

NAME _____

BAKERSFIELD COLLEGE NURSING SKILLS CHECKLIST

The nursing skills checklist is an opportunity for you (the student) to showcase your accomplishments in the clinical lab setting. It documents your performance of various skills in the clinical setting. It also facilitates communication between nursing education and nursing service. If you apply for employment at a local hospital, you maybe asked to share you checklist.

INSTRUCTIONS:

1. Write your name on every page
2. Skills Lab Column: Once a topic has been practiced in the skills lab, place a check (✓) in this column.
3. Clinical Column: Once a skill has been observed by a faculty member in the various healthcare settings/agencies, place a check (✓) in the appropriate space. **Your faculty member will initial only in this column.**
4. Bring the checklist to the Clinical Laboratory Evaluation for faculty signatures. Keep the checklist in your portfolio.

| Faculty Initials | Faculty Name | Course | Semester/Yr. |
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| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|------------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Neurological | | | | | | | | |
| Neurological Check | | | | | | | | |
| Glasgow Coma Scale | | | | | | | | |
| Seizure Precautions | | | | | | | | |
| Mental Status Exam | | | | | | | | |
| Balance/coordination/grip strength | | | | | | | | |
| Measure head circumference | | | | | | | | |
| Assess fontanel | | | | | | | | |
| Assess DTR's/clonus | | | | | | | | |
| Cardiovascular | | | | | | | | |
| Blood Pressure | | | | | | | | |
| Auscultate | | | | | | | | |
| Palpate | | | | | | | | |
| Orthostatic | | | | | | | | |
| CVP | | | | | | | | |
| Automatic BP Device | | | | | | | | |
| Assessment of | | | | | | | | |
| PMI | | | | | | | | |
| S1, S2 | | | | | | | | |
| Abnormal heart sounds | | | | | | | | |
| Homan's sign | | | | | | | | |
| Observation of | | | | | | | | |
| Edema | | | | | | | | |
| Sacral | | | | | | | | |
| Peripheral | | | | | | | | |
| Neck vein distention | | | | | | | | |
| Cardiac monitoring | | | | | | | | |
| Electrode application | | | | | | | | |

| Lead placement | | | | | | | | | |
|--|--------------|----------|--------------|----------|--------------|----------|--------------|----------|--|
| NURSING SKILLS | 1ST SEMESTER | | 2ND SEMESTER | | 3RD SEMESTER | | 4TH SEMESTER | | |
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | |
| Lead II | | | | | | | | | |
| Lead III | | | | | | | | | |
| Lead MCL1 | | | | | | | | | |
| Recognition of life threatening dysrhythmias; cardiac asystole | | | | | | | | | |
| Ventral Fibrillation | | | | | | | | | |
| Ventral Tachycardia | | | | | | | | | |
| Basic CPR | | | | | | | | | |
| Respiratory | | | | | | | | | |
| Croupette/Ohio Care | | | | | | | | | |
| Oxygen/Administration | | | | | | | | | |
| Simple Face Mask | | | | | | | | | |
| Venturi mask | | | | | | | | | |
| Non Rebreather Mask | | | | | | | | | |
| Other (list) | | | | | | | | | |
| Nasal Prongs | | | | | | | | | |
| Portable | | | | | | | | | |
| Postural Drainage | | | | | | | | | |
| Chest Percussion | | | | | | | | | |
| Sputum Specimen | | | | | | | | | |
| Suctioning | | | | | | | | | |
| Oral | | | | | | | | | |
| Tracheal/Endotracheal | | | | | | | | | |
| Nasal | | | | | | | | | |
| Bulb syringe | | | | | | | | | |
| Tracheostomy Care | | | | | | | | | |
| TCDB | | | | | | | | | |
| Auscultate Breath Sounds | | | | | | | | | |

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|----------------------------|---------------------|-----------------|---------------------|-----------------|---------------------|-----------------|---------------------|-----------------|
| Palpate: Crepitus | | | | | | | | |
| NURSING SKILLS | 1ST SEMESTER | | 2ND SEMESTER | | 3RD SEMESTER | | 4TH SEMESTER | |
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Assessment | | | | | | | | |
| Set Up: | | | | | | | | |
| Water Seal | | | | | | | | |
| Pleurovac | | | | | | | | |
| Emerson Suction | | | | | | | | |
| Incentive Spirometer | | | | | | | | |
| Pulse Oximeter | | | | | | | | |
| Apnea Monitor | | | | | | | | |
| Mechanical Ventilation | | | | | | | | |
| Troubleshooting | | | | | | | | |
| Endocrine | | | | | | | | |
| Finger stick – blood sugar | | | | | | | | |
| Gastrointestinal | | | | | | | | |
| Auscultate bowel sounds | | | | | | | | |
| Management of Test Prep | | | | | | | | |
| Enemas | | | | | | | | |
| SS | | | | | | | | |
| H2O | | | | | | | | |
| Fleets | | | | | | | | |
| Retention | | | | | | | | |
| Harris Flush | | | | | | | | |
| Feedings | | | | | | | | |
| Bottle | | | | | | | | |
| Gastrostomy | | | | | | | | |
| Nasogastric tube | | | | | | | | |
| Gavage with/without pump | | | | | | | | |
| Hand | | | | | | | | |
| Force Fluids | | | | | | | | |

| Calorie Count | | | | | | | | |
|-----------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Nasogastric Tube or GI Tube | | | | | | | | |
| Insertion | | | | | | | | |
| Placement verification | | | | | | | | |
| Irrigation/Lavage | | | | | | | | |
| Salem Sump Care | | | | | | | | |
| Decompression | | | | | | | | |
| T-Tube Care | | | | | | | | |
| Specimen Collection | | | | | | | | |
| Stool | | | | | | | | |
| Occult Blood | | | | | | | | |
| Guaiac | | | | | | | | |
| Ostomies | | | | | | | | |
| Ostomy Care | | | | | | | | |
| Colostomy Irrigation | | | | | | | | |
| Fecal Disimpaction | | | | | | | | |
| Rectal Tube | | | | | | | | |
| Bowel Training | | | | | | | | |
| Measure Abdominal Girth | | | | | | | | |
| Palpate abdomen | | | | | | | | |
| Gynecological/Reproductive | | | | | | | | |
| Timing Contractions | | | | | | | | |
| Abdominal Prep | | | | | | | | |
| Postpartum Check | | | | | | | | |
| Fetal Heart Tones | | | | | | | | |
| Assist with Breast Feeding | | | | | | | | |
| Demonstrate self breast exam | | | | | | | | |
| Apply External FHT Monitor | | | | | | | | |
| Apply Contraction Monitor | | | | | | | | |

| Leopold's Maneuver | | | | | | | | | |
|------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--|
| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | | |
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | |
| Remove Cord Clamp | | | | | | | | | |
| Infant Footprints | | | | | | | | | |
| Integumentary | | | | | | | | | |
| Prevention/Decubitus | | | | | | | | | |
| Assessment/Care | | | | | | | | | |
| Drain Care | | | | | | | | | |
| Hemovac | | | | | | | | | |
| Jackson Pratt | | | | | | | | | |
| Penrose | | | | | | | | | |
| Wound Vac | | | | | | | | | |
| Sterile Dressing | | | | | | | | | |
| Wet | | | | | | | | | |
| Dry | | | | | | | | | |
| Clear | | | | | | | | | |
| Wound Packing | | | | | | | | | |
| Montgomery Straps | | | | | | | | | |
| Abdominal binder | | | | | | | | | |
| Removal of | | | | | | | | | |
| Sutures | | | | | | | | | |
| Staples | | | | | | | | | |
| Wound Care | | | | | | | | | |
| Wound Irrigation | | | | | | | | | |
| Musculoskeletal | | | | | | | | | |
| Cast Care | | | | | | | | | |
| Range of Motion | | | | | | | | | |
| Passive | | | | | | | | | |
| Active | | | | | | | | | |
| Assisted | | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| | Traction Care | | | | | | | |
| Other type of traction care: | | | | | | | | |
| Sling Application | | | | | | | | |
| Cervical Collar | | | | | | | | |
| Soft | | | | | | | | |
| Rigid | | | | | | | | |
| Stump Care | | | | | | | | |
| Neurovascular Check | | | | | | | | |
| ABD Pillow | | | | | | | | |
| Assists with Mobility | | | | | | | | |
| Ambulation | | | | | | | | |
| Cane | | | | | | | | |
| Crutches | | | | | | | | |
| Walker | | | | | | | | |
| Chair/WC | | | | | | | | |
| Renal | | | | | | | | |
| Bladder Palpation | | | | | | | | |
| Bladder Training | | | | | | | | |
| Catheter Care | | | | | | | | |
| Male | | | | | | | | |
| Female | | | | | | | | |
| Suprapubic | | | | | | | | |
| Catheterization | | | | | | | | |
| Indwelling | | | | | | | | |
| Straight | | | | | | | | |
| Male | | | | | | | | |
| Female | | | | | | | | |
| Fistula or Shunt Assessment | | | | | | | | |
| Intake & Output | | | | | | | | |

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| Weigh diapers | | | | | | | | |
| NURSING SKILLS | 1ST SEMESTER | | 2ND SEMESTER | | 3RD SEMESTER | | 4TH SEMESTER | |
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Urine Specimen Collection/Testing | | | | | | | | |
| C&S | | | | | | | | |
| Midstream | | | | | | | | |
| Pedi Bag | | | | | | | | |
| From Catheter/Sterile | | | | | | | | |
| Urometer | | | | | | | | |
| Urine PH | | | | | | | | |
| Urine ketones | | | | | | | | |
| Other (please specify) | | | | | | | | |
| Urostomy Care | | | | | | | | |
| Assist with | | | | | | | | |
| Bedpan | | | | | | | | |
| Urinal | | | | | | | | |
| Fracture Pan | | | | | | | | |
| Psychosocial | | | | | | | | |
| Spiritual Needs | | | | | | | | |
| Suicide Precautions | | | | | | | | |
| Therapeutic Communication | | | | | | | | |
| Death & Dying | | | | | | | | |
| Play Therapy | | | | | | | | |
| Labor Coaching | | | | | | | | |
| Comfort & Hygiene | | | | | | | | |
| Bed Making | | | | | | | | |
| Occupied | | | | | | | | |
| Unoccupied | | | | | | | | |
| | | | | | | | | |
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| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|------------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| | Baths | | | | | | | |
| Bed | | | | | | | | |
| Tub | | | | | | | | |
| Sitz | | | | | | | | |
| Shower | | | | | | | | |
| Infant's first bath | | | | | | | | |
| Back Massage | | | | | | | | |
| Hair Care | | | | | | | | |
| Shampoo | | | | | | | | |
| Shave | | | | | | | | |
| Brush/Comb | | | | | | | | |
| Oral Hygiene | | | | | | | | |
| Denture Care | | | | | | | | |
| Positioning | | | | | | | | |
| Lift | | | | | | | | |
| Turn | | | | | | | | |
| Support | | | | | | | | |
| Perineal Care | | | | | | | | |
| Male | | | | | | | | |
| Female | | | | | | | | |
| Postmortem Care | | | | | | | | |
| Physical Safety Measures | | | | | | | | |
| Restraints/Application and Care of | | | | | | | | |
| Body belt/net | | | | | | | | |
| Wrist | | | | | | | | |
| Leather | | | | | | | | |
| Elbow | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|---------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Hand mitts | | | | | | | | |
| Sterile Gloving | | | | | | | | |
| Sterile Field | | | | | | | | |
| Isolation | | | | | | | | |
| Standard precaution (Universal) | | | | | | | | |
| Airborne precautions | | | | | | | | |
| Droplet precautions | | | | | | | | |
| Contact precautions | | | | | | | | |
| Transferring to | | | | | | | | |
| Gurney | | | | | | | | |
| W/C | | | | | | | | |
| Transporting | | | | | | | | |
| Hand washing | | | | | | | | |
| Basic Skills | | | | | | | | |
| Temperature | | | | | | | | |
| Oral | | | | | | | | |
| Rectal | | | | | | | | |
| Axillary | | | | | | | | |
| Pulse | | | | | | | | |
| Carotid | | | | | | | | |
| Apical | | | | | | | | |
| Brachial | | | | | | | | |
| Radial | | | | | | | | |
| Femoral | | | | | | | | |
| Popliteal | | | | | | | | |
| Post Tibial | | | | | | | | |
| Dorsalis Pedis | | | | | | | | |
| Pulse Deficit | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|--------------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Respirations | | | | | | | | |
| Blood Pressure (see Cardiovascular) | | | | | | | | |
| Height | | | | | | | | |
| Weight | | | | | | | | |
| Standing | | | | | | | | |
| Bed Scales | | | | | | | | |
| Infant Scales | | | | | | | | |
| Application of | | | | | | | | |
| Cold | | | | | | | | |
| Moist Heat | | | | | | | | |
| Agua K | | | | | | | | |
| Ace Bandages | | | | | | | | |
| Anti-embolic Stockings | | | | | | | | |
| Use of Equipment | | | | | | | | |
| Sequential Compression Devices (SCD) | | | | | | | | |
| Electronic Vital Signs Machine | | | | | | | | |
| Foot pump | | | | | | | | |
| Heel Protectors | | | | | | | | |
| Egg Crate | | | | | | | | |
| Bed Cradle | | | | | | | | |
| Foot Cradle | | | | | | | | |
| Air mattress | | | | | | | | |
| Slide Board | | | | | | | | |
| Specialty Bed (specify) | | | | | | | | |
| Blood Glucose Machine | | | | | | | | |
| Bottle Change | | | | | | | | |
| Labeling | | | | | | | | |
| Tubing Change | | | | | | | | |
| Labeling | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|--|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Peripheral | | | | | | | | |
| Central | | | | | | | | |
| IV Site Care | | | | | | | | |
| Peripheral | | | | | | | | |
| Central | | | | | | | | |
| Labeling | | | | | | | | |
| Automatic Infusion Device | | | | | | | | |
| Regulation-primary | | | | | | | | |
| Regulation-secondary | | | | | | | | |
| Arterial puncture hold | | | | | | | | |
| Admin Blood Products | | | | | | | | |
| Administer Hyperalimentation | | | | | | | | |
| With Medications | | | | | | | | |
| Without Medications | | | | | | | | |
| Admin medications through a central line | | | | | | | | |
| Patient Controlled Analgesia | | | | | | | | |
| Primary Line | | | | | | | | |
| Loading Dose | | | | | | | | |
| Dose | | | | | | | | |
| Lock Out Interval | | | | | | | | |
| 4-hour Limit | | | | | | | | |
| Syringe Change | | | | | | | | |
| Clear Pump q4h | | | | | | | | |
| Documentation | | | | | | | | |
| Blood Draws | | | | | | | | |
| Butterfly | | | | | | | | |
| Vacuum Container | | | | | | | | |
| Syringe | | | | | | | | |
| Central Line | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|--------------------------------------|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Medications | | | | | | | | |
| Dosage Calculations | | | | | | | | |
| Adult | | | | | | | | |
| Child | | | | | | | | |
| Oral | | | | | | | | |
| Nasogastric tube or Gastrostomy Tube | | | | | | | | |
| Topical | | | | | | | | |
| Cream/Ointment | | | | | | | | |
| Spray | | | | | | | | |
| Suppositories | | | | | | | | |
| Rectal | | | | | | | | |
| Vaginal | | | | | | | | |
| Eye | | | | | | | | |
| Drops | | | | | | | | |
| Ointment | | | | | | | | |
| Ear Drops | | | | | | | | |
| Injections | | | | | | | | |
| IM | | | | | | | | |
| SQ | | | | | | | | |
| ID | | | | | | | | |
| Z-track | | | | | | | | |
| Narcotic Control | | | | | | | | |
| Administer to a group of clients | | | | | | | | |
| IV Push | | | | | | | | |
| IVPB | | | | | | | | |
| Buritrol | | | | | | | | |
| IV Drips | | | | | | | | |
| Insulin | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|--|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Aminophylline | | | | | | | | |
| Morphine | | | | | | | | |
| IV | | | | | | | | |
| Basic procedure for insertion | | | | | | | | |
| Cath over Needle | | | | | | | | |
| Heparin Lock/Saline Lock | | | | | | | | |
| Butterfly | | | | | | | | |
| Regulate | | | | | | | | |
| Calculate | | | | | | | | |
| Flush | | | | | | | | |
| Saline Lock | | | | | | | | |
| Heparin Lock | | | | | | | | |
| Professional Responsibilities | | | | | | | | |
| Receive Essential Components of change of shift report | | | | | | | | |
| Communicate Essential Components of change of shift report | | | | | | | | |
| Communicate Essential Components of Clarification Report | | | | | | | | |
| Communicate Essential Components of Client's Health Status to Physician | | | | | | | | |
| Communicate Essential Components of events to appropriate Managerial Personnel | | | | | | | | |
| Receive Verbal/Phone Orders from Physician | | | | | | | | |
| Transcribe Physician Orders | | | | | | | | |
| Implement Physician Orders | | | | | | | | |
| Assess Client Health Status | | | | | | | | |
| Review Reports from Ancillary Departments | | | | | | | | |
| Laboratory Reports | | | | | | | | |

| NURSING SKILLS | 1 ST SEMESTER | | 2 ND SEMESTER | | 3 RD SEMESTER | | 4 TH SEMESTER | |
|---|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|----------|
| | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical | Skills Lab | Clinical |
| Initiate Client Care Plan | | | | | | | | |
| Implement Client Care Plan | | | | | | | | |
| Revise Client Care Plan | | | | | | | | |
| Makes Client Care Assignments According to Acuity | | | | | | | | |
| Integrate the Nursing Process in Nursing Rounds | | | | | | | | |
| Actively Participates in Physician Rounds | | | | | | | | |
| Participates in multidisciplinary rounds | | | | | | | | |
| Follows Hospital Policies and Procedures and Standardized Protocols | | | | | | | | |
| Documentation in the Medical Record to Meet Professional and Legal Standards in regard to: | | | | | | | | |
| Assessment of Client Physical Development | | | | | | | | |
| Plotting growth chart | | | | | | | | |
| Response to medical plan of treatment | | | | | | | | |
| Response to Nursing Plan of treatment | | | | | | | | |
| Vital signs graphic sheet | | | | | | | | |
| Medication Administration Record | | | | | | | | |
| IV Start | | | | | | | | |
| IV Fluid Balance | | | | | | | | |
| Computerized documentation | | | | | | | | |
| Participates in Client Education | | | | | | | | |
| Initiates Discharge Planning | | | | | | | | |
| Conduct Nursing Team Conference | | | | | | | | |
| Delegate Responsibility | | | | | | | | |
| Completes Admission Routine | | | | | | | | |
| Completes Discharge Routine | | | | | | | | |
| Demonstrates Client Advocacy | | | | | | | | |
| Participates in Community Service | | | | | | | | |

