



Ambulatory Skills Checklist

Name: _____

Date: _____

In order to provide suitable assignments for you, this checklist is intended as a method of assessing your professional proficiency. Please rate your skill level as accurately as possible by placing a **check** (✓) in the appropriate box.

1 = No experience; Theory/observed only

2 = Limited competency; < 5 times per year; Needs supervision

3 = Acceptable competency; > 5 times per year

4 = Competent; Performs on a daily or weekly basis; Proficient

Skill Level	1	2	3	4
General Patient Care				
Admit and Assess Patients				
Advance Directives				
Collect Appropriate Data				
Discharge Teaching				
Preoperative Teaching				
Patient Prep				
Computerized Documentation				
Cardiovascular				
Assess Heart Tones				
Bedside Tele Monitoring				
Interpretation of Coagulation Studies				
Perform Pulses/Circulation Checks				
Pre/Post Op Care Pacemaker				
Pulmonary				
Assess Breath sounds				
Apply Oxygen				
Interpret ABGs				
Thoracentesis				
Oximetry				
Neurology				
Assess Neurological Signs				
Epidurals				
Selective Nerve Root Blocks				
Level of Consciousness				
GI				
Insertion/Monitoring NG Tubes				
Assessment/Patient Care				
Flexible Sigmoidoscopy				
Hemorrhoid Banding				
Liver Biopsy				
Paracentesis				
Lap Band Surgery				

Skill Level	1	2	3	4
GU				
Bladder Biopsy				
Cystoscopy				
Urethral Dilation				
Nephrostomy				
Kidney Biopsy				
Suprapubic Catheter				
Prostate Biopsy				
Endocrine				
Care of Diabetic Patient				
Diabetic Teaching				
ENT and Mouth				
Prostodontics – Restorative Dentistry				
Mouth Biopsy				
Myringotomy				
Maxillofacial Prosthetics				
Nose Biopsy				
Thyroid Aspirate Biopsy				
Fiberoptic Laryngoscopy				
Tonsillectomy				
Rhinoplasty				
Wounds/Integument				
Application of Burn Dressings				
Application of Dressing				
Debridement of Wound				
Wound Care				
OB/GYN				
Electrodessication and Curettage (ED&C)				
Nipple Reconstruction				
Musculoskeletal				
Arthrocentesis				
External Hardware and Pin Care				
Arthroscopy				

Musculoskeletal cont...				
Open Reduction and Internal Fixation				
Closed Reduction and Internal Fixation				
Trigger Point Injections				
Plastics				
Liposuction				
Plastic Surgery				
Cosmetic				
Age Specific Practice Criteria				
Newborn/Neonate (birth - 30 days)				
Infant (30 days - 1 year)				
Toddler (1 - 3 years)				
Preschooler (3 - 5 years)				
School age children (5 - 12 years)				
Adolescents (12 - 18 years)				
Young adults (18 - 39 years)				
Middle adults (39 - 64 years)				
Older adults (64+ years)				

General Medications/Therapeutic Interventions				
Administer IM and SQ Meds				
Administer Inhalation Medications				
Administer PO Medications				
Bladder Irrigation and Instillation				
Needleless Systems				
Chemotherapy				
EMR				
Epic				
Cerner				
Eclipsys				
McKesson				
Meditech				
Other Computerized System				
Computerized Physician Order Entry				
Bar Coding for Medication Administration				

Please list any areas of expertise below:

I hereby certify that ALL information I have provided to Wellspring Nurse Source on this skills checklist is true and accurate. I understand and acknowledge that any misrepresentation or omission may result in disqualification from employment and/or immediate termination.

Nurse Signature: _____ Date: _____