




# NURSE AIDE CURRICULUM SKILL PERFORMANCE CHECKLIST

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

## Apply Warm or Cold Applications - 5.02D

 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:** Water basin, arm or foot bath, bath thermometer, bath blanket, waterproof pads, towels

**Note:** Follow manufacturer's directions that accompany each type and brand of sitz bath, heating device or cold pack to ensure correct usage.

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|  | 1. Receive directions from supervisor. Wash hands and assemble equipment.  |
|  | 2. Knock before entering room. Address resident by name.   |
|  | 3. State your name and title. Identify resident.   |
|  | 4. Explain procedure and obtain permission. Provide privacy.   |
|  | 5. Position the patient for the procedure. Expose only the body part to be treated. Place the signal light within reach  |
|  | 6. Place waterproof pad under the part of the body to which hot/cold "pack" will be applied  |
|  | To fill ice bag, ice collar, or glove:<br>Fill the device 1/2 to 2/3 full with crushed ice<br>Remove the air by gently squeezing the device "burp the bag"<br>7. Secure the device with the stopper or cap.<br>Check for leaks, and dry the device with paper towels<br><b>COVER THE DEVICE WITH A FLANNEL COVER, TOWEL, OR PILLOWCASE</b> |
|  | 8. Apply the "pack" to the area. Make note of the time.  |
|  | 9. Cover the patient with a bath blanket for warmth  |
|  | 10. Check the area for redness, cyanosis or complaints of discomfort <b>every 5 minutes</b> . Stop the soak if any of these occur. Wrap the body part in a towel, and tell the charge nurse right away.  |
|  | 11. At the end of the time ordered by the doctor, remove the compress from the area and pat skin dry.  |
|  | 12. Provide for resident safety and comfort. Bed in low, locked position with call signal in reach.  |
|  | 13. Record actions and report any abnormal observations to supervisor.   |

Instructor's Initials: \_\_\_\_\_ Date: \_\_\_\_\_