

UPSTATE

UNIVERSITY HEALTH SYSTEM
AFFILIATING SCHOOL/COLLEGE OF NURSING
ROLE TRANSITION SKILLS CHECKLIST

Student Name _____ Instructor Name _____

School/College _____

Semester/Year _____

STUDENT: Please place a checkmark (✓) in the appropriate box based on your self-assessment of your own level of competency. You must review this checklist with a current/recent clinical instructor to assure that it is an accurate representation of your abilities as a nursing student. Be sure to read the **Role Transition** section of the **Clinical Experience Manual – Student** to ensure that you understand your expectations during this role transition experience. Also view the Role Transition Exclusion List which details skills that nursing students are not permitted to do. Please be sure to sign the last page of this form.

INSTRUCTOR: Also review with the student the Role Transition Exclusion List which details skills that nursing students are not permitted to do. Please be sure to sign the last page of this form.

A. ASSESSMENT			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Temperature taking (Axillary, oral, rectal, and tympanic)			
2) Pulse taking and assessment			
3) Respirations			
4) Blood pressure			
5) Neurological checks			
6) Charts nursing care and observations			
7) Reflects nursing care plan into record by proper charting			
8) Communicates pertinent nursing observations to appropriate members of the health care team			
B. EVALUATION			

Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Participates in evaluation of nursing care given			
2) Participates in planning of future care based on results of evaluation			
3) Seeks and assists in evaluating feedback regarding nursing care to determine necessary changes in the care plan and in own performance			

C. ADMISSIONS, TRANSFERS, & DISCHARGES

Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Admission Procedure			
2) Transfer Procedure			
3) Discharge Procedure			
4) Post Mortem Care			

D. APPLIES BANDAGES AND DRESSINGS

Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Ace bandage			
2) Binders			
3) Support hose			
4) Sterile dressings			
5) IV site dressings			
6) Central line dressings			
7) Suture removal			
8) Staple removal			

E. PROVIDES ENTERAL & PARENTERAL FEEDING

Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Inserts nasogastric tube			
2) Inserts orogastric tube			
3) NG/OG tube feeding			
4) Peg tube feeding			
5) Gastric tube feeding			

F. PATIENT ELIMINATION			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Bowel training program			
2) Bladder training program			
3) Adult catheterization (indwelling)			
4) Adult catheterization (intermittent)			
5) Pediatric catheterization (indwelling)			
6) Pediatric catheterization (intermittent)			
7) External catheter			
8) Enemas			
9) Ostomies			
G. PROVIDES EMERGENCY MEASURES			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Basic CPR and Heimlich Maneuver			
H. HYGEINE			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Provides bed bath			
2) Provides sitz bath			
3) Provides tub bath			
4) Provides therapeutic bath			
5) Assists with showering			
6) Occupied bed making			
7) Unoccupied bed making			
8) Surgical bed making			
9) Routine oral hygiene (conscious patient)			
10) Routine oral hygiene (unconscious patient)			
11) Provides peri-care			
12) Prevention of decubitus ulcers			
13) Decubitus ulcer care			
I. INFECTION CONTROL			
Skill	No to low competence	Low to moderate competence	Moderate to high competence

1) Universal precautions			
2) Special isolation precautions/procedures			
J. INTRAVENOUS THERAPY			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Initiate venipuncture			
2) Hang continuous IV fluids			
3) Hang basic and balanced electrolyte solutions			
4) Hang primary solution with approved medications (labeled by RN or Pharmacist)			
5) Hang IV piggyback medications			
6) Monitor IV rate			
7) Record IV intake			
8) Discontinue peripheral IV			
K. IRRIGATIONS			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Bladder			
2) Colon (non-medicated)			
3) Nasogastric			

L. MEDICATION ADMINISTRATION			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Oral			
2) Subcutaneous			
3) Intramuscular			
4) Intravenous			
5) Sublingual			
6) Buccal			
7) Inhaled			
8) Vaginal			
9) Rectal			
10) Dermal			
11) Transdermal			

12) Ophthalmic			
13) Otic			
M. MOBILITY AND IMMOBILITY CARE			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Ambulation			
2) Ambulation with assistive devices			
3) Bed cradle			
4) Footboard			
5) Bed scale			
6) Upright scale			
7) Wheelchair scale			
8) Special beds/mattresses			
9) Active range of motion			
10) Passive range of motion			
11) Hoyer lift			
12) Positioning and repositioning			
13) Prosthetic devices			
14) Restraints			
15) Side rails			
16) Stretcher			
17) Wheelchair			
N. RESPIRATORY CARE			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Humidifiers			
2) O2 via nasal cannula			
3) O2 via mask			
4) Tracheal suctioning			
5) Tracheostomy care			
O. SPECIMEN COLLECTION			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Bedside glucose			
2) Blood via venipuncture			
3) Wound culture			
4) Sputum			

5) Stool			
6) Urine (routine voided)			
7) Urine (24-hour)			
8) Urine (clean catch)			
9) Urine (culture & sensitivity)			
P. SUCTION			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Gastric			
2) Compressed wound (i.e. Jackson Pratt)			
3) Chest tube maintenance			
Q. OTHER			
Skill	No to low competence	Low to moderate competence	Moderate to high competence
1) Patient and family teaching			
2) Pre-operative care			
3) Post-operative care			

STUDENT NURSE PRECEPTORSHIP SKILLS CHECKLIST

INSTRUCTOR

I, _____, verify that the above checklist was completed accurately by the student based on my assessment of the student's capabilities and competencies, and I am qualified to make that assessment.

Clinical Instructor Signature

Date

STUDENT

I, _____, acknowledge having read the approved list of nursing activities and procedures on this skills checklist, and I agree to perform only approved skills in my role as a Student Nurse, under appropriate supervision of my RN preceptor. I also agree to complete the Student Nurse Role Transition Evaluation at the end of this experience.

Student Nurse Signature

Date