

PROFILE TEMPLATE

Contact Information

 678-111-1111

 tnuser@yopmail.com

 PO box 110, 6/123, Aurora, South Dakota

 Monday-Friday | 9am-6pm EST

Active Certifications

- **BLS/CPR** | Expires : 01/30/2025

Education

- Apex | USA | BCA | Currently Attending

TN User

Registered Nurse
Case Manager

Active State License

- RN
RN | Expires: 01/30/2025

Summary

- **Desired Shift:** Days (8 Hours)
- **Available Start Date:** 11/30/2024
- **Years of Experience:** 5 year(s)
- **Experience in Specialty:** 1year(s)
- **RTO:** 01/22/2025-01/29/2025
- **EMR Experience:** Epic,GE Healthcare
- **Teaching Hospital Experience:** Not Sure
- **Travel Experience:** 5 year(s)
- **Fully Vaccinated:** YES

Work Experience

- Licensed Practical Nurse/Licensed Vocational Nurse | ABC Travel Recruiters | Travel | Licensed Practical Nurse/Licensed Vocational Nurse | Abbeville | Alabama | Clinic
- Certified Nursing Assistant | Travel Agency Partner | Travel | Certified Nursing Assistant | 2/2024 - 2/2025 | Akiachak | Alaska | Hospital - Acute Care

WORK SETTING EXPERIENCE

	Proficiency	Frequency
Inpatient Acute Care Facility	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Trauma Center	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Academic/Teaching Facility	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Outpatient Care Facility	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Long term care/Skilled Nursing	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Clinic/Ambulatory	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Home Health Setting	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

GENERAL SKILLS EXPERIENCE

	Proficiency	Frequency
Advanced directives	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Patient / family teaching	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Discharge planning	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Lift / transfer devices	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Specialty beds	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Restrictive devices (restraints)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
End of life care / palliative care	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Wound assessment & care	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Automated Medication Dispensing System, Pyxis, Omnicell, or other	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Bar coding for medication administration	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Coaching needs: physical / emotional / comfort	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Assist with sterile speculum exam (effacement, dilation, station, presentation)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Vaginal exam (effacement, dilation, station, presentation)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Performs sterile speculum exam independently	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Use of doppler	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
National Patient Safety Goals	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Accurate patient identification	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Effective communication	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Time out protocol	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Interpretation & communication of lab values	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

Medication administration	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Labeling (medications & specimens)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Medication reconciliation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Anticoagulation therapy	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Monitoring conscious sedation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Pain assessment & management	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Use of PCA (IV)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Epidural	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Infection control	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Universal precautions	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Awareness of HCAHPS	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Isolation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Minimize risk for falls	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Prevention of pressure ulcers	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

CARDIAC MONITORING & EMERGENCY CARE EXPERIENCE

	Proficiency	Frequency
Preparation & administration of emergency drugs	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Infant / neonatal arrest / NRP	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Adult cardiac arrest / ACLS	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Obtains 12 lead EKG	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Interpretation of rhythm strips	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Use of rapid response teams	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Pulse oximetry	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Interpretation of ABG's	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
O2 (NC / mask / oxyhood)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Assist with intubation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Suctioning	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

IV THERAPY EXPERIENCE

	Proficiency	Frequency
Start & maintain peripheral IV	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Start & maintain scalp veins	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Maintain central lines (CVC / PICC)	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Administration of blood & blood products	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
TPN/lipids	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Use of infusion pumps / drips / IV monitoring	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4

PATIENT MONITORING EXPERIENCE

	Proficiency	Frequency
Assist / monitor anesthesia	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
General Anesthesia	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4

References

Reference 1

Employment Information

Facility Testing Web	Dates of Employment 12/31/1969	Address 2-b-13 new housing board shastri nagar
Title while Employed test	Phone 09772999973	Specialty Worked test

	Yes	No
1. How long have you worked with this candidate?	7 Years	
2. Is this person honest, reliable, and trustworthy?	✓	
3. Was this candidate on a travel assignment?		✓
4. Is this candidate eligible for rehire?	✓	

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work	✓				
2. Clinical Knowledge/Skills	✓				
3. Attendance/Dependability	✓				
4. Interpersonal/Communication Skills	✓				
5. Relationship with Others	✓				
6. Acceptance of Supervision	✓				

Additional Comments

nothing

Reference Completed By

Name harshit badiwal	Title testing	Phone 789-456-1230	Email harshbadiwal58@gmail.com
Signature testing	Date 12/25/2024	Reference Information Verified By Automated System	Date 12/23/2024

Reference 2

Employment Information

Facility harshit badiwal	Dates of Employment -	Address VPO
Title while Employed -	Phone 09772999973	Specialty Worked -

	Yes	No
1. How long have you worked with this candidate?	2 Years	
2. Is this person honest, reliable, and trustworthy?	✓	
3. Was this candidate on a travel assignment?	✓	
4. Is this candidate eligible for rehire?		✓

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work			✓		
2. Clinical Knowledge/Skills			✓		
3. Attendance/Dependability			✓		
4. Interpersonal/Communication Skills			✓		
5. Relationship with Others			✓		
6. Acceptance of Supervision			✓		

Additional Comments

-

Reference Completed By

Name ajay Kumar	Title Sharma	Phone 097-729-99973	Email ajaygreat16@gmail.com
Signature <i>ajay Kumar</i>	Date 12/31/1969	Reference Information Verified By Automated System	Date 11/26/2024

Reference 3

Employment Information

Facility test	Dates of Employment 12/31/1969	Address 2-b-13 new housing board shastri nagar
Title while Employed etst	Phone 09772999973	Specialty Worked test

	Yes	No
1. How long have you worked with this candidate?	Yes Years	
2. Is this person honest, reliable, and trustworthy?		
3. Was this candidate on a travel assignment?		
4. Is this candidate eligible for rehire?		

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work					✓
2. Clinical Knowledge/Skills					✓
3. Attendance/Dependability					✓
4. Interpersonal/Communication Skills					✓
5. Relationship with Others					✓
6. Acceptance of Supervision					✓

Additional Comments

Reference Completed By

Name harshit badiwal	Title test	Phone test	Email harshbadiwal58@gmail.com
Signature <i>test</i>	Date 12/31/1969	Reference Information Verified By Automated System	Date 11/26/2024

Reference 4

Employment Information

Facility Facility Title	Dates of Employment 12/12/2012	Address test
Title while Employed test	Phone test	Specialty Worked test

	Yes	No
1. How long have you worked with this candidate?	Yes Years	
2. Is this person honest, reliable, and trustworthy?	✓	
3. Was this candidate on a travel assignment?		✓
4. Is this candidate eligible for rehire?		✓

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work	✓				
2. Clinical Knowledge/Skills					✓
3. Attendance/Dependability		✓			
4. Interpersonal/Communication Skills				✓	
5. Relationship with Others				✓	
6. Acceptance of Supervision		✓			

Additional Comments

-

Reference Completed By

Name	Title	Phone	Email
Test	Testing	9876543210	test@gmail.com
Signature	Date	Reference Information Verified By	Date
<i>Test</i>	12/31/1969	Automated System	11/26/2024

Documents

-  [Submission-File-22](#)
-  [Submission-File-16](#)

PROFILE TEMPLATE

Contact Information

 678-111-1111

 tnuser@yopmail.com

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- **BLS/CPR | Expires :** 01/30/2025

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RN | Expires: 01/30/2025

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- **Fully Vaccinated:** YES

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- Certified Nursing Assistant | Travel Agency Partner | Travel | Certified Nursing Assistant | 2/2024 - 2/2025 | Akiachak | Alaska | Hospital - Acute Care

Skill Checklists

L & D Skills Checklist | 11/08/2024

WORK SETTING EXPERIENCE

	Proficiency	Frequency
Inpatient Acute Care Facility	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Trauma Center	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Academic/Teaching Facility	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input checked="" type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Outpatient Care Facility	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Long term care/Skilled Nursing	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Clinic/Ambulatory	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Home Health Setting	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4

GENERAL SKILLS EXPERIENCE

	Proficiency	Frequency
Advanced directives	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Patient / family teaching	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Discharge planning	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Lift / transfer devices	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Specialty beds	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Restrictive devices (restraints)	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
End of life care / palliative care	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Wound assessment & care	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Automated Medication Dispensing System, Pyxis, Omnicell, or other	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Bar coding for medication administration	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Coaching needs: physical / emotional / comfort	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Assist with sterile speculum exam (effacement, dilation, station, presentation)	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Vaginal exam (effacement, dilation, station, presentation)	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Performs sterile speculum exam independently	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Use of doppler	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
National Patient Safety Goals	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Accurate patient identification	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Effective communication	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Time out protocol	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4
Interpretation & communication of lab values	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4

Medication administration	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Labeling (medications & specimens)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Medication reconciliation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Anticoagulation therapy	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Monitoring conscious sedation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Pain assessment & management	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Use of PCA (IV)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Epidural	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Infection control	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Universal precautions	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Awareness of HCAHPS	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Isolation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Minimize risk for falls	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Prevention of pressure ulcers	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

CARDIAC MONITORING & EMERGENCY CARE EXPERIENCE

	Proficiency	Frequency
Preparation & administration of emergency drugs	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Infant / neonatal arrest / NRP	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Adult cardiac arrest / ACLS	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Obtains 12 lead EKG	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Interpretation of rhythm strips	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Use of rapid response teams	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Pulse oximetry	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Interpretation of ABG's	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
O2 (NC / mask / oxyhood)	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Assist with intubation	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Suctioning	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

IV THERAPY EXPERIENCE

	Proficiency	Frequency
Start & maintain peripheral IV	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Start & maintain scalp veins	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Maintain central lines (CVC / PICC)	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Administration of blood & blood products	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
TPN/lipids	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
Use of infusion pumps / drips / IV monitoring	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4

PATIENT MONITORING EXPERIENCE

	Proficiency	Frequency
Assist / monitor anesthesia	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4
General Anesthesia	● 1 ● 2 ● 3 ● 4	● 1 ● 2 ● 3 ● 4

References

Reference 1

Employment Information

Facility Testing Web	Dates of Employment 12/31/1969	Address 2-b-13 new housing board shastri nagar
Title while Employed test	Phone 09772999973	Specialty Worked test

	Yes	No
1. How long have you worked with this candidate?	7 Years	
2. Is this person honest, reliable, and trustworthy?	✓	
3. Was this candidate on a travel assignment?		✓
4. Is this candidate eligible for rehire?	✓	

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work	✓				
2. Clinical Knowledge/Skills	✓				
3. Attendance/Dependability	✓				
4. Interpersonal/Communication Skills	✓				
5. Relationship with Others	✓				
6. Acceptance of Supervision	✓				

Additional Comments

nothing

Reference Completed By

Name harshit badiwal	Title testing	Phone 789-456-1230	Email harshbadiwal58@gmail.com
Signature <i>testing</i>	Date 12/25/2024	Reference Information Verified By Automated System	Date 12/23/2024

Reference 2

Employment Information

Facility harshit badiwal	Dates of Employment -	Address VPO
Title while Employed -	Phone 09772999973	Specialty Worked -

	Yes	No
1. How long have you worked with this candidate?	2 Years	
2. Is this person honest, reliable, and trustworthy?	✓	
3. Was this candidate on a travel assignment?	✓	
4. Is this candidate eligible for rehire?		✓

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work			✓		
2. Clinical Knowledge/Skills			✓		
3. Attendance/Dependability			✓		
4. Interpersonal/Communication Skills			✓		
5. Relationship with Others			✓		
6. Acceptance of Supervision			✓		

Additional Comments

-

Reference Completed By

Name	Title	Phone	Email
ajay Kumar	Sharma	097-729-99973	ajaygreat16@gmail.com
Signature	Date	Reference Information Verified By	Date
ajay Kumar	12/31/1969	Automated System	11/26/2024

Reference 3

Employment Information

Facility	Dates of Employment	Address
test	12/31/1969	2-b-13 new housing board shastri nagar
Title while Employed	Phone	Specialty Worked
etst	09772999973	test

	Yes	No
1. How long have you worked with this candidate?	Yes Years	
2. Is this person honest, reliable, and trustworthy?		
3. Was this candidate on a travel assignment?		
4. Is this candidate eligible for rehire?		

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work					✓
2. Clinical Knowledge/Skills					✓
3. Attendance/Dependability					✓
4. Interpersonal/Communication Skills					✓
5. Relationship with Others					✓
6. Acceptance of Supervision					✓

Additional Comments

Reference Completed By

Name harshit badiwal	Title test	Phone test	Email harshbadiwal58@gmail.com
Signature test	Date 12/31/1969	Reference Information Verified By Automated System	Date 11/26/2024

Reference 4

Employment Information

Facility Facility Title	Dates of Employment 12/12/2012	Address test
Title while Employed test	Phone test	Specialty Worked test

	Yes	No
1. How long have you worked with this candidate?	Yes Years	
2. Is this person honest, reliable, and trustworthy?	✓	
3. Was this candidate on a travel assignment?		✓
4. Is this candidate eligible for rehire?		✓

Candidate Employment Evaluation

Criteria	Poor	Fair	Average	Good	Excellent
1. Quality of Work	✓				
2. Clinical Knowledge/Skills					✓
3. Attendance/Dependability		✓			
4. Interpersonal/Communication Skills				✓	
5. Relationship with Others			✓		
6. Acceptance of Supervision		✓			

Additional Comments

-

Reference Completed By

Name	Title	Phone	Email
Test	Testing	9876543210	test@gmail.com
Signature	Date	Reference Information Verified By	Date
Test	12/31/1969	Automated System	11/26/2024

Documents

-  [Submission-File-22](#)
-  [Submission-File-16](#)

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