A: Hand Hygiene and Vital Signs Checklists

Checklist for Hand Washing

1. Remove rings/watches and push sleeves above wrists.
2. Turn on the water and adjust the flow so that the water is warm. Wet your hands thoroughly, keeping your hands and forearms lower than your elbows. Avoid splashing water on your uniform.
3. Apply a palm-sized amount of hand soap.
4. Perform hand hygiene using plenty of lather and friction for at least 15 seconds:
   ◦ Rub hands palm to palm
   ◦ Back of right and left hand (fingers interlaced)
   ◦ Palm to palm with fingers interlaced
   ◦ Rotational rubbing of left and right thumbs
   ◦ Rub your fingertips against palm of opposite hand
   ◦ Rub your wrists
   ◦ Repeat sequence at least 2 times
   ◦ Keep your fingertips pointing downward throughout
5. Clean under your fingernails with disposable nail cleaner *(if applicable).*
6. Wash for a minimum of 20 seconds.
7. Keep your hands and forearms lower than your elbows during the entire washing.
8. Rinse hands with water, keeping fingertips pointing down so water runs off fingertips. Do not shake water from your hands.
9. Do not lean against the sink or touch the inside of the sink during the hand washing process.
10. Dry your hands thoroughly from fingers to wrists with a paper towel or air dryer.
11. Dispose of paper towel(s).
12. Use a new paper towel to turn off the water and dispose of the paper towel.

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**Checklist for Using Hand Sanitizer**

1. Remove rings/watches and push sleeves above wrists.
2. Apply enough product into the palm of one hand to cover hands thoroughly.
3. Rub hands together, covering all surfaces of hands and fingers with antiseptic until alcohol is dry (a minimum of 30 seconds):
   - Rub hands palm to palm
   - Back of right and left hand (fingers interlaced)
   - Palm to palm with fingers interlaced
   - Rotational rubbing of left and right thumbs
   - Rub your fingertips against the palm of the opposite hand
   - Rub your wrists

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**Checklist for Vital Signs**

(See “Blood Pressure” chapter for Blood Pressure Checklist)

1. Knock, enter the room, greet the patient, and provide for privacy.
2. Introduce yourself, your role, the purpose of your visit, and an estimate of the time it will take.
3. Perform hand hygiene and clean the stethoscope before approaching the patient.
4. Ask the patient their name and date of birth for the first identifier and verify wristband while the patient is stating information. Then use one of the following for the second identifier:
   - Scan wristband
   - Compare name/DOB to MAR
   - Ask staff to verify patient (LTC setting)
   - Compare picture on MAR to patient
5. Explain the procedure to the patient; ask if he/she has any questions.
6. Obtain temperature using correct technique in Celsius. Inform instructor if temperature is out of range. Normal Range: 98.6 F or 37 C.
7. Obtain accurate pulse using radial artery. Inform instructor if pulse is out of range. Normal range for a pulse in an adult: 60-100 with regular rhythm.
9. Obtain oxygen saturation reading (SpO2) using a pulse oximeter. Inform instructor if SpO2 is out of range. Normal range for SpO2: 94-100%.
10. Ensure five safety measures before leaving the room:
   ◦ CALL LIGHT: Within reach
   ◦ BED: Low and locked (in lowest position and brakes on)
   ◦ SIDE RAILS: Secured
   ◦ TABLE: Within reach
   ◦ ROOM: Risk-free for falls (scan room and clear any obstacles)

11. Perform hand hygiene and clean the stethoscope.

12. Follow the agency policy for following up on vital signs outside of normal range.