

**PARKLAND HEALTH & HOSPITAL SYSTEM
LEADERSHIP & ORGANIZATIONAL DEVELOPMENT**

**COMPETENCY VALIDATION
CENTRAL VENOUS PRESSURE SET UP AND MONITORING**

Name: _____ ID#: _____

Unit: _____ Date: _____

Central Venous Pressure Monitoring Set Up	1st Attempt (P or F)	2nd Attempt (P or F)	Comments:
1. Demonstrates equipment to collect			
• Pressure Tubing (Pressure Monitoring Kit)			
• Pressure Bag appropriate size for IV Solution			
• NS or Heparinized Saline as appropriate			
• IV pole			
• Transducer Holder			
• Carpenter's Level			
• Pressure cable			
2. Wash hands (can verbalize).			
3. Identifies the patient utilizing two forms of identification and explains procedure to patient. (can verbalize)			
4. Spike IV bag			
5. Prime transducer, stopcocks and pressure line.			
6. Remove white cap and replace with yellow occlusive cap			
7. Turn stopcock off to the yellow cap			
8. Place IV bag in pressure bag & inflate to 300mmHg			
9. Place transducer in transducer holder on the IV pole			
10. Connect pressure cable to monitor and transducer			
A. Select appropriate scale on monitor (40)			
B. Verify pressure waveform by moving end of pressure line			
11. Connect end of pressure tubing to preferred lumen. (Distal lumen preferred for double and triple lumen central lines. Can be verbalized)			
Central Venous Pressure Monitoring	1st Attempt (P or F)	2nd Attempt (P or F)	Comments:
12. Identify the lumen of the central line used to monitor CVP (right atrial pressure)			
13. Able to state the normal range for CVP (2-6)			
14. Calibrate the Transducer:			
A. Check the tubing and transducer for air bubbles.			
B. Positions the patient flat (if appropriate).			
C. Levels the transducer to the phlebostatic axis (4 th ICS, mid-axillary line) using a carpenter's level.			
D. Zeros the transducer (may verbalize depending on the monitor).			
15. Obtain and document CVP reading per unit standard or provider's order.			
16. States that the reading is obtained from the monitor.			
17. States/ documents the CVP reading. _____ mmHg (if available)			

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18. Compares readings with previous readings and describes appropriate nursing actions for increase or decrease in CVP (can verbalize)			
19. When asked, states that calibration is done every 4 hours and when significant variations are noted.			
20. Troubleshoots a dampened waveform (performs at least 4 of the following): (may simulate dampened waveform)			
A. Ensures that the pressure bag is inflated to 300 mmHg.			
B. Checks the transducer and tubing for air bubbles.			
C. Checks the tubing for a loose connection.			
D. Checks for kinks in the tubing or catheter.			
E. Recalibrates the transducer.			
F. Aspirates back and/or flushes the tubing.			
21. Identifies potential complications of CVP insertion/monitoring:			
A. Infection			
B. Dysrhythmia's			
C. Pneumothorax			

The completion of this form validates the above nurse's competency for this skill.

#1 Pass / Fail Competency Validates Signature: _____

#2 Pass / Fail Competency Validates Signature: _____