

NEONATAL INTENSIVE CARE SKILLS CHECKLIST

NAME: _____ **DATE:** _____

Please check the appropriate letter of proficiency for the following types of clinical situations and equipment.

LEVEL OF PROFICIENCY

- A** = Able to teach & supervise
- B** = 1 year constant experience
- C** = Intermittent experience
- D** = No experience

	A	B	C	D
GENERAL				
Gestational assessment				
Physical assessment				
Assessment of heart sounds				
Assessment of lung sounds				
TPR				
Blood pressure				
Intra-arterial monitor				
Cardiac monitor				
Transcutaneous monitor				
Use of various ventilators				
Oxyhood				
Bag/Mask				
Infant CPR				
Ambubagging by hand during infant CPR				
Suctioning - oral				
Suctioning - nasal				
CPAP application				
Humidification				
Chest PT/neonatal procedure				
Utilization of bilimeter				
Phototherapy				
Infant stimulation				
Infant destimulation				
Utilization of radiant warmers				
Utilization of air-shields				
Maintenance of neutral-thermal environment				

NICU Skills Checklist

	A	B	C	D
Administration & monitoring of medications given				
oral				
IM				
IV				
SP				
Initiating and maintaining IV therapy				
Use of infusion pumps				
Use of IVAC control pumps				
Use of IVAC syringe				
Oral/nipple feeding				
OGT/insertion and feeding				
Continuous OGT feed				
Intermittent OGT				
Breast milk collection/storage				
Baby at breast				
Drawing blood samples for ABG's				
Working knowledge of neonate lab values				
Documentation of all infant reactions				
Responses to any therapy/medication				
Administration and monitoring of blood & Blood products				
CARE OF INFANT WITH:				
Respiratory Distress Syndrome				
Chest Tubes				
Hypothermia				
Colostomy				
ileostomy				
prematurity				
perforation sepsis				
vessel occlusion				
hemorrhage				
patent ductus arteriosus				
tetralogy of Fallot				
Tracheo-esophageal Fistula				
AIDS				
Hyperthermia				
Providing family teaching regarding infant's treatment & progress				
Assessment of family emotional needs & appropriate intervention needed				
Infant death				

NICU Skills Checklist

	A	B	C	D
Assisting family with grieving process				
Charting within the legal aspects of law				
Charge nurse experience				
Team leader experience				
Care of patient with:				
PDA ligation				
CHF				
DIC				
AIDS				
Pre/Post cardiac surgery				
Respiratory distress syndrome				
Broncho-pulmonary dysplasia				
Croup				
Epiglottitis				
Emphysema/asthma				
Cystic fibrosis				
Pneumonia				
Near drowning				
Near SIDS				
Care of orthopedic devices				
Seizures				
Reye's syndrome				
Meningitis				
V-P shunt				
Hydrocephalus				
Spina bifida				
Post-Harrington rod insertion				
Osteomyolitis				
Rheumatoid arthritis				
Fractures of extremities				
Muscular dystrophy				
Leukemia				
Post bone marrow transplant				
Assisting with bone marrow aspiration				
Anemia				
Sickle cell				
Hemophiliac				
Administration and monitoring of				
chemotherapeutic agents				

NICU Skills Checklist

	A	B	C	D
oncology - all phases				
tracheoesophageal fistula				
inguinal hernia				
necrotizing enterocolitis				
Chrones disease				
peritoneal dialysis				
ILuit conduit				
Wilm's tumor				
renal failure				
kidney transplants				
NEUROVASCULAR ASSESSMENT				
circulation check				
LOC				
fontanel				
pupil size and response				
Head to toe assessment of child/infant				
Use of doppler for blood pressure				
Determining blood pressure by palpation				
Interpretation of normal infant/child lab values				
Pre/Post cardiac surgery care				
Foley catheter insertion and care				
Suprapubic catheter care				
Urine testing:				
(1) S & A				
(2) specific gravity				
(3) ph				
(4) glucose				
Assessment of bowel sounds and abdominal girth				
Use and care of tubes:				
(1) Nasogastric				
(2) Gastrostomy				
(3) Miller-Abbott				
(4) Kantor				
(5) Gavage feeding				
Calculating caloric intake				
Calculating dehydration				
Child abuse				
Failure to thrive				
Tonsillectomy				

NICU Skills Checklist

	A	B	C	D
Cleft lip/palate				
Liver transplant				
Heart transplants				
Pre/Post operative assessment				
Assessment of head/neck injury				
Use of skeletal traction				
Use of halo traction				
Diabetic teaching				
Administration and monitoring of aminophylline				
Dying infant/child				
Charge nurse experience				
Team leader experience				
Charting within the legal aspects of law				

The information I have given is true and accurate to the best of my knowledge. I hereby authorize Be Well Nursing, LLC. to release checklist to client health care facilities of Be Well Nursing, LLC. relating to my contract employment with that facility.

(Signature)

(Date)