

Ambulatory MA Skills

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Unit:	Title:

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General Core Competencies These competencies are applicable to all areas and must be completed by all staff.	Skill Code (For CPPN Use Only)	Date Completed (or N/A)	Verifier Initials
Collaboration & Communication Core Skill (Ambulatory MA)	DAHS- NCCCACAMBMA23		
Cultural Sensitivity/Patient-Centered Care Core Skill (Ambulatory MA)	DAHS- NCCCSPCCAMBMA23		
Infection Prevention Core Skill (Ambulatory MA)	DAHS-NCCIPAMBMA23		
Informatics Core Skill (Ambulatory MA)	DAHS-NCCIFOAMBMA23		
Medication Safety Core Skill (Ambulatory MA)	DAHS-NCCMSAMBMA23		
Patient Rescue Core Skill (Ambulatory MA)	DAHS-NCCPRAMBMA23		
Patient Safety Core Skill (Ambulatory MA)	DAHS-NCCPSAMBMA23		
Professional Practice Core Skill (Ambulatory MA)	DAHS-NCCPPAMBMA23		
Skill/Learning Skills listed as "Performs per Policy" are located only within the first 4 pages for sign off. Not all skills are applicable to all areas – if not applicable mark as N/A	Skill Code (For CPPN Use Only)	Date Completed (or N/A)	Verifier Initials
Anterior Nares Specimen Collection	DAHS-NSCANSC		
Applying an Elastic (ACE™) Bandage (Ambulatory)	DAHS-NSCACETM		
Blood Pressure (Ambulatory)	DAHS-NSCAMPBPB		
Code Management (Ambulatory): Performs per Clinical Policy 6006 Responding to Medical Emergency Situations (Including Code Blue) and Elsevier Clinical Skills: Code Management	DAHS-NSCAMBCM		
Covid Anterior Nares Antigen Testing Skills Checklist	DAHS-NSCCANAT		
Crutch Fitting and Crutch Walking (Ambulatory): Performs per Elsevier Clinical Skills: Assistive Device Training: Crutches (Rehabilitation Therapy)	DAHS-NSCAMBCFCW		
Doppler Ultrasound for Blood Pressure Assessment in the LVAD Patient	DAHS-NSCDUABPPDVAD		
Fall Prevention: Completes e-module: "Fall Prevention Program for MAs and LVNs" DAHS-NGNFPPMA10 and performs per Clinical Policy 4005 Patient at Risk for Falling (Ambulatory section)	DAHS-NSCFPFRN		
Hand Hygiene Skills Checklist: Performs per UC Davis Health Policy 11023: Hand Hygiene	DAHS-NSCHH15		

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Holter Monitor (Ambulatory)	DAHS-NSCAMBHMA		
Incident Report Skills Checklist	DAHS-NSCIR15		
Injections: Intramuscular (IM), Subcutaneous (SQ), Z-Track Method (Ambulatory)	DAHS-NSCAMBIIMSZ		
Intradermal Skin Test Placement (Ambulatory)	DAHS-NSCAMBISTP		
Irrigating the Ear Canal (Ambulatory): Performs per Clinical Policy 4093: Irrigating the External Auditory Canal and Elsevier Clinical Skills: Ear Irrigations - CE	DAHS-NSCAMBIEC		
Isolation Precautions Skills Checklist: Performs per Clinical Policy 11025: Standard and Transmission Based Precautions for Infection Prevention	DAHS-NSCIP15		
Liquid Nitrogen Safety	DAHS-NSCLNS		
MDI with Spacer Skills Checklist	DAHS-NSCMDIS14		
Nebulizer, Pulmo-Aide and O2 Tank Method for Medication (Ambulatory)	DAHS-NSCAMBNP02TMM		
Nurse Patient Relationship Skills Checklist	DAHS-NSCNPR15		
Nursing Report Skills Checklist	DAHS-NSCNR15		
Obtaining a 12-Lead ECG Skills Checklist	DAHS-NSCOLE14		
Orthostatic Vital Signs (Ambulatory): Performs per Elsevier Clinical Skills: Assessment: Orthostatic Vital Signs - CE	DAHS-NSCAMBOVS		
Oxygen Therapy and Oxygen Delivery Principles Skills Checklist	DAHS-NSCOTODP15		
Peak Flow Meter (Ambulatory)	DAHS-NSCAMPFM		
Pediatric Comfort Restraint (Ambulatory)	DAHS-NSCAMPBPCR		
Seizure Precautions (Ambulatory)	DAHS-NSCAMBSP		
Suicide Risk Skills Checklist: Performs per UC Davis Health Policy 4016 Identification and Management of Patients at Risk for Suicide	DAHS-NSCSRA-17		

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Spirometry: EasyOne Air	DAHS-NSCSEO25		
Transcutaneous Bilirubin Readings (Ambulatory): Performs per Elsevier Clinical Skill Bilirubin Meter: Transcutaneous Monitoring (Maternal-Newborn) - CE	DAHS-NSCMBTBR		
Visual Acuity (Ambulatory)	DAHS-NSCMBVA		
Zoll AED Plus (Automated External Defibrillator)	DAHS-NSCZAEDP		

Signature and Printed Name of Verifier (preceptor or other verified personnel) who have initialed on this form:

Initial:	Print Name:	Signature:

PRECEPTEE STATEMENT AND SIGNATURE:

I have read and understand the appropriate UC Davis Health Policies and Procedures and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and I have the knowledge of the resources available to answer questions.

Signature:	Date:
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For supporting standards and instructions on how to complete Core Skills, please review [General Core: Supporting Standards and Validation](#)

Collaboration & Communication Core Skill (Ambulatory MA) #DAHS- NCCCACAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will function effectively within MA role and interprofessional teams		
Demonstrates consistent performance in precepted experience of professional collaboration and communication		
Cultural Sensitivity/Patient-Centered Care Core Skill (Ambulatory MA) #DAHS- NCCCSPCCAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will provide care that recognizes and respects patient preferences, values, and needs. MAs shall use cross cultural knowledge and culturally sensitive skills in implementing culturally congruent patient care		
Patient-Centered Care – Completed in CPPN General Nursing Orientation		
Population-Specific Care – Completed in CPPN General Nursing Orientation		
Advance Directives for Healthcare & Physician Order for Life-Sustaining Treatment Online Module #DAHS-NGNADPOLST16		
Age Specific Care Online Module #DAHS-NGNASC11- <i>Passing score of 85% on test</i>		
Pediatric Learning Solutions Online Module: Age Specific Care: Newborn through Adult and Child Abuse and Neglect		
Infection Prevention Core Skill (Ambulatory MA) #DAHS-NCCIPAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will utilize current evidence and standards of care in prevention, recognition, and treatment of patient infection		
Demonstrates consistent performance in precepted experience of using infection prevention standards of care		
Informatics Core Skill (Ambulatory MA) #DAHS-NCCIFOAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will effectively utilize information and technology to communicate, improve safety, and support decision making		
EMR Training		
Demonstrates basic technology skills (load paper, un-jam printers, print)		
Documentation Standards according to unit specific charting		
Documentation in Nurses' Progress Notes		
Use of Professional Exchange Report		
Navigates in Windows environment effectively		
Uses computer technology safely (log-in/log-out, protects passwords)		

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Medication Safety Core Skill (Ambulatory MA) #DAHS-NCCMSAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will administer patient medications in a consistent safe manner		
Completed Pediatric Learning Solutions Online Module : Basic Medication Calculation DAHS-NCHBMC23-PLS		
Demonstrates consistent performance in precepted experience of safe medication practices.		
Patient Rescue Core Skill (Ambulatory MA) #DAHS-NCCPRAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will effectively manage patient emergencies		
Demonstrates consistent performance in precepted experience of appropriate management of patient emergencies		
Patient Safety Core Skill (Ambulatory MA) #DAHS-NCCPSAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will provide safe patient care		
Demonstrates consistent performance in precepted experience of provision of patient safety.		
Professional Practice Core Skill (Ambulatory MA) #DAHS-NCCPPAMBMA23	Date	Verifier Initials
Expected Outcome: The MA will provide professional patient care consistent with organization and department philosophy, values, mission, and goals		
Demonstrates consistent performance in precepted experience of professional patient care		

For following skills may not be applicable to all nursing areas – if not applicable, mark N/A in the Date Column.

Anterior Nares Specimen Collection Skills Checklist #DAHS-NSCANSC	Date	Verifier Initials
References: Standardized Procedure 501: COVID-19 Testing of Employees and Ambulatory Patients with a Standing Order UC Davis Health Policy 11023: Hand Hygiene UC Davis Health Policy 11025: Standard and Transmission Based Precautions UC Davis Health Policy 18004: Specimen Labeling for Laboratory Processing UC Davis Health Policy 2111: Disinfection in Patient Care Areas		
Perform hand hygiene, don PPE, identify patient using two patient identifiers, explain procedure to patient		
Assist patient into a neutral relaxed position		
Insert entire swab tip into the nostril—approximately ½ to ¾ inch (1-1.5 centimeters)		
Rotate swab firmly against nasal wall in a circular path at least 4 times, taking about 15 seconds. Collect any drainage that may be present		
Use the same swab to repeat the process in the other nostril		

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Anterior Nares Specimen Collection Skills Checklist #DAHS-NSCANSC continued	Date	Verifier Initials
Place swab, tip first, into the transport tube provided.		
Label specimen, place in biohazard bag on ice, and send to lab		
Doff PPE as needed, perform hand hygiene, and disinfect patient area		

Applying an Elastic (ACE™) Bandage (Ambulatory) #DAHS-NSCACETM	Date	Verifier Initials
References: 1. Elsevier Clinical Skills: Dressing: Gauze and Elastic Bandages - CE		
Performs hand hygiene, dons appropriate PPE, introduces self to the patient, verifies the correct patient using two identifiers, explains procedure		
Provides privacy and assists patient into a comfortable, supine position		
Inspects the skin of the injured body area for alterations in integrity		
Palpates the area for swelling, paying close attention to areas over bony prominences		
Performs wound care as ordered, if indicated.		
Selects the extremity. Holds bandage roll in dominant hand; uses other hand to layer the bandage starting distally		
Begins with two circular turns to anchor the bandage just above the fingers or toes. Continues transferring the roll to the dominant hand while wrapping the bandage		
Applies bandage from the distal anchor point toward the proximal boundary using a figure-eight turn		
Stretches elastic bandage slightly to maintain uniform tension during application		
Ends the wrap bandage with two circular turns. Secures the end of the elastic bandage to the outside layer of the bandage, not the skin, with tape or clips		
Ensures elastic bandage reaches the proximal boundary. If a single bandage did not reach the proximal boundary, considered rewrapping extremity using a longer bandage or consulting the practitioner regarding alternatives for managing edema		
Assesses, treats, and reassesses pain		
Discards supplies, removes PPE, and performs hand hygiene		
Documents procedure in the patient record		

Blood Pressure Skills Checklist #DAHS-NSCAMPB	Date	Verifier Initials
References: 1. Elsevier Clinical Skills Blood Pressure: Upper Extremity or Elsevier Clinical Skills Blood Pressure: Lower Extremity		
Completion of online module "Blood Pressure: Upper Extremity" DAHS-NGN677-ECS		

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Blood Pressure Skills Checklist #DAHS-NSCAMPB continued	Date	Verifier Initials
Performs initial blood pressure at the end of the rooming process, and is able to verbalize why this is important		
Performs per Elsevier Clinical Skills Blood Pressure: Upper Extremity or Elsevier Clinical Skills Blood Pressure: Lower Extremity		
If initial BP is 140/90 or greater if needed, repeats after 5 minutes of quiet waiting time. Informs provider if second reading is 140/90 or greater. Documents additional BP readings in proper place in EMR		

Covid Anterior Nares Antigen Testing Skills Checklist #DAHS-NSCCANAT	Date	Verifier Initials
References: Standardized Procedure 501: COVID-19 Testing of Employees and Ambulatory Patients with a Standing Order UC Davis Health Policy 11023: Hand Hygiene UC Davis Health Policy 11025: Standard and Transmission Based Precautions UC Davis Health Policy 18004: Specimen Labeling for Laboratory Processing UC Davis Health Policy 2111: Disinfection in Patient Care Areas Inpatient COVID Antigen Testing Update		
Don full PPE (N95, face shield, gown and gloves)		
Identify patient using name and DOB		
Mark label with collector initials and the time of collection		
Open a sterile swab package		
Have patient tilt their head back to 70 degrees		
Insert the swab ½ to ¾ of an inch into the patient's naris. Rotate the swab, coming into contact with the mucus membranes for 15 seconds. Remove swab and repeat in opposite naris.		
Insert the swab inside the vial of medium and swirl 5 times while pressing the swab tip against the vial wall.		
Let the swab sit in the solution for 1 minute.		
Roll the swab 5 more times while pressing the swab tip against the vial wall.		
Remove and discard the swab, and securely re-cap the vial tube. Ensure vial is correctly labeled before sending to lab		
Remove PPE and perform hand hygiene		

Doppler Ultrasound for Blood Pressure Assessment in the LVAD Patient #DAHS-NSCDUABPPDVAD	Date	Verifier Initials
References: UC Davis Health Policy 5002: Durable Ventricular Assist Device: Nursing Management (Section V Paragraph B) Elsevier Clinical Skills: Doppler Ultrasound for Assessment of Blood Pressure and Peripheral Pulses - VAD Aware Training DAHS-NGNVADA15		
If possible, ensures that the patient is seated or supine for at least 5 minutes		

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Doppler Ultrasound for Blood Pressure Assessment in the LVAD Patient #DAHS-NSCDUABPPDVAD cont	Date	Verifier Initials
Positions the appropriately sized blood pressure cuff above the elbow with the bladder midline over the brachial artery		
Using a handheld doppler, locates the patient's brachial arterial Doppler sound. Tilts the probe at a 45-degree angle along the length of the vessel. Avoids putting excess pressure on the probe		
Maintains the position of the probe over the artery and inflates the blood pressure cuff until the arterial Doppler sound is no longer audible		
Deflates the cuff slowly and notes on the sphygmomanometer when the first Doppler sound is heard		
The number on the sphygmomanometer associated with the first Doppler sound is the patient's mean arterial pressure (MAP)		
Removes cuff, wipes gel from patient's arm. Discards supplies, removes PPE, performs hand hygiene, and documents findings in the EMR		
Cleans the face of the Doppler probe with a soft tissue. Follows manufacturer's recommendations for disinfecting the probe after each use		

Holter Monitor Skills Checklist #DAHS-NSCAMBHMA	Date	Verifier Initials
References: 1. Clinical Policy 11025, Standard and Transmission Precautions for Infection Prevention		
Pre-program monitor, pre-fill patient financial responsibility form and diary		
Set up monitor: Pre-program the monitor for 24 hours, 48 hours, 7 days or 21 days as ordered with patient's name, medical record number, DOB via recorder entry or computer program with HL7 interface using the order number. Place new battery in monitor and attach wires. Attach electrodes to wires.		
Review patient financial responsibility form with patient; have patient sign.		
Review diary and instructions with patient. Explain importance of filling out diary		
Inform patient they can perform daily activities except for tub bathing, showering, or swimming		
Instruct patient to avoid swinging or bumping the monitor. The battery should not be removed under any circumstances.		
Observe Clinical Policy 11025, Standard and Transmission Based Precautions for Infection Prevention		
Prep Skin: a. Shave areas as needed. b. Cleanse the area with a prep pad. c. Gently abrade the skin with the abrasive pad		
Attach the wire to the electrode before putting on the patient's chest. Place the electrodes in the anatomical locations, pressing on the outside of the electrode to make sure it is attached to the chest, not pushing the center of the electrode.		

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Holter Monitor Skills Checklist #DAHS-NSCAMBHMA Continued	Date	Verifier Initials
Locate proper anatomical landmarks:		
a. White lead- right mid-clavicle of the sternum		
b. Red lead- left anterior axillary line 6th rib (v5)		
c. Black lead- left mid-clavicle of the sternum		
d. Brown lead-1 inch right of the sternum 4th rib space (v5)		
e. Blue lead-center of manubrium		
f. Orange lead- left mid-clavicular line 6th rib (v4)		
g. Green lead-lower right margin over bone		
Tape the electrode cable wires on the electrodes with a stress loop allowing the wires to hang free		
Attach the monitor to the belt or shoulder/neck pouch		
Document Holter monitor placement in the patient's EMR.		
After the recording is completed, the patient returns the monitor with the diary.		
Remove the battery and disconnect the wires. Clean the wires and Holter monitor as directed by the manufacturer.		
Demonstrate proper downloading of recording to the Heart Station.		
Document in the patient's EMR record the Holter monitor was returned and recording sent to Heart Station via download.		
Fax the diary to the Heart Station. Send hard copy of the diary and the financial responsibility form to the Heart Station in a Heart Station interoffice bag.		

Incident Report Skills Checklist #DAHS-NSCIR15	Date	Verifier Initials
References:		
1. UC Davis Health Policy 1466: Incident Reports		
Completes all sections of the incident report form.		
If incident involved an injury, takes steps to restore individual's safety such as stabilizing patient's position after a fall and assessing for further injuries.		
Notifies appropriate personnel for patient, staff or visitor injury.		
Documents appropriately in patient record for injury/incident.		

Injections: Intramuscular, Subcutaneous, and Z-Track Methods Skills Checklist #DAHS-NSCAMBIIMSZ	Date	Verifier Initials
References:		
1. Clinical Policy 11010: Medications/Solutions/Vaccines in Single and Multiple Dose Containers		
2. Clinical Policy 4055: Medication Administration		
Completion of online module "Medication Administration: Intramuscular Injection" DAHS-NGNMAINTRAMI-ECS and "Medication Administration: Subcutaneous Injection" DAHS-NGNMAI-ECS		

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Injectons: Intramuscular, Subcutaneous, and Z-Track Methods Skills Checklist #DAHS-NSCAMBIIMSZ cont	Date	Verifier Initials
Selects the ordered medication according to the Eight Rights of Medication Administration, Clinical Policy 4055: Medication Administration		
Draws medication up into syringe per Clinical Policy 11010: Medications/Solutions/Vaccines in Single and Multiple Dose Containers		
Performs IM injections per Clinical Policy 4055 Medication Administration (Includes Z Track Method)		
Performs subcutaneous injections per Clinical Policy 4055 Medication Administration		

Intradermal Skin Test Placement and Reading Skills Checklist #DAHS-NSCAMBISTP	Date	Verifier Initials
References: - Standardized Procedures & Policies with Standing Orders 506 Administration of TB Skin Test in the Ambulatory Setting with a Standard Order Elsevier Clinical Skill: Medication Administration: Intradermal Injection and Allergy Skin Testing - CE Standing Order for Administration of PPD Test by Licensed Nurses in UC Davis Health Clinics		
Completion of online module "Medication Administration: Intradermal Injection and Allergy Skin Testing" DAHS-NGNMAINTRADI-ECS, completes post-test with an 80% score or higher		
Places skin test per Standing Order for Administration of PPD Test by Licensed Nurses in UC Davis Health Clinics		
Measures a skin test: - Inspect and palpate site for induration - Measure diameter of induration in millimeters transverse to the long axis of the forearm. (For mumps test, measure erythema) - Document date, time, millimeters of induration (erythema for mumps) - Report the measurement to the provider for interpretation as positive or negative		

Liquid Nitrogen (LN2) Safety Skills Checklist #DAHS- DAHS-NSCLNS	Date	Verifier Initials
References: UC Davis Health Policy 1624: Safe Management of Cryogenic Liquids UC Davis Health Policy 1624, Attachment 1: Liquid Nitrogen Safety - Manual Filling of Dewars		
Inspects all PPE and cryogenic equipment prior to use		
Wears safety glasses and face shield		
Wears waterproof, loose-fitting, cryogenic gloves		
Wears cuffless pants and shoes made of nonabsorbent material		
Wears long-sleeved shirt and lab coat or cryogenic apron. If lab coat or cryogenic apron is not worn, shirt is worn outside of the pants		
Verifies that Dewar is constructed to withstand cryogenic temperatures		
Verifies that Dewar is dry (water expands upon contact with LN2 and can crack the Dewar)		
Uses open Dewar flasks only in well-ventilated areas		

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Liquid Nitrogen (LN2) Safety Skills Checklist #DAHS- DAHS-NSCLNS continued	Date	Verifier Initials
Prevents and stands clear of any LN2 boil off, vapors or splashes		
Uses tongs or tweezers to immerse or withdraw objects from LN2		
To prevent pressure-causing condensation obstruction, uses a cork with a groove cut into the side or a loose fitting plug		
Uses safe lifting techniques when handling loads		

MDI with Spacer Skills Checklist #DAHS-NSCMDIS14	Date	Verifier Initials
Demonstrate knowledge of how the Pharmacy is notified for MDI.		
Verbalize how to administer MDI with Spacer correctly.		
Prior to and immediately after use of inhaled bronchodilators, antibiotics and steroids, the patient's pulse, respiratory rate and breath sounds are assessed. Also, any cough or mucous production may be noted.		
Verbalize when to notify Respiratory Therapy or Pharmacy.		
Demonstrate documentation of teaching		

Nebulizer, Pulmo-Aide and Oxygen Tank Method for Medication Skills Checklist #DAHS-NSCAMPNP02TMM	Date	Verifier Initials
References: 1. Clinical Policy 17021: Hand Held Nebulizer Treatment 2. Clinical Policy 6018: Oxygen Administration		
Completion of online module "Medication Administration: Nebulized" DAHS-NGNMANEB-ECS		
Seat patient in a chair or on an exam table close to nursing station if possible or leave door open so patient can be observed.		
Administer and document treatment per Clinical Policy 17021: Hand Held Nebulizer Treatment and Clinical Policy 6018: Oxygen Administration		

Nurse Patient Relationship Skills Checklist #DAHS-NSCNPR15	Date	Verifier Initials
Verifies the correct patient using two identifiers per UC Davis Health Policy 2702 , Patient Identification and Safety Bands for the Hospitalized Patient		
Creates a climate of warmth and acceptance		
Uses appropriate nonverbal behaviors (e.g., good eye contact, open relaxed position, sitting eye level with patient)		
Uses therapeutic communication skills such as restating, reflecting and paraphrasing to identify and clarify strategies for attainment of mutually agreed-upon goals.		
Uses effective communication skills to discuss discharge and termination issues and to guide discussion related to specific changes in patient's thoughts and behaviors.		
Summarizes and restates with patient what was discussed during interaction, including goal achievement		

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Nursing Report Skills Checklist #DAHS-NSCNR15	Date	Verifier Initials
For each patient, includes background information, assessment data, nursing diagnoses, interventions, outcomes, and evaluation, family information, discharge plan, and current priorities.		
Asks the nurse from oncoming shift if they have any questions regarding information provided.		

Obtaining a 12-Lead ECG Skills Checklist #DAHS-NSCOLE14	Date	Verifier Initials
References: 1. Structure Standards: Critical Care , Telemetry, Maternal Child Health 2. MacVu360 ECG Operator Manual		
Demonstrate use of 12-lead ECG available in area.		
Place patient supine and provide for patient privacy.		
Enter patient data prior to obtaining 12-lead ECG.		
Cleanse the skin areas to be used, if needed.		
Correctly place leads, ensure that there is no tension on the cable.		
Obtain 12-lead reading, trouble-shooting artifact.		
Recognize proper 12-lead tracings.		
Disconnect equipment and clean as necessary.		
Document all pertinent data, and notify appropriate staff of results		

Oxygen Therapy and Oxygen Delivery Principles Skills Checklist #DAHS-NSCOTODP15	Date	Verifier Initials
References: 1. UC Davis Health Policy 6018: Oxygen Administration		
Adjust the O ₂ to the flow rate as directed by the equipment recommendations to deliver the prescribed amount of O ₂ . The float ball in the flowmeter should be positioned so the flow rate line is in the middle of the ball.		
Check to see that O ₂ is flowing through the cannula or mask.		
For nonrebreather masks, the reservoir bag must be prefilled with O ₂ before it is applied to the patient. When using an O ₂ mask with a reservoir bag, adjust the flow rate so that the bag does not collapse, even with a deep inspiration.		
If humidification (i.e., a nebulizer with corrugated tubing) is being used, periodically check the tubing and drain the tubing of excess water as needed.		
Monitor all O ₂ delivery devices to ensure that they are functioning correctly and delivering the desired concentrations of O ₂ .		

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Peak Flow Meter Skills Checklist #DAHS-NSCAMPFM	Date	Verifier Initials
References: 1. Elsevier Clinical Skills: Peak Expiratory Flow Measurement - CE		
Completion of online module "Peak Expiratory Flow Measurement" DAHS-NEN166-ECS		
Performs per Elsevier Clinical Skills: Peak Expiratory Flow Measurement - CE		
If MA/LVN is performing this procedure, RN to determine the patient's level of dyspnea pre-procedure. Post-procedure, RN to assess for pain, dyspnea, bronchospasm, dizziness, and for the need to use a rescue inhaler.		
Pediatric Comfort Restraint Skills Checklist #DAHS-NSCAMPBPCR	Date	Verifier Initials
References: 1. Comforting Restraint for Immunizations, California Department of Public Health 2. How to Administer Intramuscular and Subcutaneous Vaccine Injections, Immunization Action Coalition, 2018		
Infant/Toddler: Correctly identifies appropriate location for injection - Have parent hold the child on parent's lap - Infants: the parent can control both arms with one hand - Toddlers: One of the child's arms embraces the parent's back and is held under the parent's arm. The other arm is controlled by the parent's arm and hand. - Toddlers: Both legs are anchored with the child's feet held firmly between the parent's thighs, and controlled by the parent's other arm		
Kindergarten and older children: Correctly identifies appropriate location for injection. - Hold the child on parent's lap or have the child stand in front of the seated parent. - Parent's arms embrace the child during the process. - Both legs are firmly held between parent's legs.		
Teenager: Correctly identifies appropriate location for injection. - Positioning or other techniques to facilitate muscle relaxation - Use of nonpharmacologic strategies: Distraction (e.g. humor, breathing techniques, imagery)		
Seizure Precautions Skills Checklist #DAHS-NSCAMBSP	Date	Verifier Initials
References: 1. Elsevier Clinical Skills: Seizure Precautions and Management - CE		
Completion of online module "Seizure Precautions and Management" DAHS-NGNSP-ECS		
Ensure a safe environment if possible		
Ensure emergency equipment is available		
Note time, duration, and type of seizure activity		
Remain aware of patient safety during seizure, including positioning and airway		
Notify appropriate personnel of seizure activity		

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Unit:	Title:
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Spirometry: EasyOne Air # DAHS-NSCSEO25	Date	Verifier Initials
References: 1. UC Davis Health Pulmonary Services Policy: Pulmonary Function Testing (PFT): III-1 2. UC Davis Health Policy 507 Ambulatory Point of Care Testing 3. UC Davis Health Ambulatory Care- Scope of Practice 4. UC Davis Health Aerosol Transmissible Diseases Control Plan 5. https://nddmed.com/pulmonary-resources/live-training 6. https://nddmed.com/pulmonary-resources/videos 7. https://www.youtube.com/user/nddmed		
Verify Orders in Epic		
Select Orders on laptop- "FVL", Select patient on laptop or search by Patient ID (MRN #)		
Complete patient information: Sex at birth, ethnicity- see map, DOB, Weight, Height		
Perform hand hygiene, don appropriate PPE, verify patient's identity by using at least 2 patient identifiers		
AIDET (Acknowledge, Introduce, Duration, Explanation, Thank You)		
Accept patient on EasyOne Air device		
Insert Flow Tube correctly and attach filter correctly		
Instruct and demonstrate to patient how to perform an acceptable test with nose clips (Patient sit tall, feet on ground)		
Verify 3 reproducible tests on device that are good tests (Level A- E are acceptable), end test, select end, select home		
Verify quality on laptop Session Quality – "A, B, C, D, E" Close order to send results to epic		
Session Quality "F" – Do not close order, provider will need to order full PFT		
Exit out of program, logout, clean equipment, return to dock		
Recognizes test quality messages and can coach the patient accordingly		
Describe how to enter a patient into EasyOne Air when Epic is down.		
Describe how to identify good tests.		
Explains when to apply Aerosolized Generating Procedure standards and appropriate PPE		
Can recall and edit patient information		
Generate patient report: Direct print from device Syncing with EasyOne application		
Visual Acuity Skills Checklist #DAHS-NSCAMBVA	Date	Verifier Initials
Completion of online module "Assessment: Visual Acuity" DAHS-NEN274-ECS		

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Visual Acuity Skills Checklist #DAHS-NSCAMBVA continued	Date	Verifier Initials
Stations patient appropriate distance from eye chart or seats patient at appropriate level at Titmus machine and can verbalize understanding of feet markings on chart.		
Documents presence of contact lens, glasses, prosthetic eye, etc. Verbalizes understanding that contact lenses do not need to be removed. Glasses may be on and off with scoring both ways.		
Verbalizes understanding what to do if patient is unable to focus eye(s) due to irritation, sensitivity and/or tearing.		
States normal parameters and fundamental scoring for eye testing. Articulates how appropriate chart is chosen for adults and children (based on age, development level, language, etc.).		
Demonstrates correct procedure for eye testing		
Explains the technique for shielding one eye while testing the other		
Documents the eye test scores correctly.		
Verbalizes understanding of the type of eye problems that should be reported to the provider immediately. Documents problems appropriately and interpreter if used.		

External Defibrillation Skills Checklist #DAHS-NSCZAEDP	Date	Verifier Initials
References: 1. UC Davis Health Policy 1640: Use of Automated External Defibrillator Zoll Plus Series 2. Elsevier Clinical Skill: External Defibrillation		
Read UC Davis Health Policy 1640: Use of Automated External Defibrillator Zoll Plus Series		
Complete External Defibrillation (AED) eCourse External Defibrillation #DAHS-NAC51-ECS with post-test		
Complete Elsevier Skills External Defibrillation Checklist (checklist is found in the e-course and in the Elsevier skill. Do not return checklist to CPPN)		

Zoll AED Plus (Automated External Defibrillator) Skills Checklist #DAHS-NSCZAEDP	Date	Verifier Initials
State how to decrease the risk of fire when using the AED in an oxygen-rich environment.		
Select the correct electrode pads based upon patient's age and weight.		
Ensure AED is ready for use daily and after each use.		
Describe when to send AED to Clinical Engineering after a code for uploading and analysis of event data and when to call Clinical Engineering for assistance with AED.		