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## **Second Verification of Skills Form 206 Instructions**

A NARM Registered Preceptor must verify competent performance of these skills. This Registered Preceptor may not have verified any skill on Form 201a.

The Registered Preceptor should place a check mark next to each task that has been competently performed under the direct supervision of the Registered Preceptor and sign for the entire skill when all tasks have been verified. No boxes should be left unchecked when the skill is signed by the Registered Preceptor. The Registered Preceptor should also fill out the Preceptor Verification Form including current contact information.

More than one Registered Preceptor may sign the skills on the Second Verification of Skills Forms, but all parts of each complete skill must be verified by one preceptor.

The secondary verification may be done as a demonstration with volunteer models or in a clinical setting.

The applicant must verify competent performance in the following seven required skills:

- 1) basic physical exam
- 2) routine prenatal exam of a pregnant woman at least 28 weeks gestation
- 3) newborn exam
- 4) postpartum exam at 24-72 hours
- 5) drawing up medication from a single dose ampule and a multi-dose vial, and intramuscular injection (using an orange if the skill is performed in demonstration rather than in the field)
- 6) set-up and administration of oxygen unit: including procedure, safety measures, use of both cannula and face mask, and the regulation of the flow meter
- 7) sterile technique, including handwashing, gloving and ungloving, and preparing a sterile field

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# Second Verification of Skills Form 206, page 1 of 8

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

1. Basic Physical Exam: The applicant should assess by demonstration or verbalization, and accurately document findings for the following:

- General physical appearance
- General emotional status
- Height
- Weight
- Oral temperature
- Baseline pulse
- Baseline blood pressure
- Palpation of head
- Palpation of neck
- Palpation of thyroid
- Palpation of lymph glands in neck
- Eyes
- Ears
- Teeth, mucous membranes, tongue & tonsils
- Breast exam, including axillary lymph glands
- Palpation of abdomen
- Heart (with stethoscope)
- Lungs (with stethoscope)
- Kidney pain (CVAT)
- Spine for straightness and symmetry
- Upper and lower extremities
- Reflexes
- Skin

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_

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Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

2. Routine Prenatal Exam (mother must be at least 28 weeks gestation)

Urinalysis:

- Obtains urine sample
- Dips stick, covering each square without contamination
- Color comparison as directed on container
- Notes color, clarity, density, odor
- Proper disposal of urine and stick
- Obtains weight, balancing scale at "0"
- Establishes or confirms due dates using gestational wheel or calendar

Obtains blood pressure:

- Proper position of cuff, arm, & stethoscope
- Proper inflation and deflation of cuff
- Listening and recording of blood pressure

Abdominal palpation:

- Assessment of fetal presentation
- Lie
- Position
- Engagement
- Estimated fetal weight
- Assessment of fetal heart tones and movement via stethoscope or Doppler
- Measures fundal height using centimeter measuring tape
- Assessment of edema on tibia by pressing finger against bone, indicate degree of pitting if any
- Documents findings in chart

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_

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Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

3. Newborn Exam of a baby less than six weeks old: may be done at birth or postpartum visit. Tasks are performed as though the baby has just been born.

- Appropriate handwashing prior to exam
- Notes general appearance and alertness

Assesses reflexes:

- Sucking
- Moro
- Babinski
- Plantar
- Stepping
- Grasp/Palmar
- Rooting

- Assesses skin for color, lesions, birthmarks, lanugo, peeling, rash, milia, bruising
- Assesses mouth for soft and hard palate, lip & mouth color

Examines head:

- Measures biparietal circumference
- Molding, caput, or hematoma
- Suture lines and fontanelles
- Palpates thyroid & lymph glands
- Eyes for jaundice or hemorrhage of sclera
- Eyes for pupil size & reactivity
- Eyes for tracking and gaze
- Eyes for spacing and shape
- Ears for position, patency, and response to sound

Examines arms and hands:

- Symmetry
- Fingers for nail length and finger length
- Number of digits and signs of webbing
- Palm creases

Examines chest:

- Symmetry during respirations
- Nipples and breast tissue for swelling or discharge

- Measures chest circumference at nipple line
- Auscultates breath sounds front and back
- Counts respirations
- Counts heart rate, notes irregularities

Examines abdomen, groin, and back:

- Listens with stethoscope for bowel sounds
- Palpates for enlarged organs or masses
- Palpates for hernias or swollen glands
- Palpates femoral pulses
- Examines back/spine for straightness, holes, or abnormalities

Examines legs, feet, hips:

- Symmetry of length and creases
- Hips for range of motion & clicks
- Toes for number of digits and webbing
- Feet for creases

Examines genitalia and rectum:

- General appearance, maturity
- Female: clitoris, labia, vaginal opening, discharge
- Male: descent of testicles, hernias, rugae, penile opening
- Rectum for patency

Measures temperature (axillary or rectally)

Measures weight (standard scale or hanging scale):

- Balance at "0"
- Determine correct weight

Measures baby's length

Appropriate documentation/charting of visit

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_

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## Second Verification of Skills Form 206, page 4 of 8

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### 4. Sterile technique

#### Proper handwashing:

- Soaps and scrubs hands and arms keeping hands down
- Cleans under nails
- Rinses hands, wrists, forearms keeping hands up
- Avoids touching sink
- Dries with clean towel
- Uses towel to turn off faucet

#### Sterile technique:

- Prepares sterile field
- Opens sterile package without touching instruments
- Puts on gloves

#### Gloving and ungloving:

- Peels back envelope
- Folds open inner package
- Picks up glove by cuff touching only inside portion
- Slides hands into glove
- Picks up second glove touching only inner cuff with gloved hand and puts on, does NOT touch anything that would contaminate gloves
- Does not speak or cough over sterile field
- Does not contaminate sterile field
- Removes gloves by reaching under cuff and inverting glove without touching the outside with ungloved hand, disposes of gloves

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_

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## Second Verification of Skills Form 206, page 5 of 8

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

5. Administers Oxygen

- Gathers all necessary equipment
- Connects regulator to cylinder
- Opens tank valve
- Checks that pressure is adequate
- Connects oxygen tubing to regulator
- Attaches cannula or mask to tubing
- Places appropriately on model's face
- Regulates flow meter appropriately
- Keeps tank upright and makes sure cylinder top is not pointed at anyone

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_

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## Second Verification of Skills Form 206, page 6 of 8

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

6. Drawing medication from a single dose ampule and multi dose vial

- Checks all medications for appearance, name, and expiration date (expired medications or sterile saline may be used for purposes of demonstration)
- Removes needle/syringe from wrapping, twists tip of syringe into hub of needle locking in place, leaves needle cover in place

Ampule:

- Wipes neck of ampule with alcohol prep and allows to dry
- Covers ampule with sterile gauze
- Breaks neck of ampule
- Removes needle cover and places needle into ampule
- Draws medication into syringe keeping needle up
- Taps sides of syringe to remove air bubbles
- Squirts out air bubbles

Multi-dose vial:

- Cleanses rubber stopper with alcohol prep pad and allows to dry
- Pulls plunger back to appropriate mark
- Holds bottle upside down
- Inserts needle through rubber stopper into medication
- Pushes plunger so air enters vial
- Keeps tip of needle beneath surface of medication
- Draws up slightly more medication than needed
- Withdraws needle from bottle
- Taps sides of syringe with needle up to get bubbles up
- Squirts out air bubbles
- Before injecting, asks about known allergies
- Uses aseptic technique
- Injects appropriately, changing needles if applicable, into person or into orange (if for demonstration purposes)
- Disposes of ampule, needle, and syringe into sharps container

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_

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## Second Verification of Skills Form 206, page 7 of 8

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### 7. Postpartum exam at 24-72 hours

Inquires or examines for:

- Nipple soreness, problems with nursing
- Lochia (color, amount, odor); blood clots
- Urination, bowel movements
- Nutrition and hydration
- Ability to rest, adequate household help
- Afterpains
- Calf pain
- Bonding

Checks maternal vital signs:

- Blood pressure
- Pulse
- Temperature

Assessment of uterus:

- Palpate for firmness and location
- Fundal height

Assesses perineum:

- Wash hands and dons gloves
- Examine perineum, vagina, and anus for edema, hematoma, healing of tears or sutures, foul odor or signs of infection, hemorrhoids
- Appropriate disposal of gloves
- Provides appropriate advice or plan for follow-up
- Documents findings in chart

Signature of NARM Registered Preceptor \_\_\_\_\_

Date \_\_\_\_\_



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## Second Verification of Skills Form 206, page 8 of 8

Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Make a copy of this page of Form 206 for each NARM Registered Preceptor who has signed for skills on pages 1-7 of Form 206. They must fill out this page and sign.**

NARM Registered Preceptor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

I, \_\_\_\_\_, affirm and have witnessed that the applicant, \_\_\_\_\_, has acquired and is proficient in the performance of the skill(s) that I marked and signed on the Second Verification of Skills Form 206.

**By checking this box, I affirm I was a NARM Registered Preceptor at the time of verifying the skill and/or clinical.**

I affirm that I have read and understand the instructions pertaining to filling out the Second Verification of Skills Form 206.

NARM Registered Preceptor's Signature: \_\_\_\_\_

NARM Registered Preceptor's Initials: \_\_\_\_\_ Date: \_\_\_\_\_