

## NICU / PICU SKILLS COMPETENCY CHECKLIST

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Total years of NICU / PICU experience: \_\_\_\_\_

**Rate your skills:**

**0** – NO Experience. Theory only.

**1** – Limited competency / proficiency.  
Supervision required.

**2** – Performed Infrequently, may need some supervision

**3** – Competent / proficient. Performed frequently and independently during the past 2 years.

SKILL	0	1	2	3
<b>I. CARE OF PATIENTS:</b>				
Premature infants				
Post-mature infants				
Birth injuries				
Soft tissue injury				
Head trauma				
Intracranial hemorrhage				
Perinatal Hypoxic-Ischemic brain injury				
Fractures				
Paralysis				
Dermatologic problems				
Candidiasis				
Erythema Toxicum Neonatorum				
Bullous Impetigo				
Cancer				
Anemia				
Hyperbilirubinemia				
Hypocalcemia				
Hyperglycemia				
Hypoglycemia				
Phenylketonuria (PKU)				
Hepatic Phototherapy				
Galactosemia				
Congenital Hypothyroidism				
Down's Syndrome				
RDS				
Bronchopulmonary Dysplasia (BPD)				
Low Apgar scores				
Low birth weight				
Small for gestational age				
Large for gestational age				
Apnea of prematurity				
Seizures				
Sepsis				
Meconium aspiration				
Persistent Patent Ductus Arteriosus				
Persistent Pulmonary Hypertension				
Retinopathy of Prematurity				
Narcotic addicted infant				
Fetal Alcohol Syndrome				

SKILL	0	1	2	3
<b>I. CARE OF PATIENTS (contd):</b>				
Spina Bifida				
Hydrocephalus				
Skeletal defects				
Acquired Infections from Mother				
AIDS				
Chickenpox				
Chlamydia				
Gonococcal Disease				
Hepatitis B				
Herpes				
Listeriosis				
Lyme Disease				
Rubella				
Syphilis				
Toxoplasmosis				
Ingestion / Overdose				
Blunt Trauma				
Gun shot				
Open chest				
Kawasaki disease				
Near drowning				
Malnutrition / anorexia / bulimia				
Penetrating trauma				
Pneumonia				
Meningitis				
Congenital Heart Defects				
<b>II. ASSESSMENTS:</b>				
Cardiovascular				
Pulmonary				
GI				
GU				
Musculoskeletal				
Neurological				
Neurological reflexes				
Integumentary				
Lab values				
Vital signs				
E / SE Medication				
Drug / Drug Interactions				

SKILL	0	1	2	3
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SKILL	0	1	2	3
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**III. CARDIOVASCULAR:**

Heart sounds				
BP interpretation				
EKG				
Cardiac catheterization				
Shunt				

**IV. ENDOCRINE:**

Preparation of Insulin				
Administration of Insulin				
Urine Testing				
Blood Testing				

**V. PULMONARY:**

Apnea Monitor				
Oralpharyngeal suctioning				
Nasotracheal suctioning				
Tracheostomy Tube Cannula Change				
Trach Cleaning & Suctioning				
Stoma care				
Oxygen / Oxygen equipment				
Postural drainage, percussion & equipment				
Chest tubes				
Pulmonary toilet (CPT)				
Use of pulmonaide				
Use of Inhalers				
Use of aerosolized medications				
Hemovac				
Ventilators				
IMV / SIMV				
PEEP				
CPAP				
CPR				
Establish airway				
ET intubation / extubation				

**VI. GI / GU:**

NG insertion / removal				
Nasogastric suction				
T-Tube				
Gastrostomy				
Jejunostomy				
Checking tube placement				
Feeding preparation & administration				
Manual disimpaction				
Digital rectal exam				
Ostomy irrigation				
Periostomal skin care				
Care of ostomy equipment / supplies				
Jackson Pratt				
Acute / chronic renal failure				
Transplants				
Foley catheter insertion / removal				
Foley catheter irrigation				
Suprapubic tube insertion / removal				
Suprapubic tube irrigation				

**VI. GI / GU (contd):**

Nephrostomy tube irrigation				
Peritoneal dialysis				
Condom catheter				
Bladder training				

**VII. NEUROLOGICAL:**

Assess neurological status				
Intracranial pressure monitoring				
Externalized VP shunt / reservoirs				
Spinal cord injury				
Status epilepticus				

**VIII. INJECTIONS / WITHDRAWAL:**

IM Injection				
SQ Injection				
ID Injection				
Venipuncture				

**X. INFECTION CONTROL:**

Universal precautions				
TB precautions				
Blood borne pathogens				
Disposal of hazardous waste				
Particulate respirations				

**XI. MEDICATION:**

Dobutrex (Dobutamine)				
Intropin (Dopamine)				
Adrenalin (Epinephrine)				
Nitroprusside (Nipride)				
Tridil (Nitroglycerine)				
Sodium bicarbonate				
Anticonvulsants				
Chemotherapy				
Administration of blood/blood products				
Immunizations				

**XII. SAFETY MEASURES:**

Aspiration precautions				
Removal of environmental barriers				
Oxygen precautions				
Evacuation plans				
Bleeding precautions				
Seizures precautions				

**XIII. PHLEBOTOMY / IV THERAPY:**

Care of child / neonate w/central line				
Broviac				
Groshong				
Hickman				
Procath				
Quinton				
PICC				
Umbilical artery line				
Umbilical venous line				
Percutaneous arterial line				
Percutaneous venous line				

<b>SKILL</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>XIV. MISCELLANEOUS:</b>				
Apgar scoring				
Ballard / Dubowitz				
Bereavement / postpartum care				

<b>SKILL</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>XIV: MISCELLANEOUS (contd):</b>				
Preparation for transport / transfer				
Screen for hearing loss				
Craniofacial reconstruction				

<b>EXPERIENCE</b>	<b># of Yrs of Experience</b>	<b>Comments</b>
Pediatric Intensive Care		
Pediatric Stepdown		
General Pediatrics		
Level I Nursery / NICU		
Level II Nursery / NICU		
Level III Nursery / NICU		
Other:		

Do you speak any other language(s) besides English? Yes / No If YES, please list other language(s): \_\_\_\_\_

Are you familiar with computer charting? Yes / No If YES, what system(s) have you used: \_\_\_\_\_

Comments:

I hereby certify that all information I have provided to RNS Incorporated 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 \_\_\_\_\_

RNS, Inc. Reviewer Signature: \_\_\_\_\_ Date \_\_\_\_\_