

Pre-Op-PACU Travel RN Skills (Perioperative Services)	
Name:	Employee ID #:
Unit:	Title:
Due Date:	
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	Skill Code (For CPPN Use Only)	Date Completed or NA	Verifier Initials
General Core PACU Skills			
Adult Nasopharyngeal and Oropharyngeal Airway Insertion	DAHS-NSCNOAI15		
Adult Respiratory Assessment	DAHS-NSCARA14		
BD Alaris IV Infusion Pump Checklist	DAHS-NSCBD18-ALARIS		
Central Line Maintenance Bundle	DAHS - NSCCLMB15		
Code Management	DAHS-NSCCM15		
Fall Prevention for RNs	DAHS-NSCFPFRN		
Gastrostomy Tube	DAHS-NSCGT14		
Incident Report: Performs per UC Davis Health Policy 1466: Incident Reports	DAHS-NSCIR15		
Isolation Precautions: Performs per UC Davis Health Policy	DAHS-NSCIP15		
Nursing BCMA Core Workflows	DAHS-NSCNBCMACW16		
Obtaining a 12-Lead ECG	DAHS-NSCOLE14		
Professional Practice Core Skill	DAHS-NCCPP12		
Pyxis MedStations ES System	DAHS-NSCPXMES14		
Respiratory Emergencies and Equipment	DAHS-NSCREE14		
Restraints	DAHS-NSCR09		
Seizure Precautions	DAHS-NSCSP15		
Suicide Risk Skills	DAHS-NSCSRA-17		
Temporal Scanner	DAHS-NSCTSC17		
Tracheostomy Care	DAHS-NSCTC15		

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Pre-Op Core Skills			
Adult IV Verification Stick Sheet	DAHS-NSCRNIV		
Blood Draws Skills Check	DAHS-NSCBD14		
Using the Clipper	DAHS-NSCUTC-17		
Lidocaine Skin Anesthetic Intradermal Injection	DAHS-NSCLFUA11		
PACU Core Skills			
Basic Dysrhythmia Detection and Treatment	DAHS-NSCBDDT15		
End-Tidal Carbon Dioxide monitoring	DAHS-NSCETCDM15		
Intravesical Chemotherapy Agent Drainage (PACU)	DAHS-NSCICADPACU		
Management of Hazardous Drug Waste and Skills	DAHS-NSCMHHDWS		
Peripheral Nerve Block	DAHS-NSCPNB24		
Recovery of the Post Anesthesia Patient in the Post-Anesthesia Care Unit	DAHS-NSCRPAPACU		

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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:	Date:
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General Core PACU Skills		
Adult Nasopharyngeal and Oropharyngeal Airway Insertion #DAHS-NSCNOAI15	Date	Verifier Initials
References: 1. UC Davis Health Policy 17003: Adult Airway Management 2. UC Davis Health Policy 17003(1): Adult Adjunct Airways		
Performs per UC Davis Health Policy 17003		

Adult Respiratory Assessment #DAHS-NSCARA14	Date	Verifier Initials
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 respiration. 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 CO ₂ 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.		

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BD Alaris IV Infusion Pump Checklist #DAHS-NDCBD18-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.		
BD Alaris IV Infusion System policies and procedures reviewed.		
Demonstrate Pump Setup <ul style="list-style-type: none"> – 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 – Understanding of what happens when [NEW PATIENT] is selected. – Understanding of the Patient Care Profile and how to change it. 		
Demonstrate Programming with Guardrails™ Safety Software <ul style="list-style-type: none"> – 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.		
BD Alaris™ Cleaning		

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BD Alaris IV Infusion Pump Checklist #DAHS-NDCBD18-ALARIS continued	Date	Verifier Initials
Alaris™ Syringe Module		
<p>Demonstrate Syringe Module Setup</p> <ul style="list-style-type: none"> – 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. 		
<p>Demonstrate Programming with Guardrails™ Safety Software</p> <ul style="list-style-type: none"> – Recognizing the Guardrails™ Soft and Hard Limit alarm with audio alerts and visual prompts. – Use of the [RESTORE] key after pausing and changing the 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. – Recommend measures to help reduce start-up delays. (<i>Infant and Child Only</i>) 		
<p>Demonstrate Basic Programming Without Guardrails™ Safety Software</p> <ul style="list-style-type: none"> – Programming of a Basic Infusion. Verbalize safety concerns when this mode is used. <p>Demonstrate and Verbalize Measures to help Reduce Start-Up Delays (Infant and Child Only)</p> <ul style="list-style-type: none"> – 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. <p>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).</p>		
I am not responsible for the Syringe Pump Module		

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BD Alaris IV Infusion Pump Checklist #DAHS-NDCBD18-ALARIS continued	Date	Verifier Initials
Alaris™ PCA module		
Demonstrate PCA Module Setup <ul style="list-style-type: none"> - The patient's heart level should be in line with [CHANNEL SELECT] key. - System Start Up and Security key lock feature. <ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> - Programing the following <ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> - 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 <ul style="list-style-type: none"> - 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. - 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 <ul style="list-style-type: none"> - The Alaris™ PCA module will pause when hospital-established parameters on the Alaris™ etCO2 module are met. 		
Demonstrate Understanding of the near end of infusion (NEOI) option. <ul style="list-style-type: none"> - 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		

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BD Alaris IV Infusion Pump Checklist #DAHS-NDCBD18-ALARIS continued	Date	Verifier Initials
Alaris™ EtCO₂ module		
Demonstrate Preparation for EtCO₂ Monitoring <ul style="list-style-type: none"> Understanding of the basic parameters monitored using the Alaris™ EtCO₂ module, including basic Ventilation vs. Oxygenation and a normal EtCO₂ waveform. Locating the Gas Inlet on the Alaris™ EtCO₂ module and attach the disposable. 		
Alarms and Limits <ul style="list-style-type: none"> How to view EtCO₂ alarm limits, RR alarm limits, and EtCO₂ waveform from the main display. How to change EtCO₂, RR, and No Breath limits. 		
Demonstrate Pre-silencing Alarm <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> Understand how to view the trend data. <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> Verbalize meaning and response to: <ul style="list-style-type: none"> Auto zero in progress Alarm Disposable Disconnected Alarm Clearing Disposable Alarm Disconnect Occluded Disposable Alarm Verbalize possible causes and possible actions to: <ul style="list-style-type: none"> Low EtCO₂ Alarm/High etCO₂ Alarm High FiCO₂ Alarm No Breath Detected Alarm 		
I am not responsible for the EtCO₂ Module		

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Central Line Maintenance Bundle #DAHS-CSCCLMB15	Date	Verifier Initials
References: 1. UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric) 2. UC Davis Health Policy 13001(4): Attachment 4: Central Line Indications and Bundles		
Performs per policy 13001		

Code Management #DAHS-NSCCM15	Date	Verifier Initials
References: 1. UC Davis Health Policy 6006: Responding to Medical Emergency Situations (Including Code Blue)		
Performs per policy 6006		

Fall Prevention for RNs #DAHS-NSCFPRN	Date	Verifier Initials
References: 1. UC Davis Health Policy 4005: Patient at Risk for Falling		
Completed Fall Prevention for RNs Online Module #DAHS-NGNFPPRN10		
Assess fall score and implement appropriate clinical practice guideline and patient safety measures		

Gastrostomy Tube #DAHS-NSCGT14	Date	Verifier Initials
References: 1. UC Davis Health Policy 8011: Enteral Nutrition for Adult Patients 2. UC Davis Health Policy 4055: Medication Administration		
Performs per policy 8011 and 4055		

Incident Reports #DAHS-NSCIR15	Date	Verifier Initials
References: 1. UC Davis Health Policy 1466: Incident Reports		
Performs per policy 1466		

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Isolation Precautions #DAHS-NSCIP15	Date	Verifier Initials
References: 1. UC Davis Health Policy 11025: Standard and Transmission Based Precautions for Infection Prevention		
Performs per policy 7003		

Nursing BCMA Core Workflows #DAHS-NSCNBCMACW16	Date	Verifier Initials
References: 1. UC Davis Health Policy 4083: Barcoded Medication Administration (BCMA)		
Performs per policy 4083		

Obtaining a 12-lead ECG #DAHS-NSCOLE14	Date	Verifier Initials
References: 1. Structure Standards: Critical Care, Telemetry, Maternal Child Health		
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.		
Disconnect equipment and clean as necessary.		
Document all pertinent data, and notify appropriate staff of results		

Professional Practice Core Skill #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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Pyxis MedStation ES System #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		
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 MEDICATIONS		
NON-PROFILE - Remove medication(s) in non-profile mode		
PROFILE - Remove profile medication: scheduled and PRN <ul style="list-style-type: none"> - 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 the future 		
OVERRIDE MEDICATIONS		
Remove a medication with override		
Take appropriate steps for an existing order for an override medication - override warning		

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Pyxis MedStation ES System #DAHS-NSCPXMES14 continued	Date	Verifier Initials
RETURN MEDICATIONS		
Return a medication previously removed for a patient		
Scan medication barcode (if unable to scan return to Rx)		
WASTING MEDICATIONS		
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		

Respiratory Emergencies and Equipment #DAHS-NSCREE14	Date	Verifier Initials
References: <ol style="list-style-type: none"> UC Davis Health Policy 17020: Inhaled Pulmonary Drug Administration (Excluding Pentamidine/Ribavirin/Surfactant) Textbook of Advanced Cardiac Life Support, 2006 UC Davis Health Policy 13035: Administration of Medications for Rapid Sequence Intubation in Adults 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. (See 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.		

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Respiratory Emergencies and Equipment #DAHS-NSCREE14 continued	Date	Verifier Initials
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.		

Restraints #DAHS-NSCR09	Date	Verifier Initials
References: 1. UC Davis Health Policy 4069: Restraints		
Completed Restraints Online Module # DAHS-NGNRSTR20		
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		

Seizure Precautions #DAHS-NSCSP15	Date	Verifier Initials
References: 1. UC Davis Health Policy 15009: Seizure Precautions		
Performs per policy 15009		

Suicide Risk Assessment #DAHS-NSCSRA-17	Date	Verifier Initials
References: 1. UC Davis Health Policy 4016: Identification and Management of Patients at Risk for Suicide 2. UC Davis Health Policy 4016(5): Attachment 5- SAFE-T Quick Guide		
Performs per policy 4016		

Temporal Scanner #DAHS-NSCTSC17	Date	Verifier Initials
References: 1. Exergen Virtual classroom training video		
View Exergen Virtual classroom training video		

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Temporal Scanner #DAHS-NSCTSC17 continued	Date	Verifier Initials
Recognize proper equipment is in working order.		
Demonstrate use of temporal scanner.		
Proper cleaning of scanner after use.		
Document in EMR.		

Tracheostomy Care #DAHS-NSCTC15	Date	Verifier Initials
References: 1. UC Davis Health Policy 17003: Airway Management for Adult Patients 2. UC Davis Health Policy 17038: Pediatric and Neonatal Airway		
Performs per policy 17003 and 17038		

Pre-Op Core Skills		
Adult IV Verification Stick Sheet #DAHS-NSCRNIV	Date	Verifier Initials
References: 1. UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric)		
Complete three (3) sticks observed by verified clinician		
Complete RN Adult IV Online Module #DAHS-NGNRNIV – Online module passing score of 85%		
Location:		
Location:		
Location:		

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Blood Draws Skills Check #DAHS-NSCBD14	Date	Verifier Initials
References: 1. UC Davis Health Policy 13001: Vascular Access (Adult/ Pediatric) 2. UC Davis Health Policy 13002: Vascular Access (Neonatal) 3. UC Davis Health Policy 13029: Venipuncture Verification and Blood Withdrawal		
Performs per policy 13001, 13002, 13029		

Using the Clipper #DAHS-NSCUTC-17	Date	Verifier Initials
Describes the indications and contraindications for clipper use		
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.		

Lidocaine Skin Anesthetic Intradermal Injection #DAHS-NSCLFIUA11	Date	Verifier Initials
References: 1. UC Davis Health Standardized Procedure 315: Use of Lidocaine Skin Anesthetic Injection by A Certified Registered Nurse		
Review UC Davis Health Standardized Procedure 315: Use of Lidocaine Skin Anesthetic Injection by A Certified Registered Nurse		
Completion of e-module Lidocaine Skin Anesthetic Injection by a Certified Registered Nurse with a post test score of at least 80% # DAHS-NSCLFIUA22		
Demonstrate one supervised lidocaine skin anesthetic intradermal injection in the clinical setting. Supervision will be provided by a lidocaine certified RN or MD.		

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PACU Core Skills

Basic Dysrhythmia Detection and Treatment #DAHS-NSCBDDT15	Date	Verifier Initials
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		
Passing the ECG Interpretation Assessment satisfies 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.		
Identify ventricular dysrhythmia 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.		

End-Tidal Carbon Dioxide Monitoring #DAHS-NSCETCDM15	Date	Verifier Initials
References: 1. Elsevier Skills <ul style="list-style-type: none"> Capnometry and Capnography End-Tidal Carbon Dioxide Measurement: Continuous Monitoring 		
Elsevier Skills for reference only		
If the patient was not intubated, applied the ETCO ₂ -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.		

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Due Date:	
PERFORMANCE CRITERIA - Unless otherwise specified all skills will be demonstrated in accordance with the appropriate UC Davis Health Policy and Procedure.	
These skills will be considered complete when all below performance criteria are completed and pages 1, 2, and 3 have been scanned and emailed to: hs-cppn@ucdavis.edu	

Intravesical Chemotherapy Agent Drainage (PACU) DAHS-NSCICADPACU	Date	Verifier Initials
References: 1. UC Davis Health Policy 10003: Intravesical and Topical Upper Tract Therapy with Chemotherapeutic/Biologic Agents 2. UC Davis Health Policy 9005: Bladder Irrigation 3. UC Davis Health Policy 10001 Hazardous Drugs (HD) (Chemo): Safe Handling/Preparation/Administration/Disposal of Waste/Spill Procedures		
Identify common agents seen in PACU.		
Explain procedure to patient.		
Reposition patient per orders.		
Don chemo rated protective personal equipment (PPE) prior to draining bladder after ordered dwell time.		
Drain chemotherapy/urine by removing clamp(s) and irrigate if ordered.		
Don chemo rated PPE to discontinue urinary catheter or change to clean drainage bag if catheter to remain in place.		
Utilize Hazardous Waste (bulk chemo) bin.		
Manage spills per Policy 10001 Hazardous Drugs (HD) (Chemo): Safe Handling/Preparation/Administration/Disposal of Waste/Spill Procedures		
Management of Hazardous Drug Waste and Skills #DAHS-NSCMHHDWS	Date	Verifier Initials
References: 1. UC Davis Health Policy 1623: Management of Hazardous Drug Waste and Spills		
Performs per policy 1623		
Peripheral Nerve Block #DAHS-NSCPNB24	Date	Verifier Initials
References: 1. UC Davis Health Policy 13052: Peripheral Nerve Block		
Performs care per UC Davis Health Policy 13052: Peripheral Nerve Block		

Pre-Op-PACU Travel RN Skills (Perioperative Services)	
Name:	Employee ID #:
Unit:	Title:
Due Date:	
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Recovery of the Post Anesthesia Patient in the Post-Anesthesia Care Unit #DAHS-NSCRPAPACU	Date	Verifier Initials
References: 1. Recovery of the General Anesthesia and Monitored Anesthesia Patient Policy 2. PACU Documentation Audit Tool 3. ASPAN Structure Standards		
Perform rapid assessment and place on monitor on arrival to unit		
Demonstrates receiving complete handoff from OR team		
Perform and document vital signs q15 minutes x 6, q30 minutes and q60 minutes until sign-out		
Complete full assessment on arrival, then every 60 minutes, as well as focused assessment as needed/ordered		
Assess and manage pain, discuss pharmacological and non-pharmacological options		
Assess and manage post-operative nausea and vomiting, discuss pharmacological and non-pharmacological options		
Use Aldrete (ambulatory/med surg) and RASS (ICU) scales (adult) and SBS (pediatric)		
Assesses readiness/discuss criteria for sign-out		
Demonstrates transfer to floor		
Demonstrates discharge to home		
Document assessment and discharge/transfer notes, as well as focus note when needed		
Consider pediatric specific factors		