

ICU Skills Checklist

Name: _____

Date: _____

Instructions: This checklist is meant to serve as a general guideline for our client facilities as to the level of your skills within your nursing specialty. Please use the scale below to describe your experience/expertise in each area listed below.

Proficiency Scale:

1 = No Experience, 2 = Need Training, 3 = Able to perform with supervision, 4 = Able to perform independently

Cardiac	1	2	3	4
Defibrillation/Cardioversion				
Assisting with Insertion of Central Lines				
Pacemakers-External				
Permanent or Temporary Pacemaker				
Cardiac Arrest/CPR				
A-Line (Transducer setup-D/C)				
Swan Ganz (Transducer setup-D/C)				
Balloon Pump (IABP)				
SVO2 Monitoring				
Automatic Internal Cardioverter Defib				
Care of patient with	1	2	3	4
Aneurysm				
Acute MI/Unstable Angina				
Cardiogenic/Hypovolemic Shock				
Pre/Post Cardiac Surgery				
Heart Transplant				
PTCA				
COPD				
ARDS				
Pulmonary Embolism				
Pulmonary Edema				
Pneumonia				
Inhalation Injuries				
CVA				
Seizure Disorder				
Overdose				
Neuro Injury/Trauma				
Pre/Post Neuro Surgery				
Cranial Hemorrhage				
Aphasia				
Multiple Sclerosis				
Pancreatitis				

Care of patient with (Cont.)	1	2	3	4
GI Bleed				
Esophageal Bleeding				
Bowel Obstruction				
Liver Transplant				
Paralytic Ileus				
TURP				
Shunts and Fistulas				
Nephrectomy				
Renal Transplant				
Renal Trauma				
Use and Administration of the following	1	2	3	4
Atropine				
Bretylol				
Bumex				
Digoxin				
Dopamine				
Dobutrex				
Inderal				
Inocor				
Isuprel				
Lidocaine				
Neosynephrine/Nipride				
NTG				
Pronestyl				
Titrate Morphine				
Verapamil				
Thrombolytic Agents				
Prep/Titration of Emergency Drugs				
Aminophylline				
Corticosteroids				
Bronkosol				
Ventolin				
Alupent				
Decadron				
Dilantin				
Magnesium Sulfate				
Phenobarbital				
Steroids				
Valium				
Versed				
Respiratory	1	2	3	4
Lung Transplant				
Establishing an Airway				

Respiratory (Cont.)	1	2	3	4
Pulse Oximetry				
Interpretation of ABG				
Drawing ABG Blood Sample from A-Line				
Incentive Spirometer				
Neurology	1	2	3	4
Assessment of Neuro Signs				
Use of Glasgow Coma Scale				
Seizure Precautions				
Assist with Lumbar Puncture				
ICP Monitoring				
Crutchfield Tongs				
Halo Traction				
Stryker Frame				
Assessment of Sensory-Motor Function				
Cervical Traction				
Cranial Nerve Assessment				
LOC Assessment				
Pre/Post Neuro Surgical Care				
Visual Acuity Measurement				
Vascular	1	2	3	4
Peripheral Pulses				
Fluid Overload				
Starting IV's				
Subcutaneous Central Line				
Hickman/Broviac/Groshong Catheters				
Maintenance of Heparin Lock				
TPN/Hyperalimentation				
Air Occlusive Dressing				
Infusion Pump				
Peritoneal Dialysis				
Hemodialysis				
Heparin Drip - Precautions and Maintenance				
Gastrointestinal	1	2	3	4
NG Tube Insertion				
Gastronomy Tube				
Jejunostomy Tube				
Enterostomal Care				
Genito Urinary/Renal	1	2	3	4
Foley Catheter Insertion				
GU Irrigations				
Nephrostomy Tube				

Genito Urinary/Renal (Cont.)	1	2	3	4
Suprapubic Tube				
Electrolyte Imbalance/Replacement				
Other				
Oncology				
Chemotherapy				
Isolation Techniques				
Hyperbaric Oxygenation				
Fingerstick Blood Glucose monitoring				
Equipment	1	2	3	4
Bear I				
Bear II				
Bear V				
Bennett 7200				
CPAP				
Emerson				
EMV				
MA-I				
MA-II				
Monihan				
Ohio 560				
PEEP				
Pressure Pre-Set				
Servo 900b				
Servo 900c				
Servo 900e				
Siemens				
Hewlett-Packard				
Spacelab				
Marquette				
Mennen				
Lifecare				
Nihon-Koder				

I hereby certify that ALL information I have provided to ADEX Medical Staffing, LLC on this skills checklist and all other documentation, 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: _____