Registered Nurse

Clinical Competency Skills Checklist for Orientation

			ICU	and P	CU				
Name	:			[Date:				_
		eceptors:							_
Instru 1.	ctions for Completion: All nurses are required to complete orientation process. Please complet additional instruction or supervision	e the attac	ned Clinica	I Skills Chec	klist by indica	iting if you are	compete	nt or would re	
2.	Preceptors or designee will complete performance of the skill or use of equations of the skill of the skill or use of equations of equations of the skill of the skill of equations of equati		n entitled	"Demonstra	ted with Supe	ervision" after o	direct obs	ervation of co	mpetent
3.	Once the skill is competently perform	ned withou	t assistanc	e, the colum	nn "Demonstr	ated Independ	lently" is	completed.	
4.	Comment section is for additional no "policy and procedure reviewed" sho						during yo	ur clinical orie	ntation, ther
5.	Validators of any clinical or performa	ance skill m	ust comple	ete Signature	e box below.				
	Full Signature	Title	Initials		Full Sig	gnature		Title	Initials
									-
Supe	ervisor/Designee Signature	Da	te	Employee	Signature			Date	
	Registered Nurse	e		Self Assessment Competent	Demonstrate with	Demonstrate			
	Clinical Skill			to Perform Skill	Supervision Date/Init.	Independently Date/Init.		Comments Date/Init.	
	NT SAFETY t Identification								
	s hospital approved two identifiers								
■ Obs	ion Control – per policies erved using standard precautions when perved following hand hygiene policy erved following isolation precautions stand	_	ırsing care						
Abbrev Able the	viations: e to state unacceptable abbreviations and patient's medical record.		them in						
■ Den ■ Den ■ Com ■ Com	revention: nonstrates setting up bed alarm nonstrates setting up TABS for bed and ch npletes "Preventing Patient Falls" tutorial npletes accurate Morse Fall Risk assessme iew Policy PC 10 and 8620.232a								
■ Rev ■ Den ■ Folk	off communication: iews PC 25, Verbal and Telephone orders nonstrates compliance with process for PC ows process for Shift to shift report, include w of patient chart to include eMAR, SBAF	ling walking							

Use appropriate color coded arm bands and communicates.
 Completes ticket to ride/department to department

■ Completes transfer summary/unit to unit inpatient

Assessment Competent to Perform Skill Pain Assessment Complete accurate admission pain assessment Complete daily pain assessment Documents pain assessment prior to intervention Re-assess and documents per policy PC 28 LEGAL ASPECTS Reviews DNR policy and corresponding documentation forms.	
Competent to Perform Skill Demonstrate Independently Date/Init. Pain Assessment Complete accurate admission pain assessment Complete daily pain assessment Documents pain assessment prior to intervention Re-assess and documents per policy PC 28 LEGAL ASPECTS	
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LEGAL ASPECTS	
Reviews DNR policy and corresponding documentation forms.	
■ Completes appropriate documentation for inter-facility transfers.	
Reviews and witnesses consent forms	
Reviews policy AD 30 Communication- communicate health	
information to patients with barriers of communication related to foreign language, hearing impairment/deafness or any other	
communication disorder affecting comprehension or expression.	
MEDICATION ADMINISTRATION	
Policies:	
■ Pharmacy and Nursing Manual	
Review downtime charting procedure	
Administration:	
Observed following the 5 rights	
Observed following appropriate scanning and recording of medication administration	
Removes medication appropriately from pyxis	
Observed following appropriate process for wasting controlled	
substances	
Reschedules single dosages when necessary.Administers medications timely	
 Administers medications timely Verbalizes high risk medications process 	
■ Locates look-alike sound alike medication list	
■ Locates high risk medication list	
Maintains safe, secure medication cart	
 Maintains Patient on Anti-Coagulant Therapy Completes order sticker for heparin adjustments 	
Medication Reconciliation-	
■ Collects medication history at time of admission and communicates	
with discrepancies with provider	
■ Reviews medication orders at time of transfer and discharge and	
communicates with discrepancies with provider ■ Access medication history and reviews list when another staff	
member collects and enters information in EHR.	
IV THERAPY	
Blood	
■ Retrieves Blood products from lab	
■ Completes pre transfusion requirements	
■ Appropriate Order	
■ Consent confirmation■ Vital signs	
■ Requisition	
■ Administers Blood Products per policy	
Documents process in the EHR	
■ Sets up blood warmer ■ Reviews downtime procedure	
IV protocol	
Review IV protocol 8620.001b	
■ Documents assessment findings per protocol in the EHR	
■ Observed starting 3 IVs per policy	
Sets up IV pump with labels for medication and dosage.	
■ Labels IV bag and tubing with hospital approved stickers. ■ Clears pump at end of shift and records intake in EHR.	
■ Scans all IV products per medication administration policy.	
■ Attends IV course at HRMC:	
Central Line Care	
■ Verbalize central line insertion bundle	
Accesses and flushes central line following policy (TLC, PICC, Porta-cath)	
■ Document assessment findings in EHR	
■ Assesses and documents PICC line measurements daily in EHR	

SYSTEM ASSESSMENT			
Ongoing Assessment in EHR			
■ Completes general assessment in all categories			
■ Completes System review using "WDL"			
Completes System review detailed assessment			
 Identifies all "nesting" forms in ongoing assessment for each system. Understands/ utilizes 'no change' for reassessment 			
ADMISSION PROCESS			
■ Performs accurate admission assessment			
■ Documents in EHR adult admission assessment			
■ Documents in EHR adult admission history			
■ Documents allergies			
■ Documents allergies have been reviewed if entered by other staff			
■ Documents height and weight			
■ Initiates Plan of Care after admission process is completed			
■ Initiates referrals if indicated			
■ Process physician orders accurately			
■ Process PM conversation for infection control and consults accurately			
■ Educates patient/family on admission and documents required			
education in EHR.			
INPATIENT MANAGEMENT OF PATIENTS			
Review Policy for consents AD 36B			
Reviews protocol preparation of surgical patients 8620.217B			
■ Documents/reviews Pre-procedural checklist			
Reviews policy PC 24, Universal Protocol and when applicable implements.			
■ Maintains Intake and Output and accurately documents in EHR.			
Plans care for assigned group of patients			
Prioritizes patient needs			
 ■ Completes shift assignment safely and timely ■ Updates Interdisciplinary Plan of Care record each shift and signs off 			
goals when met.			
■ Plans & Reinforces education to patient/family			
■ Documents all teaching in EHR			
Patient Care rounds- Participates and provides team with accurate and pertinent information.			
■ Monitors result of patient's laboratory studies and notify physician of			
significant abnormalities.			
Communicates changes in patient condition to appropriate team members.			
■ Documents in Notification section of chart when provider is called, or			
significant patient event is communicated.			
Urinary Device Protocol- policy reviewed 8620.218b and implement standards. Document in EHR.			
■ Performs a Transfer Summary and verbal report when patient is			
moved unit to unit.			
Follow policy for organ donation and reporting deaths.			
Finds poison control number identifies situations requiring resource information on poison control			
DISCHARGE PROCESS			
Facilitates Discharge Process			
Completes nursing section of discharge instructions			
Reinforces and answers patient questions regarding discharge	1		
medications.			
■ Instructs patients on side effects of new meds			
■ Reconciles discrepancies with provider			
CORE MEASURES			
■ Follows recommendations for pneumonia			
■ Follows recommendations for SCIP			
■ Follows recommendations for MI			
■ Follows recommendations for Heart Failure			
DOWNTIME			
■ Reviews downtime procedure and forms.			
■ Use 24/7 viewing			

EQUIPMENT			
Code Cart			
Review Policy for cart inspection and exchange, PC 02			
Review daily testing of defibrillator unit			
Hypo/Hyperthermia Blankets			
Review use of hyperthermia blanket			
■ Review use of Bair hugger unit			
Antiembolism Precautions			
■ Review appropriate usage for SCD device and sizing of sleeves			
■ Review appropriate application and sizing of Antiembolism stockings ■ Documentation in EHR			
Specialty Beds			
■ Review ordering process (Purchase order) for bed.■ Review order care set and documentation in EHR			
Glucose Monitoring Devices			
Completes initial competency in Nursing orientation.			
 Demonstrates patient test and verbalizes hypoglycemic protocol 			
Documents results in EHR			
V.A.C. ATS Application			
Review policy 8620.203a			
Respiratory Equipment			
Independently sets up and monitors: ■ Nasal Cannula			
■ Non rebreathing mask			
Face/bag valve mask			
■ Incentive Spirometry			
■ Pulse oximetry, continuous and intermittent			
Defibrillators/ AED's			
Demonstrates use of hard pads			
 Demonstrates use of hands free quick combo pads Demonstrates converting Lifepac 20 AED to manual defibrillator. 			
External Pacemaker			
Sets up Lifepac 12			
Attaches leads and quick combo pads			
Sets rate and adjusts MA to obtain capture			
Central Monitoring System			
■ Completes tele room competency			
Set ups patient information into central station			
 Attaches patient to telemetry Print strips from central station 			
Records cardiac rhythm interpretation			
Transport monitors/ DASH			
Set up ICU transport monitor			
■ Sets up DASH 4000 or 3000 to monitor at the bedside or use for			
transportation.			
Safety			
Follows procedure for reporting faulty equipment			
Operates all equipment safely, ensures electrical safety.			
Specific CRITICAL CARE Population			
STROKE Completes detailed assessment for stroke nationts			
 ■ Completes detailed assessment for stroke patients ■ Set ups teleneurology service 			
■ Completes NIH stroke scale			
■ Reviews code grey packet			
DIALYSIS		 	
■ Arranges for hemodialysis services			
Reviews preprinted hemodialysis orders			
Communicates patient status with dialysis nurse			
Reviews policies 8620.212a and 212b	1		
IV MEDICATION – Designated as CC use only ■ Initiates and adjust IV medication drips per PN manual standards for			
each medication			
■ Monitors patient for side effects of IV medication			
■ Monitors parameters associated to Medication and outlined in PN			
manual for medication.			
EMERGENCY CODES			
Other codes			
Reviews and can verbalize actions (individual role and unit role) in			
response to the following:			
-Code Red - Code Blue - Code White -Code Pink - Code Amber - Code Yellow			
-Code Pilik - Code Affider - Code Yellow	L	l	

-Code Gray -Code Silver -Code Orange			
-Code Triage - Code Clear - Code Help			
-Rapid Response Team -OB Emergency			
-Active Shooter Announcement			
Code Blue			
Demonstrates how to call for Code Blue and responses			
Participates as critical care nurse responding after completion of ACLS	;		
■ Documents appropriately on Cardiac Arrest Flowsheet			
Uses notification form in EHR to state code was called			
Rapid Response Team			
Demonstrates how to call for RRT.			
 Verbalizes reasons, situation when to call 			
Appropriately responses to RRT			
 Participates as critical care nurse responding after completion of ACLS 	;		
and shadowing charge nurse in rapid responses.			
Documents appropriately on RRT record			
■ Uses notification form in EHR to state code was called			
ICU ONLY			
Temporary pacemaker			
Set up equipment for insertion			
Maintain generator settings]		
Recognized appropriate pacing, sensing and capturing.			
Reports abnormalities to provider			
PA catheter include Cardiac Output]		
■ Set up equipment for insertion			
■ Flush and calibrate system			
■ Set alarms			
Recognized appropriate waveforms			
■ Reports abnormalities to provider		 	
Arterial Line			
■ Set up equipment for insertion			
■ Flush and calibrate system			
■ Set alarms			
Recognized appropriate waveforms			
Reports abnormalities to provider			
■ Demonstrates obtaining blood specimen			
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