

APPENDIX A

$\underline{\mathsf{PASSPORT}\;\mathsf{V}}^{\mathsf{TM}}$ BEDSIDE MONITOR GUIDELINE

This document is a guideline only to be used as an aid to comprehensive Inservice training.

NAME:	
HOSPITAL:	
DATE :	
VALIDATOR:	

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			Not	Not
		Performed	Performed	Applicable
A. OVERVIEW				
1. Locate C	N/OFF button			
the clinic	ommunication ports. How does cian know he/she is iicating to the Panorama Station?			
3. Locate A	VC connection			
a. How doe	pattery compartment es the clinician know the			
b. How doe operating	s are charging? es the clinician know he/she is g on battery? g will the monitor run on			
	? How long to recharge?			
6. Locate E	ECG, NIBP, SPO2, P1*, P2*, and Temp. connection ports			
	avigator knob and key to creen to normal view			
9. Locate palarm of	patient size, date, time, and f icon			
a. All ECG	ne display to view: view (5 lead wire set) umeric displaying ECG, SPO2,			

		Performed	Not Performed	Not Applicable
	Resp, and NIBP			
B. BA	SIC FUNCTIONS			
1	Attach ECG, NIBP, and SPO2 probe			
	•			
	ECG			
	Discuss electrode prep and placement Change Lead from II to I			
C.				
0.	lead cable)			
d.	Discuss HR sources. How can a			
	clinician identify the HR source?			
	Enhance the pacemaker pulse/spike?			
f.	• • • • • • • • • • • • • • • • • • •			
_	Print a continuous strip of ECG Stop the printing of a continuous strip			
_	ARRHYTHMIA* Discuss default arrhythmia setting			
a.	Where are arrhythmia messages			
	displayed?			
C.	What leads are used for arrhythmia			
	analysis and heart rate detection?			
	Can lethal arrhythmias be disabled?			
	Enable lethal arrhythmias only			
f.	Adjust the following settings: 1. Asystole to 4 seconds			
	2. Vtach to 6 PVC/110bpm			
	3. Turn on Bigeminy alarm			
	4. Select VFib to automatically			
	print			
	Acknowledge a lethal arrhythmia			
<u>h.</u>	,			
	SPO2 Discuss placement of sensor			
b.				
	placement			
C.				
	DeSat and Low SpO2 alarm			
	Discuss Sat Seconds (Nellcorr)			
5.	NON-INVASIVE BLOOD PRESSURE			
2	(NIBP) Discuss proper cuff size			
	Set BP interval for every 10 minutes			
	Deflate the cuff			
d.	Locate NIBP display			
e.				
£	monitor is obtaining a NIBP?			
f.	Locate the last 5 NIBP measurements			

			Not	Not
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6.	RESPIRATIONS			
	Locate respiratory rate display			
b.	Respirations are obtained from what			
	sources?			
	Turn Resp. off			
	TEMPERATURE			
	Locate temperature display tile			
	What series of probes can be used?			
	ALARMS			
a.	Locate alarm limit settings on main			
h	display			
	Change low SpO3 to 00			
	Change low SpO2 to 90 Silence an alarm. How long is the			
u.	alarm silenced?			
و	Silence all alarms. How long are they			
0.	silenced? How does the clinician know			
	all alarms are silenced?			
f.				
	alarms			
g.	Discuss latched alarms including what			
	alarms are latched and what must be			
	done to acknowledge a latched alarm?			
	Change the alarm volume			
9.	Change patient size from Adult to			
	Pediatric. Does the patient size return			
	to Adult once the patient is			
40	discharged?			
10.	Enter first name, last name, and room number			
11.				
'''	the Panorama Central Station			
12				
12.	Discharge a patient from the Panorama Central Station and the			
	Passport V			
a.	_ `			
u.	discharge?			
13.	The patient is being removed from the			
	monitor for a test			
a.	What button is pressed to suspend			
	monitoring functions?			
b.	Resume monitoring function			
14.				
	discharge and standby? How does a			
	clinician know the monitor has been			
	discharged?			

			Not	Not
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15.	Adjust SPO2 color to yellow and NIBP			
	color to purple. What happens upon			
	discharge?			
16.	Discuss the following:			
a.	Displaying/printing Quick trends			
b.	Displaying/printing List or Graphic			
	trends			
C.	Adjust List trends to display every 30			
	minutes. Will this affect NIBP			
	measurement entries?			
d.	How many trends are stored? How are			
	they cleared?			
C. ADV	ANCE FUNCTIONS			
1.	INVASIVE BLOOD PRESSURES (P1			
	and P2)*			
	Zero an invasive line			
	Locate invasive pressure display tile			
	Change the label from ART to P1			
	Can the label be changed to CVP?			
	Change the scale to 0 –225 on P1			
f.				
	CO2*			
	Discuss disposable CO2 accessories			
	Setup up for an intubated patient			
	Setup for a non-intubated patient			
	Change the CO2 scale to 0 to 60			
e.	Adjust O2 compensation to 40%			
3	(DPM) ANESTHETIC AGENTS*			
	Locate agent display			
	What agents can the monitor identify?			
	Adjust the agent scale to 0 -15%			
	ST*			
a.				
	clinician know it is enabled?			
b.	How many ECG leads are being			
	analyzed?			
C.	Explain the ST alarm and relearn			
	process. Does this effect relearning for			
	arrhythmia?			
d.	Adjust ISO and J points			
L	, p. e .			1

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D.	D. OTHER FUNCTIONS				
		WEIGHT BASED DRUGS			
	a.	Locate two ways to open the Drug			
	h	Calculation Function Enter a weight of 160 pounds			
		Select the drug "Dopamine"			
		Enter a dosage of 5 mcgs/kg/min			
		How many cc/hr is this?			
	f.	Print titration table			
	2.	Select three monitor to view in addition			
		to the current patient. How can a			
		clinician scroll to any of the three			
		monitors?			
	3.	Display Lead II and the SPO2			
		waveform on a remote monitor			
	4.	Silence an alarm on a remote			
		monitor. Silence all alarms on a remote monitor			
	Э.	Print a strip on a remote monitor			
	6.	What do the following bed icons mean			
		on the remote monitors?			
		Red			
		Yellow Black			
	_	Gray			
E.					
	1.	Date/Time Adjustment			
		Adjust the date and time			
		Is this done at the bedside if connected			
		to the Panorama Central Station			
		Transfer settings			
		Save "Preset" settings to SB drive			
	b.	Transfer settings from SB drive to			
		monitor			