



ARMED FORCES HOSPITAL SOUTHERN REGION
KHAMIS MUSHAYT
CRITICAL NURSING CARE

NEONATAL INTENSIVE CARE CHECKLIST
(HRS/F066/02)

NAME OF APPLICANT: _____

DATE: _____

<p>HOW TO COMPLETE THIS FORM:</p> <p>A thorough evaluation of your skill level in various Specialty areas will enable us to locate assignments that are suitable to your skills and the needs of our patients. Please place an “X” in the box that most accurately describes your level of expertise for this skills listed.</p>	<p>LEVELS OF PROFICIENCY:</p> <p>A = Perform Well (at least one year of current experience, very comfortable performing without supervision) B = Limited Experience (6-12 months, within the past two years, would require some assistance) C = Perform Infrequently (less than three months of experience, need more experience and practice, assistance required) D = No Experience (have never performed this task, willing to learn)</p>
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SKILL	A	B	C	D	COMMENTS (IF ANY)
CARE OF PATIENTS WITH:					
Attendance at high-risk deliveries					
Resuscitation/stabilization in delivery room					
Transport of Infants to/from hospital					
Hyperalimentation/TPN & lipids					
Blood & blood products transfusions					
Rh-isoimmunized neonate					
Exchange transfusions					
Insulin dependent mother/neonate					
Chest Tubes					
Central Line					
Umbilical arterial / venous lines					
<i>Respiratory Needs:</i>					
Interpret ABGs/CBGs					
Tracheostomy					
Severely premature neonates (<1000 grams)					
Cardiac Anomalies					
Post Surgical Neonates – Diaphragmatic Hernia - Laparotomy/Colostomy - Meningomyelocele					
Tracheoesophageal fistula					
Ventricular Peritoneal (VP) shunt					
Requiring NCPAP					

SKILL	A	B	C	D	COMMENTS (IF ANY)
GENERAL SKILLS:					
Obtain blood sample, venipuncture					
Obtain blood cultures					
IV insertion					
Draw arterial Blood gas from long lines					
Heelstick sample and CBG					
General Computer experience					
Tube feedings (NGT/OGT)					
Nutritional / IV calculations					
Drug/Dosage calculations					
<i>Prepare and assist with :</i>					
UAC/UVC line insertion					
Lumbar puncture					
ETT intubation / extubation					
Chest Tube insertion					
Supra pubic bladder tap					
PHYSICAL ASSESSMENT :					
Cardiac – identify murmurs					
Gestational age assessments					
Respiratory					
Breath sounds					
Abdominal					
Girth					
Bowel sounds					
PHARMACOLOGY AND TITRATIONS:					
Dopamine/Dobutamine					
Phenobarbitone					
Prostaglandin					
Epinephrine					
Fentanyl					
Midazolam					
Morphine					
Insulin					
Digoxin					
EQUIPMENT FAMILIAR WITH:					
Radiant Warmer/Open Care Unit					
Isolette					
Wall Units Suction					
Nasal cannula					
Ventilation – Bourns					
- Bear Cub 750					
- Draeger, other / SLE 5000					
High Frequency Ventilation – oscillator					
- nitric oxide					
Pulse Oximeter					
Blended O2					
Blood Gas Machine					
Glucometer					
Syringe Pump					

Revised January 2010

OTHERS:

➤ What is the patient nurse ratio in the unit you work in at present?
level 3 Ventilated Neonate: (intensive care)

level 2 : Neonates: (intermediate care)

level 1 :Neonates: (continuing care)

➤ What is the average monthly admission rate in the unit you work in at present?

➤ How often in a week are you assigned to care for a ventilated neonate?

➤ How many beds is the unit you now work in?

Intensive Care: _____

Intermediate: _____

CERTIFICATIONS:

Neonatal Advance Life Support (NALS) Yes No

IV Cannulation Programme > 10 hours Yes No

Others :

Thank you for completing the above. Demonstration of skills stated will be expected during the 90 days probationary period. Inability to demonstrate skills may result in termination during probationary period.

Name of the Applicant: _____

Signature of the Applicant: _____

Date: _____

NICU QUIZ

- 1) Indicate on the diagram below , the correct area to do capillary blood sampling:

- 2) If the correct area is not used for capillary heel blood sampling, the following can occur. Select only one answer.
 - a) tissue atrophy
 - b) painful inclusion dermoids
 - c) osteomyelitis of the os calcis
 - d) all of the above

- 3) When assisting to hold a neonate requiring a lumbar puncture, it is important to: Select only one answer.
 - a) avoid excessive flexion of the neck
 - b) provide appropriate heat source to prevent hypothermia
 - c) have your resuscitation equipment ready
 - d) a & c
 - e) all of the above

- 4) Which of the following babies are at risk of developing physiological jaundice?
 - a) poor feeder and dehydrated baby on the post partum ward
 - b) polycythemic/IUGR baby
 - c) preterm baby
 - d) IDM
 - e) a,d & c
 - f) all of the above

- 5) Phototherapy reduces the amount of water soluble (conjugated) bilirubin in the blood.

True	False
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- 6) Side effects of phototherapy include: Select one answer only.
 - a) insensible water loss
 - b) retinal damage
 - c) generalized rash

- d) interferes with the usual maternal infant bonding
- e) a & b
- f) all of the above

7) Anemia is defined as the reduction in the red cell volume or haematocrit.

True

False

8) Without sufficient red blood cells to carry and deliver adequate oxygen to the brain and vital organs, these organs may be compromised and lead to:

- a) NEC
- b) Seizures
- c) Acidosis
- d) a & c
- e) all of the above

9) Which drug is used to prevent haemorrhagic disease of the newborn?

10) Look at the following blood gas, do you think it is: Select one answer only.

pH 7.0 C02 7.0 PaO2 4.0 HC03 15.0 BE 10.7

- a) normal
- b) respiratory acidosis
- c) respiratory alkalosis
- d) mixed metabolic and respiratory acidosis

11) What is the most important aspect in the prevention of infection in the Neonatal unit?

12) List six signs/ symptoms of infection in a neonate.

NEONATAL QUIZ

Question 1

You have a 3 day old ventilated neonate in the unit. The baby becomes pale, bradycardic, there are decreased breath sounds on the right. O2 saturations are poor, the baby is hypotensive. What would be the first diagnosis you would suspect?

Question 2

You have a 5 day old 2 kg infant in the unit. What would be an acceptable hourly urinary output for this baby.

Question 3

Your unit has a high rate of sepsis. What would be the most important factor to consider?

Question 4

You are notified that a 29 week gestation baby born to a 35 year old mother with insulin dependent diabetes is about to be admitted to the unit. Apart from vital signs what would be one of your first investigations?

Question 5

You are admitting a 31 week gestation infant, what would indicate that this baby was in respiratory distress?

Question 6

You are assisting with resuscitating a baby, the baby has been given PPV for 30 seconds. You check the heart rate and it is 30 beats per minute. What would be the next step?

Question 7

You have admitted a 28 week gestation 1.5 kg baby. The baby has a mean blood pressure below 20 despite 2 bolus doses of Normal Saline. What drug would most probably now be prescribed to raise the blood pressure?

Question 8

The doctor prescribes IV POTASSIUM CHLORIDE for a baby in the unit. List the important considerations to be taken when you administer this drug?

Question 9

You are nursing a 1.8kg baby in a cot, at 8th hour of life, the baby's temperature is 36.2C, you apply extra blankets. At 9th hour of life, the baby's temperature remains at 36.2C. What would you now consider?

Question 10

You have done a blood gas on a ventilated baby. The Ph = 7.18 PCO₂ = 7.77 PO₂ = 10 HCO₃ = 25.9 BE = -4. What would be most likely ventilator change the doctor would order?
