

Procedure Types Count

Procedure:	Total:	Performed:	Verified:	Certified Date:
Airway Management (endotracheal intubation)		21	21	14 --
Arterial Line		7	7	2 --
Central venous catheter placement		12	12	5 --
Endobronchial ultrasound with TBNA		1	1	1 --
Femoral - Central Line Insertion Controlled Elective		1	1	--
Femoral - Central Line Insertion Controlled Elective (Expedited)		1	1	--
Fiberoptic bronchoscopy		63	63	33 --
Internal Jugular - Central Line Insertion Contolled Elective		11	11	4 --
Internal Jugular - Central Line Insertion Controlled Elective		2	2	--
Percutaneous Tracheostomy		2	2	2 --
Thoracentesis		5	5	2 --
Thoracostomy tube placement		5	5	2 --
Transbronchial Biopsy		9	9	4 --

Diagnosis/Indications Count

Diagnosis/Indication:	Total:
(none)	