

# CNA Skills Checklist

Print Name:	
Signature:	<b>SKILL LEVELS</b>
Date:	0 = no experience, theory only 1 = Limited, supervision required 2 = Acceptable proficiency 3 = Independently proficient

Indicate Clinical Skill Competency/Level of Proficiency for ALL procedures/equipment in last 12 mos.

	SKILL LEVEL			
	0	1	2	3
<b>AGE SPECIFIC</b>				
Neonates - birth to 30 days				
Infants - 30 days to 1 year				
Toddlers - 1 to 3 years				
Preschool - 3 to 5 years				
Older Children 5 to 12 years				
Adolescents 12 to 18 years				
Young Adults 18 to 39 years				
Middle Adults 39 to 64 years				
Geriatrics 64+ years				
<b>EXPERIENCE</b>				
Med/Surg				
Telemetry				
Oncology				
Surgical				
Orthopedics				
ER				
Skilled Care				
CBRF				
Alzheimers				
Assisted Living				
Group Home				
Nursing Home				
Home Care				
Hospice				
Clinic				
Hospital				
<b>PERSONAL CARES</b>				
Back Rub				
Foley Catheter Care				
Condom Catheter				
Apply Ostomy				
Change Ostomy				
Peri Care				
Denture Care				
Oral Care				
Shaving				
Hair wash tray				
ROMs				

	SKILL LEVEL			
	0	1	2	3
<b>VITAL SIGNS</b>				
Oral Temperature				
Rectal Temperature				
Axillary Temperature				
Typanic Temperature				
Carotid Pulse				
Apical Pulse				
Respirations				
Manual Blood Pressure				
Digital Blood Pressure				
Telemetry				
<b>MEDICATION ADMINISTRATION</b>				
Rectal				
Oral				
Feeding Tube				
<b>TRANSFERS</b>				
1 - person assist				
2 - person assist				
Hoyer Lift				
EZ Lift				
Gurnee				
<b>PHLEBOTOMY</b>				
Blood Draws				
Accu - Check				
<b>ISOLATION - STANDARD &amp; UNIVERSAL PRECAUTIONS</b>				
Strict				
Droplet				
Gown				
Mask				
Gloves				
Standard Technique				

**BATHING**

- Whirlpool
- Bed Bath
- Sitz Bath
- Tub Bath
- Tub with Lift
- Shower

SKILL LEVEL			
0	1	2	3

**AMBULATION**

- Cane
- Crutches
- Walker
- Tripod Cane
- Gait Belt


**INTAKE/OUTPUT RECORDING**

- Liquids
- Urine
- Drains
- Foley Catheter


**FEEDING/DIET**

- Mechanical soft
- Pureed
- Tube Feeding
- Recording %'s
- Restricted Na+
- Diabetic
- Liquid Diet
- NPO


**WEIGHTS**

- Digital
- Standing
- Lift Scale
- Chair Scale


**CPR**

- Basic Life Support
- Infant
- Child
- Adult


Please use this space to list any other skills or experience you believe is relevant:

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Print Name:
Signature:
Date: