ELISSA GUADARRAMA

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Objective

Organized bilingual registered nurse with 23 years of experience in nursing and 6 years in case management. Seeking a challenging position with a reputable company to expand my knowledge and supervisory skills. Self motivated, independent with great time management and strong organizational skills to be able to make a significant contribution to the success of the company.

Ability Summary

Hard working, highly motivated team player. Always try to go above and beyond for both my employer and my patients. Enjoy the fact that I am bilingual as I have a longer reach for people that I can help educate, motivate and help produce a better outcome.

Employment History

10/2021 - 02/2022 Registered Nurse (RN)

Favorite Healthcare Staffing, San Antonio, TX

- *Floor Nurse for the following healthcare settings:
- *Med/Surg
- *Post partum
- *Telemetry
- *ICU
- *LTAC
- *Rehab
- *Duties included: Assessments, vital signs, health care documentation, lab draws, start and dc IVs, blood infusions, wound care, patient education, foley catheters, admissions/discharges, monitor weights, drips, call MD with any patient changes in condition and post mortum care.

10/2017 - 12/2021 Outpatient Case Manager

United Healthcare, San Antonio, TX

- *Conducts clinical, behavioral, socialenvironmental and financial assessments within designated timeframes on patients identified as having complex case management
- *Collaborates effectively with integrated care team (physicians, case managers, pharmacists, social workers, and educators) to establish an individualized plan of care for patients.
- *Self-driven and has the ability to work remote/virtual. Work independently/remote from home or call center without difficulty.
- *Posses organizational skills in the home environment with telecommuter position and has great time management, organizational, and prioritization skills with the ability to manage multiple tasks.
- *Follows through with discharge planning staff to facilitate all goals were met and develops interventions to assist patients in meeting short and long term goals.
- *Engages and educates patient, family, and caregivers to assure that a well coordinated treatment plan is established and on disease process or acute condition while also using outside referral sources.
- *Prioritizes care needs, sets goals and develops an initial plan of care that also addresses gaps and/or barriers to care and uses evidence-based practice as the foundation.
- *Coordinates and attends patient visits with PCP and specialists as needed in special circumstances.
- *Performs occasional home safety evaluations. Multitask patient calls, referrals, enrollments, home visits and PCC meetings with PCPs.

- *Experience with home-based care delivery programs.
- *Collaborates with Case Management, Disease Management and SCP/SNP programs to ensure seamless care for patients/clients.
- *Strong problem solving skills.
- *Proficient with Word, Excel, and SharePoint and PowerPoint.
- *Establish clear lines of communication with all leadership/business partners, and set appropriate expectations related to training
- *Participate in internal continuous improvement by monitoring internal reports, processes, and contribute ideas to influence innovative opportunities where gaps in process exist.
- *Design training materials as directed, conduct training of new employees as assigned, mentor/coach coworkers as needed and serve as subject matter expert when needed.

12/2019 - 09/2021 Registered Nurse (RN)

Nursefinders LLC, Arlington, TX

- *Floor Nurse for the following healthcare settings:
- *Med/Surg
- *LTAC
- *Rehab
- *Duties included: Assessments, vital signs, health care documentation, lab draws, start and dc IVs, blood infusions, wound care, patient education, foley catheters, admissions/discharges, monitor weights, drips, call MD with any patient changes in condition and post mortum care.

03/2017 - 10/2017 RN Case Manager-RN,OCM

The CSI Companies, San Antonio, TX

- *Conducted all necessary assessments within designated timeframes on patients identified as having complex case management needs (assessment areas include clinical, behavioral, social, environment and financial).
- *Enrolled high risk members in Disease Management programs.
- *Collaborated effectively with integrated care team (physicians, case managers, pharmacists, social workers, and educators) to establish an individualized plan of care for patients.
- *Self-driven and have the ability to work independently/remote or call center.
- *Developed interventions to assist the patients in meeting short/long term plan of care goals and follow through with discharge planning staff to facilitate all goals are met. *Engaged patient, family, and caregivers to assure that a well coordinated treatment
- plan is established.
 *Make outbound calls to assess patient's health status, identify gaps/barriers,
- prioritized care needs, set goals and develop an initial plan of care that also addresses gaps and/or barriers.
- *Make referrals to outside sources.
- *Educated patient's on disease process or acute condition.
- *Coordinated member visits with PCP and specialists as needed in special circumstances.

Education History

Nursing

Associate's Degree

National American University/Career Point College, San Antonio, TX

Occupational Licenses, Certificates and Training

09/2020 - 09/2022 BCLS

American Academy of CPR and First AID, Inc.

01/2017 - 03/2024 Registered Nurse

Texas Board Of Nursing