



Business phone: (510) 452-4626  
 Toll-free: (800) 704-8391  
 Fax: (510) 452-4642  
 Locations on the East and West Coasts

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

## CHECKLIST FOR AMBULATORY CARE/CLINIC NURSE

### KEY

Please check the appropriate column of proficiency for each skill or patient care situation.

Level of Proficiency:

- 0 - Never done**
- 1 - Not done regularly**
- 2 - Six (6) months to one (1) year experience**
- 3 - More than one (1) year experience**

### PATIENT GROUPS

	0	1	2	3
Infant				
Adolescent				
Geriatric				

	0	1	2	3
Pediatric				
Adult				

### GENERAL SKILLS

	0	1	2	3
Charting/Documentation/Consents				
Basic Physical Assessments				
Universal Precautions				
Scheduling Appointments				
Scheduling Hospitalizations				
Ordering Supplies				
Medical Terminology				

	0	1	2	3
Admission/Discharge/Transfer				
Confidentiality of Information				
Infection Control				
Scheduling Outside Diagnostics				
Scheduling Outside Referrals				
Patient/Family Teaching				
Restraints Use, Criteria, Safety				

### ADMINISTRATIVE PROCEDURES

	0	1	2	3
Medical Records				
Insurance and Coding				
Other Office Machines				

	0	1	2	3
Office Management				
Computer PC Knowledge				

### CLINICAL PROCEDURES

	0	1	2	3
Examination Room Prep and Cleanup				
Appropriate Positioning for Exam				
Assist with Pap Smears				
Assist with Abdominal Exam				
Assist with ENT Exam				
Pap Smear Setup				
Vision Exam, Snellen Eye Chart				
Suture Setup				
Bandaging				
Throat Swabs				
Glucose Testing				
Rapid Strep Test				
Urine Pregnancy Test				
Occult Blood Test				
Vital Signs				
Venipuncture Adults				
Venipuncture Infants & Newborns				
Heel Puncture				

	0	1	2	3
Gathering Appropriate Exam Supplies				
Assist in Explaining Procedures				
Assist with GYN Exam				
Assist with Physical Exam, H&P				
Assist with Other Exam				
Ear Irrigation				
Hearing Screenings				
Assist with Cast Application/Removal				
Slings/Splints				
Growth Testing				
Collection Specimens				
Urine Dipstick				
Serum Pregnancy Test				
Electrocardiograms				
Ordering Radiographic Exams				
Venipuncture Pediatrics				
Finger Puncture				
PKU Collection				

### MEDICATION AND INJECTIONS

	0	1	2	3
Immunizations/Vaccinations				
Adult Intramuscular Injections				
Infant Intramuscular Injections				
Oral Medications				

	0	1	2	3
Subcutaneous Injections				
Pediatric Intramuscular Injections				
Eye, Ear and Nose Drops				
Allergy Testing				



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**AMBULATORY CARE/CLINIC EXPERIENCE**

	0	1	2	3
HIV Clinic				
Surgery Clinic				
Cancer Clinic				
Pediatric Clinic				
Neurology Clinic				
Eye-ENT				
Child, Elder, Spouse Abuse				
Sexually Transmitted Diseases				
Diabetes, Other Endocrine				
Employee Health				
Vomiting, Diarrhea				
Bites and Stings				
Advice Experience				
Pneumonia				
Bronchitis				
Influenza				

	0	1	2	3
OB/GYN Clinic				
F/U Clinic				
Urology Clinic				
Respiratory Clinic				
Orthopedics				
General Medicine				
Communicable Diseases				
Infectious Diseases				
Work-Related Injuries				
Burns				
Abdominal Pain Assessment				
Poisoning, Toxic Ingestions				
Tuberculosis				
Asthma				
Colds				

Signature: \_\_\_\_\_ Date: \_\_\_\_\_