

EMERGENCY DEPARTMENT SKILLS CHECKLIST

MSI HEALTH INTERNATIONAL.

Please write the number that reflects your proficiency in each skill or patient care situation.

Levels of Proficiency:

0 = Unfamiliar with

1 = Theory; no practice

2 = Familiar with; need review

3 = Some experience; need minimal review

4 = Frequent experience; performs well

AGE-SPECIFIC TECHNOLOGY

- Neonate/Infant (birth – 1 year)
- Pediatric/Early Childhood
(1 year – 12 years)
- Adolescence (13 years – 17 years)
- Adult (18 years – 64 years)
- Geriatric (65 years and older)

TRAUMA PATIENT

Air Transport

- Rotary Wing
- Fixed Wing
- M.A.S.T.
- Gun Shot Wound
- Penetrating Trauma
- Blunt Trauma
- Natural Disaster Injuries
- Trauma Score

GENITOURINARY AND GYNECOLOGICAL EMERGENCIES:

- Assessment
- Epididymitis
- Pyelonephritis
- Renal Trauma
- Ruptured Bladder
- STDs
- Testicular Torsion
- Urethral Injury
- Urinary Calculi
- UTIs
- Foreign Bodies
- Sexual Assault
- Ovarian Cyst
- PID
- Vaginal Bleeding
- Renal Failure
- Fluid & Electrolyte Imbalances
- Hemodialysis
- CAPD
- Urinary Catheterization
- Assist with Pelvic Exam

ISOLATION PATIENT:

- Body Substance Isolation
- Reverse Isolation
- Universal Precautions
- Tuberculosis Isolation

OBSTETRICAL EMERGENCIES

- Assessment
- Spontaneous Abortion
- Placenta Previa
- Placenta Abruptio
- Pregnancy Induced Hypertension
- Emergency Delivery
- Postpartum Hemorrhage
- Ectopic Pregnancy
- Trauma in Pregnancy
- Newborn Resuscitation

ABDOMINAL EMERGENCIES

- Assessment
- Gastritis
- Ulcers
- Bowel Obstruction
- Intussusception
- Appendicitis
- Pancreatitis
- Cholecystitis
- Abdominal Aortic Aneurysm
- Esophageal Varices
- Surgical Abdominal Emergencies
- Assist with Peritoneal Lavage
- NG Tube Insertion
- Gastric Lavage
- Assist with Gastroscopy
- Assist with Sigmoidoscopy
- Assist with Colonoscopy

CARDIOVASCULAR EMERGENCIES

- Assessment
- Angina

CARDIOVASCULAR EMERGENCIES (cont.)

- Acute Myocardial Infarction
- Congestive Heart Failure
- Arrhythmia Interpretation
- Cardiopulmonary Arrest
- Pulseless Electrical Activity
- Malignant Hypertension
- Acute Aortic Dissection/Rupture
- Pericarditis
- Cardiac Contusion
- Cardiac Tamponade
- Obtain 12-Lead EKG
- Interpret 12-Lead EKG
- Use of Autotransfusion Systems
- Defibrillation
- Synchronized Cardioversion
- Assist with Pericardiocentesis
- Assist with Temporary Pacemaker Insertion
- Transcutaneous Pacemaker

Preparation, Calculation and Administration of:

- Lidocaine
- Bretylium
- Pronestyl
- Nipride
- Nitroglycerine
- Dopamine
- Dobutrex
- Isuprel
- Digitalis
- Sodium Bicarbonate
- Atropine
- Epinephrine
- Verapamil
- Esmolol
- Heparin
- Thrombolytics

Please check box to attest that all above information is true and correct.

Signature: _____

Date: _____

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PULMONARY EMERGENCIES

- ___ Assessment
- ___ ARDs
- ___ Asthma
- ___ COPD
- ___ Epiglottitis
- ___ Croup
- ___ Pneumonia
- ___ Pulmonary Edema
- ___ Pulmonary Embolus
- ___ Rib Fractures
- ___ Flail Chest
- ___ Pneumothorax
- ___ Tension Pneumothorax
- ___ Open Pneumothorax
- ___ Hemothorax
- ___ Pulmonary Contusion
- ___ Ruptured Airways
- ___ Ruptured Diaphragm
- ___ Assist with Thoracentesis
- ___ Assist with Intubation
- ___ Assist with Extubation
- ___ Assist with Cricothyrotomy
- ___ Assist with Arterial Line Insertion
- ___ Draw Radial Artery ABGs
- ___ Draw Femoral Artery ABGs
- ___ Draw Arterial Line ABGs
- ___ ABG Interpretation
- ___ Chest Tubes
- ___ Chest Tube Drainage System
- ___ Assist with Bronchoscopy
- ___ Nebulizer Set-up

Modes of Oxygen Treatment

- ___ Mask/Cannula
- ___ T-Tube
- ___ Ambu Bag
- ___ ETT
- ___ Tracheostomy
- ___ Aerosol Mask

Modes of Mechanical Ventilation:

- ___ IMV
- ___ CPAP
- ___ SIMV
- ___ A/C
- ___ PEEP

Airway Suctioning:

- ___ Oropharyngeal
- ___ Nasopharyngeal
- ___ Endotracheal

SHOCK EMERGENCIES

- ___ Hypovolemic Shock
- ___ Cardiogenic Shock
- ___ Neurogenic Shock

SHOCK EMERGENCIES (cont.)

- ___ Anaphylactic Shock
- ___ Septic Shock

DENTAL, EAR, NOSE AND THROAT EMERGENCIES

- ___ Assessment
- ___ Avulsed Tooth
- ___ Dental Abscess
- ___ Otitis Media
- ___ Ruptured Tympanic Membrane
- ___ FB in the Ear
- ___ Assist with Ear Irrigation
- ___ Meniere's Disease
- ___ Epistaxis
- ___ Nasal Fracture
- ___ FB in the Nose
- ___ Peritonsillar Abscess
- ___ FB in the Throat

FACIAL EMERGENCIES

- ___ Assessment
- ___ Bell's Palsy
- ___ Trigeminal Neuralgia
- ___ Facial Lacerations
- ___ Facial Fractures

MEDICAL EMERGENCIES

- ___ Assessment
- ___ Comatose Patient
- ___ Sickle Cell Crisis
- ___ Fluid and Electrolyte Imbalances
- ___ Hemophilia
- ___ Febrile Seizures
- ___ Hepatitis
- ___ AIDs
- ___ Alcoholic Ketoacidosis
- ___ Diabetic Ketoacidosis
- ___ HHNK
- ___ Hypoglycemia
- ___ Meningitis

NEUROLOGICAL EMERGENCIES

- ___ Assessment
- ___ Glasgow Coma Scale
- ___ Migraine Headaches
- ___ CVA/TIA
- ___ Shunt Problems
- ___ Seizures
- ___ Increased ICP
- ___ Concussion
- ___ Contusion
- ___ Skull Fractures
- ___ Epidural Hematoma

NEUROLOGICAL EMERGENCIES

- (cont.)
- ___ Subdural Hematoma
- ___ Subarachnoid Hemorrhage
- ___ Spinal Cord Injuries
- ___ Spine Immobilization Devices
- ___ Backboard Removal
- ___ Scoop Stretcher Removal
- ___ Application of Soft Cervical Collar
- ___ Application of Hard Cervical Collar
- ___ Assist with Cervical Tongs Insertion
- ___ Halo Traction Patients
- ___ Dilantin
- ___ Phenobarbital
- ___ Mannitol
- ___ Decadron
- ___ Solu-Medrol

ORTHOPEDIC EMERGENCIES

- ___ Assessment
- ___ Strains/Sprains
- ___ Fractures
- ___ Compartment Syndrome
- ___ Amputations
- ___ Buck's Traction
- ___ Skeletal Traction
- ___ Sling Application
- ___ Shoulder Immobilization Devices
- ___ Clavicular Splints
- ___ Ace Bandages
- ___ Finger Splints
- ___ Knee Immobilizers
- ___ Crutch Fitting
- ___ Cast Removal
- ___ Assist with K-Wire Insertion
- ___ Assist with Steinman Pin Insertion
- ___ Hare Traction
- ___ Air Splint
- ___ Assist with Revision of Amputated Parts
- ___ Use of Ring Cutter

OCULAR EMERGENCIES

- ___ Assessment
- ___ Conjunctivitis
- ___ Retinal Artery Occlusion
- ___ Corneal Abrasion
- ___ FB in Eye
- ___ Detached Retina
- ___ Orbit Fracture
- ___ Chemical Burns
- ___ Hyphema
- ___ Globe Rupture
- ___ Visual Acuity Examination

Please check box to attest that all above information is true and correct

Signature: _____ Date: _____

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OCULAR EMERGENCIES (cont.)

- ___ Eye Patch Application
- ___ Eye Irrigation

PSYCHIATRIC EMERGENCIES

- ___ Assessment
- ___ Anxiety/Panic
- ___ Depression
- ___ Suicide/Suicidal Behavior
- ___ Homicidal/Violent Behavior
- ___ Psychotic Behavior
- ___ Manic/Depressive Behavior
- ___ Situational Crisis

PSYCHOLOGICAL EMERGENCIES

- ___ Assessment
- ___ Grief
- ___ Sudden Death
- ___ SIDs
- ___ Sexual Assault
- ___ Child Abuse
- ___ Elder Abuse
- ___ Battered Adult

SUBSTANCE ABUSE EMERGENCIES

- ___ Assessment
- ___ Alcohol/Drug Dependency
- ___ DTs

SURFACE TRAUMA EMERGENCIES

- ___ Assessment
- ___ Lacerations
- ___ Assist with Suturing
- ___ Wound Dressings
- ___ Suture/Staple Removal
- ___ Assist with I & D
- ___ Avulsions
- ___ Amputation
- ___ Human Bites
- ___ Animal Bites
- ___ Snake Bites
- ___ Insect Bites

ENVIRONMENTAL EMERGENCIES

- ___ Assessment
- ___ Heat-Related Emergencies
- ___ Cold-Related Emergencies
- ___ Submersion Accidents
- Thermal Injuries:*
 - ___ First Degree
 - ___ Superficial Partial-Thickness
 - ___ Deep Partial-Thickness
 - ___ Full Thickness
 - ___ Smoke Inhalation
 - ___ Electrocutation Injuries
 - ___ Burn Dressings
 - ___ Wound Debridement

TOXICOLOGICAL EMERGENCIES

- ___ Assessment
- ___ Carbon Monoxide Poisoning
- ___ Drug Overdoses
- ___ Food Poisoning

MISCELLANEOUS

- ___ Triage
- ___ Trauma Documentation
- ___ Restraints
- ___ Post Mortem Care
- ___ Blood & Blood Products Admin.
- ___ Blood Pumps
- ___ Venipuncture
- ___ Obtaining Blood Cultures
- ___ Blood Glucose Monitoring
- ___ Insertion of IVs
- ___ Assist with Central Line Insertion
- ___ Heparin Lock Therapy
- ___ IV Push Medications
- ___ Continuous Infusion Pumps
- ___ Noninvasive Automatic Blood Pressure Machine
- ___ Rapid Infusion Device
- ___ Assist with Cut Downs
- ___ Assist with Intraosseous Infusions
- ___ Organ Donation
- ___ Use of Doppler

I certify that all of the above information is correct and that any misrepresentation or falsification of fact may be considered sufficient cause for immediate dismissal from _____. I have filled out this skills checklist to the best of my knowledge and agree that all of the information provided is correct (please check box).

NAME (Please Print Clearly)

DATE

SIGNATURE

LICENSE NUMBER