

Employed Student Nurse (ESN) PRACTICE ACTIVITIES



THE ESN IS RESPONSIBLE FOR AND/OR CAN PERFORM THE FOLLOWING SKILLS APPROPRIATE WITH THEIR LEVEL OF EDUCATION AND TRAINING

ESNs can perform only those practice activities for which competence has been achieved through their nursing program, and then only if authorized by the RN/RPN providing the supervision.

COMPREHENSIVE ASSESSMENT

- Patient data collection
- Admission record/CAGE
- Pre-op preparation
- Post-op assessment
- Pain Assessment

NEUROLOGICAL

- Neuro-Vital sign assessments

RESPIRATORY

- RR & SaO2 monitoring
- Basic Oxygen Therapy
- Care of Tracheostomy (>2weeks)
- Tracheostomy Suctioning
- Sputum specimen collection

CARDIOVASCULAR

- Vital Signs: Temp, HR, B/P
- Fluid balance assessment
- Peripheral IV (PIV) care & maintenance:
 - Assess sites as per policy
 - Prime PIV Line, change IV bag and tubing
 - Program & troubleshoot IV pump as ordered/prn
 - Saline lock flush maintenance
 - Convert a running IV to a saline lock
 - Convert a saline lock to a running IV
 - Discontinue IV or saline lock, as ordered
- Central Venous Catheter: change IV bags **ONLY**

GASTROINTESTINAL

- Nasogastric Tubes: Insertion (**non-Entriplex ONLY**), assessment, care and maintenance, removal
- Administer Enteral Feeds via NG & PEG tubes
- Blood sugar testing: Glucometer
- Ostomy Care
- Bowel Protocol: Enema, Disimpaction
- Stool & urine specimen collection

GENITOURINARY

- Bladder Assessment
- Bladder Scanner
- Catheterization (male/female)
- Condom Drainage
- CBI Management
- Urine specimen collection

MUSCULOSKELETAL

- Neuro Vascular signs
- Simple dressings (including staple and suture removal)
- Wound Irrigation
- Surgical drain management & removal

MEDICATION ADMINISTRATION

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|------------------------|---------------------|
| • Oral, sublingual | • SC & SC butterfly |
| • Eye, ear, nose drops | • IM |
| • Inhalation | • Secondary IV |
| • Ointments | • Nasogastric tube |
| • Vaginal/Rectal | • Feeding tubes |
| • Transdermal patch | • |

Anticoagulants, Narcotics and Insulin must be prepared under supervision and co-signed by RN/RPN at all times.



THE ESN IS NOT RESPONSIBLE FOR AND CANNOT PERFORM THE FOLLOWING SKILLS

Unit Leadership and the RN/RPN providing supervision have the ability to further restrict skills performed by ESNs.

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| <ul style="list-style-type: none"> • Report to more than (2) RNs/RPNs • Insert Entriplex nasogastric tubes • CVCs & PICC line care & maintenance • Total Parenteral Nutrition (TPN) • Check, administer, monitor or discontinue blood &/or blood products • Patient Controlled Analgesia, CAD or Epidural pumps • Administer IV Push Medications | <ul style="list-style-type: none"> • Initiate IV insertion • Carry narcotic keys or perform narcotic count • Take, process or transcribe any MD/NP orders • Process or check the nightly MARs or charts • Immunization administration • Constant 1:1 Observation • Commence Nurse Initiated Activities (NIAs) • Be assigned patients where LPN is most responsible • Supervise other students and/or employees |
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