

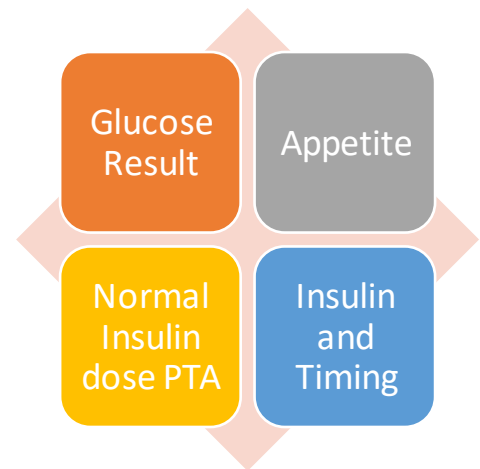
# Virtual Nursing Orientation Participant Guide

## Diabetes Management

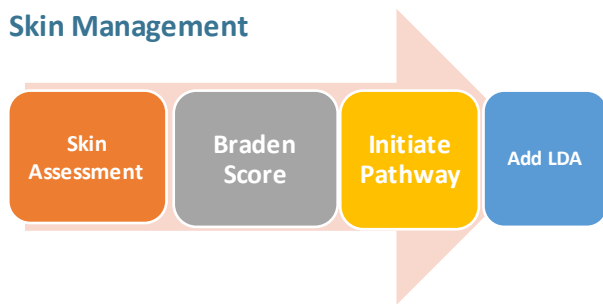
<b>Basal Insulin</b>	<ul style="list-style-type: none"> <li>• Starts working within ____ hour</li> <li>• Peak time: _____</li> <li>• Given the same time daily</li> </ul>
<b>Bolus Insulin</b>	<ul style="list-style-type: none"> <li>• Starts working within ____ minutes</li> <li>• Peak time: _____</li> <li>• Two types: Prandial (mealtime) and Correctional (sliding scale)</li> </ul>

### Insulin Tips and Tricks

- Glucose should be checked within \_\_\_\_\_ minutes of insulin administration.
- Bedtime insulin must be given \_\_\_\_\_ hours after last insulin dose.
- If NPO: HOLD prandial dose and GIVE correctional dose
- Use the 7 rights of medication administration
- Dual verification is good practice on high risk medications but not required when using an insulin pen
- Use acronym GAIN



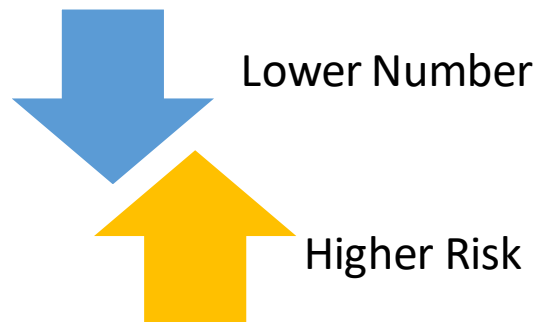
## Skin Management



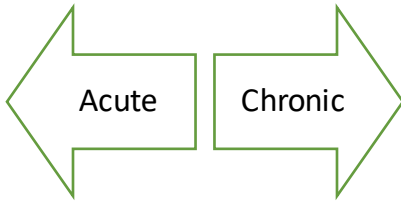
The Braden Scale uses 6 assessment criteria: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ and is completed with each assessment.

Our acronym for pressure prevention is SIMPLE:

S \_\_\_\_\_  
 I \_\_\_\_\_  
 M \_\_\_\_\_  
 P \_\_\_\_\_  
 L \_\_\_\_\_  
 E \_\_\_\_\_



## Pain Management



Acute pain is managed most effectively with \_\_\_\_\_ and perhaps \_\_\_\_\_. Chronic pain is best managed with \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ and possibly \_\_\_\_\_.

Assess pain during:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## IV Care and Maintenance

Use the smallest gauge catheter to accommodate the prescribed therapy:

\_\_\_\_\_ gauge will accommodate most prescribed therapies

\_\_\_\_\_ gauge is typically appropriate for geriatric and infant populations

\_\_\_\_\_ gauge is appropriate for rapid infusions or contrast dye administrations

Always scrub the hub with alcohol for 15 seconds AND

Use an antimicrobial infused cap per facility policy.

Change continuous IV tubing every \_\_\_\_ hours or \_\_\_\_ days.

Change intermittent IV tubing every \_\_\_\_ hours

Central Line Transparent dressing change every \_\_\_\_ days

Central Line Sterile Gauze dressing change every \_\_\_\_ hours.

Central lines: Never use less than a \_\_\_\_ mL syringe and always flush with \_\_\_\_ mL after blood draw

Enter a SAFE Report for a Grade \_\_\_\_ Phlebitis and Grade \_\_\_\_ Infiltration/Extravasation

### Site Selection Matters

- Avoid dominant arm
- Avoid AC
- 2 attempts per clinician

## Medication Administration

Controlled substances require two licensed professionals and must be wasted within \_\_\_\_\_.

High risk medications may require a dual signature and this process should be completed independently prior to administration.

The common reversal agents are:

VTE Prophylaxis Options:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Heparin or  
Lovenox  
Protamine Sulfate

Pradaxa  
Praxibind

Eliquis or Xarelto  
Andexxa

Warfarin  
Kcentra or Vitamin  
K

Opioid  
Narcan

Benzodiazepines  
Romazicon