

UCHC Competency Checklist: ORIENTATION

Position Title: Registered Nurse, JDH Employee Name: _____

Unit: Critical Care Float

Cluster Area: Critical Care: ED, ICU, PACU, CSDU, Critical Care Float Pool

Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Learning Package C = Clinical Practice D = Demonstration	Method of Evaluation Key: O = Observation (in clinical setting) RD = Return Demonstration T = Written Test V = Verbal Review	Self-Assessment by Employee			Validation of Competency		
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All Level 1 Competencies reviewed / documented in Central Orientation							
A. GETTING INTO THE SYSTEM							
Locates Hard Copy Manuals on Unit					E		
Locates On-Line Manuals					E		
Obtains network, LCR, Pyxis, & Unit-Specific Access					E		
Recalls Proper Call-Out Procedures					E		
Identifies unit-based orientation plan and timing of evaluations					E		
Receives PREF for Position					E		
Locates Educational Activity Records Binder / File					E		
Identifies Performance Improvement Indicators					E		
Places contact information onto disaster call tree					E		
Completes form for Electronic Signature for Medical Records (Policy 2006-05)					E		
B. SAFETY/INFECTION CONTROL							
Locates fire alarms, extinguishers and exits					E		
Demonstrates appropriate use of Red-Bag Waste					E		
Disposes of needles / syringes appropriately					E		
Identifies and locates personal protective equipment					E		
Reviews Safety Plan for unit					E		
Verbalizes the use and online location of Material Safety Data Sheets (MSDS)					E		
Locates Super Gurney stretcher / emergency equipment boxes & reviews contents (ED / CC Float)					E		
Completes Personal Protective Equipment Training and Decontamination Unit Training (ED only)					E		

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C. EQUIPMENT								
LEVEL 1: DEPARTMENTAL COMPETENCIES:								
Locates equipment manuals					E			
LEVEL 2: CLUSTER SPECIFIC COMPETENCIES – Operates the following according to the operator’s manual								
Cardiac monitor								
Chest Drainage System								
Defibrillator / External pacemaker								
Doppler								
ECG Machine (12 Lead)								
Hospital bed / stretcher								
Hover Mat								
Infusion pump: Single chamber								
Double chamber								
Infusion tubing (primary and secondary)								
Infusion Guard-rails								
Infusion pump: Syringe pump								
Intubation tray: Oral / nasal airways								
Laryngoscope handle / blades								
LMA								
End-tidal CO2 detector								
Needleless IV system								
Nasogastric / Orogastric Tube								
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Noninvasive Blood Pressure Machine								
Oxygen set-up and delivery: flowmeter								
nasal cannula								
simple mask								
rebreather mask								
Pulse oximeter								
Pyxis Medication Administration System								
Restraints: mitts								
freedom splints								
limb (soft / locked)								
Restraint Alternatives: skin sleeve								
personal alarms								
chair pads								
Suction: continuous / intermittent								
Thermometers (oral, tympanic, rectal)								
Ventilator								
LEVEL 3: UNIT-SPECIFIC COMPETENCIES - Operates the following according to the operator's manual:								
Airway security device								
Antiembotic Stockings								
Bipap Vision Machine (CPAP / BiPAP)								
Braselow Pediatric Resuscitation Bag / Measure (located in ED)								
CADD pump								

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Temporary (transvenous) Pacemaker / Pulse Generator							
Total Care / Total Care Sport beds							
Wound V.A.C. (Wound Assistive Closure Device)							
D. DOCUMENTATION/COMMUNICATION							
LEVEL 1: DEPARTMENTAL COMPETENCIES							
Accesses patient information in LCR							
Accesses e-mail account							
Locates link to Patient Safety Net							
Appropriately utilizes the Bed Management System							
Adheres to customer service values of UCHC (telephone, interpersonal)							
LEVEL 2: CLUSTER SPECIFIC COMPETENCIES							
Completes (inpatient) paperwork for: Admission							
Transfer (ISBAR)							
Discharge							
Completes Core Database (all units) and Inpatient Databases (inpatient units)							
Completes requisitions (ie. lab, radiology)							
Completes unit-specific chart audits / chart review as applicable							
Documentation format for: Care Plan (inpatient units)							
Code Blue *							
Conscious Sedation Flowsheet (all units except CSDU)							

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Documentation (cont): Death packet								
Fall risk assessment *								
Frequent Vital Signs *								
Medication Administration Record *								
Patient / family teaching record (inpatient units)								
Preoperative Checklist								
Progress notes: DAR format (inpatient units)								
Restraint / 1:1 / Constant Observation Flow-sheets								
Skin & wound assessment *								
(* Electronically documented in some clinical areas)								
States proper time frames / frequency for completion of various documentation								
LEVEL 3: UNIT SPECIFIC COMPETENCIES								
Admission Packet (inpt. units) Advanced Directives, Permission to Treat								
Release of Medical Information, Personal Property Release								
Central line insertion checklist								
Cardiac Step-down Unit Flowsheet								
Emergency Department documentation: IBEX								
Emergency Department: IBEX Tracking Board								
Emergency Department Triage Levels								
Intensive Care Unit Flowsheet								
PACU documentation: on-line in SIS application								

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E. PROVISION OF CARE							
HOSPITAL ADMINISTRATIVE MANUAL– aware of content and/or provides care according to the following protocols/procedures:							
Care Delivery to Persons Who are Deaf or Hard of Hearing (8-009)							
Code Strong (8-079)							
CPR: Code Blue Response on Campus (08-022A) and related appendices							
Do Not Resuscitate/Comfort Measures Only (8-023)							
Informed Consent (6-002)							
Latex Allergy (8-047)							
Medication Reconciliation (8-007)							
Moderate Sedation (Conscious Sedation) (8-013)							
Organ-Tissue Donation (7-016)							
Consent / Refusal of Blood and/or Blood Products (6-012)							
Report / Handoff (8-059) & unit ISBAR forms							
Universal Protocol/Correct Surgical Site (8-048)							
Verbal/Telephone Orders (6-013)							
Vaccinations (8-064)							
NURSING PRACTICE MANUAL – aware of content and/or provides care according to the following protocols/procedures:							
Structure Standards: Department of Nursing							
Protocols / Procedures:							
Abuse: Child Physical Abuse, Neglect, Sexual Abuse							

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Abuse: Domestic Violence								
Abuse: Elderly Abuse								
Allergies: Identification of Patient Allergies								
Anticoagulation Therapy								
Assessment: Scope of Nursing Practice								
Blanket (Solution) Warmers								
Blanketrol II : Hypo / Hyperthermia Blanket								
Blood Components: Acquisition from Blood Bank								
Blood Components: Administration								
Blood Components: Emergency Release								
Blood Components: Transfusion Reaction								
Blood Components: Type & Screen/ Type & Cross-Match								
Calorie Counts								
Central Lines: Alteplase (Cathflo Activase®) Instillation for Catheter Clearance								
Central Lines: Blood Drawing								
Central Lines (and Implanted Ports): Heparin/Normal Saline Flush								
Central Lines (and Implanted Ports): Intravenous Fluid Administration								
Central Lines: Dressing/Catheter Site Care								
Central Lines: Implanted Port: Accessing Port with Huber Needle								
Central Lines: Patient Care								
Change in Patient Condition – Chain of Command Notification								
Chart Review & Audits (Inpatient)								
Chest Tube								

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Delirium: Care of the Patient with								
Diabetes Mellitus Management: Periprocedural Care								
Discharge Planning: Nursing Responsibilities								
Documentation: Admission								
Documentation: Discharge								
Documentation: Patient Care Plan								
Documentation: Progress Notes								
Factor VIII Administration								
Falls: Risk Identification and Prevention Management								
Heimlich Valve								
Hand Off Communication								
Hypertension: Care of the Patient with								
Immune Globulin								
Insulin: Continuous IV Administration								
Interventional Radiology Patient Recovery: RN Coverage...								
Intravenous Fluids with Additives/Medications								
Intravenous (IV) Therapy: Peripheral								
Lipids Administration								
Medication Administration: Investigational Drugs								
Medication Administration: Pyxis for Controlled Substance Security								
Medication Administration: Student Nurses								
Medication Administration: Therapeutic Interchange of Medications								
Medication Administration: Use of the Inpatient Medication Administration Record								

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Medication: Patient's Personal Receipt and Storage, Non-Formulary Admin								
Medication Teaching (Plan)								
Medications: Double Checks								
1:1 Observation/Constant Observation								
Ostomy Care (Protocol, Teaching Plan, & Patient Education Handouts)								
Pain: Care of the Adult								
Pain: Continuous Narcotic Infusion								
Pain: IV or SC Narcotics via PCA Pump								
Pain:Epidural Narcotic Infusion and Patient Controlled Epidural Analgesia (PCEA)								
Pain Scale								
Parenteral Nutrition Administration								
Peak and Trough Levels; Medications								
Peritoneal Dialysis: Acute								
Physician Orders - Questioning								
Post-Mortem Care								
Potassium: IV Infusion (Adult)								
Pressure Ulcer Prevention and Management								
Respiratory Compromise								
Restraint Use in the Inpatient (and Outpatient) Setting & Restraint Flow Diagram								
Seizures: Care of the Patient at Risk or Actual								
Transfer Process: In-house								
Transportation: Deceased Patients								
Transportation: Inpatients (Ticket to Ride)								

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Tube Feedings: Adult								
Wound V.A.C. (Vacuum Assisted Closure) Device								
INTENSIVE CARE UNIT (ICU) PRACTICE MANUAL - aware of content and/or provides care according to the following protocols/procedures:								
Structure Standards: ICU Structure Standard / Scope of Practice								
Protocols / Procedures:								
Admission: Care of the Patient Admitted to the Adult Intensive Care Unit								
Alteplase (t-PA): Administration for Acute Ischemic Stroke								
Amiodarone: IV Administration								
Angioseal Closure Device Post-Placement Patient Care								
Arterial Blood Pressure Monitoring								
Autotransfusion (ATS): Chest Tube Drainage Post Operative Heart Surgery								
Bedside Items for ICU								
Cardiac Catheterization: Post Procedure Care of the Patient								
Cardiac Output Determination								
Cardioversion: Care of the Patient Undergoing								
Cardioversion: Emergent								
Cerebral Vascular Accident (CVA), Suspected								
Continuous Renal Replacement Therapy (CRRT) (ACTION NURSES ONLY)								
Corvert (Ibutilide) Infusions for the Treatment of Atrial Tachycardia								
Craniotomy: Care of the Post-Operative Patient								
Diltiazem (Cardizem) Infusion: For Treatment of Atrial Tachyarrhythmia								

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Dobutamine: IV Administration								
Dopamine: IV Administration								
ECG: Assessment of Cardiac Status Using the 12 Lead ECG								
Emergency Care for Lethal Dysrhythmias								
Epinephrine: IV Administration								
Esmolol HCl: IV Administration								
Flolan (Epoprostenol Sodium): Continuous IV Administration								
Femostop Device								
Haloperidol (Haldol): IV Administration								
Hemoband, Use of								
Hemodynamic Monitoring								
Integrilin (Eptifibatide) Infusion								
Intra-Aortic Balloon Pump (IABP): Care of the Patient on the (ACTION NURSES ONLY)								
Intracranial Pressure Monitoring/Cerebral Spinal Fluid Drainage								
IV Push Medication: Approved List of								
Labetalol: IV Administration								
Left Atrial (LA) Pressure Monitoring								
Lidocaine: IV Administration								
Midazolam: Care of the Patient Receiving Continuous Infusion								
Milrinone (Primacor): Continuous Infusion								
Minnesota Tube, 4 Lumen: Care of the Patient with a								
Myocardial Infarction (MI): Management of Myocardial Pain								
Natrecor: IV Administration								

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Neosynephrine HCl (Phenylephrine HCl): IV Administration								
Neuromuscular Blocking Agents (NMBA): IV Administration								
Nitroglycerin: IV Administration								
Nitroprusside Sodium (Nipride): IV Administration								
Norepinephrine (Levophed): IV Administration								
Open Chest: Registered Nurse Responsibilities (ACTION NURSES ONLY)								
Open Heart Surgery: Care of the Immediate Post Op Patient (ACTION NURSES ONLY)								
Pacemaker, Temporary: Transvenous Insertion								
Pacemakers: Care of Patients with Temporary Pacemakers								
Perclose Closure Device: Post Placement Patient Care								
Pericardial Catheter: Care of the Patient with								
Peripheral Nerve Stimulator/Train of Four Monitoring								
Post Cardiac Interventional Procedures								
Prone Positioning								
Propofol: Care of the Patient Receiving Continuous Infusion								
Radial Artery Compression Device: TR Band								
Remodulin (Treprostinil Sodium): Continuous Subcutaneous Administration								
ReoPro (Abciximab) Infusion: Care of the Patient Receiving Post PTCA/Stent								
Rotational Therapy: Patient Selection and Implementation								
Swan-Ganz Catheter: Obtaining Mixed Venous Blood								
Tracheal Aspiration (Deep) Intubated Patient								
Ultrafiltration (for patients w/ CHF) using the Aquadex System								
Ventilator: Care of Patient on a Ventilator								

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EMERGENCY DEPARTMENT PRACTICE MANUAL - aware of content and/or provides care according to the following protocols/procedures:							
Emergency Department Scope of Services							
Structure Standards: Emergency Services Structure Standard							
Hazmat: ED Hazardous Material Response Plan/ Decontamination Procedure							
Protocols / Procedures:							
Abdominal Pain (Nontraumatic)							
Admissions: Admission of Emergency Department Patient to the Hospital							
Alteplase (t-PA): Administration for Acute Ischemic Stroke / Attachment; NIHSS							
Amputated Digits or Extremity Parts: Care of							
Arterial Blood Gas Punctures by Registered Nurses							
Asthma (Adult): Nursing Management for the Adult Patient with							
Back Pain: Nursing Management of the Patient with Low Back Pain							
Behavioral Patients: Care of the Behavioral Patient in the Emergency Dept							
Belongings List : Completion of							
Blood Alcohol Levels: Obtaining							
Blood Pressure Screening: Emergency Department Patients							
Burns: Care of the Patient with / Appendix A - Burn Injury Report							
Category I Full Trauma Alert							
Category II Modified Trauma Alert							
Category III Trauma Consult							
Cerebral Vascular Accident (CVA), Suspected / Attachment: NIHSS score sheet							
Chest Pain (Suspected Cardiac Origin)							

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Closed Head Injury								
Code Blue: MRI: Evacuation Procedures of								
Commitment for Alcohol and Drug: 5 Day Paper								
Controlled Substances: Receipt and Disbursement by UCHC Paramedics								
Deaths: Deaths Occurring in ED and Patients Dead on Arrival								
Decontamination Unit								
Delivery, Precipitous: Care of the Patient with								
Discharge from the Emergency Department								
EMTALA - Acceptance of Appropriate Transfers								
EMTALA - Ambulance Diversion								
EMTALA - Central Log								
EMTALA - Medical Screening Examination								
EMTALA - Page								
EMTALA - Signage								
EMTALA - Stabilization Treatment								
EMTALA - Transfer to Another Facility								
Fever: Nursing Management for the Pediatric Patient with a Fever								
Flolan (Epoprostenol Sodium): Continuous Intravenous Administration								
Gastrointestinal Bleed: Nursing Management the Patient with Acute GI Bleed								
Headache (Acute): Nursing Management of the Patient with								
Hypoglycemic Reaction: Acute (ADULT)								
Hypothermia: Care of the Patient with								
Intraosseous Infusion: Initiation of								

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LPN IV Push Medications								
Medication: Administration of Medications Upon Discharge from the E.D.								
Observation of Patient in the ED								
Overdose: Nursing Management of the Patient with Acute								
Pain: Care in the Adult Emergency Patient Experiencing Pain								
Peripheral Vascular Reconstruction: Care of the Post-Operative Patient								
Procedures Not Performed in the Emergency Department								
Propofol: Administration for Conscious Sedation in the ED								
Rabies Prophylaxis								
Rash of Suspicious Etiology: Care of the Patient Presenting with								
Reopro (Abciximab) Infusion: post PTCA/Stent								
Respiratory Difficulties								
RN IV Push Medication: Approved List of								
Safe Havens								
Searching Patient's Personal Belongings								
Sexual Assault: Care of the Patient								
Tetanus: Prophylaxis in Wound Management								
Trauma Patient: Care of								
Triage: Care of the Patients in								
Triage: Emergency Department Patients								
Triage to the Sub Acute Area								

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POST ANESTHESIA CARE UNIT PRACTICE MANUAL – aware of content / collaborates w/ RT to provides care, according to the following protocols							
Structure Standards / Scope of Service: PACU							
Admission to PACU							
Cardiovascular Monitoring: Perioperative Care							
DOC Patients in the Perioperative Area							
Discharge form PACU: Ambulatory Patients							
Discharge form PACU: Inpatients							
Malignant Hyperthermia							
Nausea & Vomiting; Perioperative Care							
Operative Hysteroscopy: Perioperative Care							
Post-tonsillectomy Care							
Respiratory Compromise Management: Perioperative Care							
Safe Medication Practices in the Perioperative Area							
Spinal & Epidural Anesthesia: Perianesthesia Care							
Thermoregulation in the Perioperative Phase							
RESPIRATORY CARE UNIT PRACTICE MANUAL – aware of content / collaborates w/ RT to provides care, according to the following protocols							
BiPAP Ventilatory Support System							
Image 3 Full Face Mask Using Non-Invasive Positive Pressure Ventilation (NPPV)							
Mechanical Ventilator Discontinuation Protocol							
Nasotracheal Suctioning							

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PRACTICUMS & SKILL VALIDATIONS								
Cardiac Arrhythmia Course / Arrhythmia Exam								
IV Insertion # 1								
IV Insertion # 2								
IV Insertion # 3								
IV Insertion # 4								
IV Push Medication Administration								
Phlebotomy Practicum								
Orientation to role of the "Back-up" RN for Open Heart (ACTION NURSES ONLY)								

Comments:

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