1. Shift 1100 to 2330
2. Wear approved apparel for assignment.
3. After clocking in, proceed to the charge nurse desk, utilize Charge Nurse II radio/cell phone. Receive update on unit status from Charge Nurse.
4. PRIMARY JOB DUTIES:
   a. Off-load EMS crews immediately into:
      i. EMXpress Locations 1-8
      ii. **Transfer the patient in the TOC (transfer of care) software, use immediate transfer as much as possible.** Advise crew to proceed to the charge nurse desk to give report.
   b. Assist Charge Nurse in triaging patients when necessary or directed by the Charge Nurse on duty. Usually this will occur when there is more than one crew waiting.
      i. If patient remains in an EMXpress location, place patient on monitor if required, obtain current set of vitals (including temperature) and document on the RN T-Sheet. Complete clothing list.
   c. Draw required labs and label as required by RN standing order sheet or Physicians order sheet, under the direction of the Charge Nurse.
   d. Monitor Patients in EMXpress location for the charge nurse on duty. Report any changes as required/needed.
   e. Assist Charge Nurse with patient flow.
5. Secondary Job Duties (NO EMS CREWS WAITING/AVAILABLE ER BEDS):
   a. Off-load EMS crews into available ER Bed
      i. Have patient change into patient gown, or assist patient with this requirement.
      ii. Place patient on bedside monitoring equipment.
      iii. Draw required labs and label as required by RN standing order sheet or Physician order sheet.
      iv. Advise primary nurse of patient’s arrival and chief complaint.
   b. Assist ER staff as required or necessary.
6. THE DO NOT’S:
   a. Leave the unit without advising the charge nurse.
   b. Transport patients to the floor, unless under extreme conditions and with approval from the charge nurse.
   c. Assist RN’s on the floor only with the approval of the charge nurse on duty.
7. REMINDERS:
   a. Your primary duty is to off-load EMS crews and monitor those patients for the charge nurse on duty.
   b. We have other ED Techs working in the ER, there duties remain the same.

This program is a work in progress. Its success depends on you, and your diligence in off loading EMS crews to get them back on the street and out of the hospital within 30 mins. The TOC (transfer of care) software must be maintained and updated frequently. Your suggestions and ideas are always welcome.