MSc Physician Associate Studies: Procedural skills sign off sheet

Student Name…………………………………………….Student number……………………………………..

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| Procedure |  |  |
| Blood Pressure | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Perform 12 lead ECG | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake Respiratory Function Tests Including Peak Flow Measurement | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Commence and Manage Nebulised Therapy | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Commence and Manage Oxygen Therapy | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Instruct Patients in the Use of Devices for Inhaled Medication | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Insert a Naso-gastric Tube | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake a Nutritional Assessment | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake Appropriate Strapping and Splinting for Common Musculoskeletal Injuries | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Perform Fluroscein Dye Examination of the Cornea | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Obtain Swabs for High Vaginal Cultures | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake Male and Female Catherisation | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Perform a Urine Dipstick | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake Simple Skin Suturing | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake Simple Skin Suturing and be competent in the use of Local Anaesthetics | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Draw up and give Intramuscular, Subcutaneous, Intra-dermal and Intravenous Injections | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Take a Venous blood sample, using appropriate tubes for the required tests | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Obtain an Arterial Blood Gas (ABG) sample | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Undertake venous cannulation and set up an infusion and infusion pump | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Measure body temperature, pulse rate and monitor oxygen saturation transcutaneously | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |
| Take nose, throat and skin Swabs | Full Name:  Job Title:  Signature: | Date:  Name of healthcare institution: |

Supervisor 1:

Name:

Placement dates: From……………..To……

Signature: …………………………………….

Supervisor 2:

Name:

Placement dates: From……………..To……

Signature: …………………………………….

Supervisor 3:

Name:

Placement dates: From……………..To……

Signature: …………………………………….

Supervisor 4:

Name:

Placement dates: From……………..To……

Signature: …………………………………….

Supervisor 5:

Name:

Placement dates: From……………..To……

Signature: …………………………………….