POCT | | | | |
| Gastroccult Checklist 2024 | | DAHS-NSCGAST24-POCT | | | | |
| Nova StatStrip Checklist 2024 | | DAHS-NSCNOVA24-POCT | | | | |
| pH Paper Checklist 2024 | | DAHS-NSCPHP24-POCT | | | | |
| Urine Dipstick/Uristix Checklist 2024 | | DAHS-NSCURID24-POCT | | | | |
| Urine Pregnancy Test Checklist 2024 | | DAHS-NSCURIP24-POCT | | | | |
| | | SIGNATURE PAGE: | | | | |
| Signature and Printe | d Name of Verifier (pre | eceptor or other verified personnel) who | have initialed on this for | m: | | |
| Initial: Print Name: | Signature |): | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| PRECEPTEE STATEMENT AND SIGNATURE: | | | | | | |
| I have read and understand the appropriate UC Davis Heal verified skills as noted, and I have the knowledge of the res | | | emonstrated the ability to perfo | rm the | | |
| | | | | | | |
| Printed Name | | Signature | | | | |

Name:

Unit:

2024 POINT OF CARE TESTING- For Emergency Department Only

Employee ID#:

Title:

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| Due Date: | | | | | |
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| | | | <u></u> | | |
| С | obas® | Liat® System Checklist 2024 # DAHS-NSCCOBAS24-POCT | | | |
| | EFEREN | • | - | | |
| | | Davis Health Dept. Pathology & Laboratory Medicine (QC book located in the ED) | | | |
| | 2. <u>UC l</u> | Davis Health Policy POCT.59: Roche cobas Liat System, Molecular testing of Infectious Disease | Date | Verifier Initials | |
| | | Completes online module and reads associated policy | | | |
| | | Describes sample collection and handling | | | |
| | | Describe the stability and handling of the reagent kits | | | |
| | | Verbalizes understanding of valid results. Articulates what to do when an indeterminate or invalid result occurs | | | |
| | | Direct observations of routine patient testing, including, as applicable, patient identification and sample processing and | | | |
| | | testing | | | |
| | | Demonstrates routine cleaning of instrumentation and immediate work area | | | |
| С | oloScr | een Checklist 2024 # DAHS-NSCCOLO24-POCT | | | |
| R | EFEREN | | | | |
| | | avis Health Policy POCT.19: Occult Blood, Fecal by Helena Laboratories ColoScreen Screen: A Test for Occult Blood, Package Insert, Helena Laboratories | | | |
| | | | Date | Verifier Initials | |
| | | Completes online module and associated policy | | | |
| | | Identify factors that may affect the guaiac test | | | |
| | | Describes collection of the stool specimen (able to teach patient for home use) | | | |
| | | Demonstrates proper testing procedure using ColoScreen developer | | | |
| | | Correctly interprets specimen results | | | |
| | | Demonstrates how to perform QC using the internal ColoCheck Monitors. Verbalizes understanding of procedure to follow when control monitors fail | | | |
| 1 | | Describes the stability and handling of the quaics slides and ColoScreen developer | | 1 | |

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File Checklists in Home Department for 2 Years

| 2024 POINT OF CARE TESTING- For Emergency Department Only | | | |
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| Gastroc | cult Checklist # DAHS-NSCGAST24-POCT | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------------------|
| REFERENCES: | | | |
| UC Davis Health Policy POCT.20: Occult Blood, Gastric Fluid Gastroccult, Package Insert, Beckman Coulter | | Data | Varifier Initials |
| Z. Gusti | Completes online module and reads associated policy | Date | Verifier Initials |
| | Identify factors that may affect the Gastroccult test | | |
| | Demonstrates proper testing procedure of gastric aspirate, using Gastroccult developer | | |
| | Correctly interprets results | | |
| | Demonstrates how to perform QC using internal Performance Monitors. Verbalizes understanding of procedure to follow when control monitors fail | | |
| | Describes the stability and handling of the Gastroccult slides and developer | | |
| Nova St | atStrip Checklist # DAHS-NSCNOVA24-POCT | | |
| References: 1. Instructions for Use: Nova Biomedical StatStrip Glucose Hospital Meter System. Version 1.86. UC Davis Health 2. UC Davis Health Policy POCT.51: Glucose, Whole Blood by Nova StatStrip Glucose Hospital Meter System | | Date | Verifier Initials |
| | Completes online module and reads associated policy | | |
| | Describes the Nova StatStrip Glucose Hospital Meter System components and their functions | | |
| | Describes the stability and handling of glucose test strips and controls, including open dating, expiration dates and procedure notes | | |
| | Describes specimen requirements: amount, types, and recommended anticoagulants | | |
| | Describes the conditions when it is not appropriate to perform a glucose fingerstick | | |
| | Demonstrates how to perform quality control testing using one control solution. Describes when QC must be run, what QC Lockout is, and what to do if the QC test results FAIL | | |
| | Demonstrate how to run a patient test. (Using one control run as a patient) | | |
| | Describes the procedure for critical values and questionable patient test results | | |
| | Describes the limitations of the Nova StatStrip Glucose Hospital Meter System glucose test results | | |
| | Demonstrates how to review results on the meter | | |
| | Describes the routine maintenance for the Nova StatStrip Glucose Hospital Meter System, docking station, and accessory box | | |

Verifier Initials

Verifier Initials

| Tractice of t | Nursing | | | Page 4 of 5 | |
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| pH Paper Checklist 2024 | | # DAHS-NSCPHP24-POCT | | | |
| Instructions for Use: pHizatest pHizatest Specification Sheet, Micro Essentials pHizatest Pro | 23: pH Fluid by pHydracid Paper Product Insert. Rev. Nov 15, 2019 | | D. J. | Verifica lettele | |

Urine Dipstick/Uristix Checklist 2024

DAHS-NSCURID24-POCT

REFERENCES:

UC Davis Health Policy: POCT.54: Urine Dipstick by Siemens Uristix and Multistix 10SG Reagent Strips

Describes the stability and handling, including open dating, expiration dates and quality control

- MAS UA Control, Package insert, Thermo Scientific.
- Multistix 10 SG Reagent Strips, Package insert, Siemens.

Describes the limitations of the procedure

- Uristix Reagent Strips, package insert, Siemens.
- Keto-Diastix Reagent Strips, Siemens.
 - Completes online module and reads associated policy

 Completes online module and reads associated policies Describes indications of use for each paper type

Describes/demonstrates how to perform and result a test

- Collects appropriate urine specimen in clean, dry container
- Demonstrates proper test procedure
- Properly compares the reagent areas to the corresponding color chart on the bottle label at the times specified
- Demonstrates quality control testing using the MAS UA controls. Describes stability of controls and when controls must
- Verbalizes understanding of procedure to follow when control results are out-of-range

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Date

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| | 2024 POINT OF CARE TESTING- For Em | ergency Department Only | | | |
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| Urine Pregnancy Test Checklist 2024 # DAHS-NSCURIP24-POCT | | | | |
|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|----------------------|
| 2. Sure- | ICES: lavis Health Policy POCT.41: hCG Pregnancy Test, Urine by Sure-Vue hCG -Vue® Urine hCG, Package Insert, Fisher Scientific Company -Vue® hCG Urine Control Set, Package Insert, Fisher Scientific Company | | Date | Verifier Initials |
| | Completes online module and reads associated policy | | | |
| | Collects appropriate urine specimen in clean, dry container. Equilibrate urine and test device to room temperature | , | | |
| | Demonstrates proper test procedure | | | |
| | Correctly interprets results | | | |
| | Verbalizes understanding of valid results (internal procedural controls). Articulates what to do when there is no coline visible | ontrol | | |
| | Demonstrates quality control testing using Sure-Vue positive and negative hCG controls. Describes stability of controls and when they must be run | | | |

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