

**Directions**

Please circle a value for each question to provide us and the interested facilities with an assessment of your clinical experience. These values confirm your strengths within your specialty and assist the facility in the selection process of the healthcare professional.

Experience	
0	Not Applicable
1	No Experience
2	Some Experience (Require Assistance)
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Print Name

Last 4 Digits of SS#

Date

General Skills	Experience					
Advanced directives	0	1	2	3	4	5
Cultural diversity	0	1	2	3	4	5
Patient teaching	0	1	2	3	4	5
Restrictive devices (restraints)	0	1	2	3	4	5
Ambulatory cuffs	0	1	2	3	4	5
End of life care/palliative care	0	1	2	3	4	5
Correctional admission & discharge	0	1	2	3	4	5
Correctional alarm systems	0	1	2	3	4	5
Automated Medication Dispensing System, Pyxis, Omnicell, or other	0	1	2	3	4	5
Diabetes mellitus	0	1	2	3	4	5
Blood Glucose Monitoring (BGM)	0	1	2	3	4	5
Insulin administration	0	1	2	3	4	5
National Patient Safety Goals	0	1	2	3	4	5
Accurate patient/inmate identification	0	1	2	3	4	5
Effective communication	0	1	2	3	4	5
Interpretation & communication of lab values	0	1	2	3	4	5
Medication administration	0	1	2	3	4	5
Labeling: obtain lab specimens	0	1	2	3	4	5
Anticoagulation therapy	0	1	2	3	4	5
Pain assessment & management	0	1	2	3	4	5
Infection control	0	1	2	3	4	5
Universal precautions	0	1	2	3	4	5
Isolation	0	1	2	3	4	5
Assist with treatment procedures	0	1	2	3	4	5
Wound care	0	1	2	3	4	5
<b>IV Therapy</b>						
Starting & maintaining peripheral IVs	0	1	2	3	4	5
Venous blood draw	0	1	2	3	4	5
<b>Cardiac Monitoring &amp; Emergency Care</b>						
Cardiac monitors	0	1	2	3	4	5
Interpretation of rhythm strips	0	1	2	3	4	5

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General Skills - cont.	Experience					
Obtains 12 lead EKG	0	1	2	3	4	5
Treatment of dysrhythmias	0	1	2	3	4	5
Cardiac arrest/CPR	0	1	2	3	4	5
O2 therapy & delivery	0	1	2	3	4	5
Pulse oximetry	0	1	2	3	4	5
Use of doppler	0	1	2	3	4	5
Assessment of heart sounds	0	1	2	3	4	5
Vascular assessment	0	1	2	3	4	5
Awareness of HCAHPS	0	1	2	3	4	5
<b>Care of the Patient with:</b>						
Angina	0	1	2	3	4	5
CHF	0	1	2	3	4	5
Post MI	0	1	2	3	4	5

Respiratory	Experience					
Assessment of breath sounds	0	1	2	3	4	5
Establishing an airway	0	1	2	3	4	5
Ambuing techniques	0	1	2	3	4	5
Suctioning	0	1	2	3	4	5
<b>Care of Patient with:</b>						
COPD	0	1	2	3	4	5
Pneumocystis	0	1	2	3	4	5
Pneumonia	0	1	2	3	4	5
Emphysema	0	1	2	3	4	5
Asthma	0	1	2	3	4	5
Tuberculosis	0	1	2	3	4	5
<b>Use &amp; Administration of the Following:</b>						
Bronchodilators	0	1	2	3	4	5
Steroids	0	1	2	3	4	5
Expectorants	0	1	2	3	4	5

Gynecology	Experience					
Gyn exam/pap	0	1	2	3	4	5
Self breast exam	0	1	2	3	4	5
Ectopic pregnancy	0	1	2	3	4	5
Pelvic inflammatory disease	0	1	2	3	4	5
Endometriosis	0	1	2	3	4	5

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Neurology	Experience					
Neurological assessment	0	1	2	3	4	5
Glasgow coma scale	0	1	2	3	4	5
Seizure precautions	0	1	2	3	4	5
Assist with lumbar puncture	0	1	2	3	4	5
<b>Care of Patient with:</b>						
Post CVA	0	1	2	3	4	5
TIA	0	1	2	3	4	5
Seizure activity	0	1	2	3	4	5
Head & spinal cord injury/trauma	0	1	2	3	4	5
Cranial hemorrhage	0	1	2	3	4	5
Delirium tremors	0	1	2	3	4	5
Neuromuscular diseases	0	1	2	3	4	5
<b>Use &amp; Administration of the Following:</b>						
Antiepileptics	0	1	2	3	4	5
Steroids	0	1	2	3	4	5

Psychiatric Disorders	Experience					
Psych assessment	0	1	2	3	4	5
Suicide risk assessment	0	1	2	3	4	5
Suicide precautions	0	1	2	3	4	5
Major depression	0	1	2	3	4	5
Bipolar disorder (manic-depressive illness)	0	1	2	3	4	5
Anxiety disorders	0	1	2	3	4	5
Post Traumatic Stress Disorder (PTSD)	0	1	2	3	4	5
Psychotic disorders	0	1	2	3	4	5
Schizophrenia	0	1	2	3	4	5
Personality disorders	0	1	2	3	4	5
Antisocial	0	1	2	3	4	5
Passive/aggressive	0	1	2	3	4	5
Paranoia	0	1	2	3	4	5
Schizotypal personality disorder	0	1	2	3	4	5
Eating disorders	0	1	2	3	4	5
Anorexia nervosa	0	1	2	3	4	5
Bulemia nervosa	0	1	2	3	4	5
Pica	0	1	2	3	4	5

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Crisis Management	Experience					
Homicide	0	1	2	3	4	5
Suicide	0	1	2	3	4	5
Rape	0	1	2	3	4	5
Violent individual	0	1	2	3	4	5

Substance Use/Abuse	Experience					
Alcoholism	0	1	2	3	4	5
Alcohol withdrawal syndrome	0	1	2	3	4	5
Delirium Tremens (DTs)	0	1	2	3	4	5
Wernicke-Korsakoff syndrome	0	1	2	3	4	5
Drug use/abuse	0	1	2	3	4	5
Hallucinogenics	0	1	2	3	4	5
Opiates (heroin, morphine, oxycodone, codeine)	0	1	2	3	4	5
Stimulants (cocaine/amphetamines)	0	1	2	3	4	5
Benzodiaepams	0	1	2	3	4	5
Drug withdrawal/detoxification	0	1	2	3	4	5
<b>Care of Patient with:</b>						
Delusions	0	1	2	3	4	5
Hallucinations	0	1	2	3	4	5

Gastrointestinal	Experience					
GI assessment	0	1	2	3	4	5
NG tube insertion & management	0	1	2	3	4	5
Enterostomal care	0	1	2	3	4	5
<b>Care of Patient with:</b>						
Pancreatitis	0	1	2	3	4	5
Hepatitis	0	1	2	3	4	5
G.I. bleed	0	1	2	3	4	5
Esophageal bleeding	0	1	2	3	4	5
Bowel obstruction	0	1	2	3	4	5
<b>Use &amp; Administration of the Following:</b>						
Anticholinergics (antispas, Bentyl or Robinul)	0	1	2	3	4	5
Cathartics	0	1	2	3	4	5

Genitourinary/Renal	Experience					
AV shunt/fistula	0	1	2	3	4	5
Catheter insertion	0	1	2	3	4	5
GU irrigations	0	1	2	3	4	5

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Orthopedic	Experience					
Splints	0	1	2	3	4	5
Cast care	0	1	2	3	4	5
Cast removal	0	1	2	3	4	5
Ortho trauma	0	1	2	3	4	5

Other	Experience					
Staple/suture removal	0	1	2	3	4	5
Oncology	0	1	2	3	4	5
Chemotherapy	0	1	2	3	4	5
Leadership skills (team leader or charge nurse)	0	1	2	3	4	5
Supervision of unlicensed assistive personnel	0	1	2	3	4	5
Post mortem care	0	1	2	3	4	5
Training in over familiarization with inmates	0	1	2	3	4	5
Training in potential/actual weapon recognition	0	1	2	3	4	5

Age Specific Competencies	Experience					
Newborn/neonate (birth-30 days)	0	1	2	3	4	5
Infant (31 days-1 year)	0	1	2	3	4	5
Toddler (ages 2-3 years)	0	1	2	3	4	5
Preschool (ages 4-5 years)	0	1	2	3	4	5
School age (ages 6-12 years)	0	1	2	3	4	5
Adolescent (ages 13-21 years)	0	1	2	3	4	5
Young adult (ages 22-39 years)	0	1	2	3	4	5
Adult (ages 40-64 years)	0	1	2	3	4	5
Older adult (ages 65-79 years)	0	1	2	3	4	5
Elderly (ages 80+ years)	0	1	2	3	4	5



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**Please list any Additional Skills:**

1.	2.
3.	4.
Additional training:	
1.	2.
3.	4.
Additional equipment:	
1.	2.
3.	4.

Fax to: 1-888-298-3146

The information on this and all preceding pages is true and correct.

Signature

Date