

**LVN IV Skills #DAHS-NSCLVNIV**

<b>Name:</b>	<b>Employee ID #:</b>
<b>Unit:</b>	<b>Title:</b>

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 page 1 has been scanned and emailed to: [cppn@health.ucdavis.edu](mailto:cppn@health.ucdavis.edu)

<b>Prerequisite Learning</b>	<b>Date Completed</b>	<b>Verifier Initials</b>
References: 1. <a href="#">UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric)</a>		
Reviews associated policy		
Completes online test # DAHS-NGNLVNIV: LVN IV Module, passing score of at least 80%		

<b>Perform/Complete</b>	<b>Date Completed</b>	<b>Verifier Initials</b>
Successfully places three (3) intravenous catheters, observed by verified personnel		
Location:		
Location:		
Location:		

**PRECEPTOR SIGNATURE:**

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

<b>Initials:</b>	<b>Print Name:</b>	<b>Signature:</b>

**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.

<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
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