

Toby M. Speight
437 Quail Creek Dr. Murphy, TX 75094
469.323.0145 T-LSpeight@verizon.net

SUMMARY OF QUALIFICATIONS

Strong analytical and planning skills, complimented by the ability to coordinate the efforts of many to meet organizational goals. Productive and efficient work habits without supervision. Self-motivator with high energy.

EMPLOYMENT HISTORY

Adult-Gerontological Acute Care Nurse Practitioner-BC	2018-present	
<i>Medical City Dallas & Medical City Dallas Heart Hospital</i>	972.566.6308	Jordan Allred
<i>Advanced Heart Failure/MCS/Transplant Team</i>		

Adult-Gerontological Acute Care Nurse Practitioner-BC	2014-2018	
<i>Dallas Cardiovascular Specialists-Dallas</i>	972.566.8855	Tracy Shea
<ul style="list-style-type: none">-management of cardiac & vascular clients in hospital & office-management of clients with PPM, ICD, ILR, IABP, VAD-perform/assist in LHC, RHC, ILR Implant-Interrogate and Interpret PPM's/ICD's (MDT, St. Jude, Bos Sci)		

Registered Nurse Cardiothoracic Vascular Transplant ICU	2009-2014	
<i>Medical City Dallas Hospital</i>		Brian Locastro
<ul style="list-style-type: none">-direct care of clients from OR & cardiac cath lab after cardiac, pulmonary, vascular, and thoracic procedures-direct care of clients with various critical illnesses-Charge Nurse -Charge Nurse Preceptor -Clinical Preceptor		
Interview Committee / Peer Review Board / CV Council / ICU Council / Safety Officer / CPOE Super User		

Registered Nurse Cardiothoracic Vascular Transplant ICU- Day Supervisor/Unit Educator	2005-2009	
<i>Baylor University Medical Center</i>		Dena Allen
<ul style="list-style-type: none">-direct care of clients from OR & cardiac cath lab after cardiac, pulmonary, vascular, and thoracic procedures-direct care of clients with various critical illnesses-Charge Nurse -Charge Nurse Preceptor -Clinical Preceptor-Coordinate and Lead CVICU Preceptor & Mentor Program		
Interview Committee / CV Council / ICU Council / Best Care Committee / CHF-PAH-Thoracic Transplant Education Team Leader		

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EMPLOYMENT HISTORY cont'd

Organ Procurement Coordinator

2004-2005

Southwest Transplant Alliance

-ICU management, organ placement, physician and surgical coordination

-managed inventory of materials for nursing and surgical materials

Registered Nurse Cardiothoracic Vascular Transplant ICU

2001-2004

Baylor University Medical Center

Charlotte Farris

-direct care of clients from OR & cardiac cath lab after cardiac, pulmonary, vascular, and thoracic procedures

-direct care of clients with various critical illnesses

EDUCATION

MS, Nursing

2014

Texas Tech University Health Sciences Center, Lubbock, TX

BS, Nursing

2001

Midwestern State University, Wichita Falls, TX

BS, Biology

1997

Midwestern State University, Wichita Falls, TX

Accreditations

BLS / ACLS / Heartmate VAD / Impella / Heartware VAD / Tandem Heart / IABP

References upon request

PRECEPTOR AGREEMENT – GRADUATE NURSING PROGRAMS

***Students, please complete your name and ID on this form PRIOR to giving it to your preceptor for completion.**

MARK BRANSON ID# 1000715175
Printed Name of Student AND 10-digit UTA Student ID Number

To be completed by the preceptor (Initial each line to confirm):

JS The clinical facility is aware that I will have a student.

JS I will precept no more than two students in the clinical setting concurrently.

Medical City Dallas Medical City Dallas Heart Hospital
Name of clinical facility where this placement will occur

Physician Services Group
Employer of preceptor (if different from clinical facility)

I have reviewed this preceptor packet and I can provide the student with clinical experiences that meet the requirements as outlined in the material covered. I also agree to accept the responsibilities as outlined in the preceptor packet and understand that there will be no remuneration for this service.

I will review the student's learning activities and abilities and agree to submit the required electronic evaluation to UTA CONHI or the student's clinical faculty. I am licensed in the area of specialization, my license is current and unencumbered, and a copy of my license is available at the clinical facility.

I have at least one year of practice experience in the designated role. I agree to serve as a preceptor for this nurse practitioner student.

[Signature]
Preceptor Signature

9.21.20
Date

**THE UNIVERSITY OF TEXAS AT ARLINGTON
COLLEGE OF NURSING AND HEALTH INNOVATION
CRITERIA FOR GRADUATE PRECEPTOR**

Thank you for your willingness to precept one of our graduate nursing students. This packet provides an explanation of your responsibilities as a preceptor. We have also included the responsibilities of the student and the responsibilities of his/her faculty advisor.

After reviewing these responsibilities, if you agree to precept a student, please sign and date the Preceptor Agreement as a commitment to precept and fulfill these responsibilities for our graduate nursing student.

We ask that you return the completed Preceptor Agreement and your CV to the student who will submit this information to our clinical placement management system.

PLEASE NOTE: THE PRECEPTOR AGREEMENT MUST BE ON FILE AT UTA BEFORE THE STUDENT BEGINS THE CLINICAL EXPERIENCE.

We appreciate your willingness to share your expertise with our students.

Sincerely,
Graduate Clinical Coordination Team

All currently enrolled UTA graduate students are covered under the Medical Professions Liability Insurance. (A copy of this insurance is on file in the Graduate Nursing office at UTA and available on our website).