

SEMESTER-I

Nursing Foundations-I

| Sl. No. | Procedural Competencies/Skills | Performs Independently | Assists/ Observes Procedures A/O | Date | | Signature of the Tutor/ Faculty |
|---------|--|------------------------|----------------------------------|---------------------------|---------------|---------------------------------|
| | | | | Skill Lab/ Simulation Lab | Clinical Area | |
| 1. | Communication and Documentation | | | | | |
| | Maintaining communication and interpersonal relationship with patient and families | | | | | |
| | Verbal report | | | | | |
| | Recording/documentation of patient care (written report) | | | | | |
| 2. | Monitoring Vital Signs | | | | | |
| | <i>Temperature</i> | | | | | |
| | Oral | | | | | |
| | Axillary | | | | | |
| | Rectal | | | | | |
| | Tympanic | | | | | |
| | <i>Pulse</i> | | | | | |
| | Radial | | | | | |
| | Apical | | | | | |
| | <i>Respiration</i> | | | | | |
| | <i>Blood Pressure</i> | | | | | |

Contd...

| Sl. No. | Procedural Competencies/Skills | Performs Independently | Assists/ Observes Procedures A/O | Date | | Signature of the Tutor/ Faculty |
|---------|---|------------------------|----------------------------------|---------------------------|---------------|---------------------------------|
| | | | | Skill Lab/ Simulation Lab | Clinical Area | |
| 3. | Hot & Cold Application | | | | | |
| | Cold compress | | | | | |
| | Hot compress | | | | | |
| | Ice cap | | | | | |
| | Tepid sponge | | | | | |
| 4. | Health Assessment (Basic—First Year Level) | | | | | |
| | Health history | | | | | |
| | Physical assessment—general & system wise | | | | | |
| | Documentation of findings | | | | | |
| 5. | Infection Control in Clinical Settings | | | | | |
| | Hand hygiene (hand washing & hand rub) | | | | | |
| | Use of personal and protective equipment | | | | | |
| 6. | Comfort | | | | | |
| | Open bed | | | | | |
| | Occupied bed | | | | | |
| | Postoperative bed | | | | | |
| | Supine position | | | | | |
| | Fowler's position | | | | | |

Contd...

Clinical Logbook/Practical Record Book for BSc Nursing Students

| Sl. No. | Procedural Competencies/Skills | Performs Independently | Assists/ Observes Procedures A/O | Date | | Signature of the Tutor/ Faculty |
|---------|--|------------------------|----------------------------------|---------------------------|---------------|---------------------------------|
| | | | | Skill Lab/ Simulation Lab | Clinical Area | |
| | Lateral position | | | | | |
| | Prone position | | | | | |
| | Semi prone position | | | | | |
| | Trendelenburg position | | | | | |
| | Lithotomy position | | | | | |
| | Changing position of helpless patient (moving/turning/ logrolling) | | | | | |
| | Cardiac table/over-bed table | | | | | |
| | Back rest | | | | | |
| | Bed cradle | | | | | |
| | Pain assessment (initial & reassessment) | | | | | |
| 7. | Safety | | | | | |
| | Side rail | | | | | |
| | Restraint (physical) | | | | | |
| | Fall risk assessment & post fall assessment | | | | | |
| 8. | Admission & Discharge | | | | | |
| | Admission | | | | | |
| | Discharge | | | | | |
| | Transfer (within hospital) | | | | | |

Contd...

| Sl. No. | Procedural Competencies/Skills | Performs Independently | Assists/ Observes Procedures A/O | Date | | Signature of the Tutor/ Faculty |
|---------|---|------------------------|----------------------------------|---------------------------|---------------|---------------------------------|
| | | | | Skill Lab/ Simulation Lab | Clinical Area | |
| 9. | Mobility | | | | | |
| | Ambulation | | | | | |
| | Transferring patient from & to bed & wheelchair | | | | | |
| | Transferring patient from & to bed & stretcher | | | | | |
| | Range of motion exercises(ROM) | | | | | |
| 10. | Patient Education | | | | | |
| | Individual patient teaching | | | | | |