



P.O. Box 320999
Jackson, MS 39232

IMPORTANT NUMBERS
 Phone: 601-933-0037
 Phone: 1-800-880-2772
 Fax: 601-932-9214
 Fax: 1-888-315-2775

After hours phone # 601-941-9401

MEDICAID ORIENTATION GUIDE

Four Types of Programs:

- A) **Home and Community Support (Single and Dual)**
 Continuous client care
 CNA can transport client anywhere **IF** on the Activity Plan
 Baths, personal care – Activity Plan
 Medicaid approves the number of hours per week/month
CNA’s Can NOT give medications or do Tube Feedings

- B) **In-Home Nursing Respite (Single and Dual)**
 Baths, dressings, Medications, Tube Feedings, Personal Care
 LPN cannot transport **UNLESS** a medical necessity & prior approval given by case manager.
 Medicaid approves the number of hours per week/month

- C) **Homemaker Program Elderly & Disabled**
 Personal Care, Light housekeeping, Errands
 Cannot transport
 Certain days/hours a week - cannot change days & hours **UNLESS** prior approval given by case manager.

- D) **In-Home Respite and Elderly & Disabled (Sitting Program)**
 Cannot transport
 Up to 40 hours/week- can be used anytime. If over 16 hours at a time, prior approval needed by case manager.

Each Program has specific notes to be used. In-Home Nursing Respite & In-Home Dual Nursing Respite uses the same documentation form.

Notes are your time sheet **and should be turned every Monday** by 4pm. Notes will be sent back to you if they are not correct. Fax, mail, Email (hnope@southernhealthcare.com), hand-deliver or drop in our box located outside the office door. To confirm receipt of notes, on Monday’s call 601-932-8273, type in extension 204. Leave your name, number of pages faxed and phone number to reach you. If you do not receive a call back, this means we received all of your notes. You will receive a call back only if there is a problem with the notes. Contact Hope if notes will be late. You will not get paid if notes are not turned in.

Minimum Wage of \$7.25 per hour will be paid on notes turned in after the 5th of the next month.

Direct Deposit or Paper Check will be held if credential(s) are expired. Monies will be released when current credentials are submitted.

Payday is every Friday. Holidays may push payday back one day. You are Not required to work Holidays. If client requests service on holiday, please let the client and SHA know if you cannot work the shift .

NO TIME AND A HALF for Holidays.

Our expectations of you on the job

- a. Professionalism
- b. Honesty
- c. Hard Worker

Medicaid Rules:

- a. **Do Not carry anyone to work with you**
- b. Do Not get into the client's personal business
- c. Do Not talk about your personal business
- d. Do Not eat the clients food
- e. Do Not accept any money from the client.
- f. Do Not talk on the clients phone **UNLESS** it is an Emergency
- g. **Do Not use your cell phone in the clients home UNLESS there is an Emergency**
- h. **DO NOT take client to your home for any reason.**
- i. **DO NOT SLEEP ON THE JOB**

Always report Suspicions of Abuse or Neglect to Southern Healthcare.

Complete an incident report if an accident occurs and the client is taken to the hospital.

First No Call No Show could be automatic termination.

Transportation - we must have a copy of your car insurance before you can transport a client.

Nurse Aides cannot do anything out of their scope, such as give meds, tube feedings, etc..

Credentials needed for file:

- a. CPR
- b. TB
- c. High school Diploma/GED
- d. Fingerprint Clearance Letter
- e. License/ Certification
- f. Auto Insurance

Make sure all credentials are renewed before expiration date. **REPEAT: Direct Deposit or Paper Check will be held if credential(s) are expired. Monies will be released when current credentials are submitted.**

In-services are required quarterly.

Medicaid fraud information - **DO NOT** falsify any documents. Client should sign off daily on your notes after your visit is completed.

It is your responsibility to call the family and Lillie or Lindsey in Medicaid if you are sick or you have another reason you cannot report for your shift. Please call SHA at 601-933-0037 or 1-800-880-2772.

Medicaid on-call number for after hours is 601-941-9401.

Have you been unemployed for the last 60 days? _____

If not full time, how many hours have you been working the last 60 days? _____

I fully understand the information listed above and it has been thoroughly explained to me.

NAME (Print) _____

SIGNATURE _____

DATE ____ / ____ / ____



Licensed Practical Nurse/Licensed Practical Nurse II Job Description

At Southern Healthcare Agency, a Licensed Practical Nurse is a competent, conscientious and dependable member of the professional health care team. The LPN functions under the supervision of the Registered Nurse.

QUALIFICATIONS

- Current license to practice as a licensed practical nurse in the state of practice.
- Graduate of an approved school of practical nursing
- Excellent mental, physical and emotional health.
- At least one (1) year of clinical practice as a licensed practical nurse in the United States in chosen area of practice is preferred.
- IV Certified (LPN II Only)

FUNCTIONS

- Assists in providing total care according to physician's orders and individual patient needs in accordance with recognized standards of practice and the client hospital's protocol and standards.
- Assists in assessing and documenting pertinent information that reflects the patient's clinical condition, with respect to meeting all patient needs (physical, emotional, spiritual). Reports the same to the registered nurse and/or physician.
- Assists in maintaining accurate and complete records of nursing observations and care given.
- Assists in assigning patients to ancillary personnel based on patient's needs and personnel's qualifications.
- Assists in performing treatments and administers medications as required.
- Assists the healthcare team in implementing the patient's plan of care.
- Assists with patient and/or family teaching.
- Assists in assuring cost effective outcome oriented care.
- Assists in maintaining a high level of order, safety and strict control over narcotics and other federally scheduled drugs.
- Assists in implementing emergency procedures in absence of a physician according to hospital protocol.
- Keeps abreast of current nursing trends and continuing education.
- IV therapy preparation and administration (LPN II Only)
- May accompany the individual into the community but can not compromise the entirety of the service period.

NAME: _____

SIGNATURE _____

DATE _____



POSITION: DMHA – Department of Mental Health Approved Worker

EDUCATION: High School Diploma or GED recommended but not required.
Approved by the DMH as an approved caregiver.

EXPERIENCE: No experience is necessary; however, must be recommended by a family member to care for a Mentally Retarded and Developmentally Disabled client.

RESPONSIBILITIES:

1. Provides a variety of patient care activities and related services necessary in caring for the personal needs and the comfort of patients.
2. Assists with the personal hygiene, meals and the changes bed linens.
3. Relies on the instructions and the pre-established guidelines as requested by the case manager and documented on the “Daily Activity Log.”
4. Does not administer medications or intravenous fluids.
5. Typically reports to a registered nurse or supervisor.

NAME _____

SIGNATURE _____

DATE ____ / ____ / ____



Department of Mental Health Aide or Worker (DMHA)
Job Description

A DMHA renders direct patient care including activities of daily living, maintaining safety and assessing individual's changes and setting activity goals. This position answers directly to their Medicaid Staffing Supervisor at Southern Healthcare.

EDUCATION

High School Education or equivalent – diploma or GED must be kept in personnel file. A family member or friend that is waived into the program by the Department of Mental Health must also have a diploma or GED.

RESPONSIBILITIES

1. If a family member or friend is waived into the program, the responsibilities are the same as a Department of Mental Health Aide (worker).
2. Encourage individuals to be active, to participate in recreational therapy and activities of daily living.
3. May transport the individuals into the community but not during the entire service period.
4. Assist with personal care and treatments, as instructed.
5. Keep environment safe and clean for individuals.
6. Observe individuals carefully and report changes in condition or behavior to your Medicaid Staffing Supervisor.
7. Follow established Policies and Procedures of Southern Healthcare.
8. Complete all necessary paperwork during your hours worked. Document all activities accomplished on The Activity Log and on the Contact Note.
9. Prepare the individual's meals and assist with eating when necessary.
10. Provide the Individual with personal hygiene including but not limited to:
 - Mouth Hygiene 3 times a day, especially after the individual has eaten a meal.
 - Bath and personal hygiene
 - Assist with clothing
 - Observe and report the presence of any reddened skin areas or breakdown to report to your Medicaid Staffing Supervisor
 - Make individual's bed daily
 - Tidy bedside, remove all unnecessary items
 - Keep individual's clothing clean and laundered
 - A DMHA worker is not allowed to perform duties outside their scope of practice. For example DMHA workers are NOT allowed to give the individual's medication or provide feedings through a gastric tube or PEG tube. These things MUST be done by the guardian. There are no exceptions. You will be terminated if you perform these duties.

NAME: _____

Signature _____

Date _____



**WAGE INFORMATION
FOR
DMH/IDD PROGRAM**

**Annual Medicaid In-Service
November 18, 2014**

_____ (Name) has been employed by Southern Healthcare Agency, Inc., having the necessary training and credentials to care for clients eligible for the IDD Elderly and Disabled Waiver Programs. The wages agreed upon for the services needed are:

- Home and Community Support IDD Waiver Program @ \$10.00/unit hr.
- Home and Community Support (Dual) IDD Waiver Program @ \$12.00/unit hr.

Employee Signature

Date

Southern Healthcare Representative

Date

**Department of Mental Health
Bureau of Intellectual & Developmental Disabilities
Mandated by Department of Mental Health Minimum
Standard No. 12.1 A, B ; 12.4
ANNUAL INSERVICE TRAINING/STAFF DEVELOPMENT
(Quarterly Training Requirement Excluded)
5 Contact Hours**

Instructor: Olive Crotwell, RN/ Medicaid Program Director
BSN from University Medical Center
BS of Psychology from Millsaps College
22 years Clinical experience

Training/Staff Development	DATE
A. Southern Healthcare Agency Mission	11/18/2014
B. Southern Healthcare Policy and Procedure Manual Review	11/18/2014
C. Health and Safety * Basic First Aid * CPR * Infection Control (a) Universal precautions (b) Hand-Washing *Work Place Safety (a) Fire and Disaster Training (b) Emergency/Disaster Response (c) Incident Reporting (d) Reporting of Suspected Abuse/Neglect	11/18/2014
D. Rights of Individuals Receiving Services	11/18/2014
E. Confidentiality	11/18/2014
F. Family/Cultural Issues/Respecting Cultural Differences	11/18/2014
G. Basic Standards of Ethical/Professional Conduct *Drug Free Workplace *Sexual Harassment	11/18/2014
H. Southern Healthcare Handbook HR – Employee Records	11/18/2014
I. Southern Healthcare Handbook- Ethics Policy	11/18/2014
J. Southern Healthcare Employee Specific Job Description	11/18/2014
K. Crisis Prevention/Intervention	11/18/2014

Training/Staff Development	DATE
L. Recover/Resiliency Oriented Systems of Care	11/18/2014
M. Person Centered Thinking	11/18/2014
N. Abuse Reporting * Vulnerable Adult Act *MS Child Abuse Law *Restraint Policy	11/18/2014
O. Record Keeping * Attendant * Nursing Respite	11/18/2014
P. DMH Operational Standards for Mental Health Intellectual/Developmental Disabilities	11/18/2014
Q. Southern Healthcare Agency Employee Training & Orientation Training	11/18/2014
R. Handbook for ID/DD Program Clients	11/18/2014
S. Medicaid Fraud	11/18/2014
T. Annual Satisfaction Survey Results * Positive Reviews *Negative Reviews *Ideas for Improvement	11/18/2014

Learning Objectives for Staff Development

- A. Be able to verbalize Southern Healthcare's Agency Mission
- B. Be knowledgeable of Southern Healthcare Agency's Policy & Procedure Manual
- C. Be able to identify and use correctly:
 - Basic First Aid
 - CPR
 - Infection Control Measures
 - Work Place Safety
- D. Display a working knowledge of & adhere to:
 - The Rights of Clients

- Confidentiality
 - Family Culture Issues & Differences
 - Standards of Ethical Conduct
- E. Understand & Maintain requirements for Employee Records
- F. Understand & Maintain all Ethical requirements
- G. Understand & Practice appropriate job description requirements
- H. Verbalize and practice a working knowledge of:
- Crisis Prevention & Intervention
 - Abuse Reporting for Adults & Children
 - Standards for Record Keeping
- I. Maintain & practice a working knowledge of the Operational Standards for the ID/DD program
- J. Maintain & practice all information contained in handbook for ID/DD employees
- K. Understand definition of fraud and consequences of fraud

Employee Name: _____

Employee Signature: _____

E-Mail Address: _____

DATE: _____



SELF-EXAM
EDUCATION FOR IDD/DD WAIVER
AND
ELDERLY AND DISABLED WAIVER PROGRAM

Directions: Please circle the "T" for true statements or "F" for false statements. Answer all the questions, sign and date.

- T F 1. Be sure the fire is completely out before putting up the fire extinguisher.
- T F 2. Even good hand washing can't remove all the germs so following the hand washing policy is a waste of time.
- T F 3. The way you wash your hands is just as important as how often.
- T F 4. Nationwide, the most costly on-the job accidents among healthcare employees are back injuries.
- T F 5. It does not matter when you report a serious incident as long as you get around to it eventually.
- T F 6. The only time that it is necessary to report an incident is when the client asks you to do so.
- T F 7. A report should be completed if an incident occurs involving the client (patient) or the nurse.
- T F 8. Talking to your friends about a client (patient) is breach of confidentiality.
- T F 9. Confidential information is any paper or document which contains information whose unauthorized disclosure would be illegal, unethical or improper.
- T F 0. Rights of Patients do not include understanding procedures performed on them.
- T F 1. A nurse or aid must personally agree with the client's (patients) particular beliefs, life styles or other other choices in order to care for that individual.
- T F 2. Family members may experience burnout from caring for someone with a chronic condition.
- T F 3. Most people with disabilities sit around and feel sorry for themselves.
- T F 4. All individuals experience crisis at one time or another.
- T F 5. When communicating with an angry patient, remain calm and do not show fear.
- T F 6. The steps to take when performing CPR are C = Compressions, A = Airway, B = Breath.
- T F 7. If the person choking cannot speak, then initiate the Heimlich Maneuver.
- T F 8. Restrain (hold down) a client (patient) if a seizure occurs.
- T F 9. Most workers with disabilities expect special treatment.
- T F 0. Allowing abuse is considered abusive action.

Name _____

Date _____

Name: _____ RN LPN

Date: _____

Directions: Please complete this checklist as accurately as possible. Answer each and every one.

- A= Performs proficiently and independently
- B= Some Experience (assistance required)
- C= No training or experience
- D= Not applicable (LPN's should mark this by RN skills)

Safety

Emergency Response

Basic Life Support (CPR level C)	A	B	C	D		
Code Protocol	A	B	C	D		
Use of crash cart	A	B	C	D		
Use of defibrillator (electrode attachment, changing ECG paper and running ECG strips)	A	B	C	D		
Arrhythmia interpretation	A	B	C	D		

Infection Control

Hand Washing	A	B	C	D		
Universal precautions/ Bloodborne pathogens	A	B	C	D		
Sharp disposal	A	B	C	D		
Disposal of linen/ trash/ body fluids	A	B	C	D		
Aseptic/ sterile technique	A	B	C	D		

Dressings:

Application	A	B	C	D		
Changing	A	B	C	D		
Maintaining	A	B	C	D		

Wound Care:

Cleaning	A	B	C	D		
Irrigation	A	B	C	D		
Assessment/ documentation	A	B	C	D		

Drains:

Maintains/ monitors	A	B	C	D		
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Types:

Penrose	A	B	C	D		
Jackson Pratt	A	B	C	D		
Hemovac	A	B	C	D		

Medication Administration

Medication

Administers/ documents medications according to hospital policy	A	B	C	D		
Given medication to 1-10 patients	A	B	C	D		
Given medication to 10-20 patients	A	B	C	D		
Provides teaching/ information for prescribed medication therapy	A	B	C	D		
Documents patient's response to medication administration	A	B	C	D		
Monitors for, identifies, communicates and intervenes in the event of allergic/ adverse reactions	A	B	C	D		
Verifies narcotic accuracy, verifies narcotic count and waste according to hospital policy and federal law	A	B	C	D		

PCA Pumps

Understands initiation, reloading, maintenance, discontinuation, and documentation according to hospital policy	A	B	C	D		
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RN ONLY

IV Therapy

Prepares appropriate tubing for solutions:

Continu-flo (primary)	A	B	C	D	
Secondary	A	B	C	D	
Buretrol	A	B	C	D	
Blood tubing	A	B	C	D	
Extension filtered set	A	B	C	D	
Changes tubing and fluid according to hospital policy	A	B	C	D	
Performs site care according to hospital policy	A	B	C	D	
Monitors for/ documents IV sites appropriately	A	B	C	D	
Performs venipuncture according to hospital policy	A	B	C	D	
Converts existing IV to heparin lock	A	B	C	D	

RN ONLY
RN ONLY

Central venous access:

Performs/ documents central line site care according to hospital policy	A	B	C	D	
Draws blood from central line implanted ports according to hospital policy	A	B	C	D	
Removes central line according to hospital policy	A	B	C	D	
Assesses, maintains and documents site care for implanted ports according to hospital policy	A	B	C	D	
Prepares IV admixtures when appropriate	A	B	C	D	
Blood/ blood products administration according to hospital policy	A	B	C	D	
Orders/ obtains blood according to hospital policy	A	B	C	D	
Prepares appropriate tubing/ fluid/ filter for blood products admin	A	B	C	D	
Initiates blood administration according to hospital policy	A	B	C	D	
Monitors blood product infusion according to hospital policy	A	B	C	D	
Reports suspected transfusion reactions following hospital protocol	A	B	C	D	
Disposes of blood exposed equipment according to hospital policy	A	B	C	D	

RN ONLY
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RN ONLY

TPN/ Intralipids Administration

Verifies additives with Physician orders	A	B	C	D	
Safely administers and changes tubing according to hospital policy	A	B	C	D	
Monitors and documents infusion, rate and patient response	A	B	C	D	

RN ONLY
RN ONLY
RN ONLY

Isolation Techniques

AFB isolation	A	B	C	D	
Enteric precautions	A	B	C	D	
Blood/ body fluids precautions	A	B	C	D	
Drainage/ secretion precautions	A	B	C	D	
Strict isolation	A	B	C	D	
Contact isolation	A	B	C	D	
Respiratory isolation	A	B	C	D	

Hazardous Material

Aware of hazardous materials in work environment and appropriate use	A	B	C	D	
Follows hospital policy for injury prevention, incident reporting, and accidental exposure	A	B	C	D	

Fire Safety

Understanding of the RACE method	A	B	C	D	
Understanding of the Code Red protocol	A	B	C	D	
Understanding of type and appropriate use of fire extinguishers for response to fire	A	B	C	D	

Disaster

Understanding of disaster protocol	A	B	C	D	
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Skills Proficiency Checklist
General Nursing

Participation in a hospital disaster drill	A	B	C	D	
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Restraints

Understanding of patient's rights regarding restraints	A	B	C	D	
Considers alternatives to restraints	A	B	C	D	
Plans nursing interventions for restrained patients to meet nutrition needs in hydration, mobility, toileting, assessment for circulatory complications and psychological support	A	B	C	D	
Applies restraints appropriately, according to hospital policy	A	B	C	D	

Accucheck

Calibration	A	B	C	D	
Performs procedure and documents according to hospital policy	A	B	C	D	
Performs and documents controls and cleaning	A	B	C	D	

Nursing Process

Conducts Interviews/ Psychological Assessment

Utilizes the nursing process to develop and/ or revise a plan of care	A	B	C	D	
Participates in the nursing process by assessing patients, gathering data and implementing/ evaluating the plan	A	B	C	D	
Collaborates with the patient, significant others, and other health care providers in meeting the patient's individual needs/ requests	A	B	C	D	
Promotes patient's rights and responsibilities, including privacy, safety, and spiritual/ ethical concerns	A	B	C	D	
Identifies any barriers affecting communication and implementation of plan of care/ treatments	A	B	C	D	
Assesses, communicates and documents developmental level	A	B	C	D	

Physical Assessment

Performs age specific physical assessment

Newborn (0-28 days)	A	B	C	D	
Infant (1-12 months)	A	B	C	D	
Toddler(1-3 years)	A	B	C	D	
Preschool (3-5 years)	A	B	C	D	
School Age (6-10 years)	A	B	C	D	
Adolescent (11-17 years)	A	B	C	D	
Adult (18-64 years)	A	B	C	D	
Adult Geriatric (65 and older)	A	B	C	D	

Utilizes assessment techniques

Inspection	A	B	C	D	
Auscultation	A	B	C	D	
Palpitation	A	B	C	D	

Utilizes equipment as appropriate

Blood pressure measuring devices	A	B	C	D	
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Thermometers

Oral	A	B	C	D	
Rectal	A	B	C	D	
Tympanic	A	B	C	D	
Doppler	A	B	C	D	
Flashlight/ pen light	A	B	C	D	



Skills Proficiency Checklist
General Nursing

Performs system-specific assessment and technical skills as appropriate (Note: Assessment parameters and equipment may apply to more than one system but are used only once for the purpose of competency validation.)

Respiratory-demonstrates knowledge and skills necessary for airways management monitoring and maintenance

Auscultates breath sounds	A	B	C	D		
Identifies cyanosis/ behavioral changes of hypoxia	A	B	C	D		
Inserts oral airways	A	B	C	D		
Prepares suction apparatus	A	B	C	D		

Performs suctioning technique

Oral	A	B	C	D		
Oropharyngeal	A	B	C	D		
Nasopharyngeal	A	B	C	D		
Endotracheal	A	B	C	D		
Tracheal	A	B	C	D		
Applies/ monitors pulse oximetry	A	B	C	D		

Initiates oxygen therapy

Nasal Cannula	A	B	C	D		
Masks	A	B	C	D		
Ventilates with ambu bag	A	B	C	D		
Encourages interventions to reduce identified risks	A	B	C	D		
TCDB	A	B	C	D		
Incentive spirometry	A	B	C	D		
Positioning	A	B	C	D		
Recognizes/ reports abnormal ABG's	A	B	C	D		

Skills necessary for care of patients with tracheotomy care/ monitoring/ maintenance

Assists with insertion/ securing of endotracheal tube	A	B	C	D		
Assesses ET placement	A	B	C	D		
Inflates/ deflates cuff as appropriate according to hospital policy/ procedure	A	B	C	D		

Skills necessary for care of patients with tracheotomy care/ monitoring/ maintenance

Assists with tracheotomy	A	B	C	D		
Assess for post tracheotomy pneumothorax, SQ emphysema and hemorrhage						
Performs tracheotomy care according to hospital policy/ procedures	A	B	C	D		
Inflates/ deflates cuff appropriately	A	B	C	D		
Chest tubes/ drainage- establishes drainage systems (Pleurovac/ two-bottle system)	A	B	C	D		
Assists with insertion	A	B	C	D		
Maintains closed system	A	B	C	D		
Applies suction as prescribed	A	B	C	D		
Monitors	A	B	C	D		
Milks/ strips only as appropriate	A	B	C	D		
Provides vaseline gauze and two Kelly clamps at bedside for use with bottle set-up	A	B	C	D		

Cardiovascular-demonstrates knowledge and skills necessary for maintenance/ monitoring cardiovascular/ circulatory hemostasis

Assesses perfusion through:

Vital signs	A	B	C	D		
Color	A	B	C	D		
Temperature	A	B	C	D		
Capillary refill	A	B	C	D		
Sensation	A	B	C	D		
Presence/ absence of edema	A	B	C	D		
Homan's signs	A	B	C	D		
Assesses apical pulse; notes irregular heartbeats	A	B	C	D		



Skills Proficiency Checklist
General Nursing

Assesses, monitors, and intervenes appropriately in the care of a patient with chest pain	A	B	C	D		
Promotes and enhances circulation through planning/ implementing for actual/ potential risks/ problems	A	B	C	D		
ROM leg exercises	A	B	C	D		
Activity devices for risks involving circulation	A	B	C	D		
Preventive devices for risks involving circulation	A	B	C	D		
Antiembolism stockings	A	B	C	D		
Sequential compression device	A	B	C	D		
Protects patients receiving anticoagulant therapy by flagging the armband and chart with alert stickers/ tape	A	B	C	D		

Neurological-demonstrates knowledge/ skills necessary for maintaining a stable neurological status

Performs baseline/ ongoing neuro assessment	A	B	C	D		
Level of consciousness	A	B	C	D		
Pupillary size, symmetry, reaction and eye movement	A	B	C	D		
Movements/ strengths	A	B	C	D		
Sensation	A	B	C	D		
Monitors for and promptly intervenes signs/ systems of increased intracranial pressure	A	B	C	D		

Hypo/ hyperthermia blanket

Applies/ operates according to hospital policy	A	B	C	D		
Operates on manual/ automatic	A	B	C	D		

Musculoskeletal

Performs baseline/ ongoing assessment of musculoskeletal function:

Movements/ sensation/ strength	A	B	C	D		
Proper body alignment	A	B	C	D		
Circulation	A	B	C	D		
Casts/ splints-assesses/ documents neuromuscular status of area(s) affected by device	A	B	C	D		
Recognizes/ intervenes for compartment syndrome pain/ swelling/ neurovascular compromise	A	B	C	D		
Traction-monitors body alignment/ skin condition	A	B	C	D		

Gastrointestinal- demonstrates knowledge/ skills to promote nutritional/ fluid balance/ elimination through assessment of ingestion/ digestion/ elimination

Performs initial/ ongoing assessment of gastrointestinal system

Oral assessment	A	B	C	D		
Abdominal/ bowel sounds assessment	A	B	C	D		
Color/ amount/ character of stools	A	B	C	D		
Vomiting; color/ amount	A	B	C	D		
Admission height/ weight	A	B	C	D		
Subjective assessment (pain/nausea)	A	B	C	D		
Elimination habits	A	B	C	D		

Nutrition

Diet	A	B	C	D		
Calorie count	A	B	C	D		
Insertion of NG tube	A	B	C	D		

RN ONLY

Feeding tubes

Verifies placement	A	B	C	D		
Insertion site care	A	B	C	D		
Administers internal feedings	A	B	C	D		
Monitors/ records residuals	A	B	C	D		
Irrigates	A	B	C	D		
Removes	A	B	C	D		
Changes feeding bag every 24 hours	A	B	C	D		
Feeding pump-operates/ troubleshoots	A	B	C	D		

Fluid Balance:

Salem sump/ nasogastric tube

Inserts	A	B	C	D		
Verifies placement	A	B	C	D		

RN ONLY

Applies appropriate suction

Wall suction	A	B	C	D		
Gomco	A	B	C	D		
Monitors output	A	B	C	D		
Irrigates	A	B	C	D		
Removes	A	B	C	D		

Elimination

Removes impaction	A	B	C	D		
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Enema

Fleets/ prepackaged	A	B	C	D		
Tap water/ soap suds/ saline	A	B	C	D		
Rectal tube placement/ maintenance	A	B	C	D		
Fecal incontinence bag	A	B	C	D		
Hemoccult-stool or emesis when ordered or as approved	A	B	C	D		

Colostomy/ ileostomy care

Assesses stoma	A	B	C	D		
Changes collection bag	A	B	C	D		
Irrigates as ordered	A	B	C	D		
Records output	A	B	C	D		
Skin care	A	B	C	D		

Genitourinary-demonstrates knowledge/ skills necessary for maintenance of urinary elimination

Performs baseline/ ongoing genitourinary assessment	A	B	C	D		
Urine color, character, amount, odor	A	B	C	D		
Bladder distention	A	B	C	D		
Measures, monitors and records intake/ output	A	B	C	D		

Urinary catheters

Inserts	A	B	C	D		
Monitors/ maintains	A	B	C	D		
Irrigates	A	B	C	D		
Removes	A	B	C	D		
Performs continuous bladder irrigation	A	B	C	D		
Strains urine as ordered	A	B	C	D		

Integumentary- demonstrates knowledge/ skills necessary for promoting skin integrity through intervention for prevention of deterioration

Performs baseline/ ongoing assessment

Color	A	B	C	D		
Turgor	A	B	C	D		
Temperature	A	B	C	D		
Lesions, bruises, wounds, etc.	A	B	C	D		
Suture removal	A	B	C	D		
Staple removal	A	B	C	D		
Decubitus, measurements-Skin care protocol as applicable	A	B	C	D		

Heating pads- moist/ dry

Operates	A	B	C	D		
Monitors	A	B	C	D		
Personal hygiene/ bathing	A	B	C	D		
Post mortem care	A	B	C	D		

Pain- demonstrates knowledge/ skills to promote comfort

Performs pain assessment	A	B	C	D		
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Patient/ Family/ Individual Teaching



Skills Proficiency Checklist
General Nursing

Provides information to keep patient/ family/ individuals informed of care/ treatments planned and documents accordingly	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>
Collaborates with other health care providers to ensure the patient/ family are knowledgeable in patient's care post discharge and of the resource available to him and documents	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>

Digital
Signature

Date

FOR OFFICE USE ONLY

Comments:

SHA Representative Signature

Date



LPN MEDICATION EXAMINATION

BASIC

Name: _____

Date: _____

Directions: Read each question carefully. Choose the one correct answer.

1. Inderal 30 mg is ordered. The available dosage is a scored 60 mg tablet. What amount will you give?
 1 tab
 0.5 tab
 Don't split tablet, notify pharmacist
 1½ tab

2. A patient is to receive 0.25 mg of digoxin (Lanoxin). The tablets on hand contain 0.125 mg. How many tablets should be given?
 1/2
b. 1
c. 1½
d. 2

3. Haldol 3 mg IM is ordered for your patient. It is available in 2 ml vials that contain 5 mg/ml. What will you give?
a. 0.5
b. 0.75
c. 1
d. 0.6

4. A patient is receiving digitalis preparation. Before administering a dose of this medication, a nurse takes the patient's pulse and finds it to be 52 beats per minute. Which of these would be appropriate for the nurse to take?
a. Withhold this dose of medication and give the next dose if the patient's pulse rate is satisfactory at that time.
b. Withhold the medication and report the patient's pulse rate to the physician.
c. Give the medication and chart the patient's pulse rate.
d. Give the medication and check the patient's pulse rate twenty minutes later.

5. Ms. Jackson, a nurse, is sitting in the hospital cafeteria having coffee with Ms. Brown, a nurse who works on the same unit. An ampoule of meperidine hydrochloride (Demerol) falls out of Ms. Brown's pocket. After picking up the ampoule, Ms. Brown says she has not had time to give the medication to the patient but plans to do so as soon as she returns to the unit. Which of these actions should Ms. Jackson take?
a. Check later to see if the drug has been given to the patient
b. Confront Ms. Brown with suspicion of possible narcotics abuse
c. Report the incident to the nurse in charge.
d. Trust Ms. Brown to do what she stated.

6. When drawing up a drug into a syringe, a nurse should expel bubbles from the syringe for which of these reasons?
a. To insure the proper dosage of the drug
b. To insure the sterility of the drug
c. To prevent chemical interaction between the air and the drug
d. To prevent unnecessary distention of the tissues by the drug

7. Prior to beginning the administration of newly ordered antibiotic therapy, a nurse should make which of these determinations?
- Is there a need to collect specimens for culture and sensitivity testing?
 - Has a blood specimen been drawn for monitoring baseline drug levels?
 - Was a urine specimen collected to determine initial specific gravity?
 - Does the patient have a history of noncompliance to drug therapy?
8. Side effects of nitroglycerin (Nitrostat) include:
- tremors and dyspepsia
 - papillary constriction and diarrhea
 - dry mouth and bradycardia
 - hypotension and flushing
9. A patient refuses to take a prescribed medication. Which of these actions should a nurse take initially?
- Find out the reason for the patient's action
- Explain to the client the importance of taking the drug
- Report the patient's action to the nurse in charge
- Chart that the patient refused to take the drug
10. A patient who is taking Tylenol should be observed for signs of toxic reaction, which include:
- hearing loss
- vascular changes
- gastric ulcers
- liver damage
11. Symptoms of digoxin toxicity include:
- anorexia
- scanty urine output
- a dry cough
- a skin rash
12. Because a patient is started on hydrochlorothiazide (HydoDiuril) therapy, the patient should be given which of these instructions?
- "Limit your intake of red meat."
- "Omit a dose of the medication if your pulse is under sixty beats per minute."
- "Rise slowly when you get out of bed."
- "Drink cranberry juice if you have burning on urination."
13. Which type of drug(s) will be automatically discontinued on their renewal date?
- Hypnotics
- Narcotics
- Antibiotics
- All of the above
14. For which of these reasons is sodium bicarbonate contraindicated for general use as an antacid?
- It may produce pylorospasm
- It can cause systemic alkalosis
- It suppresses the production of hydrochloric acid
- It decreases peristalsis



15. Digitalis produces which of these desired effects?

- It slows and decreases the amount of blood that is propelled into the ventricles.
- It slows and strengthens the heartbeat.
- It decreases the ability of the fibers of the heart to contract
- It narrows the pulse pressure.

16. A common side effect of Inderal is:

- constipation
- alopecia
- tinnitus
- excessive salivation

17. For which of these preparations is naloxone hydrochloride (Narcan) an effective antagonist?

- Opiates
- Alcohol
- Salicylates
- Cardiotonics

18. Prior to administering Coumadin, check to see if the patient was ordered a Protime (PT) and review the MAR for hold levels.

- True
- False

19. Which of the following would be of concern to the nurse after medicating a patient with Morphine?

- Respiratory rate of 6
- BP of 100/60 (BP prior to medication administration 124/68)
- Oxygen saturation of 96%
- A reduction in the rate of pain from 8 to 2 on a scale of 1 to 10.

20. List the five "rights" of medication administration.



LPN II MEDICATION EXAMINATION

Please answer the following questions if you are certified as an LPN II.

Name: _____

Date: _____

1. You are using a volumetric infusion pump and want to infuse 125 ml of solution per hour, you would set the volumetric infusion pump at?

- 62.5 ml/hr
- 125 ml/hr
- 250 ml/hr
- 15 ml/hr

2. Order: Infuse 750 ml of D5 $\frac{1}{2}$ NS over 16 hours. How fast will you set your IV rate?

- 120 ml/hr
- 47 ml/hr
- 40 ml/hr
- 42 ml/hr

3. Mr. Jones is ordered Vancomycin 1 gram IVPB every 24 hours for a post op wound infection. Which of the following should the nurse monitor during the course of his treatment?

- Ototoxicity
- Nephrotoxicity
- Serum drug levels
- All of the above
- None of the above

4. Your hospital is evacuating due to an environmental disaster. Your patient has an IV of D5 $\frac{1}{2}$ NS infusing at 125 ml/hr but you can not take the infusion pump. You will have to gravity drip the fluids and the IV tubing delivers 15 gtts/ml. How many drops per minute will you deliver?

5. Prior to hanging an IVPB antibiotic, the nurse must compare the name on the IVPB bag to the patient's ID band.

- True
- False