



June 28, 2019

Rick Combs, Director  
Legislative Counsel Bureau  
401 S. Carson Street  
Carson City, NV 89701-4747

Dear Mr. Combs:

Pursuant to NRS 439.877(4)(d) (AB280), which requires patient safety committees in medical facilities to report annually on the facilities review, revision, and usage of patient safety checklists and policies, the following is a summary of Carson Valley Medical Center activities during 2019.

All checklists and policies were reviewed. Several checklists were replaced with new checklists and several patient safety policies required minor revisions. The Carson Valley Medical Center Patient Safety Program Policy includes the patient safety and policy compliance requirements. Attached you will find a report summarizing the specific checklists and policies.

Please do not hesitate to contact me or my staff should you require additional information.

Sincerely,

Leslie Manning  
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Quality Assurance Administrative Assistant  
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**PATIENT SAFETY COMMITTEE CRITICAL ACCESS HOSPITAL, GARDNERVILLE NV (NPI #1396799102)**

**TO:** Director of the Legislative Counsel Bureau for transmittal to the Legislative Committee on Health Care.

**RE:** 439.877,4.(d)

**CHECKLIST REPORT: (06/28/2019, FRIDAY)**

1. All checklists in place reviewed and approved for use by the Patient Safety Committee in 06/28/2019.
2. All checklists in use reviewed monthly and new checklists are approved for initial and continued use by the Patient Safety Committee at each monthly meeting.
  - a. 0 new checklists added to Patient Safety Plan.
3. No amendments to existing document formats were recommended by the Patient Safety Committee.
4. Current check lists:
  - a. **Nursing:**
    - i. **Daily:**
      1. Box contents
      2. C. Diff protocol policy (Section/Number Nursing Protocols)
      3. Chest Pain Protocol policy (Section/Number Nursing Protocols)
      4. CVMC Crashcart checklist
      5. Hospital Stay Checklist
      6. ICU Lockbox log
      7. PACU admit and discharge policy (Section/Number Nursing 106.145)
      8. Pre-Procedure anticoagulant protocol (Section/Number Nursing Protocols)
    - ii. **Procedure:**
      1. Consent for Treatment
    - iii. **DC Checklists:**
      1. NONE LISTED
  - b. **Rehabilitation Services policies:**
    - i. **Procedure:**
      1. Cervical Traction (*Section/Number Rehab 500.007*)
      2. Cryo Therapy (*Section/Number Rehab 500.010*)
      3. Dysphagia Evaluation and Treatment (*Section/Number Rehab 500.013*)
      4. Electrotherapy: Interferential Stimulation (*Section/Number Rehab 500.014*)
      5. Hot Packs (*Section/Number Rehab 500.016*)
      6. Iontophoresis (*Section/Number Rehab 500.017*)
      7. Lumbar Traction (*Section/Number Rehab 500.018*)
      8. Pain Management (*Section/Number Rehab 100.251*)
      9. Paraffin (*Section/Number Rehab 500.020*)
      10. Phonophoresis (*Section/Number Rehab 500.023*)
      11. Pool Therapy (*Section/Number Rehab 500.024*)
      12. TENS (Transcutaneous Electrical Nerve Stimulation) (*Section/Number Rehab 500.005*)
      13. UE Splinting (*Section/Number Rehab 500.032*)
      14. Ultrasound (*Section/Number Rehab 500.033*)
    - ii. **Daily:**
      1. Cervical Traction (*Section/Number Rehab 500.007*)

2. Cryo Therapy (*Section/Number Rehab 500.010*)
3. Dysphagia Evaluation and Treatment (*Section/Number Rehab 500.013*)
4. Electrotherapy: Interferential Stimulation (*Section/Number Rehab 500.014*)
5. Hot Packs (*Section/Number Rehab 500.016*)
6. Iontophoresis (*Section/Number Rehab 500.017*)
7. Lumbar Traction (*Section/Number Rehab 500.018*)
8. Pain Management (*Section/Number Rehab 100.251*)
9. Paraffin (*Section/Number Rehab 500.020*)
10. Phonophoresis (*Section/Number Rehab 500.023*)
11. Pool Therapy (*Section/Number Rehab 500.024*)
12. TENS (Transcutaneous Electrical Nerve Stimulation) (*Section/Number Rehab 500.005*)
13. UE Splinting (*Section/Number Rehab 500.032*)
14. Ultrasound (*Section/Number Rehab 500.033*)

**c. Respiratory:**

**i. Procedure:**

1. Lexiscan Stress Test
2. Oxygen Therapy protocol (Section/Number Patient Care 0003)
3. Respiratory Protocol policy (Section/Number Patient Care 0022)
4. Stress Test Worksheet
5. Trach/Stoma protocol (Section/Number Patient Care 0017)
6. Ventilator Management Protocol (Section/Number Ventilatory Support 0007)

**ii. Daily:**

1. Lexiscan Stress Test
2. Oxygen Therapy protocol (Section/Number Patient Care 0003)
3. Respiratory Protocol policy (Section/Number Patient Care 0022)
4. Stress Test Worksheet
5. Trach/Stoma protocol (Section/Number Patient Care 0017)
6. Ventilator Management Protocol (Section/Number Ventilatory Support 0007)

**d. All staff:**

- i. Blood Specimen Collection from VAD policy (Section/Number GEN NUR 504.00)
- ii. Foley Catheter policy (Section/Number IC 311)
- iii. Foley Catheter Removal Protocol policy (Section/Number IC)
- iv. Hand Hygiene policy (Section/Number IC 313)
- v. Imaging Services Department – IV Contrast Information Form
- vi. Imaging Services Department – MRI Screening Information Sheet/Patient Informed Consent for MRI
- vii. Imaging Services Department – Patient Informed Consent for CT Scan with Contrast
- viii. Isolation Precautions policy (Section/Number IC 318)
- ix. Knee Evaluation
- x. Laboratory – Direct Observation Checklist for Phlebotomy Procedure
- xi. Myocardial Perfusion Scan Nuclear Stress Test
- xii. Patient Identification and Documentation policy (Section/Number SC.29)
- xiii. Patient Identification policy (Section/Number QA 800.244)
- xiv. Patient Identification, hand washing
- xv. Patient Information / Health History
- xvi. Patient Safety program (Section/Number QA 2.004)
- xvii. Use of restraint policy and protocol (Section/Number 800.300)

**e. Social Services:**

- i. Social Services Referral Guidelines (Section/Number CM 110.030)

**f. Safety:**

- i. Patient Safety program (Section/Number QA 2.004). Same as in, “All Staff,” section above.
  - g. Environmental Services:**
    - i. CVMC Clinics Cleaning Duties (Section/Number 9831-CL-035)
    - ii. Environmental Hygiene (Section/Number GN 1.09)
    - iii. Housekeeping Nursing policy (Section/Number EVS-HK 105.710)
    - iv. Housekeeping Surgery policy (Section/Number EVS HK 106.251)
  - h. Outside Vendors:**
    - i. Employee Identification Badges (Section/Number HR Employment 100.230)
    - ii. Vendor Visitation policy (Section/Number MM 600.501)
    - iii. Quest; NONE
- 5. Patient Safety Committee approved all existing checklists for 2019 and reviews any new presentations at the monthly Patient Safety Committee meetings in the new business agenda section.