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Top Skills

Meditech

Centricity EMR 9.6

Dragon Medical

Russell J Jones, RN MSAJS BSN FN

Nursing Supervisor at University Health System Wound Care and
Hyperbaric Medicine

San Antonio, Texas

Summary

With over 38 years' experience in the Medical field, the knowledge base I bring to the investigation and review of medical cases is invaluable in today's Electronic Medical Record. Coupling this with my current employment as a Clinical Analyst building and implementing Meditech products across the house, from ED to Discharge I hold a wealth of information, and an intimate knowledge of the inner workings of the EMR, and the Hospital environment.

My background covers but is not limited to the following:

- Clinical IT, program management and education with in the fast paced implementation to meet Phase One and Two of Meaningful Use
- Director Emergency Services/ Intensive Care Unit, Trauma Program Director Working member of Washington State Bio-terrorist and Mass Causality team, and the Yakima County EMS and Disaster preparedness committee
- 15 years Registered Nurse, with experience in Critical Care, Trauma, and Emergency Services
- 5 years Management experience in Hospitality and Health Care
- 15 years as a Paramedic and Medic USAF
- Specialties:
 - o Health care Informatics
 - o Meditech 5.64, 6.x
 - o Zynx Order build and Order set integration
 - o GE Centricity EMR 9.6.3
 - o GE-Perinatal 6.9.1
 - o Critical Care Registered Nurse (CCRN)
 - o Trauma/Open Heart and Neurosurgical
 - o Transplant

Experience

University Health System

6 years 4 months

Nursing Supervisor

November 2018 - Present (1 year 9 months)

San Antonio, Texas Area

Wound Care and Hyperbaric Medicine

Staff RN

July 2015 - Present (5 years 1 month)

San Antonio, Texas

Staff nurse Emergency Center

Nurse Manager

April 2014 - Present (6 years 4 months)

San Antonio, Texas Area

Staff Nurse ED and ICU

Independant

Forensic Nurse

January 2018 - Present (2 years 7 months)

San Antonio, Texas Area

Experienced in Victim crimes, collection of evidence. currently pursuing certification as a Legal Nurse Consultant

Uvalde Memorial Hospital

Clinical Informatics

April 2013 - May 2015 (2 years 2 months)

Uvalde, TX

Meditech 6.x OM, EDM, PDOC, PCS and Zynx Health integration

Sunnyside Community Hospital

2 years 11 months

Clinical Systems Coordinator

June 2010 - April 2013 (2 years 11 months)

Oversee Electronic Health Record update, Meditech 5.64 and GE-Perinatal 6.9.1 and Centricity EMR 9.5.3

Clinical Coordinator

June 2010 - April 2013 (2 years 11 months)

I am responsible for the instructions of all Hospital staff members the use Meditech applications. Including but not limited to all nursing, ancillary staff

members, medical records, billing and material maintenance. As this job did not exist prior to my appointment, I also generate all the planning and instructional material needed to teach the above classes.

Washington Chapter International Association of Forensic Nurses Board Member

January 2009 - October 2011 (2 years 10 months)

Chapter Web Master for two years

Sunnyside Community Hospital

Director ED/ICU

April 2008 - June 2009 (1 year 3 months)

Starting in 2006 as Night shift Lead Nurse, was considered and moved to management team in 2008. The ICU was expanded from 4 to 5 beds, with full bedside monitoring upgrade. The ED is a Level IV with 25,000 visits per year.

Kadlec Medical Center

CCRN

April 2004 - April 2006 (2 years 1 month)

a level III center with full service Cardio-thoracic services. Kadlec is at present the only Certified Heart center in Washington State; this translates to an increased patient load and one to two cardiac surgeries each day. Kadlec goals are to increase the regional referrals to become a referral center for western Washington and northwestern Oregon. Kadlec is a 12 bed ICU with expansion planned to 20 beds within the next year, with the addition of full time Neurosurgery center. While employed at Kadlec I work in the Intensive Care Unit full time and floated to the Emergency Department as needed.; University of South Carolina is a Level I referral center. As staff in the Surgical Trauma and Neurosurgical Intensive Care Unit, care was placed in our hands for all major trauma, and Neurosurgical patients. As a referral center we received patients that had fatal brain injuries. We were required to care for these patients and provide care and compassion for their families during an event that changes many lives. Sadly, and on a weekly basis we cared for patients that were declared brain dead, and then placed on the donor list. Caring for these patients became emotionally and physically as body systems began to shut down, and the family's lives are forever changed. The next step in caring for donor patients is to care for the transplant recipient; we routinely cared for Liver, Kidney, and Pancreas transplants.

Our patients were treated with state-of-the-art High Frequency Ventilation, ECMO, CRRT, Extra-Ventricular Drainage, and spinal cord care.

Georgetown Hospital, SC Staff and charge nurse for a 10 bed general ICU. This position required caring for medical, cardiac and surgical patients. Operating and instructing IABP and CRRT. High percentage of the patients was general medical and surgical post-operative patients, to include vascular and bariatric patients.

Georgetown Medical Center

Staff RN ICU

April 2001 - February 2004 (2 years 11 months)

Meditech, 2001 upgrade to the Electronic Medical Record using this system. I became the unit resource person for the charting system used in the Intensive Care Unit.

Orienting new Registered Nurses to critical care including;

Intra-aortic Counter pulsation therapy (IABP)

Ventilator use and maintenance

Medical University of South Carolina:

Continuous Renal Replacement Therapy (CRRT) {not done at Kadlec}

Extracorporeal Membrane Oxygenation (ECMO) {not done at Kadlec}

Medical University of South Carolina

Staff Nurse Surgical Trauma/Neurosurgical Trauma Unit

2001 - 2004 (3 years)

MUSC is a level I center, we worked with major trauma, and neurological injuries, to include brain death and organ harvesting and transplant services. As a reserach and medical school we experianced a full scope of medical, surgical, injuries.

United States Air Force

Medic

November 1979 - October 1987 (8 years)

Training in the USAF is tiered, and built upon simple books and expanded by on-the-job training. My rotation through the hospitals started with the recovery room, and Labor and Delivery. Next I worked on the surgical ward, caring for post-operative general surgery patients. The rotation through the hospital totaled one year. As a Medic this rotation had a targeted goal of building skills, training included assessment of and the treat all wounds both surgical and traumatic as ordered, and start all Intravenous sites.

During my last 6 years in the Air Force I worked in the Emergency Department (ED), due to my rank during that time I was responsible for all shift operation within the ED, the ambulance, and emergency ejection aircrew recovery, from

the Gulf of Mexico. I reported directly to the Office-in-charge, a Registered Nurse. I was certified for the following:

Suturing all wounds taking less than 2 hour to complete; 2) casting, all closed fractures; 3) total care of the ED patient assessment through discharge. 3) Trained to care for and stabilize major injuries, and to initiate and carry through air medical coordination and evacuation.

For information purpose; hospital system in the military is a very unique environment. The registered nurse is placed in a purely administration position, all patient care is preformed by the medic. Although not a licensed nurse I functioned in the full capacity of the registered nurse while in the Emergency Room. Most civilian companies do not consider this time as "experience" time as a nurse, mostly due to the lack of understanding of the direct job requirement of the Medic. This time is very valuable, performing physical assessments, medication administration, medication dispensing, minor surgical procedures, and traumatic wound closure. Most importantly assessment of and treatment of minor illnesses in a independent environment.

Care

Advance Life Support ambulance servicing Northwest crew lead

July 1978 - November 1979 (1 year 5 months)

provided all on scene care of patient until deemed that the patient was stable to transport or definitive treatment was needed to be completed in the Emergency department.

While working for Care Ambulance, on December 17, 1978 a Boeing DC-8 with 148 passengers and crew; As the second ACLS unit on scene my crew was primary triage for all victims as they were located, prior to any move within or from the crash area.

Education

University of Phoenix

Masters of Science, Administration of Justice and Security · (2004 - 2007)

Kaplan University

Forensic Nurseing, Death investigation · (2004 - 2005)

University of Phoenix

Bachelors of Science, Nursing; Community Health Nursing · (2001 - 2004)

Bucks County Community College
Associate, Nursing · (1997 - 2000)

United States Air Force Training
· (1979 - 1987)