

### Directions

Please circle a value for each question to provide us and the interested facilities with an assessment of your clinical experience. These values confirm your strengths within your specialty and assist the facility in the selection process of the healthcare professionals.

Frequency	Experience
1 Observed Only or Never Done	1 No Experience
2 Rarely Done (<6 times/year)	2 Some Experience (Requires Assistance)
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Print Name

SS#

Date

Cardiac	Frequency				Experience			
Assessment of Heart Sounds	1	2	3	4	1	2	3	4
Pacemakers-Permanent	1	2	3	4	1	2	3	4
Cardiac Arrest/CPR	1	2	3	4	1	2	3	4
Cardiac Lab Values	1	2	3	4	1	2	3	4
Obtains 12 Lead EKG	1	2	3	4	1	2	3	4
Cardiac Monitors	1	2	3	4	1	2	3	4
Interpretation of Rhythm Strips	1	2	3	4	1	2	3	4
Interpretation of Arrhythmias	1	2	3	4	1	2	3	4
<b>Care of Patient with:</b>								
Aneurysm	1	2	3	4	1	2	3	4
Angina	1	2	3	4	1	2	3	4
Angioplasty (Pre/Post)	1	2	3	4	1	2	3	4
CHF	1	2	3	4	1	2	3	4
Carotid Endarterectomy	1	2	3	4	1	2	3	4
Post MI	1	2	3	4	1	2	3	4
Pre/Post Cardiac Cath	1	2	3	4	1	2	3	4
Pre/Post Cardiac Surgery	1	2	3	4	1	2	3	4
Open Sternal Wound (Debridement)	1	2	3	4	1	2	3	4
<b>Use &amp; Administration of the Following:</b>								
Anti-arrhythmic	1	2	3	4	1	2	3	4
Anticoagulants	1	2	3	4	1	2	3	4
Antihypertensives	1	2	3	4	1	2	3	4
Beta Blockers	1	2	3	4	1	2	3	4
Diuretics	1	2	3	4	1	2	3	4
Dopamine/ Dobutamine (continuous infusion)	1	2	3	4	1	2	3	4
Inotropic Agents (Digoxin)	1	2	3	4	1	2	3	4
Nitrates	1	2	3	4	1	2	3	4
Fibronolytics/ IIb IIIa Inhibitors	1	2	3	4	1	2	3	4



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Respiratory	Frequency				Experience			
Assessment of Breath Sounds	1	2	3	4	1	2	3	4
Establishing an Airway	1	2	3	4	1	2	3	4
Ambuing Techniques	1	2	3	4	1	2	3	4
Chest Tubes (Emerson/Pleuravac)	1	2	3	4	1	2	3	4
Chest PT	1	2	3	4	1	2	3	4
Pulse Oximetry	1	2	3	4	1	2	3	4
Interpretation of ABG	1	2	3	4	1	2	3	4
Use of IPPB	1	2	3	4	1	2	3	4
Incentive Spirometer	1	2	3	4	1	2	3	4
Mechanical Ventilation	1	2	3	4	1	2	3	4
Oral Suctioning	1	2	3	4	1	2	3	4
Nasotracheal Suctioning	1	2	3	4	1	2	3	4
Supplemental Oxygen	1	2	3	4	1	2	3	4
Tracheal Suctioning	1	2	3	4	1	2	3	4
Tracheostomy Care	1	2	3	4	1	2	3	4
<b>Care of Patient with:</b>								
ARDS	1	2	3	4	1	2	3	4
COPD	1	2	3	4	1	2	3	4
Organ Transplant (Specify)	1	2	3	4	1	2	3	4
Pre/Post Thoracic Surgery	1	2	3	4	1	2	3	4
Thyroidectomy	1	2	3	4	1	2	3	4
Pulmonary Embolism	1	2	3	4	1	2	3	4
Pulmonary Edema	1	2	3	4	1	2	3	4
Pneumothorax	1	2	3	4	1	2	3	4
Pneumonia	1	2	3	4	1	2	3	4
Inhalation Injuries	1	2	3	4	1	2	3	4
Tuberculosis	1	2	3	4	1	2	3	4
Inhalation Injuries	1	2	3	4	1	2	3	4
Emphysema	1	2	3	4	1	2	3	4
Asthma	1	2	3	4	1	2	3	4
<b>Use &amp; Administration of the Following:</b>								
Bronchodilators	1	2	3	4	1	2	3	4
Steroids	1	2	3	4	1	2	3	4
Expectorants	1	2	3	4	1	2	3	4



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Gynecology	Frequency	Experience
Endometriosis	1 2 3 4	1 2 3 4
Gyn Exam/Pap	1 2 3 4	1 2 3 4
Self Breast Exam	1 2 3 4	1 2 3 4
Tubal Ligation	1 2 3 4	1 2 3 4
Ectopic Pregnancy	1 2 3 4	1 2 3 4
Mastectomy/lumpectomy	1 2 3 4	1 2 3 4
Hysterectomy (vaginal or TAHBSO)	1 2 3 4	1 2 3 4
Repair of Cystocele/Rectocele	1 2 3 4	1 2 3 4
Pelvic Inflammatory Disease	1 2 3 4	1 2 3 4
Abnormal Uterine Bleeding	1 2 3 4	1 2 3 4

Neurology	Frequency	Experience
Assessment of Neuro Signs	1 2 3 4	1 2 3 4
Glascow Coma Scale	1 2 3 4	1 2 3 4
Seizure Precautions	1 2 3 4	1 2 3 4
Assist with Lumbar Puncture	1 2 3 4	1 2 3 4
Halo Traction	1 2 3 4	1 2 3 4
<b>Care of Patient with:</b>		
CVA	1 2 3 4	1 2 3 4
TIA	1 2 3 4	1 2 3 4
Seizure Activity	1 2 3 4	1 2 3 4
Overdose	1 2 3 4	1 2 3 4
Spinal Cord Injury/Trauma	1 2 3 4	1 2 3 4
TBI (Traumatic Brain Injury)	1 2 3 4	1 2 3 4
Pre/Post Neuro Surgery	1 2 3 4	1 2 3 4
Cranial Hemorrhage	1 2 3 4	1 2 3 4
Delirium Tremors	1 2 3 4	1 2 3 4
Meningitis	1 2 3 4	1 2 3 4
Multiple Sclerosis	1 2 3 4	1 2 3 4
Neuromuscular Diseases	1 2 3 4	1 2 3 4
Post-Op AV-Shunt	1 2 3 4	1 2 3 4
Spinal Cord Injury	1 2 3 4	1 2 3 4
<b>Use &amp; Administration of the Following:</b>		
Antiepileptics	1 2 3 4	1 2 3 4
Corticosteroids	1 2 3 4	1 2 3 4
Steroids	1 2 3 4	1 2 3 4



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Vascular	Frequency				Experience			
Assessment of Peripheral Pulses	1	2	3	4	1	2	3	4
Fluid Overload	1	2	3	4	1	2	3	4
Ultrasonic Doppler	1	2	3	4	1	2	3	4
Starting IV's	1	2	3	4	1	2	3	4
Lab Draws: venipuncture	1	2	3	4	1	2	3	4
Central line	1	2	3	4	1	2	3	4
Hickman/Broviac/Groshong Catheters	1	2	3	4	1	2	3	4
PICC Line (Percutaneous Intravenous Catheter)	1	2	3	4	1	2	3	4
Ports- Port-a-Cath, PassPort	1	2	3	4	1	2	3	4
Maintenance of Saline Lock	1	2	3	4	1	2	3	4
TPN/Hyperalimentation	1	2	3	4	1	2	3	4
Air Occlusive Dressing	1	2	3	4	1	2	3	4
Administration of Blood & Blood Products	1	2	3	4	1	2	3	4
Infusion Pumps	1	2	3	4	1	2	3	4
Heparin Drip (Precautions & Maintenance)	1	2	3	4	1	2	3	4
Thrombophlebitis	1	2	3	4	1	2	3	4

Gastrointestinal	Frequency				Experience			
NG Tube Insertion	1	2	3	4	1	2	3	4
Small Bore Feeding Tube Insertion (Dobhoff, Keofeed)	1	2	3	4	1	2	3	4
Tube Maintenance	1	2	3	4	1	2	3	4
Tube Removal	1	2	3	4	1	2	3	4
Jejunostomy Tube	1	2	3	4	1	2	3	4
PEG Tube	1	2	3	4	1	2	3	4
<b>Care of Patient with:</b>								
Pancreatitis	1	2	3	4	1	2	3	4
Hepatitis	1	2	3	4	1	2	3	4
G.I. Bleed	1	2	3	4	1	2	3	4
Esophageal Bleeding	1	2	3	4	1	2	3	4
Bowel Obstruction	1	2	3	4	1	2	3	4
Bowel Resection	1	2	3	4	1	2	3	4
Gastric Bypass	1	2	3	4	1	2	3	4
Femoral-popliteal Bypass Graft	1	2	3	4	1	2	3	4



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Gastrointestinal cont'd	Frequency				Experience			
Whipple Procedure	1	2	3	4	1	2	3	4
Transplants (specify)	1	2	3	4	1	2	3	4
Colostomy/Ileostomy	1	2	3	4	1	2	3	4
Paralytic Ileus	1	2	3	4	1	2	3	4
E.R.C.P	1	2	3	4	1	2	3	4
<b>Use &amp; Administration of the Following:</b>								
Anticholinergics (Antispas, Bentyl or Robinul)	1	2	3	4	1	2	3	4
Cathartics	1	2	3	4	1	2	3	4

Genitourinary/Renal	Frequency				Experience			
AV Shunt/Fistula	1	2	3	4	1	2	3	4
Catheter Insertion	1	2	3	4	1	2	3	4
GU Irrigations	1	2	3	4	1	2	3	4
Nephrostomy Tube	1	2	3	4	1	2	3	4
Suprapubic Tube	1	2	3	4	1	2	3	4
<b>Care of Patient with:</b>								
Hemodialysis	1	2	3	4	1	2	3	4
T.U.R.P.	1	2	3	4	1	2	3	4
Shunts and Fistulas	1	2	3	4	1	2	3	4
Nephrectomy	1	2	3	4	1	2	3	4
Peritoneal Dialysis	1	2	3	4	1	2	3	4
Renal Transplant	1	2	3	4	1	2	3	4
Renal Trauma	1	2	3	4	1	2	3	4
Chronic/Acute Renal Failure	1	2	3	4	1	2	3	4



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Orthopedic	Frequency				Experience			
Total Joint Replacement	1	2	3	4	1	2	3	4
Arthroscopic Surgery	1	2	3	4	1	2	3	4
Bucks Extension	1	2	3	4	1	2	3	4
K-Wires/Steinman Pins	1	2	3	4	1	2	3	4
Removal of Hardware	1	2	3	4	1	2	3	4
Spika Cast/Body Cast	1	2	3	4	1	2	3	4
Splints	1	2	3	4	1	2	3	4
CPM	1	2	3	4	1	2	3	4
TENS Unit	1	2	3	4	1	2	3	4
ROM	1	2	3	4	1	2	3	4
Cast Care	1	2	3	4	1	2	3	4
Cast Removal	1	2	3	4	1	2	3	4
Amputation	1	2	3	4	1	2	3	4
Skeletal Traction	1	2	3	4	1	2	3	4
Ortho Trauma	1	2	3	4	1	2	3	4
Cervical Fusion	1	2	3	4	1	2	3	4
Laminectomy	1	2	3	4	1	2	3	4
<b>Care of Patient with:</b>								
Grafts (bone or skin)	1	2	3	4	1	2	3	4

Other	Frequency				Experience			
Oncology	1	2	3	4	1	2	3	4
Chemotherapy	1	2	3	4	1	2	3	4
Radiation therapy	1	2	3	4	1	2	3	4
Radiation Implants	1	2	3	4	1	2	3	4
Inpatient Hospice	1	2	3	4	1	2	3	4
Suicide Precautions	1	2	3	4	1	2	3	4
Isolation Techniques	1	2	3	4	1	2	3	4
Diabetic Teaching	1	2	3	4	1	2	3	4
Patient Teaching	1	2	3	4	1	2	3	4
Burn Patients	1	2	3	4	1	2	3	4
Specialty Beds	1	2	3	4	1	2	3	4
Transfer/Lift Devices	1	2	3	4	1	2	3	4
Experience with Rapid Response Teams	1	2	3	4	1	2	3	4



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Other cont'd	Frequency	Experience
<b>Additional Skills:</b>		
Advanced Directives	1 2 3 4	1 2 3 4
Computer Charting	1 2 3 4	1 2 3 4
Leadership Skills (Team Leader or Charge Nurse)	1 2 3 4	1 2 3 4
Standard Precautions	1 2 3 4	1 2 3 4
Wound Care	1 2 3 4	1 2 3 4
Staple/Suture Removal	1 2 3 4	1 2 3 4
Post Mortem Care	1 2 3 4	1 2 3 4
Organ and Tissue Donation	1 2 3 4	1 2 3 4
Informed Consent	1 2 3 4	1 2 3 4
Identification of Victims of Abuse	1 2 3 4	1 2 3 4
Needleless System	1 2 3 4	1 2 3 4
Restraints	1 2 3 4	1 2 3 4
Glucometer	1 2 3 4	1 2 3 4
Cardiac Monitors	1 2 3 4	1 2 3 4
Delirium Tremens	1 2 3 4	1 2 3 4
HIV Infection	1 2 3 4	1 2 3 4
AIDS	1 2 3 4	1 2 3 4

<b>Please list any additional skills:</b>	
1.	2.
3.	4.
<b>Additional Training:</b>	
1.	2.
3.	4.
<b>Additional Equipment:</b>	
1.	2.
3.	4.

Fax to: 1-888-298-3146

The information on this and all preceding pages is true and correct.	
Signature	Date