 POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: GI Lab Nurse Manager
Supervised by: Surgical Services Director

Prepared by: __________________________________  Approved by: ___________________________
Date: ________________________________________  Date: _________________________________

Job Summary: Responsible for direction of patient care in the GI Lab. Manages ______ staff members. Consults with staff, physicians, Surgical Services Director and Chief Nursing Officer on nursing issues and interpretation of hospital policies to ensure patient needs are met. Maintains performance improvement activities within the department and participates in CQI activities. Formulates budget for the department.

DUTIES AND RESPONSIBILITIES:

3 = Exceeds Performance  2 = Expected Performance  1 = Needs Improvement

Demonstrates Competency in the Following Areas:

Directs actions toward supervision of nursing care given to neonatal, pediatric, adolescent, adult and geriatric patients within the GI Lab, according to nursing principles. 3 2 1

Verifies availability of all supplies required for correct operation of the department. Obtains supplies, per PAR levels. 3 2 1

Supervises patient care in GI Lab and equipment to ensure cleanliness, sterility and operational ability of all items. 3 2 1

Ability to perform head-to-toe procedure assessment on all patients and reassess intraprocedure and post procedure as needed. This includes neonate to the geriatric population. 3 2 1

Ability to adequately assess and reassess pain. Utilizes appropriate pain management techniques. Educates the patient and family regarding pain management. 3 2 1

Assists gastroenterologists with procedures through provision of qualified staff; formulates schedule which provides staff available for all procedures. 3 2 1

Ability to perform waived testing (point-of-care testing) per Clinical Laboratory's and the patient care unit’s policies and procedures. 3 2 1

Ability to interpret results of waived tests; take appropriate action on waived tests results. 3 2 1

Performs all aspects of patient care in an environment that optimizes patient safety and reduces the likelihood of medical/health care errors. 3 2 1

Supports and maintains a culture of safety and quality. 3 2 1

Directs all safety measures to prevent accidents, harm or injury in any way to patient, staff or equipment. 3 2 1

Assigns staff; delegates specific duties and tasks. 3 2 1

Provides and controls supplies and equipment needed for successful operation of the GI Lab. Directs and delegates control of inventories to ensure proper amounts are available. 3 2 1

Verifies that narcotics and controlled substances are counted and locked, per policy. 3 2 1

Follows the seven (7) medication rights and reduces the potential for medication errors. 3 2 1
PURPOSE:

To prevent cross contamination of patients when using a flexible endoscope for multiple procedures.

POLICY:

• FDA labeling and manufacturer's instructions for device-specific reprocessing shall be followed.

• The liquid disinfectant or sterilization technology used must be compatible with the endoscopes used in this organization.

• Flexible endoscopes, which pass through normally sterile tissue, shall be sterilized before each procedure. If this is not possible, at least high-level disinfection must be done. Following disinfection, the endoscope shall be rinsed with sterile water.

• Flexible endoscopes which come in contact with mucous membranes, shall be considered semicritical and shall receive high-level disinfection at a minimum.

• All flexible endoscopes shall be terminally disinfected between each use.

• All flexible endoscopes shall be terminally disinfected at the end of each day’s use.

• Pressure/leak testing shall be performed after each use and before formal reprocessing, according to manufacturer's instructions.

• Staff shall visually inspect endoscopes and reusable accessories frequently during use and reprocessing; before, during and after use; after cleaning and before high-level disinfection.  
  • Remove damaged endoscopes and accessories from use and follow policy and procedure for the repair or disposal of endoscopes and accessories.

• Flexible endoscopes shall be reprocessed before being used if unused for more than _____ days.

• Flexible endoscopes shall be stored in a dry, well-ventilated environment according to the manufacturer’s instructions.
  • The endoscopes shall be hung vertically with central valves and biopsy inlet cap removed. This facilitates the movement of air.
PURPOSE:
To prevent cross contamination of patients when using the endoscope for multiple procedures.

EQUIPMENT:
• Two (2) pan soak system with trays
• ___ gals of glutaraldehyde (enough to completely immerse the scopes)
• Sterile water

PROCEDURE:
• Mix glutaraldehyde per manufacturer’s instructions.
• When activated, glutaraldehyde is green in color.
• Fill one (1) soak pan with glutaraldehyde.
• Fill the other soak pan with enough sterile water to immerse the scopes.
• Mark the expiration date on the glutaraldehyde pan.
• Scopes will be thoroughly cleaned with an approved hospital disinfectant, rinsed and dried before putting the scope into the glutaraldehyde.
• The entire scope, except the proximal end, should be immersed in the glutaraldehyde, lumens should be in contact with the glutaraldehyde.
• Follow manufacturer’s instructions for exposure time.
• Have separate glutaraldehyde pans for upper and lower endoscopy cases.
• Disinfectant solutions will be covered at all times.
• Remove scopes aseptically. Hold scope over pan to drain excess solution.
PROCEDURE:

- Prepare the procedure room. Check all equipment before the patient enters the procedure room.

- Identify the patient using two (2) patient identifiers.

- Ensure that informed consent has been signed and the patient’s medical record is complete.

- Complete initial assessment of patient including vital signs, O₂ saturation, allergies, current medications/herbal supplements and information regarding current complaint.

- Ensure outpatients have a responsible adult to drive them home after procedure is completed, if patient(s) receive sedation.

- Notify physician of any abnormalities in patient assessment or in laboratory tests.

- Notify physician if patient is currently taking, or has taken within the past week, anticoagulants, non-steroidal anti-inflammatory medications, aspirin or aspirin-containing products.

- Verify NPO status.

- Verify patient has complied with the prescribed bowel prep.

- Start IV, per physician order.

- Explain the procedure to the patient.

- Confirm procedure with physician/anesthesiologist before starting (time-out).

- Position patient on left side with knees flexed, head resting on small pillow. Place small towel or incontinent pad under buttocks.
PROCEDURE:

• Prepare the procedure room. Check all equipment before the patient enters the procedure room.

• Identify patient using two (2) patient identifiers.

• Ensure that informed consent has been signed and the patient’s medical record is complete.

• Complete initial assessment of patient including vital signs, O₂ saturation, allergies, current medications/herbal supplements and information regarding current complaint.

• Ensure outpatients have a responsible adult to drive them home after procedure is completed, if patient(s) receive sedation.

• Notify physician of any abnormalities in patient assessment or in Clinical Laboratory tests.

• If the patient had barium/contrast studies before the ERCP, ensure the barium/contrast is out of the GI tract (usually 72 hours).

• Start IV, per physician order.

• Explain the procedure to the patient.

• Perform a time-out with the GI team.

• Place patient on x-ray table lying on the left side, knees flexed, head resting on small pillow.

• Wear lead aprons and film badges.

• Lubricate distal end of instrument.

• Insert endoscope. Physician may ask assistant to hold head of instrument during insertion. Light may be dimmed.