

_Score: _____

CRITERIA IN RATING THE STUDENT'S PERFORMANCE

- 2 Performs and rationalizes the step correctly
- 1 Performs the step but failed to rationalize
- 0 Fails to perform the step or task

CHECKLIST: OBTAINING BLOOD SAMPLE FOR ARTERIAL BLOOD GAS

	SCOR		RE	
STEPS	2	1	0	
1. Check prescriber's order.				
2. Identify patient, and explain procedure.				
3. Wash hands, and gather equipment.				
4. Prepare heparinized syringe if agency does not have prepared syringe.				
5. Aspirate 0.5 mL of the 1:1000 heparin solution into syringe then eject the heparin into the sink.				
6. Don clean gloves and goggles.				
7. Inspect and palpate radial site. Perform Allen's Test to determine collateral circulation.				
8. Hyperextend the selected wrist.				
9. Cleanse site with alcohol swab using circular motions				
10. Feel for radial pulse with index finger, insert needle bevel up into site of pulsation@ 45 degree angle.				
11. Once blood enters syringe, do not advance syringe further into artery. Aspirate the desired amount of blood.				
12. Place alcohol swab next to needle site, and withdraw needle.				
13. Apply pressure over the puncture site with gauze sponges for 5 to 10 minutes .				
14. Continue to monitor site for bleeding.				
15. Assess pulse and neurovascular status.				
16. Expel air from syringe; apply protective needle cap per agency policy.				
17. Attach requisition to syringe, document percentage of oxygen therapy patient is				
receiving; place syringe in plastic bag with ice, and send specimen to lab.				
18. Remove gloves and wash hands.				
19. Evaluate and document the procedure.	L			
20. Answers question/s correctly.	L			
21. Reports with professional appearance (Complete Uniform, Good Grooming).	<u> </u>			
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RAW SCORE DIVIDED BY 42 X 10%				



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CHECKLIST: PERFORMING ENDOTRACHEAL TUBE CAR	E		
	SC	COR	ES
STEPS	2	1	0
1. Wash hands and apply gloves.			
2. Perform oropharyngeal suctioning			
3. Prepare tape. Have an available assistant hold ETT tube securely.			
4. Carefully remove tape from endotracheal tube and patient's face.			
Use adhesive remover to remove extra adhesive; discard tape into proper receptacles.			
5. Clean mouth, gums, and teeth on opposite side of tube with mouthwash swabs and solution. Move tube to opposite side and repeat cleaning.			
6. Clean face with soapy washcloth and towel dry. Use tincture of benzoin swab on cheeks and chin. Allow to dry completely.			
7. Secure the tube by placing the the tape around the patient's neck and tube.			
8. Wash oral airway with hydrogen peroxide, and rinse with normal saline.			
9. Reinsert oral airway using tongue depressor to displace tongue inferiorly, allow proper positioning of oral airway, and prevent oral trauma.			
10. Check ETT cuff pressure.			
11. Discard soiled items, and wash hands.			
12. Evaluate patient and document the procedure.			
13. Answers question/s correctly.			
14. Reports with professional appearance (Complete Uniform, Good			
Grooming).			
TOTAL:			
RAW SCORE DIVIDED BY 28 X 10%			



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CHECKLIST : PERFORMING TRACHEOSTOMY CARE SCORES STEPS 2 1 0 1. Wash hands. 2. Perform tracheostomy suction. 3. Allow patient to reoxygenate by breathing 100% oxygen, and pour the hydrogen peroxide and normal saline into sterile bowls.Place tracheotomy O2 collar over tracheotomy to ensure oxygen saturation. 4. Don sterile gloves; remove soiled dressing with forceps and discard in trash receptacle. 5. Keeping dominant hand sterile, remove oxygen source and inner cannula with nondominant hand; place cannula in hydrogen peroxide basin. 6. Place tracheotomy oxygen collar over outer cannula. 7. Clean inner cannula using small brush. 8. Rinse inner cannula with normal saline using nondominant nonsterile hand to pour saline. 9. Replace inner cannula and secure locking mechanism. Reapply oxygen source. 10. Cleanse outer cannula with a sterile cotton swab moistened with hydrogen peroxide. 11. Rinse stoma with cotton swab soaked in normal saline and dried with sterile 4 by 4s. 12. Do not release all tracheotomy ties at the same time. 13. Apply the tie in the faceplate correctly. 14. Insert fresh tracheotomy dressing under clean ties and faceplate. 15. Position patient comfortably and assess respiratory status. 16. Wash hands. 17. Evaluate patient and document the procedure. 18. Answers question/s correctly. 19. Reports with professional appearance (Complete Uniform, Good Grooming). TOTAL: RAW SCORE DIVIDE BY 38 X 10%



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CRITERIA IN RATING THE STUDENT'S PERFORMANCE

- 2 Performs and rationalizes the step correctly
- 1 Performs the step but failed to rationalize
- 0 Fails to perform the step or task

CHECKLIST: PERFORMING ENDOTRACHEAL OR TRACHEOSTON SUCTIONING	1Y T	UB	E
		COF	RE
STEPS	2	1	0
1. Assess patient's vital signs, breath sounds, an appearance prior to			
suctioning.			
2. Obtain and organize equipment.			
3. Explain procedure to patient or significant other.			
4. Wash hands.			
5. Put on personal protective equipment.			
6. Turn suction on between 80 mm Hg and 120 mm Hg.			
7. Open suction catheter set.			
8. Don sterile gloves.			
9. Open sterile saline irrigation, and pour into sterile cup.			
10. Hold suction catheter with dominant (sterile) hand while			
connecting suction source to suction catheter with nondominant			
(nonsterile) hand.			
11. Suction small amount of sterile saline by placing nondominant			
(nonsterile) thumb over suction port.			
12. Connect Ambu bag to endotracheal tube or tracheostomy tube			
adapter. Hyperoxygenate patient with 100% oxygen using Ambubag			
or mechanical ventilator.			
13. Insert suction catheter into endotracheal tube or tracheostomy			
tube using a slanted, downward motion until resistance is felt or			
cough is elicited.			
14. Apply intermittent suction with nonsterile(nondominant) thumb			
while withdrawing catheter in a circular motion, rotating between			
thumb and finger of sterile (dominant) hand.			
15. Replace oxygen delivery system between suctioning by			
reconnecting to ventilator or connecting to oxygen source.			
16. Place tip of suction catheter into sterile saline, and apply suction.			
17. Repeat suctioning procedure 2 or 3 times as necessary to remove			
secretions.			

18. Reattach oxygen source to endotracheal tube or tracheostomy tube.		
19. Disconnect suction catheter, wrap catheter around finger, and remove glove over catheter. Discard suction equipment appropriately.		
20. Reassess patient's vital signs, breath sounds, and oxygen saturation.		
21. Remove gloves and wash hands.		
22. Evaluate the patient and document the procedure.		
23. Answers question/s correctly.		
24. Reports with professional appearance (Complete Uniform, Good Grooming).		
TOTAL:		
RAW SCORE DIVIDE BY 48 X 10%		



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CRITERIA IN RATING THE STUDENT'S PERFORMANCE

- 2 Performs and rationalizes the step correctly
- 1 Performs the step but failed to rationalize
- 0 Fails to perform the step or task

CHECKLIST: PERFORMING CARDIOPULMONARY RESUSCITATIO)N (CPF	R)
	SCORE		RE
STEPS	2	1	0
1. Assess responsiveness. If the patient is not responsive, call for help.			
2. Put on gloves and position the patient supine on his or her back on a firm, flat surface, with arms alongside the body.			
3. Use the head tilt-chin lift maneuver or the jaw-thrust maneuver to open the airway.			
4. Look, listen, and feel for air exchange. Take at least 5 seconds and no more than 10 seconds.			
5. If the patient resumes breathing or adequate respirations and signs of circulation are noted, place the patient in the recovery position.			
6. If no spontaneous breathing is noted, seal the patient's mouth and nose with the face shield, one-way valve mask, or Ambu-bag or with rescuer's mouth.			
7. Instill two breaths, each lasting 1 second, making the chest rise.			
8. If you are unable to ventilate or the chest does not rise during ventilation, reposition the patient's head and reattempt to ventilate. If still unable to ventilate, begin CPR.			
9. Check the carotid pulse, simultaneously evaluating for breathing, coughing, or movement.			
10. If patient has a pulse, but remains without spontaneous breathing, continue rescue breathing at a rate of one breath every 5 to 6 seconds, for a rate of 10 to 12 breaths per minute.			
11. If the patient is without signs of circulation perform 30 chest compressions at a rate of 100 per minute,			
12. Give two rescue breaths after each set of 30 compressions. Do five complete cycles of 30 compressions and two ventilations.			
13. Defibrillation should be provided at the earliest possible moment, as soon as AED becomes available.			
14. Remove gloves, if used. Perform hand hygiene.			
15. Evaluate the patient and document the time you discovered the patient unresponsive and started CPR.			

16. Answers question/s correctly.		
17. Reports with professional appearance (Complete Uniform, Good Grooming).		
TOTAL:		
RAW SCORE DIVIDE BY 34 X 10%		



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- 2 Performs and rationalizes the step correctly
- 1 Performs the step but failed to rationalize
- 0 Fails to perform the step or task

CHECKLIST: ASSISTING WITH ENDOTRACHEAL INTUBATION			
	S	SCORE	
STEPS	2	1	0
1. Perform hand hygiene and don appropriate PPE.			
2. Prepare equipment and ensure that all are in working order while			
maintaining cleanliness of equipment.			
3. Explain procedure and risks to patient / family and obtain consent			
as appropriate for situation.			
4. Obtain patient history and NPO status as appropriate.			
5. Prepare for ETT insertion and ensure monitoring device is in place			
and patient has patent IV access.			
6. Perform hand hygiene. Prepare medication as ordered.			
7. Position patient and remove any object that will hinder access to			
the patient.			
8. Place patient supine unless otherwise directed or contraindicated.			
9. Perform hand hygiene. Don clean gloves. Remove any false teeth,			
bridges or foreign objects in the oral cavity.			
10. Slightly extend head and flex neck ("sniff position").			
11. Assist with procedure. Perform hand hygiene. Hyper-oxygenate			
as directed by supplying 100% oxygen.			
12. Pre-medicate patient as directed.			
13. Suction oropharynx as requested by intubating doctor.			
14. Apply cricoid pressure as requested by intubating doctor.			
15. Intubation attempts by the doctor. Manually ventilated with BVM			
device using 100% oxygen between attempts.			
16. Monitor SpO2 and/or ECG for deterioration during attempts.			
17. Once the ETT has been inserted into the trachea, it will be held in			
place by the HCP who intubated.			
18. The ETCO2 adapter is placed onto the ETT, positive pressure			
breaths are provided, and the cuff is quickly inflated and with a			
stethoscope over the trachea until no air leak can be heard.			
19. Observe for clinical improvement (heart rate, SpO2, color).			
Inspect for bilateral, symmetrical chest expansion.			
20. Firmly secure ETT with tape or any securement device.			
21. Auscultate lung fields to ensure bilateral air entry once the tube is			

secured. Remove gloves and perform hand hygiene.	
22. Connect patient to humidified oxygen source or mechanical	
ventilator.	
23. Perform hand hygiene and remove PPE.	
24. Ensure that chest x-ray is ordered and obtained.	
25. Evaluate the patient and document the procedure.	
26. Answers question/s correctly.	
27. Reports with professional appearance (Complete Uniform, Good	
Grooming).	
TOTAL:	
RAW SCORE DIVIDED BY 54 X 10%	



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CHECKLIST: PERFORMING MANUAL DEFIBRILLATION			
	S	COR	E
STEPS	2	1	0
1. Identifying Shockable Rhythm:			
Recognize a shockable heart rhythm.			
2. Once a shockable rhythm is identified, turn on the defibrillator and the			
appropriate energy level needs to be selected.			
3. Depending on the type of defibrillator being used, the first defibrillation is			
performed at 360 joules with a monophasic, or 150 to 200 joules with a			
biphasic.			
4. Charging and Paddles:			
Once the energy has been selected, the charge button on the defibrillator			
needs to be activated.			
5. Cardiac paddles or gel pads must be applied in the appropriate positions on the chest.			
6. The anterior paddle or pad is placed to the right of the upper sternal			
border below the clavicle, and the apex pad to the left of the nipple line with			
the center of the pad in the midaxillary line.7. When using paddles in place of gel pads, conductive gel should be applied			
to the paddles.			
8. During defibrillation, 25 to 30 pounds of pressure needs to be applied to			
each paddle.			
9. "Clear" Before Defibrillation:			
Say "Clear" loudly and visually make sure that no one else around the			
patient is in direct contact with the patient or the bed.			
10. The shock can be delivered when everyone is safe and clear.			
11. Once defibrillation has occurred, cardiopulmonary resuscitation (CPR)			
should be resumed for two minutes or five cycles.			
12. Evaluate and document the procedure.			
13. Answers question/s correctly.			
14. Reports with professional appearance (Complete Uniform, Good			
Grooming).			
TOTAL:]
RAW SCORE DIVIDED BY 28 X 10%			