



## Psychiatric RN Skills Checklist

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Level of Efficiency**

**1=No Experience    2=Limited Experience    3=Experienced    4=Proficient**

Assessment	1	2	3	4
Admission				
Initial Nursing Assessment and Care Plan				
Neurological Vital Signs				
Nursing Diagnoses				
Nursing Reassessment and Care Planning Update				
Suicide Risk Assessment				

Equipment & Procedures	1	2	3	4
Active Participation in Multi-Disciplinary Staffing				
Assist Physician in Administration of Electroconvulsive Therapy				
Assist with Lumbar Puncture				
Cardiopulmonary Resuscitation				
Charge Nurse Experience				
Charting				
❖ Behavioristic				
❖ Treatment/Goal Oriented				
Discharge Planning				
Electroconvulsive Therapy				
Group Therapy Leader				
Insertion & Care of Straight and Foley Catheter				
❖ Female				
❖ Male				
Management of Drug/Alcohol Detox Symptoms				
Management of Assaultive Behavior				
Multi-Disciplinary Treatment Team Participation				
O <sub>2</sub> Therapy & Medication Delivery Systems				
❖ Bag and Mask				
❖ External CPAP				
❖ Face Masks				

P.O. Box 396  
 Middletown, NY 10940-0396

Toll Free – (877) 343-0808  
 Phone – (845) 343-0808  
 Toll Free Fax – (877) 342-2496  
[Information@medicalstaffingresource.com](mailto:Information@medicalstaffingresource.com)

<b>Equipment &amp; Procedures (Cont'd.)</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
❖ Inhalers				
❖ Nasal Cannula				
❖ Portable O2 Tank				
❖ Trach Collar				
Oro-Naso-Pharynx Suctioning				
Participation in Milieu Therapy				
Patient Teaching				
Psychiatric Emergency Response Team				
Psychiatric Home Health				
Rapid Tranquilization				
Restraints, Application and Assessment of:				
❖ Ambulatory Cuffs				
❖ Full Restraints				
❖ Wrist Restraints				
Telephone Crisis Intervention				
Therapeutic Communication Skills				
Tube Feeding				

<b>Care of the Patient With:</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Alcohol Dependency				
Drug Dependency				
Electroconvulsive Therapy				
Hallucinations				
Manic Behavior				
Me-Psych Patient				
Organic Disorder				
Partial Hospital/Intensive Outpatient Program Patient				
Seclusion and Restraints				
Seizure Disorder				
Suicidal Behavior				
Tracheostomy				

<b>Medications</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Administration of Oral Psychotropic Medications				
Heparin				
Intramuscular				
Management of Extrapramidal Symptoms (EPS)				
Oral				
Rectal				
Sub-Q				
Unit Dose				
Z-Technique				

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<b>Phlebotomy/IV Therapy</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Equipment & Procedures				
❖ Administration of Blood/Blood Products				
1) Packed Red Blood Cells				
2) Whole Blood				
❖ Drawing Blood from Central Line				
❖ Drawing Venous Blood				
❖ Management of Patient with Hyper alimentation				
❖ Management of Patient with IV				
❖ Starting IVs				
1) Angiocath				
2) Butterfly				
3) Heparin Lock				

<b>Age Specific Criteria</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Newborn (Birth-30 days)				
Infant (30 days-1 year)				
Toddler (1-3 years)				
Preschooler (3-5 years)				
School Age Children (5-12 years)				
Adolescents (12-18 years)				
Young Adults (18-39 years)				
Middle Adults (39-64 years)				
Older Adults (64+ years)				