

**Rochester Area
Schools of Nursing
Skills Guidelines for Faculty and RN/LPN Student Clinical Experiences**

Revised: 6/23/25

- All students will come to clinical with their school-based skills checklist.
- Regardless of competency notes on the school-based checklist, students must perform all skills, including documentation, under an RN's direct supervision.
- Should the RN preceptor need to delegate medication administration to a second RN, the second RN assumes full responsibility for the patient and the student.
- All medications administration via any route must be administered under the direct supervision of the RN preceptor. LPN students may participate in the medication administration process at all hospitals.

NOTE: This is not an all-inclusive list; for any questions or clarifications please consult with the respective hospital's Department of Education, the Affiliated Schools Coordinator or policy manual.

NOTE: In the post-acute homecare setting, student interventions will be limited to head to toe assessments, vitals signs and basic ADLs. All other skills are observation only.

		Acute Care Settings				Post Acute Care Settings				
		RN Student <i>MUST</i>		LPN Student <i>MUST</i>		RN Student <i>MUST</i>		LPN Student <i>MUST</i>		
		OBSERVE ONLY	perform under DIRECT RN SUPERVISION	OBSERVE ONLY	perform under DIRECT RN SUPERVISION	OBSERVE ONLY	perform under DIRECT RN SUPERVISION	OBSERVE ONLY	perform under DIRECT RN SUPERVISION	
CATEGORY	SKILLS									FACILITY EXCEPTION(s) To Student Skills Checklist
1 Blood Transfusion	1.1 Assess and monitor per protocol including vital signs		X	X			X	X		
	1.2 Check blood	X		X		X		X		
	1.3 Co-sign/second RN signature	X		X		X		X		
	1.4 Set up tubing		X	X			X	X		Observation only for the neonatal population
	1.5 Spike blood	X		X		X		X		
2 Central Lines-Triple Lumen Caths, PICC, midlines, etc.	2.1 Administer IVPB into currently infusing central line		X	X			X	X		Observation only for the neonatal population
	2.2 Alaris pump management		X	X			X	X		
	2.3 Blood Draws	X		X		X		X		
	2.4 Central Line Dressing Changes (except PICC)	X		X		X		X		
	2.5 Hang additional solution		X	X			X	X		Observation only for the neonatal population
	2.6 Hang Initial solution	X		X		X		X		
	2.7 Flush line	X		X		X		X		
	2.8 PICC Line Dressing Changes	X		X		X		X		
3 Dialysis Catheters/AV Fistulas	3.1 Access vascular device	X		X		X		X		
	3.2 Assess patency of AV fistula (thrills, bruits)		X	X			X		X	
	3.3 Blood Draws	X		X		X		X		
	3.4 Change dialysis catheter dressing	X		X		X		X		
	3.5 Flush line	X		X		X		X		
4 Epidural Catheters	4.1 Add new bag/ change rate or mode	X		X		X		X		
	4.2 Assess epidural insertion site		X	X			X	X		
	4.3 Change extension tubing	X		X		X		X		
	4.4 Sensory and motor checks/vital signs		X	X			X	X		
	4.5 Programming pump	X		X		X		X		
5 Implanted Vascular Devices (i.e. Mediports)	5.1 Access vascular device with huber needle	X		X		X		X		
	5.2 Administer IVPB into currently infusing IV line		X	X			X	X		
	5.3 Alaris Pump management		X	X			X	X		
	5.4 Blood Draws	X		X		X		X		
	5.5 Change Mediport dressing	X		X		X		X		
	5.6 Flush line	X		X		X		X		
	5.7 Hang additional solution		X	X			X	X		
	5.8 Hang initial solution	X		X		X		X		
6 Independent Transcription/ Verification/ 2nd Review of Orders/ Telephone Orders/Verbal Orders	6.1 Orders	X		X		X		X		
7 Narcotic/Medication Management	7.1 Access medication dispensing system with RN preceptor		X**		X**		X**		X**	** RN & LPN: With RN Preceptor ONLY
	7.2 Medication Administration (PO, IM, SQ, SubQ disc, ID, IV, PR, Feeding Tube, Intranasal, Eye Drops, Ear Drops, nebulized, inhaled, SL)		X		X		X		X	Observation only for the neonatal population
	7.3 IV push medications									The following medications may be administered IV push via peripheral IV only under the direct supervision (i.e. present and actively monitoring) of a clinical instructor or preceptor: - Saline flush - Corticosteroids (i.e. methylprednisolone) - Diuretics (i.e. furosemide) - GI medications (i.e. pantoprazole) - Antibiotics (i.e. ceftriaxone) - Benadryl - Ondansetron - Ketorolac Special Considerations: Students may not administer IV push medications in emergency situations or if it may induce a state of moderate sedation. Students are not permitted to administer any medications other than those specifically listed above.
	7.4 Intraosseous Medication Administration, Flushing or Removal	X		X		X		X		
	7.5 Administer chemotherapy, antineoplastic agents, monoclonal antibodies	X		X		X		X		
	7.6 Insertion and removal of subQ disc	X		X		X		X		

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		OBSERVE ONLY	perform under DIRECT RN SUPERVISION	OBSERVE ONLY	perform under DIRECT RN SUPERVISION	OBSERVE ONLY	perform under DIRECT RN SUPERVISION	OBSERVE ONLY	perform under DIRECT RN SUPERVISION	
	7.7 Administration of TPN, Lipids, Hyperalimina	in PEDs ONLY	X	in PEDs ONLY	NOT the 1st Dose	in PEDs ONLY	X	in PEDs ONLY	NOT the 1st Dose	Observation only for the pediatric and neonatal populations
	7.8 Continuous infusion of meds requiring titration [e.g. insulin, heparin, etc]		X		X		X		X	
	7.9 Continuous infusion of meds requiring titration including paralytics & pressors	X		X		X		X		
	7.10 Serve as a double check of any med which requires "2" RN signatures	X		X		X		X		
	7.11 Sign Count Sheet, reconcile discrepancies	X		X		X		X		
	7.12 Morgan Lens Application and maintenance (eye irrigation)	X		X		X		X		
	7.13 Ear Irrigation	X		X		X		X		
8 Nasogastric Tubes (Salem Sump)	8.1 Check Placement		X		X		X		X	
	8.2 Insert	X		X		X		X		
	8.3 Remove		X	X			X	X		
	8.4 NG to Suction Management (disconnect/reconnect)		X		X		X		X	
9 Oxygen Therapy	9.1 Changing the delivery route		X		X		X		X	
	9.2 Initial administration		X		X		X		X	
	9.3 Intermittent therapy		X		X		X		X	
	9.4 Titration		X		X		X		X	
10 Patient Care: Newborns	10.1 Newborn Apgar Scores	X		X		X		X		
	10.2 Newborn assessment		X		X		X		X	
	10.3 Newborn bath		X		X		X		X	
	10.4 Newborn bottle feeding		X		X		X		X	10.4 Unity: Students may not handle breastmilk
	10.5 Newborn medication administration	see note	X	see note	X	see note	X	see note	X	10.5 Strong Memorial, Highland Hospital, Unity Hospital: Students may not administer meds to normal newborns
	10.6 Newborn vital signs		X		X		X		X	
	10.7 Newborn Transport	X		X		X		X		Students may not transport newborns without facility RN staff
11 Patient Care: Obstetrics	11.1 Assist with speculum exam	X		X		X		X		
	11.2 Breastfeeding/Breast Pump Education		X		X		X		X	
	11.3 Checking a fetal heart rate		X		X		X		X	
	11.4 Foley catheter insertion		X		X		X		X	
	11.5 Leopold's Maneuver's		X	X			X		X	
	11.6 Maternal vital signs		X		X		X		X	
	11.7 Performing a Non Stress Test		X		X		X		X	
	11.8 Postpartum 8 point check		X		X		X		X	
	11.9 Cervical Exam	X		X		X		X		11.9 SMH and Rochester General, students may perform under RN direct observation.
	11.10 Therapeutic nursing care during labor and delivery		X		X		X		X	
12 Patient Care: Pediatrics	12.1 PPUPET Scale		X	X			X		X	
	12.2 Pediatric admission assessment and screening		X		X		X		X	
	12.3 Pediatric Pain Scales (FLACC, Faces Scale Revised, Numeric in Peds)		X		X		X		X	
	12.4 PEWS Score		X		X		X		X	
	12.5 Procedural Support (Observation of Child Life Staff)		X		X		X		X	
	12.6 J-Tip Lidocaine Administration	X		X		X		X		
13 Patient Care: Psychiatry	13.1 Checking belongings	X		X		X		X		
	13.2 Co-lead activity groups		X		X		X		X	
	13.3 Co-lead psycho-educational groups		X		X		X		X	
	13.4 Maintain a patient in a restraint with 1:1 observation	X		X		X		X		
	13.5 Maintaining a patient in seclusion with 1:1 observation	X		X		X		X		
	13.6 Maintaining a patient on suicide precautions with 1:1 observation	X		X		X		X		
	13.7 Patient rounding	X		X		X		X		
	13.8 Suicide assessment		X		X		X		X	
	13.9 Verbal, non-verbal de-escalation	X		X		X		X		
	13.10 Violence assessment		X		X		X		X	
14 Patient Safety	14.1 Restraints	X		X		X		X		
	14.2 Safe Patient Handling		With Facility Staff ONLY				With Facility Staff ONLY			
	14.3 Positioning for Xrays or Radiologic Diagnostic Testing	X		X		X		X		Highland Hospital, students and faculty that have completed the SPH training may use lift equipment with a Highland employee. AT HAB may do with any staff member - CAN, LPN, RN, Therapy
15 PCA Pumps	15.1 Change medication cassette	X		X		X		X		
	15.2 Change tubing	X		X		X		X		
	15.3 Program pump	X		X		X		X		
16 Perform 12 Lead EKG	16.1 Perform 12 Lead EKG		X		X		X		X	
17 Phlebotomy	17.1 Perform Phlebotomy	X		X		X		X		Phlebotomy is an observation only activity and includes the drawing of labs from any venous access device.
18 Peripheral IV's	18.1 Change dressing		X		X		X		X	

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	18.2 Change rate		X		X		X		X	
	18.3 Flush line		X		X		X		X	
	18.4 Hang solution		X		X		X		X	
	18.5 IV push medications		see note	X			see note	X		Refer to section 7.3
	18.6 Venipunctures	X		X		X		X		
	18.7 IV Insertion									IV insertion may be performed in capstone experiences at the discretion of the preceptor. Phlebotomy is an observation only activity and includes the drawing of labs from any venous access device. Observation only for NICU/Neonate populations.
			see note	X			see note	X		
19 Reconstitute Medications	19.1 Add diluent & mix bag		X		X		X		X	
	19.2 Hang Potassium IV mini bags		X		X		X		X	
20 Tracheostomy Care	20.1 Assessment of secretions		X		X		X		X	
	20.2 Assessment of tracheostomy insertion site		X		X		X		X	
	20.3 Dressing change		X		X		X		X	
	20.4 Replace Inner Cannula		X		X		X		X	
	20.5 Suctioning		X		X		X		X	
21 Wound & Skin Care	21.1 Participate in graft care	X		X		X		X		
	21.2 Participate in non grafted wound/burn care		X		X		X		X	
	21.3 Participate in non-sterile/ sterile dressing changes		X		X		X		X	
	21.4 VAC dressing change and equipment	X		X		X		X		
	21.5 Place rectal trumpets/dignicare		X		X		X		X	
	21.6 Suture/Staple Removal	X		X		X		X		
22 Urinary Devices	22.1 Urinary Catheter Insertion	see note	X	see note	X	see note	X	see note	X	Strong Memorial: Students may not participate in urinary catheter insertion in Adult ICU settings
	22.2 Urinary Catheter Removal		X		X		X		X	Observation only for the neonatal population
	22.3 Hand Irrigation of Urinary Catheter	X		X		X		X		
	22.4 Murphy Drip Maintenance		X		X		X		X	
	22.5 Condom Catheter Application and Removal		X		X		X		X	
	22.6 Purewick Application		X		X		X		X	
	22.7 Bladder Scanning	X		X		X		X		
23 PEGTube, J-Tube, G- Tube	23.1 Check placement		X		X		X		X	
	23.2 Change dressing		X		X		X		X	
	23.3 Insert	X		X		X			X	
	23.4 Remove	X		X		X			X	
	23.5 Check residuals		X		X		X		X	
	23.6 Irrigation		X		X		X		X	
	23.7 Medication administration		X		X		X		X	
	23.8 Tube feedings and infusion pump		X		X		X		X	
24 Nephrostomy Tubes	24.1 Nephrostomy tubes	X		X		X		X		
25 Ostomies	25.1 Change the equipment		X		X		X		X	
	25.2 Change the dressing		X		X		X		X	
	25.3 Emptying the bag		X		X		X		X	
26 Drains; JP, Penrose, Hemovac	26.1 Dressing change		X		X		X		X	
	26.2 Site care		X		X		X		X	
	26.3 Drain Removal	X		X		X		X		
27 Specimen Collection	27.1 Urine		X		X		X		X	
	27.2 Stool		X		X		X		X	
	27.3 Wound		X		X		X		X	
	27.4 Sputum		X		X		X		X	
	27.5 Nasal		X		X		X		X	
	27.6 Pharyngeal		X		X		X		X	
	27.7 Nasopharyngeal		X		X		X		X	
28 Blood Glucose Monitoring			X * Instructor must have current competency		X * Instructor must have current competency		X * Instructor must have current competency		X * Instructor must have current competency	Strong Memorial and Highland Hospital: Students and Faculty may not perform blood glucose testing
	28.1 Blood glucose monitoring/Use of Glucometer									Unity Hospital: Students may not perform blood glucose testing on newborns unless under direct RN supervision
29 Chest Tube	29.1 Assess site		X	X			X	X		RGH: Observation only for the NICU
	29.2 Change dressing		X		X		X		X	