

## REPORT TO THE DIRECTOR OF THE LEGISLATIVE COUNSEL BUREAU TO

NRS 439.877(4)(D) – SUBMITTED BY

Desert View Hospital

360 S. Lola Lane, Pahrump, NV 89048

Contact Number 775-751-8537

July 1, 2018 – June 30, 2019

Checklist Developed Include:	Revisions*	Usage**	Review***
Falls Prevention Program Policy		Housewide	x
Post Fall Analysis Form	x	Housewide	
Universal Protocol		Housewide	x
Isolation Guidelines		Housewide	x
TB Exposure Control Plan		Housewide	x
Risk Management/Patient Safety Plan 2018	x	Housewide	
Cauti Prevention		Housewide	x
Clabsi Prevention		Housewide	x
Admission Checklist		Med Surg	x
Discharge Checklist		Med Surg	x
Code White		Med Surg	x
L2K Checklist		ER	x
Discharge Assessment Checklist		ER	x
2 Nurse Witness Blood		Housewide	x
Conscious Sedation Checklist		ER	x
TNK and Stemi Checklist		ER	x
CT screening	x	Radiology	
MRI screening and contrast	x	Radiology	
Stress Test Checklist		Radiology	x
Mattress Inspection Checklist		Housewide/EVS	x
Isolation Room Cleaning		EVS	x
Patient Discharge Room Cleaning		EVS	x
Patient Identification		Housewide	x
Hand Washing		Housewide	x
Transfer Packet	x	Med Surg	

\* Checklists and Patient Safety Policies were reviewed for the stated time period. Need for revision is noted by the date the revision was made.

\*\* Usage outlines the units/departments the checklists are used in.

\*\*\* As part of the annual review any required revisions will be identified. If revisions are required this is noted in the revision box. Any additional patient safety checklist or policies identified will be noted in this (review) column. If the annual review reveals no changes are required this box will be marked with an "x". An "X" means that the checklists and policies were reviewed but no changed were required.