

SkillsUSA 2010 Contest Projects

Nurse Assisting

Click the “Print this Section” button above to automatically print the specifications for this contest. Make sure your printer is turned on before pressing the button.

**NURSE ASSISTING
SKILLSUSA CHAMPIONSHIPS
2010**

GENERAL BRIEFING FOR THE CONTESTANT

1. You will wash your hands at the sinks during one station. At other times, you may verbalize when you would use hand hygiene.
2. When privacy is needed for the procedures, please indicate this orally to the judges. There are no curtains available.
3. Your name badge should always show your contestant number.
4. You will be given appropriate time to look at the area, to familiarize yourself with surroundings, read instructions, etc. After reading the instruction sheet, you are to indicate to the judges when you are ready to begin the procedure. (3 minutes)
5. You will be evaluated on speed and accuracy once you begin the procedure. You may not be able to complete all the procedures in the time allotted. Work quickly but appropriately.
6. You may introduce yourselves when necessary by your contestant number only.
7. All equipment you use is to be returned to the place from which you found it.
8. Please no talking about the contest while you are in the waiting area. To do so may endanger your chances of winning.
9. Use of cell phones is strictly prohibited. Contestants found using their cell phone may be disqualified.
10. You should have no instructions from outside sources after the contest begins. You may be disqualified for communication with observers. (This includes advisors.)
11. If for any reason you need to leave the waiting area, you must check with the proctor for instructions.
12. You will be informed when 5 minutes are remaining at each station.
13. You must leave the contest area immediately after completing all stations and obtaining clearance from the proctor.

Contestant Number: _____

Intake and Output Record

Patient's Name:							Date:		
Time	Oral	IV	Irrigation	Remarks	BM	Emesis	Urine	Irrigation	Remarks
7:00 AM	240 cc				Lg. soft	280 cc	320 cc		
8:00 AM	460 cc								
9:00 AM									
10:00 AM									
11:00 AM									
12:00 PM									
1:00 PM									
2:00 PM									
TOTAL				8 Hr Intake	TOTAL	280 cc			8 Hr Output
3:00 PM							420 cc		
4:00 PM	220 cc								
5:00 PM									
6:00 PM	700 cc								
7:00 PM									
8:00 PM	180 cc						500 cc		
9:00 PM									
10:00 PM									
TOTAL	1100 cc			8 Hr Intake	TOTAL		920 cc		8 Hr Output
11:00 PM	120 cc								
12:00 AM									
1:00 AM									
2:00 AM									
3:00 AM									
4:00 AM									
5:00 AM							350 cc		
TOTAL	120 cc			8 Hr Intake	TOTAL		1270 cc		8 Hr Output
TOTALS				24 Hr Intake	TOTALS				24 Hr Output

(Please Print in Ink)

In considering your application for employment, the facility may conduct a detailed and thorough investigation which may include but is not limited to a criminal record check, interviews or inquiries of prior employers, coworkers, acquaintances, relatives or friends.

PERSONAL

LAST NAME	FIRST	MIDDLE
PRESENT ADDRESS	CITY	STATE ZIP CODE
PERMANENT ADDRESS	CITY	STATE ZIP CODE

ANY PREVIOUS NAME(S)? YES NO IF YES, IDENTIFY ALL OTHER NAMES INCLUDING MAIDEN NAME:

POSITION APPLIED FOR: _____ SALARY DESIRED: _____

HOW DID YOU LEARN ABOUT THIS POSITION? (NEWSPAPER, INTERNET, FRIEND, IF OTHER - PLEASE LIST)

RELATIVES OR FRIENDS EMPLOYED IN THIS FACILITY? YES NO

NAME: _____ DEPT: _____ RELATIONSHIP: _____

HAVE YOU EVER BEEN EMPLOYED BY THIS FACILITY? YES NO WHEN? _____

ARE YOU 18 YRS OF AGE OR OLDER? YES NO

ARE YOU A U.S. CITIZEN OR AN ALIEN LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

LONG RANGE OCCUPATIONAL GOALS:

HAVE YOU EVER BEEN CONVICTED OF, OR PLEAD GUILTY TO, A CRIME OTHER THAN A MISDEMEANOR TRAFFIC VIOLATION? YES NO

IF YES, WHICH STATE(S), AND EXPLAIN: (You are not required to disclose any SEALED or EXPUNGED criminal records.)

HAVE YOU EVER BEEN INVOLVED IN THE SUBSTANTIATED ABUSE OR NEGLECT OF CHILDREN OR ADULTS UNDER THE LAWS OF THIS OR ANY OTHER STATE OF THE UNITED STATES? YES NO IF YES, WHICH STATE(S), AND EXPLAIN:

HAVE YOU BEEN SANCTIONED, CITED, REPORTED, OR EXCLUDED FROM PARTICIPATION IN MEDICARE, MEDICAID, OR ANY OTHER HEALTHCARE RELATED LAW OR REGULATION? YES NO IF YES, EXPLAIN:

If your answer is "yes" to any of the above, you will not be automatically disqualified from employment consideration, except as required by state or federal law.

HOME TELEPHONE NO. _____

CONTACT TELEPHONE NO. _____

E-MAIL ADDRESS (optional) _____

BEST TIME TO CONTACT YOU: _____ DATE AVAILABLE FOR WORK: _____

CHECK ALL YOU WOULD CONSIDER WORKING:

FULL TIME / REGULAR

FULL TIME / TEMPORARY

PART TIME / REGULAR

PART TIME / TEMPORARY

WOULD YOU CONSIDER WORKING:

WEEKENDS & HOLIDAYS YES NO

ROTATING SHIFTS YES NO

ON CALL YES NO

ANY SHIFT YES NO

SHIFT AVAILABILITY (check all that apply):

DAYS EVENINGS NIGHTS

EDUCATION / SKILLS

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	CHECK LAST YEAR COMPLETED				DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
			1	2	3	4		
HIGH							<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE							<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE							<input type="checkbox"/> YES <input type="checkbox"/> NO	

OTHER Business College or Special Courses: (Include Special Military Training, Post Graduate and Nursing)

AREA(S) OF SPECIALIZATION OR MAJOR INTEREST: _____ LIST OFFICE SKILLS INCLUDING COMPUTER/SOFTWARE EXPERIENCE: _____

LIST HEALTH CARE, BUSINESS, OR INDUSTRIAL EQUIPMENT OPERATED: _____ WORD PROCESSING: (Approx. WPM) _____

PROFESSIONAL LICENSES

CURRENTLY LICENSED ELIGIBLE FOR LICENSE

CURRENTLY REGISTERED ELIGIBLE FOR REGISTRATION

TYPE: _____ STATE: _____

NO: _____ DATE: _____

LICENSE OR REGISTRATION EVER SUSPENDED, REVOKED OR ON PROBATION? YES NO IF YES, EXPLAIN: _____

CURRENTLY LICENSED ELIGIBLE FOR LICENSE

CURRENTLY REGISTERED ELIGIBLE FOR REGISTRATION

TYPE: _____ STATE: _____

NO: _____ DATE: _____

LICENSE OR REGISTRATION EVER SUSPENDED, REVOKED OR ON PROBATION? YES NO IF YES, EXPLAIN: _____

PROFESSIONAL CERTIFICATIONS

CURRENTLY CERTIFIED

ELIGIBLE FOR CERTIFICATION

TYPE: _____ DATE: _____

CURRENTLY CERTIFIED

ELIGIBLE FOR CERTIFICATION

TYPE: _____ DATE: _____

Briefly describe duties and skills acquired through military or volunteer service: (include dates)

PROVIDE INFORMATION REGARDING PREVIOUS EMPLOYMENT BEGINNING WITH MOST RECENT EMPLOYER.

	FROM: (MO/YR)	TO: (MO/YR)	SUPERVISOR'S NAME:	SALARY: (Hr/ Mo/Yr)
JOB TITLE: _____				

EMPLOYER NAME: _____ PHONE: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT YOUR CURRENT EMPLOYER? YES NO

	FROM: (MO/YR)	TO: (MO/YR)	SUPERVISOR'S NAME:	SALARY: (Hr/ Mo/Yr)
JOB TITLE: _____				

EMPLOYER NAME: _____ PHONE: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

	FROM: (MO/YR)	TO: (MO/YR)	SUPERVISOR'S NAME:	SALARY: (Hr/ Mo/Yr)
JOB TITLE: _____				

EMPLOYER NAME: _____ PHONE: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

	FROM: (MO/YR)	TO: (MO/YR)	SUPERVISOR'S NAME:	SALARY: (Hr/ Mo/Yr)
JOB TITLE: _____				

EMPLOYER NAME: _____ PHONE: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

PLEASE IDENTIFY AND EXPLAIN ANY GAPS IN EMPLOYMENT LONGER THAN THREE (3) MONTHS:

PREVIOUS EXPERIENCE

LANGUAGE

LANGUAGE SKILLS - DO NOT COMPLETE UNLESS REQUESTED

LANGUAGE	DO YOU?	<input type="checkbox"/> SPEAK	<input type="checkbox"/> FAIR <input type="checkbox"/> GOOD <input type="checkbox"/> FLUENT	<input type="checkbox"/> READ	<input type="checkbox"/> FAIR <input type="checkbox"/> GOOD <input type="checkbox"/> FLUENT	<input type="checkbox"/> WRITE	<input type="checkbox"/> FAIR <input type="checkbox"/> GOOD <input type="checkbox"/> FLUENT
LANGUAGE	DO YOU?	<input type="checkbox"/> SPEAK	<input type="checkbox"/> FAIR <input type="checkbox"/> GOOD <input type="checkbox"/> FLUENT	<input type="checkbox"/> READ	<input type="checkbox"/> FAIR <input type="checkbox"/> GOOD <input type="checkbox"/> FLUENT	<input type="checkbox"/> WRITE	<input type="checkbox"/> FAIR <input type="checkbox"/> GOOD <input type="checkbox"/> FLUENT

REFERENCES

LIST AT LEAST THREE (3) PROFESSIONAL / WORK / SCHOOL REFERENCES WHO ARE NOT RELATIVES OR PERSONAL ACQUAINTANCES:

NAME AND RELATIONSHIP	TITLE	COMPANY NAME AND ADDRESS	TELEPHONE

SIGNATURE

CAREFULLY READ THIS SECTION PRIOR TO PROVIDING SIGNATURE BELOW

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete. I understand that any false or misleading representations or omissions made on the application or during the hiring process may disqualify me from further consideration for employment and may result in discharge even if discovered at a later date.

I understand that employment may be conditioned upon successfully passing a medical examination and that I may be required to satisfactorily complete a drug screening as a condition of employment.

I hereby authorize persons, schools, my current employer (if applicable) and previous employers and other organizations to provide this facility and its affiliates with any requested information regarding my application or suitability for employment, and I completely release all such persons or entities from any and all liability related to the providing or use of such information.

I understand that my employment is at-will which means that I may terminate the employment relationship at any time and for any reason with or without notice, and that the facility has the same right. I understand that no one has the authority to enter into any agreement contrary to the preceding sentence, except for a written agreement signed by an administrative representative of this facility and notarized.

Date _____ Signature _____

**Nurse Assisting
SkillsUSA Championships
2010**

Performance Checklist

Station I W/C to Bed, ROM
Contestant Number _____
Judge Initials _____

Total possible points - 175
Points earned _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
1. Assembles equipment	2		
2. Hand hygiene (may verbalize)	2		
3. Knocks on door, introduces self, identifies patient, and explains procedure	6		
4. Provides privacy	6		
5. Prepares wheelchair:			
a. positions correctly	2		
b. locks wheels	6		
c. removes footrests or puts them out of the way	2		
6. Locks bed to prevent movement	6		
7. Places gait belt snugly around pt waist	4		
8. Instructs pt to place hands on WC arms to assist with standing	2		
9. Grasps gait belt at back of pt	4		
10. Positions feet for broad base	2		
11. Gives signal	2		
12. Assists to standing position	2		
13. Turns pt to bed	2		
14. Positions pt in supine position	2		
15. Covers pt	2		
16. Raises bed to good working height	2		
17. Performs all ROMs as follows:			
a. Proceeds in organized manner	6		
b. Performs each movement a minimum of 3 times	4		

c. Provides support for body parts	4		
d. Does not expose patient during procedure	4		
e. Instructs patient to inform if pain/discomfort	4		
18. Exercises nearest shoulder:			
a. Supports arm properly	2		
b. Abducts and adducts arm	2		
c. Flexes and extends arm	2		
19. Exercises nearest elbow:			
a. Flexes and extends elbow	2		
20. Exercises nearest wrist:			
a. Flexes, extends, and hyperextends hand	2		
b. Deviates ulnarly and radially	2		
21. Exercises nearest fingers and thumb:			
a. Flexes and extends fingers	2		
b. Abducts and adducts fingers	2		
c. Performs opposition by touching thumb to each finger tip	2		
22. Exercises nearest hip:			
a. Abducts and adducts leg	2		
b. Flexes and extends knee	2		
c. Rotates leg medially and laterally	2		
23. Exercises nearest ankle:			
a. Dorsiflexes and plantar flexes foot	2		
b. Inverts and everts foot	2		
24. Exercises nearest toes:			
a. Abducts and adducts toes	2		
b. Flexes and extends toes	2		
24. Positions patient in correct alignment	2		
25. Replaces bed covers	2		
26. Observes checkpoints before leaving:			
a. Lowers bed to lowest level	2		
b. Places call signal and supplies within reach	2		
c. Opens curtain	2		
d. Leaves area neat and clean	2		

27. Hand hygiene (or verbalizes)	4		
28. Reports any abnormal findings	2		
29. Organization of work:			
a. arrives at contest ready to begin skill problem	2		
b. reads problems/checks assumptions/questions	2		
c. obtains necessary equip to complete problem	2		
d. organizes equip/solves problem conveniently	2		
30. Attitude:			
a. toward patient	4		
b. toward supervisors (judges)	4		
c. toward task	4		
31. Communication skills:			
a. facial expressions	4		
b. ability to listen	4		
c. attempts to lower patient anxiety	4		
d. interprets/implements oral/written directions	4		
e. accuracy of oral/written terminology	2		
32. Safety measures:			
a. Utilizes safety precautions for patient & self	6		
33. Speed in completion of task:			
a. completed within allotted time	3		
Total points available	175		

**NURSE ASSISTING
SKILLSUSA CHAMPIONSHIPS
2010**

INSTRUCTION SHEER FOR CONTESTANT

STATION NUMBER II

ASSIGNMENT: Perform CPR on the adult manikin for 2 minutes and reassess

TIME TO COMPLETE SKILL: 15 minutes
You will be informed with 5 minutes remaining

EQUIPMENT: All equipment you will need is in the station area.
Please clean and replace equipment.

SITUATION: The patient has been found unresponsive on the floor.

Contestant Number _____

Judge's Initials _____

PLEASE LEAVE THIS SHEET WITH THE JUDGE WHEN COMPLETED TASK AT THIS STATION.

**Nurse Assisting
SkillsUSA Championships
2010**

Performance Checklist

Station II Adult CPR
Contestant Number _____
Judge Initials _____

Total possible points - 75
Points earned _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
1. Places manikin on firm surface in supine position	5		
2. Checks consciousness	5		
3. Activates EMS system	5		
4. Opens airway, using head tip/chin lift method	5		
5. Looks, listens and feels for respirations for 5-10 seconds	5		
6. Gives 2 slow full breaths	5		
7. Checks for carotid pulse and other signs of circulation (5-10 sec.)	5		
8. Administers chest compressions as follows:			
a. Places heel of hand on lower half of sternum	5		
b. Gives compressions at a rate of 100 per minute	5		
d. Compresses chest 1 1/2 to 2 inches	5		
9. Gives two ventilations after every thirty compressions	5		
10. Repeats cycle of 30:2 for 2 minutes	5		
11. Checks pulse and breathing for 5-10 seconds	5		
12. Verbalizes what should be done if no pulse. Tell contestant that patient has a pulse and respirations.	5		
13. Positions patient in recovery position if breathing and circulation are present	5		
Total	75		

**NURSE ASSISTING
SKILLSUSA NATIONALS
2010**

INSTRUCTION SHEET FOR CONTESTANT

STATION NUMBER III

ASSIGNMENT:

1. Wash your hands
2. Apply gloves at appropriate times
3. Perform denture and mouth care

TIME TO COMPLETE SKILL:

20 minutes
You will be informed with 5 minutes remaining

EQUIPMENT:

All equipment you will need is in the station area.
Please clean and replace equipment.

SITUATION:

Mr. Jones is a 86 year old nursing home resident who had a left hip replacement. He needs denture and mouth care. Observe standard precautions.

Contestant Number _____

Judge's Initials _____

PLEASE LEAVE THIS SHEET WITH THE JUDGE WHEN COMPLETED TASK AT THIS STATION.

**Nurse Assisting
SkillsUSA Championships
2010**

Performance Checklist

Station III Handwashing, Glove Application and Denture/Oral Care

Total possible points - 160

Contestant Number _____

Points earned _____

Judge Initials _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
1. Assembles equipment	4		
2. Turns faucet on with dry towel	2		
3. Regulates temperature of water	2		
4. Wets hands with fingertips pointed down	3		
5. Gets soapy lather	3		
6. Scrubs palms	3		
7. Scrubs tops of hands with opposite palm	3		
8. Interlaces fingers to wash between	3		
9. Cleans nails	3		
10. Rinses with fingertips pointed down	3		
11. Dries thoroughly	3		
12. Places towels in waste can	3		
13. Turns off faucet with dry towel	3		
14. Leaves area neat and clean	2		
15. Assembles equipment for denture care	4		
16. Hand hygiene (may verbalize)	6		
17. Knocks on door, introduces self, identifies patient & explains procedure	5		
18. Provides privacy	2		
19. Puts towel on pt's. chest	2		
20. Puts on gloves	5		
21. Obtains dentures from patient - assists as needed	2		
22. Places dentures in cup	2		

23. Lines sink with paper towels	2		
24. Uses cool water to clean dentures	2		
25. Brushes all surfaces	2		
26. Handles dentures carefully	2		
27. Rinses dentures in cool water	2		
28. Places clean dentures in cool water in denture cup	2		
29. Removes gloves without contaminating hands	4		
30. Returns dentures to patient	2		
31. Places towel on pt chest if not already there	2		
32. Applies clean gloves	5		
33. Assists pt with mouthwash/swabs	2		
34. Returns dentures to patient or places on bedside table	2		
35. Removes towel from pt chest	2		
36. Removes gloves (and preforms hand hygiene)	5		
37. Positions pt in correct alignment	2		
38. Observes checkpoints before leaving:			
a. Lowers bed to lowest level	2		
b. Places call signal and supplies within reach	5		
c. Opens curtain	2		
d. Leaves area neat and clean	2		
39. Hand hygiene (may verbalize)	5		
40. Reports any abnormal findings	3		
41. Organization of work:			
a. arrives at contest ready to begin skill problem	2		
b. reads problems/checks assumptions/questions	2		
c. obtains necessary equip to complete problem	2		
d. organizes equip/solves problem conveniently	2		
42. Attitude:			
a. toward patient	3		
b. toward supervisors (judges)	3		
c. toward task	3		
43. Communication skills:			

a. facial expressions	2		
b. ability to listen	2		
c. attempt to lower patient anxiety	2		
d. interprets/implements oral/written directions	2		
e. accuracy of oral/written terminology	2		
44. Safety measures:			
a. Utilizes safety precautions for patient & self	5		
45. Speed in completion of task:			
a. completed within allotted time	3		
Total	160		

**NURSE ASSISTING
SKILLSUSA CHAMPIONSHIPS
2010**

INSTRUCTION SHEER FOR CONTESTANT

STATION NUMBER IV

ASSIGNMENT:

Fill out a job application
Participate in job interview
Assessment of resume

TIME TO COMPLETE SKILL:

Job application will be completed while waiting
10 minutes for interview
You will be informed with 5 minutes remaining

EQUIPMENT:

All equipment you will need is in the station area.
Please clean and replace equipment.

Contestant Number _____

Judge's Initials _____

PLEASE LEAVE THIS SHEET WITH THE JUDGE WHEN COMPLETED TASK AT THIS STATION.

**Nurse Assisting
SkillsUSA Championships
2010**

Performance Checklist

Station IV Job Application, Interview, Resume

Contestant Number _____

Judge Initials _____

Total possible points - 120

Points earned _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
<i>JOB APPLICATION</i>			
1. Prints in blue/black ink unless writing requested	1		
2. Follows all directions provided on form	3		
3. Completes all the following information on form:			
a. Personal information	3		
b. Education	3		
c. Work experience	3		
d. References	3		
e. Signature in correct area	3		
4. Spells all words correctly	4		
5. Completes form neatly and thoroughly; places "none" or "NA" in places as necessary	3		
<i>JOB INTERVIEW</i>			
6. Dresses appropriately for interview	4		
7. Introduces self to employer and shakes hands firmly if indicated	4		
8. Refers to employer by name	3		
9. Sits correctly with good posture	4		
10. Listens closely to employer's questions and comments	4		
11. Speaks slowly and clearly without mumbling	4		
12. Smiles but avoids excessive laughter or giggling	4		
13. Maintains eye contact with employer	4		

14. Avoids mannerisms during interview	4		
15. Uses correct English and avoids slang terms	4		
16. Uses correct manners and acts politely	4		
17. Avoids smoking, chewing gum, eating candy, etc.	3		
18. Asks questions pertaining to job responsibility and avoids questioning fringe benefits, raises, etc.	4		
19. Thanks employer for the interview at the end	4		
20. Shakes hands firmly if indicated	4		
<i>RESUME</i>			
21. Uses good quality paper	3		
22. Types all information neatly and accurately	3		
23. Follows consistent format and spacing throughout resume	3		
24. Includes all of the following information:			
a. Personal identification: name, address, telephone	3		
b. Employment objective	3		
c. Educational background: name and address of school, special courses, or training	3		
d. Work or employment experience: name and address of employers, dates employed, job title, description of duties, in order from most recent backward	3		
e. Skills and specific knowledge	3		
f. Other activities; organizations, offices held, awards, volunteer work, hobbies, interests	3		
g. References: full name, title, and address or states "References will be furnished on request"	3		
25. Spells all words correctly	3		
26. Punctuates all information correctly	3		
Total	120		

**NURSE ASSISTING
SKILLSUSA CHAMPIONSHIPS
2010**

INSTRUCTION SHEER FOR CONTESTANT

STATION NUMBER V

- ASSIGNMENT:** Measure patient vital signs, and calculate oral intake
- TIME TO COMPLETE SKILL:** 15 minutes
You will be informed with 5 minutes remaining
- EQUIPMENT:** All equipment you will need is in the station area.
Please clean and replace equipment.
- SITUATION:** Mrs. Delpha was admitted to your facility from her home yesterday. She needs to have her vital signs, and intake and output monitored for her first week. Please record her fluid intake for the meal she just completed. Remember, fluid is recorded in cc/ml.

Contestant Number _____

Judge's Initials _____

PLEASE LEAVE THIS SHEET WITH THE JUDGE WHEN COMPLETED TASK AT THIS STATION.

**Nurse Assisting
SkillsUSA Championships
2010**

Performance Checklist

Station V Measure vital signs and calculate patient intake

Contestant Number _____

Judge Initials _____

Total possible points - 180

Points earned _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
1. Assembles equipment for intake and v/s	3		
2. Performs hand hygiene	6		
3. Knocks on door, introduces self, and identifies patient	3		
4. Provides privacy	2		
<i>VITAL SIGNS</i>			
5. Explains vital signs procedures and obtains patient permission	5		
6. Assures patient is comfortable	2		
7. Asks patient re eating, smoking, or drinking	2		
8. Uses protective sheath on thermometer	2		
9. Checks that thermometer indicates "ready" with correct mode	2		
10. Positions patient correctly with easy access to ear	2		
11. Pulls ear pinna up and back	2		
12. Presses scan or activator button	2		
13. Holds thermometer steady for time required	2		
14. Removes probe and correctly reads thermometer	8		
15. Removes and discards sheath correctly	2		
16. Places fingers correctly for counting pulse	2		
17. Counts pulse for at least 30 seconds	5		
18. Obtains correct count to +/- 2 beats per minute	5		
19. Notes rhythm and volume	2		

20. Leaves hand on pulse site	2		
21. Counts respirations for at least 30 seconds	8		
22. Keeps patient unaware of counting activity	2		
23. Obtains correct count to +/- 2 breaths per minute	8		
24. Notes rhythm and character	2		
25. Cleans stethoscope earpieces and bell/disk with alcohol	2		
26. Applies BP cuff correctly	2		
27. Places stethoscope in ears correctly	2		
28. Locates brachial artery and places bell correctly	2		
29. Inflates cuff	2		
30. Reads pressure to +/- 2 mm Hg	8		
31. Recognizes abnormal V/S measurements and reports immediately	3		
32. Records V/S appropriately and accurately	3		
33. Cleans stethoscope earpieces and bell/disk with alcohol	3		
<i>Calculate Intake</i>			
34. Calculates intake from tray	3		
35. Records intake in correct column and time in cc's	3		
36. Adds all columns correctly, total for shift worked	3		
37. Uses ink pen	2		
38. Recheck all work:			
a. If error made, corrects with one line drawn thru	1		
b. Places initials by the error line	1		
39. Turns I & O paper to judge	2		
40. Observes patient for comfort	2		
41. Observes checkpoints before leaving:			
a. Lowers bed to lowest level	2		
b. Places call signal and supplies within reach	5		
c. Opens curtain	2		
d. Leaves area neat and clean	2		
42. Hand hygiene (may verbalize)	6		
43. Reports any abnormal findings	3		

44. Organization of work:			
a. arrives at contest ready to begin skill problem	2		
b. reads problems/checks assumptions/questions	2		
c. obtains necessary equip to complete problem	2		
d. organizes equip/solves problem conveniently	2		
45. Attitude:			
a. toward patient	3		
b. toward supervisors (judges)	3		
c. toward task	3		
46. Communication skills:			
a. facial expressions	2		
b. ability to listen	2		
c. attempt to lower patient anxiety	2		
d. interprets/implements oral/written directions	2		
e. accuracy of oral/written terminology	2		
47. Safety measures:			
a. Utilizes safety precautions for patient & self	5		
48. Speed in completion of task:			
a. completed within allotted time	3		
Total	180		

**NURSE ASSISTING
SKILLSUSA CHAMPIONSHIPS
2010**

INSTRUCTION SHEER FOR CONTESTANT

STATION NUMBER VI

- ASSIGNMENT:** Empty indwelling catheter bag using standard precautions
Measure and record output
Position on left side
- TIME TO COMPLETE SKILL:** 15 minutes
You will be informed with 5 minutes remaining
- EQUIPMENT:** All equipment you will need is in the station area and utility area.
Please clean and replace equipment.
- SITUATION:** Mr. Martell has an indwelling catheter. The bag needs to be emptied and his output recorded and totaled for your shift and totaled for the 24 hour shift. You are working the 7 AM to 3 PM shift.
You also need to position him on his left side.

Contestant Number _____

Judge's Initials _____

PLEASE LEAVE THIS SHEET WITH THE JUDGE WHEN COMPLETED TASK AT THIS STATION.

**Nurse Assisting
SkillsUSA Championships
2010**

Performance Checklist

Station VI Empty indwelling catheter bag and record output; positioning
 Contestant Number _____
 Judge Initials _____

Total possible points - 180
 Points earned _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
1. Assembles equipment needed	4		
2. Verbalizes/performs hand hygiene	6		
3. Knocks on door, introduces self, identifies patient, and explains procedure	5		
4. Provides privacy	4		
5. Applies gloves	5		
6. Places measuring pitcher on paper towels on floor	2		
7. Notes amount of urine in graduated bag	2		
8. Puts drainage outlet in graduate	2		
9. Releases clamp	2		
10. Tilts bag as necessary to empty urine	2		
11. Wipes drainage outlet with antiseptic/disinfectant	5		
12. Clamps outlet and replaces in unit	2		
13. Accurately reads amount in graduate	6		
14. Disposes of urine appropriately	4		
15. Rinses the graduate and replaces it	3		
16. Removes gloves	5		
17. Hand hygiene (may verbalize)	6		
18. Makes sure patient data on I&O form	5		
19. Accurately records urinary output	5		
20. Accurately totals shift output	5		
<i>Position on Left side</i>			
21. Explains procedure to patient	5		
22. Moves shoulders and head to rt. side of bed	5		
23. Moves hips to rt. side of bed	5		

24. Moves legs to rt. side of bed	5		
25. Turns patient to lt. side, assuring that face never becomes obstructed by pillow or hits side rail	7		
26. Checks patient is not lying on left arm	5		
27. Places support under head and rt. arm, behind back, between knees	10		
28. Observes checkpoints before leaving:			
a. Lowers bed to lowest level	2		
b. Places call signal and supplies within reach	5		
c. Opens curtain	2		
d. Leaves area neat and clean	2		
29. Hand hygiene (may verbalize)	6		
30. Reports any abnormal findings	3		
31. Organization of work:			
a. arrives at contest ready to begin skill problem	2		
b. reads problems/checks assumptions/questions	2		
c. obtains necessary equip to complete problem	2		
d. organizes equip/solves problem conveniently	2		
32. Attitude:			
a. toward patient	3		
b. toward supervisors (judges)	3		
c. toward task	3		
33. Communication skills:			
a. facial expressions	2		
b. ability to listen	2		
c. attempt to lower patient anxiety	2		
d. interprets/implements oral/written directions	2		
e. accuracy of oral/written terminology	5		
34. Safety measures:			
a. Utilizes safety precautions for patient & self	5		
35. Speed in completion of task:			
a. completed within allotted time	3		
Total	180		

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Performance Checklist

Station VII Professional Appearance
Contestant Number _____
Judge Initials _____

Total possible points - 10
Points earned _____

<i>Performance Points</i>	<i>Pts. Poss.</i>	<i>Pts. Earned</i>	<i>Remarks</i>
1. Uniform is neat and clean	2		
2. Hair is orderly and pulled back from face	2		
3. Minimal amount of make-up/clean shaven	2		
4. Minimal amount of jewelry is worn	2		
5. Shoes are appropriate	2		
Total	10		