

# Procedural Competency Evaluation

STUDENT:

DATE:

CHEST PHYSIOTHERAPY		PERFORMANCE LEVEL	PERFORMANCE RATING
<b>Evaluator:</b> <input type="checkbox"/> Peer <input type="checkbox"/> Instructor	<b>Setting:</b> <input type="checkbox"/> Lab <input type="checkbox"/> Clinical Simulation		
<b>Equipment Utilized:</b>	<b>Conditions (Describe):</b>		
<b>Performance Level:</b> S or ✓ = Satisfactory, no errors of omission or commission U = Unsatisfactory error of omission or commission NA = Not applicable			
<b>Performance Rating:</b> 5 <b>Independent:</b> Near-flawless performance; minimal errors; able to perform without supervision; seeks out new learning; shows initiative; A = 4.7–5.0 average 4 <b>Minimally Supervised:</b> Few errors, able to self-correct; seeks guidance when appropriate; B = 3.7–4.65 3 <b>Competent:</b> Minimal required level; no critical errors; able to correct with coaching; meets expectations; safe; C = 3.0–3.65 2 <b>Marginal:</b> Below average; critical errors or problem areas noted; would benefit from remediation; D = 2.0–2.99 1 <b>Dependent:</b> Poor; unacceptable performance; unsafe; gross inaccuracies; potentially harmful; F = < 2.0 <i>Two or more errors of commission or omission of mandatory or essential performance elements will terminate the procedure, and require additional practice and/or remediation and reevaluation. Student is responsible for obtaining additional evaluation forms as needed from the Director of Clinical Education (DCE).</i>			
<b>EQUIPMENT AND PATIENT PREPARATION</b>			
1. Common Performance Elements Steps 1–8 (Refer to Appendix B)			
<b>ASSESSMENT AND IMPLEMENTATION</b>			
2. Common Performance Elements Steps 9 and 10 (Refer to Appendix B)			
3. Determines the lobes and segments to be drained by assessing CXR, progress notes, and breath sounds			
4. Verifies that no relative or absolute contraindications exist; modifies the procedure accordingly			
5. Coordinates therapy prior to meals and tube feedings or 1 to 1½ hours after meals			
6. Correctly positions the patient for segments to be drained, 3–15 minutes as tolerated			
A. Positions self to always face the patient			
B. Performs drainage beginning with the dependent lung segments first (age appropriate)			
7. Performs percussion in the correct locations for 3–5 minutes as tolerated			
A. Uses appropriate hand position, adjuncts such as palm cups or mechanical percussors			
B. Uses appropriate light cover			
C. Produces appropriate sound			
D. Does not percuss over bone, incisions, jewelry, buttons, or below ribs			
8. Performs expiratory vibration with pressure appropriate to patient tolerance			
9. Assesses adequate ventilation and oxygenation during the procedure; adjusts oxygen therapy as needed during therapy; checks SpO <sub>2</sub> , pulse, respirations, and blood pressure periodically throughout therapy			
10. Encourages and assists the patient to cough in an upright position			
NOTE: The patient should not be allowed to cough in a Trendelenburg position.			
11. Repositions the patient prior to departure			
12. Collects and examines sputum			
<b>FOLLOW-UP</b>			
13. Evaluates and recommends alternative procedures as applicable (PEP therapy, chest oscillating vest)			
14. Common Performance Elements Steps 11–16 (Refer to Appendix B)			

**SIGNATURES**

Student:

Evaluator:

Date: