

LSUHSC School of Nursing, Nurse Anesthesia Program Practice Survey

How frequently do you PERSONALLY PERFORM the following skills? (check the appropriate box)

Skill	never	Daily	2-3 times/ week	weekly	biweekly	monthly
Intravenous line insertion						
Arterial line insertion						
Arterial line monitoring						
Central line insertion						
Central Venous Pressure Monitoring						
Pulmonary Artery Pressure Monitoring						
Mixed Venous blood saturation monitoring						
Cardiac Output Monitoring						
Monitor neuromuscular						
Adjust ventilator settings						
Make ventilator weaning decisions						
Monitor during conscious sedation						
Systemic Vascular Resistance Monitoring						

How frequently do you administer the following pharmacologic agents?

Agent	Never	Daily	2-3 times/week	weekly	biweekly	monthly
Nitroglycerine infusion						
Nitroprusside infusion						
Phenylephrine infusion						
Phenylephrine bolus						
Dopamine infusion						
Dobutamine infusion						
Levophed infusion						
Epinephrine infusion						
Ephedrine bolus						
Neuromuscular blocking agents						
Sedation agents						
Intravenous narcotics						

Please tell us about your primary site of employment

How many beds are in the unit in which you currently work?	1-5		6-10		11 or more	
Approximately how many hours per week are you working?	10-20	21-30	31-40	41-50	51-60	more than 60
How many beds are in the hospital in which you currently work?	1-50	51-100	101-150	151-200	201-250	>250
Characterize your hospital	Rural		Suburban		Urban	
Type of ICU	Emergency	Operating Room	Post-Anesthesia recovery	Medical	Surgical	Pediatric or Neonatal
	Open-heart recovery	Transitional or Step-down	Neurologic	Trauma	Other (specify)	
How long have you worked in the unit described above?	< 6 months	6-12 months	12-18 months	18-24 months	24-36 months	more than 36 months