



CHECKLIST

(for completion by Practice Nurses ONLY)

Practice Nurse Name.....

Please can you complete the checklist below highlighting the areas within practice nursing that you are clinically able to undertake. This checklist will then ensure that Team24 correctly places you within GP practices based on your experience.

Basic Tasks

- 4 Layer Bandaging
- Basic Dressings
- Blood Glucose Readings
- Blood Pressure Readings
- Ear Syringing
- Height & Weight
- Intramuscular Injections
- Leg Ulcer Dressings
- Nebulising
- Subcutaneous Injections
- Urinalysis
- Venepuncture

Computer Systems

- Emis LV
- Emis PCS
- INR Star
- System1
- Torex
- Vision

Extra Tasks

- Asthma Monitoring
- Baby Vaccinations
- Diabetic Monitoring
- Knowledge of the GMS contract and indicators
- IHD Monitoring
- Liquid Cytology / **Number** _____
- Mental Health Monitoring
- Prescriber
- Smoking Cessation
- Spirometry
- Stroke Monitoring
- Travel vaccinations and advice
- Weight Management

Other

.....
.....

I confirm that this is an accurate reflection of my practice nursing skills.

Signed.....

Date.....