DIAGNOSTEMPS
Radiology Staffing

Diagnostic Cardiac Sonography Skills Inventory

Technologist _____ Date_____

PLEASE USE THE FOLLOWING KEY WHEN SELF-RATING YOUR LEVEL OF EXPERIENCE IN EACH OF THE SKILLS LISTED BELOW:

1 ..... *No Experience*
2 ..... *Minimal* - Some experience, works with supervision
3 ..... *Experienced* - Works without supervision in most cases
4 ..... *Highly Skilled* - Perform well without assistance

SKILLS CATAGORIES	SELF RATING			
Echocardiography	**1**	**2**	**3**	**4**
Adult Echocardiography	○	○	○	○
Pediatric Echocardiography	○	○	○	○
Fetal Echocardiography	○	○	○	○
Trauma Echocardiography	○	○	○	○
TEE	○	○	○	○
Intraoperative Echocardiography	○	○	○	○
Mycardial Contrast	○	○	○	○
Echo-Guided Procedures	○	○	○	○
Plethysmography	○	○	○	○
Vascular Doppler Procedures	○	○	○	○
Pressure Measurements	○	○	○	○
Age	**1**	**2**	**3**	**4**
Neonatal (Birth to 6 weeks)	○	○	○	○
Infant (6 weeks to 3 years)	○	○	○	○
Children (4-11 years)	○	○	○	○
Adolescent (12-18 years)	○	○	○	○
Adults (19-64 years)	○	○	○	○
Elderly (65+ years)	○	○	○	○
Echocardiography Techniques	**1**	**2**	**3**	**4**
M-Mode	○	○	○	○
Two-Dimensional	○	○	○	○
Three-Dimensional	○	○	○	○
Pulse Dopplar	○	○	○	○
Color Dopplar Mapping	○	○	○	○
EKG	○	○	○	○
ECG	○	○	○	○

List Equipment Used

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Certifications / Licensures	Expiration Date
RDCS	_____
ARDMS (AB) (OB) (BR)	_____
RCS	_____
RVT	_____
BLS / ACLS	_____

The information I have given is true and accurate to the best of my knowledge, and I hereby authorize DiagnosTemps to release this Skills Checklist to staffing clients of DiagnosTemps.

Updated Annually.

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Technologist Signature/Date

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Supervisor Signature/Date