## NURSE AIDE CURRICULUM SKILL PERFORMANCE CHECKLIST

Name:						
Perin	eal Ca	re - 5.01M This skill may be required during NNAAP® testing				
		guided practice, and independent practice.  During skill check-off, the student must perform the skill unassisted with 100% competence.				
Equip	omen	t: Basin of warm water, washcloths, bed protector, towel, bath blanket/equivalent, soap or pericare product, gloves				
NNA.	AP®	Tip: There are three (3) critical steps in perineal care. Be sure to review the NNAAP® Nurse Aide I Candidate Handbook prior to taking the NNAAP® exam.				
	1.	Knock before entering room. Address resident by name.				
	2.	State your name and title. Identify resident.				
	3.	Explain procedure and obtain permission maintaining face-to-face contact whenever possible.				
	4.	Wash hands. Provide privacy. Assemble equipment.				
	5.	Provide for resident safety and raise bed to best level for body mechanics.				
	6.	Fill wash basin 2/3 full with water not warmer than 105 – 110 degrees F. Before washing check water temperature for safety and comfort and ASK CLIENT TO VERIFY COMFORT OF WATER.				
	7.	Put on gloves before washing perineal area.				
	8.	Cover resident with bath blanket/equivalent and fanfold top linen to foot of bed exposing perineal area while avoiding overexposure of client.				
	9.	Remove soiled clothing and linen protector(s) if necessary. Change gloves and wash hands as needed, providing for resident safety.				
	10.	Place linen protector under client's perineal area.				

	11.	Female Resident		
			Assist resident to flex knees and spread legs as much as possible.	
			Gently open all skin folds and wash inner area front to back with soap or periwash.	
			If soap is used, wet wash cloth, wring out excess water, apply soap to wash cloth.	
			Wash inner area, outer skin folds, inner legs, and outer area along and then the	
			outside of the labia. Wash all those areas using front to back strokes.	
			Using CLEAN washcloth, RINSE soap from genital area, moving front to back, while	
			using a clean area of the washcloth for each stroke.	
			DRY genital area moving from front to back with towel.	
			TURN client to the side after washing genital area. Wash and rinse the rectal area	
			moving front to back using a clean area of washcloth for each stroke. Dry rectal	
			area with towel. Think "Pick up where you left off" to get front to back correct while	
			cleaning rectal area.	
	12.	Má	ale Resident	
			Gently push back foreskin of penis, if resident uncircumcised.	
			Using a circular motion, gently wash the penis by lifting it and cleaning from the tip downward.	
			Rinse in the same manner and return foreskin to natural position.	
			Wash scrotum and rinse. Wash, rinse, and pat dry the skin area between the legs.	
			TURN client to the side after washing genital area. Wash and rinse the rectal area	
			moving front to back using a clean area of washcloth for each stroke. Dry rectal area with	
			towel. Provide for resident safety.	
	13.		emove the bed protector and the bath blanket/equivalent.	
	14.		eposition the client in a comfortable position.	
	15.		npty, rinse, and dry basin and place in bedside table or designated area.	
	16.	Dis	spose of used linen into soiled linen container and dispose of bed protector appropriately.	
	17.	Αv	oid contact between care provider clothing and used linen.	
	18.		TER Removing, cleaning, and storing other equipment according to facility policy remove oves without contaminating self, dispose gloves into waste container, and WASH HANDS.	
	19.	Pr	ovide for resident safety and comfort, leave bed locked in low position.	
	20.	Re	ecord actions and report any abnormal observations to supervisor.	
Instr	uctor	's In	itials:Date:	