

CCM RECRUITMENT INTERNATIONAL

- SKILLS CHECKLIST -

RECOVERY ROOM STAGE I

NAME OF APPLICANT: _____ DATE: _____

<p>HOW TO COMPLETE THIS FORM:</p> <p>A thorough evaluation of your skill level in various specialty areas will enable us to locate assignments that are suitable to your skills and the needs of our patients. Please place an "X" in the box that most accurately describes your level of expertise for the skills listed.</p>	<p>LEVELS OF PROFICIENCY:</p> <p>A = Perform Well (at least one year of current experience, very comfortable performing without supervision). B = Limited Experience (6-12 months, within the past two years, would require some assistance). C = Perform Infrequently (less than three months of experience, need more experience and practice, assistance required). D = No Experience (have never performed this task, willing to learn).</p>
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SKILL	A	B	C	D	COMMENTS (IF ANY)
ASSESSMENTS					
Immediate Post-Anesthetic:					
Adult					
Pediatrics					
Complete Head to Toe Physical Assessments:					
Adult					
Pediatric					
Aldrete Score Assessment					
Activity					
Respiration					
Circulation					
Consciousness					
Oxygenation					
AIRWAY MANAGEMENT					
Care of The Unconscious Patient:					
Adult					
Pediatric					
Tracheostomy Care					
Care of the Intubated Patient					
Assist with Intubation					
Care of the Ventilated Patient					
Insertion of Airways					
Oral					
Nasal					
Patient Positioning					
Pediatric					
Adult					
CONCEPTS & KNOWLEDGE OF ANESTHETIC AGENTS					
Inhalation					
Intravenous					
Muscle Relaxants					
Regional					

SKILL	A	B	C	D	COMMENTS (IF ANY)
Local					
MONITORING					
Marquette Eagle 3000 Monitors					
Pulse oximetry					
Dysrhythmia Interpretation					
Sinus Bradycardia/Tachycardia					
Asystole					
Ventricular Fibrillation					
Ventricular Tachycardia					
Supraventricular Tachycardia					
Atrial Fibrillation					
Atrial Flutter					
Junctional					
1, 2 and 3 Degree Blocks					
Arterial Line					
Care of Central Venous Catheters					
OXYGEN ADMINISTRATION					
Set-up: Humidifier					
Aerosol					
Use Of Ambu-bag in emergencies					
POST-OP CARE OF					
ENT Patients					
Orthopedic Patients					
General Surgery Patients					
Neurosurgery Patients					
OB/GYN Patients					
Plastic Patients					
Nephrology Patients					
Urology Patients					
Cardiovascular Patients					
Renal transplant Patients					
Colorectal Patients					
Oral/Dental/Maxiofacial					
Ophthalmology					
Minor Surgery - Pediatrics					
Major surgery - Pediatrics					
SPECIAL CONSIDERATIONS					
Post-op Nausea & Vomiting					
Pain Assessment and Management					
Patient Controlled Analgesia					
Epidural					
Hypo/Hyperthermia					
Arterial Blood Gas Analysis					
Insertion and Management of Chest Tube Drainage System					
Assist with Lumbar Puncture					
Assist with Central Line Insertion					

SKILL	A	B	C	D	COMMENTS (IF ANY)
Insertion of IV					
MANAGEMENT OF POST-OP PATIENT ANESTHETIC COMPLICATION					
Laryngospasm					
Emergence Delirium					
Airway Obstruction					
Malignant Hyperthermia					
Hypertension/Hypotension					
Dysrhythmias					
Hemorrhage/Shock					
Emergency Re-intubation					
COMPUTER SKILLS					
Windows					
ORSOS					
CERNER					
LEADERSHIP					
Preceptor of new staff					
Charge Nurse					

Describe your Recovery Room Experience:
Number of Beds in your RR: Average number of cases per day:
Nurse/patient ratio:
Years of recent Recovery Room experience:
Recovery Room related inservices or special projects you have been involved with:

CURRENT CERTIFICATIONS

- Basic Life Support Certification (BLS) YES NO
Advanced Cardiac Life Support (ACLS) YES NO
Pediatric Advanced Life Support (PALS) YES NO

Applicants need to know that this is a RR that takes care of MSICU and PICU patients in addition to RR patients. A large percentage of the patients are pediatric.

Signature of the applicant: _____ **Date:** _____