



## Operating Room Scrub Competency Self Assessment

### Directions

Please circle a value for each question to provide us and the interested facilities with an assessment of your clinical experience. These values confirm your strengths within your specialty and assist the facility in the selection process of the healthcare professional.

| Experience   |
|--|
| 0 Not Applicable                                   |
| 1 No Experience                                    |
| 2 Some Experience (Require Assistance)             |
| 3 Intermittent Experience (May Require Assistance) |
| 4 Experienced (Performs without Assistance)        |
| 5 Very Experienced (Able to Teach/Supervise)       |

**Print Name**

**Last 4 Digits of SS#**

**Date**

| General Skills  | Experience |   |   |   |   |   |
|---|------------|---|---|---|---|---|
| Awareness of HCAHPS   | 0          | 1 | 2 | 3 | 4 | 5 |
| Cardiac arrest/adult CPR  | 0          | 1 | 2 | 3 | 4 | 5 |
| Cardiac arrest/infant-child CPR                                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Advanced directives   | 0          | 1 | 2 | 3 | 4 | 5 |
| Patient/family teaching   | 0          | 1 | 2 | 3 | 4 | 5 |
| Lift/transfer devices   | 0          | 1 | 2 | 3 | 4 | 5 |
| Specialty beds  | 0          | 1 | 2 | 3 | 4 | 5 |
| Restrictive devices (restraints)                                  | 0          | 1 | 2 | 3 | 4 | 5 |
| End of life care/palliative care                                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Automated Medication Dispensing System, Pyxis, Omnicell, or other | 0          | 1 | 2 | 3 | 4 | 5 |
| Bar coding for medication administration                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Diabetic management in the OR                                     | 0          | 1 | 2 | 3 | 4 | 5 |
| National Patient Safety Goals                                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Accurate patient identification                                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Effective communication   | 0          | 1 | 2 | 3 | 4 | 5 |
| Time out protocol   | 0          | 1 | 2 | 3 | 4 | 5 |
| Interpretation & communication of lab values                      | 0          | 1 | 2 | 3 | 4 | 5 |
| Medication administration   | 0          | 1 | 2 | 3 | 4 | 5 |
| Labeling (medications & specimens)                                | 0          | 1 | 2 | 3 | 4 | 5 |
| Medication reconciliation   | 0          | 1 | 2 | 3 | 4 | 5 |
| Anticoagulation therapy   | 0          | 1 | 2 | 3 | 4 | 5 |
| Monitoring conscious sedation                                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Sedation/Anesthesia   | 0          | 1 | 2 | 3 | 4 | 5 |
| Infection control   | 0          | 1 | 2 | 3 | 4 | 5 |
| Universal precautions   | 0          | 1 | 2 | 3 | 4 | 5 |
| Isolation   | 0          | 1 | 2 | 3 | 4 | 5 |
| Minimize risk for falls   | 0          | 1 | 2 | 3 | 4 | 5 |
| Prevention of pressure ulcers                                     | 0          | 1 | 2 | 3 | 4 | 5 |



Initials \_\_\_\_\_

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| Scrub: General Surgery                           | Experience |   |   |   |   |   |
|--|------------|---|---|---|---|---|
| Abdominal perineal resection                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Adrenalectomy bariatric surgery (gastric bypass) | 0          | 1 | 2 | 3 | 4 | 5 |
| Bowel resection                                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Cholecystectomy/cholangiogram                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Colostomy/ileostomy                              | 0          | 1 | 2 | 3 | 4 | 5 |
| Gastrectomy                                      | 0          | 1 | 2 | 3 | 4 | 5 |
| Hemicolectomy                                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Hepatic resection                                | 0          | 1 | 2 | 3 | 4 | 5 |
| Herniorrhaphy-femoral/inguinal                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Hiatal herniorrhaphy                             | 0          | 1 | 2 | 3 | 4 | 5 |
| Pancreatectomy                                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Organ procurement                                | 0          | 1 | 2 | 3 | 4 | 5 |
| Radical mastectomy                               | 0          | 1 | 2 | 3 | 4 | 5 |
| Saphenous vein ligation/stripping                | 0          | 1 | 2 | 3 | 4 | 5 |
| Splenectomy                                      | 0          | 1 | 2 | 3 | 4 | 5 |
| Thyroidectomy                                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Tracheostomy                                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Vagotomy   | 0          | 1 | 2 | 3 | 4 | 5 |
| Familiarity with pediatric procedures            | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Gynecology        | Experience |   |   |   |   |   |
|--------------------------|------------|---|---|---|---|---|
| Caesarean section        | 0          | 1 | 2 | 3 | 4 | 5 |
| Dilation & curettage     | 0          | 1 | 2 | 3 | 4 | 5 |
| Hysterectomy - vaginal   | 0          | 1 | 2 | 3 | 4 | 5 |
| Hysterectomy - abdominal | 0          | 1 | 2 | 3 | 4 | 5 |
| Radium insertion         | 0          | 1 | 2 | 3 | 4 | 5 |
| Salpingo-oophorectomy    | 0          | 1 | 2 | 3 | 4 | 5 |
| Shirodkar procedure      | 0          | 1 | 2 | 3 | 4 | 5 |
| Termination of pregnancy | 0          | 1 | 2 | 3 | 4 | 5 |
| Tubal ligation           | 0          | 1 | 2 | 3 | 4 | 5 |
| Vaginectomy              | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Endoscopic Procedures | Experience |   |   |   |   |   |
|------------------------------|------------|---|---|---|---|---|
| Bronchoscopy                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Colonoscopy                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Culdoscopy                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Cystoscopy                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Esophagoscopy                | 0          | 1 | 2 | 3 | 4 | 5 |
| Gastroscopy                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Hysteroscopy                 | 0          | 1 | 2 | 3 | 4 | 5 |



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| Scrub: Laparoscopic Procedures | Experience |   |   |   |   |   |
|--------------------------------|------------|---|---|---|---|---|
| Appendectomy                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Cholecystectomy                | 0          | 1 | 2 | 3 | 4 | 5 |
| Colon resection                | 0          | 1 | 2 | 3 | 4 | 5 |
| Gastric bypass                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Hernia repair                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Nephrectomy                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Prostatectomy                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Sinus surgery                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Salpingo-oophorectomy          | 0          | 1 | 2 | 3 | 4 | 5 |
| Splenectomy                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Tubal ligation                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Vaginal hysterectomy           | 0          | 1 | 2 | 3 | 4 | 5 |
| Vitrectomy                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Laryngoscopy                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Mediastinoscopy                | 0          | 1 | 2 | 3 | 4 | 5 |
| Pelviscopy                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Sigmoidoscopy                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Thoracoscopy                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Whipple                        | 0          | 1 | 2 | 3 | 4 | 5 |
| Nissen fundoplication          | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Urology                       | Experience |   |   |   |   |   |
|--------------------------------------|------------|---|---|---|---|---|
| Circumcision                         | 0          | 1 | 2 | 3 | 4 | 5 |
| Cystoscopy/ureteroscopy              | 0          | 1 | 2 | 3 | 4 | 5 |
| Cystectomy                           | 0          | 1 | 2 | 3 | 4 | 5 |
| Hypospadias repair                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Implants                             | 0          | 1 | 2 | 3 | 4 | 5 |
| Lithotripsy                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Nephrectomy                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Orchiectomy                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Prostatectomy                        | 0          | 1 | 2 | 3 | 4 | 5 |
| Ureterolithotomy                     | 0          | 1 | 2 | 3 | 4 | 5 |
| TURP                                 | 0          | 1 | 2 | 3 | 4 | 5 |
| PVP - Photo Vaporization of Prostate | 0          | 1 | 2 | 3 | 4 | 5 |
| Vasectomy                            | 0          | 1 | 2 | 3 | 4 | 5 |



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| Scrub: Orthopedic                         | Experience |   |   |   |   |   |
|---|------------|---|---|---|---|---|
| Achilles tendon repair                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Amputation                                | 0          | 1 | 2 | 3 | 4 | 5 |
| Arthroscopy/arthrotomy                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Closed pinning & reduction of extremities | 0          | 1 | 2 | 3 | 4 | 5 |
| External compression devices              | 0          | 1 | 2 | 3 | 4 | 5 |
| Hip compression nails & lag screws        | 0          | 1 | 2 | 3 | 4 | 5 |
| Total joint replacement - knee            | 0          | 1 | 2 | 3 | 4 | 5 |
| Total joint replacement - hip             | 0          | 1 | 2 | 3 | 4 | 5 |
| Total joint replacement - shoulder        | 0          | 1 | 2 | 3 | 4 | 5 |
| Spica cast                                | 0          | 1 | 2 | 3 | 4 | 5 |
| ORIF - shoulder, hip, humerus             | 0          | 1 | 2 | 3 | 4 | 5 |
| Repair of dislocation                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Patellectomy                              | 0          | 1 | 2 | 3 | 4 | 5 |
| Tendon implants & reanastomosis           | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Neurology                 | Experience |   |   |   |   |   |
|----------------------------------|------------|---|---|---|---|---|
| Kyphoplasty                      | 0          | 1 | 2 | 3 | 4 | 5 |
| A-V malformation                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Laparoscopic spine procedures    | 0          | 1 | 2 | 3 | 4 | 5 |
| Burr holes for subdural hematoma | 0          | 1 | 2 | 3 | 4 | 5 |
| Carotid ligation                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Cervical sympathectomy           | 0          | 1 | 2 | 3 | 4 | 5 |
| Cranioplasty                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Craniotomy                       | 0          | 1 | 2 | 3 | 4 | 5 |
| Disectomy/laminectomy            | 0          | 1 | 2 | 3 | 4 | 5 |
| Halo traction application        | 0          | 1 | 2 | 3 | 4 | 5 |
| Insertion of nerve stimulator    | 0          | 1 | 2 | 3 | 4 | 5 |
| Myelomeningocele repair          | 0          | 1 | 2 | 3 | 4 | 5 |
| Shunt procedure VP/VA/LP         | 0          | 1 | 2 | 3 | 4 | 5 |
| Spinal fusions                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Ventriculostomy                  | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Plastics     | Experience |   |   |   |   |   |
|---------------------|------------|---|---|---|---|---|
| Abdominal lipectomy | 0          | 1 | 2 | 3 | 4 | 5 |
| Blepharoplasty      | 0          | 1 | 2 | 3 | 4 | 5 |
| Face lift           | 0          | 1 | 2 | 3 | 4 | 5 |
| Mammoplasty         | 0          | 1 | 2 | 3 | 4 | 5 |
| Augmentation        | 0          | 1 | 2 | 3 | 4 | 5 |



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Initials \_\_\_\_\_

| Scrub: Plastics - cont. | Experience |   |   |   |   |   |
|-------------------------|------------|---|---|---|---|---|
| Reduction               | 0          | 1 | 2 | 3 | 4 | 5 |
| Liposuction             | 0          | 1 | 2 | 3 | 4 | 5 |
| Otoplasty               | 0          | 1 | 2 | 3 | 4 | 5 |
| Scar revisions          | 0          | 1 | 2 | 3 | 4 | 5 |
| Skin grafting           | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Ophthalmology            | Experience |   |   |   |   |   |
|---------------------------------|------------|---|---|---|---|---|
| Cataract extraction             | 0          | 1 | 2 | 3 | 4 | 5 |
| IOL implants                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Corneal transplant              | 0          | 1 | 2 | 3 | 4 | 5 |
| Orbital implant                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Enucleation                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Repair orbital blowout fracture | 0          | 1 | 2 | 3 | 4 | 5 |
| Repair of retinal detachment    | 0          | 1 | 2 | 3 | 4 | 5 |
| Scleral buckle                  | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Ear, Nose & Throat     | Experience |   |   |   |   |   |
|-------------------------------|------------|---|---|---|---|---|
| Caldwell-luc                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Cleft lip/palate repair       | 0          | 1 | 2 | 3 | 4 | 5 |
| Laryngectomy                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Radical neck                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Tonsillectomy & adenoidectomy | 0          | 1 | 2 | 3 | 4 | 5 |
| Mandibulectomy                | 0          | 1 | 2 | 3 | 4 | 5 |
| Mastoidectomy                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Rhinoplasty/septoplasty       | 0          | 1 | 2 | 3 | 4 | 5 |
| Sinusotomy                    | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Vascular                       | Experience |   |   |   |   |   |
|---------------------------------------|------------|---|---|---|---|---|
| Angiography                           | 0          | 1 | 2 | 3 | 4 | 5 |
| A-V access graft                      | 0          | 1 | 2 | 3 | 4 | 5 |
| Aortic aneurysm: abdominal            | 0          | 1 | 2 | 3 | 4 | 5 |
| Peripheral vascular bypass procedures | 0          | 1 | 2 | 3 | 4 | 5 |
| Endarterectomy: carotid               | 0          | 1 | 2 | 3 | 4 | 5 |
| Thrombectomy                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Embolectomy                           | 0          | 1 | 2 | 3 | 4 | 5 |
| Vena cava ligation                    | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Endovascular                      | Experience |   |   |   |   |   |
|--|------------|---|---|---|---|---|
| Endoluminal AAA                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Carotid revascularization endarterectomy | 0          | 1 | 2 | 3 | 4 | 5 |
| Cerebral aneurysm repair                 | 0          | 1 | 2 | 3 | 4 | 5 |



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| Scrub: Thoracic / Cardiovascular               | Experience |   |   |   |   |   |
|--|------------|---|---|---|---|---|
| Aortic femoral bypass graft                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Femoral popliteal bypass                       | 0          | 1 | 2 | 3 | 4 | 5 |
| Pacemaker implantation/explanation             | 0          | 1 | 2 | 3 | 4 | 5 |
| Care of patients with pacemaker                | 0          | 1 | 2 | 3 | 4 | 5 |
| Care of patient with intra-aortic balloon pump | 0          | 1 | 2 | 3 | 4 | 5 |
| Septal defects, ASV, VSD                       | 0          | 1 | 2 | 3 | 4 | 5 |
| Coronary Artery Bypass & Graft (CABG) on pump  | 0          | 1 | 2 | 3 | 4 | 5 |
| Coronary Artery Bypass & Graft (CABG) off pump | 0          | 1 | 2 | 3 | 4 | 5 |
| Valve replacement/repair                       | 0          | 1 | 2 | 3 | 4 | 5 |
| Aortic aneurysm                                | 0          | 1 | 2 | 3 | 4 | 5 |
| Thoracotomy/lobectomy                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Endoscopic vein harvesting                     | 0          | 1 | 2 | 3 | 4 | 5 |
| Maze procedure                                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Thoracic aneurysm                              | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Transplant | Experience |   |   |   |   |   |
|-------------------|------------|---|---|---|---|---|
| Bone              | 0          | 1 | 2 | 3 | 4 | 5 |
| Corneal           | 0          | 1 | 2 | 3 | 4 | 5 |
| Harvesting        | 0          | 1 | 2 | 3 | 4 | 5 |
| Heart/lung        | 0          | 1 | 2 | 3 | 4 | 5 |
| Kidney            | 0          | 1 | 2 | 3 | 4 | 5 |
| Liver             | 0          | 1 | 2 | 3 | 4 | 5 |
| Multi organ       | 0          | 1 | 2 | 3 | 4 | 5 |
| Pancreas          | 0          | 1 | 2 | 3 | 4 | 5 |
| Skin              | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Trauma           | Experience |   |   |   |   |   |
|-------------------------|------------|---|---|---|---|---|
| Burns                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Gunshot/stab wounds     | 0          | 1 | 2 | 3 | 4 | 5 |
| Motor vehicle accidents | 0          | 1 | 2 | 3 | 4 | 5 |
| Traumatic amputations   | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Equipment                              | Experience |   |   |   |   |   |
|---|------------|---|---|---|---|---|
| Argon beam coagulator                         | 0          | 1 | 2 | 3 | 4 | 5 |
| Camera/video systems                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Cell saver                                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Cidex soak                                    | 0          | 1 | 2 | 3 | 4 | 5 |
| Cryo-ophthalmic unit                          | 0          | 1 | 2 | 3 | 4 | 5 |
| Cavitron Ultrasonic Surgical Aspirator (CUSA) | 0          | 1 | 2 | 3 | 4 | 5 |



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| Scrub: Equipment - cont.              | Experience |   |   |   |   |   |
|---------------------------------------|------------|---|---|---|---|---|
| Hypo/hyperthermia unit                | 0          | 1 | 2 | 3 | 4 | 5 |
| Drill and saws                        | 0          | 1 | 2 | 3 | 4 | 5 |
| Electrosurgical unit                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Fiber optic luminator                 | 0          | 1 | 2 | 3 | 4 | 5 |
| Cavitron                              | 0          | 1 | 2 | 3 | 4 | 5 |
| Autoclave                             | 0          | 1 | 2 | 3 | 4 | 5 |
| Fracture tables                       | 0          | 1 | 2 | 3 | 4 | 5 |
| Harmonic scalpel                      | 0          | 1 | 2 | 3 | 4 | 5 |
| Ligasure                              | 0          | 1 | 2 | 3 | 4 | 5 |
| Stapling devices                      | 0          | 1 | 2 | 3 | 4 | 5 |
| Mesh graft/dermatone                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Microscopes                           | 0          | 1 | 2 | 3 | 4 | 5 |
| Nitrogen tank                         | 0          | 1 | 2 | 3 | 4 | 5 |
| Pneumatic tourniquet                  | 0          | 1 | 2 | 3 | 4 | 5 |
| Stealth                               | 0          | 1 | 2 | 3 | 4 | 5 |
| Steris unit                           | 0          | 1 | 2 | 3 | 4 | 5 |
| Pulsevac irrigation                   | 0          | 1 | 2 | 3 | 4 | 5 |
| Autotransfusion system                | 0          | 1 | 2 | 3 | 4 | 5 |
| Laser equipment                       | 0          | 1 | 2 | 3 | 4 | 5 |
| Care of scopes & fiberoptic equipment | 0          | 1 | 2 | 3 | 4 | 5 |
| Venodyne robotics (Da Vinci)          | 0          | 1 | 2 | 3 | 4 | 5 |

| Scrub: Age Specific Competencies | Experience |   |   |   |   |   |
|----------------------------------|------------|---|---|---|---|---|
| Newborn/neonate (birth-30 days)  | 0          | 1 | 2 | 3 | 4 | 5 |
| Infant (31 days-1 year)          | 0          | 1 | 2 | 3 | 4 | 5 |
| Toddler (2-3 years)              | 0          | 1 | 2 | 3 | 4 | 5 |
| Preschool (ages 4-5 years)       | 0          | 1 | 2 | 3 | 4 | 5 |
| School age (ages 6-12 years)     | 0          | 1 | 2 | 3 | 4 | 5 |
| Adolescents (ages 13-21 years)   | 0          | 1 | 2 | 3 | 4 | 5 |
| Young adult (ages 22-39 years)   | 0          | 1 | 2 | 3 | 4 | 5 |
| Adults (ages 40-64 years)        | 0          | 1 | 2 | 3 | 4 | 5 |
| Older adult (ages 65-79 years)   | 0          | 1 | 2 | 3 | 4 | 5 |
| Elderly (80+ years)              | 0          | 1 | 2 | 3 | 4 | 5 |



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**Initials** \_\_\_\_\_

| Please list any Additional Skills: |    |
|------------------------------------|----|
| 1.                                 | 2. |
| 3.                                 | 4. |
| Additional training:               |    |
| 1.                                 | 2. |
| 3.                                 | 4. |
| Additional equipment:              |    |
| 1.                                 | 2. |
| 3.                                 | 4. |

The information on this and all preceding pages is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date