



## CHEMO INTERVIEW QUESTIONNAIRE

<b>Candidate Name</b>	
<b>Area of speciality</b>	
<b>BAND/GRADE</b>	
<b>Date</b>	
<b>Interview completed</b>	<input type="checkbox"/> London Headoffice <input type="checkbox"/> Video Interviewing

### THIS ASSESSMENT CONSIST OF 4 PARTS:

1. CHEMO KNOWLEDGE BASED ASSESSMENT PAPER	3. SKILL CHECKLIST
2. ENGLISH TEST	4. FACE-TO-FACE ASSESMENT WITH OUR CLINICAL MANAGER

## CHEMO KNOWLEDGE BASED ASSESSMENT PAPER – PART 1

### CHOOSE THE CORRECT ANSWER:

1. Hyperglycaemia can be a serious problem if not treated in time. (5 Marks)	<input type="checkbox"/> True <input type="checkbox"/> False
2. Insulin can be administered via subcutaneous injection without a doctor's prescription. (5 Marks)	<input type="checkbox"/> True <input type="checkbox"/> False
3. A patient with chronic pulmonary disease has a bluish tinge around the lips. The nurse charts which term to most accurately describe the patient's condition? (5 Marks)	
<input type="checkbox"/> Hypoxia <input type="checkbox"/> Dyspneal <input type="checkbox"/> Cyanosis <input type="checkbox"/> Tachypnea	

### GIVE THE BEST ANSWERS TO THE SITUATIONAL QUESTIONALS BELOW:

4. While administering chemotherapy intravenously via a peripheral cannula, the patient complained of "feeling funny" on the cannula site. What is the first action you take? (15 Marks)
Answer:
5. Mrs Jones is scheduled to start chemotherapy today. After checking blood result, you noticed that her liver and kidney function results out of normal range. What would you do? (15 Marks)
Answer:



6. You notice a discrepancy between the patient's hospital number on the chemotherapy script and that on the patient's ID band. What would you do? (15 Marks)

Answer:

**CALCULATE THE FOLLOWING AND CHOOSE THE APPROPRIATE ANSWER BELOW:**

7. Calculate the rate of 1 litre of 5% Dextrose to infuse for 12 hours? (10 marks)

- 100ml/hr       125ml/hr       83ml/hr       166ml/hr

8. A patient is prescribed 75 mg of Tramadol Hydrochloride IM injection. The stock ampule comes in 50 mg/ml. What volume will you require? (10 marks)

- 3ml       1.5ml       2.5ml       4ml

9. Gentamycin 120 mg is prescribed to be given IV. The drug comes in 80 mg/2ml vial. How many ml would you need to administer? (10 marks)

- 3ml       2.5ml       4ml       1ml

10. A patient normally takes 10mg of frusemide TDS. The pharmacy dispensed 20 mg tablets. How much would you need to give each dose? (10 marks)

- 1tablet       2tablet       1 and a half tablet       1/2tablet

Question B: Which route of administration must be used? (5 marks)

- Intramuscular       Intra Venous       Oral       Subcutaneous

## ENGLISH TEST – PART 2

1. Please tick the most appropriate word to be used to complete the sentence.

The nurse \_\_\_\_\_ the medication on to the patient. {give / gave / given}

2. Please tick the most appropriate word to be used to complete the sentence.

The patient \_\_\_\_\_ be administered intravenous antibiotics . {Would / is / Will}

3. Please tick the most appropriate word to be used to complete the sentence.

\_\_\_\_\_ are 25 beds on ward 5 {There / Their / They're}

4. The word below is spelt phonetically please write the correct spelling of the word in the box provided.

Medicayshion :

5. The word below is spelt phonetically please write the correct spelling of the word in the box provided.

Prespkriptshion:

6. Please rewrite the sentence below adding in missing punctuation and capital letters.

dr wright requested the nurse to conduct a blood test for patient mrs smith in ward 11 and wanted to be updated once the results were received:

7. What are the usual patient observations recorded on a NEWs sheet?

8. Please could you kindly explain what ABC in the acronym ABCDE stands for?

## CHEMOTHERAPY NURSE SKILL CHECKLIST – PART 3

Please complete this form by ticking the correct boxes and making any comments that you feel that may be necessary in the last box.

SKILL	NO EXPERIENCE	REQUIRES FURTHER DEVELOPMENT	COMPETENT
<b>CLINICAL SKILLS</b>			
Ability to perform a thorough patient assessment prior to chemotherapy administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching and advice for patients and careers during and after chemotherapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aware of responsibilities under law and regulation for the administration of cytotoxic drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge and assessment of chemotherapy toxicities prior to administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Competent in the safe administration of non vesicant drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management of extravasation injury	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Competent to complete surface area calculations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Competent to complete creatinine clearance calculations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management and safe disposal of cytotoxic spillages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>ADMINISTERS CYTOTOXIC DRUGS VIA THE FOLLOWING ROUTES</b>			
Oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subcutaneous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intramuscular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peripheral intravenous bolus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peripheral intravenous infusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peripheral intravenous central venous access device (CVAD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Management of intravenous chemotherapy/ immunotherapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound knowledge of administration and management of monoclonal antibodies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound knowledge of blood result interpretation/biochemistry profiles and tumour markers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recognize and manage neutropenic sepsis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care of intra-peritoneal catheters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trained, competent and registered to check intrathecal chemotherapy drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**Zentar UK Limited – Company Registration 08315409**

13 Berghem Mews, Blythe Road, Kensington, W14 0HN

Member Phone: 02073480585 Fax: 02072930112 W: [www.zentar.co.uk](http://www.zentar.co.uk) Email: [compliance@zentar.co.uk](mailto:compliance@zentar.co.uk)

AREAS			
Chemotherapy day unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemotherapy inpatients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemotherapy outpatients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oncology inpatients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Haematology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemotherapy home nurse/community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## FACE-TO-FACE INTERVIEW (TO BE FILLED BY CLINICAL MANAGER) PART 4

1. Please take me through your work history for the last 5 years.
2. What other agencies have you registered with in the past and are you still registered with them?
3. Have you ever been refused registration by an agency/Hospital?
4. Have you ever been suspended or dismissed by an employer? If yes please provide details below.
5. Have you ever received a caution, undergone an investigation, or been convicted of any offence on your DBS or in any overseas country? If yes please provide details in the box below
6. Have you ever received a caution, undergone an investigation or been subject to restricted practice, or been removed from the register of your relevant governing body (NMC, GMC or HCPC)? If yes please provide details below



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7. What is your present employment status?
8. What additional trainings have you done to enhance your skills at work?
9. How many shifts per week can you work? Would you prefer Days/Nights?
10. What are your preferred work areas/Specialities?
11. Are there any areas/speciality you are not willing to work in?
12. If you are employed by NHS, when was your last appraisal done?
13. Which ares would you be intrested in working for Zentar?
<input type="checkbox"/> NHS / Private Hospitals <input type="checkbox"/> Nursing Homes <input type="checkbox"/> VIP Care Packages
14. Which geographical area you would prefer to do agency work in?

INTERVIEW OBSERVATIONS	
1. Chemo Questionnaire	/100
2. How did the candidate score in Englis Test (Written/Verbal)	<input type="checkbox"/> POOR <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> GOOD <input type="checkbox"/> EXCELLENT
3. Overall Impression of the candidate taking imnto account appearance & punctuality.	<input type="checkbox"/> POOR <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> GOOD <input type="checkbox"/> EXCELLENT

INTERVIEW SCORE
Has the candidate Passed/Failed
<input type="checkbox"/> Passed <input type="checkbox"/> Failed

<b>Candidate Signature:</b>	
<b>Interviewers Name:</b>	
<b>Interviewers Signature:</b>	
<b>Date:</b>	