

## MEDICAL/SURGICAL AND TELEMETRY SKILLS CHECKLIST

Please Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**DIRECTIONS:** By completing this checklist to the best of your ability, you will help us match your skills and areas of interest with our available assignments. Please circle the number, 1, 2, 3, or 4, that most accurately describes your level of experience with each skill. Print and fax your list to 707/265-9182

Years as RN? \_\_\_\_\_ Strongest Areas of expertise: \_\_\_\_\_ Least strong area of expertise: \_\_\_\_\_

### PROFESSIONAL EXPERIENCE AND CERTIFICATIONS (circle one)

1. Are you CPR certified? ..... Yes No
2. Are you BCLS certified?..... Yes No
3. Are you ACLS certified?..... Yes No
4. Have you had a dysrhythmia course? ..... Yes No
5. How many years have you worked Med/Surg? \_\_\_\_\_
6. Do you have charge nurse experience? ..... Yes No

Number of years \_\_\_\_\_

7. State primary experience and number of years in each.

Medical \_\_\_\_\_ GYN \_\_\_\_\_

Surgical \_\_\_\_\_ Urology \_\_\_\_\_

Ortho \_\_\_\_\_ Oncology \_\_\_\_\_

Neuro \_\_\_\_\_ Telemetry \_\_\_\_\_

Stepdown \_\_\_\_\_ Other \_\_\_\_\_

### EXPERIENCE LEVELS

- 4 = VERY EXPERIENCED (can perform well independently)  
3 = EXPERIENCED (Need initial review, then can perform independently)  
2 = SOME EXPERIENCE (Require assistance/supervision)  
1 = NO EXPERIENCE

### NEUROLOGY 1 2 3 4

1. Assessment of neuro signs.....
  - A. Orientation to person, place, time.....
  - B. Glasgow coma scale .....
2. Seizure precautions.....
3. Assisting with lumbar puncture .....
4. Use of:
  - A. Crutchfield tongs .....
  - B. Halo traction.....
  - C. Circo-electric bed .....
  - D. Stryker frame.....

E. Clinitron bed.....

### 5. Range of motion:

- A. Active .....
- B. Passive .....

### 6. Care of patients with:

- A. Craniotomy .....
- B. Laminectomy .....
- C. Seizure disorders.....
- D. CVA.....
- E. Paralysis .....
- F. Status epilepticus .....

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## Name \_\_\_\_\_

- G. Spinal cord shock.....
- H. Spinal cord injury.....
- I. Conscious sedation.....
- J. Closed head trauma.....
- K. AV – Shunt .....

## GENITOURINARY

- 1. Assessment** .....
- 2. Knowledge and care of catheters:**
  - A. Insertion of foley .....
  - B. Suprapubic.....
  - C. Nephrostomy tube .....
  - D. Hickman .....
  - E. Infusaports.....
  - F. Subclavians
- 3. Care of dialysis patient with:**
  - A. Shunts and fistulas.....
  - B. Hemodialysis .....
  - C. Peritoneal – CAPD.....
- 4. Procedures:**
  - A. Irrigations.....
    - i. Continuous bladder irrigation .....
    - ii. Bladder instillation .....
    - iii. Sterile specimen collection .....
    - iv. Sugar and acetone .....
    - v. Blood glucose levels with gluometer...
- 5. Care of patients with:**
  - A. Pre and post operative kidney transplant
  - B. Acute renal disease .....
  - C. End stage renal disease .....
  - D. TURP .....
  - E. Nephrectomy.....
  - F. Renal transplant .....

## CARDIOVASCULAR AND/OR TELEMETRY

- 1. Cardiovascular assessment** .....
- 2. Vital signs** .....
- 3. Electrolyte imbalance assessment**.....
- 4. Telemetry**.....
- 5. Recognition & treatment of dysrhythmias:**

- A. Atrial .....
- B. Ventricular.....
- C. Heart blocks.....
- D. Ventricular tachycardia .....
- E. Asystole .....

### 6. Central venous pressure:

- A. Assist with insertion/discontinuation ....
- B. Set-up and leveling of manometer .....

### 7. Use and administration of these drugs:

- A. Atropine .....
- B. Digoxin .....
- C. Epinephrine.....
- D. Inderal .....
- E. Lidocaine .....
- F. NTG.....
- G. Verapamil.....
- H. Pronestyl .....
- I. Quinidine .....
- J. Thombolotic medications.....

### 8. Care of patients with:

- A. Post MI.....
- B. CHF.....
- C. Pre/post cardiac catherization.....
- D. Pre/post cardiovascular surgery.....
- E. Subacute bacterial endocarditis.....
- F. Pacemaker .....
- G. Data Critical Monitoring.....
- H. DVT .....
- I. Heart transplant.....
- J. Heparin drip .....
- K. Multi-systems failure .....

## RESPIRATORY

- 1. Establish airway**.....
- 2. O2 administration**.....
- 3. Tracheostomy care**.....
- 4. Chest tube** .....
- A. Assisting with insertion/discontinuation
- B. Understanding and care of H2O seal .....
- 5. Use of incentive spirometry**.....
- 6. Throat culture** .....
- 7. Care of patient on ventilator** .....
- 8. Use of ambu**.....
- 9. Care of patient with:**

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Name \_\_\_\_\_

1 2 3 4

- A. Pre and post operative thoracic surgery.
- B. COPD.....
- C. Acute respiratory distress.....
- D. Pneumocystic disease.....
- E. Tuberculosis.....
- F. Pulmonary embolism.....
- G. Emphysema.....
- H. Pneumonia .....
- I. Pulmonary edema.....
- J. Asthma .....

**10. ABG interpretation.....**

**11. Sputum specimen collection.....**

**12. Use of IPPB.....**

## GASTROINTESTINAL

**1. Assessment of bowel sounds .....**

**2. Colostomy care .....**

**3. Care of patient with:**

- A. Gastrostomy tube.....
- B. Jejunostomy tube.....
- C. Dobhoff feeding tube.....
- D. T tube .....
- E. Feeding pumps .....

**4. Wound care.....**

**5. Insertion and/or care of :**

- A. Salem sump .....
- B. Levine tube.....
- C. Blakemore-Sengstaken tube.....
- D. Cantor tube.....

**6. Gastric gavage and lavage .....**

**7. Assisting with paracentesis.....**

**8. Administration of TPN and care of line**

**9. Care of patient with:**

- A. GI bleed.....
- B. Abdominal surgery.....
- C. Liver disease .....
- D. Liver transplant .....
- E. Bowel obstruction .....

## ORTHOPEDICS

**1. Pre and post operative care .....**

- A. Total hip replacement .....
- B. Knee replacement .....
- C. Joint replacement.....
- D. Laminectomy.....
- E. Amputation.....

**2. Traction.....**

- A. Overhead bar and frame assembly.....
- B. Skeletal .....
- C. Bucks .....
- D. Cervical .....
- E. Pelvic .....

**3. Range of motion .....**

- A. Active.....
- B. Passive .....

**4. Hoyer lift .....**

**5. Antiembolic stockings.....**

**6. CPM.....**

**7. Hemovac .....**

**8. CMS checks .....**

## GYNECOLOGY

**1. PAP exam.....**

**2. Care of patient with:**

- A. Hysterectomy.....
- B. Tubal ligation .....
- C. Mastectomy.....
- D. Endometriosis.....
- E. Miscarriage.....

## PROCEDURES AND EQUIPMENT

**1. Starting IV's .....**

**2. Knowledge of normal lab values.....**

**3. Drawing venous blood samples.....**

**4. Administration of:**

- A. Blood and blood products .....
- B. Chemotherapy .....
- C. IV medications .....

**5. Infusion**

- Pumps.....
- A. PCA.....

**6. Medications:**

- A. Unit dose .....

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1 2 3 4

- B. Dosage calculations.....
- C. Initiate multiple drips .....
- D. Maintain multiple drips dosages.....

**7. Experience in:**

- A. Team leading.....
- B. Primary care .....
- C. SOAP charting .....
- D. Initiating care plans.....

**8. Hyper/hypothermic blanket.....**

**9. K pads .....**

**10. Heat lamps.....**

**11. Restraints.....**

**12. O2 wall set-up.....**

**13. Portable O2 tank .....**

**14. Organ donor protocol .....**

**15. PIC line insertion.....**

**16. Patients' Directive .....**

**17. Patients' rights/confidentiality .....**

**SPECIFIC CONDITIONS**

**1. Care of patient with:**

- A. Oncology diseases .....
- B. Infectious diseases.....
- C. AIDS .....
- D. Drug addiction/withdrawals .....
- E. Burns.....
- F. Diabetes .....
- G. Overdose .....
- H. Integument problems .....

**The information I have given is true and accurate to the best of my knowledge**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name (Please Print)**

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