




NURSE AIDE CURRICULUM SKILL PERFORMANCE CHECKLIST

Name: _____

Measure and record temperature: Electronic Thermometer 4.01D

 This performance checklist must be used by the teacher and student during skill acquisition, guided practice, and independent practice.

 During skill check-off, the student must perform the skill unassisted with 100% competence.

 While the course is being taught, a skill performance summary document/chart *may* be used to verify skills that have been completed. However, verification that the student has demonstrated competency on this skill **MUST** be recorded on the NATS Part II by the conclusion of the course.

Equipment: Paper, pen, electronic thermometer, probe covers, tissues, and gloves

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| | 1. Assemble equipment. Knock before entering room. |
| | 2. Address resident by name. State your name and title. |
| | 3. Identify resident. Explain procedure and obtain permission. |
| | 4. Wash hands. Provide privacy. |
| | 5. Provide for resident safety. Position bed at best level for body mechanics. |
| | 6. Put on gloves if contamination possible. |
| | 7. Remove appropriate colored probe from stored position and insert into disposable probe cover. |
| | Insert covered probe into mouth, axilla, or rectum as required. |
| | <input type="checkbox"/> Probe should be lubricated for rectal temperature. |
| | 8. <input type="checkbox"/> Red probe is for rectal temperatures |
| | <input type="checkbox"/> Blue probe is for oral temperatures or axillary temperatures |
| | 9. Hold probe in place. |
| | 10. Wait for signal indicating temperature reading is complete. |
| | 11. Remove probe, eject, and discard probe cover. Do not touch probe cover. |
| | 12. Return probe to its stored position |
| | 13. Record resident's name and temperature on notepad using R or A as appropriate. |
| | 14. Remove gloves, if worn, and wash hands. |
| | 15. Lower bed. Provide for comfort with call signal in reach. |
| | 16. Return thermometer to appropriate place. |
| | 17. Record temperature and report any abnormal reading to supervisor. |

Instructor's Initials: _____ Date: _____