



Operating Room RN Skills Checklist

This skills checklist is to be used by RN's with more than one year of nursing experience in their specialty. It will be utilized by healthcare facilities as a determining factor in assignment approval and for skill assessment while on assignment. Please complete all sections thoroughly and accurately. This document will remain a permanent part of your HR file with Solutions Staffing until it is amended or replaced.

Date _____ Name (*print*) _____

Key to Competency Levels

0 – No Experience 1 – Minimal experience, need review and supervision, have performed at least once 2 – Comfortable performing with resource available 3 – Competent to perform independently and safely 4 – Expert, able to act as resource to others

	0	1	2	3	4
Standards of Care					
Maintains standards of nursing practice and professional conduct as determined by the licensing body and the practice setting					
Bases practice on the best evidence from nursing science and other sciences and humanities					
Makes decisions about actual or potential problems and strengths, plans performs interventions and evaluates outcomes					
Adheres to the ethical standards of the nursing profession					
Provides nursing services and collaborates with other members of the healthcare team in providing health care services					
Provides nursing services and collaborates with other members of the healthcare team in providing health care services					
Assumes primary responsibility for maintaining competence and fitness to practice.					
Gastrointestinal					
Rectal Procedures					
Abdominal-Perineal Resection					
Cholecystectomy/Cholangiogram					
Exploratory Laparotomy					
Appendectomy					
Inguinal Herniorrhaphy					
Breast Biopsy					
Thyroidectomy					
Leveen-Peritoneal Shunt					
Bowel/Colon Resection					
Colostomy					
Gastrectomy					
Splenectomy					
Esophagoscopy/Gastroscopy					
Insertion Groshong Catheter					
General Laparoscopic Procedures					
Exploratory Laparoscopy					
Laparoscopic Cholecystectomy					
Laparoscopic Appendectomy					
Laparoscopic Bowel Resection					
Laparoscopic Herniorrhaphy					
Pediatric					
Inguinal Herniorrhaphy					
Circumcision					

	0	1	2	3	4
Exploratory Laparotomy					
Pyloric Stenosis					
Thoracic					
Thoracotomy					
Thoracoscopy					
Lobectomy					
Mediastinoscopy					
Insertion of Chest Tubes					
Bronchoscopy					
Esophagoscopy					
Vascular					
Aorto-Iliac/Femoral Graft					
Abdominal Aortic Aneurysm					
Femoral-Popliteal Graft					
Carotid Endarterectomy					
Av Shunt (arterio-venous)					
Thrombectomy					
Insertion of Pacemaker					
Insertion Vena Cava:					
Umbrella Filter					
Open Heart					
ASD (atrial septal defect)					
VSD (ventral septal defect)					
Mitralor Aortic Valve Replacement					
Tetrology of Fallot					
Chamberlain Procedure (same as mediastinoscopy)					
Bring Back Heart (Emergent)					
Orthopedic					
Total Hip Replacement					
Bipolar					
Compression Hip Screw					
Total Knee Replacement					
Knee Arthroscopy					
ACL Repair (anterior cruciate ligament)					
Harrington Rod insertion					
I.M. Rodding (intra-medullary)					
Shoulder Arthroscopy					
Shoulder Procedures					
Hand Procedures					
Foot Procedures					
Laminectomy					
Spinal Fusion with Instrumentation					

O.R.I.F. with AO Compressions Sets					
External Fixation Devices					
Neuro					
Cervical Laminectomy (anterior)					
Cervical Laminectomy (posterior)					
Lumbar Laminectomy					
Transphenoid Hypathypectomy					
	0	1	2	3	4
VP Shunt (ventricular-peritoneal)					
Craniotomy for Tumor					
Craniotomy for Aneurysm					
Burr Holes (sub-dural hematoma)					
Ophthalmology					
Phaco Emulsification (Cataract surgery-fluid replacement)					
ICLE - Intracapsular lens extraction					
ECLE – Extracapsular lens extraction					
Vitrectomy - Clear blood and debris from eyes					
Scleral buckle - Retinal detachment					
Lid and Muscle Procedures					
Enucleation - Removal of eye- leave muscle & optical contents					
Urology					
Hydrocelectomy					
Cystoscopy					
TURP					
TURBT					
Ureteroscopy					
Ultrasonic Lithotripsy					
Insertion Penile Prosthesis					
Radical Prostatectomy					
Radical Node Dissection					
Gynecology					
D&C					
Laparoscopy					
Hysterectomy					
Myomectomy					
Fibroidectomy					
Abdominal Hysterectomy					
Laparoscopic Assisted Hysterectomy					
Vaginal Hysterectomy					
Anterior and Posterior Repair					
MMK (Marshall Machetti Krantz) Birch Repair					
Tuboplasty					
C-Sections					
BTL (bilateral tubal ligation)					
Plastics					
Facelift					
Skin Grafts					
Augmentation Mammoplasty					

Reduction Mammoplasty					
Rhinoplasty					
Cleft Lip Repair					
Cleft Palate Repair					
Abdominoplasty					
Suction Lipectomy					
Otoplasty					
Biepharoplasty					
Oral					
TMJ Exploration					
	0	1	2	3	4
TMJ with Arthroplasty					
LeFort Osteotomies					
Maxillary Procedure with Graft					
Fractured Jaws, Mandibular & Zygomatic					
Insertion Arch Bars					
Mini AO Compression					
ENT					
T&A					
Myringotomy					
Middle Ear Cases					
Tympanoplasty					
Caldwell-Luc					
Vocal Cord Stripping					
Sinus Endoscopy					
Septoplasty					
Parotidectomy					
Transplants					
Cadaver Kidney Recovery (Harvest)					
Kidney Transplant Recipient					
Kidney Transplant Donor					
Heart					
Liver					
Lung					
Multi-organ (harvest)					
Scrub					
Circulate					
Miscellaneous					
Knowledge of surgical consents/informed consents					
Use of Cautery equipment and proper grounding of the patient					
Administration of Blood and Blood Products					
Care of patient using Jehovah Witness protocol					
Experience Areas, Record Years/Months of Previous Experience. (Check all that apply.)					
<input type="checkbox"/> Operating Room	Years:	Months:	<input type="checkbox"/> Recovery Room (PACU)	Years:	Months:
<input type="checkbox"/> Day Care Surgery	Years:	Months:			
<input type="checkbox"/> Supervision / Management	Years:	Months:			

Certificates Held (Check all that apply.)	
<input type="checkbox"/> ACLS	<input type="checkbox"/> IV Certified
<input type="checkbox"/> BCLS	<input type="checkbox"/> Charge Experience
<input type="checkbox"/> Certificate in OR Nursing	<input type="checkbox"/> Other

Please check the boxes below for each age group for which you have expertise in providing age-appropriate nursing care.

<input type="checkbox"/>	A. Newborn/Neonate (birth - 30 days)	<input type="checkbox"/>	F. Adolescents (12 - 18 years)
<input type="checkbox"/>	B. Infant (30 days - 1 year)	<input type="checkbox"/>	G. Young adults (18 - 39 years)
<input type="checkbox"/>	C. Toddler (1 - 3 years)	<input type="checkbox"/>	H. Middle adults (39 - 64 years)
<input type="checkbox"/>	D. Preschooler (3 - 5 years)	<input type="checkbox"/>	I. Older adults (64+)
<input type="checkbox"/>	E. School age children (5 - 12 years)		

Experience with Age Groups:

Able to adapt care to incorporate normal growth and development.

A	B	C	D	E	F	G	H	I
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Able to adapt method and terminology of patient instructions to their age, comprehension and maturity level.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Can ensure a safe environment reflecting specific needs of various age groups

Please read and agree to the statements below by marking the checkbox.

* I attest that the information I have given is true and accurate to the best of my knowledge and that I am the individual completing this form. I hereby authorize the Company to release this Operating Room Checklist to the Client facilities in relation to consideration of employment as a Traveler with those facilities as indicated by my signature below:

Signature