EQUIPMENT:

- Arterial catheters, radial or femoral
- Monitor module and pressure cable
- Pressure tubing and bag
- Standard heparin solution
- Gloves
- Sterile drapes
- Betadine swabs
- Sterile 4x4 gauze
- Skin dressing
- Transducer holder
- Suture set
- One (1) 10 mL sterile syringe
- Blood pressure cuff
- Pre-heparinized syringe with needle samples and appropriate lab tubes for ABGs or 10 mL syringe with needle for blood.
PURPOSE:

- To serve as a guide for fluid replacement
- To monitor pressures in the right atrium and vena cava
- To administer blood products, total parenteral nutrition and drug therapy contraindicated for peripheral infusion
- To obtain venous access when peripheral vein sites are inadequate
- To insert a temporary pacemaker
- To obtain central venous blood samples

DEFINITION:

- Central venous pressure (CVP) monitoring refers to the measurement of right atrial pressure or the pressure in the vena cava.
  - Right-sided cardiac function is assessed through the evaluation of the central venous pressure.
  - Left-sided heart function is less accurately reflected by the evaluation of central venous pressure, but may be useful in assessing chronic right and left heart failure and/or differentiating right and left ventricular infarctions.

EQUIPMENT:

- Venous pressure tray
- Cutdown tray
- Infusion solution/infusion set with CVP manometer
- Heparin flush system/pressure bag (if IV pole)
- Arm board (for antecubital insertion)
- Sterile dressing/adhesive tape
- Gowns, masks, caps and sterile gloves
- ECG monitoring
- Carpenter’s level (for establishing zero point)
PURPOSE:

- To alleviate or prevent vomiting, especially following major surgery.
- To obtain a specimen of gastric contents for diagnostic and Clinical Laboratory studies.
- To administer medications and feedings directly into the gastrointestinal tract.
- To treat a mechanical obstruction or bleeding within the gastrointestinal tract.

EQUIPMENT:

- Appropriate-sized disposable nasogastric tube (usually 12-, 14-, 16-, or 18-French)
- Gloves
- Water-soluble lubricant
- Clamp, if necessary
- Towel and emesis basin
- Glass of water and drinking straw
- Syringe, 60 mL
- Appropriate tape
- Appropriate suction, if ordered

POLICY:

The patient shall be intubated with a nasogastric tube (NG) per physician’s order.
SCOPE OF SERVICES:

• The Critical Care Unit of _______________ (organization name) provides medical and pre- and post-surgical care and trauma care to the inpatient population who are classified as high acuity patients.

• The unit also provides Critical Care monitoring for continuous assessment of cardiac condition, respiratory management with continuous oxygen therapy, including ventilator support and physical rehabilitation, in addition to those services usually associated with a critical care unit.

PATIENT POPULATION:

The patient population served by the Critical Care Unit consists of the pediatric and young adult through the geriatric patient community.

COMPLEXITY OF CARE:

• Admission to the Critical Care Unit is based upon the need for acute inpatient hospital services in the presence of acute healthcare problems, requiring continuous observation and medical services intervention to prevent complications and promote wellness.

• The scope of services includes higher level medical nursing care, including cardiac monitoring, the treatment of respiratory conditions requiring continuous oxygenation to the patient via mask or cannula; ventilator care; pre- and post-surgical care and monitoring, convalescence and health restoration.

• All admissions to the Critical Care Unit are reviewed for appropriateness and necessity on a daily basis by the Utilization Management Team, and are dependent upon physician order for admission.

• The Critical Care Unit does not provide for psychiatric care, those patients admitted to the Critical Care Unit with a medical or surgically related problem, are treated for the medical surgical problem until the patient is deemed stable for transfer to an appropriate psychiatric facility. During the course of this medical surgical treatment, the Critical Care Unit requires consultation and patient management for underlying psychiatric conditions by a consulting psychiatrist on the hospital’s medical staff.
**POSITION DESCRIPTION / PERFORMANCE EVALUATION**

Job Title: Medical Surgical Unit Nurse Manager  
Supervised by: Chief Nursing Officer  
Prepared by:  
Approved by:  
Date:  
Date:  

**Job Summary:** Responsible for direction of patient care in the medical surgical setting. Manages ____ staff members in the Medical Surgical Unit. Consults with staff, physicians and Chief Nursing Officer on nursing problems and interpretation of hospital policies to ensure patient needs are met. Maintains performance improvement activities within the department and participates in CQI activities. Assists in formulating budget.

**DUTIES AND RESPONSIBILITIES:**

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

**Demonstrates Competency in the Following Areas:**

- Responsible for the direction of the Medical Surgical Unit nursing staff.  
  Rating: 3 2 1

- Ability to perform a head-to-toe assessment and reassessments on all patients as per policy. This includes: pediatric, geriatric and the general population.  
  Rating: 3 2 1

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

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

- Knowledge of medications and their correct administration based on age of the patient and their clinical condition.  
  Rating: 3 2 1

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

- Coordinates and directs patient care to ensure patients’ needs are met and hospital policy is followed.  
  Rating: 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.  
  Rating: 3 2 1

- Ability to interpret the results of waived tests; takes appropriate action on waived test results.  
  Rating: 3 2 1

- Ability to revise plan of care as indicated by the patient’s response to treatment and evaluate the overall plan daily for effectiveness.  
  Rating: 3 2 1

- Formulates a teaching plan based upon identified learning needs and evaluates effectiveness of learning. Family is included in teaching as appropriate.  
  Rating: 3 2 1

- Communicates appropriately and clearly to physicians, staff, Chief Nursing Officer and administrative team.  
  Rating: 3 2 1

- Treats patients and their families with respect and dignity. Identifies and addresses psychosocial, cultural, ethnic and religious/spiritual needs of patients and family. Functions as liaison between administration, patients, physicians and other healthcare providers.  
  Rating: 3 2 1

- Demonstrates ability to assist physicians with procedures.  
  Rating: 3 2 1