

PERFORMANCE EVALUATION

STUDENT NAME: _____

APNEA MONITOR

DATE: _____

INITIAL EVALUATOR: _____

Initial Evaluation: Pass ____ or Remediate ____

SECOND EVALUATOR: _____

Second Evaluation: Pass ____ or Remediate ____

SCORING SYSTEM:

3 points	Describes and/or performs objectives perfectly without prompting and in appropriate time interval.
2 points	Describes and/or performs objectives satisfactorily without prompting or with minimal assistance/or completes step slower than expected.
1 point	Describes and/or performs objectives with assistance or prompting. Appears unsure of task.
0 point	Unable to perform objective adequately
NA	Objective not appropriate or unnecessary. Some steps may not be done at all clinical agencies.

The student will be able to...	0	1	2	3	NA
1. **Select and gather appropriate equipment. a. Monitor b. Power cable c. Electrode pads or belt d. Lead wires e. Patient cable f. Alcohol pads g. Watch, pen, calculator, paperwork					
2. **Clean hands in patient room and implement standard precautions					
3. **Prepare apnea monitor following department policy and procedure a. Plug in electrical outlet b. Attach lead wires to cable and to electrode pads c. Prepare electrode pad sites (alcohol off or shave) d. Apply the electrode pads to the selected area e. Turn on unit f. Verify calibration.					
4. **Apply the monitor to the patient using electrodes or belt: a <i>Clean the areas with alcohol swab or damp cloth and dry</i> b <i>(RA - white) Right midaxillary line, at or two finger width below nipples</i> c <i>(LA - black) Left midaxillary line, at or two finger width below nipples</i> d <i>(RL - green) Placed along outside of the child's upper right thigh</i>					
5. ** Wait for the appropriate length of time for the apnea monitor to stabilize then verify proper monitor function a. Heart rate matches b. Respiratory rate matches					

		0	1	2	3	NA
	<p>**Obtain measurements and properly document the following information:</p> <ul style="list-style-type: none"> a. Date b. Time c. Respiratory rate d. Pulse rate e. Patient position f. Activity level g. Type or model of device used h. Clinical appearance of patient (cyanosis, skin temp....) 					
7.	<p>**For continuous monitoring, demonstrate how to and where to set the following alarms</p> <ul style="list-style-type: none"> a. High/low heart rate alarm setting b. High/low respiratory alarm setting. c. Apnea interval d. Alarm volume setting 					
8.	<p>**Maintain and process equipment properly after use</p> <ul style="list-style-type: none"> a. Remove electrodes and clean infant's skin b. Clean monitor with alcohol soaked cloth c. Clean patient cable with alcohol soaked cloth d. Dispose of electrode pads and lead wires (if disposable) 					
9.	<p>Knowledge/Comprehension Level</p> <ul style="list-style-type: none"> a. Can the student answer all oral review questions? 					

Students must pass all critical steps with a score of 2 or 3

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ORAL REVIEW QUESTIONS

1. Explain the principle and/or theory of operation of an apnea monitor. *Electrode pads are placed on the chest and as the patient breaths and has chest expansion, the electrodes move apart and this is counted as a respiration. The monitors may also measure the electrical activity of the heart.(ECG)*
2. Where are the electrode pads placed for apnea monitoring on an adult?
 - a. *Midclavicular line, second intercostal space left of sternum (LA)*
 - b. *Midclavicular line, second intercostal space right of sternum (RA)*
 - c. *Midclavicular line, right side of abdomen below the ribs (RL)*
3. Where are the electrode pads placed for apnea monitoring on an infant?
 - a. *Right midaxillary line, at or two finger width below nipples (RA)*
 - b. *Left midaxillary line, at or two finger width below nipples (LA)*
 - c. *Placed along outside of the child's upper right thigh (RL)*
4. Give clinical examples of when this apnea monitor may be indicated. *To detect central apnea or apnea of prematurity where there is no chest or air movement.*

5. Give clinical examples of when this apnea monitor may not be indicated. *It is not helpful in detecting obstructive apnea or mixed apnea where there is still chest movement without air movement*
6. Describe clinical conditions that will affect the accuracy of the apnea monitor. *Patient movement, diaphoresis and loss of electrode pads, choking, something or someone touching wires, accidental disconnects,*
7. What are some limitations of apnea monitors? *Untrained or uncomfortable users, false alarms, missed apneas, missed alarms in noisy environments, electrical interference,*
8. During continuous monitoring, how often should you assess the patient? *Whenever an alarm is activated and as indicated by patient's condition (usually Q1 – 4 hours)*
9. Why are there special steps to turn off an apnea monitor? *To prevent accidental shut off by a sibling in the home.*
10. What is the proper setting for the alarms: *As appropriate for patient's age*
 - a *High respiratory rate – 5 - 10 above rate*
 - b *Low respiratory rate – 5 - 10 below rate*
 - c *High heart rate – 10 to 15 above rate*
 - d *Low heart rate – 10 – 15 below rate*
 - e *Apnea interval –20 second adult, child 15 seconds & infant 10 seconds*
 - f *Alarm volume – as needed to hear alarms*