

**HACKETTSTOWN REGIONAL MEDICAL CENTER
CARDIO PULMONARY POLICY MANUAL
DUTIES OF THE RESPIRATORY DAY SHIFT (0700-1930)**

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Effective Date: March 2010
Cross Referenced:
Reviewed Date: 02/16
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Policy No: 3A.002
Origin: Cardio Pulmonary
Authority: Cardio/Pulmonary Manager
Page: 1 of 2

Purpose: To outline the duties of the day shift Respiratory Care Practitioner.

Procedure: Respiratory Services that all individuals working the “day” shift, 0700-1930 hours, are responsible to follow:

1. Arrive in the department prepared to work by 7:00 AM.
2. Receive a thorough report on all patients from the night shift.
3. Receive unit assignments and Respiratory duties from Lead Therapist.
4. Sign out Vocera, hospital wide paging system.
5. Complete ABG check list, located in ABG room; check equipment in ER and ICU; VAP bundle; check utility room par levels.
6. Complete and post daily patient care staffing form as designated by 8am.
7. Print and reconcile the respiratory medication report (see attached).
8. Check for new and pending orders every 15 minutes throughout shift via the hospitals electronic medical record system.
9. Do the second, third and fourth QID, Q3H, and the second TID treatments. Do the first BID treatments. (Reference Medication Administration Standardization Times)
10. Monitor all ventilator patients and non-invasive ventilator (BiPAP) patients at least every Q3H or more often if necessary.
11. Complete and chart all treatments in a timely manner and/or any evaluation of patient according to the Plan of Care.
12. Complete and chart all treatments and complete the V.D.P. (Ventilator Discontinuation Process) and S.B.T. (Spontaneous Breathing Trial) on all patients on vents (page on V.D.T must be completed in full).
13. Assign “CODE BLUE” and Rapid Response” beeper to a therapist for that shift.
14. All therapists will respond to all “CODE” calls but only one therapist will remain at the code, unless needed.
15. Answer all “STAT” calls for your assigned work area (patient care area).
16. Monitor and analyze pediatric, neonate tents or isolates at least one per shift if any.
17. Set-up and discontinue all respiratory care equipment as necessary. Return all D/C'd equipment to the department.
18. Perform all arterial blood gases as ordered and report critical values to units.
19. Perform PF screens or bronchoscopies as appropriate.
20. Make rounds to all tracheostomy patients.
21. Perform EKGs and other special tasks as assigned by the Department Manager.
22. Give a thorough report to the night shift.
23. Will work as a team utilizing Respiratory Care skills in the emergency room and any other areas in the Hospital in order to assist MD and RN in the performance of Optimal Patient Care.
24. Weekend coverage of “STAT” ABI studies. (Reference ABI OFF-Hours Procedure, Diagnostic Imaging)
25. Respond to all “CODE HELP” calls in the West Wing Lobby, Front Lobby, Cafeteria and hospital grounds, with the AED. (reference Cardiopulmonary Policy and Procedure Manual, section 3B, policy 32).

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Process for Printing the Respiratory Medication Reconciliation Report:

1. Open the NAL folder on the desktop.
2. Click on Cerner
3. Double click the Millennium App Bar icon. (Named App Bar Prod)
4. Log in with personal login and password.
5. Click on Powervision Button.
6. Locate and click on the HRMC Medication Reports +.
7. Double click on the Respiratory list.
8. The respiratory medication list will appear.
9. Select Task.
10. Select Print.
11. Once the report is printed reconcile with patient charts.
12. Communicate with pharmacy to resolve any issues.