

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

*The 22 skills that follow are arranged in alphabetical order, except for the **HAND HYGIENE** skill. Hand Hygiene is listed first as a reminder of the importance of performing this skill before all other skills. The numbered lines below each skill are the steps needed to perform that skill.*

**Critical Elements Steps are in bold.**

Name of Nurse Aide: \_\_\_\_\_

| SKILL 1 – HAND HYGIENE (HAND WASHING)                                                                                                                                                 | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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                                                                                                                                                              |     |    |
| <b>5. Lathers all surfaces of hands, wrists, hands, and fingers producing friction, for at least 20 (twenty) seconds, keeping hands lower than the elbows and the fingertips down</b> |     |    |
| 6. Clean fingernails by rubbing fingertips against palms of the opposite hand                                                                                                         |     |    |
| <b>7. Rinse all surfaces of wrists, hands, and fingers, keeping hands lower than the elbows and the fingertips down</b>                                                               |     |    |
| 8. Uses clean, dry paper towel/towels to dry all surfaces of hands, wrists, and fingers 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                                                                                                                                         |     |    |
|                                                                                                                                                                                       |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                    |     |    |
|                                                                                                                                                                                       |     |    |
|                                                                                                                                                                                       |     |    |
|                                                                                                                                                                                       |     |    |

### COMMENTS:

Date:

\_\_\_\_\_

Date:

\_\_\_\_\_

Date:

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 2 – APPLIES ONE KNEE-HIGH ELASTIC STOCKING                                                                                                                            | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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. 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                                                                           |     |    |
| <b>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.</b> |     |    |
| 9. Signaling device is within reach and bed is in low position                                                                                                              |     |    |
| 10. After completing skill, wash hands                                                                                                                                      |     |    |
|                                                                                                                                                                             |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                          |     |    |
|                                                                                                                                                                             |     |    |
|                                                                                                                                                                             |     |    |
|                                                                                                                                                                             |     |    |

**COMMENTS:**

Date:

---



---

Date:

---



---

Date:

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 3 – ASSISTS TO AMBULATE USING TRANSFER BELT                                                                                                                                                 | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1. Explains procedure , speaking clearly, slowly and directly; maintaining face-to-face contact whenever possible                                                                                 |     |    |
| <b>2. Before assisting to stand, client is wearing shoes</b>                                                                                                                                      |     |    |
| 3. Before assisting to stand, bed is at a safe level                                                                                                                                              |     |    |
| 4. Before assisting to stand, checks and/or locks bed wheels                                                                                                                                      |     |    |
| <b>5. Before assisting to stand, client is assisted to sitting position with feet flat on floor</b>                                                                                               |     |    |
| 6. Before assisting to stand, applies transfer belt securely at the waist over clothing/gown.                                                                                                     |     |    |
| 7. Before assisting to stand, provides instructions to enable client to assist in standing including prearranged signal to alert client to begin standing                                         |     |    |
| 8. 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            |     |    |
| 9. 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 |     |    |
| 10. Walks slightly behind and to one side of client for a distance of ten(10) feet, while holding onto the belt                                                                                   |     |    |
| 11. After ambulation, assists client to bed and removes transfer belt                                                                                                                             |     |    |
| 12. Signaling device is within reach and bed is in low position.                                                                                                                                  |     |    |
| 13. After completing skill, wash hands                                                                                                                                                            |     |    |
|                                                                                                                                                                                                   |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                                |     |    |
|                                                                                                                                                                                                   |     |    |
|                                                                                                                                                                                                   |     |    |
|                                                                                                                                                                                                   |     |    |

**COMMENTS:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 4 – ASSISTS WITH USE OF BEDPAN                                                                                                                         | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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 placing bedpan, lowers head of bed                                                                                                                 |     |    |
| 4. Puts on clean gloves before handling bedpan                                                                                                               |     |    |
| <b>5. Places bedpan correctly under client's buttocks</b>                                                                                                    |     |    |
| 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 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. Avoids overexposure of client.                                                                                                                           |     |    |
| 14. Empties and rinses bedpan and pours rinse into toilet                                                                                                    |     |    |
| 15. After rinsing bedpan, places bedpan in designated dirty supply area                                                                                      |     |    |
| 16. After placing bedpan in designated dirty supply area, 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.                                                                                             |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                           |     |    |
|                                                                                                                                                              |     |    |
|                                                                                                                                                              |     |    |
|                                                                                                                                                              |     |    |

**COMMENTS:**

**Date:**

---



---

**Date:**

---



---

**Date:**

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 5 – CLEANS UPPER OR LOWER DENTURE                                                                                                                    | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1. Puts on 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 dentures in moderate temperature running water before brushing them                                                                              |     |    |
| 4. Applies toothpaste to toothbrush                                                                                                                        |     |    |
| 5. Brushes surfaces of denture                                                                                                                             |     |    |
| 6. Rinses surfaces of denture under moderate temperature running water                                                                                     |     |    |
| 7. Before placing denture into cup, rinse denture cup and lid                                                                                              |     |    |
| 8. Place 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. After rinsing equipment and disposing of sink liner, removes and disposes of gloves (without contaminating self) into waste container and washes hands |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                         |     |    |
|                                                                                                                                                            |     |    |
|                                                                                                                                                            |     |    |
|                                                                                                                                                            |     |    |

**COMMENTS:**

**Date:**

\_\_\_\_\_  
\_\_\_\_\_

**Date:**

\_\_\_\_\_  
\_\_\_\_\_

**Date:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 6 – COUNTS AND RECORDS RADIAL PULSE                                                                                               | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1. Explains procedure , speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible                      |     |    |
| 2. Places fingertips on thumb side of client's wrist to locate radial pulse                                                             |     |    |
| 3. Count beats for one full minute                                                                                                      |     |    |
| 4. Signaling device is within reach                                                                                                     |     |    |
| 5. Before recording, washes hands                                                                                                       |     |    |
| 6. After obtaining pulse by palpating in radial artery position, records pulse rate within plus or minus 4 beats of evaluator's reading |     |    |
|                                                                                                                                         |     |    |
| Signatures of person(s) checking off skill:                                                                                             |     |    |
|                                                                                                                                         |     |    |
|                                                                                                                                         |     |    |
|                                                                                                                                         |     |    |

**COMMENTS:**

Date:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

|                                                                                                                                          | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>SKILL 7 – COUNTS AND RECORDS RESPIRATIONS</b>                                                                                         |     |    |
| 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. Washes hands                                                                                                                          |     |    |
| 5. Records respiration rate within plus or minus 2 breaths of evaluator's reading                                                        |     |    |
|                                                                                                                                          |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                       |     |    |
|                                                                                                                                          |     |    |
|                                                                                                                                          |     |    |
|                                                                                                                                          |     |    |

**COMMENTS:**

**Date:**

---



---

**Date:**

---



---

**Date:**

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 8 – DONNING AND REMOVING PPE (GOWN AND GLOVES)                                                                                      | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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 neck and waist                                                                               |     |    |
| 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                                                                                                  |     |    |
| Signatures of person(s) checking off skill:                                                                                               |     |    |
|                                                                                                                                           |     |    |
|                                                                                                                                           |     |    |
|                                                                                                                                           |     |    |

**COMMENTS:**

Date:

---



---

Date:

---



---

Date:

---



---



## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 9 – DRESSES CLIENT WITH AFFECTED (WEAK) RIGHT ARM                                                                                                                          | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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. While avoiding overexposure of client, removes gown from the unaffected side first, then removes gown from the affected side and disposes of gown into soiled linen container |     |    |
| <b>5. Assists client to put the right (affected/weak) arm through the right sleeve of the shirt before placing garment on left (unaffected) arm</b>                              |     |    |
| 6. While putting on shirt, moves body gently and naturally, avoiding force or over-extension of limbs and joints                                                                 |     |    |
| 7. Finishes with clothing in place.                                                                                                                                              |     |    |
| 8. Signaling device is within reach and bed is in low position                                                                                                                   |     |    |
| 10. After completing skill, wash hands                                                                                                                                           |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                               |     |    |
|                                                                                                                                                                                  |     |    |
|                                                                                                                                                                                  |     |    |
|                                                                                                                                                                                  |     |    |

**COMMENTS:**

Date:

---



---

Date:

---



---

Date:

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

|                                                                                                                            | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>SKILL 10 – FEEDS CLIENT WHO CANNOT FEED SELF</b>                                                                        |     |    |
| 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                                                |     |    |
| <b>3. Before feeding client, client is in an upright sitting position (75-90 degrees)</b>                                  |     |    |
| 4. Places tray where the food can be easily seen by client                                                                 |     |    |
| 5. Candidate cleans client's hand with hand wipe before beginning feeding                                                  |     |    |
| 6. Candidate sits facing client during feeding                                                                             |     |    |
| 7. Tells client what foods are on tray and asks what client would like to eat first                                        |     |    |
| 8. Using spoon, offers client one bite of each type of food on tray, telling client the content of each spoonful.          |     |    |
| 9. Offers beverage at least once during meal                                                                               |     |    |
| 10. Candidate asks client if they are ready for next bite of food or sip of beverage                                       |     |    |
| 11. At end of meal, candidate cleans client's mouth and hands with wipes                                                   |     |    |
| 12. Removes food tray and places tray in designated dirty supply area                                                      |     |    |
| 13. Signaling device is within client's reach                                                                              |     |    |
| 14. After completing skill, wash hands                                                                                     |     |    |
|                                                                                                                            |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                         |     |    |
|                                                                                                                            |     |    |
|                                                                                                                            |     |    |
|                                                                                                                            |     |    |

**COMMENTS:**

**Date:**

---



---

**Date:**

---



---

**Date:**

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

**Name of Nurse Aide:** \_\_\_\_\_

| <b>SKILL 11 — GIVES MODIFIED BED BATH (FACE AND ONE ARM, HAND, AND UNDERARM)</b>                                                                                                                  | <b>Yes</b> | <b>No</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| 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. Removes gown and places in soiled linen container, while avoiding overexposure of the client                                                                                                   |            |           |
| 4. Before washing, checks water temperature for safety and comfort and asks client to verify comfort of water                                                                                     |            |           |
| 5. Puts on clean gloves before washing client                                                                                                                                                     |            |           |
| <b>6. Beginning with eyes, washes eyes with wet washcloth (no soap), using a different area of the washcloth for each stroke, washing inner aspect to outer aspect then proceeds to wash face</b> |            |           |
| 7. Dries face with towel                                                                                                                                                                          |            |           |
| 8. Exposes one arm and places towel underneath arm                                                                                                                                                |            |           |
| 9. Applies soap to wet washcloth                                                                                                                                                                  |            |           |
| 10. Washes arm, hand and underarm, keeping rest of body covered                                                                                                                                   |            |           |
| 11. Rinses and dries arm, hand and underarm                                                                                                                                                       |            |           |
| 12. Moves body gently and naturally, avoiding force and over– extension of limbs and joints                                                                                                       |            |           |
| 13. Puts clean gown on client                                                                                                                                                                     |            |           |
| 14. Empties, rinses and dries basin                                                                                                                                                               |            |           |
| 15. After rinsing and drying basin, 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. After placing basin in designated dirty supply area, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands           |            |           |
| 19. Signaling device is within reach and bed is in low position                                                                                                                                   |            |           |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                                |            |           |
|                                                                                                                                                                                                   |            |           |
|                                                                                                                                                                                                   |            |           |
|                                                                                                                                                                                                   |            |           |

**COMMENTS:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

|                                                                                                                                                                                                               | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>SKILL 12 – MEASURES AND RECORDS CLIENTS BLOOD PRESSURE</b>                                                                                                                                                 |     |    |
| 1. Explains procedure, 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 cuff. Re-inflate cuff to no more than 200 mm Hg.                                 |     |    |
| 8. Deflates cuff slowly and notes the <b>first</b> sound (systolic reading) and <b>last</b> sound (diastolic reading) (If rounding needed, measurements are rounded <b>UP</b> to the nearest 2 mm of mercury) |     |    |
| 9. Removes cuff                                                                                                                                                                                               |     |    |
| 10. Signaling device is within reach                                                                                                                                                                          |     |    |
| 11. Before recording, washes hands                                                                                                                                                                            |     |    |
| <b>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</b>                                         |     |    |
|                                                                                                                                                                                                               |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                                            |     |    |
|                                                                                                                                                                                                               |     |    |
|                                                                                                                                                                                                               |     |    |
|                                                                                                                                                                                                               |     |    |

**COMMENTS:**

**Date:**

---



---

**Date:**

---



---

**Date:**

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 13 – MEASURES AND RECORDS URINARY OUTPUT                                                                                                            | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1. Puts on clean gloves before handling bedpan                                                                                                            |     |    |
| 2. Pours the contents of the bedpan into measuring container without spilling or splashing any of the urine outside of container                          |     |    |
| 3. Measures the amount of urine at eye level with container on flat surface                                                                               |     |    |
| 4. After measuring urine, empties contents of measuring container into toilet                                                                             |     |    |
| 5. Rinses measuring container and pours rinse water into toilet                                                                                           |     |    |
| 6. Rinses bedpan and pours rinse water into toilet                                                                                                        |     |    |
| 7. After rinsing equipment and before recording output, removes and disposes of gloves (without contaminating self) into waste container and washes hands |     |    |
| 8. Records contents of container within plus or minus 25 ml/cc or evaluator's reading                                                                     |     |    |
| Signatures of person(s) checking off skill:                                                                                                               |     |    |
|                                                                                                                                                           |     |    |
|                                                                                                                                                           |     |    |
|                                                                                                                                                           |     |    |

**COMMENTS:**

**Date:**

---



---

**Date:**

---



---

**Date:**

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 14 – MEASURES AND RECORDS WEIGHT OF AMBULATORY CLIENT                                                                                                                                         | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1. Explains procedure, speaking clearly, slowly and directly, maintaining face-to-face contact whenever possible                                                                                    |     |    |
| 2. Client has on shoes before walking to scale                                                                                                                                                      |     |    |
| 3. Before client steps on scale, candidate sets scale to zero then obtains client's weight                                                                                                          |     |    |
| 4. While client steps onto scale, candidate stands next to scale and assists client, if needed, onto center of scale                                                                                |     |    |
| 5. While client steps off scale, candidate stands next to scale and assists client, if needed, off scale before recording weight                                                                    |     |    |
| 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) |     |    |
|                                                                                                                                                                                                     |     |    |
| Signatures of person(s) checking off skill                                                                                                                                                          |     |    |
|                                                                                                                                                                                                     |     |    |
|                                                                                                                                                                                                     |     |    |
|                                                                                                                                                                                                     |     |    |

**COMMENTS:**

**Date:**

---



---

**Date:**

---



---

**Date:**

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| <b>SKILL 15 – PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM)<br/>FOR ONE KNEE AND ONE ANKLE</b>                                                            | <b>Yes</b> | <b>No</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| 1. Explain 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. Supports leg at knee and ankle while performing range of motion for knee                                                                                  |            |           |
| 5. Bends the knee and then returns leg to client's normal position (extension/flexion) (ATLEAST 3 TIMES unless pain is verbalized)                           |            |           |
| 6. Supports foot and ankle close to the bed while performing range of motion for ankle                                                                       |            |           |
| 7. Pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes point down (plantar flexion) (AT LEAST 3 TIMES unless pain is verbalized)  |            |           |
| 8. <b>While supporting the limb, moves joints gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain</b> |            |           |
| 9. Signaling device is within reach and bed is in low position                                                                                               |            |           |
| 10. After completing skill, washes hands                                                                                                                     |            |           |
|                                                                                                                                                              |            |           |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                           |            |           |
|                                                                                                                                                              |            |           |
|                                                                                                                                                              |            |           |
|                                                                                                                                                              |            |           |

**COMMENTS:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| <b>SKILL 16 – PERFORMS MODIFIED PASSIVE RANGE OF MOTION (PROM) FOR ONE SHOULDER</b>                                                                                                                                                                                                                                                              | <b>Yes</b> | <b>No</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| 1. Explains procedure , speaking clearly, slowly, and directly, maintaining face-to-face contact whenever possible                                                                                                                                                                                                                               |            |           |
| 2. Privacy is provided with curtain, screen, or door                                                                                                                                                                                                                                                                                             |            |           |
| 3. Instructs client to inform candidate if pain is experienced during exercise                                                                                                                                                                                                                                                                   |            |           |
| 4. Supports client's upper and lower arm while performing range of motion for shoulder                                                                                                                                                                                                                                                           |            |           |
| <b>5. 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). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion, discontinuing exercise if client verbalizes pain</b> |            |           |
| <b>6. Moves client's straighten 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). Supporting the limb, moves joint gently, slowly, and smoothly through the range of motion discontinuing exercise if client verbalizes pain</b>                  |            |           |
| 7. Signaling devise is within reach and bed is in low position                                                                                                                                                                                                                                                                                   |            |           |
| 8. After completing skill, washes hands                                                                                                                                                                                                                                                                                                          |            |           |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                                                                                                                                                                               |            |           |
|                                                                                                                                                                                                                                                                                                                                                  |            |           |
|                                                                                                                                                                                                                                                                                                                                                  |            |           |
|                                                                                                                                                                                                                                                                                                                                                  |            |           |

**COMMENTS:**

**Date:**

\_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_



## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 17 – POSITIONS ON SIDE                                                                                     | Yes | No |
|------------------------------------------------------------------------------------------------------------------|-----|----|
| 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 turning client, lowers head of bed                                                                     |     |    |
| 4. Raises side rail on side to which client's body will be turned                                                |     |    |
| 5. Slowly rolls onto side as one unit 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                         |     |    |
| 11. Signaling device is within reach and bed is in low position                                                  |     |    |
| 12. After completing skill, washes hands                                                                         |     |    |
|                                                                                                                  |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                               |     |    |
|                                                                                                                  |     |    |
|                                                                                                                  |     |    |
|                                                                                                                  |     |    |

**COMMENTS:**

Date:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 18 – PROVIDES CATHETER CARE FOR FEMALE                                                                                                                                                                      | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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, 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 before washing                                                                                                                                                      |     |    |
| 6. Exposes area surrounding catheter while avoiding overexposure of client                                                                                                                                        |     |    |
| 7. Applies 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, (i.e., away from meatus), using a clean area of the cloth for each stroke |     |    |
| 9. While holding catheter at meatus without tugging, rinses at least four inches of catheter from meatus, moving only in one direction, away from meatus, using a clean area of the cloth for each stroke         |     |    |
| 10. While holding catheter at meatus without tugging, dries at least four inches of catheter moving away from meatus                                                                                              |     |    |
| 11. Empties, rinses and dries basin                                                                                                                                                                               |     |    |
| 12. After rinsing and drying basin, 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. After disposing of used linen and cleaning equipment, 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                                                                                                                                                   |     |    |
| Signatures of person(s) checking off skill:                                                                                                                                                                       |     |    |
|                                                                                                                                                                                                                   |     |    |
|                                                                                                                                                                                                                   |     |    |
|                                                                                                                                                                                                                   |     |    |

### COMMENTS:

Date:

---



---

Date:

---



---

Date:

---



---

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| <b>SKILL 19 – PROVIDES FOOT CARE ON ONE FOOT</b>                                                                                                                      | <b>Yes</b> | <b>No</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| 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, checks 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. Puts on clean gloves before washing foot                                                                                                                           |            |           |
| 6. Client's bare foot is placed into the 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                                                                                                                            |            |           |
| 11. Applies lotion to top and bottom of foot, removing excess (if any) with towel                                                                                     |            |           |
| 12. Supports foot and ankle during procedure                                                                                                                          |            |           |
| 13. Empties, rinses and dries basin                                                                                                                                   |            |           |
| 14. After rinsing and drying basin, places basin in designated dirty supply area                                                                                      |            |           |
| 15. Disposes of used linen into soiled linen container                                                                                                                |            |           |
| 16. After cleaning foot and equipment, and disposing of used linen, removes and disposes of gloves (without contaminating self) into waste container and washes hands |            |           |
| 17. Signaling device is within reach                                                                                                                                  |            |           |
|                                                                                                                                                                       |            |           |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                    |            |           |
|                                                                                                                                                                       |            |           |
|                                                                                                                                                                       |            |           |
|                                                                                                                                                                       |            |           |

**COMMENTS:**

**Date:**

\_\_\_\_\_  
\_\_\_\_\_

**Date:**

\_\_\_\_\_  
\_\_\_\_\_

**Date:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 20 – PROVIDES MOUTH CARE                                                                                                                                                                         | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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 providing mouth care, client is in upright sitting position (75-90 degrees)                                                                                                                  |     |    |
| 4. Puts on clean gloves before cleaning mouth                                                                                                                                                          |     |    |
| 5. Places clothing protector across chest before providing mouth care                                                                                                                                  |     |    |
| 6. Secures cup of water and moistens toothbrush                                                                                                                                                        |     |    |
| 7. Before cleaning mouth, applies toothpaste to moistened toothbrush                                                                                                                                   |     |    |
| <b>8. Cleans mouth (including tongue and surfaces of teeth) using gentle motions</b>                                                                                                                   |     |    |
| 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. After rinsing toothbrush, empty, rinse and dry the basin and place used toothbrush in designated basin/container                                                                                   |     |    |
| 13. Places basin and toothbrush in designated dirty supply area                                                                                                                                        |     |    |
| 14. Disposes of used linen into soiled linen container                                                                                                                                                 |     |    |
| 15. After placing basin and toothbrush in designated dirty supply area, and disposing of used linen, 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                                                                                                                                        |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                                     |     |    |
|                                                                                                                                                                                                        |     |    |
|                                                                                                                                                                                                        |     |    |
|                                                                                                                                                                                                        |     |    |

### COMMENTS:

Date:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| <b>SKILL 21 – PROVIDES PERINEAL CARE (PERI-CARE) FOR FEMALE</b>                                                                                                                                  | <b>Yes</b> | <b>No</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|
| 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, checks water temperature for safety and comfort and asks client to verify comfort of water                                                                                    |            |           |
| 4. Puts on clean gloves before washing perineal area                                                                                                                                             |            |           |
| 5. Places pad/linen protector under perineal area before washing                                                                                                                                 |            |           |
| 6. Exposes perineal area while avoiding overexposure of client                                                                                                                                   |            |           |
| 7. Applies soap to wet washcloth                                                                                                                                                                 |            |           |
| <b>8. Washes genital area, moving from front to back, while using a clean area of the washcloth for each stroke</b>                                                                              |            |           |
| <b>9. Using clean washcloth, rinses soap from genital area, moving from front to back, while using a clean area of the washcloth for each stroke</b>                                             |            |           |
| 10. Dries genital area moving from front to back with towel                                                                                                                                      |            |           |
| <b>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.</b>                              |            |           |
| 12. Repositions client                                                                                                                                                                           |            |           |
| 13. Empties, rinses and dries basin                                                                                                                                                              |            |           |
| 14. After rinsing and drying basin, places basin in designated dirty supply area                                                                                                                 |            |           |
| 15. Disposes of used linen into soiled linen container and disposes of linen protector appropriately                                                                                             |            |           |
| 16. Avoids contact between candidate clothing and used linen                                                                                                                                     |            |           |
| 17. After disposing of used linen, and placing used equipment in designated dirty supply area, removes and disposes of gloves (without contaminating self) into waste container and washes hands |            |           |
| 18. Signaling device is within reach and bed is in low position                                                                                                                                  |            |           |
|                                                                                                                                                                                                  |            |           |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                               |            |           |
|                                                                                                                                                                                                  |            |           |
|                                                                                                                                                                                                  |            |           |
|                                                                                                                                                                                                  |            |           |

**COMMENTS:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Date:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## NURSE AIDE CANDIDATE SKILLS CHECKLIST

Name of Nurse Aide: \_\_\_\_\_

| SKILL 22 – TRANSFERS CLIENT FROM BED TO WHEELCHAIR USING TRANSFER BELT                                                                                                                            | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 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 along side of bed, at head of bed facing foot or foot of bed facing head                                                                   |     |    |
| 4. Before assisting to stand, footrests are folded up or removed                                                                                                                                  |     |    |
| 5. Before assisting to stand, bed is at a safe level                                                                                                                                              |     |    |
| <b>6. Before assisting to stand, locks wheels on wheelchair</b>                                                                                                                                   |     |    |
| 7. Before assisting to stand, checks and/or locks bed wheels                                                                                                                                      |     |    |
| <b>8. Before assisting to stand, client is assisted to a sitting position with feet flat on the floor</b>                                                                                         |     |    |
| 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 instruction 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(candidates hands are in upward position) and maintaining stability of client's legs |     |    |
| 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                                                                                                                                                          |     |    |
| <b>Signatures of person(s) checking off skill:</b>                                                                                                                                                |     |    |
|                                                                                                                                                                                                   |     |    |
|                                                                                                                                                                                                   |     |    |
|                                                                                                                                                                                                   |     |    |

**COMMENTS:**

Date:

\_\_\_\_\_

Date:

\_\_\_\_\_

Date:

\_\_\_\_\_