

Directions

Please circle a value for each question to provide us and the interested facilities with an assessment of your clinical experience. These values confirm your strengths within your specialty and assist the facility in the selection process of the healthcare professional.

Frequency		Experience	
1 Observed Only or Never Done		1 No Experience	
2 Rarely Done (<6 times/year)		2 Some Experience (Requires Assistance)	
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Print Name

SS#

Date

General Skills	Frequency				Experience			
Advanced directives	1	2	3	4	1	2	3	4
Patient / family teaching	1	2	3	4	1	2	3	4
Lift / transfer devices	1	2	3	4	1	2	3	4
Specialty beds	1	2	3	4	1	2	3	4
Restrictive devices (restraints)	1	2	3	4	1	2	3	4
End of life care / palliative care	1	2	3	4	1	2	3	4
Skin / wound assessment & care	1	2	3	4	1	2	3	4
Diabetic care & education	1	2	3	4	1	2	3	4
Blood Glucose Monitoring (BGM)	1	2	3	4	1	2	3	4
General nursing assessment	1	2	3	4	1	2	3	4
Recognizing failure to thrive across the lifespan	1	2	3	4	1	2	3	4
Monitoring of vital signs	1	2	3	4	1	2	3	4
Monitoring of intake / output	1	2	3	4	1	2	3	4
Monitoring of weight	1	2	3	4	1	2	3	4
Cardiac / respiratory arrest / CPR adult	1	2	3	4	1	2	3	4
Cardiac / respiratory arrest / CPR pediatric or infant	1	2	3	4	1	2	3	4
Documentation of skilled care (written)	1	2	3	4	1	2	3	4
Electronic documentation	1	2	3	4	1	2	3	4
Medicare 485/486 forms	1	2	3	4	1	2	3	4
Oasis charting	1	2	3	4	1	2	3	4
National Patient Safety Goals								
Accurate patient identification	1	2	3	4	1	2	3	4
Effective communication	1	2	3	4	1	2	3	4
Interpretation & communication of lab values	1	2	3	4	1	2	3	4
Medication administration	1	2	3	4	1	2	3	4
Medication reconciliation	1	2	3	4	1	2	3	4
Anticoagulation therapy	1	2	3	4	1	2	3	4
Pain assessment & management	1	2	3	4	1	2	3	4
Infection control (nosocomial / community-acquired)	1	2	3	4	1	2	3	4
Anti-infective therapy (Antibiotics, Antivirals, Antifungals)	1	2	3	4	1	2	3	4
Universal precautions	1	2	3	4	1	2	3	4

Initials _____

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General Skills - cont.	Frequency				Experience			
Isolation	1	2	3	4	1	2	3	4
Minimize risk falls	1	2	3	4	1	2	3	4
Prevention of pressure ulcers	1	2	3	4	1	2	3	4

IV Therapy	Frequency				Experience			
Starting & maintaining peripheral IVs	1	2	3	4	1	2	3	4
Blood draw: venous	1	2	3	4	1	2	3	4
Central line care (includes PICC / Groshong / Hickman)	1	2	3	4	1	2	3	4
Blood draw: central line	1	2	3	4	1	2	3	4
Care & management of ports	1	2	3	4	1	2	3	4
Care & management of nonvascular devices (epidural, intrathecal)	1	2	3	4	1	2	3	4
TRN & Lipids	1	2	3	4	1	2	3	4
Administration of blood and blood products	1	2	3	4	1	2	3	4
Administration of chemotherapy	1	2	3	4	1	2	3	4
Monitoring of chemotherapy (does not initiate)	1	2	3	4	1	2	3	4
Infusion pumps	1	2	3	4	1	2	3	4

Cardiac	Frequency				Experience			
Cardio-vascular assessment	1	2	3	4	1	2	3	4
Clinical identification of dysrhythmias (AP check for rate & rhythm)	1	2	3	4	1	2	3	4
Care of Patient with:								
Hypertension	1	2	3	4	1	2	3	4
Coronary Artery Disease (CAD)	1	2	3	4	1	2	3	4
Acute MI	1	2	3	4	1	2	3	4
Post Coronary Artery Bypass Graft (CABG) / valve	1	2	3	4	1	2	3	4
CHF	1	2	3	4	1	2	3	4
Aneurysm (thoracic or abdominal)	1	2	3	4	1	2	3	4
Pre-post surgery	1	2	3	4	1	2	3	4
Medication Administration / Patient Teaching								
Antidysrhythmics (ie betablockers, calcium channel blockers & cardiac glycosides)	1	2	3	4	1	2	3	4
Antihypertensives	1	2	3	4	1	2	3	4
Vasoactive drugs (NTG)	1	2	3	4	1	2	3	4
Diuretics (ie Lasix, Dyazide)	1	2	3	4	1	2	3	4

Respiratory	Frequency				Experience			
Assessment/Auscultation of Lung Sounds	1	2	3	4	1	2	3	4
Incentive spirometry	1	2	3	4	1	2	3	4
Principles of chest percussion	1	2	3	4	1	2	3	4
Establishing an airway	1	2	3	4	1	2	3	4

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Respiratory - cont.	Frequency				Experience			
Care of Patient with:								
Asthma	1	2	3	4	1	2	3	4
COPD	1	2	3	4	1	2	3	4
Pulmonary hypertension	1	2	3	4	1	2	3	4
Tracheostomy	1	2	3	4	1	2	3	4
Lung cancer	1	2	3	4	1	2	3	4
Pulmonary Emboli	1	2	3	4	1	2	3	4
Medication Administration / Patient Teaching								
Aminophylline	1	2	3	4	1	2	3	4
Bronchodilators (Bronkosol / Brethine)	1	2	3	4	1	2	3	4
Expectorants	1	2	3	4	1	2	3	4
Inhaled medications (proventil / anticholinergics / steroids / mucolytics)	1	2	3	4	1	2	3	4

Neurology	Frequency				Experience			
Assessment of neuro signs	1	2	3	4	1	2	3	4
Seizure precautions	1	2	3	4	1	2	3	4
Halo traction	1	2	3	4	1	2	3	4
Care of Patient with:								
Coma	1	2	3	4	1	2	3	4
Cerebral tumors	1	2	3	4	1	2	3	4
Seizure activity	1	2	3	4	1	2	3	4
Spinal cord injury / paralysis (para / quad)	1	2	3	4	1	2	3	4
TBI (Traumatic Brain Injury)	1	2	3	4	1	2	3	4
TIA's	1	2	3	4	1	2	3	4
Stroke (CVA) hemiparesis	1	2	3	4	1	2	3	4
Alzheimer's Disease	1	2	3	4	1	2	3	4
Meningitis	1	2	3	4	1	2	3	4
Multiple Sclerosis	1	2	3	4	1	2	3	4
Parkinson's Disease	1	2	3	4	1	2	3	4
ALS (Amyotrophic Lateral Sclerosis)	1	2	3	4	1	2	3	4
Medication Administration / Patient Teaching								
Corticosteroids	1	2	3	4	1	2	3	4
Anticonvulsant	1	2	3	4	1	2	3	4
MAOIs	1	2	3	4	1	2	3	4

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Neurology - cont.	Frequency				Experience			
Antidyskinetics	1	2	3	4	1	2	3	4
Skeletal muscle relaxants	1	2	3	4	1	2	3	4
Dopamine (blockers & stimulants)	1	2	3	4	1	2	3	4

GI / GU	Frequency				Experience			
NG tube	1	2	3	4	1	2	3	4
Long term feeding tube (Keofeed, Dobhoff)	1	2	3	4	1	2	3	4
PEG / gastrostomy tube	1	2	3	4	1	2	3	4
Tube feeding	1	2	3	4	1	2	3	4
Drainage tubes (surgical & non-surgical)	1	2	3	4	1	2	3	4
G.I. bleed	1	2	3	4	1	2	3	4
Colostomy / Ileostomy care	1	2	3	4	1	2	3	4
Ileal conduit	1	2	3	4	1	2	3	4
G.U. irrigations	1	2	3	4	1	2	3	4
Suprapubic catheter	1	2	3	4	1	2	3	4
Care of Patient with:								
Shunts & fistulas	1	2	3	4	1	2	3	4
Straight catheterization	1	2	3	4	1	2	3	4
Self catheterization	1	2	3	4	1	2	3	4
Incontinence	1	2	3	4	1	2	3	4
Peritoneal dialysis	1	2	3	4	1	2	3	4
Hemodialysis	1	2	3	4	1	2	3	4

Gynecology	Frequency				Experience			
Endometriosis	1	2	3	4	1	2	3	4
Self breast exam	1	2	3	4	1	2	3	4
Mastectomy	1	2	3	4	1	2	3	4
Hysterectomy	1	2	3	4	1	2	3	4

Orthopedic	Frequency				Experience			
Total joint replacements (knee / hip / shoulder)	1	2	3	4	1	2	3	4
Crutch walking	1	2	3	4	1	2	3	4
Assistive devices	1	2	3	4	1	2	3	4
Arthroscopy / arthrotomy	1	2	3	4	1	2	3	4
TENS unit	1	2	3	4	1	2	3	4

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Orthopedic - cont.	Frequency				Experience			
Care of Patient with:								
Arthritis	1	2	3	4	1	2	3	4
Amputation	1	2	3	4	1	2	3	4
Casts	1	2	3	4	1	2	3	4
Fractures	1	2	3	4	1	2	3	4

Maternal - Child Care	Frequency				Experience			
Assessment & care of complicated pregnancy	1	2	3	4	1	2	3	4
Breast feeding	1	2	3	4	1	2	3	4
Homecare of postpartum mother	1	2	3	4	1	2	3	4
Healthy baby	1	2	3	4	1	2	3	4
Newborn Care								
Bulb suctioning	1	2	3	4	1	2	3	4
Cord & circumcision care	1	2	3	4	1	2	3	4
Phototherapy	1	2	3	4	1	2	3	4
NG feedings	1	2	3	4	1	2	3	4
Pediatrics								
Medication calculation for pedi dosing	1	2	3	4	1	2	3	4
Use of croup tent	1	2	3	4	1	2	3	4
Oxyhood	1	2	3	4	1	2	3	4
Care of the Pediatric Patient with:								
Asthma	1	2	3	4	1	2	3	4
Bone marrow transplant	1	2	3	4	1	2	3	4
Bronco-pulmonary dysplasia	1	2	3	4	1	2	3	4
Cardiac surgery	1	2	3	4	1	2	3	4
Cystic fibrosis	1	2	3	4	1	2	3	4
Epiglottiditis	1	2	3	4	1	2	3	4
Near drowning	1	2	3	4	1	2	3	4
Overdose / poison ingestion	1	2	3	4	1	2	3	4
Post Harrington Rod Insertion	1	2	3	4	1	2	3	4
Respiratory Distress Syndrome (RDS)	1	2	3	4	1	2	3	4
Reye's Syndrome	1	2	3	4	1	2	3	4
Sickle Cell Disease	1	2	3	4	1	2	3	4
Spina Bifida	1	2	3	4	1	2	3	4

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Use of Equipment for All Age Groups	Frequency				Experience			
Cardiac monitors	1	2	3	4	1	2	3	4
Wound VAC	1	2	3	4	1	2	3	4
Apnea monitors	1	2	3	4	1	2	3	4
O2 administration (NC / mask)	1	2	3	4	1	2	3	4
Ultrasonic nebulizer	1	2	3	4	1	2	3	4
Ventilators	1	2	3	4	1	2	3	4

Age Specific Competencies	Frequency				Experience			
Newborn / neonate (Birth-30 days)	1	2	3	4	1	2	3	4
Infant (31 days-1 years)	1	2	3	4	1	2	3	4
Toddler (2-3 years)	1	2	3	4	1	2	3	4
Preschool (ages 4-5 years)	1	2	3	4	1	2	3	4
School Age (ages 6-12 years)	1	2	3	4	1	2	3	4
Adolescents (ages 13-21 years)	1	2	3	4	1	2	3	4
Young Adult (ages 22-39 years)	1	2	3	4	1	2	3	4
Adults (ages 40-64 years)	1	2	3	4	1	2	3	4
Older Adult (ages 65-79 years)	1	2	3	4	1	2	3	4
Elderly (80+ years)	1	2	3	4	1	2	3	4

Please list any Additional Skills:	
1.	2.
3.	4.
Additional training:	
1.	2.
3.	4.
Additional equipment:	
1.	2.
3.	4.

Fax to: 1-888-298-3146

The information on this and all preceding pages is true and correct.

Signature

Date