

Skill Guidelines

for nursing student clinical rotation

Skills students can do independently after faculty observes and approves

- Assist and feed patients
- Apply TEDs or SCDs
- Assist with ambulation
- Assist with application of ice bags
- Assist with incentive spirometer
- Assist with ROM exercises
- Baths, skin and perineal care
- Discontinue peripheral IV/INT
- Disposal of suction canister contents
- Drains: empty, recharge and measure output
- Empty and discontinue urinary catheters
- General assessment
- Linen changes
- Monitor and record intake/output
- Mouth care
- Oral suctioning with Yankauer
- Ostomy pouch care: empty and clean
- Re-apply oxygen by nasal cannula
- Position urinals/bedpans
- Transport/transfer
- Vital signs/pulse oximetry

Skills that require Ballad Health RN supervision at all times

- Central line dressing change (PICC, port, CVL)
- Urinary or intermittent catheter insertion

Skills that require faculty/preceptor/coach supervision at all times

- Administration of all non-controlled medications, including PO, IM, SQ, IV, inhalants, topical, rectal and vaginal
- Admissions/transfers/discharges
- Apply or change ostomy bag
- Chest tube maintenance
- Collect specimens (urine, stool, sputum)
- CVL removal
- Documentation of assessment, flow sheet and nurses notes
- Enemas
- Feeding tube management
- Insertion or removal of NG and feeding tubes
- Maintenance of TPN
- Maintenance of IV pumps
- Management of specialty beds
- Ostomy irrigation
- Peripheral arterial line care/dressing change/flush
- Peripheral arterial line removal
- Peripheral IV insertion and maintenance
- Phlebotomy
- Post-mortem care
- Pressure injury wound care
- Removal of surgical drains
- Restraints (application and maintenance)
- Wound dressing changes (sterile and non-sterile)
- Suction: ET, tracheal, ambuing or pre-oxygenating
- Suture/staple removal and application of steri-strips
- Trach care: site care and dressing change
- Vacuum-assisted wound care and maintenance
- Wound irrigation

Skills for student observation only (may not participate at any time)

- Accu-Chek® (bedside blood glucose monitoring)
- Administer blood products or chemotherapeutic agents
- Administer experimental or research drugs
- Administer immunosuppressive drugs to transplant patients
- Administer scheduled or controlled medications
- Administration of paralytic agents
- Administration of thrombolytics: streptokinase, TPA and emminase
- Administration/maintenance/titration of nipride, inacor, dopamine, dobutamine, tridil, lidocaine, bretylol, isuprel or levophed
- Arterial puncture
- Assisting with intubation/extubation
- Blood draws from central lines (PICC, port, CVL)
- Cardioversion/defibrillation
- Central venous pressure monitoring
- Changing trachs, ET tubes or checking cuff pressures
- Hemodynamic monitoring: setup, maintenance, measuring
- Insertion/maintenance of Sengstaken-Blakemore/Minnesota tubes
- Make ventilator changes
- Manage wedge and pulmonary artery lines
- PCA pump setup
- Pronounce death of DNR patient
- Remove meds from Automated Dispensing Cabinet (ADC)
- Sheath removal
- Take and sign off MD orders (unless witnessed and co-signed by RN)
- Witness or provide signature for legal documents
- Witness signature of informed consent
- Management of hyper/hypothermia systems

Please refer to the electronic Nursing Reference Library for procedure guidance.