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Conscientious

TNCC--ACLS--PALS--BLS

PROFESSIONAL OBJECTIVE Providing the most optimum, efficient, patient-centered care is what I strive to deliver. Medicine is my passion; nursing is my vocation. I believe it is my duty to be the change I want to see in this world, leading by example.

CLINICAL EXPERIENCE

JUNE 2022-CURRENT

TEXAS CHILDREN'S HOSPITAL; PEDIATRIC ER; KATY, TX

ELECTRONIC MEDICAL CHARTING SYSTEM: EPIC

→TRAVELER: 4:1 patient to nurse ratio. Responsible for the care of pediatric patients ranging from respiratory issues and sickle cell crisis to traumas and moderate sedations. Responsible for the meticulous triage, assessment and re-assessment of all patients; working alongside the respiratory team when placing children on Bi-Paps and C-paps. When the floors are full, we usually hold our PICU babies until our beds are available. Fluent with ventilators and critical care vasoactive drugs. Maintaining effective communication with the parents and providing reassurance is always a must.

NUMBER OF BEDS IN ER: 24 + 2 TRAUMA ROOMS; TRAVEL: YES; FLOAT: NO

POINT OF CONTACT: LAUREN (NIGHT MANAGER): 832-264-9094

JANUARY 2022-MAY 2022

SOUTH TEXAS HEALTH SYSTEMS; MONTE CRISTO FREESTANDING ER; EDINBURG TX

ELECTRONIC MEDICAL CHARTING SYSTEM: CERNER

→ CONTRACT: Responsible for triaging all patients that came in to the ER. Did not have a respiratory department or a phlebotomy team which meant we were responsible for being respiratory such as placing patients on bipaps and c-paps and for initiating and maintaining mechanical ventilators. Responsible for the full documentation, assessments, reassessments of all patients. Being that this was a freestanding ER, if the patient required a full admission or a higher level of care, the transfer center was contacted and the transfer was completed. Freestanding ER is a full functioning ER meaning we see everything from traumas to codes to clinic visits.

NUMBER OF BEDS IN ER: 12 + FAST TRACK

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POINT OF CONTACT: OMAR (ER DIRECTOR)

SEPTEMBER 2021-DECEMBER 2021:

RIO GRANDE REGIONAL HOSPITAL; ER CHARGE RN; MCALLEN TX

ELECTRONIC MEDICAL SYSTEM: MEDITECH

→12 WEEK ED CONTRACT: Charge at Main Emergency Department. At the free standing, there is a 10 bed ER with no technician and no respiratory and no phlebotomy team most of the time. The staff consists of 2 RNs and one physician. Responsible for organizing the flow of the unit and for effective communication in critical situations. Able to stabilize and maintain critical care patients in ED due to ICU background. Fluent in critical care drips and with ventilators.

NUMBER OF BEDS IN ER: 21 TRAVEL: NO FLOATED: YES

POINT OF CONTACT: SANDRA MARTINEZ (ICU/ER DIRECTOR)

MAY 2021-AUGUST 2021:

CEDAR PARK REGIONAL MEDICAL CENTER; ICU TRAVEL RN; CEDAR PARK, TX

ELECTRONIC MEDICAL SYSTEM: MEDHOST

→12 Week Travel Contract: Mostly a CVICU unit. Responsible for initiating and maintaining critical care drips including vasopressors, inotropes etc. Maintaining and managing ventilators. Part of the Code Team. Responsible for paralyzing, proning covid patients; managed multiple chest tubes and fluent in trouble shooting tubes. Fluent with Central, Arterial lines.

NUMBER OF BEDS IN ICU: 28 TRAVEL: YES FLOATED: NO

POINT OF CONTACT: ALISSON (ICU DIRECTOR): (512)923-2327

NOVEMBER 2020-MAY 2021:

RIO GRANDE REGIONAL HOSPITAL; ICU RN; ER RN; MCALLEN TX

ELECTRONIC MEDICAL SYSTEM: MEDITECH

→ Working predominantly with Covid ICU patients. Part of the Rapid Response/Code Team. Fluent with ventilators, critical care drips including vasopressors, cardiac inotropes etc. Have been shared with the ER to help with short staffing. Worked in Main ER, and also been floated to San Juan Free Standing ER at Rio Grande Regional Hospital. At the free standing, there is a 10 bed ER with no technician and no respiratory and no phlebotomy team most of the time. The staff consists of 2 RNs and one physician.

NUMBER OF BEDS IN ICU: 32 TRAVEL: NO FLOATED: YES

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POINT OF CONTACT: SANDRA MARTINEZ (ICU DIRECTOR): (956)-648-2883; MEGHAN (ICU

MANAGER): (956) 263-7265

MARCH 2020-SEPTEMBER 2020

SAN ANTONIO METHODIST HOSPITAL; ICU/ER TRAVEL RN; SAN ANTONIO TX

ELECTRONIC MEDICAL SYSTEM: MEDITECH

→Initially hired as an ER Trauma Travel nurse in the adult ER at Methodist. Was termed after 6 shifts due to the decrease in patient census related to Covid. Was then offered a position in the ICU to work the Covid unit that was barely opening up. Became fluent with PPE, Covid treatments and routine procedures required for Covid. Once patient census began to pick up in ER, was asked to float to ER on days off from ICU to help with short staffing.

NUMBER OF BEDS IN ICU: 18 COVID ICU ROOMS TRAVLE: YES FLOATED: YES

POINT OF CONTACT: KELSEY HIGDON (386)916-9612

AUGUST 2019-JANUARY 2020:

WESLACO FREE STANDING ER; ER RN; SOUTH TEXAS HEALTH SYSTEMS; MCALLEN TX ELECTRONIC MEDICAL SYSTEM: CERNER

→ Responsible for triaging all patients that came in to the ER. Did not have a respiratory department or a phlebotomy team which meant we were responsible for being respiratory such as placing patients on bipaps and c-paps and for initiating and maintaining mechanical ventilators. Responsible for the full documentation, assessments, reassessments of all patients. Being that this was a freestanding ER, if the patient required a full admission or a higher level of care, the transfer center was contacted and the transfer was completed.

NUMBER OF BEDS: 16 TRAVEL: NO; FLOATED: NO

OCTOBER 2018-MAY 2019

DOCTORS HOSPITAL AT RENAISSANCE; WINTER SEASONAL STAFF; ER/TRAUMA/ICU RN

ELECTRONIC MEDICAL SYSTEM: CERNER

→ Responsible for the all nursing care of patients that came in through the ER. Worked closely with the ICU and also did ICU holding in the ER. Responsible for maintaining patients on vasopressors and vasoactive medications with the appropriate assessment and reassessments. Worked either in the ER, ICU, MICU, CCU, or Neuro-ICU depending on where the shortage was needed. Worked with fresh traumas as they came in through the ER and most of the time followed them to the intensive units for enhanced adequate care.

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NUMBER OF BEDS: 45 TRAVEL: NO; FLOATED: YES

POINT OF CONTACT: AIRAM JIMENEZ RN PHONE NUMBER: (956) 212-4825

APRIL 9, 2018 – SEPTEMBER 5, 2018

EMERGENCY ROOM TRAUMA TRAVEL NURSE, SUPPLEMENTAL HEALTHCARE NORWEGIAN AMERICAN HOSPITAL, CHICAGO IL ELECTRONIC

MEDICAL CHARTING SYSTEM: MEDITECH

→Responsible for performing time-critical assessments, including across the room assessments, recognizing the need for immediate action and intervention. Working alongside the Emergency Physician and other staff members, accurately recognizing a rapid change of condition, knowing what escalation needing to be done and executing the appropriate interventions. Once stabilizing critical/non-critical, reviewing labs, imaging, vital signs, and assisting with the disposition of patients. Resources given if not admitted; education about current visit and prevention of further visits given, with verification of understanding by either a verbal or return demonstration. If disposition is not discharge, all measures assessed and accurately documented; notifying receiving facility or floor of all concerns and plan.

→Trauma: For all trauma patients, depending on reason for visit, stabilization of injury (including A, B, Cs) is crucial. Upon entry, assessing trauma, assigning staff appropriate tasking needing to be done and following up to ensure tasks have been completed. With re-assessment being the key measure of all interventions, recognizing quickly the need for secondary measures, while maintaining exceptional and clear communication skills with all staff, patient's family, and patient (if alert and conscious).

NUMBER OF BEDS: 12 TRAVEL: FROM ROCKFORD IL TO CHICAGO IL; TRAVEL ASSIGNMENT FLOATED: NO IMMEDIATE SUPERVISOR: RHONNA CONTACT: 773-292-8200

FEBRUARY 20, 2017 - APRIL 06, 2018

EMERGENCY ROOM TRAUMA NURSE, SWEDISH AMERICAN HOSPITAL

ELECTRONIC MEDICAL CHARTING SYSTEM: MEDITECH; MEDHOST; EPIC

→ Responsible for performing time-critical assessments, including across the room assessments, recognizing the need for immediate action and intervention. Working alongside the Emergency Physician and other staff members, accurately recognizing a rapid change of condition, knowing what escalation needing to be done and executing the appropriate interventions. Once stabilizing critical/non-critical, reviewing labs, imaging, vital signs, and assisting with the

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NUMBER OF BEDS: 36 TRAVEL: NO FLOATED: NO

IMMEDIATE SUPERVISOR: AMBER COFFEE OR LORI CONTACT: 779-696-4400

NOVEMBER 2016 – JANURARY 2017

REGISTERED NURSE, FALFURRIAS NURSING HOME AND REHABILITATION

ELECTRONIC MEDICAL RECORD CHARTING: NONE-PAPER CHARTING

→ Responsible for the care and supervision of all residents and compliance off all staff. Overseeing LVNs, CNAs, CMAs; Communicated efficiently and professionally with physicians and other healthcare practitioners. Assessed residents, formulated patient centered care plans for all residents, ensured the implementation by the vocational nurses. Evaluated the effectiveness of the intervention and the need for continuing/discontinuing the nursing intervention, all while maintaining clear communication with the physician; modifying as needed. Also conducted missed in services for all nursing staff required by the state of Texas, for all nursing, dietary, maintenance, housekeeping staff for the year of 2016, bringing the facility to a compliance status of 100%. Worked alongside Administrator Janie Dunn and Raul Esquivel DON and assisted them both with personal administrator duties.

NUMBER OF BEDS: 50 TRAVEL: NO FLOATED: NO IMMEDIATE SUPERVISOR: MS JANIE DUN

CONTACT: 361-455-5433

EMPLOYMENT EXPERIENCE

AUGUST 2013 – OCTOBER 2015 TELEMETRY/MEDICAL SURGICAL FLOOR TECH, MCALLEN MEDICAL CENTER ELECTRONIC MEDICAL RECORD CHARTING: CERNER →FLOOR TECHNICIAN/FLOATER/CAN/UNIT CLERK

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-As a technician/Floater/CAN: responsible for obtaining and interpreting vital signs and POC blood glucose readings, reporting promptly to the primary, and if necessary the charge nurse and physician. Assisted with ADLs such as bathing, turning, transporting patients within and outside the department. Assured proper placement of telemetry pack; performed EKGs with accurate placement, scheduled or as needed; assisted with Codes as needed; maintaining patient safety first at all times.

→UNIT CLERK: -As a Unit Clerk: Responsible for receiving and entering orders in the Electronic Medical Record; maintaining a clean, organized area; alongside the house supervisor, worked efficiently and carefully to provide patient rooms and nursing assignments.

JANUARY 2009-OCTOBER 2010 & MAY 2011 – OCTOBER 2012 OBSTETRICIAN TECHNICIAN, WOMEN'S HOSPITAL AT RENAISSANCE →LABOR AND DELIVERY/ANTEPARTUM/OB-TRIAGE

-As an Ob-Tech: responsible for providing sterile vaginal delivery setup tables; assist3ed physicians first hand with vaginal deliveries, if needed, circulated to OR for a completion of the delivery; maintained sponge and instrument count throughout delivery, assisted with pushing mother-baby; ensuring all supplies necessary were available upon request. Prepared rooms with needed supplies for new and existing patients. In Ob Triage: responsible for preparing rooms and admitting patients into unit, placed patients on EFM (external fetal monitoring; collected urine and blood specimens, labeled and sent to lab.

→UNIT CLERK -As the Unit Clerk: responsible for receiving and entering orders in the Electronic Medical Record; maintaining a clean, organized area. Answered and made calls to physicians and other health care facilities, using proper phone etiquette and excellent customer service

EDUCATION:

BACHELOR OF SCIENCE IN NURSING, UNIVERSITY OF TEXAS RIO GRANDE VALLEY-MAY 2021

→RN-BSN program completed

ASSOCIATE DEGREE OF SCIENCE-NURSING, SOUTH TEXAS COLLEGE-OCTOBER 2016

→Second in class of graduating class. Read the nurses prayer at pinning ceremony. Tutored underclassmen for Nursing Theory I and Nursing Theory II, specializing in Pathophysiology.

ASSOCIATE DEGREE OF SCIENCE-BIOLOGY, SOUTH TEXAS COLLEGE-MAY 2009

→Transferred to the UNIVERSITY OF TEXAS PAN-AMERICAN for a degree in pre-med. Switched to nursing to facilitate a faster completion.

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SKILLS-STREGTHTS

• Assessment, Diagnosing, Planning, Implementation, Evaluation • Extrovert • Personable • Outgoing • Patient Advocate • Documentation