

Extended Care Skills Checklist

This checklist will be used to assess your suitability for placement.

Note: You can save the checklist at any time and your progress will be stored.

Experience Guide

- 1 - Not Applicable - minimal or no exposure to clinical aspect or care.
- 2 - Beginner - sufficient knowledge to understand the contextual nature of the function, able to perform routine functions independently, requires assistance when setting priorities in complex situations, needs to gain speed and flexibility to be competent.
- 3 - Competent - perceives situations and functions as a whole, has knowledge of the typical events to expect in a given situation and the appropriate responses, flexible in decision making.
- 4 - Proficient - considerable background and experience, can grasp situations intuitively, mastery in performance, incorporates elements of innovation and creativity in clinical experience.

System Assessment

General System Assessment Skills

	Experience					Experience			
	1	2	3	4		1	2	3	4
Cardiovascular	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Gastrointestinal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Genitourinary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Integumentary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CHANGING THE FUTURE OF HEALTHCARE STAFFING

Neurological	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Respiratory	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skin Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Medical Conditions
General Medical Conditions

	Experience					Experience			
	1	2	3	4		1	2	3	4
Active Rehabilitation Patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Acute Renal Failure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asthma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Bowel Obstruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cerebral Vascular Accident	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cervical Fracture/Surgery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic Mechanical Ventilator Dependence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Chronic Obstructive Pulmonary Disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chronic Renal Failure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cirrhosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Colostomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Complicated Fractures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Decubitus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Decubitus Ulcers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diabetes Mellitus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Enteral Feedings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Esophageal Varices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Fractures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gastroenteritis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Gastro Intestinal Bleed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Halo Traction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hematological Disorders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hemiplegia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hepatitis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oxygen Dependence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PEG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CHANGING THE FUTURE OF HEALTHCARE STAFFING

PE/DVT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pneumothorax	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Post TURP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Psychological Disorders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quadriplegia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Seizure Activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skeletal Traction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Spinal Patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tracheostomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Skilled Nursing
Skilled Nursing Skills

	Experience					Experience			
	1	2	3	4		1	2	3	4
ADLs Assessment and Teaching	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Airway Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aseptic Dressing Changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Access Circulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assessment/Management of Pain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	BiPap/CPap	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Blood Glucose Monitoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Calculate Medication Dosages by Weight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Calculate Total Intake and Output by Weight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CPR Adult	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CPR Pediatric	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CPR Infant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cardiovascular/Neuro Checks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Care of Central and PICC lines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Care of Isolation Patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Chest Percussion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coaching Family Needs: Physical Emotional Comfort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Colostomy Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CHANGING THE FUTURE OF HEALTHCARE STAFFING

Comatose Patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Decubitus Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressing Changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electrolyte Balance/Replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
End of Life Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gastric Tube Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hemovac Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heparin Lock and Saline Flush	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hickman Broviac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ileostomy Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Immunization Requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incentive Spirometry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulin Scales and Delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intramuscular Injections (Adult and Pediatric)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intravenous Infusions Buretrol Soluset	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation Techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JP Tube Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Knowledge Of Normal Lab Values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Latex Allergy Precautions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lift and Transfer Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assist With Lumbar Puncture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fluid and Electrolyte Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NG Tube Insertion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oral and Nasotracheal Suctioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organ Donation Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oxygen Delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Transfers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Patient and Family Teaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peripheral IV and Blood Draws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PCA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Portacatheter and Vascular Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post Mortem Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pressure Stockings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pulse Oximetry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restrained Patients: Care, Documentation, Legal Issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scalp Veins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CHANGING THE FUTURE OF HEALTHCARE STAFFING

Seizure Precaution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Skeletal Pin Site Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sterile Technique	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Stump Dressings and Post Surgical Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suctioning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Swallowing Assessment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TPN Lipids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Tracheostomy Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Universal Precautions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Urinary Catheter Insertion & Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Urostomy Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Use of Doppler	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use of Infusion Pumps IV Monitoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Use of Specialty Beds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wound Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Medication Administration
General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Oral Medication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Intramuscular	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Subcutaneous	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Rectal Medication Administration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enemas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Narcotics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cardiac Medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Psychotropics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insulin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Endotracheal Medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Intravenous Medication

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CHANGING THE FUTURE OF HEALTHCARE STAFFING

	Experience					Experience			
	1	2	3	4		1	2	3	4
Peripheral Line Insertion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	IV Sedation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Piggyback	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	IV Push	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Infusions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Central Lines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Age Specific Practice Criteria

Please check the boxes below for each age group for which you have expertise in providing age-appropriate nursing care.

- A. New Born/Neonate (Birth - 30 days)
- B. Infant (30 days - 1 Year)
- C. Toddler (1 - 3 Years)
- D. Preschooler (3 - 5 Years)
- E. School age children (5 - 12 Years)

- F. Adolescents (12 - 18 Years)
- G. Young Adults (18 - 39 Years)
- H. Middle Adults (39 - 64 Years)
- I. Older Adults (+64 Years)

CHANGING THE FUTURE OF HEALTHCARE STAFFING

Experience With Age Groups

Able to adapt care to incorporate normal growth and development A B C D E F G H I

Able to adapt method and terminology of patient information to their age, comprehension and maturity level. A B C D E F G H I

Can ensure a safe environment reflecting specific needs of varying age groups. A B C D E F G H I

By signing this checklist you agree to the following:

I attest that the information I have given is true and accurate to the best of my knowledge and that I am the individual completing this form. I hereby authorize the Company to release this Skills Checklist to the Client facilities in relation to consideration of employment as a per diem nurse with those facilities.

Nurse Signature

Date