

Zoll R Series ALS For NICU and Peds Acute Care Checklist # DAHS-NSCNEORSALS19

Name:	Employee ID #:
Unit:	Title:

PERFORMANCE CRITERIA - Unless otherwise specified all skills will be demonstrated in accordance with the appropriate UC Davis Health Policy and Procedure.

These skills will be considered complete when all below performance criteria are completed and pages 1 and 2 have been scanned and emailed to: cppn@health.ucdavis.edu

Method of Instruction	Preceptor Verification of Skill: Method of Evaluation
CP=Clinical Practice D=Demonstration E=Education Session OM=Online Module P=Policy/ Procedure Review SP=Study Packet REF=Reference Information only – not assigned in UCL	N/A=Not applicable to specific patient care area O=Observation (in clinical setting) OT=Online Test RD=Return Demonstration T=Written Test V=Verbal

Zoll R Series ALS Skills Checklist #DAHS-NSCRALS17	Method of Instruction	Method of Evaluation	Date	Verifier Initials
References: 1. UC Davis Health Policy 6006: Responding to Medical Emergency Situations (Including Code Blue) 2. UC Davis Health Policy 6005: Automated External Defibrillator (AED-Zoll)				
Completed the assigned ZOLL R Series ALS Defibrillator tutorials in UC Learning				
TEST MODE				
Successfully demonstrates manual 30 Joule defibrillator test, with an understanding that the ZOLL R Series performs self-tests every 24 hours and must remain plugged into the OneStep pads to self-test				
Weekly test to be performed by RN				
Can check and change paper				
MANUAL DEFIBRILLATION				
Locates multifunction cable				
Confirms shockable rhythm				
Selects defibrillator mode (red)				
Presses Energy Select or Charge button				
Tells everyone to stand clear				
Delivers shock at desired energy level				
Defines and adjusts energy levels for Pediatrics (2-4J/kg, up to 10J/kg)				
SYNCHRONIZED CARDIOVERSION				
Puts device into SYNC mode.				
Selects desired energy (0.5-1 J/kg, up to 2J/kg)				
Presses charge button				
Tells everyone to stand clear				
Delivers synchronized shock				

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SYNCHRONIZED CARDIOVERSION continued	Method of Instruction	Method of Evaluation	Date	Verifier Initials
States and demonstrates that SYNC must be activated for each and every synchronous cardioversion				
PACING				
Turns up pacing output (mA) until capture is achieved – identifies capture				
Adjusts pace rate				
Understands pausing for visualizing patients underlying rhythm				
PADS				
Connects OneStep™ pads to OneStep cable (or other pads/paddles if applicable)				
Opens OneStep packaging correctly				
Demonstrates proper pad placement for defibrillation, pacing, and cardioversion				
Identifies CPR Sensor and explains its purpose				
SUPERUSER/TRAINER				
Can access data from the code (Print Chart, Print Log, or Transfer Data)				
User demonstrates sufficient understanding of device to train other users in its use				

PRECEPTOR SIGNATURE:

Signature and Printed Name of Verifier (preceptor or other verified personnel) who have initialed on this form:

Initials:	Print Name:	Signature:

PRECEPTEE STATEMENT AND SIGNATURE:

I have read and understand the appropriate UC Davis Health Policies/Procedures and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and I have the knowledge of the resources available to answer questions.

Name:	Signature:	Date:
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