

PERFORMANCE BASED

COMPETENCY CHECKLIST

Central Venous Catheter

Note: The competency checklist is required to be completed for **LPN** staff during initial training and annually thereafter. Competency checks can also be conducted at any time at the discretion of the Nurse Manager. The competency checklist must be included as part of the employee's record to document training and performance.

NAME: _____

POSITION: _____

DATE: _____

UNIT: _____

INSTRUCTOR/EVALUATOR'S NAME AND TITLE:

Central Venous Catheter - Initiation of Treatment	Date Taught	Return Demonstration Date(s)	Needs Practice	Satisfactory Performance Date	Eval. Initials	Staff Initials
Gathers and organizes supplies appropriate for accessing the CVC						
Demonstrates appropriate use of personal protective equipment (PPE)						
Prepares heparin and saline flushes aseptically						
Ensures that all persons in attendance, including the patient, are wearing a mask and the patient's head is turned to the opposite side before removing caps and accessing the catheter.						
Ensure that a clean field is under the CVC						
Washes hands and puts on clean gloves before working with the catheter.						
Correctly distinguishes between the arterial and venous catheter limbs						
Soaks port/cap connections following manufacturer's recommendation.						
Ensures the clamps of the catheter limbs are closed during cap removal/syringe placement						
Aspirates anti-coagulant / thrombolytic agent and aseptically flushes catheter lumens with saline						
Obtains pre-treatment lab samples per procedure						
Connects arterial and venous bloodlines aseptically to the correct catheter limbs						
Ensures connections are made correctly and are secure						
Secures bloodlines to minimize tension on bloodline/catheter connection or kinking of bloodlines						
Turns blood pump on per unit policy and observes for signs of inadequate blood flow rate (BFR): pre pump arterial pressure <-250, bloodline collapse, or jumping						
Checks venous pressure to ensure it is within acceptable range per unit policy						
Turns blood pump to prescribed flow rate						

Central Venous Catheter - Initiation of Treatment Continued	Date Taught	Return Demonstration Date(s)	Needs Practice	Satisfactory Performance Date	Eval. Initials	Staff Initials
Immediately reports any difficulties in achieving ordered blood flow to RN						
Checks venous and pre pump arterial pressure to ensure reading is in acceptable range per unit policy						
Central Venous Catheter - Dressing Change						
Gathers and organizes supplies appropriate for cleaning and redressing the patient's specific brand of catheter						
Demonstrates appropriate use of PPE						
Ensures that all persons in attendance, including the patient, are wearing a mask and the patient's head is turned to the opposite side before removing the old catheter dressing.						
Inspects for catheter position, intact sutures and signs of infection at the insertion site						
Reports unusual finding to the RN						
Washes hands and puts on clean gloves prior to beginning exit site care						
Cleans insertion site with appropriate cleaning solution						
Cleans insertion site area, moving in concentric circles away from the insertion site						
If povidone iodine solution is used, allows the solution to dry for 2-3 minutes before proceeding						
Places appropriate dressing per unit policy						
Documents dressing change and observations on the treatment sheet						

Central Venous Catheter - Monitoring During Treatment	Date Taught	Return Demonstration Date(s)	Needs Practice	Satisfactory Performance Date	Eval. Initials	Staff Initials
Ensures the patient's access is visible at all times						
Checks that bloodline/catheter limb connections remain secure during routine safety checks						
Ensures bloodlines remain secure and that there is no tension on the line or kinking of bloodlines.						
PRE-PUMP ARTERIAL PRESSURE Monitoring						
Employs appropriate observations and interventions to improve blood flow if pre pump pressure > -250						
Documents arterial pressure readings appropriately						
If necessary, reduces blood flow and documents appropriately						
Reviews medical record for adverse trends in arterial pressure						
Notifies RN of any problems achieving BFR						
VENOUS PRESSURE MONITORING						
Evaluates venous pressure values for elevated venous pressure readings						
Employs appropriate interventions to reduce elevated venous pressures						
If necessary, reduces blood flow and documents appropriately						
Reviews medical record for adverse trends in venous pressure						
Ensures RN is aware of problems with elevated venous pressure and that any adverse trends have been noted						
Central Venous Catheter - Termination of Treatment						
Prepares saline flushes aseptically						

Central Venous Catheter - Termination of Treatment Continued	Date Taught	Return Demonstration Date(s)	Needs Practice	Satisfactory Performance Date	Eval. Initials	Staff Initials
Checks documented fill volumes of each catheter lumen and prepares prescribed strength of anticoagulant / thrombolytic aseptically						
Washes hands and puts on clean gloves prior to performing procedure. Demonstrates appropriate use of PPE						
Ensures that the field is clean under the catheter						
Soaks port/bloodline connection per manufacturer's recommendation						
Clamps catheter limbs following reinfusion						
Ensures that all persons in attendance, including the patient, are wearing a mask and the patient's head is turned to the opposite side prior to disconnection.						
Ensures catheter limbs are clamped before disconnection						
Disconnects bloodline and aseptically applies saline-filled syringe immediately to each catheter limb						
Flushes catheter lumens with saline and clamps each limb						
Checks that anticoagulant / thrombolytic dose is the correct amount for each catheter lumen						
Removes empty saline syringes one at a time and immediately replaces them with anticoagulant / thrombolytic filled syringe						
Instills dwell quickly and clamps immediately to prevent backflow of blood into the catheter lumen. Clamps each catheter limb						
Removes empty syringes anticoagulant / thrombolytic one at a time and immediately and aseptically applies sterile end caps						
Ensures catheter limbs are clamped						

CATHETER / BLOODLINE SEPARATION	Date Taught	Return Demonstration Date(s)	Needs Practice	Satisfactory Performance Date	Eval. Initials	Staff Initials
Assures access remains visible at all times and connections are checked with each patient/machine check during the dialysis treatment						
Demonstrates knowledge of nursing interventions for catheter/blood line disconnect						
CATHETER CARE						
Demonstrates knowledge of signs and symptoms associated with catheter related infection						
Notify RN of any signs and symptoms of infection						
Instructs patients, families, nursing homes, etc. on patient hygiene, signs and symptoms of catheter related infections, reinforcement of catheter dressing, and pros and cons of showering						

Comments: _____

Instructor Signature (s) and Date (s):

Trainee Signature and Date:
