



Competency/Skills Self-Appraisal: Patient Care Technician

Name _____

Date _____

Please check the column that applies to your skill level:
 3= Very Competent > 1yr Exp. 2=Some Help needed <1 yr. Exp. 1=Need Direction <6 months Exp. 0=Never Done

SKILLS	3	2	1	0	SKILLS	3	2	1	0
▪ BCLS Expires: _____					▪ Puree Diet				
▪ CNA Expires: _____					▪ Mechanical Soft				
▪ PCT Expires: _____					▪ Regular				
▪ Other Certification (specify): _____					▪ NPO				
▪ Computerized Charting System (specify) _____					▪ Aspiration Risk				
1. AGE SPECIFIC PRACTICE CRITERIA:					▪ Positioning for feeding				
▪ Newborn/Neonate (birth to 30 days)					▪ Proper feeding and swallowing technique				
▪ Infant (30 days to 1 year)					▪ AM, PM and HS Snacks				
▪ Toddler (1 -3 years)					▪ Water pitchers				
▪ Preschooler (3-5 years)					▪ Deliver dietary supplements				
▪ School Age Children (5-12 years)					▪ Record intake on I&O Chart				
▪ Adolescent (12-18 years)					▪ Use of adaptive equipment for feeding				
▪ Young Adults (18-39 years)					▪ Stocking/ordering of supplies for unit kitchen				
▪ Middle Adults (39-64 years)					5. ELIMINATION:				
▪ Geriatric (64 +)					Urinary				
2. EXPERIENCE WITH AGE GROUPS:					▪ Catheter care				
▪ Able to adapt care to incorporate normal growth and development					▪ Empty drainage bag				
▪ Able to adapt method and terminology of patient instructions to their age, comprehension and maturity level					▪ Obtain urine specimen – routine				
▪ Ensures safe environment reflecting specific needs of various age groups					▪ Catheter port				
3. EXPERIENCE IN SETTINGS:					▪ Mid stream				
▪ Acute/Inpatient Hospital					▪ Clean catch				
▪ Nursing Home					▪ 24 hour specimen collection				
▪ Assisted Living Facility					▪ C and S				
▪ Psychiatric Facility					▪ Catheters – External (Texas)				
▪ Clinic					▪ Catheters – Internal (Foley)				
▪ Physician Office					▪ Emptying of leg bag				
▪ Home Health					▪ Use of urinal				
▪ Private Duty Sitter					▪ Use of bedside commode				
4. NUTRITION:					▪ Bedpan – regular				
▪ Assist with menu selection					▪ Bedpan – fracture				
▪ Assist with tray set up					▪ Tube positioning				
▪ Assist with feeding					▪ Insertion of Foley catheter				
▪ Passing and pick up of trays					▪ D/C Foley				
▪ Diets – NAS					▪ Urine: Sugar, Acetone, and Specific Gravity				
▪ CCD					▪ Raised toilets				
▪ Low Cholesterol					Bowel				
▪ Clear Liquid					▪ Diapers				
▪ Full Liquid					▪ Weighing diapers for amounts				

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5. ELIMINATION CONTINUED:					▪ Oral/Mouth care –Brushing				
▪ Rectal tubes					▪ Swabbing				
▪ Enemas					▪ Dentures				
▪ Collecting stool sample					▪ Perineal Care				
▪ Testing stool for occult blood					▪ Catheter Care				
▪ Ostomy care					▪ Eyeglass care/Contact care				
▪ Empty Ostomy					▪ Hearing Aids				
▪ Bowel - Frequency					▪ Shaving				
▪ Consistency					▪ Sitz bath				
▪ Guaic					▪ Linen change – occupied				
▪ Ova and parasite					▪ Linen change – unoccupied				
▪ Recording output on I&O					▪ Shave and prep surgical site				
▪ Hygiene					▪ Putting on/Removal of TED Hose/Ace Wraps				
▪ Incontinence Care					▪ Application of eggcrate/geomat				
6. VITAL SIGNS:					▪ Post mortem care				
▪ Blood pressure – cuff/manual					8. ACTIVITY:				
▪ Blood pressure- Dynamap/Rover					▪ Ambulation – Contact guard				
▪ Pulse – apical					▪ One person assist				
▪ Pulse – radial					▪ Two person assist				
▪ Respirations					▪ Gait belt				
▪ Temperature – auxiliary					▪ Proper use of cane				
▪ Temperature - oral					▪ Proper use of walker				
▪ Temperature – rectal					▪ Proper use of crutches				
▪ Temperature – Tympanic/Digital/Electronic					▪ Proper use of Trapeze				
▪ Weight – bed scale					Transfers				
▪ Weight – standing scale					▪ Bed to chair				
▪ Weight – Chair scale					▪ Bed to wheelchair				
▪ Pediatric scale					▪ Chair to BSC				
▪ Hoyer lift scale					▪ Bed to stretcher				
▪ Use of pulse oximetry to measure O2 saturation					▪ Hoyer Lift				
▪ Assist with use of oxygen/nebulizer					▪ One person				
▪ Height by tape measure					▪ Two person				
▪ Height – pediatric tape measure					Exercise				
▪ Blood Sugar – daily QC					▪ Range of motion				
▪ Perform finger stick					▪ PT/OT Guidelines				
▪ Use of glucose strips					Positioning/Repositioning				
▪ Use of glucose monitor					▪ Schedule				
▪ Charting vital signs					▪ Body alignment				
7. BATHING AND PERSONAL CARE:					▪ Mealtime				
▪ Tub/Shower					▪ Equipment aids				
▪ Partial Bed bath					▪ Pillows				
▪ Complete Bed Bath					▪ Draw sheet				
▪ Back Rub					▪ Foot cradle				
▪ Hair care – comb					▪ Dangling				
▪ Hair care – dry wash					▪ Instruct patients to cough and deep breathe				

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9. DOCUMENTATION:					13. ABILITY TO ASSIST WITH:				
▪ Electronic Health Record					▪ Pap				
▪ I&O Sheet					▪ Colposcopy				
▪ Calorie Counts					▪ Colonoscopy				
▪ Nutrition ordering form					▪ Endoscopy				
▪ Growth chart					▪ IV Starts				
▪ Documentation of care checklist					▪ Casting				
10. INFECTION CONTROL:					▪ Rectal exam				
▪ Standard Precautions					▪ Lumbar puncture				
▪ Hand washing					14. OTHER SKILLS:				
▪ Gloves – application and removal					▪ Sputum specimen collection				
▪ Latex Allergy					▪ Set up and complete 12 lead EKG				
▪ Disposal of Infectious Material					▪ Set up and complete EEG				
▪ Clean Used Equipment					▪ Phlebotomy				
▪ Employee Illness					▪ Finger stick				
▪ Linen Handling – clean and soiled					▪ Visual acuity exams				
▪ Specimen collection					▪ NG tubes				
▪ Double Bag Isolation Technique					▪ Hemovac				
▪ Isolation/Reverse Isolation Precautions					▪ Jackson-Pratt				
▪ Airborne/contact/droplet precautions					▪ T-tubes				
11. SAFETY:					▪ Tube feedings				
▪ Chemotherapy precautions					▪ Use of incentive spirometer				
▪ Radiation precautions					▪ Decubitus care				
▪ Environmental hazards					▪ Application and Maintenance of ice packs				
▪ Bedrails/side rails/padded side rails					▪ Application and Maintenance of K-pads				
▪ Call lights					▪ IV site care				
▪ Airway maintenance					▪ Non sterile dressing changes				
▪ Bed alarm					15. GENERAL SKILLS:				
▪ Proper use of restraints – application, protocol					▪ Recognizing and reporting emergencies				
▪ Nurse call system					▪ Patient/Family teaching				
▪ Door alarms					▪ Set up post op/admission patient room				
▪ Behavioral health checks					▪ Patient rights				
▪ Patient falls					▪ Charting/Documentation/Consents/Care Plans				
▪ Incident reports					▪ Confidentiality of Information/HIPAA				
12. COMMUNICATION BARRIERS:					▪ DNR				
▪ Confusion					▪ Advance Directives				
▪ Disorientation					▪ JCAHO – National Patient Safety Guidelines				
▪ Hearing Impairment					▪ Ordering Supplies				
▪ Visual Impairment					▪ Lab work – ordering				
▪ Agitation					▪ Changes to report to RN (Abnormal VS, falls, behavior change, pain, skin problems, bleeding, dizziness, nausea, vomiting, etc)				
▪ Aphasia					▪ End of life care				
▪ Body Language – verbal/nonverbal					▪ Assist with admission, transfer and discharge of patient				
▪ Foreign Language					▪ Conducting home care visit				
▪ Cultural					▪ Use of transfer/lift devices				