

INTENSIVE CARE (ICU/CCU/CVICU)

NAME: _____ **SIGNATURE:** _____ **DATE:** _____

PLEASE SPECIFY THE NUMBER OF YEARS EXPERIENCE YOU HAVE IN THE FOLLOWING AREAS:

| | | | | |
|-----|------|-------|--------|------------------------|
| ICU | MICU | CVICU | TRAUMA | ER |
| CCU | SICU | BURN | PACU | Other (please specify) |

Have you had a formal Critical Care Course? Yes No Did you receive a certificate of completion? Yes No
 How many hours was the course? _____

Put an "X" in the column that best describes your experience level with each skill
1 - Highly Skilled (Can function well independently)
2 - Proficient (Experienced, may need occasional review) • 3 - Limited Skill (Limited or no experience)

BLOOD BANK

| Skills (check appropriate box) | 1 | 2 | 3 |
|------------------------------------|---|---|---|
| Interpreting 12-Lead EKG | | | |
| Arrhythmia Interpretation | | | |
| Initiate CPR | | | |
| Emergency Drugs (IV Push) | | | |
| Defibrillation | | | |
| Cardioversion, Assist | | | |
| Assist with insert/change/monitor: | | | |
| • regular IV's | | | |
| • arterial lines | | | |
| • swan ganz | | | |
| • triple lumen | | | |
| • other central line | | | |
| • use of antiarrhythmics | | | |
| Venipuncture | | | |
| Epicardial Pacing Lines | | | |
| Assist w/ Insert Temp Pacemaker | | | |
| Titration of Vasoactive Drugs | | | |
| • nipride | | | |
| • epinephrine | | | |
| • dopamine | | | |
| • dobutamine | | | |
| • nitroglycerine | | | |
| • isuprel | | | |
| • levophed | | | |
| Care of Patients with: | | | |
| • fresh MI | | | |
| • post streptokinase | | | |
| • hypovolemic shock | | | |
| • septic shock | | | |
| • cardiogenic shock | | | |
| • giving blood, blood products | | | |
| • AAA | | | |
| • vascular surgery | | | |
| • cardiac surgery | | | |
| Balloon Pumps | | | |
| Cardiac Outputs | | | |

NEUROLOGY

| Skills (check appropriate box) | 1 | 2 | 3 |
|--------------------------------|---|---|---|
| Assess on Glasgow Coma Scale | | | |
| ICP Monitoring/Interpretation | | | |
| Care of Patients With: | | | |
| • closed head injury | | | |
| • CVA | | | |
| • multiple trauma | | | |
| • spinal cord injury | | | |
| • epidural catheter | | | |
| • craniotomy | | | |
| Seizure Precautions | | | |
| Elected ICP | | | |

MISCELLANEOUS

| Skills (check appropriate box) | 1 | 2 | 3 |
|--------------------------------|---|---|---|
| Care of Patients With: | | | |
| • with hypothermia | | | |
| • with hyperthermia | | | |
| • under isolation precaution | | | |
| • in recovery room | | | |
| • pre/post transplant | | | |
| Recovering from Anesthesia | | | |
| Receiving Anesthetic Agents | | | |
| Care of: | | | |
| • burn patient | | | |
| • oncology patient | | | |
| • GSW (gun shot wound) | | | |
| • MVA (motor vehicle accident) | | | |

RESPIRATORY

| Skills (check appropriate box) | 1 | 2 | 3 |
|--------------------------------|---|---|---|
| Assist with Intubation | | | |
| Assist with Extubation | | | |
| ABG's Obtaining From: | | | |
| • arterial stick | | | |
| • a-line | | | |
| Assess/Understand Ventilators: | | | |
| • PEEP | | | |
| • CPAP | | | |
| • IMV | | | |
| • weaning | | | |
| Pressure Support | | | |
| Assist w/ Chest Tube Insertion | | | |
| Pleurevac | | | |
| Autotransfusion | | | |
| Performing Weaning Parameter | | | |
| Independently Wean & Extubate | | | |
| Other Drainage Systems | | | |
| Ventilation Management | | | |
| Trach Care | | | |
| Thoracic Surgery Patients | | | |
| Care of Patients With: | | | |
| • pulmonary edema | | | |
| • ARDS | | | |
| • COPD | | | |

GI/GU

| Skills (check appropriate box) | 1 | 2 | 3 |
|--------------------------------|---|---|---|
| Care of Patients With: | | | |
| • GI bleed | | | |
| • multiple abdominal wounds | | | |
| • multiple abdominal drains | | | |
| • ileostomy/colostomy | | | |
| • acute renal failure | | | |
| • hemodialysis | | | |
| • peritoneal dialysis | | | |
| • renal transplant | | | |