



**Competency/Skills Self-Appraisal: Dialysis Technician**

Name \_\_\_\_\_

Date \_\_\_\_\_

Please check the column that applies to your skill level:  
 3= Very Competent > 1yr Exp.      2=Some Help needed <1 yr. Exp.      1=Need Direction <6 months Exp.      0=Never Done

SKILLS	3	2	1	0	SKILLS	3	2	1	0
▪ BCLS Expires: _____					<b>5. RENAL/GENITOURINARY SYSTEM</b>				
▪ CCHT Expires: _____					Care of patient with:				
▪ CBNT Expires: _____					▪ AV Fistula/AV graft				
▪ Other Certification (specify): _____					▪ Peritoneal Dialysis				
▪ Computerized Charting System (specify) _____					▪ Hemodialysis				
<b>1. AGE SPECIFIC PRACTICE CRITERIA:</b>					▪ Tunneled/Non-Tunneled Catheter				
▪ Newborn/Neonate (birth to 30 days)					<b>6. HEMODIALYSIS SKILLS/PROCEDURES</b>				
▪ Infant ( 30 days to 1 year)					Set up / Initiate Dialysis Treatment:				
▪ Toddler (1 -3 years)					▪ Bicarbonate Dialysate				
▪ Preschooler (3-5 years)					▪ Conductivity Testing				
▪ School Age Children ( 5-12 years)					▪ Prime Dialyzer				
▪ Adolescent (12-18 years)					▪ Check machine alarms settings				
▪ Young Adults (18-39 years)					▪ Prep vascular access				
▪ Middle Adults (39-64 years)					▪ Fistula Gortex/Bovine Graft				
▪ Geriatric (64 +)					▪ Dialysis				
<b>2. EXPERIENCE WITH AGE GROUPS:</b>					▪ Collect blood specimens				
▪ Able to adapt care to incorporate normal growth and development					▪ Anticoagulation				
▪ Able to adapt method and terminology of patient instructions to their age, comprehension and maturity level					Assess Patient and Equipment During Dialysis				
▪ Ensures safe environment reflecting specific needs of various age groups					▪ Volume status				
<b>3. EXPERIENCE IN DIALYSIS SETTINGS:</b>					▪ Vascular access foundation				
▪ Acute/Inpatient dialysis					▪ Arterial and Venous				
▪ Chronic/outpatient dialysis					▪ Blood flow rate				
▪ Dialysis Home Care					▪ Subjective response to treatment				
▪ Pediatric Dialysis					▪ Management of anticoagulation				
<b>4. GENERAL SKILLS:</b>					▪ Conductivity				
▪ Charting/Documentation/Consents/Care Plans					▪ Ultra filtration				
▪ Confidentiality of Information/HIPAA					▪ Operation of Myron L. Meter				
▪ Universal Precautions/Infection Control Procedures					▪ Sequential Ultra filtration/PUF				
▪ Advance Directives					▪ Documentation of Dialysis Treatment				
▪ JCAHO – National Patient Safety Guidelines					Care of patient with:				
▪ Ordering Supplies					▪ Fluid overload				
▪ Lab work – ordering					▪ Hypertension				
▪ Specimen Collection					▪ Hypotension				
▪ Insertion of Foley					▪ Disequilibrium syndrome				
▪ Weight					▪ Hyperkalemia				
▪ Vital Signs					▪ Seizures				
▪ Use of transfer/lift devices					▪ Muscle cramps				
▪					▪ Hemolysis				

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SKILLS	3	2	1	0	SKILLS	3	2	1	0
<b>6. HEMODIALYSIS SKILLS/PROCEDURES CONTINUED</b>					▪				
Care of patient with:					▪				
▪ Pyrogenic reaction					▪				
▪ Air embolus					▪				
▪ Chest pain									
▪ Anemia					▪				
▪ Neuropathy					▪				
▪ Pericarditis					▪				
▪ Filter blood leak					▪				
▪ Cardiopulmonary arrest					▪				
Machine Alarm/Troubleshooting					▪				
▪ Blood leak alarm					▪				
▪ Arterial pressure alarm					▪				
▪ Venous pressure alarm					▪				
▪ Conductivity alarm					▪				
▪ Ultra filtration alarm					▪				
▪ High temperature alarm					▪				
▪ Air/foam detector alarm					▪				
▪ Power failure alarm					▪				
▪ Blood pump alarm					▪				
Discontinue Dialysis					▪				
▪ Dialysis catheter					▪				
▪ Fistula/Vein graft					▪				
▪ Return of Blood									
▪ Post treatment access care					▪				
▪ Clean machine, tear down tubing, shutdown procedures					▪				
▪ Sterilization procedures									
<b>7. INFECTION CONTROL</b>					▪				
▪ Appropriate PPE					▪				
▪ Hand washing between treatments, machine contact, glove change					▪				
▪ Cleans blood spills per protocol					▪				
▪ Isolation procedures									
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