



Nursing Services Checklist

Agency Name:	City:	Date:
10A NCAC 13J .1102 Nursing Services		
Policies & Procedures		Comments
<input type="checkbox"/>	Scope of Service	
<input type="checkbox"/>	Service and Staffing Availability	
<input type="checkbox"/>	Coordination of Services	
<input type="checkbox"/>	Guidelines for Charting and Documentation	
<input type="checkbox"/>	Guidelines for Notifying Physician	
<input type="checkbox"/>	Guidelines for Patient Education	
<input type="checkbox"/>	Guidelines for Physician Orders	
<input type="checkbox"/>	Guidelines for Verbal Orders	
<input type="checkbox"/>	Credentialing of Nursing Personnel	
<input type="checkbox"/>	Competency Verification	
<input type="checkbox"/>	Employee Training & Orientation	
<input type="checkbox"/>	Supervision of Nursing Personnel	
Infection Control		
<input type="checkbox"/>	Hand washing & Hand Hygiene	
<input type="checkbox"/>	Handling of Medical Waste	
<input type="checkbox"/>	Handling and Disposal of Sharps	
<input type="checkbox"/>	Personal Protective Equipment	
<input type="checkbox"/>	General Use of Supplies and Equipment	
<input type="checkbox"/>	Disinfecting and Cleaning Equipment	
Assessment & Plan of Care		Comments
<input type="checkbox"/>	Initial Assessment / Reassessment	
<input type="checkbox"/>	Plan of Care (include development, review frequency, and updates)	
Pain Management		Comments
<input type="checkbox"/>	Pain Assessment / Reassessment	
<input type="checkbox"/>	Pain Medication Administration (include Documentation Guidelines)	



Nursing Services Checklist

Medication Administration		Comments
	Medication Administration Policy	
	Destroying & Discarding Medications	
	Discontinued Medications	
	Adverse Consequences and Medication Related Problems	
	Controlled Substances	
	Metered Dose, Inhaler, Oral, Buccal, and Sublingual	
	Topical, Subcutaneous, Intradermal	
	Intramuscular	
	Z-Track	
	Rectal, Vaginal	
	Eye & Ear Instillation	
	IV Push	
	Secondary Tubing	
	Enteral Tube	
Oxygen Administration		Comments
	Oxygen Administration & Safety	
	Pulse Oximetry	
	Nasal Cannula	
	Mask	
	Assessment of Ventilator Dependent Patients (Adult & Pediatric)	
	Mechanical Ventilation Interventions	
	Responding to Ventilator Warning Signs	
	Tracheostomy Care (include changing)	
	Endotracheal, Nasal, and Oral Suctioning	



Nursing Services Checklist

Nutrition		Comments
	Nutrition Assessment	
	Gastrostomy/Jejunostomy Tube Care	
	Checking Gastric Residual	
	Confirming Placement of Feeding Tube	
	Flushing and Venting Feeding Tube	
	Administration of Feeding (include bolus, gravity, pump, and intermittent)	
	Nasogastric Tube (include insertion, care, and removal)	
	Administration of TPN & Lipids	
Skin & Wound Management		Comments
	Wound Assessment & Patient Education Guidelines for Wound Management	
	Pressure Ulcer Risk Assessment & Documentation Guidelines	
	Skin Breakdown Protocol	
	Clean Dressing, Sterile Dressing, Wet to Dry, Dry	
	Foam Dressing, Calcium Alginate, Hydrogel, Hydrocolloid	
	Wound Vac	
	Wound Irrigation	
	Una Boot	
	Staple & Suture Removal	
Glucose Management		Comments
	Glucose Management Policy (include parameters)	
	Hyperglycemia Protocol	
	Hypoglycemia Protocol	
	Glucose Monitoring	
	Documentation Guidelines	



Nursing Services Checklist

Incontinence		Comments
	Catheter Care	
	Bladder Training	
	Condom Catheter	
	Foley Catheter Insertion & Removal (Male, Female)	
	Intermittent Catheterization (Male, Female)	
	Suprapubic Catheter Care	
	Emptying Urinary Drainage Bag	
	Ostomy Care (colostomy, urostomy)	
	Stoma Care	
	Bowel Training	
	Fecal Impaction Removal	
	Enema	
	Documentation Guidelines	
Miscellaneous		Comments
	Blood Pressure (Hypertension & Hypotension Protocol and Parameters)	
	Pulse (apical, radial)	
	Temperature (oral, tympanic, axillary, rectal)	
	Respirations	
	Range of Motion (active, passive)	
	Applying a Compress (warm, cold)	
	Applying Anti-Emboli Stocking (TED hose)	
	Applying Pneumatic Compression Device	
	Nail Care	
	Foot Care	
	Hoyer Lift	



Nursing Services Checklist

Specimen Collection		Comments
	Specimen Collection Policy	
	Transport Policy	
	Documentation Guidelines	
	Guidelines for Reporting Test Results to Physician	
	Urine Specimen	
	24 Hour Urine Specimen	
	Collecting Urine Specimen from Closed Drainage System	
	Stool Specimen	
	Sputum Specimen	
	MRSA Culture Specimen	
	Blood Specimen	

Attention:

- All Nursing personnel shall be qualified by training, education, experience, and demonstrated abilities to provide nursing care.
- A Registered Nurse shall be on duty at all times to plan, assign, supervise, and evaluate nursing care.
- Nursing Services shall be provided under the direction of a Registered Nurse who should be qualified in the field of administration and who has the ability to oversee, organize, coordinate, and evaluate the service.
- **All policies outlined on the checklist must be submitted in order to be licensed to provide Nursing Services.**



Nursing Services Checklist

Personnel Record Review *(submit personnel records with all of the items listed below)*

Required Items	RN Supervisor	RN	LPN	LVN <i>(Optional)</i>
Employee Name				
Job Title				
Date of Hire				
Application or Resume				
Signed Job Description				
License Verification				
Competency Verification				
Proof of Blood Borne Pathogen Training				
Hepatitis B Immunization or Declination				
TB Skin Test or Chest X-ray				
Proof of Orientation				
Reference Check(s)				
Signed Consent for Criminal Background Check				