



# Clinical Nursing

## ***New for 2018-2019***

Introduction to Medical-Surgical Nursing 12<sup>th</sup> Edition has been released. For information about what happens to the tests when a new edition of a resource is released, please see [GRR item #50](#). At ILC, [photo ID](#) must be presented prior to competing in each round.

**Purpose** To provide the HOSA member with an opportunity to develop and demonstrate knowledge and skills in clinical nursing.

**Description** This event will consist of two rounds of competition. Round One will be a written, multiple choice test. Written test will measure knowledge and understanding at the recall, application or analysis levels. Higher-order thinking skills will be incorporated as appropriate. The top scoring competitors will advance to Round Two for the performance of selected skill(s) identified in a written scenario. The scenario will require the use of critical thinking skills. The performance will be timed and evaluated according to the event guidelines.

**Dress Code** Competitors shall wear proper business attire or official HOSA uniform, or attire appropriate to the occupational area, during the orientation, written test and skill(s)– jeans and shorts are not acceptable. Bonus points will be awarded for [proper dress](#).

- Rules and Procedures**
1. Competitors in this event must be active members of HOSA-Future Health Professionals and in good standing in the division in which they are registered to compete (Secondary or Postsecondary/Collegiate). *Competitors should compete in skill events at the highest level of training. An example would be students enrolled in an Emergency Medical Technician course should compete in the Emergency Medical Technician event and not in the CPR/First Aid event.*
  2. Competitors must be familiar with and adhere to the [“General Rules and Regulations of the National HOSA Competitive Events Program \(GRR\).”](#)
  3. The test will consist of fifty (50) multiple choice items. The test score will be used as part of the final score for the event.

Round One: **Written Test Plan**

Basic Care .....	30%
Medication Management .....	10%
Fluids and Nutrition.....	10%
Medical-Surgical Nursing.....	20%
Geriatrics .....	10%
Pediatrics .....	10%
Home Care .....	10%

4. All competitors shall report to the site of the event orientation at the time designated. The Round One test will immediately follow the orientation. At ILC, a [photo ID](#) must be presented prior to competing in each round. **No proxies will be allowed for the orientation.**

5. Test Instructions: There will be a maximum of **60 minutes** to complete the test. There will be a verbal announcement when there are 15 minutes remaining.

NOTE: *States/regions may use a different process for testing, to include but not limited to pre-conference testing, online testing, and testing at a computer. Check with your Area/Region/State for the process you will be using.*

6. All official references are used in the development of the written test. The specific reference selected for each skill is listed in the Facilities, Equipment and Materials section of these guidelines.

- [Perry and Potter, Clinical Nursing Skills and Techniques, Elsevier Science/Mosby, Inc. Latest edition.](#)
- [Timby, Barbara, Introductory Medical Surgical Nursing, Lippincott. Latest edition.](#)

7. The test score from Round One will be used to qualify the competitor for the Round Two skills. The skills approved for Round Two for this event are:

Skill I:	Administer Medication Intramuscular	(11 minutes)
Skill II:	Administer Medication Subcutaneous	(11 minutes)
Skill III:	Measuring Oxygen Saturation	(5 minutes)
Skill IV:	Discontinuing Peripheral IV Access	(8 minutes)
Skill V:	Urethral Catheterization – Straight	(15 minutes)
Skill VI:	Applying a Nasal Cannula or Oxygen Mask	(5 minutes)

**(FOR ALL SKILLS, BODY FLUIDS WILL BE A SIMULATED PRODUCT)**

8. HOSA Management and event personnel have the option of providing one additional minute to the skill event interval prior to the scenario for competitors to preview the equipment that is provided for the event. If given, the one minute allowed for equipment preview will be added to the overall skill interval and competitors will be told they have an extra minute to review the equipment.
9. The selected skill(s) for Round Two, in the form of a written scenario (Physician's Orders), will be presented to the competitor at the start of the skill to be performed. One or more skills may be combined in the scenario. The scenario will be the same for each competitor and will include a challenging component that will require the competitor to apply critical thinking skills. A sample scenario can be found [here](#).
10. The scenario is a secret topic that includes the Physician's Orders for the skill(s) to be performed. Professional ethics demand that competitors DO NOT discuss or reveal the secret topic until after the event has concluded. Violation of the ethics rules will be severely penalized.
11. In case of a tie, the highest test score will be used to determine the rank.
12. Competitors must complete all steps of the skill listed in the guidelines even if the steps must be simulated/verbalized. Steps may NOT be simulated/verbalized when the equipment/materials are available.
13. The competitor must earn a score of 70% or higher on the combined skill(s) of the event (excluding the test) in order to be recognized as an award winner at the ILC.

14. The timing for the skill will begin when the scenario is presented. Competitors will be stopped at the end of the time allowed for a selected skill(s).

**Competitors must provide:**

- Event guidelines (*Orientation*)
- Watch with a second hand
- Non-latex gloves, gown, goggles or safety glasses, mask
- Straight catheterization tray (disposable)
- Two #2 lead pencils with eraser
- A [photo ID](#)

**FOR SPECIFICS ON EVENT MANAGEMENT SEE [MANAGING COMPETITIVE EVENTS](#)**

**Required Personnel:**

- One Event Manager
- One QA to provide quality assurance for the event by ensuring that the guidelines are followed and all event documents are complete.
- One Section Leader per section
- One judge per skill selected per section
- Proctors for Testing – Approximately one proctor for 20 competitors
- Event assistants per section as needed
- One-two patients as required by the scenario (per section) with identification band(s)
- Timekeepers (if necessary)
- Holding room attendants(s) as needed

**Facilities, Equipment and Materials:**

**Round One: Written Test** (Reference: All resources)

- List of competitors for check-in
- One pre-numbered test per competitor
- Scantron/answer forms- one copy per competitor
- Evaluation forms- competitor and event personnel
- #2 lead pencils with eraser to complete evaluations (event personnel)

**Round Two Skills: General**

- Clinical and/or laboratory stations for selected skills
- Holding rooms or areas for competitors (if off-site)
- List of competitors for check-in
- Written Scenario-copies for judges, section leaders
- Patient and judge scripts as needed
- #2 lead pencils (judges & evaluations)
- Stopwatch(s)
- Rating sheets-one per judge per team
- Evaluation forms-competitor, judge, event personnel
- Copy of guidelines for judges
- Hand sanitizer (alcohol based handrub)

**Skill I & II Administer Medication** (Perry and Potter)

- Sterile safety syringe of correct size
- Sterile safety syringes of incorrect sizes (to allow for choice)
- Labeled medication to be injected
- Labeled medications to serve as distractions (to allow for choice)
- Medication Administration Record (MAR)
- Patient chart with physician orders (scenario) and nurses' notes
- Needle/syringe sharps container
- Disinfectant for skin/alcohol wipes
- Injection pad or chase doll (manikin) for injection with identification band
- Patient (optional)
- Waste container
- Hospital beds or exam tables (with linens)
- Bedside or over bed table (if called for in the scenario)

**Skill III Measuring Oxygen Saturation** (Perry and Potter)

- ID band
- Nail polish remover and cotton balls
- Oximeter with finger probe
- Patient chart with physician orders (scenario) and nurses' notes
- Patient
- Chair or bed/exam table for patient
- Overbed table or table (if called for in the scenario)

**Skill IV Discontinuing Peripheral IV Access** (Perry and Potter)

- Waste container and plastic bags for waste
- Simulated IV dressing to be removed
- Manikin arm
- Patient (optional)
- Patient chart with physicians orders (scenario) and nurses' notes.
- IV set-up with bottle/bag, tubing and catheter, taped to manikin arm
- 2X2" gauze sponges
- Tape
- ID band
- Chair or bed/exam table for patient
- Overbed table or table (if called for in the scenario)

**Skill V Urethral Catheterization - Straight** (Perry and Potter)

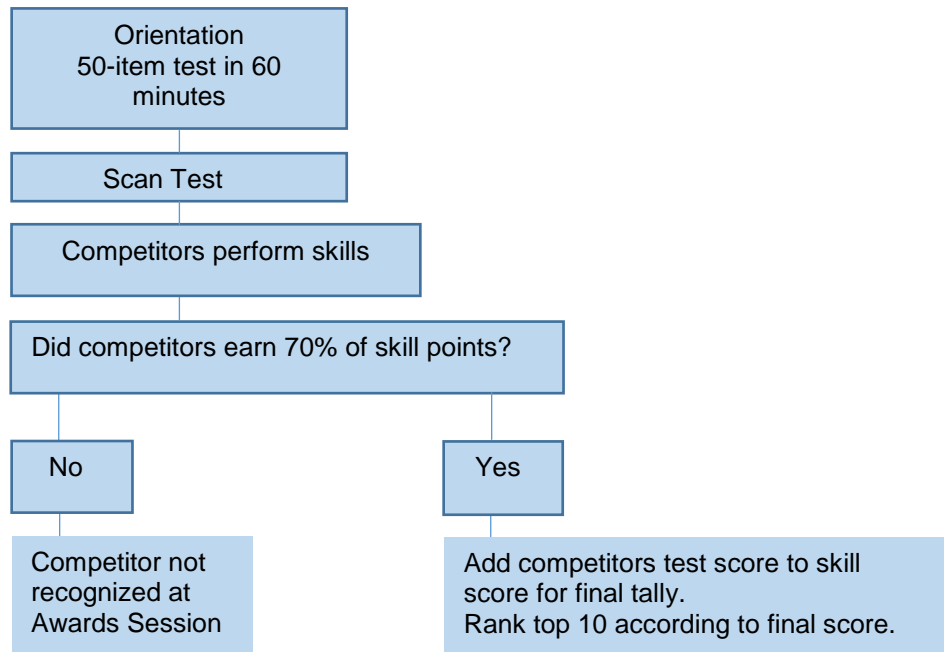
- Doll (\*manikin) for catheterization with identification band
- Patient chart with physician orders (scenario) and nurses' notes
- Waterproof pads
- Lamp or other light source (if applicable)
- Hospital beds or exam tables (with linens)
- Bedside or over bed table (if called for in the scenario)

**Skill VI Applying a Nasal Cannula or Oxygen Mask** (Perry and Potter)

- ID band
- Oxygen set-up, wall unit or tank, with tubing, humidifier and flow meter
- One or more of the following oxygen delivery devices (as designated in the scenario with the others to be used as distracters.)
  - Nasal cannula
  - Nonrebreathing mask
  - Partial rebreathing mask

- Venturi mask
- Manikin OR a patient
- Scenario with physician orders indicating oxygen delivery device to be applied and flow rate
- Nurses' notes
- Chair or bed/exam table for patient (if called for in the scenario)

## Event Flow Chart



## Sample Round One Test Questions

1. When using the SOAP format for progress notes, the 'A' represents the:
  - A. ability of the client to understand instructions.
  - B. anxiety level of the client.
  - C. assessment/analysis based on data.
  - D. client's allergies.
2. A patient has just undergone a right nephrectomy. The signs and symptoms that indicate postoperative hemorrhaging include:
  - A. cyanosis, nausea, vomiting and constricted pupils.
  - B. even, unlabored respirations; tachycardia; hemoptysis.
  - C. restlessness, confusion, increased urine output and warm, dry skin.
  - D. pallor; weak and rapid pulse; cool, moist skin; hypotension.
3. A 60-year-old client who is receiving home enteral nutrition begins to have difficulty breathing and is coughing. The first thing the nurse should do is:
  - A. call the physician.
  - B. lower the head of the bed.
  - C. stop the feeding.
  - D. verify the placement of the tube.

# CLINICAL NURSING

Competitor #: \_\_\_\_\_

Judge's Signature: \_\_\_\_\_

<b>Skill I:</b>	<b>Administer Medication – Intramuscular (Time: 11 minutes)</b>	<b>Possible</b>	<b>Awarded</b>
1.	Checked physician's order (scenario).	1	0
2.	Verified medication administration record with physician's order.	2	0
3.	Assembled equipment and supplies.	1	0
4.	Used alcohol-based handrub for hand hygiene.	1	0
5.	Checked administration record against the label on the medication container when removing from medication storage.	1	0
6.	Calculated correct dosage of correct medication, if necessary.	1	0
7.	Checked the label of the medication container for expiration date.	1	0
8.	Checked the label of the medication container against the medication administration record before drawing up medication.	1	0
9.	Filled the safety syringe with correct amount of medication:		
	a. Selected correct type of safety syringe and needle size.	1	0
	b. Cleaned top of vial, if necessary.	1	0
	c. Injected correct amount of air into vial.	1	0
	d. Withdrew correct dosage.	1	0
	e. Used sterile technique when filling syringe.	1	0
10.	Checked the label of the medication container with the medication administration record before returning vial to storage.	1	0
11.	Changed needle if indicated.	1	0
12.	Greeted the patient and introduced self.	1	0
13.	Identified patient by checking ID bracelet and asking patient name.	1	0
14.	Explained skill to patient.	1	0
15.	Closed door to patient's room or enclosed unit with curtains and raised bed to appropriate height.	1	0
16.	Used alcohol-based handrub for hand hygiene and applied disposable gloves.	1	0
17.	Assisted patient to comfortable position according to site selected.	1	0

Items Evaluated		Possible	Awarded
18.	Selected and inspected injection site using anatomical landmarks.	1 0	
19.	Cleansed injection site with alcohol in a circular motion, beginning in the center and wiping outward.	1 0	
20.	Administer Medication Intramuscular		
a.	Pulled protective cap of needle off in a straight direction.	1 0	
b.	Pinched or stretched skin according to selected site with non-dominant hand.	1 0	
c.	Held syringe between thumb and forefinger of dominant hand at a 90 degree angle to injection site.	1 0	
d.	Injected quickly at a 90 degree angle into muscle.	1 0	
e.	Released skin and grasped lower end of syringe barrel with non-dominant hand.	1 0	
f.	Aspirated medication by pulling back on plunger.	1 0	
g.	Injected medication at a slow and steady rate.	1 0	
h.	Gently applied alcohol swab or dry gauze over injection site and withdrew needle.	1 0	
i.	Applied gentle pressure over injection site, without massaging.	1 0	
j.	Discarded uncapped needle and attached syringe.	1 0	
k.	Repositioned patient, provided for comfort and safety and lowered bed if appropriate.	1 0	
l.	Removed gloves and used alcohol-based handrub for hand hygiene.	1 0	
21.	Recorded medication on MAR.	2 0	
22.	Recorded assessment in nurses notes as appropriate.	1 0	
23.	Practiced standard precautions throughout skill.	1 0	
<b>TOTAL POINTS -- SKILL I</b>		<b>40</b>	
<b>70% Mastery for Skill I = 28</b>			

*\*\*If a student jeopardizes the patient's or his/her own safety and does not take immediate action to correct the error, the total points for the skill or specific subpart(s) of the skill will be deducted.*

# CLINICAL NURSING

Competitor #: \_\_\_\_\_

Judge's Signature: \_\_\_\_\_

Skill II	Administer Medication – Subcutaneous (Time: 11 minutes)	Possible		Awarded
1.	Checked physician's order (scenario).	1	0	
2.	Verified medication administration record with physician's order.	2	0	
3.	Assembled equipment and supplies.	1	0	
4.	Used alcohol-based handrub for hand hygiene.	1	0	
5.	Checked administration record against the label on the medication container when removing from medication storage.	1	0	
6.	Calculated correct dosage of correct medication, if necessary.	1	0	
7.	Checked the label of the medication container for expiration date.	1	0	
8.	Checked the label of the medication container against the medication administration record before drawing up medication.	1	0	
9.	Filled the safety syringe with correct amount of medication.	1	0	
	a. Selected correct type of safety syringe and needle size.	1	0	
	b. Cleaned top of vial, if necessary.	1	0	
	c. Injected correct amount of air into vial.	1	0	
	d. Withdrew correct dosage.	1	0	
	e. Used sterile technique when filling syringe.	1	0	
10.	Checked the label of the medication container with the medication administration record before returning vial to storage.	1	0	
11.	Changed needle if indicated.	1	0	
12.	Greeted the patient and introduced self.	1	0	
13.	Identified patient by checking ID bracelet and asking patient name.	1	0	
14.	Explained skill to patient.	1	0	
15.	Closed door to patient's room or enclosed unit with curtains and raised bed to appropriate height	1	0	
16.	Used alcohol-based handrub for hand hygiene and applied disposable gloves.	1	0	
17.	Assisted patient to comfortable position according to site selected.	1	0	
18.	Selected and inspected injection site using anatomical landmarks.	1	0	



Items Evaluated		Possible		Awarded
19.	Cleansed injection site with alcohol in a circular motion, beginning in the center and wiping outward.	1	0	
20.	Administered Subcutaneous Medication			
a.	Pulled protective cap from needle by pulling straight off.	1	0	
b.	Held syringe between thumb and forefinger of dominant hand at 45-90 degree angle.	1	0	
c.	Pinched or stretched skin according to selected site with non-dominant hand.	1	0	
d.	Injected needle quickly at a 45-90 degree angle.	1	0	
e.	Released skin and grasped lower barrel with non-dominant hand.	1	0	
f.	Injected medication at a slow and steady rate.	1	0	
g.	Gently applied alcohol swab or dry gauze over injection site and withdrew needle quickly.	1	0	
h.	Applied gentle pressure over injection site without massaging.	1	0	
i.	Discarded uncapped needle and attached syringe.	1	0	
j.	Repositioned patient, provided for comfort and patient safety. Lowered bed if appropriate.	1	0	
k.	Removed gloves and used alcohol-based handrub for hand hygiene.	1	0	
21.	Recorded medication on MAR.	2	0	
22.	Recorded assessment on nursing notes as appropriate.	2	0	
23.	Practiced standard precautions throughout skill.	1	0	
<b>TOTAL POINTS – SKILL II</b>		<b>40</b>		
<b>70% Mastery for Skill II = 28</b>				

*\*\*If a student jeopardizes the patient's or his/her own safety and does not take immediate action to correct the error, the total points for the skill or specific subpart(s) of the skill will be deducted.*

## CLINICAL NURSING

Competitor #: \_\_\_\_\_

Judge's Signature: \_\_\_\_\_

<b>Skill III Measuring Oxygen Saturation (Time: 5 minutes)</b>		<b>Possible</b>	<b>Awarded</b>
1.	Checked physician's order (scenario).	1 0	
2.	Assembled equipment and supplies.	1 0	
3.	Greeted patient and introduced self.	1 0	
4.	Identified patient by checking ID bracelet.	1 0	
5.	Explained skill to patient and the purpose.	2 0	
6.	Used alcohol-based handrub for hand hygiene.	1 0	
7.	Measured capillary refill in finger and verbalized findings to judge.	1 0	
8.	Verbalized absence of polish or artificial nail, OR, removed fingernail polish from digit with polish remover.	1 0	
9.	Positioned patient comfortably with lower arm supported and instructed patient to breathe normally.	1 0	
10.	Attached sensor to monitoring site while explaining to patient that the clip-on probe will feel like a clothes pin on the finger but will not hurt.	2 0	
11.	Turned on oximeter by activating power.	1 0	
12.	Observed pulse waveform/intensity display and audible beep, correlating oximeter pulse rate with patient's radial pulse.	2 0	
13.	Informed patient that oximeter alarm will sound if sensor falls off or if client moves sensor.	1 0	
14.	Read SpO <sub>2</sub> on digital display when oximeter readout reached constant value and pulse display reached full strength during each cardiac cycle.	2 0	
15.	Discussed findings with patient and recorded findings in nurse's notes.	1 0	
16.	Removed probe and turned oximeter power off.	1 0	
17.	Stored sensor in appropriate location.	1 0	
18.	Assisted patient to a comfortable position.	1 0	
19.	Used alcohol-based handrub for hand hygiene.	1 0	
20.	Accurately recorded findings in nurse's notes.	1 0	
<b>TOTAL POINTS -- SKILL III</b>		<b>24</b>	
<b>70% Mastery for Skill III = 16.8</b>			

*\*\*If a student jeopardizes the patient's or his/her own safety and does not take immediate action to correct the error, the total points for the skill or specific subpart(s) of the skill will be deducted.*

# CLINICAL NURSING

Competitor #: \_\_\_\_\_

Judge's Signature: \_\_\_\_\_

Skill IV	Discontinuing Peripheral IV Access (Time: 8 minutes)	Possible	Awarded
1.	Checked physician's order (scenario).	1	0
2.	Assembled equipment and supplies.	1	0
3.	Used alcohol-based handrub for hand hygiene.	1	0
4.	Greeted patient and introduced self.	1	0
5.	Identified patient by checking ID band and asking patient name.	1	0
6.	Explained skill to patient, describing sensation to be felt when catheter is removed and the need to remain still during the procedure.	2	0
7.	Turned IV tubing roller clamp to "off" position.	1	0
8.	Applied clean gloves.	2	0
9.	Removed IV site dressing, stabilizing IV device.	1	0
10.	Removed tape securing cannula.	1	0
11.	Placed clean sterile gauze over insertion site, applied light pressure, and removed cannula by pulling straight away from insertion site in a slow steady motion, keeping the cannula parallel to the skin during withdrawal.	3	0
12.	Kept gauze in place. (Verbalized continuous pressure for a minimum of 30 seconds until bleeding has stopped.)	1	0
13.	Lifted gauze and assessed bleeding. <b>* Judge states "No bleeding or hematoma formation."</b>	1	0
14.	Inspected catheter for intactness after removal.	1	0
15.	Applied clean folded gauze dressing over insertion site, and secured with tape.	2	0
16.	Discarded used dressing and supplies in waste bag.	1	0
17.	Removed gloves and performed hand hygiene.	1	0
18.	Documented assessment of skill and patient's tolerance to skill in nurse's notes.	2	0
<b>TOTAL POINTS -- SKILL IV</b>		<b>24</b>	
<b>70% Mastery for Skill IV = 16.8</b>			

*\*\*If a student jeopardizes the patient's or his/her own safety and does not take immediate action to correct the error, the total points for the skill or specific subpart(s) of the skill will be deducted.*

## CLINICAL NURSING

Competitor #: \_\_\_\_\_ Judge's Signature: \_\_\_\_\_

*\*Variations of straight catheterization kits should be taken into consideration when judging this event. Steps that are performed that meet the highest standard of care should be awarded, even if their sequence differs from this rating sheet.*

Skill V	Urinary Catheterization – Straight (Time: 15 minutes)	Possible	Awarded
1.	Checked physician's order (scenario).	1	0
2.	Assembled equipment and supplies.	1	0
3.	Used alcohol-based handrub for hand hygiene.	1	0
4.	Greeted patient and introduced self.	1	0
5.	Identified patient by checking ID band and asking patient name.	1	0
6.	Assessed status of patient to determine equipment needs, level of cooperation and mobility.	1	0
7.	Explained skill to patient and provided privacy.	2	0
8.	Raised bed to working height and lowered side rail on working side. (As appropriate.)	1	0
9.	Positioned patient: Male – supine position with thighs slightly abducted. Female – supine position with knees flexed.	1	0
10.	Placed waterproof pad under the patient and draped patient with a sheet as appropriate.	1	0
11.	Positioned light or other light source (held by assistant) to illuminate perineal area (if applicable).	1	0
12.	Arranged supplies and equipment for perineal care on bed or beside table.	1	0
13.	Prepared Catheterization Kit		
	a. Opened catheterization kit according to directions.	1	0
	b. Removed plastic wrapping and placed within reach to use as disposal bag for used supplies.	1	0
	c. Placed sterile package on bed between patient legs or on bedside table.	1	0
	d. (If underpad is first item in kit) placed the pad under the patient, plastic side down, without unnecessary contamination.	1	0
14.	Put on sterile gloves.	1	0
15.	Organized supplies on sterile field.	1	0
16.	Applied antiseptic solution to cotton balls, or opened cleansing solution or swabs.	1	0
17.	Opened lubricant container and lubricated catheter – 1-2 inches for women and 5-7 inches for men.	1	0

Items Evaluated		Possible	Awarded
18.	Placed sterile drape appropriately.	1 0	
19.	Placed sterile tray and contents on sterile drape between legs (if not done so already) and opened specimen container (if applicable).	1 0	
20.	Cleansed urethral meatus appropriately.	1 0	
21.			
<b>Male</b>	a. Grasped penis at shaft below glans with non-dominant hand, and continued to hold throughout insertion of catheter.	1 0	
	b. With other hand, used forceps holding cotton ball with antiseptic solution, or swabs, to cleanse meatus in circular motion.	1 0	
	c. Repeated cleansing three times.	1 0	
<b>Female</b>	a. Spread labia minora with thumb and index finger of non-dominant hand to expose meatus; continued to hold throughout skill.	1 0	
	b. Cleansed area with forceps holding cotton ball with antiseptic solution, or swabs, from clitoris toward anus on far side of meatus in one downward motion, then repeated on the near side.	1 0	
	c. Cleansed center area from the clitoris toward the anus down in one downward motion.	1 0	
22.	Picked up catheter with gloved dominant hand 3-4 inches from catheter tip, holding catheter loosely coiled in palm of dominant hand (if appropriate) and placing distal end of catheter in urine tray receptacle or specimen cup (if appropriate).	1 0	
23.	Asked patient to bear down gently as if to void.	1 0	
24.	Inserted catheter gently – 2-3 inches in female and 7-9 inches in male, or until urine flows out of catheter's end, collecting specimen as needed or allowing bladder to empty fully.	2 0	
25.	With dominant hand, withdrew catheter slowly and smoothly.	1 0	
26.	Removed drape and washed/dried perineum as needed.	1 0	
27.	Assisted patient to a comfortable position and lowered bed.	1 0	
28.	Disposed of equipment, linen and used materials.	1 0	
29.	Removed gloves and used alcohol-based handrub for hand hygiene.	1 0	
30.	Documented skill and patient's tolerance in nurse's notes.	2 0	
<b>TOTAL POINTS – SKILL V</b>		<b>41</b>	
<b>70% Mastery for Skill V = 28.7</b>			

*\*\*If a student jeopardizes the patient's or his/her own safety and does not take immediate action to correct the error, the total points for the skill or specific subpart(s) of the skill will be deducted.*

# CLINICAL NURSING

Competitor #: \_\_\_\_\_

Judge's Signature: \_\_\_\_\_

<b>Skill VI Applying a Nasal Cannula or Oxygen Mask (Time: 5 minutes)</b>	<b>Possible</b>	<b>Awarded</b>
1. Checked physician's order (scenario).	1	0
2. Assembled equipment and supplies.	1	0
3. Greeted patient and introduced self.	1	0
4. Identified patient by checking ID band and asked patient name.	1	0
5. Explained skill to patient.	1	0
6. Used alcohol-based handrub for hand hygiene.	1	0
7. Attached correct oxygen delivery device (cannula or mask) to oxygen tubing, and attached to humidified oxygen source.	2	0
8. Adjusted prescribed flow rate.	1	0
9. Placed cannula or mask on the patient and adjusted elastic headband/tubing so that a snug and comfortable fit is achieved.	2	0
10. Maintained sufficient slack on oxygen tubing and secured to patient's clothing.	1	0
11. Observed for proper function of oxygen delivery device: <ul style="list-style-type: none"> <li>a. <i>Nasal cannula</i>: Cannula is positioned properly in the nares.</li> <li>b. <i>Nonbreathing mask</i>: Mask over patient's mouth and nose to form a tight seal, valves on the mask closed so exhaled air does not enter reservoir bag.</li> <li>c. <i>Partial rebreathing mask</i>: Mask over patient's mouth and nose to form a tight seal, bag remains partially inflated.</li> <li>d. <i>Venturi mask</i>: Mask over patient's mouth and nose to form a tight seal, percentage of FiO<sub>2</sub> correlates with flow rate.</li> </ul>	2	0
12. Assessed flowmeter and oxygen source for proper setup and prescribed flow rate.	1	0
13. Used alcohol-based handrub for hand hygiene	1	0
14. Documented skill and patient's tolerance of skill in nurse's notes.	2	0
<b>TOTAL POINTS -- SKILL VI</b> <b>70% Mastery for Skill VI = 12.6</b>	<b>18</b>	

*\*\*If a student jeopardizes the patient's or his/her own safety and does not take immediate action to correct the error, the total points for the skill or specific subpart(s) of the skill will be deducted.*



