

CHANGING THE FUTURE OF HEALTHCARE STAFFING

Perioperative 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.

Clinical Practice

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Circulate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Inpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outpatient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pediatrics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Scrub	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

General

General

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	Experience					Experience			
	1	2	3	4		1	2	3	4
Abdominal Resection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Adrenalectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bowel Resection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cholecystectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Internal Defibrillator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Gastrectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hemicolectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hepatic Resection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Herniorrhaphy Femoral/Inguinal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Organ Procurement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pancreatectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Radical Mastectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Saphenous Vein Ligation and Stripping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Splenectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thyroidectomy	<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"/>
Hiatal Herniorrhaphy Transabdominal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Whipple Procedure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Cardiovascular

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Access Lines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Aneurysms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aortic Aneurysm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Aorta Femoral Bypass/Graft Insertion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
AV Shunts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Valve Replacement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carotid Ligation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Coronary Artery Bypass Graft	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carotid Endarterectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	External Temporary Pacemaker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fem-fem Bypass	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Fem-pop Bypass	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pacemaker Insertion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Intra Aortic Balloon Pump	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Patient Duct Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pericardial Windows	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Peripheral Grafts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Porta Systemic Shunt	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Repair of Septal Defects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Thrombectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heart Transplant Surgery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Vein Ligation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vena Cava Ligation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Neurosurgery

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Anterior Cervical Fusion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Burr Holes for Subdural Hematoma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Craniotomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Discectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ICP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Lumbar Laminectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meningocele Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Shunts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spinal Fusion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Stereotactic Brain Biopsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thoracic

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Hiatal Hernia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Lung/Wedge Resection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pneumonectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Sternal Splitting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Thoracotomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

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Laparoscopic

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Appendectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cholecystectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Colon Resection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hernia Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LAVH/Hysteroscopy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Spine Procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Orthopedics

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Amputation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Application of Halo Traction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Arthroscopy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Closed Pinning and Reduction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
External Compression Devices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hand Surgery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insertion of Finger Prosthesis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	ORIF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patellectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Repair of Dislocation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spica Cast Application	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Spinal Fusion / Harrington Rods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tendon Implants and Reanastomosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Total Joint Replacement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trauma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Gynecology

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General

	Experience					Experience			
	1	2	3	4		1	2	3	4
C-section	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Dilation and Curettage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abdominal Hysterectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Vaginal Hysterectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Laser Surgery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Mastiodectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pelvic Clearance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Radium Insertion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salpingo Oophorectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Shirodkar Procedure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Termination of Pregnancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Tubal Ligation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tympanoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Vaginal Reconstruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vaginectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Urology

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Circumcision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cystectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cystoscopy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hypospadias Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ileal Loop	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Kidney Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lithotripsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Nephrectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Orchiectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Penile Implant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prostatectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pyelolithotomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Renal Transplant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	TURP/TURB	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Ureterolithotomy Vasectomy

Hepatobiliary

General

	Experience				Experience			
	1	2	3	4	1	2	3	4
Liver Transplants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Plastics

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Abdominoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Augmentation Mammoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abdominal Lipectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cleft Lip/Palate Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Burns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Digital Flexor Tendon Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dermabrasion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Myelomeningocele Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Liposuction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Rhinoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Otoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Scar & Graft Revision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduction of Facial Fracture	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Split Thickness Skin Grafting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skin Meshing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Ophthalmic

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
ECCE + IOL: Cataracts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PHACO Cataracts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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EUA of Eye	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Retinal Detachment Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corneal Transplant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Eye Trauma Surgery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Removal Foreign Body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Oral

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Dental Restoration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Craniofacial Surgery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mandibular Procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Maxillary Procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tmj Arthroplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Ears, Nose & Throat

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
FESS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Laryngectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mandiblectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Mastoidectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncological: Head & NeckDissection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Rhinoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sinusostomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	T&a Myringotomies	<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"/>	Tympanoplasty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Medication Administration

CHANGING THE FUTURE OF HEALTHCARE STAFFING

General

	Experience					Experience			
	1	2	3	4		1	2	3	4
Oral	<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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rectal 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

	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)**

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

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