

Labor & Delivery Skills Checklist

Name: _____

Date: _____

In order to provide suitable assignments for you, this checklist is intended as a method of assessing your professional proficiency. Please rate your skill level as accurately as possible by placing a **check (√)** in the appropriate box.

1 = No experience; Theory/observed only

2 = Limited competency; < 5 times per year; Needs supervision

3 = Acceptable competency; > 5 times per year

4 = Competent; Performs on a daily or weekly basis; Proficient

Skill Level	1	2	3	4
Meds/ IV Therapy				
Administer IM & SQ Meds				
Administer IV Medications				
Administer PO Medications				
Mix IV Infusion w/ Additives				
Needle-less Systems				
Peripheral IV Insertion				
Use of Heparin/ Saline Locks				
Administer/Monitor IV Infusions:				
Administer Blood				
Administer Blood Products				
Antibiotics				
Discontinue Peripheral IV's				
Draw Blood for Lab Studies				
Heparin				
Labor Suppressants-Ritordine				
Magnesium Sulfate Therapy				
Oxytocin Induction/Augmentation				
Vital Sign Monitoring				
Pulse Oximetry:				
Monitoring				
Setup				
Intrapartum Phase				
Contraction Characteristics				
Determine Fetal Position				
Doppler Ultrasound				
Fetoscope				
Status of Membranes				
Bedside Clinical Testing:				
Blood Glucose Monitoring				
Urine Dipstick				
Ante/Intrapartum Care of:				
Abruptio placenta				
Asthma				

Skill Level	1	2	3	4
Ante/Intrapartum Care of cont...				
Cardiac Disease				
Cystitis				
Diabetes Mellitus				
Hemorrhage				
Infectious Disease				
Malpresentations				
Multiple Gestation				
Oxytocin Challenge Test				
Placenta Previa				
Preeclampsia & Eclampsia				
Pregnancy-Inducted HTN				
Premature Labor				
Pyelonephritis				
Rh Incompatibilities				
Sickle Cell Disease				
Interventions During Labor				
Change Woman's Position PRN				
Coach Psycholprophylactic Breathing/Relaxation				
Perineal Prep				
Provide Care & Monitor After Rupture of Membranes				
Provide Physical Comfort Measures & Support				
Support, Guide, Labor Coach PRN				
Aseptic Technique Relative to L & D				
Assist with AROM Procedure				
Assist with Fetal Scalp Blood Sampling				
Assist with Placement of Intrauterine cath				
Electrodes for Internal Monitoring				
Perform a Vaginal Exam				
External Monitor:				
Abdominal ECG Transducer				
Assessment for Clonus				
Assessment for Deep Reflexes				
Assessment for Edema				

External Monitor cont...				
Decelerations-Early, Late, Variable				
Insert Straight/Foley Catheter				
Intake and Output				
Internal Monitor				
Pelvimetry				
Phono				
Tocotransducer				
Ultrasound				
Variability/Reactivity				
Interventions During Delivery				
Caesarean Section				
Collect Cord Blood Sample				
Different ways of identifying an infant				
Epidural Anesthesia Monitoring				
Eye Prophylaxis				
Forceps Vaginal Delivery				
General Anesthesia monitoring				
Immediate Care of Infant Post-Birth				
Labor Room Delivery				
Local Infiltration (Preparation)				
Physically Examine Newborn				
Spinal Anesthesia Monitoring				
Spontaneous Vaginal Delivery				
Circulate/Scrub for a Postpartum Tubal Ligation				
Scrub for a Caesarean Section				
Setup a Caesarean Section Table				
Setup Delivery Table				
Perform Cardiopulmonary Resuscitation:				
Adult (Assist w/Intubation, Drug, Defib)				
Infant				

Postpartum Phase				
Apply Ice to Perineum				
Assess Homan's Sign				
Bladder Distention				
C-Section Incision Care				
Episiotomy Care				
Fundus Consistency/Location				
Initiate Fundal Massage PRN				
Insert Straight/Foley Catheter				
Lochia				
Manage Postpartum Pain				
Postpartum Assessment				
Provide/Instruct Perineal Care				
Initiate Post-Anesthesia Care:				
Epidural				
General				
RhoGam Administration				
Rubella Vaccine				
Spinal				
Parent/Infant Bond				
Assist/Instruct Bottle feeding				
Assist/Instruct Breastfeeding				
Discharge Teaching				
Foster parent/Infant Bonding				
EMR				
Allscripts				
Cerner				
Epic				
HomeCare Home Base				
McKesson				
Meditech				
Other Computerized Documentation System				

Please list any areas of expertise below:

I hereby certify that ALL information I have provided to Onyx Health Care Staffing on this skills checklist is true and accurate. I understand and acknowledge that any misrepresentation or omission may result in disqualification from employment and/or immediate termination.

Nurse Signature: _____ Date: _____