

Nursing Competencies Check-Off List	
(Score: S = Satisfactory, U = Unsatisfactory, NP = Not Performed)	
Name:	Date:
<b>I. Basic Nursing Skills</b>	
Skill	Score
Hand hygiene and infection control	
Vital signs assessment (BP, HR, RR, Temp, O2 Sat, Pain)	
Height and weight measurement	
Medication administration (Oral, IM, SQ, IV, PR, Topical)	
Blood glucose monitoring	
Wound care and dressing changes	
Sterile technique	
Foley catheter insertion and removal	
Nasogastric tube (NGT) insertion, care, and removal	
Enteral feeding administration	
Oxygen therapy administration (nasal cannula, mask)	
Suctioning techniques (oral, tracheostomy)	
Specimen collection (urine, stool, sputum, blood)	
<b>II. Patient Care &amp; Safety</b>	
Skill	Score
Patient identification and safety verification	
Fall risk assessment and prevention strategies	
Proper body mechanics and patient positioning	
Mobility assistance (transfers, ambulation, gait belt use)	
Range of motion (ROM) exercises	
Restraint application and monitoring	

Basic life support (BLS) / CPR	
Heimlich maneuver for choking	
Assisting with activities of daily living (ADLs)	
<b>III. Medication &amp; IV Therapy</b>	
<b>Skill</b>	<b>Score</b>
Medication calculation and dosage verification	
IV insertion and site care	
IV fluid administration and monitoring	
Central line care and dressing change	
Blood transfusion administration and monitoring	
IV push medication administration	
<b>IV. Advanced Nursing Procedures</b>	
<b>Skill</b>	<b>Score</b>
Tracheostomy care and suctioning	
Chest tube management	
EKG/ECG lead placement and interpretation basics	
Injections (Subcutaneous, Intradermal, Intramuscular)	
PICC line care and flushing	
Wound vac application and management	
<b>V. Documentation &amp; Communication</b>	
<b>Skill</b>	<b>Score</b>
Proper charting and electronic health records (EHR) use	
SBAR communication with healthcare team	
Incident reporting procedures	
Patient education and discharge teaching	
<b>VI. Specialized Nursing Skills (if applicable)</b>	
<b>Skill</b>	<b>Score</b>

Maternal/Newborn: Fundal checks, breastfeeding support	
Pediatric: Growth charting, vaccine administration	
Critical Care: Ventilator management, arterial line monitoring	
Mental Health: Therapeutic communication, crisis intervention	
<b>Evaluator Signature:</b> _____	
<b>Date:</b> _____	

Questions, Comments, or Concerns placed here.

