

# CARDIOVASCULAR TECHNICIAN SKILLS EVALUATION - SELF ASSESSMENT

**Level of Proficiency**

Date 1 = Never Performed. You have never performed the stated

task and have no experience with this type of skill.

Name 2 = Familiar with. You are familiar with the stated task; but you

would need more experience and practice to feel comfortable and proficient in this type of skill.

Signature

3 = Experienced in. You have performed this task several times; you feel moderately comfortable functioning independently, but you would require a resource person to be nearby.

Please select the column that most accurately describes your proficiency level: 4 = Expert. You have a performed this task frequently; you

feel comfortable and proficient in this skill; you would not require supervision or practice.



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| **Cardiovascular Technician** | **1** | **2** | **3** | **4** |  |  | **1** | **2** | **3** | **4** |
| **Background** | | | | |  | **Cardiac Interventional** | | | | |
| Hospital |  |  |  |  |  | Aortography |  |  |  |  |
| Clinic |  |  |  |  |  | Intra-aortic balloon procedure |  |  |  |  |
| Mobile unit |  |  |  |  |  | Arrhythmia ablation |  |  |  |  |
| Surgery |  |  |  |  |  | Cardioversion |  |  |  |  |
| Doctor’s office |  |  |  |  |  | Permanent pacemaker insertion |  |  |  |  |
| Long term care facility |  |  |  |  |  | Temporary pacemaker insertion |  |  |  |  |
| Other (list): |  |  |  |  |  | Stent placement |  |  |  |  |
|  |  |  |  |  |  | Pulmonary angiography |  |  |  |  |
| **Emergencies** |  |  |  |  |  | Saphenous vein graft angiography |  |  |  |  |
| Anaphylaxis (contrast reactions) |  |  |  |  |  | Shunt detection |  |  |  |  |
| Vasovagal response |  |  |  |  |  | Internal cardiac defibrillator insertion |  |  |  |  |
| Respiratory distress |  |  |  |  |  | PTCA (Percutaneous cardiac angioplasty) |  |  |  |  |
| Sepsis |  |  |  |  |  | Calculate ejection fraction |  |  |  |  |
| Air embolism |  |  |  |  |  | ECG lead placement |  |  |  |  |
| Cardiac arrhythmias |  |  |  |  |  | EGC interpretation |  |  |  |  |
| Cardiac tamponade |  |  |  |  |  | Closure of ASD (atrial septal defect) |  |  |  |  |
| Pneumothorax |  |  |  |  |  | Closure of PDA (patent ductus arteriosus) |  |  |  |  |
| Embolism |  |  |  |  |  | Pericardial tapping |  |  |  |  |
| Hemothorax |  |  |  |  |  | Tilt table testing |  |  |  |  |
| Myocardial infarction |  |  |  |  |  | Brachytherapy |  |  |  |  |
| TIA (transient ischemic accident) |  |  |  |  |  | Mitral valvuloplasty |  |  |  |  |
| Aortic dissection |  |  |  |  |  | Pulmonary valvuloplasty |  |  |  |  |
| Other (list): |  |  |  |  |  | Intravascular ultrasound |  |  |  |  |
|  |  |  |  |  |  | Endomyocardial biopsy |  |  |  |  |
| **Cardiac Interventional** |  |  |  |  |  | Cardioversion/ Defibrillation |  |  |  |  |
| Angioplasty |  |  |  |  |  | Other (list): |  |  |  |  |
| Pericardiocentesis |  |  |  |  |  |  |  |  |  |  |

# CARDIOVASCUALR TECHNICIAN SKILLS EVALUATION - SELF ASSESSMENT



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|  | **1** | **2** | **3** | **4** |  |  | **1** | **2** | **3** | **4** |
| **Vascular Interventional** | | | | |  | **GU cont.** | | | | |
| **Peripheral Procedures** |  |  |  |  |  | Stone extraction |  |  |  |  |
| Upper extremity |  |  |  |  |  | Cholecystectomy |  |  |  |  |
| Lower extremity |  |  |  |  |  | PTCA (percutaneous transhepatic cholangiogram) |  |  |  |  |
| Embolization |  |  |  |  |  | Biliary stents/ drainage |  |  |  |  |
| Foreign body retrieval |  |  |  |  |  | Gastrostomy |  |  |  |  |
| Pelvic |  |  |  |  |  | Gastrojejunostomy |  |  |  |  |
| TPA, Urokinase, Streptokinase |  |  |  |  |  | Urethral dilation |  |  |  |  |
| Port placement |  |  |  |  |  | Urethral stents |  |  |  |  |
| Abdominal aortography |  |  |  |  |  | Other (list): |  |  |  |  |
| Thrombectomy |  |  |  |  |  |  |  |  |  |  |
| Other (list): |  |  |  |  |  | **General** |  |  |  |  |
|  |  |  |  |  |  | IV insertion |  |  |  |  |
| **Neurology** |  |  |  |  |  | Chest tubes |  |  |  |  |
| Spinal arteriography |  |  |  |  |  | Vital signs |  |  |  |  |
| Intracranial arteriography |  |  |  |  |  | Patient preparation |  |  |  |  |
| Extracranial arteriography |  |  |  |  |  | Surgical scrub technique |  |  |  |  |
| Interventional embolization |  |  |  |  |  | Oxygen delivery |  |  |  |  |
| Interventional angioplasty |  |  |  |  |  | Removal of sheaths |  |  |  |  |
| Intracranial venography |  |  |  |  |  | Sterile/ aseptic technique |  |  |  |  |
| Extracranial venography |  |  |  |  |  | Oxygen saturation |  |  |  |  |
| Other (list): |  |  |  |  |  | Other (list): |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **GU** |  |  |  |  |  | **Pharmacology** |  |  |  |  |
| Nephrostomy |  |  |  |  |  | Conscious sedation |  |  |  |  |
| Renal artery stents |  |  |  |  |  | Diuretics |  |  |  |  |
| Adrenal venography |  |  |  |  |  | Beta blockers |  |  |  |  |
| Gonadal venography |  |  |  |  |  | Anti-emetics |  |  |  |  |
| Splenic arteriography |  |  |  |  |  | Sedatives |  |  |  |  |
| Hepatic arteriography |  |  |  |  |  | Reversal agents |  |  |  |  |

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|  | **1** | **2** | **3** | **4** |  |  | **1** | **2** | **3** | **3** |
| **Pharmacology cont.** | | | | |  | **Age Specific** | | | | |
| Contrast media |  |  |  |  |  | Neo-natal |  |  |  |  |
| Prophylactic antibiotics |  |  |  |  |  | Pediatrics |  |  |  |  |
| Vasodilators |  |  |  |  |  | Adolescents |  |  |  |  |
| Vasopressors |  |  |  |  |  | Adults |  |  |  |  |
| Analgesics |  |  |  |  |  | Geriatrics |  |  |  |  |
| Anticoagulants |  |  |  |  |  |  |  |  |  |  |
| Other (list): |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
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## CERTIFICATION:

### BCLS: Yes

No

Expiration Date:

ACLS: Yes

No

Expiration Date:

PALS: Yes

No

Expiration Date: