

Student Name _____ Class _____

Nursing Assistant Skills Checklist: Classroom and Clinical

***Students may not perform skills on residents/patients until they have demonstrated competency and been signed off by a RN in the skills laboratory.**

Testable	Classroom Competency date	RN Initials	Clinical Practice Date	RN Initials
Ambulating Resident with Walker using a Gait Belt				
Applying Anti-Embolic Stocking				
Bed Bath- Face, One Arm, Hand, and Axilla				
Catheter Care- Emptying a Urinary Drainage Bag, Measure Output with Handwashing				
Denture Care				
Donning an Isolation Gown and Gloves- Assist Resident w/Bedpan and Measure Output, Remove Gown and Gloves with Handwashing				
Dressing a Bedridden Resident with an Affected Side				
Feeding a Dependent Resident				
Making an Occupied Bed				
Mouth Care- Brushing Teeth				
Mouth Care- Mouth Care of a Comatose Resident				
Perineal Care for a Female with Handwashing				
Perineal Care for a Male with Changing a Soiled Brief with Handwashing				
Positioning Resident on the Side				
Range of Motion Hip and Knee				
Range of Motion Shoulder				
Vital Signs- Count and Record Radial Pulse and Respirations then Pivot Transfer a Weight-Bearing, Non-Ambulatory Resident from Bed to Wheelchair using a Gait Belt				
Vital Signs- Count and Record Radial Pulse and Respirations then Pivot Transfer a Weight Bearing, Non- Ambulatory Resident from Wheelchair to Bed using a Gait Belt				
Vital Signs- Taking and Record Manual Blood Pressure				

Non-Testable	Classroom Competency Date	RN Initials	Clinical Practice Date	RN Initials
Apply Clean Bandages				
Assist in Admitting Resident				
Assist in Discharging Resident				
Assist in Transferring Resident				
Assist with Diagnostic Test/Obtains Specimen				
Back Rub				
Body Mechanics				
Care/ Use of Prosthetic or Orthotic Devices				
Documenting ADLs				
Donning/Removing Gown/Gloves/Mask				
Dress Resident				
Fingernail Care				
Handwashing/Hand Hygiene				
Maintaining a Resident's Environment				
Make an Unoccupied Bed				
Mechanical Lift Transfer				
Move Resident Up in Bed				
Observe, Report Pain				
Ostomy Care				
Pass and Set Up Trays				
Perioperative Care				
Postmortem Care				
Provide Care for Patients with Drains				
Provide Care of Patients with Feeding Tubes				
Range of Motion Exercises				
Recognizing and Reporting abnormal physical, psychological or mental changes				
Record Meal Percentage and Intake				
Report Skin Condition				
Shampoo and Hair Care				
Shaving				
Shower				
Skin Care				
Toileting				
Transfer and Position Resident in Chair				
Use of Assistive Devices in Feeding				
Use of Assistive Devices in Transferring, Ambulating, and Dressing				
Vital Signs- TPR				
Vital Signs- TR, Pulse Oximetry, Electronic BP				
Weight- Standing, W/C and Bed Scales				

Student Signature _____

Classroom RN Signature _____ **Initials** _____

RN Clinical Instructor Signature _____ **Initials** _____

Program Completion Date _____