

CADD Legacy 6300 Training Checklist

Name _____

Check in the appropriate box and sign when complete.

	Skill	Yes	No	N/A
1.	Demonstrates how to prime tubing and load cassette			
2.	Demonstrates how to start a new program for a new patient			
3.	Demonstrates how to change container			
4.	Demonstrates how to change programming			
5.	Demonstrates how to unlock keypad			
6.	Demonstrates how to access history and shift totals			
7.	Demonstrate how to review program			
8.	Demonstrates how to change the batteries			
9.	Verbalizes the need to review the pump program at every visit for accuracy			

I, _____, have completed the training on the CADD Legacy 6300 pump and feel that I am competent to perform the above skills independently. I realize it is my responsibility to maintain competence in caring for patients with a CADD Legacy 6300 and I will seek guidance/assistance when needed.

Nurse Signature: _____

Date: _____

Certified by: _____ (NM or CNE)

Date: _____

CADD Legacy 6300 Training Scenario

Part A:

Set up New Program:

Drug: Morphine

Rate: 2 mg/hr

Bolus Dose: 1 mg Q 30 min

Concentration 2 mg/ml

Part B:

New Orders:

Increase rate to 4 mg/hr

Bolus dose: 2 mg bolus Q 30 minutes

Concentration: 4 mg/ml.

Part C:

More New Orders:

Increase rate to 6 mg/hr

Bolus Dose: 2 mg bolus q 20 minutes

Concentration: 4 mg/ml