the test

Tradtionally, the PBDS (Performance Based Development System) was given to develop customized orientation plans for newly hired nurses.

Now used to assess clinical knowledge and critical thinking skills of temporary staff prior to allowing the nurses to render care to patients.

Responses are compared with criteria and performance standards developed by the hospital giving the test.

components of the test

Measures three areas of competence: critical thinking abilities, interpersonal communication skills, and technical skills.

Interpersonal skills include customer relations, conflict resolution, team building, and other related issues.

Clinical exercises fall in one of four clinical areas: med/surg, critical care, neonatal ICU, and OB.

Eleven scenarios and one sample scenario are presented in video format.

Based on scenario, nurse is asked to indicate actions the nurse should take regarding the patient’s condition.

Actions can include reporting findings to the physician and anticipating a diagnosis and possible orders the physician might give.

Other actions may relate to ways of dealing with interpersonal or communication issues.
possible interpersonal scenarios

**scenarios ask what would the nurse do if**

- Family member experiences a cardiac arrest in a semi-private room?
- You are scheduled for an annual evaluation today?
- Physician says you have to accompany your patient to a procedure that may last up to 90 minutes?
- You have a code at the beginning of shift and family members are still in the room?
- You have a nursing student to work with you during your shift?
- There will be a staff meeting in one hour?

**things to consider in responding to these scenarios are**

- What you MUST do.
- What you SHOULD do.
- What you COULD do.
<table>
<thead>
<tr>
<th>Possible medical condition scenarios</th>
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**It is important that the test taker be familiar with the following conditions:**

- CVA
- Renal Failure
- Intracranial bleed or increased intracranial pressure
- Chest pain/Acute MI
- Pulmonary embolism
- Pneumothorax
- Digoxin toxicity
- Illeus
- Thrombocytopenia
- Bladder Retention/Pylonephritis
- Ketoacidosis and hyperglycemia
- Pain control

| Know common dysrhythmias, lab values, ABG values, frequently prescribed medications. |

**For ICU test, be familiar with the following:**

- Cardioversion/Defibrillation
- Pulmonary Assessment
- O2 Therapy and Airway Adjuncts
- ABGs
- Airway Management
- Ventilators and Weaning
- Central Venous Pressure Monitoring
- Arterial Pressure Monitoring
- Pulmonary Artery Pressure Monitoring
- SvO2
- Cardiac Output
- Hemodynamic Profile
- Blood Products
- Renal/Fluid and Electrolytes
- Neuro
- Neuromuscular Blocking Agents
- Immunology and CBC Interpretation
- Ethics
helpful tips to enhance the chances of passing PBDS

- View the sample scenario carefully.
- Do not take notes, but watch and listen carefully. Data will be given in written form for reference after the scenario has been viewed. This is true for all the scenarios.
- In each scenario, the patient’s condition will change. Clues to the change will be given verbally and/or visually. Look and listen carefully.
- When asked to write responses, write all you know.
- For every action you state, give a rationale for your actions. Critical thinking is judged on the actions you take as well as on the reasons you give for taking such actions.
- If you choose to call the physician, state what you would tell the physician and why.
- State the orders you would anticipate the physician would give you and why you would expect to get those orders.
- If medications are involved, name the medication and state the reason you would expect to administer or discontinue it.
- If fluids are involved, name the fluid and state the reason you would expect to administer it, discontinue it, and/or change the flow rate.
- If lab tests are involved, name the test and state the reason you would expect the test to be ordered, the expected value of the test, and expected actions to be taken because of the results of the test.
- For interpersonal situations, state the response you would give as well as the rationale for giving that response.
- Give a rationale for every action you include in your answers.
- Don’t forget to include nursing actions that may seem automatic such as holding a medication with the patient is exhibiting symptoms of toxicity (e.g. patient with high digoxin levels, nurse withholds next dose of digoxin; turning off heparin drip when patient starts vomiting blood).
<table>
<thead>
<tr>
<th>Condition</th>
<th>Nursing Assessment Findings related to Condition</th>
<th>Priority Nursing Interventions with Rationale</th>
<th>Data to Report to Physician</th>
<th>Orders Anticipated from Physician</th>
<th>Misc. Information (Labs and Medications)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetic Ketoacidosis &amp; its complications</td>
<td>Dehydration, hypotension or hyper tension, metabolic acidosis, tachypnea, nausea/vomiting abdominal pain &amp; tenderness, LOC, cardiac changes, history,</td>
<td>Monitor I &amp; O’s, replace fluids as ordered, monitor blood glucoses, monitor cardiac monitor, NPO, provide reassurance, bedrest</td>
<td>Blood sugar, LOC, cardiac changes, respiratory status, pain level, location, etc., blood pressure, temperature, pulse, nausea/vomiting</td>
<td>Labs – Serum glucose, electrolytes, BUN, urinalysis, CBC, ketones, serum osmolarity, ABG’s, CT – head if mental status altered, intubation if comatose, IV normal saline</td>
<td>Labs – serum ketosis, urine ketosis, glycosuria, hyponatremia, increased BUN, metabolic acidosis increased serum osmolality, increased anion gap, Meds – insulin drip, potassium, fluid replacement</td>
</tr>
</tbody>
</table>
after successful evaluation

Ask the hospital to give you a certificate stating that you have passed PBDS. Hospitals for other assignments may recognize that you have passed PBDS and not require you to take it again.

celebrate

congrats!

Enjoy your assignment knowing that you have demonstrated your abilities as a nurse in a very tangible way.