

## SKILLS PERFORMANCE RECORD

STUDENT'S NAME \_\_\_\_\_

FACILITY'S NAME \_\_\_\_\_

SKILL	Date of Demonstration	Date of Practice in Lab	Date of Performance in Clinical	Evaluation of Performance Satisfactory/Unsatisfactory	Date Approved	Instructor's Initial
Perform hand washing						
Don & remove isolation gown & gloves						
Applying & removing face mask						
Remove items from isolation room						
Handle clean linen						
Handle dirty linen						
Make occupied bed						
Make unoccupied bed						
Measure hgt. with tape measure in bed						
Measure abdominal girth						
Measure hgt. & wgt. on standing balance scale						
Measure wgt. with mechanical lift						
Measure oral temperature						
Measure axillary temperature						
Measure tympanic temperature						
Measure radial pulse						
Measure apical pulse						
Measure respiration						
Measure blood pressure						
Give complete bed bath						
Cleanse an incontinent resident						

\*Unless contraindicated

Date approved is for performance without supervision.

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Print RN Instructor's Name

\_\_\_\_\_  
RN Instructor's Signature

\_\_\_\_\_  
RN Instructor's Initials

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Give a partial bath						
Give back rub						
Perform perineal care						
Perform catheter care						
Give tub bath						
Give shower						
Perform ROM						
Shave resident with safety razor						
Shave resident with electric razor						
Clean dentures						
Administer oral hygiene						
Give mouth care to unconscious resident						
Eye care for unconscious resident						
Clean/ cut toenails/footcare * unless contraindicated						
Clean/ cut File fingernails * unless contraindicated						
Shampoo hair						
Comb resident's hair						
Care of eye glasses						
Dress & undress dependent resident						
Put on knee high elastic stocking						
Move resident with lift sheet (two co-workers)						

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Move resident to head of bed						
SKILL	Date of Demonstration	Date of Practice in Lab	Date of Performance in Clinical	Evaluation of Performance Satisfactory/ Unsatisfactory	Date Approved	Instructor's Initial
Turn resident toward you						
Turn resident away from you						
Sit on edge of bed (dangling)						
Move resident to side of bed						
Pivot transfer of hemiplegic resident						
Transfer resident from bed to chair						
Transfer resident from bed to wheelchair						
Transfer using mechanical lift						
Assist resident from Low Boy bed						
Pull resident up in wheelchair						
Transport resident w/ wheelchair						
Position resident in body alignment in bed						
Demonstrate proper use of gait belt						
Assist to ambulate using gait belt						
Assist resident to ambulate						
Ambulation with a walker						
Ambulation with a cane						
Sitting in chair using a cane						
Supine position						
Fowler's position						
Lateral position						
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				Unsatisfactory		
Measure & record I & O						
Empty urinary drainage bag						
Change adult brief						
Apply heel & elbow protectors						
Assist to use a urinal						
Assist resident to use a bedpan/fracture pan						
Assist to bathroom						
Bedside commode						
Collect a stool specimen						
Change an ostomy bag						
Perform Heimlich maneuver						
Feed helpless resident						
Record/report care given						
Application of restraints						
Apply restraint free alarm bed/wheelchair						
Apply Lap Buddy restraint						
Clean hearing aide						
Check hearing aide battery						
Care of artificial eye						
Stump prosthesis care & application						
Care of the residual limb						
Demonstrate body mechanics						
Clean G-tube insertion site						

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