

Student _____
Dates of Rotation _____

Skilled Nursing Rotation Task Sheet

OBJECTIVES

OBSERVED/ASSISTED

- | | |
|---------------------------------------|---------------|
| 1. Orientation to SNU | _____ / _____ |
| 2. Locating Safety Devices | |
| a. Emergency exits | _____ / _____ |
| b. Fire extinguishers | _____ / _____ |
| 3. Infection Control | |
| a. Handwashing | _____ / _____ |
| b. Isolation techniques | _____ / _____ |
| c. Vital Signs | _____ / _____ |
| 4. Answering call lights / signals | _____ / _____ |
| 5. AM Care | |
| a. bathing, dressing patients | _____ / _____ |
| b. nourishments | _____ / _____ |
| c. changing bed linens | _____ / _____ |
| d. intake & output | _____ / _____ |
| 6. Wound Care | |
| a. dressing change | _____ / _____ |
| b. operative site check | _____ / _____ |
| c. suture removal | _____ / _____ |
| 7. Ambulation / Transporting patients | _____ / _____ |
| 8. Admission/discharge procedures | _____ / _____ |

Mentor Signature

Date