

Competencies Required for Independent Anesthesia Call Duties
Staff is always available. When in doubt, call them.

		√	Date	Staff/Senior Resident Signature
Labor & Delivery	Insight to know their limits			
	Assessment of patients for labor analgesia			
	Awareness of contraindications to neuraxial anesthesia and analgesia			
	Ability to place and initiate epidural analgesia for labor			
	Ability to troubleshoot inadequate epidural			
	Assessing and initiating management of obstetrical emergencies eg. Fetal distress, PPH			
Airway Emergencies	Assessment of airway for ease of mask ventilation and intubation			
	Assess oxygenation and ventilation			
	Use of non-invasive strategies ie CPAP, BiPAP, positioning, chin lift, jaw thrust, B&M ventilation			
	Technical skill in direct laryngoscopy and ET intubation with expected 90% success rate M 1&2 airways			
	Knowledge of awake intubation techniques for use in resuscitation scenarios on the ward			
	Knowledge of additional airway techniques ie bougie, light wand, LMA, glidescope, FOB			
Operating Room	Intimate knowledge and use of basic drugs ie STP, propofol, succinylcholine, rocuronium, ephedrine, phenylephrine, atropine, fentanyl, midazolam, ketamine, etomidate			
	Proficient in peripheral IV access 90% of the time			
	OR set up			
	Assessment of patients for emergency surgery			
	Ability to appropriately manage a full stomach			
	Induction and airway management including excellent knowledge of RSI procedure			
	Extubate safely			
	Check and <i>administer</i> blood products			
	Operate Hemocue and Accucheck			
	Set up and program infusion pumps			
	Indications and pharmacologic knowledge of basic pressors, inotropes, and antiarrhythmics			
Ward	<i>While calling for help</i> , diagnose and initiate the appropriate treatment of life threatening emergencies ie hypotension, hypertension, tachycardia, bradycardia, hypoxia, hypercarbia, high airway pressures			
	Recognize potential complications from epidural anesthesia/analgesia ie hematoma, infection, hypotension, intrathecal catheters			
	Be able to treat opioid-induced respiratory depression appropriately with naloxone, B & M ventilation			
	Troubleshooting epidurals (including pump functioning, catheter dislodgment, connector "disconnect", cracked filter, etc.)			
	Knowledge of PCA pump functioning & ability to initiate IV PCA			
	Knowledge of "Quail APMS server" and data to be inputted			
	Knowledge of ACLS protocols			
Emerg	Knowledge of all equipment in code bag, crash cart and MH cart			
	Knowledge of ATLS protocols			
	Ability to assess the airway and breathing in trauma			
	Ability of use at least 2 or 3 techniques to secure the airway safely or maintain airway while calling for help			

Reviewed with Resident

_____ Date

_____ Date

_____ Resident's Signature

_____ Program Director's Signature