

General Core Competencies and Skills

Name:	Employee ID #:
Unit:	Title:

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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General Core Competencies These competencies are applicable to all Nursing areas and must be completed by all nurses.	Skill Code (For CPPN Use Only)	Date Completed	Verifier Initials
Core Skill: Collaboration & Communication	DAHS-NCCCAC12		
Nursing Report	DAHS-NSCNR15		
SBAR Communication	DAHS-NSCSBARC15		
Core Skill: Cultural Sensitivity/Patient-Centered Care	DAHS-NCCCSPCC12		
Nurse Patient Relationship	DAHS-NSCNPR15		
Core Skill: Evidence-Based Practice	DAHS-NCCEB12		
Core Skill: Infection Prevention	DAHS-NCCIP12		
Hand Hygiene	DAHS-NSCHH15		
Isolation Precautions	DAHS-NSCIP15		
Core Skill: Informatics	DAHS-NCCIFO12		
Core Skill: Medication Safety	DAHS-NCCMS12		
Nursing BCMA Core Workflows	DAHS-NSCNBCMACW16		
Core Skill: Patient Rescue	DAHS-NCCPR12		
Code Management	DAHS-NSCCM15		
Core Skill: Patient Safety	DAHS-NCCPS12		
Fall Prevention for RNs	DAHS-NSCFPFRN		
Incident Report	DAHS-NSCIR15		
Restraints	DAHS-NSCR09		
Suicide Risk	DAHS-NSCSRA-17		
Core Skill: Professional Practice	DAHS-NCCPP12		

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Skills Skills listed as "Performs per Policy" are located <u>only</u> within the first 3 pages for sign off. Not all skills are applicable to all Nursing areas – if not applicable, mark skill N/A	Skill Code (For CPPN Use Only)	Date Completed	Verifier Initials
Adult ABG Verification Check Sheet	DAHS-NSCAABGV13		
Adult IV Verification Check Sheet	DAHS-NSCRNIV		
Adult Nasopharyngeal and Oropharyngeal Airway Insertion: Performs per UC Davis Health Policy 17003, Attachment 1 Adjunct Airways	DAHS-NSCNOAI15		
Basic Dysrhythmia Detection and Treatment Skills Checklist	DAHS-NSCBDDT25		
BD Alaris IV Infusion System	DAHS-NSCBD18-ALARIS		
Blood Culture Collection Adult: Performs per UC Davis Health Policy 13015: Blood Culture Collection	DAHS-NSCBCCA15		
Blood Culture Collection for Neonates and Peds: Performs per UC Davis Health Policy 13015: Blood Culture Collection	DAHS-NSCBCCNP15		
Blood Product Administration: Performs per UC Davis Health Policy 13012, Administration of Blood and Blood Components	DAHS-NSCBPA15		
CADD Pump Skills Checklist	DAHS-NSCCADDPPE11		
Central Line Maintenance Bundle: Performs per UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric) and Attachment 4: Central Line Indications and Bundles	DAHS-NSCCLMB15		
Gastrostomy Tube Skills Checklist	DAHS-NSCGT14		
Insulin Pen Use Skills: Performs per UC Davis Health Policy 4055 Medication Administration Attachment 6 Insulin Pen Administration	DAHS-NSCIPU15		
Intravenous Heparin Infusion	DAHS-NSCIVHI14		
Nasal Cannula or Oxygen Mask Application: Performs per UC Davis Health Policy 6018: Oxygen Administration	DAHS-NSCNCOMA15		
Nurse Swallow Screen in Patients with Stroke	DAHS-NSCNSSPS15		
Obtaining a 12 lead ECG Skill Checklist	DAHS-NSCOLE14		
Pain Management	DAHS-NSCPM15		

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Pediatric ABG Verification Check Sheet	DAHS-NSCPABGV10		
Pediatric IV Verification Check Sheet	DAHS-NSCPIV		
Pyxis MedStation® ES System	DAHS-NSCPXMES14		
Seizure Precautions: Performs per UC Davis Health Policy 15009: Seizure Precautions	DAHS-NSCSP15		
Suctioning (Adult): Tracheal : Performs per UC Davis Health Policy 17003 , and Attachment 3	DAHS-NSCSET15		
Suctioning, Nasopharyngeal and Nasotracheal (Adult and Pediatric) Skills: Performs per UC Davis Health Policy 17038, Pediatric and Neonatal Airway and Policy 17003, Airway Management for Adult Inpatients	DAHS-NSCSNN15		
Tracheostomy Care: Performs per UC Davis Health Policy 17003: Airway Management for Adult Inpatients Attachment 3 Adult Tracheostomies	DAHS-NSCTC15		
Urethral Catheter Insertion: Performs per UC Davis Health Policy 9010: Urethral Catheter Insertion, Maintenance, and Removal	DAHS-NGNUCI		
Zoll Defibrillator: Select appropriate Zoll R Series (R Plus, R-ALS, or R-ALS for NICU and Peds Acute Care; depends on care area) from Skills- Addendums	Select & print from Addendums		

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Printed Name and Signature of verifier (preceptor or other verifier) 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:	Date:
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For supporting standards and instructions on how to complete Core Skills, please review [General Core: Supporting Standards and Validations](#).

Core Skill: Collaboration & Communication #DAHS-NCCCAC12	Date	Verifier Initials
Expected Outcome: The Nurse will function effectively within nursing role and interprofessional teams		
Demonstrates consistent performance in precepted experience of professional collaboration and communication		
Nursing Report #DAHS-NSCNR15 - For each patient, includes background information, assessment data, nursing diagnoses, interventions, outcomes, and evaluation, family information, discharge plan, and current priorities. - Asks the nurse from oncoming shift if they have any questions regarding information provided.		
SBAR Communication #DAHS-NSCSBARC15 - Contacts the primary practitioner directly responsible for making care decisions for the specific patient or the person receiving the patient communication hand-off. - Initiates SBAR communication, introduced self, and provided the name of the patient to the recipient of the information. Included situation, background information, assessment findings and observations of current condition and insights offered recommendations to correct problem.		

Core Skill: Cultural Sensitivity/Patient Centered Care #DAHS-NCCCSPCC12	Date	Verifier Initials
Expected Outcome: The nurse will provide care that recognizes and respects patient preferences, values, and needs. Nurses shall use cross cultural knowledge and culturally sensitive skills in implementing culturally congruent nursing care.		
Patient-Centered Care		
Population-Specific Care		
Advance Directives for Healthcare & Physician Order for Life-Sustaining Treatment Online Module #DAHS-NGNADPOLST16		
Age Specific Care Online Module #DAHS-NGNASC11- <i>Passing score of 85% on test</i>		
Nurse Patient Relationship #DAHS-NDCNPR15 - Verifies the correct patient using two identifiers per UC Davis Health Policy 2702, Patient Identification and Safety Bands for the Hospitalized Patient - Creates a climate of warmth and acceptance - Uses appropriate nonverbal behaviors (e.g., good eye contact, open relaxed position, sitting eye level with patient) - Uses therapeutic communication skills such as restating, reflecting and paraphrasing to identify and clarify strategies for attainment of mutually agreed-upon goals. - Uses effective communication skills to discuss discharge and termination issues and to guide discussion related to specific changes in patient's thoughts and behaviors. - Summarizes and restates with patient what was discussed during interaction, including goal achievement		
Core Skill: Evidence-Based Practice #DAHS-NCCEB12	Date	Verifier Initials

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Expected Outcome: The nurse will provide care that recognizes and respects patient preferences, values, and needs. Nurses shall use cross cultural knowledge and culturally sensitive skills in implementing culturally congruent nursing care.		
Evidence-Based Practice (EBP)		
Demonstrates consistent performance in precepted experience of ability to find EBP and demonstrate use		

Core Skill: Infection Prevention #DAHS-NCCIP12	Date	Verifier Initials
Expected Outcome: The nurse will utilize current evidence and standards of care in prevention, recognition, and treatment of patient infection.		
Demonstrates consistent performance in precepted experience of using infection prevention standards of care		
Hand Hygiene #DAHS-NSCHH15 Consistently demonstrates appropriate hand hygiene.		
Isolation Precautions #DAHS-NSCIP15 Consistently demonstrates appropriate use of standard precautions and transmission-based precautions.		

Core Skill: Informatics #DAHS-NCCIFO1	Date	Verifier Initials
Expected Outcome: The nurse will effectively utilize information and technology to communicate, improve safety, and support decision making		
Complete and maintain EMR Training		
Documentation Standards according to unit specific charting		
Navigates in Windows environment effectively		
Uses computer technology safely (log-in/log-out, protects passwords)		

Core Skill: Medication Safety #DAHS-NCCMS12	Date	Verifier Initials
Expected Outcome: Nurse will administer patient medications in a consistent safe manner		
Completed Medication Policies and Medication Facts module- DAHS-NGNMPMF20		
Demonstrates consistent performance in precepted experience of safe medication practices		
Nursing BCMA Core Workflows #DAHS-NSCNBCMACW16 Consistently demonstrates appropriate use of BCMA workflows.		

Core Skill: Patient Rescue #DAHS-NCCPR12	Date	Verifier Initials
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Expected Outcome: The nurse will effectively manage patient emergencies.		
Demonstrates consistent performance in precepted experience of appropriate management of patient emergencies.		
Code Management #DAHS-NSCCM15 Consistently performs per policy in emergency situations.		

Core Skill: Patient Safety #DAHS-NCCPS12	Date	Verifier Initials
Expected Outcome: The nurse will effectively manage patient emergencies.		
Demonstrates consistent performance in precepted experience of provision of patient safety.		
Fall Prevention for RNs #DAHS-NSCFPFRN - Completed Fall Prevention for RNs Online Module #DAHS-NGNFPPRN10 - Assess fall score and implement appropriate clinical practice guideline and patient safety measures		
Incident Report #DAHS-NSCIR15 - Identifies when to write an incident report. - Demonstrates correct incident report documentation.		
Restraints Checklist #DAHS-NSCR09 - Completed Restraints for Hospitalized Patients Online Module #DAHS-NGNRSTR20 - Demonstrate how to attach and release the safety clip - Remove and reapply a mitt to a simulated patient. - Remove and reapply a limb restraint to a simulated patient. - Remove and reapply a belt restraint device to a simulated patient.		
Suicide Risk Assessment #DAHS-NSCSRA-17 Correctly performs suicide risk assessment per policy.		

Core Skill: Professional Practice #DAHS-NCCPP12	Date	Verifier Initials
Expected Outcome: The nurse will provide professional nursing care consistent with organization and department philosophy, values, mission, and goals		
Demonstrates consistent performance in precepted experience of professional nursing care		

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The following skills may not be applicable to all nursing areas – if not applicable, mark N/A in the Date Column.

Adult ABG Verification Check Sheet #DAHS-NSCAABGV13	Date	Verifier Initials
References: UC Davis Health Policy 17012: Arterial Puncture - Adults and Children		
Complete Blood Specimen Collection: Arterial Puncture: Arterial Blood Gas Online Module #DAHS-NGN91-ECS - Passing score of 85% on test		
Complete three (3) sticks observed by verified clinician		
Artery Location:		
Artery Location:		
Artery Location:		

Adult IV Verification Check Sheet #DAHS-NSCRNIV	Date	Verifier Initials
References: UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric)		
Complete Adult IV Online Module #DAHS-NGNAIV– Online module passing score of 85%		
Complete three (3) sticks observed by verified clinician		
Location:		
Location:		
Location:		

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Basic Dysrhythmia Detection and Treatment Skills Checklist #DAHS-NSCBDDT25

References:

- Elsevier Skills for Review: [Cardiac Monitor Setup and Lead Placement](#)
- AACN Procedure Manual for High-Acuity, Progressive, and Critical Care: Section Eight [Electrocardiographic Leads and Cardiac Monitoring](#), Wiegand, D.L. & ANCC, Elsevier, 2017.
- Emergency Nursing Core Curriculum: Chapter 12 [Cardiovascular Emergencies](#), Navaroli, J.E., Elsevier, 2018.
- Clinical Nursing Skills & Techniques 10th ed: Chapter 6 Health Assessment: [Cardiovascular Assessment](#), Elsevier, 2022

There are three ways to complete this checklist. Check with your department to determine which option(s) are acceptable.

Only ONE of the following needs to be successfully completed to satisfy this checklist:

- The ECG Interpretation Assessment is provided to new hires during CPPN onboarding. If the assessment was completed successfully, a certificate of completion and corresponding score are available in the participant's UC Learning training transcripts. Completion of the checklist objectives below is not required.
- The ECG Interpretation Course is offered by CPPN. If the course was completed successfully, a certificate of completion and corresponding score are available in the participant's UC Learning training transcripts. Completion of the checklist objectives below is not required.
- By completing the checklist objectives below.

	Date of Assessment	Verifier Initials
Passing the ECG Interpretation Assessment (score of 83% or higher)		
	Date of Course	Verifier Initials
or Completing the ECG Interpretation Course (score of 83% or higher)		
or Completing Checklist Objectives Listed Below (ONLY if this option is approved by your department)	Date	Verifier Initials
Identify proper lead placement for 5 lead cardiac monitoring.		
Explain the waves and intervals of the normal ECG and their significance.		
Identify normal sinus rhythms and the following sinus dysrhythmias and discuss the causes/treatments: sinus bradycardia, sinus tachycardia, sinus arrhythmia, and sick sinus syndrome.		
Identify the following atrial dysrhythmias and discuss the causes/treatments: premature atrial contractions, atrial flutter, atrial fibrillation, supraventricular tachycardia, and wandering atrial pacemaker.		
Identify the following junctional dysrhythmias and discuss the causes/treatments: junctional rhythm, accelerated junctional rhythm, and junctional tachycardia.		
Identify the following cardiac conduction blocks and discuss the causes/treatments: first-degree, second-degree type 1, second-degree type 2, third degree, bundle branch blocks.		
Identify the following ventricular dysrhythmias and discuss the causes/treatments: premature ventricular contractions, idioventricular rhythm, ventricular tachycardia, ventricular fibrillation, PEA, asystole.		

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BD Alaris IV Infusion System #DAHS-NSCBD18-ALARIS	Date	Verifier Initials
References: 1. UC Davis Health Policy 13056: Parenteral Infusion Pump Use 2. UC Davis Health Policy 3063: Parenteral and Enteral Infusion Pump Care, Distribution and Maintenance		
Alaris™ Pump Module		
Completed assigned Alaris Online Modules in UC Learning.		
Review BD Alaris IV Infusion System policies and procedures.		
Demonstrate Pump Setup – The patient's heart level should be in line with [CHANNEL SELECT] key. – Closes the administration set roller clamp when the safety clamp is open, to prevent free flow. – Does not use needles or blunt cannulas to access a SmartSite™ Needle-Free Valve. – Scrub the SmartSite™ Needle-Free Valve prior to any connection with a CHG/ alcohol swab pad for 5 seconds and let dry for 5 seconds, or an alcohol prep pad for 15-30 seconds and allow to air dry for 15-30 seconds. – Demonstrate System Start Up and Operation		
Demonstrate Programming with Guardrails™ Safety Software – Programming a primary infusion on the Alaris™ Pump module. – Responding to a Guardrails™ Soft or Hard Limit alarm with audio alerts and visual prompts. – Programming an intermittent infusion on the Alaris™ Pump module. – Programming a Volume/Duration infusion on the Alaris™ Pump module. – Use of the "RESTORE" feature (previous programming, VTBI, bolus). – Programming a medication bolus and describing the "Rapid Bolus" infusion feature. – Pausing an infusion by pressing the [PAUSE] hard key on the pump module and the PC unit. – The appropriate head height differential when hanging a 2° medication bag, or a 2° medication bottle.		
Demonstrate Basic Programming Without Guardrails™ Safety Software Programming of a Basic Infusion. Verbalize safety concerns when this mode is used.		
Alaris™ Syringe Module		
Demonstrate Syringe Module Setup – The patient's heart level should be in line with [CHANNEL SELECT] key. – Priming the set using the Syringe Channel Option feature "Prime Set with Syringe." (<i>Infant and Child Only</i>) – Proper priming technique when using an administration set with Pressure Sensing Disc tubing. (<i>Infant and Child Only</i>) – Clamping the tubing after priming to prevent uncontrolled flow. – Loading and unloading a syringe into the Alaris Syringe module. – Correct selection of syringe manufacturer and size.		
Demonstrate Programming with Guardrails™ Safety Software – Recognizing the Guardrails™ Soft and Hard Limit alarm with audio alerts and visual prompts. – Use of the [RESTORE] key after pausing and changing a syringe. – Use of the "NEOI" (Near End of Infusion) option. Verbalizes how to silence the alert sound. – Pausing an infusion by pressing the [PAUSE] hard key on the syringe module and the Alaris™ PC unit.		

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BD Alaris IV Infusion System #DAHS-NSCBD18-ALARIS continued	Date	Verifier Initials
Demonstrate Basic Programming <i>Without</i> Guardrails™ Safety Software – Programming of a Basic Infusion. Verbalize safety concerns when this mode is used.		
Demonstrate and Verbalize Measures to help Reduce Start-Up Delays (Infant and Child Only) – Use the smallest syringe size possible (e.g., if infusing 2.3 mL of fluid, use a 3 mL syringe). – Use compatible components which have the smallest internal volume or “dead space”. – Ensure device is as close to level of the patient’s heart as possible. Patient heart should be in line with [CHANNEL SELECT] key. – Use the [PRIME SET WITH SYRINGE] channel option on the Alaris™ Syringe module to speed up the engagement of the device’s mechanical components and decrease the syringe’s internal friction.		
– If utilizing a pre-run infusion practice (to allow for medication equilibration prior to connection to the patient), ensure the distal end of the administration set is level with or higher than the device. – Avoid use of manifolds with ports containing high pressure valves. These valves require at least 50-200 mmHg pressure to open and allow fluid flow. These high-pressure valves may cause a significant delay in therapy followed by a sudden bolus once the valve is opened, particularly at low infusion rates. Note: These recommendations are especially important when infusing high-risk or life- sustaining medications at low infusion rates (for example, <5mL/h and especially at flow rates <0.5mL/h).		
Alaris™ PCA module		
Demonstrate PCA Module Setup – The patient’s heart level should be in line with [CHANNEL SELECT] key. – System Start Up and Security key lock feature. • Use of the security key or security code when installing a new syringe or changing the syringe. – Priming the set using the “Prime Set with Syringe” feature • Prime set prior to attaching to patient. • The tubing should be clamped to prevent inadvertent or uncontrolled flow with a primed administration set. – Loading the syringe into the Alaris™ PCA module • Hold the installed syringe plunger to prevent accidental push on the plunger when lowering the drive head. • Clamp off fluid flow to the patient before loading and unloading a syringe. • Check that the installed syringe matches the manufacturer and size displayed on the pump.		
Demonstrate Programming the Alaris™ PCA module – Programing the following • PCA dose + Continuous dose infusion – How to modify PCA parameters during an active PCA infusion (PCA dose, Lockout interval, Continuous dose, Maximum limit).		
Demonstrate Accessing Patient History and the Alaris™ PCA module – How to view and clear patient history. – Verbalize that patient history data is stored as a rolling 24-hour time period. – Verbalize what actions will delete the PCA patient history.		
Demonstrate Pausing the infusion, Changing the syringe and Restoring the infusion – Clamping off fluid flow to the patient before loading and unloading a syringe. – Pause infusion, change current syringe, and then use the [RESTORE] key to restore previous programming parameters.		

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- Verbalize that the [RESTORE] key should only be used if the Drug, Therapy, Concentration and Dosing Units remain the same.		
Demonstrate Understanding of the Alaris™ PCA Pause Protocol		
- The Alaris™ PCA module will pause when hospital-established parameters on the Alaris™ etCO ₂ module are met.		
Demonstrate Understanding of the near end of infusion (NEOI) option.		
- Near end of infusion (NEOI) option allows an alert to sound at a hospital-established remaining syringe volume before the infusion is complete (Empty Syringe alert).		
- An audio prompt will sound at NEOI, which requires being silenced just once, and will not re-occur following the initial silencing until the empty syringe alert sounds.		
I am not responsible for the PCA module.		
Alaris™ EtCO₂ module		
Demonstrate Preparation for EtCO₂ Monitoring		
- Understanding of the basic parameters monitored using the Alaris™ etCO ₂ module, including basic Ventilation vs. Oxygenation and a normal etCO ₂ waveform.		
- Locating the Gas Inlet on the Alaris™ etCO ₂ module and attach the disposable.		
Alarms and Limits		
- How to view etCO ₂ alarm limits, RR alarm limits, and etCO ₂ waveform from the main display.		
- How change etCO ₂ , RR, and No Breath limits.		
Demonstrate Pre-silencing Alarm		
- Understands that this mode will only pre-silence the monitoring alarm for 2 minutes and will not silence infusion alarms.		
Demonstrate Viewing EtCO₂ Trend Data		
- Understand how to view the trend data.		
• How to tell which value has triggered an alarm (bell icon).		
• If there is no data for time period displayed, dashes (---) will be displayed.		
• Current patient data will not be displayed while Trend Data feature is being viewed		
-Demonstrate Understanding of Alarms/Alerts/Troubleshooting		
- Verbalize meaning and response to:		
• Auto zero in progress Alarm		
• Disposable Disconnected Alarm		
• Clearing Disposable Alarm		
• Disconnect Occluded Disposable Alarm		
- Verbalize possible causes and possible actions to:		
• Low etCO ₂ Alarm/High etCO ₂ Alarm		
• High FiCO ₂ Alarm		
• No Breath Detected Alarm		
I am not responsible for the EtCO ₂ module.		
BD Alaris™ Cleaning		

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CADD Pump Skills Performance Equipment Checklist #DAHS-NSCCADDPPE11	Date	Verifier Initials
Review UC Davis Health Policy 13022 Epidural Analgesia Management (non-pregnant) and 13052 Peripheral Nerve Block Insertion Analgesia Management for documentation standards.		
SYSTEM COMPONENTS		
CADD-Solis ambulatory infusion pump		
CADD Medication as ordered		
CADD administration set		
CADD disposables to be used with epidural infusions, if applicable		
Remote dose cord		
Pole mount bracket adapter		
PUMP DESCRIPTION AND BASIC OPERATION		
Press the power button to turn the pump on		
Identify the following: - Function of the green and amber indicator lights - Function of each key on the keypad - Power button - Cassette latch - Cassette/keypad lock - USB port		
Identify the following: - Remote dose cord jack - User interface (LCD screen) - Status bar - Describe what the different colors indicate - Protocol title bar - Screen title bar - Help bar - Work area - Soft key bar		
PUMP OPERATIONS AND PROGRAMMING		
Start a new patient		
Select the appropriate Therapy, Qualifier and Drug		
Unlock keypad using the code or key		
Verify Therapy, Qualifier and Drug		
Review the pump settings with an independent double check		

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CADD Pump Skills Performance Equipment Checklist #DAHS-NSCCADDPPE11 Continued	Date	Verifier Initials
Adjust the patient specific parameters per the Physician Orders		
Describe what happens when a parameter is adjusted outside of the soft limit range		
Accept the values		
ATTACHING CASSETTE/ADMINISTRATION SET		
Clamp tubing and spike medication bag		
Demonstrate attaching, latching, and locking the cassette to the pump		
State the importance of free flow protection and identify how that is accomplished using the CADD disposables		
Identify CADD pump disposables used in the epidural mode, if appropriate		
Demonstrate priming the tubing		
Position the pump, tubing, and attach the pump to the lockable pole mount bracket		
Demonstrate attaching the remote dose cord		
PUMP OPERATION AND PROGRAMMING		
Demonstrate starting the pump		
Demonstrate delivering a clinician bolus		
Demonstrate delivering a PCA dose		
Demonstrate making program changes with the pump running		
Continuous rate		
PCA dose		
PCA lockout		
Demonstrate stopping the pump		
Demonstrate changing the reservoir volume		
ALARMS		
Describe the difference between information, Low, Medium and High Priority Alarms.		
Identify and resolve alarm conditions:		
Low battery		
Reservoir volume low		
Reservoir volume is zero		
Downstream occlusion		
Battery depleted		
PUMP REPORT		

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CADD Pump Skills Performance Equipment Checklist #DAHS-NSCCADDPPE11 Continued	Date	Verifier Initials
Demonstrate going to the Tasks Menu and demonstrate:		
Starting a new patient		
Start new protocol, same patient		
Prime tubing		
Set time and date		
Adjusting the backlight intensity		
Adjusting alarm volume		
Demonstrate viewing and/or clearing pump reports:		
Given and PCA dose counters		
PCA dose graph		
Delivery history and pie chart		
Delivery log		
Event log		
Pump Safety Precautions		
Review policy 13022 Epidural Analgesia Management (non-pregnant) and 13052 Peripheral Nerve Block Insertion Analgesia Management for pump safety precautions		

Intravenous Heparin Infusion #DAHS-NSCIVHI14	Date	Verifier Initials
References:		
1. UC Davis Health Policy 13011: Pharmacologic Prevention or Treatment of Thromboembolism		
Describe the process for prescribing heparin		
Identify baseline blood tests before initiating IV heparin therapy.		
Demonstrate the independent double check process		
Demonstrate the verification of heparin administration.		
Demonstrate use of required equipment.		
State the expectation for patient monitoring.		
State the signs/symptoms of bleeding.		
State the signs/symptoms of thrombosis.		
Describe the responsibilities of a nurse in response to a heparin overdose.		
State when to notify the physician.		
Describe proper documentation.		

General Core Competencies and Skills

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Unit:	Title:

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Obtaining a 12 lead ECG #DAHS-NSCOLE14	Date	Verifier Initials
References: 1. UC Davis Health Policy 323: Nursing Intervention in the Event of Certain Medical Emergencies in Adult Patients 2. Elsevier: Electrocardiogram: 12 Lead		
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, troubleshooting artifact.		
Disconnect equipment and clean as necessary.		
Document all pertinent data and notify appropriate staff of results.		
Pain Management #DAHS-NSCPM15	Date	Verifier Initials
References: 1. UC Davis Health Policy 4054: Pain Assessment and Management		
Define "pain" according to UC Davis Health Policy 4054 .		
Use age-appropriate scale to obtain a pain intensity score.		
Perform a thorough pain assessment for a pre-verbal or non-verbal patient.		
Demonstrate appropriate documentation of pain assessment, including pain scale score, intervention and response		
Name three common sequelae of unrelieved pain.		
Name three common side effects of opioid pain medication.		
Name three non-pharmacological approaches to pain management.		
Verbalize rationale for ATC (around the clock) dosing.		
Verbalize two precautions/concerns related to PCA use.		
Able to cite one special pain management consideration for each of the following as appropriate to practice setting: • Elder patient. • Patient with chronic, non-malignant pain • Patient with current or remote history of substance abuse. Patient with pain related to a terminal illness.		
Able to name two interventions that interrupt transmission of pain signals: • At the site of injury. • At the level of the spinal cord. In the central nervous system.		

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Pain Management #DAHS-NSCPM15 continued	Date	Verifier Initials
Describe when NSAIDs are useful.		
Describe two precautions for NSAID use.		
Name two differences between nociceptive and neuropathic pain.		
Name two differences between visceral and somatic pain.		

Pediatric ABG Verification Check Sheet #DAHS-NSCPABGV10 (only if required for nursing area)	Date	Verifier Initials
References: UC Davis Health Policy 17012: Arterial Puncture- Adults and Children		
Completed Arterial Puncture (Pediatric) Online Module #DAHS-NCHAPP-ECS - Passing score of 85% on test		
Complete three (3) sticks observed by verified clinician		
Artery Location:		
Artery Location:		
Artery Location:		

Pediatric IV Verification Check Sheet #DAHS-NSCPIV (only if required for nursing area)	Date	Verifier Initials
References: UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric)		
Completed Pediatric Learning Solutions Online Modules: Pediatric Peripheral IV Care & Management (DAHS-NCHPPIVCM23-PLS) and Management of Peripheral IV Complications in the Pediatric Patient (DAHS-NCHMPIVCPP23-PLS) Online module passing score of 85%		
Complete three (3) sticks observed by verified clinician		
Location:		
Location:		
Location:		

Pyxis MedStation® ES System Equipment Checklist #DAHS-NSCPXMES14	Date	Verifier Initials
Completed Pyxis MedStation® ES Station Online Module		
Pyxis MedStation® ES system policies and procedures reviewed		
STATION BASICS		
Keyboard		
Printer paper change - move black spindle from empty roll to full roll		
Scanner		

General Core Competencies and Skills

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Pyxis MedStation® ES System Equipment Checklist #DAHS-NSCPXMES14, continued	Date	Verifier Initials
Locate and access Tutorial and Help		
Medication reference for nursing (Lexi-comp™ online via CRC or link on the Kernel)		
Sign in/sign out to the Pyxis MedStation® ES system		
Register Bio ID fingerprint identification system scan / Reset finger scan		
Main Menu screen		
PATIENTS		
All Available Patients		
Create/modify My Patient list		
REMOVE MEDICATION		
NON-PROFILE - Remove medication(s) in non-profile mode		
PROFILE - Remove profile medication: scheduled and PRN		
From My Patients view (blue dots)		
Selecting patient, then Remove		
Due Now tab will show orders due 1 hour before and 2 hours after current time		
All Orders tab - complete profile includes Due Now, PRNs, doses scheduled in future		
Review order details		
OVERRIDE MEDICATIONS		
Remove a medication with override		
Take appropriate steps for an existing order for an override medication - override warning		
RETURN MEDICATION		
Return a medication previously removed for a patient		
Scan medication barcode (if unable to scan return to Rx)		
WASTING MEDICATION		
Document amount wasting of full dose and replace as needed (not amount given)		
Document amount wasting of partial dose during remove process (not amount given)		
Document amount wasting of partial dose after completing remove process (not amount given)		
Witness waste		
Undocumented waste warning		