

Main Line Health System

ED CLINICAL ROTATION (circle one): *BMH LMC PH RMH*

YOU MUST HAVE THIS PAPER WITH YOU IN COLOR OR YOU WILL BE SENT HOME.

Student _____ Date _____

School or Entity _____ Shift _____

Primary Nurse _____ Primary Physician _____

- On Arrival, first introduce yourself to the RN Clinical Coordinator or their designee.
- You will be assigned a RN preceptor and you must show this signoff sheet to them so they are aware of your MLHS skill set with them.
- After that, ask your RN preceptor to introduce you to the physicians and show them this checklist as well so that they are aware of advanced procedures that you can be signed off on with them.
- You are not permitted to do anything that is not on this MLHS list, regardless of school signoffs.

Skill	#Completed	# Unsuccessful	Not applicable	Total # Performed
I.V				
CPR Skills				
<u>Vital Signs</u>				
Pt Assessment				
<u>Oxygen</u> <u>Administration</u>				

<u>Pulse Oximetry</u>				
<u>Suctioning</u>				
<u>Rhythm interpretation</u>				
<u>EKG acquisition</u>				
<i>EKG interpretation</i>				
<i>Defibrillation/ Cardioversion</i> (at discretion of and under direct observation of physician)				
<i>External Pacing</i> (at discretion of and under direct observation of physician)				
<i>Intubation</i> (at discretion of and under direct observation of physician)				

Comments and Observations

 RN Signature _____ Physician Signature _____

Blue= Physician oversight **Red= RN oversight** **Green= either nurse or physician oversight**

Please make a copy of this form. The original one is to be given to the ED clinical lead and the copy is to be returned to your school or entity