

Asheville-Buncombe Technical Community College

Nursing Assistant Level I Handbook



340 Vict oria Road Asheville, NC 28801 (828) 398-7332 (828) 398 -7878 Fax (828) 281-9720 4646 U.S. 25-70 Marshall, NC 28753 828) 649- 2947 (828) 398-7700 Fax (828) 281-9859

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North Carolina Board of Nursing Nurse Aide I Tasks

I. PERSONAL CARE (ADL)

- Bathing (assist, bed bath, tub bath, shower, sitz)
- Mouth care
- Skin care
- Hair care
- Nail care
- Bedmaking (modified)
 Dressing and undressing

II. BODY MECHANICS

- Turn and position
- Transfer chair and stretcher
- Use of lifts
- Assist with ambulation
- Range of motion exercises

III. NUTRITION

- Prepare patients for meal time
- Feed patients
- Intake and output
- Force and restrict fluids

IV. ELIMINATION

- Bedpan/urinal
- Bowel/bladder retraining
- Collect/test specimens
- Perineal/catheter care
- Apply condom caths
- + Douches
- Enemas
- + Insert rectal tubes/flatus bags
- Empty drainage devices from body cavities/wounds
- + Maintain gastric suction

Role of Nurse Aide I on Health Care Team*

- *The licensed nurse maintains accountability and responsibility for the delivery of safe and competent care. Decisions regarding delegation of <u>any</u> of the above activities are made by the licensed nurse on a client-by-client basis. <u>ALL</u> of the following criteria must be met before delegation of any task may occur:
- task is performed frequently in the daily care of a client or group of clients;
- task is performed according to an established sequence of steps;
- task involves little to no modification from one client situation to another;
- task may be performed with a predictable outcome;
- task does not involve on-going assessment, interpretation or decision-making that cannot be logically separated from the task itself; and
- task does not endanger the client's life or well-being.

As part of accountability, the registered nurse must validate the competencies of the NA I prior to delegating tasks. The licensed nurse (RN or LPN) must monitor the client's status and response to care provided on an on-going basis.

* Core tasks which the North Carolina Board of Nursing has determined are appropriate for inclusion in basic NAI education programs. + Common tasks which are appropriate for delegation to NAI following appropriate education and competency validation by a registered nurse but are not <u>required</u> to be taught in the Division of Health Service Regulation and approved 75-hour course.

The "Decision Tree for Delegation to UAP" (www.ncbon.com – Position Statements) is an additional tool to assist the RN and LPN in making appropriate decisions related to delegation of tasks to UAP.

- V. SAFETY
 - Side rails/ call rails
 - Mitts and restraints
 - CPR/Heimlich Maneuver
 - Infection control Handwashing Isolation technique Standard precautions
- VI. SPECIAL PROCEDURES
 - Vital signs
 - Temp (oral, rectal, axillary) Pulse (radial, apical) Respirations
 - Height and weight (stand-up
 - scales/bed scales)
 - Application of heat/cold
 - Prevent and care for decubitus ulcers
 - + Surgical skin preps and scrubs
 - Clean dressing changes
 - Apply ace bandages, TEDs and binders
 - + Apply and remove EKG monitor leads
 - Postmortem care
 - Cough/deep breathing

Guidelines for Students Admission Requirements

Curriculum Programs

Students who enter an Allied Health program or other Health Occupations programs with potential exposure to blood or other body fluids are at risk. Because of this risk, the following guidelines have been developed. These students will be required to have begun or completed all HBV immunizations prior to commencement of clinical activities or to have signed a declination statement. Official copies of student records will be maintained in the Registrar's Office; however, copies, of all related health documents will be forwarded to and confidentially maintained in the office of the respective department chairperson. Those students who refuse required immunizations will forfeit their opportunity to fulfill clinical requirements.

Continuing Education Programs

Students who enter continuing education health programs with potential exposure to communicable diseases will be required to have documentation of immunizations including HBV prior to attending clinical sessions or sign the declination statement.

Student records will be maintained in the Continuing Education Office for three years.

Requirements for Currently Enrolled Students

Enrolled students must meet requirements mandated by CDC, OSHA, and the clinical site in order to maintain their eligibility to participate in clinical.

Requirements for Currently Infected Applicants and Students

To protect the safety of A-B Tech students and those they come in contact with during clinical training, the following policies and procedures will apply to any applicant or student enrolled in a health or related program.

Upon enrollment, the student must inform his/her instructor or the department head of any medical, psychological, or psychiatric conditions that affect his/her ability to provide safe clinical care. The student will be required to be individually assessed by his/her personal physician at his/her own expense to determine eligibility for continuation of the program. Eligibility for continuation will be based upon the following:

The potential harm that the individual poses to others; the ability of the individual to accomplish the objectives of the course curriculum; whether or not a reasonable accommodation can be made that will enable the student to safely and efficiently accomplish the objectives and/or tasks of the course or curriculum without significantly exposing the student or other persons to the risk of infection.

North Carolina law and regulations provide that persons infected with HIV or hepatitis B and who performs surgical, obstetrical or dental procedures or who assist in these procedures in a manner that may result in exposure of patients to their blood must report their infection status to the State Health Director. It is the obligation of students in the Division of Allied Health and Public Service, along with Health Occupations, who meet the above criteria to file a written notification with the State Health Director at the following address:

Chief Communicable Disease Control Branch 1902 Mail Service Center Raleigh, NC 27699-1902

The HIV or Hepatitis B infected student who performs surgical, obstetrical or dental procedures must comply with the provision of any orders issued by the State Health Director, including practice restrictions, and shall notify the State Health Director of any proposed changes in his or her practice. The student must report the restrictions to his/her faculty advisor or other appropriate instructor.

<u>Required Precautions</u>

All Allied Health Students or other Health Occupations programs are required to adhere to the Bloodborne Pathogens Exposure Control Plan for ABTCC students, and to adhere to universal precautions, including the appropriate use of hand washing, personal protective equipment, and care in the use and disposal of needles and other sharp instruments. Students must comply with current guidelines for disinfection and sterilization of reusable devices used in invasive procedures as outlined by the clinical site.

The College will give the following instructions to any student with potential exposure. The instructions are consistent with CDC Guidelines and OSHA regulations.

Good personal hygiene must be followed at all times with special emphasis on good hand washing techniques and use of personal protective equipment. Personal protective equipment must be worn whenever there is anticipated contact with blood, other body fluids, mucous membranes, and non-intact skin during vascular access procedures or other anticipated handling or touching of any contaminated items.

Allied Health students or other Health Occupations programs' students, who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment and devices used in performing invasive procedures until the condition resolves. A release from a physician will be necessary before the student can resume direct patient care duties.

The student will be made aware of the potential risks associated with patient care during class lecture and the student will, at all times, follow recommendations from the College and the affiliating clinical agencies regarding communicable disease policies.

In the event a patient is exposed to a student's blood or body fluids, the student will immediately report the incident to the clinical instructor who will report the incident to the infection control nurse/site physician and/or the department chairperson. The clinical instructor will complete an accident/incident report and forward it to the College Director of Security. This procedure of reporting applies to ALL students regardless of their communicable disease status. An Allied Health or Health Occupations student is ethically obligated to undergo testing whenever a patient has been clearly exposed to the student's blood or body fluids.

In the event any student is exposed to a potential communicable disease, the student will immediately report the incident to the clinical instructor who will report the incident to appropriate agency personnel and department chairperson. The student and instructor will complete the applicable agency incident report. Additionally, the Asheville-Buncombe Technical Community College incident report will be completed and forwarded to the College Director of Security. Follow-up care will be offered as stipulated in the Asheville-Buncombe Technical Community College "Exposure Control Plan" for students.

Supplies Needed for Nurse Aide I Class

Have all supplies by Day # 2 of class Storage Container for all Supplies

Liquid soapOrange StickWashcloths (3 - 4)Emery BoardBath Towel (2 - 3)Brush / CombToothbrushLotionToothpaste*Watch with Second HandHand wipes(* Not needed until week # 2 of class)Clorox disinfectantMixed fruit cups / spoons / small plates / napkins / small cups

***After use of washcloths and/or towels, items must be taken home and washed!

It is recommended (not required) that students purchase a blood pressure cuff and stethoscope for use in class and to practice at home to perfect skills.

Asheville – Buncombe Technical Community College Technical Standards for Continuing Education Students

Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990 provide that individuals with disabilities be allowed "reasonable modifications to policy, practice or procedure" in order to meet the qualifications of the Continuing Education Division. The intent of the Continuing Education Division is to educate competent practitioners to work in a variety of health occupations areas. Enrolled students are expected to complete all academic, laboratory, and clinical requirements of their selected program. The purpose of this document is to identify the physical requirements, clinical and lab work environments, as well as workplace interactions deemed essential to the completion of the selected program of study and to perform as a competent student.

If a student cannot demonstrate the appropriate skills and abilities required in their selected program, it is the responsibility of the student to request an appropriate accommodation. The College will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program offered and does not impose an undue hardship, difficulty, and is not unduly disruptive to the educational process.

Accommodations which are not considered to be reasonable include:

- 1) If making the accommodation or allowing participation poses a direct threat to the health or safety of one's self or others
- 2) If making the accommodation means making a substantial change in an essential element of the curriculum (educational viewpoint)
- 3) If making the accommodation means a substantial alteration in the manner in which services are provided
- 4) If making the accommodation poses an undue financial or administrative burden

Individuals with disabilities as defined in the Americans with Disabilities Act wishing to make a request for reasonable accommodation, auxiliary communication aids or services, or materials in alternate accessible formats should contact the college Disability Services Coordinator at the address listed below:

Disability Services Coordinator, Bailey Building Asheville-Buncombe Technical Community College 340 Victoria Road Asheville, NC 28801

Telephone (828) 398-7141

ASHEVILLE-BUNCOMBE TECHNICAL COMMUNITY COLLEGE Nurse Aide I and II FUNCTIONAL ABILITIES

A prospective Nurse Aide I and II program candidate must be able to demonstrate, with or without reasonable accommodations, the physical and psychological ability to provide safe, competent patient care. Every prospective student must assess his or her ability prior to choosing nursing as a career. To understand the physical and psychological qualifications needed for success in the nurse aide program, the functional abilities have been listed below. Students must certify the ability to meet the functional abilities of the profession by a signed statement in the beginning of

Students must certify the ability to meet the functional abilities of the profession by a signed statement in the beginning of the program.

ISSUE	STANDARD	EXAMPLES
CRITICAL AND ANALYTICAL THINKING	Ability sufficient for clinical judgment.	 Collect data, prioritize needs, and anticipate reactions. Identify cause-effect relationships in clinical situations. Sequence information. Make decisions independently within role. Transfer knowledge from one situation to another Process information from multiple sources Analyze and interpret abstract and concrete data Evaluate outcomes Use long-term and short-term memory. Prioritize tasks.
INTERPERSONAL SKILLS	Abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural and intellectual backgrounds.	 Establish rapport with clients, instructors, staff, colleagues and groups. Respect, and care for clients whose appearance, condition, beliefs, and values may conflict with your own. Deliver nursing care regardless of client's race, ethnicity, age, gender, religion, sexual orientation, or diagnosis. Establish and maintain therapeutic boundaries. Exhibit ethical behavior and exercise good judgement. Negotiate interpersonal conflict.
COMMUNICATION	Abilities sufficient for interaction with others in verbal and written form.	 Document and interpret actions and client responses in a clear, professional, and timely manner. Speak and write English. Listen and comprehend spoken and written word. Give verbal directions or follow verbal directions form other members of the healthcare team. Convey information to clients and others as necessary to teach and direct in an accurate, effective and timely manner as directed by supervisor. Recognize and report critical client information to other caregivers.

ISSUE	STANDARD	EXAMPLES
MOBILITY	Physical abilities sufficient to move in one's environment with ease and without restriction.	 Move around, and work in confined spaces and treatment areas. Maintain balance in multiple positions. Reach below waist (e.g. plug electrical appliance into wall outlet) Reach above shoulders (e.g. IV poles) Reach out in front. Administer cardiopulmonary resuscitation. Sustain repetitive movement (e.g. CPR) Stand and/or walk, maintain physical tolerance up to 2 hours part dout
MOTOR SKILLS	Gross and fine motor abilities sufficient to provide safe and effective nursing skills.	 to 8 hours per day. Pick up objects with hands. Use equipment (BP cuff, Wheelchair) Grasp small objects with hands, fingers (e.g. pencil) Write with pen or pencil. Key/type (e.g. use a computer) Pinch/ pick or otherwise work with fingers (e.g. comb hair) Squeeze with fingers (e.g. toothpaste tube) Reposition immobile clients. Push/pull 50 pounds or greater. Lift/move heavy objects up to 50 pounds. Twist, Bend, Stoop/squat Move quickly (e.g. response to an emergency) Climb stairs
HEARING	Auditory abilities sufficient to monitor and assess health needs.	 Hear normal speaking-level sound (e.g. person-to-person report) Hear auditory alarms (monitors, fire alarms, call bells) Hear faint voices or body sounds (e.g. blood pressure) Hear cries for help.
VISUAL/SMELL	Visual ability sufficient for observation necessary in nursing skills.	 Observe client responses, see a change in skin color, and read calibrations on BP gauge. See objects up to 20 feet away. Read electronic medical record and/or associated paper medical records. Use depth perception. Use peripheral vision. Detect odors (e.g. foul smelling drainage, smoke)
TACTILE	Tactile ability sufficient for physical assessment.	 Feel vibrations (e.g. palpation of pulse) Detect temperature changes (e.g. skin, solutions) Feel differences in surface characteristics (e.g. rashes) Feel differences in sizes, shapes (e.g. identify body landmarks) Detect environmental temperature

ISSUE	STANDARD	EXAMPLES
ENVIRONMENTAL	Possess the ability to tolerate environmental stressors.	 Safely work with potentially harmful chemicals used in health care settings. Practice Standard Precautions in the clinical setting. Work in areas that are close, crowded, and/or noisy. Anticipate exposure to communicable diseases, body fluids, and toxic substances. Tolerate exposure to allergens (e.g. latex gloves) Tolerate strong soaps Tolerate strong odors
EMOTIONAL	Possess emotional stability sufficient to maintain composure in stressful situations and assume responsibility / accountability for actions.	 Adapt rapidly to changing environment and/or stress. Calmly receive feedback. Demonstrate honesty and integrity beyond reproach. Establish professional relationships. Provide client with emotional support. Deal with the unexpected (e.g. client condition) Focus attention on task Cope with own emotions Perform multiple responsibilities concurrently Cope with strong emotions in others (e.g. grief)

In the case of a qualified individual with a documented disability, appropriate and reasonable accommodations will be made unless to do so would fundamentally alter the essential training elements, cause undue hardship, or produce a direct threat to the safety of the patient or student.

Asheville-Buncombe Technical Community College is invested in full compliance with the Americans with Disabilities Act (ADA). Support Services is part of Student Services and is located in the K. Ray Bailey Student Services Center. For detailed information contact Support Services at <u>supportservices@abtech.edu</u> or (828) 398-7581. An appointment is recommended prior to enrollment in order to discuss any special concerns.

abilities of the profession by signing below.

____ have read and certify that I can meet the functional

Signature of Student _____ Date

Ι,

Selection of Five Skills for Competency Evaluation

T	+ 1	+ 3 =
Handwashing Skill	Measurement Skills	Client Care Skills
Washes Hands	Measures and Records Blood Pressure	Assists to Ambulate Using Transfer Belt
	Counts and Records Radial Pulse	Assists with Use of Bedpan
_	Counts and Records Respirations	Cleans Upper or Lower Denture
	Measures and Records Urinary Output	Performs Passive Range of Motion (PROM) for One Shoulder
	Measures and Records Weight of Ambulatory Client	Feeds Client Who Cannot Feed Self
		Performs Passive Range of Motion (PROM) for One Knee and One Ankle
	2	Dresses Client with Affected (Weak) Right Arm
		Positions On Side
£.		Provides Catheter Care For Female
		Provides Foot Care on One Foot
		Provides Mouth Care
		Provides Perineal Care (Peri-care) For Female
		Applies One Knee-High Elastic Stocking
		Donning and Removing PPE (Gown and Gloves)
		Transfers from Bed to Wheelchair Using Transfer Belt
		Gives Modified Bed Bath (Face and One Arm, Hand and Underarm)

Body Systems

Skeletal System

Observations for the CNA

- 1. Slow and unsteady body movement
- 2. Difficulty holding objects
- 3. Complaint of pain in joints
- 4. Swelling, redness and warmth in joints
- 5. Complaint of pain with movement
- 6. Inability to move joints
- 7. Complaint of neck or head pain
- 8. Resident who has fallen (stays with resident, call for help, do not move resident or allow resident to move)

Muscular System

Observations for the CNA

- 1. Difficulty holding or lifting objects
- 2. Inability to move a body part
- 3. Difficulty walking
- 4. Loss of muscle strength and tone
- 5. Edema of tissue or joint
- 6. Complaint of muscle pain
- 7. Generalized weakness and fatigue
- 8. Slow, unsteady body movement

Circulatory System

- 1. Changes in pulse rate and blood pressure
- 2. Changes in skin color
- 3. Changes in skin temperature coldness
- 4. Complaint of dizziness and headaches
- 5. Complaint of pain in chest and/or indigestion
- 6. Edema in feet and legs
- 7. Shortness of breath
- 8. Sweating
- 9. Blue color to lips and/or nail beds
- 10. Complaint of tingling sensations
- 11. Memory lapses
- 12. Lack of energy
- 13. Irregular respirations
- 14. Anxiety
- 15. Staring and/or lack of responsiveness

Observations for the CNA

- 1. Rate and rhythm of respirations
- 2. Respiratory secretions character
- 3. Character of cough
- 4. Changes in skin color pale or bluish gray
- 5. Temperature changes
- 6. Difficulty breathing
- 7. Color of sputum
- 8. Complaint of pain in chest, back, sides
- 9. Shortness of breath
- 10. Noisy respirations
- 11. Sneezing
- 12. Gasping for breath
- 13. Anxiety

Digestive System

<u>Common Disorders</u>

- 1. Ulcer lesion or erosion of the lining of the stomach or small intestine
- 2. Cirrhosis chronic disease of the liver where scar tissue replaces liver tissue
- 3. Cholelithiasis stones in gallbladder
- 4. Pancreatitis inflammation of the pancreas
- 5. Cholecystitis inflammation of the gallbladder
- 6. Colitis inflammatory disease of the colon
- 7. Hemorrhoids enlarged veins in anal area
- 8. Constipation difficulty in expelling fecal material; incomplete or infrequent bowel movements
- 9. Diarrhea watery bowel movements
- 10. Gastritis inflammation of the stomach lining and intestines
- 11. Cancer
- 12. Hernia protrusion of organ through wall of cavity where it is normally contained

- 1. Stool color and consistency
- 2. Abdomen flat or distended
- 3. Date and time of last BM
- 4. Nausea and vomiting
- 5. Blood in emesis or stool
- 6. Complaint of pain in stomach
- 7. Difficulty swallowing
- 8. Poor appetite
- 9. Constipation and diarrhea

Observations for the CNA

- 1. Elevated temperature
- 2. Urine color other than clear, pale yellow
- 3. Complaint of burning on urination
- 4. Incontinence
- 5. Polyuria excessive amount of urine per voiding
- 6. Hematuria blood in urine
- 7. Nocturia excessive urination at night
- 8. Urine having strong odor or cloudy appearance
- 9. Voiding small amounts of urine frequently

Endocrine System

Changes due to Aging

- 1. Decrease in thyroid, parathyroid, adrenal and sex hormones secretions
- 2. Decreased glucose tolerance (Diabetes)
- 3. Multiple physical changes due to decrease of sex hormones

Observations for the CNA

- 1. Irritability and restlessness
- 2. Nervousness
- 3. Confusion
- 4. Weight loss
- 5. Diaphoresis
- 6. Edema
- 7. Excessive thirst
- 8. Sweet, fruity odor to breath
- 9. Complaint of headache
- 10. Drowsiness
- 11. Rapid, weak pulse
- 12. Low blood pressure
- 13. Nausea and/or vomiting
- 14. Flushed, dry, hot skin
- 15. Excessive urination

Nervous System

- 1. Jerking motions, tremors
- 2. Speech changes
- 3. Complaint of numbness, dizziness, nausea
- 4. Confusion
- 5. Complaint of loss of feeling on one side
- 6. Incontinence
- 7. Altered thought processes
- 8. Muscular rigidity
- 9. Complaint of visual disturbances or changes
- 10. Paralysis
- 11. Seizures

Changes due to Aging

- 1. Lens in eye becomes thick and cloudy
- 2. Sclera (white of eye) becomes more yellow
- 3. Less light reaches inner eye
- 4. Hearing structures of ear become less moveable
- 5. Soft wax production decreases
- 6. Progressive hearing loss of high-pitched sounds occurs
- 7. Peripheral vision and night vision decreases
- 8. Eye adjusts more slowly to changes in distance
- 9. Sense of smell decreases
- 10. Sense of taste (sweet and salty first) decreases
- 11. Accommodation to light and dark decreases
- 12. Sense of touch, heat, cold, pain and pressure awareness decreases

Observations for the CNA

- 1. Lens of eye becomes cloudy
- 2. Complaint of pain in or around ear or eye
- 3. Red, swollen eye lid
- 4. Drainage from eye
- 5. Complaint of difficulty seeing objects
- 6. Comment that rainbows appear around lights
- 7. Drainage from ear canal
- 8. Complaint of feeling of fluid or noise in ear
- 9. Complaint of sudden flashes of light or loss or of sight

Integumentary System

- 1. Breaks in skin
- 2. Rash
- 3. Complaint of itching
- 4. Black and blue areas
- 5. Redness
- 6. Ulcers, sores or drainage
- 7. Abnormal temperature

Reproductive System

Functions

- 1. Organs have 2 functions
 - a. produce reproductive cells
 - b. produce hormones responsible for sex characteristics

<u>Common Disorders</u>

- 1. Rectocele—weakening of wall between vagina and rectum
 - a. constipation results
 - b. hemorrhoids form
- 2. Cystocele—weakening of wall between urethra and vagina a. causes urinary incontinence
- 3. Tumors
- 4. Sexually transmitted diseases
- 5. Prostatic hypertrophy---enlargement of prostate glands
- 6. Vaginitis

Changes due to Aging

- 1. Decreased size of testes
- 2. Decreased production of sperm
- 3. Delayed or less forceful ejaculation
- 4. Slower sexual response
- 5. Enlargement of prostate
- 6. Decreased sexual desire
- 7. Sagging breasts
- 8. Stopping of ovulation
- 9. Decreased vaginal secretions
- 10. Thinning of tissue of vaginal lining
- 11. Decreased sex hormone production
- 12. Loss of hair in pubic area

Observations for the CNA

- 1. Bleeding
- 2. Complaint of pain
- 3. Vaginal discharge
- 4. Complaint of itching
- 5. Lumps

Cancer

- 1. Fever
- 2. Changes in weight
- 3. Bleeding
- 4. Changes in vital signs
- 5. Complaint of pain
- 6. Behavioral changes
- 7. Constipation
- 8. Diarrhea
- 9. Nausea and vomiting
- 10. Sores in mouth

A: The Nurse Aide I

- 1. Describe the North Carolina Nurse Aide I.
- 2. Explain requirements for initial listing and renewals on the North Carolina Nurse Aide Registry.
- 3. Describe resources available that outline the range of function of the North Carolina Nurse Aide I.
- 4. Describe the importance of delegation of tasks to nurse aides.
- 5. Describe the types of skills performed by nurse aides.
- 6. Compare basic nursing skills, personal care skills, and interpersonal skills.
- 7. Describe important characteristics of a competent, caring nurse aide.
- 8. Explain the differences between an effective team and an ineffective team.

B: Infection Prevention

- 1. Relate the chain of infection to the work of a nurse aide in long term care facilities.
- 2. Explain the concept of breaking the chain of infection and its importance to infection prevention.
- 3. Compare Standard Precautions and Transmission-based Precautions.
- 4. Discuss the use of Personal Protective Equipment by the nurse aide.
- 5. Explain why residents in long-term care facilities are at risk for infection.

C: The Resident's Environment - Safety & Emergency

- 1. Explain why residents in long-term care facilities are at risk for injury.
- 2. Identify the role of the nurse aide in maintaining a safe environment for the resident.
- 3. Describe the role of the nurse aide in dealing with emergencies in a health care facility.

D: Communication

- 1. Describe successful and unsuccessful techniques of communication with residents.
- 2. Explain the importance of culture when communicating with those from other cultures
- 3. List skills that a nurse aide uses to communicate effectively with a variety of people, from a variety of cultures.

E: Law and Ethics

- 1. Describe ethical conduct.
- 2. Describe a resident's rights in the nursing home.
- 3. Give examples of abuse, neglect, and misappropriation of property.
- 4. Explain the role of the Health Care Personnel Registry.
- 5. Explain the role of the nurse aide in securing informed consent prior to providing care to the resident.

F: Dignity

1. Identify caring behaviors consistent with treating a resident with dignity.

G: Basic Restorative Care

- 1. Explain the role of the nurse aide in basic restorative care.
- 2. Describe the processes involved with bowel and bladder training.

H: Body Systems

- 1. Identify the structure and function of the cell and the integumentary, musculoskeletal, neurological, cardiovascular, respiratory, gastrointestinal, urinary, reproductive, endocrine, and immune systems.
- 2. Describe the nurse aide's role in the provision of care for a resident with cancer.
- 3. Discuss changes in the integumentary, musculoskeletal, neurological, cardiovascular, respiratory, gastrointestinal, urinary, reproductive, endocrine, and immune systems due to aging.
- 4. Compare and contrast normal findings and variation of normal findings of the integumentary, musculoskeletal, neurological, cardiovascular, respiratory, gastrointestinal, urinary, reproductive, endocrine, and immune systems.
- 5. Describe common disorders of the integumentary, musculoskeletal, neurological, cardiovascular, respiratory, gastrointestinal, urinary, reproductive, endocrine, and immune systems.
- 6. Describe the nurse aide's role related to a resident's integumentary, musculoskeletal, neurological, cardiovascular, respiratory, gastrointestinal, urinary, reproductive, endocrine, and immune systems.

I: Body Mechanics

- 1. Describe principles of body mechanics that help prevent injury.
- 2. Identify measures to safely assist a falling person to the floor.
- 3. Describe correct positioning of residents.

J: Nutrition

- 1. Describe nutrition and hydration requirements for the older adult.
- 2. Identify basic nutrients.
- 3. Explain how to read and use the information from a Nutrition Facts label.
- 4. Explain the use of the U.S. Department of Agriculture's (USDA's) MyPlate.
- 5. Identify special diets ordered for the older adult based on particular illnesses or conditions.
- 6. Calculate dietary intake, fluid intake, and output.
- 7. Discuss nurse aide responsibilities related to dysphagia and prevention of aspiration, hydration and prevention of dehydration.
- 8. Explain the nurse aide's role in enteral and parenteral nutrition.

K: Restraints

- Identify safety interventions that the nurse aide can do to create an environment for restraint elimination or reduction.
- 2. List the negative effects of restraint use on a resident.
- 3. Describe the variety of restraints available to the health care provider, for use, per physician order.

L: Communicating with the Health Care Team

- 1. Explain why the nurse aide must communicate effectively with members of the health care team.
- 2. List the information nurse aides typically report to the nurse.
- 3. Define the Health Insurance Portability and Accountability Act (HIPAA) in relation to reporting and recording.
- 4. Explain how to document information in a medical record, using pen and paper, as well as electronically.
- 5. Develop a listing of abbreviations used in healthcare facilities in the area

M: The Nursing Process & Nursing Care Plan

- 1. Identify the role of the nurse aide in each step of the nursing process.
- 2. Describe the importance of a resident's nursing care plan.

N: Incident Reports

- 1. Describe events that might occur in a health care facility that would require an incident report.
- 2. List information that must be included when writing an incident report.

O: Critical Thinking

- 1. Describe the importance of a nurse aide's ability to think critically while performing resident care.
- 2. List five questions that nurse aides should ask in order to think critically.

P: Family and Family Support

- 1. Describe the importance of family and family support to the resident.
- 2. List measures that the nurse aide can do to support family members of residents.

Q: Person Centered Care

- 1. Define person-centered care.
- 2. Describe the characteristics of a facility incorporating person centered care.

R: Cognitive Changes d/t Aging

- 1. Identify cognitive changes that occur due to aging.
- 2. Describe the importance of pacing and patience while delivering care to the older adult.

S: Psychological Effects of Aging

1. Describe the psychological effects of aging.

- 2. Explain the nurse aide's role in meeting the basic needs of the resident.
- 3. Describe the nurse aide's role in caring for residents with a variety of responses depressed resident, combative resident, and the agitated resident.
- 4. Describe the feelings and behaviors of older adults moving into a nursing home.

T: Dementia and Alzheimer's disease

- 1. Define the terms, dementia, Alzheimer's disease, and delirium.
- 2. Describe the nurse aide's role in the care of the resident with Alzheimer's.

U: Mental Health/Illness

1. Explain the role of the nurse aide in the de escalation of the resident who is agitated.

V: Pain

- 1. Define pain.
- 2. Explain the role of the nurse aide in pain management.

W: End of Life Care

- 1. Describe the nurse aide's role in end of life care.
- 2. Describe cultural differences in dealing with end of life.
- 3. Examine own feelings about the end of life.

X: Threads of Care

1. Complete Bed Bath Objectives

- 1.1. Promote increased comfort, good health, and hygiene.
- 1.2. Demonstrate how to bathe a resident who is confined to bed.

2. Dressing and Undressing Objective

2.1. Demonstrate assistance in dressing and undressing a resident while maintaining the resident's dignity and independence.

3. Pericare Objective

3.1. Demonstrate perineal care while observing sound infection prevention principles.

4. Making an Occupied Bed Objectives

- 4.1. Discuss the variety of beds that may be encountered in differing work settings.
- 4.2. Demonstrate proper bed making technique that promotes physical and emotional well-being.
- 4.3. Demonstrate how to operate a bed.

5. Foot Care Objectives

- 5.1. Foster good resident care by quality foot care.
- 5.2. Demonstrate foot care consistent with current nursing standards.

6. Fingernail Care Objective

- 6.1. Foster good resident care with attention to fingernails.
- 6.2. Demonstrate nail care consistent with current nursing standards.

7. Mouth Care Objective

- 7.1. Describe the importance of good mouth care.
- 7.2. Identify items needed for mouth care based on resident ability and need.
- 7.3. Demonstrate mouth care of the unconscious resident in a competent and safe manner.
- 7.4. Identify the level of assistance needed for denture care.
- 7.5. Demonstrate alternative methods to use with cognitively impaired residents.

8. Hand washing Objective

- 8.1. Demonstrate proper hand washing technique according to CDC guidelines.
- 8.2. Explain hand hygiene.
- 8.3. Identify when to wash hands.

9. Personal Protective Equipment (PPE) Objectives

9.1. Demonstrate proper use of PPE, including putting on and taking off gloves, gowns, and masks to

prevent transmission of disease.

9.2. Explain how to implement Standard Precautions in the work setting.

10. Measuring and Recording Vital Signs Objectives

- 10.1. Discuss the importance of accurate measurement of vital signs of residents.
- 10.2. Demonstrate correct measurement and recording of vital signs.

11. Measuring and Recording Height and Weight Objective

- 11.1. Discuss the importance of accurate height and weight measurements of residents.
- 11.2. Demonstrate correct measurement and recording of height and weight.

12. Collecting Routine Urine Specimen Objective

12.1. Demonstrate collecting a routine urine specimen following the rules of medical asepsis.

13. Assisting With Use of Bathroom and Measuring and Recording Urinary Output Objective

- 13.1. Demonstrate the proper technique when assisting with the use of the bathroom, bedside commode, bedpan and urinal.
- 13.2. Accurately measure and record urinary output.

14. Providing Catheter Care and Emptying Urinary Drainage Bag Objective

- 14.1. Demonstrate catheter care.
- 14.2. Empty urinary drainage bag.
- 14.3. Promote good health and hygiene.

15. Assisting With Dining/Feeding Resident and Measuring and Recording Intake Objective

- 15.1. Describe the food groups according to www.choosemyplate.gov.
- 15.2. Recognize components of special diets that may be served to residents.
- 15.3. Describe the importance of sound nutrition.
- 15.4. List ways to identify and prevent dehydration and malnutrition.
- 15.5. Demonstrate how to serve meal trays, between-meal snacks and assist with dining to a variety of residents, with different needs, including use of adaptive devices.
- 15.6. Demonstrate documentation of intake.
- 15.7. Identify intake items that are considered fluids.

16. Range of Motion Exercises Objective

- 16.1. Document the maintenance and/or improvement of resident's range of motion
- 16.2. Demonstrate active and passive range of motion

17. Transferring From Bed to Wheelchair Objective

17.1. Demonstrate the proper technique of transferring a resident in a safe, competent manner, from a supine position, to an upright position in a wheelchair.

18. Moving Up in Bed Using Turning Sheet and Positioning Resident on Side Objective

- 18.1. Discuss the importance of correct positioning and use of a turn sheet.
- 18.2. Demonstrate positioning resident on side.
- 18.3. Demonstrate moving a resident up in bed using a turning sheet.

19. Assisting With Ambulation Objective

19.1. Demonstrate the proper technique when assisting with ambulation using a gait belt, cane or walker.

20. Applying Restraints Objective

- 20.1. Demonstrate the application of physical restraints according to manufacturers' instructions.
- 20.2. Apply physical restraints according to nursing care plan and facility policies and procedures.

21. Applying Anti-embolism (Elastic) Stockings Objective

21.1. Demonstrate application of knee-high anti-embolism (elastic) stockings consistent with manufacturers' instructions.

Asheville Buncombe Technical Community College

Nurse Aide I Program

Nurse Aide I Program Overview/Policies:

The Nurse Aide program consists of 160 hours of classroom and clinical studies. The day class takes approximately 8 weeks and the evening class takes approximately 16 weeks. Upon completion of the course students will be able to provide basic nursing care to patients, residents and clients in a home setting, skilled nursing facility, hospice, hospital, physician offices or adult care homes. Upon successful completion students will be allowed to take their NC certification exam. After passing the state exam, he/she will be listed on the NC Nurse Aide Registry.

Required Documents to Register for Class

Required document to register for Nurse Aide course are government-issued signature bearing photo ID; non-laminated Social Security Card; High School diploma/GED/Results of 9th grade reading level test; TB test results within past year (other immunizations as required by clinical site)

Required Materials and Expenses for Class

Textbook and Workbook	\$85.00
Handbook with NC State approved Nurse Aide I Curriculum	\$19.00
Ceil Blue Scrub Top	\$20.00
Ceil Blue Pants, not jean material	\$20.00
Ceil blue lab coat, no other color allowed	\$20.00
White or Black Shoes (open toes not allowed),	\$25.00
Background Check and Drug Screen	\$62.50
CPR card/mask	\$5.00
Watch with second hand	\$20.00
TB Skin Test	\$25.00
High School Diploma/GED or reading test at 9 th grade reading level	
Immunizations decided by clinical sites	
Varias supplies for classroom (lab activitiesrefer to bandbook	

Varies supplies for classroom/lab activities – refer to handbook

All listed prices above may vary and are subject to change

Class/Clinical Hours

Day class hours are 8:00 am – 3:30 pm with 30 minutes for lunch Goodwill site hours are 8:30am-4:00pm with 30 minutes for lunch.

Evening class hours are 5:30 pm – 8:30 pm or 5:00pm-9pm.

Clinical hours are 7:00 am – 3:30 pm or 6:30 am – 3:00 pm with 30 minutes for lunch – **students may not leave facility for lunch**

Inclement Weather Information regarding school status will usually be announced by 6:00 am for day classes and by 4:00 pm for evening classes. This will include Saturday classes. Students may call AB-Tech switchboard for a recording. (828-398-7900). Students can also check AB-Tech website www.abtech.edu. For late opening, classes or clinical will begin as time noted in announcement. If the college is closed, students and instructors will not report to class or clinical. Time will be made up at a later date.

Requirements for Clinical

- Criminal Background Check and Drug Screen will be required by clinical sites for students entering selective Health Occupation programs. These screenings will be done at the student's (or sponsor's) expense by a professional and independent vendor. Failure to achieve acceptable standards for these screenings that are determined by the clinical site will result in the denial of clinical privileges for the course. Successful completion of clinical is required for program completion. There is no refund for criminal background checks and drug screens.
- 2. No cell phones allowed inside clinical facility. Valuables should be left in car. AB-Tech is not responsible for stolen items.
- 3. **Students must be able to perform skills**; therefore if students are not able to perform skills, no credit will be given for time.
- 4. Students must be able to lift 75 pounds as lifting is a necessary requirement to pass clinical.
- 5. Students must provide their own transportation to and from the clinical sites.
- 6. Students will report any injuries to their instructor immediately.
- 7. Students must have an 80% theory average to attend clinical.
- 8. Dress Code for Mission Students All students attending Mission classes on Mission's campus must wear scrubs (any color) while in classroom and lab components in addition to ceil blue scrubs for clinical.

Dress Code Policy at Clinical

Nails must be short and clean. Fingernails should be neatly trimmed to no longer than the end of the fingertip. Clear or light pink fingernail polish acceptable, bright colors not allowed.

Perfume/Strong Scent not allowed in clinical as this can cause respiratory problems for some patients and residents. This also includes body odor.

Jewelry - Minimal jewelry may be worn during clinical rotation. No hoops or dangling earrings. Rings with stones are not allowed to be worn during clinical as this is a safety issue for residents/patients Dangling bracelets or dangling watches are not permitted. Necklaces should not be worn. Tattoos or body piercing must be covered.

Hair must be a natural color (no fad colors or hairstyles). Hair must be pulled back from face and off the collar to not be a hindrance in providing care.

Chewing Gum in clinical is not allowed.

Uniform Ceil blue scrub top and pants that are clean and pressed, ceil blue lab coat (optional) White or black shoes – no open toes (can be tennis shoes). Name tags provided by AB Tech must be worn during clinical rotation. Watch with second hand

Code of Student Conduct

- 1. Any student who does not follow the Code of Student Conduct will be dismissed from the program.
- 2. Students are a guest at the clinical sites and must follow their policy as well.
- 3. Disrespectful or disruptive behavior will not be tolerated by any student and will result in dismissal from the program.

Absences / Tardies

- 1. <u>Students must attend 160 hours to successfully complete the program and CPR hours are not</u> included in the 160 hours required.
- 2. Any part of an hour missed will count as one (1) full hour and will count toward time missed.
- **3.** Three (3) tardies will count as (1) absence

- 4. Any portion of the curriculum that is missed in class/lab must be made up. Students must complete the full module in addition to making up missed hours. This assignment will be given to students by their instructor and must be completed and returned to instructor within a week.
- 5. Classroom and clinical hours missed must be made up on scheduled make-up days only. There is only one classroom makeup and one clinical makeup. (Evening course has 2 evening makeups and one clinical makeup)
- **6.** It is highly recommended that students do not miss any clinical hours unless extenuating circumstances, which include a death in the immediate family, or illness.
- 7. Any student that is sent home by the instructor will result in time missed.
- 8. More than 15 hours missed in the Nurse Aide I course will result in dismissal from the program, regardless of the circumstance. (Inclement weather, illness, child care, etc.)

<u>Completion of Course</u> There are four components to pass this course.

Classroom- tests 50%, Homework/worksheets 25%, Team presentation 25%=100%

 There are 4 tests and a final exam. Students must have an 80% average on the tests to go to clinical (there is one makeup test that can replace either test 1 or 2 to improve average to go to clinical) Students must also have an 80% average overall to pass this portion.
 Homework/worksheets as directed by the instructor

-Team presentation- is assigned by instructor with appropriate subject to demonstrate collaboration and teamwork by students.

- Lab-must demonstrate at least 80% proficiency for <u>each</u> of the skills in this handbook prior to clinical rotation without violating the principals of safety and infection prevention=100%
 Students have 3 attempts to successfully pass a skill return demonstration for the instructor.
 Completion of AHA CPR certification.
- 3. Clinical-must be able to provide safe and efficient care as demonstrated on clinical evaluations and Appendix A =100%

-Evaluations are done by the clinical instructor observing student in the performance in the clinical rotation.

4. State skill evaluation- must pass within 3 attempts=100%

-This evaluation of performance of 5 skills within a 30 minute time limit is to prepare the student for the NNAAP Examination.

Nurse Aide Registry After successful completion of AB-Tech's state approved Nurse Aide I program and in order to be placed on North Carolina's Nurse Aide I Registry, students will also have to take the NC Nurse Aide Registry written and skills competency exam. Initial cost for the state exam is \$120.00 which includes both written and skills. *Subject to change* Students may retest up to a total of three (3) times in either the written or skills exams. Each retest will cost extra. On the day of the exam, students (now candidates) are required to bring two (2) forms of official signature-bearing identification to the test site, one that must be a photo identification, and one that must be a US government-issued Social Security card. The names on all forms of identifications must match. Students must provide AB-Tech with a valid e-mail address (cannot be a work or school e-mail) prior to the last day of class. Upon satisfactory completion of the course, AB-Tech will send verification to Pearson Vue of who is eligible to take the NC state exam and then students will be contacted by e-mail and informed they can register for the exam.

I have read, understand and agree to comply with all the rules and regulations stated in this document.

Printed Name

Date

Signature

Witness Signature

Code of Student Conduct

The Board of Trustees establishes and maintains a learning environment that supports the students, the values, vision, and mission of the institution. There are behavioral expectations that outline the responsibilities and proper practices for all students at the College. When the Code of Conduct is challenged, the following types of discipline include but are not limited to: verbal warning, written warning, a failing grade for an assignment or exam, probation, administrative withdrawal from a course, restitution for damages, consequences adapted to the specific violation, suspension, expulsion or actions recommended by a Threat Assessment Team.

The President shall have final approval in the expulsion of a student.

Academically Related Violations

Academically related violations include academic integrity and other matters that have a negative impact on the teaching and learning environment.

Faculty members are responsible for ensuring the academic integrity of the College. Violations of academic integrity are considered serious offenses. Students are forewarned that some acts of academic dishonesty may result in action being taken by outside individuals or entities.

The following matters will be referred to the Vice President for Instructional Services or his or her designee:

- 1. **Plagiarism:** The intentional theft or unacknowledged use of another's words or ideas. Plagiarism includes, but is not limited to paraphrasing or summarizing another's words or works without proper acknowledgement; using direct quotes of material without proper acknowledgement; or purchasing or using a paper or presentation written or produced by another. If a student is uncertain about what constitutes plagiarism, he or she should discuss this with the class instructor.
- 2. **Cheating:** Cheating includes using notes or other material without permission from the faculty on an exam; receiving information from another student during an exam; obtaining a copy of an exam or questions from an exam prior to taking the exam; submitting someone else's work as one's own; or having someone else take one's exam and submitting it as his or her own.
- 3. Aiding Acts of Academic Dishonesty: Providing information to another student with the awareness that the student intends to use it for deceptive purposes.
- 4. **Violations of Normal Classroom Behavior** such as, but not limited to, being disobedient, showing disrespect, causing disruption of the classroom or not abiding by professional conduct. These behaviors are also considered academically related violations. The intent is to make sure that the learning environment is not compromised.

Non-Academic Related Violations

Non-Academically Related Violations of the Code of Student Conduct will be referred to the Vice President for Student Services or his or her designee. These violations include:

- 1. Alcoholic Beverages: Students may not possess or use alcoholic beverages on campus. Students may not be under the influence of alcoholic beverages on campus or at College-affiliated activities or events.
- 2. Animals: Students may not have an animal of any kind on campus. This includes animals left within a vehicle. Working dogs, such as police dogs and Seeing Eye dogs, are permitted.
- 3. Assault and/or Battery: Students may not strike or threaten to strike another person for any reason whatsoever. Threatening to strike another person is defined as assault, and striking another person is defined as battery.
- 4. **Bullying:** Students may not intimidate or threaten with harm any other individual. Bullying is defined as "any pattern of gestures or written, electronic or verbal communications, or any physical act or any threatening communication that takes place on College premises or at any College-sponsored function that: (a) places a person in actual and reasonable fear of harm to his or her person or damage to his or her property; or (b) creates or is certain to create a hostile environment by substantially interfering with or impairing a student's educational performance, opportunities or benefits, or a College employee's ability to perform the essential functions of his or her job."
- 5. Damage to Property: Students may not damage property of the College or of any other person working at or attending the College.
- 6. **Disobedience (Outside the classroom):** Students may not disobey the reasonable directions of College employees, including administrators, faculty members, security officers, and other staff employees.
- 7. **Disorderly Conduct (Outside the classroom):** Students may not conduct themselves in a way which will interrupt the academic mission of the College or which will disturb the peace of the College.
- 8. **Disrespect (Outside the classroom):** Students are expected to treat all College employees with respect and courtesy, particularly when and if disagreements arise.
- 9. **Disruption:** Students may not disrupt the normal activities of the College by physically or verbally interfering with instruction, meetings, traffic, or scheduled administrative functions.
- 10. **Drugs:** Students may not possess, use, or be under the influence of any narcotic or illegal drugs on campus or at any College-affiliated activities or event. This is in violation of the laws of the state of North Carolina or of the United States.
- 11. False Information: Students may not present to the College or its employees false information; neither may they knowingly withhold information, which may have an effect on their enrollment, or their status in the institution and which is properly and legally requested by the College.
- 12. Gambling: Students may not gamble on campus or at any College-affiliated activities or events.

- 13. Possession of Weapons: Students may not have a weapon of any kind, including a knife, stun gun, or any firearm in their possession on campus or at any College-affiliated activities or events. Law enforcement officers are exempt from this prohibition. This includes facsimiles of weapons.
- 14. **Public Laws:** Violations of any federal, state or local laws occurring while on campus may lead to legal actions as well as campus discipline. Violations of federal, state or local laws occurring off campus may result in disciplinary action if the student's continued presence on campus constitutes a threat to the safety and order of the campus.
- 15. Sexual and Other Unlawful Harassment: Students may not harass any member of the College community, including other students, cmployees, or other persons on the College campus. This prohibition includes sexual, verbal or physical harassment for any reason including race, color, religion, sex, national origin, disability, veteran's status, creed, sexual orientation, or political affiliation.
- 16. Skate Boards and Roller Skates: Skateboards and roller skates are not permitted to be used on campus.
- 17. Stalking: Students may not follow another individual in a threatening manner. Stalking is defined as the severe intrusions on a victim's personal privacy and autonomy. It includes, but is not limited to, a pattern of observing or monitoring the victim or committing violent or intimidating acts, regardless of the means, against the victim.
- 18. Theft: Students may not steal the property of another individual or of the College. Students who are caught stealing will be required to make restitution and may be eligible for civil or criminal prosecution as well as College discipline.
- 19. Threats: Students may not engage in any behavior that constitutes a clear and present danger to the physical and/or emotional wellbeing of the student and/or other students, faculty and staff.
- 20. Tobacco: Students may not use tobacco of any form on campus or at any College-affiliated activities or events.
- 21. Unauthorized Access to Records: Students may not access, view, copy or change official College records without official authorization to do so.
- 22. Use of the Internet: The College has an extensive policy for appropriate use of the Internet. Users of the College computers acknowledge the policy whenever they sign on. Students may not use the College's access to the Internet for access to sexually explicit material or for downloading music. Email accounts are provided for student use; however, no right of privacy exists for use of email.

Violations of the Code of Student Conduct

A student who violates the Code of Student Conduct may be referred to the Vice President for Instructional Services or his or her designee or to the Vice President for Student Services or his or her designee, depending on the nature of the violation. Students who have been charged with a violation of these regulations may be assigned consequences based upon the seriousness of the offense.

Violations of any federal, state or local laws occurring while on campus may lead to legal actions as well as campus discipline. Violations of federal, state or local laws occurring off campus may result in disciplinary action if the student's continued presence on campus constitutes a threat to the safety and order of the campus.

Sanctions for violations may include but not be limited to: verbal warnings, written warnings, a failing grade for an assignment or examination, administrative withdrawal from a course, restitution for damages, consequences adapted to the specific violation, suspensions, expulsions or actions recommended by a Threat Assessment Team.

The President shall have final approval in the expulsion of a student.

Threat Assessment

When a violation leads to a concern about the safety of a student or members of the College community, a Threat Assessment Team will review and make recommendations to the Vice President for Student Services or his or her designee prior to a hearing. If a student engages in criminal activity or demonstrates threatening behavior that constitutes a clear and present danger to the physical and/or emotional well-being of the student and/or other students, faculty and staff, the Vice President for Student Services or his or her designee may immediately suspend the student and remove him or her from campus for no more than 14 calendar days from the date the suspension is instituted, pending a hearing. In this situation, the Vice President for Student Services or his or her a copy of this policy, see the Vice President for Student Services.

For violations that do not require the implementation of the Threat Assessment Policy, the appropriate College administrator will review initial disciplinary referrals and may suspend a student for up to 10 College business days while the review is conducted. Students are allowed to appeal any disciplinary action, unless they have waived this right, and will be informed of their rights of due process. (See Student Due Process)

I HAVE READ, UNDERSTAND AND AGREE TO COMPLY WITH THE CODE OF STUDENT CONDUCT STATED IN THIS DOCUMENT.

Print Name

Signature

Date

Asheville Buncombe Technical Community College NA I Midway Clinical Evaluation

Student	Date	Total Points	2		
Directions: Use the following 5-point scale to rate student's performant	nce - student must have 30 points to	o successfully pa	ss clinic	<u>al</u>	
 10-20 points = Marginal- must improve 30-37 points = Meeting expectations 45-50 points = Exceeding expectations 	21-29 points = Not meeting expe 38-44 points = Easily meeting ex		to impro	ove	
Knowledge of NA I Skills Understands clinical assignment		1 2	3	4	5
Dependability		1 2	3	4	5
Productivity		2	3	4	5
Quality of Skills		2	3	4	5
Initiative Displays energy and determination in overcoming obstacles, solving problems and keeping the work flowing		2	3	4	5
Organizing & Planning Systematically plans time and clinical skills assignments resulting in minimal delays, waste and duplication of efforts		2	3	4	5
Judgment		2	3	4	5
Attendance Report any absence or reporting late to clinical		2	3	4	5
Works with Others (Patients/Students). Respectful, cooperative, communication effective and willingly assist		2	3	4	5
Respect of Facility Staff and/or Instructor Respectful, cooperative, communication effective and willingly assist		2	3	4	5
Recommendation for Improvement:					
				- 64 	
Instructor Signature	Date				
Student Comments (optional):					
*Student Signature *This signature does not mean that I agree or disagree, only that	Date t I have read the form				

Asheville Buncombe Technical Community College Warning Conference/Documentation

Student Name:	Date:
Instructor Name	Course
This report is a (choose one)Warning Document appropriate issues and give specific details such as date(s) a	nd time along with location.
I have read and understand that the above warning can result in	dismissal from program depending on severity
or number of hours/tardies missed. Student Signature	Date
Make-Up Time and Conte	
Date of make up time Hours made up	
Instructor:	Modules Missed:
	Modules Made Up:

Chronic Obstructive Pulmonary Disease Diagnosis **Regular** breathing pattern Goal Signs/Symptoms **NAI** Interventions

Group:

Members:

30

Group: ____ Members: __

Pneumonia	Diagnosis
No Infection	Goal
	Signs/Symptoms
	NAI Interventions

31

Group: ____ Members: ___

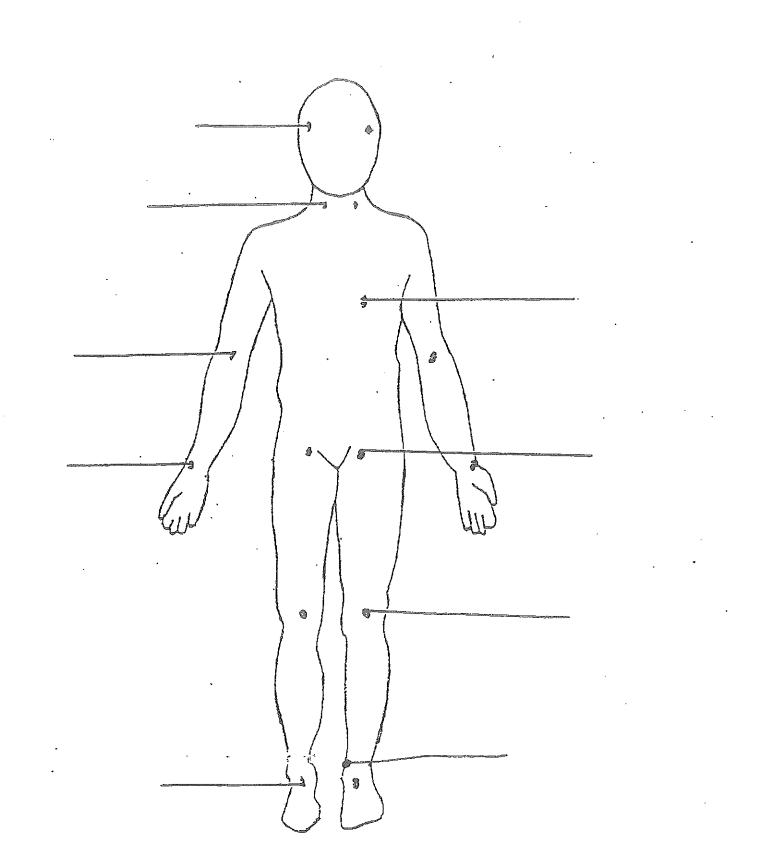
Urinary Tract Infection	Diagnosis
 No Infection	Goal
	Signs/Symptoms
	NAI Interventions

Group: ____ Members: ____

E P	Diagnosis Congestive Heart
breath Regular heart rate	Goal No shortness of
	Signs/Symptoms
	NAI Interventions

Pulses

Label the pulses.



VITAL SIGN RANGE QUIZ

Write in the normal ranges for each of the following vital signs:

Normal Blood Pressure Range:

Systolic Range: _____

Diastolic Range: ______

Normal Pulse Range (Adult):

to _____

Normal Oral Temperature Range (Adult):

_____ to _____

Normal Respiratory Range (Adult):

_____ to _____

Abbreviations Practice Sheet

AC
ADL
АМВ
AS
BE
bilat
BM
BPM
BW
C&S
CABG
CBC
BS
CHF
COPD
СРАР
CPR
CVA
DAT
DM
DX
FBS
Fx
GU

_

НА	НОВ
HR	HS
HTN	Hx
I&O	IDDM
L	R
LOC	MI
MRSA	NAS
NIDDM	NG
NKA	NPO
ООВ	02
PC	PO
POD	PRN
PR	Pt
РТ	q
qd	qod
qid	q4h/q6h
ROM	PROM
s	TB
TIA	tid
UA	UTI
WNL	

Military Time Conversion Practice Sheet

 Convert TO Military Time:

 8:00AM _____

 9:00AM _____

 7:00PM _____

 10:07PM _____

 12:00PM _____

 12:34AM _____

 3:45PM _____

 11:30AM _____

 Convert FROM Military Time:

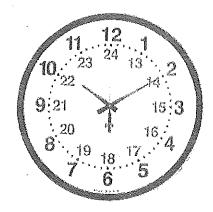
 0400
 1837

 1222
 1523

 1900
 2359

 0008
 1427

 0000
 0730



Calculation Quiz

- 1. 1ml = ____ cc
- 2. 5ml = ____ tsp
- 3. 30ml = ____ oz
- 4. 4oz = ____ml
- 5. 240ml = ____ oz
- 6. Mrs. Jones is given 8oz of water on her lunch tray, but she only drinks half. How many ml's does the CNA document that Mrs. Jones drank?

4oz 240ml 120ml 8oz

7. Mr. Smith is on a regular diet. When the CNA brings in his lunch tray, he eats ¾ of his food. The CNA would record that Mr. Smith ate what percentage of his lunch?

10% 25% 100% 75%

8. The CNA gives Mrs. Jones a container of milk. The total amount of milk in the container is 120ml. How many ml's would the CNA record if Mrs. Jones drank 1/3 of the milk?

4oz 40ml (60ml	120ml
------------	------	-------

Important Points to Remember

AWIPES	A -Assemble Equipment
--------	-----------------------

W -Wash Hands

I –Identify yourself with title and Identify resident/patient

P – Provide Privacy

E-Explain Procedure and Obtain Permission

S- Safety Raise bed; Lock Wheels

• Intake and Output 30cc/ml=1 oz

Review fractions and know how to calculate. Calculators may not be used in classroom

• Vitals Signs

-Blood Pressure

-Systolic Pressure- heart is contacting- first sound heard

Normal 91-139

Hypertension >140; Hypotension <90

-Diastolic pressure- heart is resting- sound disappears or changes

Normal 60-90

-Heart Rate- pulse- thumb side of wrist is Radial pulse

-60-100 beats per minute (adult)

Tachycardia >100 beats per minute

Bradycardia< 60 beats per minute

Pulse should be regular; Count for 1 full minute

Apical pulse is used with stethoscope on chest (if pt on heart meds or if infant)

-Respirations- one inhalation and one expiration

-12-20 breaths per minute (adult)

-Pt should not be aware of you counting resp.

- Counted while you still have fingers on pulse site

- Count for 1 full minute

- should be unlabored and even

Temperature- 98.6 (97.6-99.6) normal

-Rectal temperature is most accurate. (99.6) normal
-Axillary temp. is the least accurate (97.6)
-Confused or disoriented pt. avoid rectal and oral temp
Study and know abbreviations
Study and know standard precautions
Study and know safety measures for yourself and pt.
Review procedures daily and follow guidelines for state testing
Know when, how and what to document

APPENDIX A

SKILL PERFORMANCE CHECKLISTS SUMMARY

All information should be completed as directed and kept in student file for a minimum of 3 years.

DIRECTIONS FOR USE OF THE SKILL PERFORMANCE CHECKLISTS SUMMARY

- <u>Column A:</u> The instructor must teach and demonstrate all 49 skills on this list. Use the top of the diagonal for date of demonstration and the bottom of the diagonal for the instructor's initials.
- <u>Column B:</u> The student must demonstrate lab proficiency in all *starred skills*. Use the top of the diagonal for the date of the student's return demonstration and the bottom of the diagonal for the instructor's initials. Non-starred and school specific skills may be performed in the clinical setting but must first be proficiency checked in the lab.
- <u>Column C:</u> The student must perform a minimum of 15 starred skills in clinical. Use the top of the diagonal for date of demonstration and the bottom of the diagonal for the instructor's initials. In Skills 13, 18, 19, 24, 25 and 31, not all components of the skill may be available. In these cases, circle the skill component(s) completed in the clinical setting.

	Skill Performance Checklists	Column A Date Demonstrated by Instructor	Column B Date Proficiency Verified in Lab	Column C Date Performed in Clinical
	Personal Care Skills	Per	ormance Summar	у
*	1. Providing complete/partial bed bath			
*	2. Dressing and undressing			
*	3. Giving perineal care			
*	4. Making an occupied bed			
*	5. Providing foot care			
*	6. Providing fingernail care			
*	7. Providing mouth care			
*	8. Providing mouth care for unconscious resident			
*	 Providing mouth care for cognitively impaired resident 			
*	10. Assisting with denture care			
	11. Assisting with oral hygiene			
*	12. Assisting resident with shaving			
*	13. Providing hair care; includes shampooing as needed			

	Skill Performance Checklists	Column A Date Demonstrated by Instructor	Column B Date Proficiency Verified in Lab	Column C Date Performed in Clinical
*	14. Giving tub bath or shower (per clinical environment)			
	15. Providing back rub			
	Infection Prevention and Control	Perl	formance Summar	у
⋪	16. Providing hand hygiene			
*	17. Putting on & taking off complete PPE (Gowns, gloves, masks)			
	Measurements	Perl	formance Summar	у
*	 Measuring and recording combined vital signs (manual BP, radial pulse, respirations, oral non- mercury glass thermometer) 			
*	19. Measuring and recording height and weight (balance scale)			
	20. Measuring and recording axillary temperature (non- mercury glass thermometer)			
	21. Measuring and recording rectal temperature (non- mercury glass thermometer)			
	22. Measuring and recording temperature (electronic or tympanic)			
	Elimination	Peri	formance Summar	у
*	23. Collecting routine urine specimen			
*	24. Assisting with use of bedpan/urinal and measuring and recording output			
*	25. Providing catheter care and emptying urinary drainage bag			
	26. Placeholder			
	27. Placeholder			
	28. Collecting stool specimen			
	29. Applying and caring for condom catheters			
	30. Administering cleansing enema			
	Hydration and Nutrition	Perf	ormance Summar	у
*	31. Assisting with dining/feeding resident who cannot feed self and measuring and recording intake			
*	32. Performing relief of choking			
	Mobility	Perf	ormance Summar	У
*	 Performing range of motion exercises (active ROM, passive ROM) 			
*	34. Transferring from bed to wheelchair/chair			
*	35. Moving up in bed using turning sheet and positioning resident on side			

	Skill Performance Checklists	Column A Date Demonstrated by Instructor	Column B Date Proficiency Verified in Lab	Column C Date Performed in Clinical
*	36. Assisting with ambulation			
*	37. Applying restraints			
★	38. Assisting to dangle, stand and walk			
	39. Placeholder			
	40. Using mechanical lift (per clinical environment)			
	41. Transferring from bed to stretcher (per clinical environment)			
	42. Assisting to move up in bed			
	Treatment	Perl	ormance Summar	у
*	43. Applying anti-embolism (Elastic) stockings			
	44. Applying warm or cold applications			
	45. Applying elastic bandages			
	46. Assisting with coughing and deep breathing			
	47. Applying non-sterile dressing			
	48. Performing post-mortem care			
	School Specific	Pei	formance Summary	
★	49. Changing an adult brief			
	School specific skill			

Initials	Instructor's Name

Instructor's Name

Name:__

Procedure 0: <u>Beginning and Ending Procedure</u>

Equipment: None

Beginning the procedure: K.E.E.P.

- _____ 1. **K: K**nock on the door before entering the room.
 - 2. E: Explain the procedure or skill and obtain the resident's permission
- _____ 3. E: Collect the Equipment required for the procedure
- 4. **P:** Provide **P**rivacy per facility policy privacy curtain, door, etc.

Ending the procedure: E.L.I.SA.

- _____ 1. E: Clean Equipment and put away where it belongs
- 2. L: Collect Linen and place in dirty linen container, making sure dirty linen does not touch the floor or your clothing
- 3. I: Maintain Infection control by washing your hands or using alcohol based hand cleanser.
- 4. SA: Maintain patient SA fety by lowering the bed to a safe level, and making sure the call bell is within reach of the resident.

Signature Date Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:___

Procedure 1: Providing Complete/Partial Bed Bath

Equipment: Wash basin; gloves; soap; washcloths; towels; clean gown; soiled linen container.

In clinical environment: Offer elimination assistance and mouth care prior to beginning bed bath

Gives Modified Bed Bath (Face and One Arm, Hand, and Underarm)

1. Explain procedure, speaking clearly, slowly and directly, and maintaining face-to-face contact whenever possible.
2. Privacy is provided with curtain, screen or door.
3. Remove gown and places directly in soiled linen container while ensuring client's chest and lower body is covered.
4. Before washing, checks water temperature for safety and comfort, and asks client to verify comfort of water.
5. Put on clean gloves before washing client.
6. Beginning with eyes, washes eyes with wet washcloth (no soap), using a different area of the washcloth for each stroke, washing from inner aspect to outer aspect. Then proceeds to wash face.
7. Dries face with dry cloth towel/washcloth.
8. Exposes one arm and places towel underneath arm.
9. Applies soap to wet washcloth
10. Washes fingers (including fingernails), hand, arm, and underarm keeping rest of body covered
11. Rinses and dries fingers, hand, arm, and underarm
12. Move body gently and naturally, avoiding force and over-extension of limbs and joints.
13. Puts clean gown on the client.
14. Empties rinses and dries basin.
15. Places basin in designated dirty supply area
16. Disposes of linen into soiled linen container.
17. Avoids contact between candidate clothing and used linens
18. Removes and disposes of gloves (without contaminating self) into waste container and washes hands
19. Signaling device within reach and bed is in low position.
In clinical environment: Repeat steps 8 - 11 for other arm, torso, abdomen, both legs, back and buttocks.

Date

Student has demonstrated the steps in this procedure with an 80% accuracy.

Procedure 2: DRESSES CLIENT WITH AFFECTED (WEAK) RIGHT ARM

Equipment: Clothing selected by client.

Dressing client with an affected (weak) right side.

1.	Explains procedure, speaking clearly, slowly, and directly, maintaining face-to face contact whenever possible.
2.	Privacy is provided with a curtain, screen, or door.
3.	Asks which shirt he/she would like to wear and dresses him/her in shirt of choice
4.	Avoids overexposure of client by ensuring client's chest is covered
5.	Removes gown from the left (unaffected) side first, then removes gown from the right (affected/weak) side.
6.	Before dressing client, disposes of gown into soiled linen container.
7.	Assists to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm.
8.	While putting on shirt, moves body gently and naturally, avoiding force and overextension of limbs and joint
9.	Finishes with clothing in place.
10	Signaling device is within reach and bed is in low position.
11	After completing skill, washes hands
In clinical en	vironment, repeat steps 4 - 8 with rest of clothing

Reverse procedure to undress

Signature			
Student has demonstrated the	steps in this procedure	e with an 80%	accuracy.

Procedure 3:	PROVIDES PERINEAL CARE (PERI-CARE) FOR FEMALE
Equipment:	Wash basin; soap; washcloths; towels; linen protector; soiled linen container.
Provides Perine	eal Care (Peri-Care) for Female and Male
1.	Explains procedure, speaking clearly, slowly, and directly, maintaining face-to face contact whenever possible 2. Privacy is provided
with a curtain	, screen, or door.
3.	Before washing, check water temperature for safety and comfort and asks client to verify comfort of water 4. Puts on clean gloves
before washir	ng perineal area.
5.	Place pad/linen protector under perineal including buttock area before washing.
6.	Exposes perineal area (only exposing between hips and knees)
7.	Apply soap to wet washcloth.
8.	Washes genital area, moving from front to back, while using a clean area of the washcloth for each stroke 9. Using clean
washcloth, ri	inse soap from genital area, moving from front to back, while using a clean area of
	the washcloth for each stroke.
10.2	Dries genital area moving from front to back with dry cloth towel/washcloth.
11	After washing genital area, turns to side, then washes and rinses rectal area moving from front to back using a clean
	area of washcloth for each stroke.
12.	Using clean washcloth, rinses soap from rectal area, moving from front to back, while using a clean area of the
	washcloth for each stroke
13.2	Dries rectal area moving from front to back with dry cloth towel/washcloth
14.2	Repositions client
15.2	Empties, rinses, and dries basin
16.	Places basin in designated dirty supply area.
17.1	Disposes of used linen into soiled linen container and disposes of linen protector appropriately
18.	Avoids contact between candidate clothing and used linen
19.	Removes and disposes of gloves (without contaminating self) into waste container and washes hands
2	20. Signaling device is within reach and bed is in low position
For male: I	f the resident is uncircumcised, pull back foreskin. Hold penis by the shaft wash in a circular motion from tip down to
base. Use c	clean area of washcloth for each stroke. Thoroughly rinse the penis and pat dry. Then wash the scrotum and groin.
Rinse thore	bughly and pat dry. Then turn resident to the side, using a clean washcloth wash, rinse, dry the buttocks and anal area.

Name:___

Student has demonstrated the steps in this procedure with an 80% accuracy.

Date

SKILL PERFORMANCE CHECKLIST

Name:

Procedure 4: <u>Making Occupied Bed</u>

Equipment: Fitted sheet; draw sheet; linen protectors; flat sheet; pillowcase(s); bath blanket or equivalent if desired.

- _____ 1. K.E.E.P.
- 2. Assist client to move onto their side toward raised side rail.
- 3. Loosen soiled bottom sheet and roll toward client, tucking in snugly against the client's back.
- 4. Place and tuck in clean bottom sheet on working side and tuck under client.
- 5. Raise side rail nearest you and assist client to move onto clean bottom sheet and then go to other side of the bed.
- 6. Lower side rail and remove soiled bottom linen.
- 7. Pull and tuck in clean bottom sheet, draw sheet, and linen protectors, finishing with all bottom linen free of wrinkles.
- _____ 8. Cover client with clean top sheet.
- _____ 9. Change pillowcase(s).
- _____ 10. E.L.I.SA.

Signature Date *Student has indicated their understanding of the steps in this procedure with an 80% accuracy.*

Procedure 5: <u>Providing Foot Care</u>

Equipment: Wash basin; protective barrier; soap; lotion; washcloth(s); bath towels;

Provides Foot Care on One Foot

- 1. Explain procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
- _____ 2. Provide privacy with a curtain, screen, or door.
- 3. Before washing, check water temperature for safety and comfort and asks client to verify comfort of water.
- 4. Basin is in a comfortable position for client and on protective barrier.
- _____ 5. Put on clean gloves before washing foot.
- _____ 6. Client's bare foot is placed into water
- _____ 7. Applies soap to wet washcloth
- 8. Lifts foot from water and washes foot (including between the toes).
- 9. Foot is rinsed (including between the toes)
- _____ 10. Dries foot (including between the toes) with dry cloth towel/washcloth
- _____ 11. Applies lotion to top and bottom of foot (excluding between the toes) removing excess with a towel/washcloth
- _____ 12. Support foot and ankle during procedure.
- _____ 13. Empties rinses and dries basin.
- _____ 14. Places basin in designated dirty supply area
- _____ 15. Disposes of used linen into soiled linen container.
- _____ 16. Removes and disposes of gloves (without contaminating self) into waste container and washes hand
- _____ 17. Signaling device is within reach.

(Repeat with other foot)

Signature

Date

Student has demonstrated the steps in this procedure with an 80% accuracy.

Name:___

Procedure 6: Providing Fingernail Care

Equipment: Emesis basin; orangewood stick; emery board; towel.

- _____ 1. K.E.E.P.
 - 2. Before immersing fingernails, check water temperature for safety and comfort and ask client to verify comfort of water.
- 3. Place basin in a comfortable position for client on a protective barrier.
- 4. Put on clean gloves before cleaning fingernails.
- _____ 5. Immerse fingernails in basin of water.
- _____ 6. Clean under each fingernail with orangewood stick.
- 7. Wipe orangewood stick on towel after each nail.
- _____ 8. Dry fingernail area.
- _____ 9. Feel each nail and file as needed.

_____ 10. Place orangewood stick and emery board into designated container.

_____ 11.E.L.I.SA.

Signature Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Procedure 7: <u>Providing Mouth Care</u>

Equipment: Toothbrush; toothpaste; emesis basin; disposable cup; clothing protector.

Provides Mouth Care

- _____ 1. Explains procedure, speaking clearly, slowly and directly, and maintaining face-to-face contact whenever possible.
- _____ 2. Privacy is provided with a curtain, screen, or door.
- 3. Before providing mouth care, client is in upright sitting position (75 90 degrees).
- _____ 4. Puts on clean gloves before cleaning mouth.
- 5. Places cloth towel across chest before providing mouth care
- _____ 6. Secures cup of water and moistens toothbrush.
- 7. Before cleaning mouth, applies toothpaste to moistened toothbrush.

8. Cleans mouth (including tongue and surfaces of teeth), using gentle motions.

- 9. Maintains clean technique with placement of toothbrush.
- 10. Candidate holds emesis basin to chin while client rinses mouth.
- _____ 11. Candidate wipes mouth and removes clothing protector.
- 12. Disposes of used linen into soiled linen container.
- _____ 13. Rinses toothbrush and empties, rinses, and dries basin
- 14. Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- _____ 15. Signaling device is within reach and bed is in low position.

Signature Student has demonstrated the steps in this procedure with an 80% accuracy.

Name:

Procedure 8: <u>Providing Mouth Care For Unconscious Resident</u>

Signature

Date

Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:_____

Procedure 9: <u>Providing Mouth Care For Cognitively Impaired Resident</u>

Equipment: Toothette or toothbrush and toothpaste; emesis basin; disposable cup; towel.

- _____ 1. Follow Procedure 7 Providing Mouth Care steps 1-7
- ______ 2. Clean entire mouth, including tongue and all surfaces of teeth while explaining actions in specific detail
 - 3. Follow Procedure 7 Providing Mouth Care steps 9-16

Signature

Date

Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:__

Procedure 10: Assisting With Denture Care

Equipment: Dentures; denture brush; toothbrush; denture cleaner.

Cleans Upper or Lower Denture

- 1. Puts on clean gloves before handling denture.
- 2. Bottom of sink is lined and/or sink is partially filled with water before denture is held over sink.
- 3. Rinses denture in moderate temperature running water before brushing them.
- _____ 4. Applies denture toothpaste to toothbrush.
- 5. Brushes surfaces of denture.
- 6. Rinses all surfaces of denture under moderate temperature running water.
- _____ 7. Rinses denture cup and lid.
- 8. Places denture in denture cup with moderate temperature water/solution and places lid on cup.
- 9. Rinses toothbrush and places in designated toothbrush basin/container.
- _____ 10. Maintains clean technique with placement of toothbrush and denture.
- _____ 11. Sink liner is removed and disposed of appropriately and /or sink is drained.
- _____ 12. Removes and disposes of gloves (without contaminating self) into waste container and washes hands.

Signature

Student has demonstrated the steps in this procedure with an 80% accuracy.

Procedure 11: Assisting With Oral Hygiene

Equipment: Toothbrush; toothpaste; emesis basin or sink; disposable cup; towel.

_____ 1. Follow Procedure 7 steps 1-7

_____ 2. Client performs own mouth care (student may verbalize this in lab)

_____ 3. Follow Procedure 7 steps 9-16

Signature

Date

Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:___

Procedure 12:Assisting Resident With ShavingEquipment:Safety razor; shaving cream; towel; aftershave (if desired)._______1K.E.E.P.______2Spread towel under chin.______3Moisten face with warm water and apply shaving cream.______4Hold skin taut and shave in direction that hair grows.______5Start under sideburns, in front of ear, and work downward over cheek toward chin.______6Shave chin and under nose carefully. Work upward on neck under chin.______6Kash off remaining shaving cream when finished._______8E.L.I.SA.

Signature Date *Student has indicated their understanding of the steps in this procedure with an 80% accuracy.*

SKILL PERFO	ORMANCE CHECKLIST Name:		
Procedure 13:	: Providing Hair Care; Includes Shampooing As Needed		
Equipment:	Towel(s); comb and/or brush; gloves; dry shampoo; washcloth;	bath blanket (if desired).	
1.	K.E.E.P.		
2.	Part or section hair and comb with one hand placed between sca	lp and end of hair.	
3.	Brush gently.		
4.	Remove towel and dispose in soiled linen container.		
5.	E.L.I.SA.		

 Signature
 Date

 Student has indicated their understanding of the steps in this procedure with an 80% accuracy.
 Date

SKILL PERFO	RMANCE CHECKLIST Name:
Procedure 14:	<u>Giving Tub Bath or Shower (Per Clinical Environment)</u>
Equipment:	Soap; washcloth(s); towel(s); shower chair; clean clothing.
1.	K.E.E.P.
2.	Instructor provides example of clothing & toiletries used in shower room
3.	Instructor describes control of handheld shower head and to ensure water is a comfortable temperature for the client
4.	Instructor describes how to use shower chair as needed.
5.	Instructor describes drying and dressing
6.	E.L.I.SA.

Signature Instructor has demonstrated skill on this date

Name:___

Procedure 15:	Providing Backrub
Equipment:	Towel; lotion.
1.	K.E.E.P.
2.	Position client in prone or side-lying position.
3.	Position towel on bed next to back.
4.	Expose, wash, and dry back. Examine for pressure areas. Do not massage reddened areas.
5.	Put small amount of lotion in your hands and apply to back.
6.	Stroke upward from base of spine to neck, around shoulders and down sides of back and buttocks for 3 to 5 minutes using circular motions and long, smooth, firm strokes.
7.	Straighten and tighten bottom sheet, pull up top linen and remove bath blanket without exposing client.
8.	E.L.I.SA.

 Signature
 Date

 Student has indicated their understanding of the steps in this procedure with an 80% accuracy.
 Date

Signature

SKILL PERFORMANCE CHECKLIST

Procedure 16: <u>HAND HYGIENE (HAND WASHING)</u>

Equipment:	None
Hand Hygien	e (Hand Washing)
	1. Address client by name and introduces self to client by name
	2. Turns on water at sink.
	3. Wets hands and wrists thoroughly.
	4. Applies soap to hands.
	5. Lather all surfaces of wrists, hands, and fingers producing friction, for at least twenty (20) seconds, keeping hands lower than the elbows and the fingertips down
	6. Clean fingernails by rubbing fingertips against palms of the opposite hand.
	7. Rinse all surfaces of wrists, hands, and fingers keeping hands lower than the elbows and the fingertips down.
	8. Uses clean, dry paper towel/towels to dry all surfaces of fingers, hands, and wrists starting at fingertips then disposes of paper towel/ towels into waste container
	9. Uses clean, dry paper towel/towels to turn off faucet then disposes of paper towel/towels into waste container or uses knee/foot control to turn off faucet.
	10. Does not touch inside of sink at any time

Student has demonstrated the steps in this procedure with an 80% accuracy.

When using an alcohol-based hand rub, the hands must be rubbed together until the product has completely dried.

Name:____

Name:__

Procedure 17: DONNING AND REMOVING PPE (GOWN AND GLOVES)

Equipment: Mask and/or face shield; goggles; gown; gloves; designated container for disposal.

In clinical setting: Perform skill in facility designated area away from bedside.

Donning and Removing PPE (Gown and Gloves)

1. Picks up gown and unfolds.
2. Facing the back opening of the gown places arms through each sleeve.
3. Fastens the neck opening.
4. Secures gown at waist making sure that back of clothing is covered by gown (as much as possible).
5. Puts on gloves.
6. Cuffs of gloves overlap cuffs of gown.
7. Before removing gown, with one gloved hand, grasps the other glove at the palm, remove glove.
8. Slips fingers from ungloved hand underneath cuff of remaining glove at wrist, and removes glove turning it inside out as it is removed.
9. Disposes of gloves into designated waste container without contaminating self.
10. After removing gloves, unfastens gown at waist and neck
11. After removing gloves, removes gown without touching outside of gown.
12. While removing gown, holds gown away from body without touching the floor, turns gown inward and keeps it inside out.
13. Disposes of gown in designated container without contaminating self.
14. After completing skill, washes hands.

Signature Student has demonstrated the steps in this procedure with an 80% accuracy.

Revised June 2018

SKILL PERFORMANCE CHECKLIST

Procedure 18: Measuring And Recording Combined Vital Signs (Manual BP, Radial Pulse, Respirations, Oral Non-Mercury Glass Thermometer)

Equipment: Oral non-mercury glass thermometer; protective cover/sheath; watch with second hand; stethoscope; blood pressure cuff; alcohol wipes; pen and paper.

Oral Temperature

1.	K.E.E.P.
2.	Shake down thermometer to 96 degrees F or lower.
3.	Place thermometer in protective cover/sheath.
4.	Student verbalizes how to insert bulb end of thermometer into client's mouth, under tongue and to one side.
5.	Remove and dispose of protective cover/sheath in waste basket without contaminating self.
6.	Obtain temperature reading.
7.	E.L.I.SA

Signature Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:_____

Signature Student has demonstrated the steps in this procedure with an 80% accuracy.

Mercury Glass Thermometer) (continued)

Counts and Records Radial Pulse

SKILL PERFORMANCE CHECKLIST

1. Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible

Procedure 18: Measuring And Recording Combined Vital Signs (Manual BP, Radial Pulse, Respirations, Oral Non-

_____ 2. Places fingertips on thumb side of client's wrist to locate radial pulse.

3. Count each beat for one full minute.

- _____ 4. Signaling device is within reach.
- _____ 5. Before recording, washes hands.
- 6. Records pulse rate within plus or minus 4 beats of evaluator's reading.

Date

Name:

Name:_____

Date

<u>Procedure 18:</u> Measuring And Recording Combined Vital Signs (Manual BP, Radial Pulse, Respirations, Oral Non-Mercury Glass Thermometer) (continued)

Counts and Records Respirations (for testing purposes only)

- 1. Explains procedure (for testing purposes, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- _____ 2. Counts respirations for one full minute
- _____ 3. Signaling device is within reach
- _____ 4. Before recording, washes hands
- 5. Records respiration rate within plus or minus 2 breaths of evaluator's reading

Signature	
Student has demonstrated the steps in this procedure	e with an 80% accuracy.

Name:_

<u>Procedure 18:</u> Measuring And Recording Combined Vital Signs (Manual BP, Radial Pulse, Respirations, Oral Non-Mercury Glass Thermometer) (continued)

Measures and Records Blood Pressure

- _____ 1. Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
 - 2. Before using stethoscope, wipes bell/diaphragm and earpieces of stethoscope with alcohol.
- 3. Client's arm is positioned with palm up and upper arm is exposed.
- 4. Feels for brachial artery on inner aspect of arm, at bend of elbow.
- 5. Places blood pressure cuff snugly on client's upper arm, with sensor/arrow over brachial artery site.
- _____ 6. Earpieces of stethoscope are in ears and bell/diaphragm is over brachial artery site.
 - 7. Candidate inflates cuff between 160 mm Hg to 180 mm Hg. If beat heard immediately upon cuff deflation, completely deflate the cuff. Re-inflate cuff to no more than 200 mm Hg.
 - 8. Deflates cuff slowly and notes the **first** sound (systolic reading), and **last** sound (diastolic reading). (If rounding needed, measurements are rounded **UP** to the nearest 2 mm of mercury.)
- _____ 9. Removes cuff.
- _____ 10. Signaling device is within reach.
- _____ 11. Before recording, washes hands.
 - 12. After obtaining reading using BP cuff and stethoscope, records both systolic and diastolic pressures each within plus or minus 8 mm of evaluator's reading.

Signature *Student has demonstrated the steps in this procedure with an 80% accuracy.*

Name:_

Procedure 19: MEASURES AND RECORDS WEIGHT OF AMBULATORY CLIENT

Equipment: Balance scale; pen and paper.

Measures and Records Weight of Ambulatory Client

- 1. Explain procedure to client, speaking clearly, slowly and directly, and maintaining eye contact whenever possible.
- _____ 2. Client has non-skid shoes/footwear on before walking to scale
- 3. Before client steps on scale, candidate sets scale to zero
- 4. Asks client to step on center of scale and obtains client's weight
- _____ 5. Asks client to step off scale
- _____ 6. Before recording, washes hands

7. Records weight based on indicator on scale. Weight is within plus or minus 2 lbs of evaluator's reading (If weight recorded in kg weight is within plus or minus 0.9 kg of evaluator's reading)

Signature Student has demonstrated the steps in this procedure with an 80% accuracy.

For Height: Do above steps #1 & 2. Help the resident to step onto scale facing away from the scale. Ask resident to stand straight if possible. Pull the measuring rod from the back of the scale & gently lower the rod until it rests flat on the residents head. Determine the reidents height. Help the resident to safely step off scale before washing hands and recording height.

SKILL PERFO	RMANCE CHECKLIST Name:
Procedure 20	<u>Measuring and Recording Axillary Temperature (Non-Mercury Glass Thermometer)</u>
Equipment:	Non-mercury glass thermometer; protective sheath; pen and paper.
1.	K.E.E.P.
2.	Student identifies correct placement of non-mercury glass thermometer for measuring axillary temperature.
3.	E.L.I.SA.
Signature	Date

Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

SKILL PERFOR	RMANCE CHECKLIST Name:
Procedure 21:	Measuring And Recording Rectal Temperature (Non-Mercury Glass Thermometer)
Equipment:	Rectal non-mercury glass thermometer; tissues; lubricating jelly; pen and paper.
1.	K.E.E.P.
2.	Assist the client to the (Sim's) position.
3.	Eexpose only the rectal area.
4.	Apply small amount of lubricant to tip of probe or probe cover.
5.	Separate the buttocks and gently insert the thermometer into rectum 1 inch. Stop if you meet resistance.
6.	Replace linen over buttocks while holding on to the thermometer.
7.	Hold thermometer in place for 5 minutes Never let go of thermometer.
8.	E.L.I.SA.

 Signature
 Date

 Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:

Procedure 22: Measuring And Recording Temperature (Electronic Or Tympanic)

Equipment: Electronic thermometer; appropriate probe (blue-oral/axillary and red-rectal); tympanic thermometer; disposable probe covers; lubricating jelly for rectal probe; alcohol/disinfectant; pen and paper.

Note: Follow manufacturer's directions that accompany each type of brand of thermometer to ensure correct usage.

1. K.E.E.P. (Procedure 0.1: Beginning of skill)

Electronic oral, axillary, or rectal thermometer

2. Student verbalizes how to insert covered probe into mouth, axilla, rectum. Probe should be lubricated for rectal temperature.

Tympanic thermometer

- _____ 3. Position client's head so that the ear is in front of you.
 - 4. Straighten the ear canal by pulling up and back on the outside edge of the ear.
 - 5. Insert the covered probe into the ear canal and press the button.
- _____ 6. Remove probe
- 7. Eject and discard probe cover in designated waste container. Do not touch probe cover.
- _____ 8. E.L.I.SA.

 Signature
 Date

 Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

SKILL PERFO	RMANCE CHECKLIST Name:
Procedure 23:	<u>Collecting Routine Urine Specimen</u>
Equipment:	Clean bedpan with cover/urinal/toilet hat; specimen container with lid; label; leak-proof transport bag.
*Note There mu	st be no feces in sample. Equipment used to void into must not have been previously used.
1.	Follow Procedure 25: Emptying Urinary Drainage Bag steps 1-5
2.	Place container on a protective barrier (paper towel) in bathroom with lid off, on a clean surface. Inside of lid should be facing up.
3.	Without touching inside of container or lid, pour urine into container until it is at least half full and cover securely with lid.
4.	Place specimen container in leak-proof transport bag.
5.	Follow Procedure 25: Emptying Urinary Drainage Bag steps 6-7
Follow facili	ty policy for requisition documentation and transport to the lab.

 Signature
 Date

 Student has indicated their understanding of the steps in this procedure with an 80% accuracy.
 Date

Procedure 24: <u>Assisting With Use Of Bathroom, Bedside Commode, Bedpan, Urinal, and Measure And Recording</u> <u>Urinary Output</u>

Equipment: Bathroom/bedside commode/urinal with cover/bedpan with cover; gloves.

Bathroom and Bedside Commode

- _____ 1. K.E.E.P.
- 2. Adjust clothing so client is able to sit comfortably on toilet/bedside commode.
- 3. Place toilet tissue and call signal within reach and ask client to signal when they are finished.
- 4. Leave room if client can be safely left alone or stay if necessary.
- _____ 5. Watch for call signal and respond promptly.
- 6. Upon returning to room, wash hands and put on clean gloves.
- _____ 7. Assist client to wash their hands.
- 8. Assist client to bed or chair and remove robe and footwear as indicated.
- _____ 9. E.L.I.SA

Assists With Use of Urinal

_____1. Follow directions for Assists With Use of Bedpan

Signature

Date

Student has verbalized their understanding of the steps in this procedure with an 80% accuracy.

Name:_____

Name:___

Procedure 24: Assisting With Use Of Bathroom, Bedside Commode, Bedpan, Urinal, and Measure And Recording Urinary Output (continued)

Assists With Use of Bedpan

- 1. Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
- _____ 2. Privacy is provided with a curtain, screen, or door.
- _____ 3. Before placing bedpan, lowers head of bed
- _____ 4. Puts on clean gloves before placing bedpan under client
- _____ 5. Places bedpan correctly under client's buttocks
- 6. Removes and disposes of gloves (without contaminating self) into waste container and washes hands.
- _____ 7. After positioning client on bedpan and removing gloves, raises head of bed.
- 8. Toilet tissue is within reach.
- 9. Hand wipe is within reach and client is instructed to clean hands with hand wipe when finished
- 10. Signaling device is within reach and client is asked to signal when finished
- _____ 11. Puts on clean gloves before removing bedpan
- _____ 12. Head of bed is lowered before bedpan is removed
- 13. Ensures client is covered except when placing and removing bedpan
- _____ 14. Empties and rinses bedpan and pours rinse into toilet
- _____ 15. Places bedpan in designated dirty supply area
- _____ 16. Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- _____ 17. Signaling device is within reach and bed is in low position.

Date

Student has demonstrated the steps in this procedure with an 80% accuracy.

Name:____

Procedure 24: Assisting With Use Of Bathroom, Bedside Commode, Bedpan, Urinal, and Measure And Recording Urinary Output (continued)

Measures and Records Urinary Output

- _____ 1. Puts on clean gloves before handling bedpan
- 2. Pours the contents of the bedpan into measuring container without spilling or splashing urine outside of container.
- _____ 3. Rinses bedpan and pours rinse into toilet
 - 4. Measures the amount of urine at eye level with container on flat surface (if between measurement lines, round up to nearest 25 ml/cc)
- 5. After measuring urine, empties contents of measuring container into toilet
- _____ 6. Rinses measuring container and pours rinse into toilet
 - 7. Before recording output, removes and disposes of gloves (without contaminating self) into waste container and washes hand

8. Records contents of container within plus or minus 25 ml/cc of evaluator's reading.

Signature *Student has demonstrated the steps in this procedure with an 80% accuracy.*

Name:

Procedure 25: <u>Providing Catheter Care And Emptying Urinary Drainage Bag</u>

Equipment: Bath basin; washcloth(s); bath blanket; linen protector; soap; towel(s).

Provides Catheter Care for Male or Female

- 1. Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
- _____ 2. Privacy is provided with a curtain, screen, or door.
- ______ 3. Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water
- _____ 4. Puts on clean gloves before washing.
- 5. Places linen protector under perineal area including buttocks before washing
- 6. Exposes area surrounding catheter (only exposing client between hip and knee)
- _____ 7. Apply soap to wet washcloth.
 - 8. While holding catheter at meatus without tugging, cleans at least four inches of catheter from meatus, moving in only one direction away from meatus using a clean area of the washcloth for each stroke.
 - ___ 9. While holding catheter at meatus without tugging, using a clean washcloth, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the washcloth for each stroke
 - ____ 10. While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus using a dry cloth towel/washcloth

_____ 11. Empties, rinses, and dries basin.

- _____ 12. Places basin in designated dirty supply area
- _____ 13. Disposes of used linen into soiled linen container and disposes of linen protector appropriately
- 14. Avoids contact between candidate clothing and used linen
 - 15. Removes and disposes of gloves (without contaminating self) into waste container and washes hands
- _____ 16. Signaling device is within reach and bed is in low position.

Signature

Date

Student has demonstrated the steps in this procedure with an 80% accuracy.

Name:___

Procedure 25: Providing Catheter Care And Emptying Urinary Drainage Bag (continued)

Emptying Urinary Drainage Bag

1.	K.E.E.P.
2.	Place paper towel on floor and place measuring container on the paper towel under the drain.
3.	Remove drain or spout from its holder and allow urine to flow out of the bag into the measuring container. Do not let the drain or spout touch the measuring container. Avoid splashing of urine.
4.	After urine has drained, close the spout and clean with an antiseptic wipe.
5.	Replace drain or spout in its holder on the bag.
6.	Observe amount, appearance and odor of urine and then empty urine into toilet.
7.	Rinses measuring container and pours rinse into toilet
8.	E.L.I.SA

Signature Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Date

•

Name:____

Procedure 28: <u>Collecting Stool Specimen</u>

Equipment: Bedpan and cover/bedside commode/toilet hat; container and cover for specimen; label; tongue blade; leak-proof transport bag.

_____ 1. K.E.E.P.

_____ 2. Use tongue blade to put three (3) samples from different parts of stool into specimen container.

_____ 3. Discard excess stool and flush toilet.

_____ 4. Discard tongue blade in proper container.

_____ 5. Cover specimen container with lid.

_____ 6. Place container in leak-proof transport bag.

_____ 7. Complete label and place on container

_____ 8. E.L.I.SA.

Signature Instructor demonstrated skill on this date

Name:_____

Procedure 29: <u>Applying And Caring For Condom Catheters</u>

Equipment:		Drainage bag, condom catheter.
	1.	K.E.E.P.
	2.	Attach collection bag to leg.
	3.	Hold penis firmly and roll on condom, leaving one-inch space between penis and end of condom. If client is not circumcised, foreskin should be in normal position.
	4.	Secure condom to penis with tape provided.
	5.	Connect catheter tip to drainage tubing making sure tubing is not twisted or kinked.
	6.	E.L.I.SA.
Signature		Date

Signature Instructor demonstrated skill on this date

Name:

Procedure 30: Administering Cleansing Enema

Equipment: Commercial enema; bedpan and cover, incontinence pad, lubricant, toilet tissue, paper towel, bath blanket or equivalent, appropriate waste receptacle.

Note: Gloves may need to be removed and hands washed more times than listed in skill if contamination occurs.

- _____ 1. K.E.E.P.
- _____ 2. Put on gloves.
- _____ 3. At bedside, put lubricant on paper towel and lubricate commercial enema applicator tip
- 4. Place pad/linen protector under buttocks and place bedpan within easy reach.
- _____ 5. Position client in Sim's position.
- ______ 6. Gently insert lubricated applicator tip into rectum. Stop if pain or resistance.
- _____ 7. Slowly squeeze contents of commercial enema into rectum.
- _____ 8. Ask client to take slow, deep breaths.
- _____ 9. Encourage taking all of solution ordered,
 - 10. Stop squeezing if client complains of feeling full, cramping, or urge to defecate, wait for symptoms to subside then slowly continue squeezing solution. If client complains of nausea, sweating, or feeling faint, notify the charge nurse.
- _____ 11. Slowly and gently remove applicator from rectum.
- _____ 12. Dispose of commercial enema in appropriate waste receptacle.
- _____ 13. Note amount, color, odor and consistency of stool and how enema was tolerated.
- _____ 14.E.L.I.SA.

Signature Instructor demonstrated skill on this date

Revised June 2018

SKILL PERFORMANCE CHECKLIST

Procedure 31: <u>Assisting With Dining/Feeding Resident Who Cannot Feed Self & Measuring & Recording Intake</u>

Equipment: Food tray; clothing protector; hand wipes; pen and paper.

Feeds Client Who Cannot Feed Self

- 1. Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
- 2. Before feeding, looks at name card on tray and asks client to state name.

3. Before feeding client, client is in an upright sitting position (75-90 degrees)

- 4. Place tray where the food can be easily seen by client.
- 5. Candidate cleans client's hands with hand wipe before beginning feeding.
- ______ 6. Candidate sits in a chair facing client during feeding
- _____ 7. Tells client what foods and beverage are on tray.
- 8. Asks client what he/she would like to eat first.
- 9. Using spoon, offers client one bite of each type of food on tray, telling client the content of each spoonful.
- _____ 10. Offers beverage at least once during meal.
- _____ 11. Candidate asks client if they are ready for next bite of food or sip of beverage
- _____ 12. At end of meal, candidate cleans client's mouth and hands
- _____ 13. Removes food tray
- 14. Leaves client in upright sitting position (75-90 degrees) with signaling device within client's reach
- _____ 15. After completing skill, washes hands.

Signature				
Student has demonstrated the st	teps in this	procedure wi	th an 80%	accuracy.

Date

Name:____

Name:

Procedure 32: <u>Performing Relief Of Choking</u>

Equipment: none

Relieving choking in a responsive person 1 year of age or older:

_____ 1. Ask person who appears to have choked but is not coughing, "Are you choking?"

2. Determine that the person cannot expel object on their own and state that you will help.

_____ 3. Stand or kneel behind the person and wrap your arms around their waist.

_____ 4. Make a fist with one hand.

5. Place the thumb side of your fist against the person's abdomen, in the midline, slightly above the navel and well below the breastbone.

______ 6. Grasp your fist with your other hand and press your fist into the victim's abdomen with a quick, forceful upward thrust.

7. Repeat thrusts until the object is expelled from the airway or the victim becomes unresponsive.

8. Give each new thrust with a separate, distinct movement to relieve the obstruction.

Chest thrusts for obese victim or pregnant female:

_____ 1. Stand behind person.

_____ 2. Place arms around victim directly under armpits.

_____ 3. Form fist and place thumb side of fist against sternum, level with armpits.

4. Grasp fist in opposite hand and administer thrusts, pulling straight back, until object is removed, person starts to cough, or becomes unconscious.

Relieving choking in an unresponsive person 1 year of age or older:

_____ 1. Activate EMS system.

2. Look for a foreign object in the mouth. If you see an object that can easily be removed, remove it with your fingers.

- 3. If you do not see an object, then begin CPR, starting with compressions. (Do not check for pulse).
 - 4. Every time you open the airway to give breaths, open the victim's mouth wide and look for object. If you see an object that can easily be removed, remove it with your fingers. If you do not see an object, keep doing CPR.

 Signature
 Date

 Student completed AHA BLS for Healthcare Provider or submitted copy of AHA BLS for Healthcare Provider card to instructor

Name:

Procedure 33: Performing Range Of Motion Exercise (Active ROM, Passive ROM)

Equipment: None

Performs Modified Passive Range of Motion (PROM) For One Knee and One Ankle

- 1. Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- _____ 2. Privacy is provided with a curtain, screen, or door
- 3. Ensures that client is supine in bed and instructs client to inform candidate if pain is experienced during exercis
 - 4. While supporting the leg at knee and ankle, bends the knee and then returns leg to client's normal position (flexion/ extension) (AT LEAST 3 TIMES unless pain is verbalized). Moves joints gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
- 5. While supporting the foot and ankle close to the bed, pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion) (AT LEAST 3 TIMES unless pain is verbalized). Moves joints gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
- _____ 6. Signaling device is within reach and bed is in low position
 - _____ 7. After completing skill, washes hands.

Signature *Student has demonstrated the steps in this procedure with an 80% accuracy.*

Name:__

Procedure 33: Performing Range Of Motion Exercise (Active ROM, Passive ROM) (continued)

Performs Modified Passive Range of Motion (PROM) For One Shoulder

- 1. Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible
- _____ 2. Privacy is provided with a curtain, screen, or door
- 3. Instructs client to inform candidate if pain is experienced during exercise
 - 4. While supporting arm at the elbow and at the wrist, raises client's straightened arm from side position upward toward head to ear level and returns arm down to side of body (flexion/extension) (AT LEAST 3 TIMES unless pain is verbalized). Moves joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
 - 5. While supporting arm at the elbow and at the wrist, moves client's straightened arm away from the side of body to shoulder level and returns to side of body (abduction/adduction) (AT LEAST 3 TIMES unless pain is verbalized). Moves joint gently, slowly and smoothly through the range of motion, discontinuing exercise if client verbalizes pain.
- 6. Signaling device is within reach and bed is in low position
- _____ 7. After completing skill, washes hands.

Signature *Student has demonstrated the steps in this procedure with an 80% accuracy.*

Name:

Procedure 34: <u>Transferring From Bed To Wheelchair/Chair</u>

Equipment: Shoes; wheelchair; transfer belt.

Transfers From Bed to Wheelchair Using Transfer Belt

- 1. Explains procedure, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
- 2. Privacy is provided with a curtain, screen, or door.
- 3. Before assisting to stand, wheelchair is positioned alongside of bed, at head of bed facing foot or foot of the bed facing head.
- 4. Before assisting to stand, footrests are folded up or removed.

_____ 5. Before assisting to stand, locks wheels on wheelchair

- _____ 6. Before assisting to stand, bed is at a safe level
- _____7. Before assisting to stand, checks and/or locks bed wheels.
 - 8. Before assisting to stand, client is assisted to a sitting position with feet flat on the floor.
 - 9. Before assisting to stand, client is wearing shoes.
- _____ 10. Before assisting to stand, applies transfer belt securely at the waist over clothing/gown.
 - 11. Before assisting to stand, provides instructions to enable client to assist in transfer including prearranged signal to alert when to begin standing.
- 12. Stands facing client positioning self to ensure safety of candidate and client during transfer. Counts to three (or says other prearranged signal) to alert client to begin standing.
 - 13. On signal, gradually assists client to stand by grasping transfer belt on both sides with an upward grasp (candidate's hands are in upward position) and maintaining stability of client's legs by standing knee to knee, or toe to toe with the client
- 14. Assists client to turn to stand in front of wheelchair with back of client's legs against wheelchair.
- _____ 15. Lowers client into wheelchair.
- _____ 16. Positions client with hips touching back of wheelchair and transfer belt is removed.
- _____ 17. Positions feet on footrests.
- _____ 18. Signaling device is within reach.
 - _____ 19. After completing skill, washes hands.

Signature *Student has demonstrated the steps in this procedure with an 80% accuracy.*

Procedure 35: Moving Up In Bed Using Turning Sheet And Positioning Resident On Side

Equipment: Turning or draw sheet; pillows or supportive devices.

Moving up in bed using a turning sheet

- _____ 1. K.E.E.P.
- _____ 2. Lower head of bed.
- _____ 3. Place pillow against headboard.
- 4. Both caregivers should stand on opposite side of bed, turned slightly towards and facing the head of the bed with legs approximately 12 inches apart and knees bent. Legs should be shoulder width apart.
- 5. Roll turning sheet up close to client and grasp underpad firmly with palms up at shoulder and buttocks.
- 6. Move client up in bed on count of "3". Buttocks must clear mattress to avoid shearing.
 - _____ 7. Place pillow under client's head and unroll turning sheet.
- _____ 8. E.L.I.SA.

Signature Date *Student has indicated their understanding of the steps in this procedure with an 80% accuracy.*

Positions On Side

 1.	Explains	procedure,	speaking	clearl	y, slowly	y, and directly	y, maintaining	g face-to-face	contact when	ever possible

- _____ 2. Privacy is provided with a curtain, screen, or door
- _____ 3. Before turning, lowers head of bed
- 4. Raises side rail on side to which body will be turned.
- 5. Candidate assists client to slowly roll onto side toward raised side rail
- _____ 6. Places or adjusts pillow under head for support.
- 7. Candidate positions client so that client is not lying on arm.
- _____ 8. Supports top arm with supportive device.
- 9. Places supportive device behind client's back.
- 10. Places supportive device between legs with top knee flexed; knee and ankle supported.

Procedure 35: Moving Up In Bed Using Turning Sheet And Positioning Resident On Side (continued)

- _____ 11. Signaling device is within reach and bed is in low position.
- _____ 12. After completing skill, washes hands

Signature

Student has demonstrated the steps in this procedure with an 80% accuracy.

Date

Name:_____

Name:

Procedure 36: Assisting With Ambulation

Equipment: Shoes/non-skid footwear; transfer belt.

Assists To Ambulate Using Transfer Belt

- Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
- _____ 2. Privacy is provided with a curtain, screen, or door
- 3. Before assisting to stand, client is wearing non-skid shoes/footwear
- _____ 4. Before assisting to stand, bed is at a safe level
- 5. Before assisting to stand, checks and/or locks bed wheels
- _____ 6. Before assisting to stand, client is assisted to sitting position with feet flat on the floor.
- 7. Before assisting to stand, applies transfer belt securely at the waist over clothing/gown.
 - 8. Before assisting to stand, provides instructions to enable client to assist in standing including prearranged signal to alert client to begin standing
- 9. Stands facing client positioning self to ensure safety of candidate and client during transfer. Counts to three (or says other prearranged signal) to alert client to begin standing
- 10. On signal, gradually assists client to stand by grasping transfer belt on both sides with an upward grasp (candidate's hands are in upward position), and maintaining stability of client's legs by standing knee to knee, or toe to toe with client
- 11. Walks slightly behind and to one side of client for a distance of ten (10) feet, while holding onto the belt
- _____ 12. Assists client to bed and removes transfer belt
- _____ 13. Signaling device is within reach and bed is in low position
- _____ 14. After completing skill, wash hands

Date

Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:____

Procedure 37: <u>Applying Restraints</u>

Equipment: Restraint equipment ordered by physician.

Note: Remove restraint for 10 minutes every two hours to exercise restrained extremity and to shift weight off areas sustaining pressure. This exercise should include weight bearing if tolerated.

Follow facility policy regarding nurse aides applying restraings.

1. K.E.E.P.
2. Student identifies place to secure restraint on a bed or chair
3. Student demonstrates a quick release knot

_____ 4. E.L.I.SA.

Signature	Date
Student has indicated their understanding of the steps in this procedure with an 8	0% accuracy.

Name:___

Procedure 38: Assisting To Dangle, Stand, And Walk

Equipment: Footwear; cane, walker or assistive device; transfer belt.

- K.E.E.P.
 Check cane or walker for safety.
 Client ambulates using cane or walker to maintain balance.
 - _____ 4. E.L.I.SA.

Signature

Date

Student has indicated their understanding of the steps in this procedure with an 80% accuracy.

Name:

Procedure 40: <u>Using A Mechanical Lift (Per Clinical Environment)</u>

Equipment: Mechanical lift; sling; chair; footwear.

Note: Follow manufacturer's directions for transferring at <u>all</u> times.

- _____ 1. K.E.E.P.
- _____ 2. Help the client turn to one side of the bed.
- 3. Position the sling under the client, with the edge next to the client's back, fan folding if necessary.
- 4. Make the bottom of the sling even with the client's knees. Help the client roll back to the middle of the bed. Spread out the fan folded edge of the sling.
- _____ 5. Roll the mechanical lift to bedside.
- _____ 6. Make sure the base is opened to its widest point.
- _____ 7. Push the base of the lift under the bed.
- 8. Position the overhead bar directly over the client.
 - 9. With the client lying on his back, attach one set of straps to each side of the sling. Attach one set of straps to the overhead bar. Have a co-worker support the client at the head, shoulders, and knees while being lifted. The client's arms should be folded across his chest. If the device has "S" hook, they should face away from client. Make sure all straps are connected properly.
- 10. Following manufacturer's instructions, raise the client two inches above the bed.
 - 11. Have co-worker help support and guide the client's body while you roll the lift so that the client is positioned over the chair or wheelchair.
- 12. Slowly lower the client into the chair or wheelchair. Use the strap on the back of the sling to guide the client into a sitting position.
- _____ 13. Undo the straps from the overhead bar. Leave the sling in place for transfer back to bed.
- 14. Be sure the client is seated comfortably and correctly in the chair or wheelchair
- _____ 15.E.L.I.SA.

Signature Instructor has demonstrated skill on this date

Name:

Procedure 41: <u>Transferring From Bed To Stretcher (Per Clinical Environment)</u>

Equipment: Stretcher covered with a sheet; draw sheet and pillow.

- 1. K.E.E.P.
- 2. Cover client with bath blanket or equivalent and fanfold linens to foot of bed.
- 3. Lower head of bed to flat position.
- 4. Place draw sheet under client.
- 5. Move to side of bed using draw sheet.
- 6. Position stretcher next to bed and lock wheels.
- 7. Using a prearranged signal, transfer using draw sheet and position client in center of stretcher.
- 8. Provide for comfort and place pillow under head.
- 9. Fasten safety straps and raise side rails of stretcher. Never leave client on stretcher unattended.
- 10. Unlock wheels and transport as directed.
- 11. After completing skill, washes hands.
- 12. Report transfer to supervisor.
- 13. Reverse procedure to return client to bed.
- 14. E.L.I.SA.

Signature Instructor has demonstrated skill on this date

Name:

Procedure 42: Assisting To Move Up In Bed

 Equipment:
 None required.

 _______1.
 Follow Procedure 35 Moving Up In Bed Using Turning Sheet steps 1-4

 _______2.
 Place one arm under client's shoulder blades. Place the other arm under client's thighs. Use good body mechanics.

 _______3.
 Provides instructions to enable client to assist and ask client to bend their knees, brace feet on the mattress, and push their feet and hands using a prearranged signal.

 _______4.
 Using prearranged signal help move the client by shifting your body weight while the client pushes with their feet. Always allow the client to do all they can do for themselves.

5. Follow Procedure 35: Moving Up In Bed Using Turning Sheet steps 7-8

Signature	Date
Student has indicated their understanding of the steps in this procedure with an 80	% accuracy.

Name:

Procedure 43: Applying Anti-Embolism (Elastic) Stockings

Equipment: Elastic Stocking

Applies One Knee-High Elastic Stocking

- _____1. Explains procedure to client, speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible.
 - 2. Privacy is provided with a curtain, screen, or door.
- 3. Client is in supine position (lying down in bed) while stocking is applied.
- 4. Turns stocking inside-out, at least to the heel.
- _____ 5. Places foot of stocking over toes, foot, and heel.
- _____ 6. Pulls top of stocking over foot, heel, and leg.
- 7. Moves foot and leg gently and naturally, avoiding force and over-extension of limb and joints.
 - 8. Finishes procedure with no twists or wrinkles and heel of stocking, if present, is over heel and opening in toe area (if present) is either over or under toe area; if using a mannequin, candidate may state stocking needs to be wrinkle-free
- _____ 9. Signaling device is within reach and bed is in low position.
 - _____ 10. After completing skill, wash hands.

Signature

Date

Student has demonstrated the steps in this procedure with an 80% accuracy.

Name:

Procedure 44: <u>Applying Warm or Cold Applications</u>

Equipment: Heat pack; cold pack; bath basin; linen protectors; towel.

Note: Follow manufacturer's directions that accompany each type and brand of heat pack or cold pack to ensure correct usage.

_____ 1. K.E.E.P.

Warm Soak

_____1. Place client's body part into warm water, Use linen protectors as needed to keep linen dry.

2. Remove client's body part from warm water after 20 minutes, or as directed by nurse.

_____ 3. Pat skin dry.

Warm Compress

1. Soak washcloth in hot water, ring excess water out of washcloth and place on area.

_____ 2. Wrap compress with towel.

Cold Application

1. Place ice bags and cold packs in appropriate cover after removing excess air or following manufacturer's instructions.

2. Place body part into cold water or apply cold application with caps or lids facing away from client.

_____ 3. Check skin every five (5) minutes for blisters, pale, gray or white areas. Instruct to report complaints of pain or discomfort.

4. Remove cold application after 20 minutes or as directed by nurse.

_____ 5. Pat skin dry.

_____ 6. E.L.I.SA.

Signature Instructor has demonstrated skill on this date

Name:__

Procedure 45: <u>Applying Elastic Bandages</u>

Equipment: Elastic bandage; tape or metal clips.

1. K.E.E.P. (Procedure 0.1: Beginning of skill)

_____ 2. Expose the area to be wrapped; making sure it is clean and dry.

- 3. Hold bandage so that roll is up and loose end is on bottom.
- _____ 4. Apply bandage from distal to proximal.

5. Make two circular turns around extremity, and proceed with overlapping spiral turns in upward direction. Overlap about 2/3 of previous turn.

- _____ 6. Apply bandage smoothly with firm, even pressure.
- _____ 7. Tape, or clip end of bandage to hold in place, making sure clip is not under body part.
- 8. Check extremity for coldness or cyanosis (bluish color). Instruct client to report complaints of pain, numbress, or tingling. Remove bandage if symptoms present and report immediately to supervisor.
- 9. E.L.I.SA. (Procedure 0.2: End of skill)

Signature Instructor has demonstrated skill on this date

Name:

Procedure 46: Assisting With Coughing And Deep Breathing

- **Equipment:** Pillow or blanket to use as splint if needed.
 - _____ 1. K.E.E.P. (Procedure 0.1: Beginning of skill)
 - _____ 2. Assist client to semi-Fowler or Fowler's position if possible.
 - 3. Instruct client to take deep breath and hold for 3 to 5 seconds.
 - _____ 4. Exhale slowly through pursed lips.
 - 5. Repeat steps 2 and 3 four more times, for a total of 5 deep breaths.
 - _____ 6. If applicable, instruct client to hold pillow or blanket over incision and cough very deeply.
 - _____ 7. Repeat deep breathing and coughing exercises two more times or as directed.
 - _____ 8. Repeat procedure as often as ordered.
 - 9. E.L.I.SA. (Procedure 0.2: End of skill)

Signature Instructor has demonstrated skill on this date

Name:

Procedure 47: <u>Applying Non-Sterile Dressing</u>

Equipment: Dressing supplies; tape; gloves; biohazard bag as needed.

- _____ 1. K.E.E.P. (Procedure 0.1: Beginning of skill)
- 2. Follow nurse's directions regarding size and type of dressing.
- _____ 3. Open package without touching dressing.
- 4. If present, remove old dressing by gently peeling tape toward the wound and lifting off the wound.
- _____ 5. Observe condition of wound or skin.
- _____ 6. Dispose of used dressing in proper container.
- 7. Remove and disposes of gloves (without contaminating self) into waste container and washes hands.
- _____ 8. Put on clean gloves.
- 9. Pick up corner of new dressing and place untouched side of dressing directly on area to be dressed.
- _____ 10. Secure dressing with tape or bandage wrap.
- _____ 11. E.L.I.SA. (Procedure 0.2: End of skill)

Signature Instructor has demonstrated skill on this date

Equipment: Incontinence pads, towel(s), washcloth(s), soap, washbasin, tape/ties, dressings, gown, linen/shroud, ID tags.

_____ 1. Receive directions from supervisor

Procedure 48: Performing Post-Mortem Care

- _____ 2. Identify client's body
- _____ 3. Assemble equipment
- _____ 4. Wash hands
- _____ 5. Put on clean gloves
- _____ 6. Privacy is provided with a curtain, screen, or door.
- _____ 7. Provide bed bath/incontinence care.
- _____ 8. Close client's eyes.
- 9. If necessary provide denture care
- 10. Close client's mouth. Use rolled towel to support chin, if needed.
- _____ 11. Follow facility policy regarding drainage bottles, bags and containers.
- _____ 12. Follow facility policy regarding jewelry, eyeglasses, and hearing aids.
- 13. Follow facility policy regarding preparing body for viewing.
- _____ 14. Removes and disposes of gloves (without contaminating self) into waste container and washes hands.

Signature Instructor has demonstrated skill on this date

Name:_____

Procedure 49: <u>Changing Adult Brief</u>

Equipment: Gloves, Adult Brief (correct size)

- _____ 1. K.E.E.P. (Procedure 0.1: Beginning of skill)
- _____ 2. Remove adult brief
- _____ 3. Follow steps 3 11 of Providing Perineal Care (Procedure 3)
- _____ 4. Apply adult brief
- _____ 5. E.L.I.SA. (Procedure 0.2: End of skill)

Signature	Date
Student has indicated their understanding of the steps in this procedure with an 80	<i>)% accuracy.</i>

Final Skills Testing Guidelines

Students cannot miss critical element steps (bolded) Timing begins after students look at skills Students will have 30 minutes to perform all 5 skills If students miss any part of a step, it should be counted as unsatisfactory

Skill		Number that can be missed
Hand Hygiene (Hand Washing)		0
Applies One Knee-High Elastic Stocking	(10 steps)	0
Assists to Ambulate Using Transfer Belt	(14 steps)	1
Assists With Use of Bedpan	(17 steps)	2
Cleans Upper or Lower Denture	(12 steps)	0
Counts and Records Radial Pulse		0
Counts and Records Respirations		0
Donning and Removing PPE (Gown and Gloves)	(14 steps)	1
Dresses Client with Affected (Weak) Right Arm	(11 steps)	0
Feeds Client Who Cannot Feed Self	(15 steps)	1
Gives Modified Bed Bath (Face and one arm, hand and underarm)	(19 steps)	2
Measures and Records Blood Pressure		0
Measures and Records Urinary Output		0
Measures and Records Weight of Ambulatory Client		0
Performs Passive Range of Motion for One Knee and One Ankle	(7 steps)	0
Performs Passive Range of Motion for One Shoulder	(7 steps)	0
Positions on Side	(12 steps)	0
Provides Catheter Care for Female	(16 steps)	1
Provides Foot Care on One Foot	(17 steps)	2
Provides Mouth Care	(15 steps)	1
Provides Perineal Care (Peri-Care) for Female	(20 steps)	2
Transfers From Bed to Wheelchair Using Transfer Belt	(19 steps)	2

Hand Hygiene and all measurement skills - students cannot miss any steps

- 1 12 steps students cannot miss any steps
- 13 16 steps students can miss 1 step
- 17 20 steps students can miss 2 steps