AL HADA MILITARY HOSPITAL NURSING DEPARTMENT

NAME:	
DATE:	

OPERATING ROOMS RECRUITMENT SKILLS CHECKLIST: PERIOPERATIVE NURSING

AIM OF CHECKLIST:

When completing the following, please remember that this checklist is used by the reviewer to access your overall competency and suitability to a particular area.

Please feel free to elaborate on any area you feel necessary to give a more comprehensive overview to the reviewer.

For your most recent Operating Room experience, indicate the following information:

>	Number of beds in hospital.	
-	Mumber of Operating Pooms	functioning

Number of Operating Rooms functioning.
 Average number of Operating Room cases per day.

> Number of years of Perioperative nursing experience.

EXPERIENCE:

How frequently have you given nursing care to patients with the conditions listed below (within the last two years).

Experience:

- 1 None
- 2 Limited, Need Practice
- 3 Frequent, Well Skilled

	to be a second	SCRUB CIRC		CULATE		
	1	2	3	1	2	3
1. GENERAL	- SE	751	12.			
Major				-		
Minor		-				_
Laparoscopic Chole, Hernia, Others		_			_	
Pediatrics (PDA, Pylorotomy, Imperforate Anus, etc.)		+	\vdash	-		-
II. OB/GYN	1	1.5	25.2	1		
Major/Oncology					_	1
Laparoscopic: LAVH/Hysteroscopy						1
Laser: Cervical/Vulva/Peritoneal ,		+	+	-	-	-
III. OPTHALMOLOGY	1 13	SKA	W. 3 W. 1	7.30	111 /	_
Retinal/Laser				_	-	-
Corneal - Transplant						_
Cataract Surgery (Phaco-IOL)					1	_
DCR						1

			1	2	3	1	2	1
	ENT							
	Head/Neck Surgery							1
100	Aural/Nasai						-	1
	Endoscopic - FESS/MESS		-			_	1	1
	Laser: Bronchoscopic/Laryngeal		-	-	\vdash	-	-	+
V.	ORTHOPEDIC			-	-		1	_
THE ST	Trauma						T	T
2000	Joint Total implant)							T
	Arthroscopy (Knee, Shoulder)							1
	Spinal Surgery						-	1
VI.	UROLOGY		34		1		1	1
	Cysto/Turp			T	T		T	T
	Nephrectomy							T
	Renal Transplant							T
	Percutaneous Lithotripsy							T
			. [1
VII.	VASCULAR						-	
	Peripheral - grafts							1
	Major - Aneurysms							T
	A.V. Fistula		F				-	
VIII.	THORACIC			1.5		-		1
	Major - Thoracotomy						T	T
	Laparoscopic: Thoracoscopy							I
TV	NEUROSURGERY		-			-	1	1
IX.	Craniotomy (MIDAS Rex/Anspach Drills)		H		1	1	-	-
-	Spinal		-		-	1	-	+
-	Stereotactic Brain Biopsy		-	-	-	1 -	-	+
-	Burr Hole/ICP		-	+	-	-	-	+
-	Buil Hold ICI		-	-		1 -	-	+
X.	ORAL MAXILLO FACIAL/DENTAL		17	8 12	A Carlos	1	1	
	Dental Restoration		1	-	T. Par	1	7	T
	Craniofacial Surgery			_	_	1 -	-	+
			-		_		-	1
XI.	PLASTICS			200	100			
	Minor/Cosmetic		-	T			1.	T
	Major Grafts/Revisions				-			7
	Burns						\top	\neg
	Pediatric (Palate, Lip)							
XII.	CARDIAC	*			1 2 3 / 3	1		
7411.	Adult (CABG, Valves)		3	M T	-	1	11111	-
	Pediatric (Simple Vs. Complex Repair)		-	-	-	1	-	-
	· Complex (complex repair)		-	-	-	1 -	-	-
XIII	HEPATOBILIARY		ē.	No. of Section	ex tis	1	131	1,5
	Liver Transplant			STORY BY				

Date:

Name:

SCRUB

CIRCULATE

v.		
What is yo	ur average staffing ratio or number of n	urses per room ?
Have you o		f a particular surgical service ? E.g.; Vascular
Yes	No	15:41 Bl4
If yes, whi	ch service (s) and for how long	
Are you of	en assigned to departments other than C	D.R., for example L *ý& D, Recovery Room, E.R.
Yes	No	is a ^{the}
		*
Please spec	rify the number of whole day/year spent	in: O.R.
Specify oth	ner department and number of day/year:	-
	N. C.	
		1800
Thank you probations period.	for completing the above. Demonstrat ry period. Inability to demonstrate skil	tion of skills stated will be expected during 90 days als stated may result in termination during probationary
	+>	(20)
		Name / Signature