

**2012 SUMMER STUDENT NURSE EXTERNSHIP PROGRAM  
SKILLS CHECK LIST**

STUDENT NAME \_\_\_\_\_

SCHOOL OF NURSING \_\_\_\_\_

**STUDENT AGREEMENT:**

I request the Clinical Skills Check list be released to \_\_\_\_\_  
(hospital/agency).

I have read the approved list of nursing activities and procedures on this skills check list, and I agree to perform only approved skills in my role as a summer student nurse extern. I also agree to complete the extern evaluation form at the end of the externship.

\_\_\_\_\_  
**STUDENT NURSE EXTERN SIGNATURE**

\_\_\_\_\_  
**DATE**

**INSTRUCTIONS TO THE SCHOOL OF NURSING:**

Place a check in the appropriate column below to indicate if content has been covered in theory. On the attached skills check list indicate: 1) that content has been covered in theory, and 2) the student has had clinical experience in performing the skill. Comment as appropriate. Sign and date below.

Content Relevant To:	Theory
Obstetrical Nursing	
Pediatric Nursing	
Medical Nursing	
Surgical Nursing	
Mental Health/Psychiatric Nursing	
Other	

\_\_\_\_\_  
**FACULTY SIGNATURE**

\_\_\_\_\_  
**DATE**

**INSTRUCTIONS TO THE PRECEPTOR:**

Date and sign form validating that the Extern's performance on skills and that the Extern has covered theory and/or clinical experience. Indicate the method of validation used by the preceptor using the key provided on the form at the bottom of each page and initial each entry. All procedures are to be performed in the presence of the preceptor until the preceptor validates safe performance of the skill.

## 2012 SUMMER STUDENT NURSE EXTERNSHIP PROGRAM

### Skills Check List

Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
<b>I. NURSING PROCESS</b>					
<b>A. ASSESSMENT</b>					
1. Participates in data collection of nursing history					
2. Participates in therapeutic communication					
3. Performs physical assessment					
4. Provides information needed to RN for discharge planning					
<b>B. ANALYSIS</b> Formulates nursing diagnosis based on assessment data					
<b>C. PLANNING</b> Contributes to nursing plan of care					
<b>INTERVENTION</b>					
1. Observes and participates in assessment of behavior/health state and responses to therapy					
a. Temperature					
1. Oral					
2. Axillary					
3. Rectal					
4. Tympanic					
b. Pulse					
1. Apical					
2. Peripheral					
c. Respirations					
d. Blood Pressure					
e. Neurological Checks					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
2. Provides proficient nursing care based on validation of skills					
3. Charts nursing care and observations					
4. Reflects nursing care plan into record by proper charting					
5. Communicates pertinent nursing observations to appropriate members of the health care team					
<b>E. EVALUATION</b>					
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					
<b>II. PROCESSES</b>					
<b>A. PARTICIPATES IN ADMISSION/DISCHARGE AND TRANSFER</b>					
1. Admission Procedure					
2. Transfer					
3. Discharge Procedure					
4. Post Mortem Care					
<b>B. PARTICIPATES IN ASSESSMENT OF SKIN AND APPLICATIONS OF HEAT AND COLD</b>					
1. Aqua Pad					
2. Hot/Cold Compresses					
3. Ice Bags					
4. Heat Lamp					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
<b>C. ASSISTS WITH DIAGNOSTIC PROCEDURES</b>					
1. Liver Biopsy					
2. Paracentesis					
3. Proctoscopy					
4. Lumbar Puncture					
5. Thoracentesis					
6. Vaginal Exam					
<b>D. APPLIES BANDAGING AND DRESSINGS</b>					
1. Ace Bandage					
2. Binders					
3. Support Hose					
4. Sterile Dressings					
5. IV Site Dressings (Central-PICC)					
<b>Presence of Preceptor</b>					
6. Suture Removal					
7. Staple Removal					
<b>E. INSERTS N/G TUBE</b>					
<b>F. DIETARY NEEDS</b>					
1. Feeds Patient					
2. Provides Nourishment					
3. Prepares Patient for Meals					
4. Peg Tube Feeding					
5. Gastric Tube Feeding					
6. N/G Tube Feeding					
<b>G. ELIMINATION</b>					
1. Bedpan and Urinal--gives, removes, observes content					
2. Bowel Training Program					
3. Bladder Training Program					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
4. Catheterization (Adult)					
a. Intermittent					
b. Indwelling					
5. Catheterization (Pediatric)					
a. Intermittent					
b. Indwelling					
6. External Catheter					
7. Enemas					
8. Ostomies					
<b>H. EMERGENCY MEASURES</b> Basic CPR and Heimlich Maneuver					
<b>I. HYGINE</b>					
1. Bath					
a. Bed					
b. Shower					
c. Sitz					
d. Tub					
e. Therapeutic					
2. Bed Making					
a. Occupied					
b. Surgical					
c. Unoccupied					
3. Oral Hygiene					
a. Dentures					
b. Routine					
1. Conscious					
2. Unconscious					
4. Peri Care					
5. Routine Newborn Care					
6. Skin care					
a. Prevention of Decubitus					
b. Decubitus Care					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
<b>J. INFECTION CONTROL</b>					
1. Handwashing					
2. Care of Soiled Items					
3. Universal Precautions					
4. Special Isolation Procedures					
<b>K. INTAKE AND OUTPUT</b>					
1. Measures I&O					
2. Records I&O					
<b>L. INTRAVENOUS THERAPY</b> (All IV Procedures <u>Must</u> be done in the Presence of Preceptor at all times)					
1. Initiate Venipuncture a. Initiate INT b. Hang Continuous IV Flds					
2. IV push medications					
3. Hang Basic and Balanced Electrolyte Solutions					
4. Hang Primary Solution with approved medications labeled by RN or Registered Pharmacist					
5. Hang IV Piggybacks to Peripheral, Central, and PICC IV Lines and Buretrols. See Skills Exclusion List (page 9).					
6. May administer medications and intravenous fluids through Peripheral, Central, PICC and implantable ports. May access the "pig tail" of the implantable port but not insert the HUBER Needle.					
7. Monitors IV Rate					
8. Records IV Intake					
9. Discontinue peripheral IV					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
<b>M. IRRIGATIONS</b>					
1. Bladder					
2. Colon (non-medicated)					
3. Vaginal					
4. Nasogastric					
<b>N. MEDICATION ADMINISTRATION</b>					
1. Oral					
2. Subcutaneous					
3. Intramuscular					
4. Intravenous					
5. Mucous Membrane Application					
a. Sublingual					
b. Buccal					
c. Inhalants					
d. Vaginal					
e. Rectal					
6. Topical					
a. Dermal					
b. Transdermal					
c. Ophthalmic					
d. Otic					
<b>O. MOBILITY AND IMMOBILITY CARE</b>					
1. Ambulation with devices					
2. Bed Cradle					
3. Bicycle					
4. Footboard					
5. Scales					
a. Bed					
b. Upright					
c. Infant					
d. Wheelchair					
6. Special Beds/Mattresses					
7. Range of Motion					
a. Active					
b. Passive					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
8. Hoyer Lift (portable)					
9. Positioning					
10. Prosthetic Devices					
11. Restraints, care of patients					
12. Side Rails					
13. Stretcher					
14. Wheelchair					
15. Radiation Therapy Precautions					
<b>P. PATIENT TEACHING</b>					
<b>Q. PRE-OPERATIVE CARE</b>					
<b>R. POST OPERATIVE CARE</b>					
<b>S. RESPIRATORY CARE</b>					
1. Humidifiers					
2. Oxygen					
a. Cannula					
b. Mask					
3. Tracheal Suctioning					
4. Trach Care					
<b>T. SPECIMENS, COLLECTION OF</b>					
1. Sputum					
2. Stool					
3. Urine					
a. Routine Voided					
b. 24-Hour					
c. Clean Catch					
d. Culture and Sensitivity					
4. Blood					
a. Venipuncture					
b. Bedside Glucose					
5. Wound Culture					
<b>U. SUCTION</b>					
1. Gastric					
2. Compressed Wound, i.e. Jackson Pratt					
3. Chest Tube Maintenance					

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Skill	Theory	Clinical Experience	Comments	Date	Method of Validation/ Preceptor Initials
<b>V. TRACTION MAINTENANCE</b>					
1. Cervical					
2. Bucks Extension					
3. Pelvic					
4. Halo Vest					
5. Pin Care					

See Page 10 for Skills Exclusion List.

Attached to the Skills is a list of clinical skills that may NOT be performed by an extern. School and/or hospitals/agencies may identify additional skills that are not to be performed by summer externs. Please list below any additional skills that may **NOT** be performed:

Preceptor Name: \_\_\_\_\_ Date: \_\_\_\_\_

Preceptor Name: \_\_\_\_\_ Date: \_\_\_\_\_

Prepared by:  
Externship Committee

Formulation Date: 9/81  
Last Reviewed/Revised: 11/09, 12/10, 12/11

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**2012 SUMMER STUDENT NURSE EXTERNSHIP PROGRAM  
SKILLS EXCLUSION LIST  
(Skills That Student Nurse Externs May NOT Perform)**

Each Student Nurse Extern enrolled in the Summer Student Nurse Externship Program is provided a Skills Check List that outlines what skills can be performed under the supervision of the preceptor.

**The following clinical skills may NOT be performed  
by a Student Nurse Extern.**

**The student may not:**

1. Hang lipids, hyperalimentation, chemotherapy, rejection medications, epidurals, and/or experimental drugs.
2. Titrate IV medications.
3. Administer or restart blood products.
4. Withdraw blood from central or arterial lines.
5. Discontinue PICC or Central IV lines.
6. Conduct cardiac outputs or manipulate arterial and/or invasive monitoring lines (including removal of catheter).
7. Access controlled medications.
8. Remove or hang narcotics for PCA pumps.
9. Carry the narcotics keys or count narcotics.
10. Access dialysis devices and/or implantable ports.
11. Manipulate peritoneal dialysis.
12. Tape, extubate, or manipulate endotracheal tubes.
13. Manipulate respiratory ventilator equipment, auto-infusion devices, and/or dialysis devices.
14. Discontinue chest tubes.
15. Perform vaginal examinations.

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