POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Cardiopulmonary Services Manager

Supervised by: Cardiopulmonary Services Medical Director, CEO

Prepared by: ____________________________ Approved by: ____________________________

Date: _______________________________ Date: ________________________________

Job Summary: Responsible for direction of Cardiopulmonary Services, administers respiratory therapy care and life support to patients with deficiencies and abnormalities of cardiopulmonary system. Performs diagnostic tests of cardiovascular and pulmonary system to aid physicians in diagnosis and treatment of heart and lung disorders. 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:

Knowledge of medications, treatments and their correct administration, based on age of the patient and his/her clinical condition.

Follows the seven (7) medication rights and reduces the potential for medication errors.

Ability to assess patient, his/her needs and ability to tolerate treatment and reassessment for response to treatment.

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

Supports and maintains a culture of safety and quality.

Ability to read physicians’ orders, measure and draw arterial blood gases, review patient information and determine requirements for treatment, and operate devices and equipment to ensure specified parameters.

Formulates a teaching plan based on identified learning needs of the patient and evaluates effectiveness of learning; patient’s family is included in teaching as appropriate.

Demonstrates knowledge of respiratory therapy and cardiology studies, treats patient appropriately based upon professional standards.

Treats patients and their families with respect and dignity. Coordinates and directs patient care to ensure patients’ needs are met and hospital policy is followed.

Schedules cardiopulmonary procedures for inside/outside sources. Maintains records/reports.

Manages and operates equipment safely and correctly. Inspects and tests respiratory therapy equipment to ensure it is functioning safely and efficiently.

Interacts professionally with patient/family and involves patient/family in the formation of the plan of care.

Communicates appropriately and clearly to physicians, staff, Medical Director and administrative team.

Demonstrates an ability to assist physicians with procedures, such as bronchoscopy.

Demonstrates an ability to be flexible and organized, and function under stressful situations.
GUIDELINES FOR JOB DESCRIPTION:

- The Medical Director of Cardiopulmonary Services shall be a physician member of the active medical staff, who has special interest, knowledge and experience in the assessment, diagnosis and treatment of respiratory diseases.

- The Medical Director of Cardiopulmonary Services:
  - Must be qualified by special training and/or experience in the management of acute and chronic respiratory diseases
  - Must be licensed as a Doctor of Medicine or Osteopathy in Internal Medicine, with a subspecialty in pulmonary medicine
  - Is available to provide any required respiratory care consultation, particularly for patients receiving continuous ventilatory or oxygenation support
  - Writes policies for diagnostic and therapeutic procedures performed by respiratory staff, such as blood gas analysis, ventilatory parameters and inspired/expired as concentrations, ventilatory weaning and artificial airway parameters
  - Works directly with respiratory care staff
  - Provides 24-hour coverage or is responsible for optimal delivery of respiratory care services
  - Coordinates respiratory services with other healthcare staff who utilize the department’s services, and with other units that require participation from Cardiopulmonary Services
  - Works with the Department Manager/Supervisor on balancing the quality and cost effectiveness of respiratory therapies, pulmonary physiologic testing and cardiovascular testing
  - Ensures, via monitoring, appropriate utilization of respiratory therapy and diagnostic service resources
  - Maintains an optimal level of expertise in the use of respiratory care equipment and oxygen, advising medical and other healthcare professionals about indications and regulations on these services
EQUIPMENT/SUPPLIES:

- Single Puncture:
  - Blood gas kit
  - Patient label
  - 70% isopropyl alcohol or other suitable antiseptic solution
  - 4x4s
  - Gloves
  - Syringe cap
  - Specimen container with ice

POLICY:

- _____________ (organization name) Cardiopulmonary Services shall provide sampling for arterial blood gas analysis, as ordered by a patient's physician.

- Blood shall be drawn anaerobically from the radial, brachial, femoral or dorsalis pedis artery via needle puncture. Blood for arterial gases may also be drawn from an indwelling arterial cannula or catheter for multiple samples.

- Arterial blood samples shall be obtained by trained healthcare staff only who are approved by the Cardiopulmonary Services Medical Director. Healthcare staff who perform arterial blood sampling shall be evaluated periodically.

- Only attempt an arterial puncture twice, use a new and sterile needle for each puncture. Perform post-puncture care.

- Another healthcare professional may attempt an arterial puncture at another site. If not successful, notify the physician.
Note: Follow manufacturer's instructions for the End-Tidal CO$_2$ detector used in your facility.

**PURPOSE:**

Use of Easy Cap II device to detect End-Tidal CO$_2$.

**POLICY:**

_______________ (organization name) Cardiopulmonary Services shall provide clinically proven treatments to improve the patient’s cardiopulmonary status. These treatments must be ordered by members of the patient’s health care team, who are licensed and approved to order same.

**DESCRIPTION:**

For use on intubated patients, the Easy Cap detector connects to the endotracheal tube and a breathing device to detect approximate ranges of end-tidal CO$_2$ by color comparison. This procedure can be used for two (2) hours.

**INDICATIONS:**

- To assist verification of endotracheal tube placement after intubation and during transport
- To detect approximate ranges of end-tidal CO$_2$
- To assist evaluation of the effectiveness of CPR

**CONTRAINDICATIONS:**

- This device is not to be used for the detection of hypercarbia.
- This device is not to be used to detect main stem bronchial intubation.
- This device is not to be used during mouth-to-tube ventilation.
- This device should not be used on patients whose body weight is less than 15 kg.
- This device cannot be used to detect oropharyngeal tube placement. Standard clinical assessment should be used to detect oropharyngeal tube placement.
PURPOSE:

- The following protocols are designed to give specific directions that will help obtain a streamlined process for echocardiograms that will consume less time. The following directions will provide better quantitative echocardiographic evaluations of patients being studied.

- These protocols are not intended to be a substitute for a basic echocardiogram evaluation, but provide a minimal standard that should be provided on every ultrasound.

- Two-dimensional (2-D) and M-mode are commonly used in conjunction.

DEFINITIONS:

- **M-Mode:**
  - Evaluation of anatomic relationships of the heart and vessels and their sizes
  - Evaluation of the motion of cardiac valves
  - Detects pericardial fluid

- **Two-Dimensional (2-D):** Allows greater versatility regarding anatomic relationships of the heart and vessels

- **Color-Flow Doppler:**
  - Shows patterns of blood flow
  - Shows location of restrictions and/or regurgitation

- **Continuous-Wave Doppler:** Provides visualization of the quantity of flow across an obstruction; estimate of pressure gradients

- **Contrast Echocardiography:** Allows for greater evaluation of flow patterns; identifies presence of shunts