

# Clinical Nursing

## ***New for 2019-2020***

Competitors are no longer required to show event guidelines at ILC. Time remaining announcements have been added to the test. The text “Introductory Medical Surgical Nursing” by Timbry has been deleted as a resource. A new resource has been added: “Textbook of Basic Nursing” by Rosdahl and Kowalski 11<sup>th</sup> Edition. Editorial updates and clarifications have been made to guidelines. Scholarship information has been added to the guidelines. The following skills were deleted: Measuring Oxygen Saturation, Discontinuing Peripheral IV Access, and Applying a Nasal Cannula or Oxygen Mask. The following skills have been added: Administer Medication Intradermal, Inserting a Nasogastric Tube, Performing a Sterile Wound Irrigation, Postmortem Care of the Body and Assisting the Patient with Postoperative Exercises.

- 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 or CERT event.*
  2. Competitors must be familiar with and adhere to the [“General Rules and Regulations of the 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.....	20%
Clinical Care Through the Life Span.....	20%
Maternal/Newborn	
Pediatrics	
Adulthood and Gerontology	
Mental Health	
Home Care, Extended Care, Rehabilitation, Hospice	

Clinical Care for Systems Diseases and Disorders.....60%  
 Structure and Function  
 Signs and Symptoms  
 Nursing Assessment and Diagnosis  
 Pharmacology and Medication Management  
 Nutrition, Fluid and Electrolyte Balance  
 Medical and Surgical Treatments

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

5. [Test Instructions](#): The competitors will be given instructions and will be notified to start the test. There will be a maximum of 60 minutes to complete the test. Competitors should leave the testing site promptly after submitting all testing materials and evaluations.

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. **TIME REMAINING ANNOUNCEMENTS:** There will be a verbal announcement when there are 30 minutes, 15 minutes, 5 minutes, and 1 minute remaining to complete the test.

7. 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.](#)
- [Rosdahl and Kowalski, Textbook of Basic Nursing, Wolters Kluwer, Latest edition.](#)

8. 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:	Administer Medication Intradermal	(11 minutes)
Skill IV:	Inserting a Nasogastric Tube	(15 minutes)
Skill V:	Urethral Catheterization – Straight	(15 minutes)
Skill VI:	Performing a Sterile Wound Irrigation	(14 minutes)
Skill VII:	Postmortem Care of the Body	(10 minutes)
Skill VIII:	Assisting the Patient with Postoperative Exercises	(8 minutes)

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

9. 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.

10. 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](#).
11. 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 per the [GRRs](#).
12. In case of a tie, the highest test score will be used to determine the rank.
13. 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.
14. 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.
15. The timing for the skill will begin when the scenario is presented. Competitors will be stopped at the end of the time allowed for the selected skill(s).
16. HOSA offers numerous scholarships every year to its members interested in pursuing a variety of health careers. As you consider participating in this competitive event, please keep in mind there may be a HOSA Scholarship offered that fits your interests! For more information on the HOSA Scholarship program, please visit <http://www.hosa.org/scholarships>.

**Competitors must provide:**

- Watch with a second hand (optional-Round Two Only)
- Non-latex gloves, gown, goggles or safety glasses, mask, eye shield or face guard
- Straight catheterization tray (disposable) [Sample shown here](#)
- Two #2 lead pencils with eraser
- A [photo ID](#)
- Sterile gloves

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

**Required Personnel:**

- One Event Manager
- One Judge Manager (JM) 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 (see [HOSA Room Set](#))
- 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 & III**

**Administer Medication** (Perry and Potter and Rosdahl and Kowalski)

- 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 IV**

**Inserting a Nasogastric Tube** (Rosdahl and Kowalski)

- Gloves
- Additional PPE as indicated
- Nasogastric tube
- Water-soluble substance (K –Y Jelly)
- Protective towel covering for client
- Emesis basin
- Nonallergenic tape for marking placement and securing tape
- Normal saline or sterile water, for irrigation
- Flashlight
- Tongue blade
- Irrigation set
- Tissues
- Clamp

- pH paper
- Glass of water (if allowed)
- Straw for glass of water
- Stethoscope
- 60-mL catheter tip syringe
- Rubber band and safety pin
- Suction equipment or tube feeding equipment

**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: Performing a Sterile Wound Irrigation** (Rosdahl and Kowalski)

- Patient or manikin
- Hospital bed
- Disposable sterile irrigation pack
- Sterile irrigation solution, as ordered
- Marked biohazard bag
- Waterproof bed pad
- Bath blanket
- Sterile dressings as ordered
- Tape to apply new dressing
- Clean basin or irrigating pouch

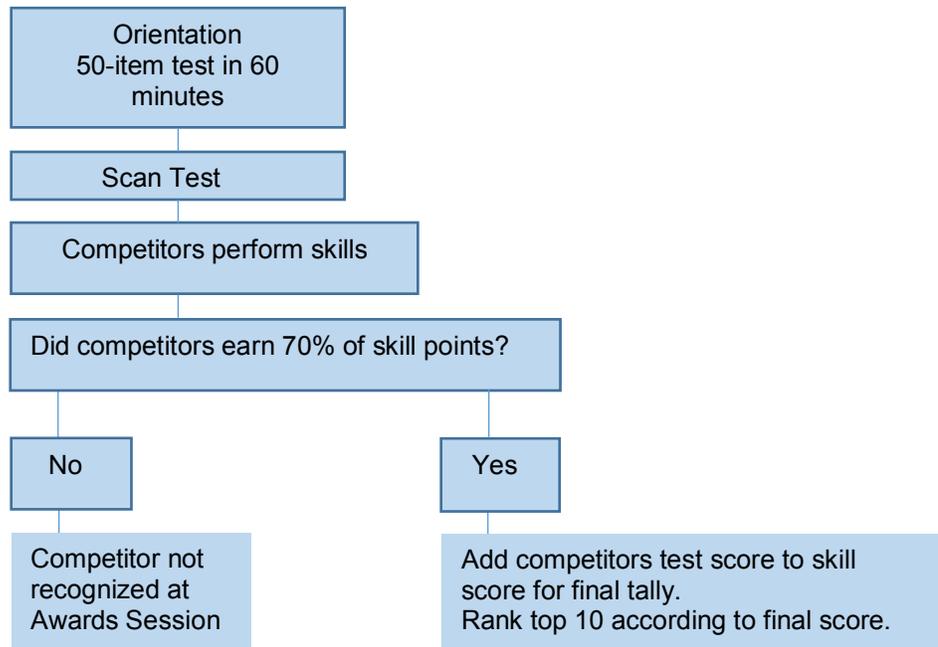
**Skill VII: Postmortem Care of the Body** (Rosdahl and Kowalski)

- ID band and another identifier for manikin
- Manikin
- Hospital or other bed
- Ice bags (2) or chipped ice and (2) containers for ice bag
- Towel or chin strap
- Tape
- Self-sealing property bag
- Fresh dressings (if indicated in scenario)
- Zippered bag
- Incontinence pad
- Gauze squares for padding
- Ties for wrist and ankles
- Identification tags (3 tags)
- Note for any communicable disease (if indicated in scenario)

**Skill VIII: Assisting the Patient with Postoperative Exercises** (Rosdahl and Kowalski)

- Patient
- Chair or hospital bed
- Pillow, bath blanket or large towel
- Incentive Spirometer

## 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. assessment/analysis based on data.
  - C. anxiety level of the client
  - 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. hypothermia; thready, rapid pulse; cold, clammy skin; hypotension.
3. A 60-year-old client who is receiving home enteral nutrition begins to have difficulty breathing and is coughing. What is the first thing the nurse should do?
  - 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.	Performed hand hygiene using handrub.	2	0
2.	Prepared equipment and supplies (correct syringe and needle).	1	0
3.	Verified medication administration record with physician's order.	2	0
4.	Prepared medication		
	a. Selected correct drug from stock supply by comparing against medication administration record.	1	0
	b. Checked expiration date on medication.	1	0
	c. Calculated drug dose as necessary. <b><i>Judge verifies the calculations for points to be awarded.</i></b>	2	0
5.	Placed vial on flat surface and removed cover from the vial.	1	0
6.	Cleansed the rubber port with an alcohol swab and allowed to dry.	1	0
7.	Removed the needle cap and drew an amount of air into syringe equal to the amount of medication that will be withdrawn.	1	0
8.	Inserted the needle through the center of the rubber stopper and injected the air into the vial.	1	0
9.	Inverted the vial while keeping firm hold on syringe and plunger.	1	0
10.	Obtained correct amount of medication and removed the needle from the vial.	2	0
11.	Held syringe at eye level and ensured correct dose and absence of air bubbles (tapping to dislodge if needed).	1	0
12.	Changed needle if indicated.	1	0
13.	Covered needle with safety sheath or cap.	1	0
14.	Used sterile technique while filling syringe.	1	0
15.	Greeted the patient and introduced self.	1	0
16.	Identified patient by checking ID bracelet and asking patient name.	1	0
17.	Explained skill to patient.	1	0
18.	Closed door to patient's room or enclosed unit with curtains and raised bed to appropriate height.	1	0

Items Evaluated		Possible		Awarded
19.	Used alcohol-based handrub for hand hygiene and applied disposable gloves.	1	0	
20.	Assisted patient to comfortable position according to site selected.	1	0	
21.	Selected and inspected injection site using anatomical landmarks.	1	0	
22.	Cleansed injection site with alcohol in a circular motion, beginning in the center and wiping outward and allowed to dry.	1	0	
23.	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 with dominant hand (if blood is seen-remove and prepare a new injection).	1	0	
g.	Injected medication at a slow and steady rate.	1	0	
h.	Withdrew needle and gently applied alcohol swab or dry gauze over injection site.	1	0	
i.	Applied gentle pressure over injection site, without massaging.	1	0	
j.	Discarded uncapped needle and attached syringe in a puncture- and leak-proof receptacle.	1	0	
k.	Removed and disposed of gloves and used alcohol-based handrub for hand hygiene.	1	0	
l.	Repositioned patient, provided for comfort and safety and lowered bed if appropriate.	1	0	
24.	Recorded medication on MAR.	2	0	
25.	Recorded assessment in nurses notes as appropriate.	2	0	
26.	Appropriate verbal and nonverbal communication with patient and other personnel.	2	0	
27.	Practiced standard precautions throughout skill.	1	0	
<b>TOTAL POINTS -- SKILL I</b>		<b>47</b>		
<b>70% Mastery for Skill I = 32.9</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	<b>Administer Medication – Subcutaneous (Time: 11 minutes)</b>	<b>Possible</b>		<b>Awarded</b>
1.	Performed hand hygiene using handrub.	2	0	
2.	Prepared equipment and supplies (correct syringe and needle ).	1	0	
3.	Verified medication administration record with physician's order.	2	0	
4.	Prepared medication			
	a. Selected correct drug from stock supply by comparing against medication administration record.	1	0	
	b. Checked expiration date on medication.	1	0	
	c. Calculated drug dose as necessary. <b><i>Judge verifies the calculations for points to be awarded.</i></b>	2	0	
5.	Placed vial on flat surface and removed cover from the vial.	1	0	
6.	Cleansed the rubber port with an alcohol swab and allowed to dry.	1	0	
7.	Removed the needle cap and drew an amount of air into syringe equal to the amount of medication that will be withdrawn.	1	0	
8.	Inserted the needle through the center of the rubber stopper and injected the air into the vial.	1	0	
9.	Inverted the vial while keeping firm hold on syringe and plunger.	1	0	
10.	Obtained correct amount of medication and removed the needle from the vial.	2	0	
11.	Held syringe at eye level and ensured correct dose and absence of air Bubbles (tapping to dislodge if needed),	1	0	
12.	Changed needle if indicated.	1	0	
13.	Covered needle with safety sheath or cap.	1	0	
14.	Used sterile technique while filling syringe.	1	0	
15.	Greeted the patient and introduced self.	1	0	
16.	Identified patient by checking ID bracelet and asking patient name.	1	0	

Items Evaluated		Possible		Awarded
17.	Explained skill to patient.	1	0	
18.	Closed door to patient's room or enclosed unit with curtains and raised bed to appropriate height.	1	0	
19.	Used alcohol-based handrub for hand hygiene and applied disposable gloves.	1	0	
20.	Assisted patient to comfortable position according to site selected.	1	0	
21.	Instructed patient to relax arm, leg or abdomen depending on site selected.	1	0	
22.	Selected and inspected injection site using anatomical landmarks.	1	0	
23.	Cleansed injection site with alcohol in a circular motion, beginning in the center and wiping outward and allowed to dry.	1	0	
24.	Administer Medication Subcutaneous	1	0	
a.	Pulled protective cap of needle off in a straight direction.	1	0	
b.	Held skin across or pinched skin at selected site with non-dominant hand.	1	0	
c.	Held syringe between thumb and forefinger of dominant hand at a 45 to 90 degree angle to injection site.	1	0	
d.	Injected quickly at a 45 to 90 degree angle into adipose tissue.	1	0	
e.	Released skin and grasped lower end of syringe barrel with non-dominant hand.	1	0	
f.	Injected medication at a slow and steady rate.	1	0	
g.	Withdrew needle and gently applied alcohol swab or dry gauze over injection site.	1	0	
h..	Applied gentle pressure over injection site, without massaging.	1	0	
i.	Discarded uncapped needle and attached syringe in a puncture- and leak-proof receptacle.	1	0	
j.	Removed and disposed of gloves and used alcohol-based handrub for hand hygiene.	1	0	
k	Repositioned patient, provided for comfort and safety and lowered bed if appropriate.	1	0	
24.	Recorded medication on MAR.	2	0	
25.	Recorded assessment in nurses notes as appropriate.	2	0	
26.	Appropriate verbal and nonverbal communication with patient and other personnel.	2	0	
27.	Practiced standard precautions throughout skill.	1	0	
<b>TOTAL POINTS -- SKILL II</b>		<b>47</b>		
<b>70% Mastery for Skill II = 32.9</b>				

## CLINICAL NURSING

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

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

Skill III Administer Medication – Intradermal (Time: 11 minutes)	Possible	Awarded
1. Performed hand hygiene using handrub.	2	0
2. Prepared equipment and supplies (correct syringe and needle ).	1	0
3. Verified medication administration record with physician's order.	2	0
4. Prepared medication		
a. Selected correct drug from stock supply by comparing against medication administration record.	1	0
b. Checked expiration date on medication.	1	0
c. Calculated drug dose as necessary. <i>Judge verifies the calculations for points to be awarded.</i>	2	0
5. Placed vial on flat surface and removed cover from the vial.	1	0
6. Cleansed the rubber port with an alcohol swab and allowed to dry.	1	0
7. Removed the needle cap and drew an amount of air into syringe equal to the amount of medication that will be withdrawn.	1	0
8. Inserted the needle through the center of the rubber stopper and injected the air into the vial.	1	0
9. Inverted the vial while keeping firm hold on syringe and plunger.	1	0
10. Obtained correct amount of medication and removed the needle from the vial.	2	0
11. Held syringe at eye level and ensured correct dose and absence of air Bubbles (tapping to dislodge if needed),	1	0
12. Changed needle if indicated.	1	0
13. Covered needle with safety sheath or cap.	1	0
14. Used sterile technique while filling syringe.	1	0
15. Greeted the patient and introduced self.	1	0
16. Identified patient by checking ID bracelet and asking patient name.	1	0
17. Explained skill to patient.	1	0
18. Closed door to patient's room or enclosed unit with curtains and raised bed to appropriate height.	1	0

Items Evaluated		Possible		Awarded
19.	Used alcohol-based handrub for hand hygiene and applied disposable gloves.	1	0	
20.	Assisted patient to comfortable position according to site selected.	1	0	
21.	Selected appropriate site – 3 to 4 finger widths below antecubital space and one hand width above wrist.	1	0	
22.	Instructed patient to extend elbow and support elbow and forearm.	1	0	
23.	Administer Medication Subcutaneous	1	0	
a.	Pulled protective cap of needle off in a straight direction.	1	0	
b.	With nondominant hand stretched skin across site with forefinger or thumb.	1	0	
c.	With needle against patient's skin insert needle slowly at 5 to 15 degree angle until resistance is felt. Advance through epidermis (bulge of needle tip evident through skin).	1	0	
d.	Injected medications slowly.	1	0	
e.	Noted small belb appeared on skin.	1	0	
f.	Withdrew needle and gently applied alcohol swab or dry gauze over injection site.	1	0	
g.	Applied gentle pressure over injection site, without massaging.	1	0	
h.	Discarded uncapped needle and attached syringe in a puncture- and leak-proof receptacle.	1	0	
i.	Removed and disposed of gloves and used alcohol-based handrub for hand hygiene.	1	0	
j.	Repositioned patient, provided for comfort and safety and lowered bed if appropriate.	1	0	
24.	Recorded medication on MAR.	2	0	
25.	Recorded assessment in nurses notes as appropriate.	2	0	
26.	Appropriate verbal and nonverbal communication with patient and other personnel.	2	0	
27.	Practiced standard precautions throughout skill.	1	0	
<b>TOTAL POINTS -- SKILL III</b>		<b>45</b>		
<b>70% Mastery for Skill III = 31.5</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 IV Inserting a Nasogastric Tube (Time: 15 minutes)</b>		<b>Possible</b>	<b>Awarde d</b>
1.	Checked physician's order (scenario) for type, size and purpose of tube.	1 0	
2.	Assembled equipment and supplies.	1 0	
3.	Set up tube feeding or suction equipment (based on scenario) and tested to make sure functioning properly.	2 0	
4.	Greeted patient and introduced self.	1 0	
5.	Located two identifiers to confirm patient.	2 0	
6.	Explained skill to patient and the purpose.	2 0	
7.	Obtained privacy.	1 0	
8.	Used alcohol-based handrub for hand hygiene.	1 0	
9.	Put on nonsterile gloves.	1 0	
10.	Placed patient in a full Fowler position if not contraindicated.	1 0	
11.	Placed towel over the client's chest in bib-type protection	1 0	
12.	Measured tubing length:		
	a. First measurement made from the tip of the patient's nose to the earlobe.	1 0	
	b. Second measurement made from above point on earlobe to the xiphoid process.	1 0	
	c. Marked the spot with a small piece of temporary tape.	1 0	
13.	Used a damp washcloth without soap to wipe the patient's face and nose. <b>Judge will state, "nose requires or does not require cleansing with an alcohol pad".</b>	2 0	
14.	If indicated, placed dry cloth over the patient's eyes and cleaned the nose with an alcohol wipe.	1 0	
15.	Test for Nares Obstruction:		
	a. Tested the nares for obstruction by closing one nostril and then the other and asked the patient if difficulty breathing is experienced. <b>Judge will state, "nares unobstructed or left/right nostril obstructed".</b>	1 0	
	b. If obstruction present, used obstructed nostril for insertion.	1 0	
16.	Applied water-soluble lubricant to 4 to 8 inches of the tube.	2 0	
17.	Flexed the head forward and tilted the tip of the nose upward and inserted tube gently into the nose to as far as the back of the throat.	2 0	

Items Evaluated	Possible	Awarded
18. When the tube reaches the nasopharynx, stopped and instructed patient to lower his or her head slightly.	2 0	
19. Asked patient to hold glass of water with a straw while keeping an emesis basin and tissue available.	1 0	
20. Instructed patient to breathe through their mouth while tube is inserted.	1 0	
21. Asked patient to swallow as the tube is advanced, and advanced tube each time patient swallowed until the marked part of the tube is reached.	2 0	
22. If coughing, persistent gagging, cyanosis or dyspnea is noted removed tube immediately and tried other nostril. <b>Judge will state, "coughing, persistent gagging, cyanosis or dyspnea are noted or no indications to remove tube are noted".</b>	2 0	
23. When tubing reaches marked insertion point placed a temporary piece of tape across the nose and tube.	1 0	
24. Checked the back of the patient's throat to make sure that tubing is not curled in the back of the throat with use of tongue blade and flashlight.	2 0	
25. Injected 30 mL of air into the stomach and used stethoscope to listen for the "whoosh" of air in the stomach. <b>Judge will state, "confirmation of correct placement by x-ray".</b>	1 0	
26. Used prepared tape strips to secure tubing.	1 0	
27. Secured tubing to the patient's gown by using rubber band and safety pin.	1 0	
28. Ensured comfort and safety of patient.	1 0	
29. Disposed of materials properly.	1 0	
30. Appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
31. Used alcohol-based handrub for hand hygiene.	1 0	
32. Practiced standard precautions throughout skill.	1 0	
33. Documented and reported procedure and findings.	2 0	
<b>TOTAL POINTS -- SKILL IV</b> 70% Mastery for Skill IV = 33.6	<b>48</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

Items Evaluated		Possible	Awarded
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	
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.			
<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	
21.	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	
22.	Asked patient to bear down gently as if to void.	1 0	
23.	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	
24.	With dominant hand, withdrew catheter slowly and smoothly.	1 0	
25.	Removed drape and washed/dried perineum as needed.	1 0	
26.	Assisted patient to a comfortable position and lowered bed.	1 0	
27.	Disposed of equipment, linen and used materials.	1 0	
28.	Removed gloves and used alcohol-based handrub for hand hygiene.	1 0	
29.	Practiced standard precautions throughout skill.	1 0	

Items Evaluated	Possible	Awarded
30. Appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
31. Documented skill and patient's tolerance in nurse's notes.	2 0	
<b>TOTAL POINTS – SKILL V</b> <b>70% Mastery for Skill V = 28</b>	<b>40</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 Performing a Sterile Wound Irrigation (Time: 14 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. Located two identifiers to confirm patient.	2 0	
5. Explained skill to patient and the purpose.	2 0	
6. Obtained privacy.	1 0	
7. Used alcohol-based handrub for hand hygiene.	1 0	
8. Put on gloves and eye shield or face guard.	2 0	
9. Positioned patient so the solution will run from the upper end of the wound downward.	1 0	
10. Placed the waterproof bed pad and clean basin or irrigating pouch under the area to be irrigated.	1 0	
11. Draped the patient with a bath blanket exposing only the wound.	1 0	
12. Removed the used dressing and discarded.	1 0	
13. Discarded used gloves.	1 0	
14. Repeated alcohol-based handrub for hand hygiene.	1 0	
15. Irrigation Tray:		
a. Opened irrigation tray, using sterile technique.	2 0	
b. Opened the irrigation solutions and placed on table, with the inside facing upward.	1 0	
c. Poured solution from supply bottle into irrigation bottle. If the solution was previously used poured off a small amount of solution into the trash receptacle.	1 0	

Items Evaluated	Possible	Awarded
d. Left the cover off of the irrigation supply bottle with the inside cover pointing upward.	1 0	
e. Placed the bottle close to the client on the overbed table. Dated and initialed the bottle after opening including client name and ID number.	1 0	
16. Opened the sterile dressing tray and put on sterile gloves.	2 0	
17. Prepared the inside of the irrigation and dressing trays and placed the irrigation syringe in the bottle.	2 0	
18. Opened dressing package and prepared other items.	1 0	
19. Assessed the amount and character of drainage and the size and condition of the wound and surrounding tissue.	1 0	
20. Drew up solution into the syringe.	2 0	
21. Irrigation: a. Held the syringe just above the wound's top edge and forced fluid into the wound slowly and continuously.	1 0	
b. Used sufficient force to flush out debris but did not squirt or splash fluid.	1 0	
c. Irrigated all portions of the wound but did not force solution into wound's pockets.	1 0	
d. Continued irrigating until solution from bottom end of wound is clear.	1 0	
22. Used sterile 4 x 4 pads, gently patted dry the wound's edges working from the most the cleanest to the most contaminated area.	2 0	
23. Applied sterile dressing as ordered.	1 0	
24. Removed gloves and irrigation supplies and disposed of properly.	1 0	
25. Appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
26. Used alcohol-based handrub for hand hygiene.	1 0	
27. Practiced standard precautions throughout skill.	1 0	
28. Documented and reported procedure and findings.	2 0	
<b>TOTAL POINTS -- SKILL VI</b> <b>70% Mastery for Skill VI = 31.5</b>	<b>45</b>	

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## CLINICAL NURSING

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

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

<b>Skill VII Postmortem Care of the Body (Time: 10 minutes)</b>		<b>Possible</b>		<b>Awarded</b>
1.	Checked physician's order (scenario).	1	0	
2.	Assembled equipment and supplies.	1	0	
3.	Washed hands and donned two pairs of gloves.	2	0	
4.	Donned protective gown.	1	0	
5.	Located two identifiers to confirm patient.	2	0	
6.	Straightened the body and placed small pillow behind the head.	1	0	
7.	If the person's eyes are to be donated, closed them and placed small ice pack on each eye.	1	0	
8.	Removed any jewelry and other belongings and placed in the client property bag and documented.	2	0	
9.	Closed the patient's mouth by placing a chin strap or rolled towel under the chin.	1	0	
10.	Removed all intravenous lines, monitors and other equipment unless ordered otherwise.	1	0	
11.	Removed all linens except for the sheet that covers patient.	1	0	
12.	Bathed any part of the body that has been soiled with discharge.	1	0	
13.	Placed a clean incontinence pad under the patient.	1	0	
14.	Removed any soiled dressings and disposed of properly.	1	0	
15.	Applied clean dressing as needed.	1	0	
16.	Padded the wrist and ankles with gauze squares.	1	0	
17.	Labeled dentures or glasses if present for funeral home staff.	1	0	
18.	Attached two identification tags to the body: one tied to the foot at the right great toe and one on the hand or wrist.	2	0	

Items Evaluated	Possible	Awarded
19. Attached one identification tag to the covering sheet.	2 0	
20. Used zippered bag to enclose the body.	1 0	
21. If patient had a known communicable disease noted on the zippered bag.	2 0	
22. Used alcohol-based handrub for hand hygiene.	1 0	
23. Practiced standard precautions throughout skill.	1 0	
24. Appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
25. Documented and reported procedure.	2 0	
<b>TOTAL POINTS -- SKILL VII</b> <b>70% Mastery for Skill VII = 23.1</b>	<b>33</b>	

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## CLINICAL NURSING

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

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

<b>Skill VIII</b>	<b>Assisting Patient with Postoperative Exercises (Time: 8 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.	Locate two identifiers to confirm patient.	2	0
5.	Explained skill to patient and the purpose.	2	0
6.	Obtained privacy.	1	0
7.	Used alcohol-based handrub for hand hygiene.	1	0
8.	Put on gloves if evidence of any open drainage.	1	0
9.	Splinting an incision:		
	a. Used a pillow, folded bath blanket or large towel as a splint to distribute pressure evenly across the incision.	1	0
	b. Assisted by holding the splint in the first preoperative days (per scenario).	1	0
	c. Grasped the pillow or blanket at the edges and stretched across the client's incision.	1	0
	d. Applied pressure firmly by pushing down on the splint for patient in the bed and pulled splint toward you from behind for the seated patient as the patient coughs.	1	0
10.	Turning Coughing, and Deep Breathing (TCDB):		
	a. Instructed the patient to take a deep breath and hold it for 2 to 5 seconds.	1	0
	b. Instructed the patient to do a double-cough with the mouth open.	1	0
	c. Verbalized the process would be repeated several times each hour.	1	0
11.	Huffing:		
	a. Instructed patient to take a deep abdominal breath and then force air out in several short, quick breaths.	1	0
	b. Instructed patient to take a second, deeper breath and force out in short, panting movements.	1	0
	c. Instructed patient to take an even deeper breath and exhale quickly in strong huff.	1	0

Items Evaluated	Possible	Awarded
d. Instructed the patient to repeat the series of breaths as ordered (scenario).	1 0	
12. Using Incentive Spirometer:		
a. Positioned the patient as upright as possible without causing discomfort.	2 0	
b. Explained the operation of the spirometer to the patient.	1 0	
c. Set goal based on number of seconds or specific volume based on provider's order (scenario).	1 0	
d. Instructed patient to cough to remove as much mucus as possible before treatment.	2 0	
e. Instructed the patient to take slow, deep breaths and hold each breath at the end of inspiration for 2 to 5 seconds.	2 0	
f. Repeated the procedure until patient has achieved established goal or has given best effort at least 8 to 10 times.	1 0	
13. Appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
14. Removed soiled gloves and disposed of properly.	1 0	
15. Used alcohol-based handrub for hand hygiene.	1 0	
16. Practiced standard precautions throughout skill.	1 0	
17. Documented and reported procedure and findings.	2 0	
<b>TOTAL POINTS -- SKILL VIII</b> <b>70% Mastery for Skill VIII = 25.9</b>	<b>37</b>	

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