



CLINICAL SKILLS STUDENT
EVALUATION CHECKLISTS
AND SUGGESTED RESOURCES

Acknowledgement

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Checklist for Blood Glucose Measurement

		Yes	No
1.	Wash hands.		
2.	Introduce self.		
3.	Identify patient: name and birthdate.		
4.	Explain the procedure in understandable language.		
5.	Make sure patient is in a sitting position.		
6.	Put on gloves.		
7.	Check fingers and identify one clear of bruises and cuts.		
8.	Clean finger with alcohol.		
9.	Place a test strip into the blood glucose monitor. Monitor will turn on.		
10.	Massage finger; take lancet and prick side of finger.		
11.	Wipe off first drop of blood on finger with gauze.		
12.	Touch the test strip with the second droplet of blood.		
13.	Place another gauze on puncture site and apply pressure.		
14.	Obtain reading of blood glucose.		
15.	Remove gauze and place band-aid on finger.		
16.	Discard lancet into sharps bin.		
17.	Discard test strip, gauze, and gloves in appropriate waste bin.		
18.	Record time and date of measurement.		

Student/intern _____
(name) (Signature)

Observer _____
(name) (Signature)

Date: _____

References:

- Finger Stick Glucose Testing. <https://www.youtube.com/watch?v=YB6grLnEvG8>
- Geeky Medics. <https://geekymedics.com/blood-glucose-measurement/>
- Blood Glucose Test. <https://my.clevelandclinic.org/health/diagnostics/12363-blood-glucose-test>
- Park HD. Current status of clinical application of point-of-care testing. *Arch Pathol Lab Med* 2021;145:168–175. <https://doi.org/10.5858/arpa.2020-0112-RA>

Checklist for Blood Lipid Measurement

		Yes	No
1.	Wash hands.		
2.	Introduce self.		
3.	Identify patient: name and birthdate.		
4.	Explain the procedure in understandable language.		
5.	Make sure patient is in a sitting position.		
6.	Gather monitor/equipment.		
7.	Follow manufacture's instruction.		
8.	Put on gloves.		
9.	Check fingers and identify one clear of bruises and cuts.		
10.	Clean finger with alcohol.		
11.	Massage finger; take lancet and prick fingertip		
12.	Touch the capillary tube with a droplet of blood; allow blood to flow horizontally into tube.		
13.	Place another gauze on puncture site and apply pressure.		
14.	Apply blood in capillary tube to test strip in monitor.		
15.	Obtain reading of lipid readings.		
16.	Remove gauze and place band-aid on finger.		
17.	Discard lancet into sharps bin.		
18.	Discard test strip, gauze, and gloves in appropriate waste bin.		
19.	Record time and date of measurement.		

Student/intern _____
(name) (Signature)

Observer _____
(name) (Signature)

Date: _____

References:

- Monitor Cholesterol https://www.youtube.com/watch?v=8A_w75ds4Us
- Are Cholesterol Tests Always Accurate?
https://www.medicinenet.com/are_cholesterol_tests_always_accurate/article.htm
- Park HD. Current status of clinical application of point-of-care testing. *Arch Pathol Lab Med* 2021;145:168–175. <https://doi.org/10.5858/arpa.2020-0112-RA>

Checklist for Blood Pressure Measurement

		Yes	No
1.	Introduce self.		
2.	Identify patient: name and birthdate.		
3.	Explain the procedure in understandable language.		
4.	Wash hands.		
5.	Assist patient to a sitting position with feet flat to the ground. Legs uncrossed. Rest 5 minutes.		
6.	Position patient with back support, arm at heart level, and palm turned up.		
7.	Select correct cuff size.		
8.	Palpate brachial artery.		
9.	Place cuff one to two inches above brachial pulse.		
10.	Determine cuff is properly fitted.		
11.	Ask patient to remain quiet during measurement.		
12.	Estimate the systolic pressure by pumping until brachial pulse is no longer evident.		
13.	Inflate cuff to 30 mmHg higher than the estimated systolic pressure.		
14.	Obtain blood pressure reading.		
15.	Repeat measurement if blood pressure \geq 140/90.		
16.	Advise medical follow-up if blood pressure is \geq 140/90.		
17.	Record blood pressure and location of reading (left or right arm)		

Student/intern _____
 (name) (Signature)

Observer _____
 (name) (Signature)

Date: _____

References:

- How to Take a Blood Pressure Measurement (Systolic and Diastolic Sounds). <https://www.youtube.com/watch?v=soR8THwQzBw>
- AMA BP measurement competency <https://www.ama-assn.org/system/files/2021-01/bp-measurement-competency.pdf>

Checklist for Swallow Screen

		Yes	No
1.	Introduce self.		
2.	Identify patient: name and birthdate.		
3.	Determine if patient is alert.		
4.	Ask patient to tighten teeth and close lips.		
5.	Ask patient to cough at least two times.		
6.	Determine if patient can swallow own secretions.		
Swallow Screen			
7.	Ensure patient is in upright position.		
8.	Give one teaspoon of water – no straw.		
	• Patient swallows without choking		
	• Patient speaks without gurgling.		
	• Patient coughs after drinking water.		
	• Patient drools water.		
9.	If patient does not choke, gurgle, cough, or drool, proceed to #10. If patient does, refer to the appropriate health care professional		
10.	• Proceed with 2 ounces water – no straw		
	• Patient swallows without choking		
	• Patient speaks without gurgling.		
	• Patient coughs after drinking water.		
	• Patient drools water.		
11.	If patient chokes, gurgles, coughs, or drools, refer to the appropriate health care professional.		

Student/intern _____
 (name) (Signature)

Observer _____
 (name) (Signature)

Date: _____

References:

- Stanford Medicine. https://youtu.be/x_sssJErd6U
- Bedside Swallow Screen.
https://aann.org/uploads/Bedside_Swallow_Screen.pdf

Checklist for Tube Placement

Student Outcome: able to explain the steps in placement of nasoenteric feeding tube.

1.	Confirm order for tube insertion.	Yes	No
2.	Wash hands and put on appropriate personal protective items (gloves, mask, etc.)		
3.	Identify patient: name and birthdate.		
4.	Collect equipment and ensure correct tube size (e.g., #12 French)		
5.	Measure the distance for insertion: <ul style="list-style-type: none"> • Tip of tube at nostril or mouth (dependent on placement) • Extend to earlobe • Extend to xiphoid process and midway to the umbilicus 		
6.	Lubricate tube tip with water-soluble lubricant. (Optional: topical anesthetic to nostril)		
7.	Select nostril and position patient so head is slightly flexed against a pillow.		
8.	Insert the tube through nostril.		
9.	Have patient touch chin to chest (chin tuck position).		
10.	When tube reaches pharynx, have patient swallow (can provide water). Advance tube.		
11.	Stop placement if patient has persistent gag and cough, or there is resistance.		
12.	Clean nose skin and secure tube loosely to the nose.		
13.	Mark tube at the nares or lip.		
14.	Check tube placement (stomach, duodenum) per facility protocol.		

Student/Intern _____
(name) (Signature)

Evaluator _____
(name) (Signature)

Date: _____

References:

- Enteral Feeding Tube Insertion, gastric and duodenal.
<https://www.youtube.com/watch?v=s89pcR9TzFc>
- Vadivelu N, Kodumudi G, Leffert LR, et al. Evolving therapeutic roles of nasogastric tubes: current concepts in clinical practice. *Adv Ther* 2023;40:828-843.

Swallow Screen Video Resources

- This video has been prepared by Frederick DiCarlo, Ed.D., CCC-SLP, Associate Professor of Nova Southeastern University:
https://sharkmedia.nova.edu/media/DysphagiaA+An+Overview+%28Workshop+Pre-Briefing%29/1_vz70rden
- This video was developed and provided by Stephanie Petrosky of Nova Southeastern University:
https://sharkmedia.nova.edu/media/RD+%26+SLP+Scenario+9.2022/1_bu1j0evk

Additional Resources List

Blood Pressure

- AMA Measure accurately Staff competency for manual office blood pressure measurement. <https://www.ama-assn.org/system/files/2019-01/staff-competency-manual-bp-measurement.pdf>
- AMA BP measurement competency <https://www.ama-assn.org/system/files/2021-01/bp-measurement-competency.pdf>
- Coles S, Fisher L, Lin KW, et al. Blood pressure yargets in adults with hypertension: a clinical practice guideline from the AAFP. *Am Fam Physician* 2022; Dec;106(6):Online. PMID: 36521481. OPEN ACCESS

Point of Care

- Nichols JH, Alter D, Chen Y, Isbell TS, et al. AACC guidance document on management of point-of-care testing. *J Appl Lab Med* 2020; 5: 762–787. [doi:10.1093/jalm/jfaa059](https://doi.org/10.1093/jalm/jfaa059). OPEN ACCESS
- Park HD. Current status of clinical application of point-of-care testing. *Arch Pathol Lab Med* 2021;145:168–175. <https://doi.org/10.5858/arpa.2020-0112-RA> OPEN ACCESS
- Young MF, Raines K, Jameel F, et al. Non-invasive hemoglobin measurement devices require refinement to match diagnostic performance with their high level of usability and acceptability. *PLoS ONE*. 2021;16:1- 15. <https://pubmed.ncbi.nlm.nih.gov/34270591/> OPEN ACCESS

Pharmacotherapy

- Benson G, Hayes J, Bunkers-Lawson T, et al. Leveraging registered dietitian nutritionists and registered nurses in medication management to reduce therapeutic inertia. *Diabetes Spectr* 2022;35:491-503. <https://doi.org/10.2337/ds21-0104>
- Müller TD, Blüher M, Tschöp MH, DiMarchi RD. Anti- obesity drug discovery: advances and challenges. *Nat Rev* 2022;21:201-223. <https://doi.org/10.1038/s41573-021-00337-8> OPEN ACCESS
- Phillip M, Nimri R, Bergenstal RM, et al. Consensus recommendations for the use of automated insulin delivery technologies in clinical practice. *Endocr Rev* 2023;44: 254-280. doi.org/10.1210/endrev/bnac022 . OPEN ACCESS

- Topaloglu O, Sahin I. Pharmacological treatment of obesity in clinical practice. *Med Sci* 2021;10:651-657.
<https://www.medicinescience.org/article/2341> OPEN ACCESS

Enteral Tubes

- Bloom L, Seckel MA. Placement of nasogastric feeding tube and postinsertion care review. *AACN Adv Crit Care*. 2022;33:68-84.
doi: [10.4037/aacnacc2022306](https://doi.org/10.4037/aacnacc2022306)
- Brown BD, Hoffman SR, Johnson SJ, et al. Developing and maintaining an RDN-led bedside feeding tube placement program. *Nutr Clin Pract* 2019 Dec;34(6):858-868. <https://doi.org/10.1002/ncp.10411>
- Nielsen CA, Ward C, Zamora Z, Shuck-Connors C. A standardized approach to enteral medication administration. *Nursing* 2022;52:54-57.
- Powers J, Brown B, Lyman B, et al. Development of a competency model for placement and verification of nasogastric and nasoenteric feeding tubes for adult hospitalized patients. *Nutri Clin Pract* 2021; 36: 517-533.
- Reddick CA, Greaves JR, Flaherty JE, et al. Choosing wisely: enteral feeding tube selection, placement, and considerations before and beyond the procedure room. *Nutr Clin Pract* 2023;38:216-239.

Swallowing Screen

- Hagglund P, Karlsson P, Karlsson F. The Timed Water Swallow Test (TWST): Normative data on swallowing capacity for healthy people aged 60 years and older. *Int J Speech Lang Path* 2022;12:1-7.
doi: [10.1080/17549507.2022.2096925](https://doi.org/10.1080/17549507.2022.2096925) OPEN ACCESS
- Speyer R, Cordier R, Farneti D, et al. White paper by the European Society for Swallowing Disorders: screening and non-instrumental assessment for dysphagia in adults. *Dysphagia* 2022; 37:333–349.
OPEN ACCESS
- Tsang K, SY Lau E, Shazra M, et al. A new simple screening tool—4QT: can it identify those with swallowing problems? A pilot study. *Geriatrics* 2020; 5: 11-19. doi: [10.3390/geriatrics5010011](https://doi.org/10.3390/geriatrics5010011)
OPEN ACCESS
- Vermaire JA, Terhaard CHJ, Verdonk-de Leeuw IM, Raaijmakers CPJ, Speksnijder CM. Reliability of the 100 mL water swallow test in patients with head and neck cancer and healthy subjects. *Head & Neck* 2021;43:2468-2476. <https://doi.org/10.1002/hed.26723> OPEN ACCESS
- Werstuck MM, Steel C. Dysphagia identification and assessment in adults in primary care settings- a Canadian study of dietitians. *Can J Diet Pract Res* 2021;82:84-89. doi: [10.3148/cjdpr-2021-002](https://doi.org/10.3148/cjdpr-2021-002) OPEN ACCESS