

**Security Forces Hospital Program
DEPARTMENT OF NURSING**

RECRUITMENT CHECKLIST

NEONATAL INTENSIVE CARE UNIT (NICU)

To: _____
Name of Candidate

Note: Please complete the skills checklist to ensure your individual experience may be clearly understood.

Tick (/) the appropriate column. The information will be used to ensure best possible placement based on your clinical expertise and our hospital's needs.

I believe that this is an honest and accurate assessment of my skills, abilities and knowledge. I understand that failure to perform and/or meet the checked duties will affect my evaluation and progress.

Please See Checklist Legend Below for Parameters A, B, C:

Applicant's Signature

Nurse: Patient ratio from last position = 1 Nurse: _____ Patients

| Clinical Skills | | A | B | C |
|---|---------------|----------|----------|----------|
| • Basic Cardiac Life Support (BCLS) <input type="checkbox"/> Certified | | | | |
| • Resuscitation in the Operating Room and Delivery Room (Neonatal Resuscitation Program - NRP) <input type="checkbox"/> Certified | | | | |
| • Implementation of isolations/standard precautions | | | | |
| • Assessment for Glasgow Coma Scale | | | | |
| • Neonatal Pain assessment & management | | | | |
| Feeding - Insertion/Care | • Nasogastric | | | |
| | • Orogastric | | | |
| • Maintaining neutral thermal environment | | | | |
| • Peripheral IV insertion & care | | | | |
| • Umbilical and Central line care | | | | |
| • Medication administration in neonate: IV, oral, etc. | | | | |
| • Operating a high frequency oscillating ventilator | | | | |
| • Fluid volume management in neonate – Input/output calculations & monitoring | | | | |
| • Operating a Nitric Oxide Delivery System | | | | |
| • Arterial Puncture for blood draws | | | | |
| • Venous/heel/finger stick blood sampling | | | | |
| • Arterial Blood Gas (ABG) Interpretation | | | | |
| • Operating a transport incubator with ventilator | | | | |
| • Photo-light Therapy & Parameters | | | | |

A = Competent, 2+ years recent experience: Independent in skill and knowledgeable of disease process.

B = Novice: Knowledgeable of skill/disease but needs supervision.

C = Unskilled: Lack knowledge/skill to attend to patient/need.

Please (✓) check box if applicable.

| Clinical Skills | | A | B | C |
|--|-----------------|----------|----------|----------|
| Oxygen Administration: | • nasal cannula | | | |
| | • face mask | | | |
| | • head box | | | |
| • Interpreting Laboratory Results | | | | |
| Prepare and Assist with Procedures | | A | B | C |
| • Insertion of Umbilical Arterial/Venous Catheter | | | | |
| • Insertion of Central Venous Line / Long Line | | | | |
| • Intubation / Extubation | | | | |
| • Exchange Transfusion | | | | |
| • Lumbar Puncture | | | | |
| • Peritoneal Dialysis | | | | |
| • Nitric Oxide Administration | | | | |
| • Survanta (Surfactant) Administration | | | | |
| • Blood Transfusion | | | | |
| • Metabolic Screening | | | | |
| Equipment / Instruments Used | | A | B | C |
| • Ventilators: | | | | |
| ▪ Babylog 8000 Plus/VN500 Ventilator | | | | |
| ▪ Bird Ventilator | | | | |
| ▪ Synchronizing Assisted Ventilation | | | | |
| ▪ High Frequency Oscillating Ventilator | | | | |
| ▪ NCPAP / Trigger CPAP | | | | |
| ▪ T-Piece or NEOPUFF Resuscitator | | | | |
| • Cardio-Respiratory Monitor | | | | |
| ▪ Philipps MP50 Monitor | | | | |
| ▪ Hewlett Packard Monitor | | | | |
| • Incubators (With and without Humidity) | | | | |
| • O ₂ Analyzer | | | | |
| • Pulse Oximeter | | | | |
| • Blood Warmer | | | | |
| • Micro IV Pump <input type="checkbox"/> Alaris <input type="checkbox"/> Other | | | | |
| • Syringe Pump <input type="checkbox"/> Alaris <input type="checkbox"/> Other | | | | |
| • Warmer Bed (Resuscitaire / Versalet) | | | | |
| • Glucometer | | | | |
| • Electrocardiograph (ECG) Machine | | | | |
| • Phototherapy Lights (Intensive Phototherapy) | | | | |
| • ABG Machine | | | | |
| • Vapotherm High Flow Oxygen Therapy | | | | |

Please (√) check box if applicable

| Specific Condition Managed | | A | B | C |
|-----------------------------------|-------------------------------------|----------|----------|----------|
| Cardiac : | Patent Ductus Arteriosus | | | |
| | Tetralogy of the Fallot | | | |
| | Patent Foramen Ovale | | | |
| | Transposition of the Great Arteries | | | |
| | Cyanotic Heart Lesions | | | |
| Respiratory : | Transient Tachypnea of Newborn | | | |
| | Respiratory Distress Syndrome | | | |
| | Persistent Pulmonary Hypertension | | | |
| | Meconium Aspiration | | | |
| | Congenital Pneumonia | | | |
| Endocrine : | Hypoglycemia | | | |
| | Infant of Diabetic mother | | | |
| | Metabolic Disorder | | | |
| Nephrology : | Renal Agenesis | | | |
| | Hydronephrosis | | | |
| | Multicystic kidney | | | |
| Gastrointestinal: | Necrotizing Enterocolitis | | | |
| | Omphalocele | | | |
| | Gastroschisis | | | |
| | Hiatal Hernia | | | |
| | Diaphragmatic Hernia | | | |
| | Cleft Lip & Palate (+feeding) | | | |
| | Tracheoesophageal fistula | | | |
| Neurology : | Birth Asphyxia (HIE) | | | |
| | Hydrocephalus | | | |
| | Meningocele | | | |
| | Intracranial Hemorrhage | | | |
| Hematology : | ABO Incompatibility | | | |
| | RH Incompatibility | | | |
| Others: | Prematurity (24-36 weeks) | | | |
| | Sepsis | | | |
| | Down Syndrome | | | |
| | Edward Syndrome | | | |
| | Niemann-Pick Syndrome | | | |
| | Failure to Thrive | | | |