POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Ambulatory Infusion Center RN

Supervised by: Ambulatory Infusion Center Nurse Manager

Prepared by: ___________________________  Approved by: ___________________________

Date: ___________________________  Date: ___________________________

Job Summary: Provides direct patient care in the ambulatory setting. Communicates with physicians/Nurse Manager/co-workers, as appropriate about changes in patient’s clinical condition including results of diagnostic studies and symptomatology. Is able to respond quickly and accurately to changes in condition or response to treatment.

DUTIES AND RESPONSIBILITIES:

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

Demonstrates Competency in the Following Areas:

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

Provides infusion services in accordance with professional standards.  3 2 1

Supervises the care provided by the LPN/LVN to ensure patient care needs are met to include patient record reviews, case conferences and direct patient oversight.  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

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

Ability to perform waived testing (point-of-care testing) per policies and procedures.  3 2 1

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

Performs patient care responsibilities considering needs specific to the standard of care for patient’s age.  3 2 1

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

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

Formulates a teaching plan based upon identified learning needs and evaluates effectiveness of learning, family is included in teaching as appropriate.  3 2 1

Demonstrates an ability to assist physicians with procedures and performs services requiring technical and manual skills.  3 2 1

Demonstrates ability to perform treatments and provide services to level licensure.  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 their families. Functions as liaison between administration, patients, physicians and other healthcare providers.  3 2 1

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

- The Ambulatory Infusion Center shall follow federal Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) standards.
- The hepatitis B vaccine shall be offered free to all at-risk employees at this Ambulatory Infusion Center. At-risk employees shall be defined based on their category-of-work assignment as outlined below. All Category I employees shall be offered the hepatitis B vaccine series at no cost. Antibody testing shall be performed, prior to administration, to determine need for vaccination. If the employee refuses antibody testing, the hepatitis B vaccine shall be administered if the employee so desires. Circumstances that exempt the facility from making the vaccination available include:
  - The complete Hepatitis B vaccination series has been previously received
  - Antibody testing shows the employee is immune
  - The vaccine cannot be given to the employee for medical reasons or the individual cannot receive antibody testing
- Those employees who test antibody negative shall receive information regarding the hepatitis B vaccine and shall be asked to sign an informed consent prior to vaccination. Those who elect not to be vaccinated shall be asked to sign a statement, that they are aware of their non-immune status and elect not to be vaccinated at this time (statement of declination).

**Category I:** All employees who routinely have contact with blood or body fluids and/or use sharps.

**Category II:** Employees who rarely have contact with blood or body fluids and have no contact with used sharps.

**Category III:** Employees who are not required to have direct contact with patients and shall not have contact with blood, bodily fluids or used sharps.
DEFINITION:

A single-dose or single-use vial is a vial of liquid medication intended for parenteral administration (injection or infusion) that is meant for use in a single patient for a single case/procedure/injection. Single-dose or single-use vials are labeled as such by the manufacturer and typically lack an antimicrobial preservative.

POLICY:

- This Ambulatory Infusion Center shall adhere to manufacturer instructions and Centers for Disease Control and Prevention (CDC) recommendations for single-dose/single-use vials.

- Vials labeled by the manufacturer as "single-dose" or "single-use" shall only be used for a single patient. These medications typically lack antimicrobial preservatives and can become contaminated, and serve as a source of infection when they are used inappropriately.

- To prevent unnecessary waste or the temptation to use contents from single-dose or single-use vials for more than one patient, clinicians and purchasing staff shall select the smallest vial necessary for their needs when making treatment and purchasing decisions.

- Opened single-dose vials shall not be stored for any period of time.

- In times of critical need, contents from unopened single-dose/single-use vials can be repackaged into multiple single-dose/single-use containers (i.e., syringes), which shall be labeled per policy and procedure. The label shall include the expiration date and a beyond-use date.
  - This repackaging shall be performed only by qualified Pharmacy staff in ISO Class 5 air conditions in accordance with standards in the United States Pharmacopeia General Chapter <797>, Pharmaceutical Compounding - Sterile Preparations.
  - Manufacturer's recommendations pertaining to the safe storage of said medication outside of its original container shall be followed.

- Staff shall not combine or pool leftover contents of single-dose/single-use vials. Single-dose/single-use vials shall not be stored for later use, no matter what the size of the vial.
POLICY:

- Prospective employees shall be informed that they may be required to work with antineoplastics. Note that this and the recommendations that follow apply to temporary staff as well as permanent staff. Supervisory staff shall review the procedures with their staff. The toxic nature of antineoplastics shall be described to staff in balanced terms. The rationale for each antineoplastic procedure or change in procedure shall be given. It should be noted that the procedures are felt to provide adequate safety, but that 100% protection cannot be guaranteed. Staff shall be informed that the procedures governing the handling of antineoplastics in the institution must be followed, and that adherence to these procedures shall be monitored, and that noncompliance may result in disciplinary action.

- Under the US Environmental Protection Agency/Resource Conservation and Recovery Act (USEPA/RCRA), hazardous waste is a specific category of wastes that shall be managed following a strict set of regulatory requirements. Of the large list of hazardous wastes, several were identified specifically as antineoplastic drugs; however, a number of drug formulations exhibit hazardous waste characteristics. Any drugs, including chemotherapy drugs utilized in this facility, meeting the criteria for hazardous drugs or with hazardous waste characteristics, shall be managed according to the Occupational Safety and Health Administration (OSHA) standards, the Hazard Communication Standard, the Occupational Exposure to Hazardous Chemicals in Laboratories Standard and OSHA’s Controlling Occupational Exposure to Hazardous Drugs guidelines.

  - Only those drugs determined to be hazardous agents shall require management according to the federal hazardous chemical standards listed above.

  - All other chemotherapy agents not identified as hazardous agents shall be handled and disposed of as "simple" (i.e., not hazardous as identified by USEPA/RCRA standards) chemotherapy agents.

- Proper and timely medical treatment for acute antineoplastic exposures must be provided.

- Cytotoxic agents are transported in leak proof containers, resistant to breakage with luer caps and no needles attached. The container is also labeled with warning labels.