

Supplement 1

Procedure 35: Assist to Bathroom	
Step	Rationale
1. Do initial steps.	
2. Walk with resident into bathroom.	
3. Assist resident lower garments and sit.	3. Allows resident to do as much as possible to help promote independence.
4. Give resident call light and toilet paper.	4. Ensures ability to communicate need for assistance.
5. If resident is able to be left alone, step out of bathroom and return when called.	5. Provides for resident's right to privacy.
6. Put on gloves (according to procedure 2).	6. Protects you from contamination by bodily fluids.
7. Assist resident to wipe area from front to back.	7. Prevents spread of pathogens toward meatus which may cause urinary tract infection.
8. Remove gloves (according to procedure 2).	
9. Assist resident to raise garments.	
10. Assist resident to wash hands.	10. Hand washing is the best way to prevent the spread of infection.
11. Walk with resident back to bed or chair.	
12. Do final steps.	

Upon successful completion of this procedure, update the student's Skills Performance Checklist. The standard form is available at <http://www.okcareertech.org/hcp/NurseAide.htm>

Source: Oklahoma State Department Of Health Course Standards To Teach The Oklahoma Long Term Care Nurse Aide Training And Competency Evaluation Program, 2008

Supplement 2

Procedure 36: Bedside Commode	
Step	Rationale
1. Do initial steps.	
2. Place commode next to bed on resident's unaffected side.	2. Helps stabilize commode and is the shortest distance for resident to turn.
3. Assist resident to commode.	
4. Give resident call light and toilet paper.	4. Ensures ability to communicate need for assistance.
5. If resident is able to be left alone, step behind curtain and return when called.	5. Provides resident's right to privacy.
6. Put on gloves (according to procedure 2).	6. Protects you from contamination by bodily fluids.
7. Assist resident wipe from front to back.	7. Prevents spread of pathogens toward meatus which may cause urinary tract infection.
8. Help resident into bed.	
9. Remove and cover pan and take to bathroom.	9. Pan should be covered to prevent the spread of infection.
10. Check urine and/or feces for color, odor, amount & character and report unusual findings to nurse.	10. Changes may be first sign of medical problem. By alerting the nurse you ensure that the resident receives attention quickly.
11. Dispose of urine and/or feces, sanitize pan and return pan according to current nursing practices.	11. Facilities have different methods of disposal and sanitation. You need to carry out the policies of your facility.
12. Remove gloves (according to procedure 2).	
13. Assist resident to wash hands.	13. Hand washing is the best way to prevent the spread of infection.
14. Do final steps.	

Upon successful completion of this procedure, update the student's Skills Performance Checklist. The standard form is available at <http://www.okcareertech.org/hcp/NurseAide.htm>

Source: Oklahoma State Department Of Health Course Standards To Teach The Oklahoma Long Term Care Nurse Aide Training And Competency Evaluation Program, 2008

Supplement 3

Procedure 37: Bedpan/Fracture Pan	
Step	Rationale
1. Do initial steps.	
2. Lower head of bed.	2. When bed is flat, resident can be moved without working against gravity.
3. Put on gloves (according to procedure 2).	3. Protects you from contamination by bodily fluids.
4. Turn resident away from you.	
5. Place bedpan or fracture pan according to manufacturer's directions.	5. Equipment used incorrectly may cause discomfort and injury to resident.
6. Gently roll resident back onto pan and check for correct placement.	6. Prevents linen from being soiled.
7. Cover resident.	7. Provides for resident's privacy.
8. Raise head of bed to sitting position.	8. Increases pressure on bladder to help with elimination.
9. Give resident call light and toilet paper.	9. Ensures ability to communicate need for assistance.
10. Leave resident and return when called.	10. Provides for resident's privacy.
11. Lower head of bed.	11. Places resident in proper position to remove pan.
12. Press bedpan flat on bed and turn resident.	12. Prevents bedpan from spilling.
13. Wipe resident from front to back.	13. Prevents spread of pathogens toward meatus which may cause urinary tract infection.
14. Provide perineal care if necessary (according to procedure 34).	
15. Check urine and/or feces for color, odor, amount & character and report unusual findings to nurse.	15. Changes may be first sign of medical problem. By alerting the nurse you ensure that the resident receives attention quickly.

Procedure 37: Bedpan/Fracture Pan (Continued)

Step	Rationale
16. Cover bedpan.	16. Pan should be covered to prevent the spread of infection.
17. Dispose of urine and/or feces, sanitize pan and return pan according to current nursing practices.	17. Facilities have different methods of disposal and sanitation. You need to carry out the policies of your facility.
18. Remove gloves (according to procedure 2).	
19. Assist resident to wash hands.	19. Hand washing is the best way to prevent the spread of infection.
20. Do final steps.	

Upon successful completion of this procedure, update the student's Skills Performance Checklist. The standard form is available at <http://www.okcareertech.org/hcp/NurseAide.htm>

Source: *Oklahoma State Department Of Health Course Standards To Teach The Oklahoma Long Term Care Nurse Aide Training And Competency Evaluation Program, 2008*

Supplement 4

Procedure 38: Urinal	
Step	Rationale
1. Do initial steps.	
2. Raise head of bed to sitting position.	2. Increases gravity on top of bladder to help urination.
3. Put on gloves (according to procedure 2).	3. Protects you from contamination by bodily fluids.
4. Offer urinal to resident or place urinal between his legs and insert penis into opening.	4. Allows resident to do as much as possible to help promote independence.
5. Cover resident.	5. Maintains resident's right to privacy.
6. Give resident call light and toilet paper.	6. Ensures the ability to communicate need for assistance.
7. Leave resident and return when called.	7. Provides for resident's privacy.
8. Remove and cover urinal.	8. Urinal should be covered to prevent the spread of infection.
9. Take urinal to bathroom, check urine for color, odor, amount & character and report unusual findings to nurse.	9. Changes may be first sign of medical problem. By alerting the nurse you ensure that the resident receives attention quickly.
10. Dispose of urine, sanitize and return urinal according to current nursing practices.	10. Facilities have different methods of disposal and sanitation. You need to carry out the policies of your facility.
11. Remove gloves (according to procedure 2).	
12. Assist resident to wash hands.	12. Hand washing is the best way to prevent the spread of infection.
13. Do final steps.	

Upon successful completion of this procedure, update the student's Skills Performance Checklist. The standard form is available at <http://www.okcareertech.org/hcp/NurseAide.htm>

Source: Oklahoma State Department Of Health Course Standards To Teach The Oklahoma Long Term Care Nurse Aide Training And Competency Evaluation Program, 2008

Supplement 5

Procedure 39: Empty Urinary Drainage Bag	
Step	Rationale
1. Do initial steps.	
2. Put on gloves (according to procedure 2).	2. Protects you from contamination by bodily fluids.
3. Place paper towel on floor below bag and place graduate on paper towel.	3. Reduces contamination of graduate and protects floor from drips.
4. Detach spout and point it into center of graduate without letting tube touch sides.	4. Prevents contamination of tubing.
5. Unclamp spout and drain urine.	
6. Clamp spout.	
7. Replace spout in holder.	
8. Check urine for color, odor, amount & character and report unusual findings to nurse.	8. Changes may be first sign of medical problem. By alerting the nurse you ensure that the resident receives attention quickly.
9. Measure and accurately record amount of urine per facility policy.	9. Accuracy is necessary because decisions regarding resident's care may be based on your report. What you write is a legal record of what you did. If you don't document it, legally it didn't happen.
10. Dispose of urine, sanitize and return graduate according to current nursing practices.	10. Facilities have different methods of disposal and sanitation. You need to carry out the policies of your facility.
11. Remove gloves (according to procedure 2).	
12. Do final steps.	

Upon successful completion of this procedure, update the student's Skills Performance Checklist. The standard form is available at <http://www.okcareertech.org/hcp/NurseAide.htm>

Source: Oklahoma State Department Of Health Course Standards To Teach The Oklahoma Long Term Care Nurse Aide Training And Competency Evaluation Program, 2008

