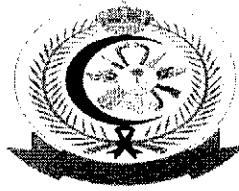


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وزارة الدفاع والطيران والمفتشية العامة
مستشفى الأمير سلطان للقوات المسلحة
بمنطقة المدينة المنورة

إدارة التمريض

OR / RR SKILLS CHECKLIST

NAME OF APPLICANT: _____ DATE: _____

Read the checklist below and tick the appropriate box, which corresponds to your proficiency /frequency of experience level on those particular skills.

Remember!! Answer honestly, in order that the reviewer can validate your overall competency and suitability for the position.

LEVELS OF PROFICIENCY KEY:

1. NO EXPERIENCE
2. LIMITED EXPERIENCE (Novice) = needs practice, assistance and guidance
3. ADVANCED BEGINNER = performs routine function; may need review and minimal supervision
4. COMPETENT = prioritize, completes functions independently , without supervision
5. PROFICIENT / EXPERT = mastery in performance, capable of supervising and /or train others.

FREQUENCY OF EXPERIENCE KEY:

1. OBSERVED ONLY / NEVER DONE
2. RARELY DONE (< 6 times per year)
3. INTERMITTENT EXPERIENCE (1 – 2 times / month or more than a month)
4. 1 – 2 YEARS CONTINUOUS EXPERIENCE
5. MORE THAN 2 YEARS CONTINUOUS EXPERIENCE

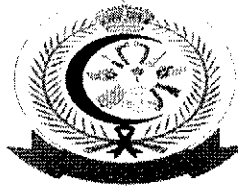
SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
OPERATING THEATRE SETTING:										
» Anaesthesia nurse										
» Circulate (scout) nurse										
» Scrub (instrument) nurse										
PACU (Post Anaesthesia Care Unit Recovery Room)										
CARE OF PATIENT RECEIVING ANAESTHESIA										
OPERATING THEATRE SETTING										
» Anaesthesia nurse										
» Circulate (scout) nurse										
» Scrub (instrument) nurse										

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إدارة التمريض

OR / RR SKILLS CHECKLIST

NAME OF APPLICANT: _____ DATE: _____

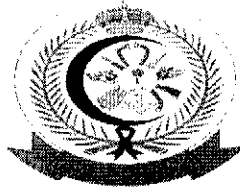
SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
TYPES OF ANAESTHESIA										
» General anaesthesia										
» Regional anaesthesia										
» Spinal										
» Epidural										
» Caudal										
» Bier's block										
» Blocks										
MONITORING DURING ANAESTHESIA										
» BP										
» Oxygen saturation										
» ECG										
» Arterial pressure lines										
» Central venous pressure lines										
INVESTIGATIONS										
» Arterial blood gas										
» Haemoglobin testing										
» Blood glucose testing										
INDUCTION OF ANAESTHESIA										
» Induction agents IV/Vaporisers (inhalation agents)										
» Stages of induction										
» Cricoid pressure (crash induction)										
ANAESTHETIC MACHINES										
» Ohmeda										
» Datex										
» Others:										
»										
VENTILATORS Adult / Pediatrics										

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NAME OF APPLICANT: _____

DATE: _____

SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
MUSCLE RELAXANTS										
➤ Long acting non depolarising										
➤ Short acting non depolarising										
➤ Depolarising muscle relaxant										
ENDOTRACHEAL TUBES AND EQUIPMENT										
COMPLICATIONS OF ANAESTHESIA										
➤ Scoline apnoea										
➤ Cardiac arrest										
➤ Laryngo spasm										
➤ Respiratory arrest										
➤ Pnuemathorax										
➤ Cardiac arrythmias										
➤ Malignant hyperthermia										
➤ Anaphylactic / hypovolemic shock										
OPERATING OF EQUIPMENT										
➤ Thermal devices										
➤ Warming blankets										
➤ PCA (patient controlled analgesia)										
➤ Blood warming devices										
➤ Infusion pumps										
MISCELLANEOUS										
➤ Techniques for prone position										
➤ Intubation with fibre-optic bronchoscope										
➤ Emergency percutaneous tracheostomy										
➤ MRI compatible equipment for anaesthesia										



OR / RR SKILLS CHECKLIST

NAME OF APPLICANT: _____ DATE: _____

SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
I. GENERAL SURGERY SCRUB EXPERIENCE										
➤ Abdominal perineal resection										
➤ Appendectomy										
➤ Bowel resection/Hemicolectomy										
➤ Cholecystectomy										
➤ Gastrectomy										
➤ Herniorraphy										
➤ Hiatal herniorraphy										
➤ Mastectomy										
➤ Hypovolaemic shock										
➤ Whipples procedure										
II. OB / GYNE										
➤ Major / Oncology										
➤ Laparoscopic : LAVH / Hysterectomy										
➤ Laser: Cervical / Vulva / Peritoneal										
III. OPHTHALMOLOGY										
➤ Retinal / laser										
➤ Corneal – transplant										
➤ Cataract (Phaco – IOL)										
IV. ENT										
➤ Head and neck surgery										
➤ Nasal / aural										
➤ Endoscopic – FESSS / MESS										
➤ Laser , Bronchoscopic / laryngeal										
V. ORTHOPEDIC										
➤ Trauma										
➤ Joint total, partial implant										
➤ Arthroscopy (knees , shoulder)										
➤ Spinal surgery										



OR / RR SKILLS CHECKLIST

NAME OF APPLICANT: _____ DATE: _____

SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
VI. UROLOGY										
➤ Cysto / tryp										
➤ Nephrectomy										
➤ Renal transplant										
➤ Percutaneous lithotripsy										
VII. VASCULAR										
➤ Peripheral – grafts										
➤ Major aneurysm										
➤ AV fistula										
VIII. THORACIC										
➤ Major – thoracotomy										
➤ Laparoscopic : Thoracoscopy										
➤ Bronchoscopy										
IX. NEUROSURGERY										
➤ Craniotomy (MIDAS Rex / Anspach Drills)										
➤ Stereotactic Brain Biopsy										
➤ Spinal										
➤ Burr Hole / ICP										
X. ORAL / MAXILLO FACIAL / DENTAL										
➤ Dental restoration										
➤ Craniofacial surgery										
XI. PLASTICS										
➤ Minor / cosmetics										
➤ Major grafts / revisions										
➤ Burns										
➤ Pediatric – palate, lip										
XII. CARDIAC										
➤ Adult (CABG, Valves)										
➤ Pediatric (simple vs. complex repair)										

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NAME OF APPLICANT: _____ DATE: _____

SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
XIII. HEPATOBILIARY										
➤ Liver transplant										
PACU / RECOVERY ROOM										
➤ ECG monitoring										
➤ Glucometer										
➤ Haemoglobinometers										
➤ Infusion pumps										
➤ Laryngeal masks										
➤ Non-invasive blood pressure										
➤ Patient assessment in recovery										
➤ PCA pump										
➤ Pulse oximetry										
➤ Patient transfer to unit										
➤ Administration of medication										
➤ Suctioning										
➤ documentation										
INITIAL POST - OPERATIVE CARE OF:										
➤ Chest drains										
➤ Arterial lines										
➤ CVP Lines										
➤ blood transfusion										
➤ Di abetic patient										
➤ Epi dural anaesthesia										
➤ General anaesthesia										
➤ Lar yngeal spasm										

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NAME OF APPLICANT: _____ DATE: _____

SKILLS	PROFICIENCY					FREQUENCY				
	1	2	3	4	5	1	2	3	4	5
INITIAL POST – OPERATIVE CARE OF:										
➤ Regional anaesthesia										
➤ Spinal anaesthesia										
➤ Tracheostomy										
➤ Vascular surgery										
➤ Neurosurgery										
➤ Resuscitation										
OTHER RELEVANT EXPERIENCE (Please specify)										
MATERIALS MANAGEMENT (Please specify experience)										
CSSD/TSSU (Please specify experience)										

CERTIFICATION	YES	NO	Date issued / Expiration
Basic Cardiac Life Support (BCLS)			
Pediatric Advanced Life Support (PALS)			
Advanced Cardiac Life Support			
Saudi Council Licensure			
Others:			

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NAME OF APPLICANT: _____ DATE: _____

ADDITIONAL INFORMATION:

*This skills checklist is part of the application process. False representation of information **WILL** result in a review of the applicants contractual / employment status.*

Number of experience: _____ **months / year(s)**

I hereby certify that the information given above is true and accurate account of my proficiency.

Comments:

Print name: _____ Signature: _____ Date: _____