

University of Cincinnati College of Nursing

Preceptor Signature/ Initials: R. W. L. K. S.

You, preceptor will initial/ date each item as it is completed. All skills will be completed per hospital policy, Damar's Fundamentals and Advanced Nursing Skills, and/or hospital policy. You are responsible for all of the knowledge and skills contained in this checklist if available with direct instruction or always under the supervision (oversight) of your preceptor, an RN. Frequently review this checklist and use it to guide your goals during your clinical time. If you are unable to complete all the items due to the lack of opportunity, you must demonstrate the ability to locate resources for these items and verbalize understanding. Your preceptor will acknowledge this understanding in the section titled, "Reviewed".

Preceptor to date and initial completion
of the item in the appropriate column ...

Reviewed	Performed w/Instruction	Performed w/Supervision	Skills or Knowledge Demonstrated
KAC 6/14/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21			Administration ☒ HMC Access/Documentation System ☒ Preceptor Contact Information ☒ Call-off Process ☒ ePayroll ☒ Located policies ☒ Webmail ☒ myKnowledge (LMS) expectations ☒ Access to point of care devices (mobile phlebotomy, AccuCheck) ☒ Eversbridge
KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21 KAC 6/21	KAC 6/21	KAC 6/21	Safety Awareness/Emergencies ☒ Located crash cart(s) ☒ Located fire alarms ☒ Located oxygen shut off valves, verbalize policy for shut off. ☒ Demonstrated knowledge of procedure for "calling a CODE Blue" ☒ Demonstrated knowledge of indication and/or activation of the Rapid Response Team ☒ Located the yellow Emergency Procedure Guide and Disaster manual ☒ Location evacuation plans for unit ☒ Described actions for all emergency codes listed in the emergency procedures guide ☒ Responded during emergencies and assist to obtain necessary items ☒ Located med sled and described unit specific guidelines for using this equipment ☒ Located eye wash ☒ Located soiled utility room and adhered to standards for disposal of all waste and body fluids ☒ Maintain clear and clutter-free rooms and hallways ☒ Keep equipment plugged in when not in use
		KAC 6/21 KAC 6/21	Assessment and Documentation ☒ Conducted/documented a nursing assessment ☒ Completed a set of vital signs (manually and/or electronically) and weight per unit standards

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		KAC 6/21 KAC 6/21	☒ Completed & updated Care Plan on admission & every shift ☒ Documented Patient Education in Epic
	KAC 6/21 KAC 6/21		Patient Admission ☒ Set up room for admission ☒ Completed admission documentation in EPIC within 24 hrs - Admission Navigator - Care plan and made appropriate referrals - Patient Belonging Flowsheet (print, patient signs, put in chart) - Released, signed and held orders - Verified allergy information in EPIC
		KAC 6/21 KAC 6/21 KAC 6/21	☒ Ensured ID/Allergy/Fall Risk bands placed on patient ☒ Oriented the patient/visitors to room, call light, phone, visiting hours, white board, room service (menu provided if applicable) ☒ Demonstrated IMPACT Connections, interventions to positively influence the patient experience
			Patient Discharge/Transfer ☐ Completed discharge documentation ☐ Provided patient with prescriptions and offered instructions for filling prescriptions in an outpatient pharmacy ☐ Provided After Visit Summary to patient/family ☐ Accessed and utilized Clinical References in Epic or other resources for patient education at discharge ☒ Ensured PIVs are removed ☐ Ensured home care arranged (i.e. CVADs, O ₂ , PT/OT) ☐ Ensured pt/family had belongings & completed belongings checklist ☐ Assured arrangement of discharge transportation ☒ Provided a patient report to a nurse on another unit or outlying facility in preparation for transferring a patient ☒ Assisted with room breakdown per unit standard
		KAC 7/21 KAC 7/21	Communication & Job Tools ☒ Demonstrated filling out white board/patient communication board every shift ☒ Performed hourly rounding according to unit standard ☒ Demonstrated ability to identify and contact the appropriate physician when necessary ☒ Demonstrated knowledge of Chain of Command ☒ Demonstrated knowledge of indications for incident reporting & how to complete an incident report ☒ Demonstrated knowledge of procedure for managing and reporting needlesticks and other work-related exposures ☐ Demonstrated understanding of charging system ☒ Demonstrated understanding of SBAR with hand-offs in patient care using bedside reporting as indicated ☒ Demonstrated knowledge of patient transport and communication process
	KAC 7/21	KAC 7/21 KAC 7/21 KAC 7/21 KAC 7/21 KAC 7/21	Medication Administration ☒ Administered/documentated patient medications appropriately Assuring 8 Rights—right patient, right medication, right dose, right time, right route, right documentation, right

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KAC 7/21	KAC 7/21	KAC 7/21 KAC 7/21 KAC 7/21 KAC 7/21 KAC 7/21	- Correct use of scanner/barcodes/medication administration process - Utilizing 2nd nurse verification process ☑ Demonstrated understanding of the Heparin Protocol - Documented administration of the heparin drip in EPIC ☑ Documented correct site for IM & SQ injections ☑ Demonstrated knowledge of high alert meds and documentation ☑ Demonstrated knowledge of PRN medication refill process ☑ Demonstrated knowledge of IV Drug Guidelines ☑ Demonstrated knowledge of unapproved abbreviations ☑ Demonstrated knowledge of IV medication compatibility
KAC 7/21	KAC 7/21 KAC 7/21 KAC 8/21 KAC 7/21 KAC 7/21	KAC 7/21 KAC 7/21 KAC 8/21 KAC 8/21 KAC 7/21 KAC 7/21 KAC 7/21	Labs ☑ Reported and documented critical lab values to MD/LIP ☑ Demonstrated use of mobile care phlebotomy device ☑ Verbalized patient safety rationale for labeling specimens at patient bedside ☑ Collected blood specimen via Central Venous Access Device ☑ Collected blood cultures per hospital policy ☑ Collected urine specimens: clean catch, from catheter bag ☑ Collected stool specimens ☑ Collected 24 hour urine specimen ☑ Collected sputum specimen ☑ Obtained blood glucose level using glucometer and interpretation of results ☑ Performed a venipuncture for lab specimen ☑ Ensured appropriate processing of specimen: labeling, transport, computer order entry ☑ Collected non-sterile specimen collection from other drainage tubes as ordered ☑ Sent collected specimens to clinical laboratory using approved preparation and transport methods
KAC 7/21	KAC 7/21	KAC 7/21 KAC 7/21 KAC 7/21	Intravenous Nursing Care ☑ Demonstrated IV Therapy concepts and knowledge ☑ Demonstrated proper placement of a peripheral IV ☑ Demonstrated proper care and maintenance of a CVAD ☑ Demonstrated proper maintenance/flushing of PIVs ☑ Successfully discontinued a Triple Lumen Catheter or PICC ☑ Demonstrated proper cap change procedure
KAC 7/21 KAC 7/21	KAC 8/21		Death and Dying ☑ Consulted spiritual care services ☑ Demonstrated knowledge of post mortem care ☑ Demonstrated knowledge of hospital policy for Advance Directives ☑ Demonstrated knowledge of hospital policy for DNR/ AND consent
		KAC 7/21 KAC 7/21	Comfort - Pain Management ☑ Conducted / documented a comprehensive pain assessment and re-assessment ☑ Demonstrated correct documentation in EPIC for any PRN, PCA and Epidural medication ☑ Demonstrated understanding of analgesic medication guidelines

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			Controlled Analgesia ☐ Demonstrated knowledge of caring for a patient receiving epidural analgesia
			Protective Mechanisms ☒ Demonstrated knowledge of Infection Control policy and contact precautions ☒ Demonstrated knowledge of Pressure Ulcer prevention ☐ Demonstrated proper technique utilizing the patient lift equipment & using proper body mechanics ☒ Demonstrated the use of all functions of the patient's bed, including bed alarm, bed scale, CPR handle, Trendelenburg, locks, etc. ☐ Skin/Wound Care - Demonstrated knowledge of assessment, documentation and implementing appropriate interventions - Demonstrated knowledge of the nursing management of a Vacuum-Assisted Closure Device (wound vac) ☒ Seizure Precautions - Identified a patient at risk for seizure - Implemented seizure precautions ☒ Restraints - Demonstrated knowledge of assessment, documentation, and alternatives to restraints - Demonstrated appropriate application of soft restraint using quick release knot ☐ Patient Monitoring Protocol - telemonitoring, sitter, etc ☒ CIWA Protocol - Demonstrated familiarity with assessment and documentation requirements for patients on CIWA Protocol
			Mobility ☒ Fall Prevention - Conducted and documented a fall risk assessment - Implemented fall prevention strategies - Demonstrated use and set-up of bed and chair alarms, including use of the call light interface - What to do in event of a fall (Post Fall Huddle, incident report) ☒ Assisted PT/OT w/ambulation and positioning ☒ Performed ROM (active and passive)
			Elimination ☒ Demonstrated proper technique for placement of a Foley catheter ☒ Performed CAUTI prevention per unit standard ☐ Demonstrated proper technique for straight catheterization ☒ Demonstrated use of bladder scanner ☐ Demonstrated appropriate care of a colostomy or ileostomy, including assessment and acquisition of supplies ☒ Successfully maintained a record of I/O's or STRICT I/O's ☐ Demonstrated proper technique for insertion of NG tube ☒ Demonstrated knowledge of caring for a patient with a NG tube
			Nutrition

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	KAC 8/21		☒ Demonstrated knowledge of dysphagia screen, and when to consult / speech pathology ☐ Demonstrated knowledge of caring for G-tubes/PEG tubes ☒ Demonstrated knowledge of caring for a patient on enteral nutrition ☒ Demonstrated knowledge of parenteral nutrition TPN/Lipids ☒ Conducted a calorie count ☒ Demonstrated understanding of specific diet orders, meal delivery, communicating w/ Food & Nutrition Services, guest trays & room service ☒ Followed unit standards for changing tube feeding bags
	KAC 7/21	KAC 7/21	Ventilation ☒ Administered O2 therapy per hospital policy ☒ Demonstrated understanding of Incentive Spirometer & importance; also provided patient education on IS use. ☒ Demonstrated knowledge of suctioning for airway maintenance ☒ Demonstrated knowledge of caring for a patient with a trach ☒ Demonstrated knowledge of caring for a patient with a chest tube ☒ Demonstrated knowledge of in safe handling and use of an oxygen cylinder
	KAC 7/21	KAC 7/21	Circulation ☒ Demonstrated knowledge of blood transfusions and precautions in place for reaction (VS per protocol, sign and symptoms of reaction) ☒ Demonstrated knowledge of ECG interpretation & strip management of life threatening arrhythmias ☒ Demonstrated use of 12 lead EKG equipment ☒ Demonstrated understanding of cardiac monitoring per unit standards (lead placement, alarm management & equipment) ☒ Demonstrated knowledge of assessing heart tones, vital signs & pulses ☒ Demonstrated application of compression sleeves and/or TED hose, understands importance
	KAC 7/21	KAC 7/21	Miscellaneous (Activities and skills unit specific)

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