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## If It Wasn't Documented, It Wasn't Done: Implementing Nursing Skills Documentation

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# If It Wasn't Documented, It Wasn't Done: Implementing Nursing Skills Documentation

Christina Lawver, MSN, RN and Shauna Keil, MSN, RN-BC



## Introduction



Students carry out nursing skills in the lab setting. Documentation reinforces the execution and comprehension of the skill performed. Nurses are required to document skills performed in the clinical setting (Mollart et al., 2020). Therefore, it is essential to have students' chart upon completing a nursing skill as a portion of their performance. Students completed charting on paper and have progressed to electronic charting in google docs.

## Objectives



- Nursing educators will identify the benefits of adding charting to a skills course
- Nursing educators will be able to implement this strategy in their own skills or lab course

## Conclusion



Students find charting beneficial and enhance the realism of performing the skills on a mannequin in the lab setting (Feldthouse et al., 2022; Mollart et al., 2020). Documentation is indispensable for nurses in practice. Therefore, beginning documentation early in a fundamental skills course will allow students to practice documentation (Jenkins et al., 2018). Resulting in an optimized educational experience that will promote and prepare future nurses for safe and modern clinical practice (Feldthouse et al., 2022; Jenkins et al., 2018).

## Implications



The benefits of implementing an AEHR in the academic setting have shown a correlation with students increasing their capability and confidence in navigating documentation practices. Additionally, an improved documentation accuracy with more opportunities for recurrent use (Jenkins et al., 2018; Mollart et al., 2020). Nurse educators who develop their own AEHR could choose from several types of platforms to utilize including google sheets. Some persuasive advantages of faculty creating their AEHR are that it allows for changes to be made swiftly, tailored to fit specific needs, and the ability to create more user-friendly documentation with feedback (Mollart et al., 2020). Another incentive is that it is a free resource for enhancing nursing skill laboratory courses. Alternatively, nursing programs could purchase premade AEHR software (Jenkins et al., 2018).

## Limitations



Common limitations for implementing an academic electronic health record (AEHR) into a nursing program include cost, time, and training for faculty and students (Jenkins et al., 2018; Mollart et al., 2020). Recommendation for future work on the effectiveness and accuracy of skill documentation.

Urinary Catheter	
Insertion	<input type="checkbox"/> Foley Catheter <input type="checkbox"/> 3-Way Foley <input type="checkbox"/> Coude <input type="checkbox"/> Straight Catheter
Date of Insertion/New Device	
Time of Insertion/New Device	
Urinary Catheter Size (Fr)	_____ (0-30 fr)
Catheter Balloon Amount (mLs)	_____ (mLs)
Catheter Insertion	<input type="checkbox"/> Successful <input type="checkbox"/> Not Successful <input type="checkbox"/> With Difficulty <input type="checkbox"/> Without Difficulty
Urinary Catheter Inserted By:	
Catheter Insertion Technique Used:	<input type="checkbox"/> Sterile <input type="checkbox"/> Clean
Patency	<input type="checkbox"/> Patent/Draining <input type="checkbox"/> Irrigated <input type="checkbox"/> Continuous Irrigation
Urinary Catheter Traction	<input type="checkbox"/> None <input type="checkbox"/> Leg Traction <input type="checkbox"/> Velco Strap <input type="checkbox"/> Statlock
Urinary Catheter Care	<input type="checkbox"/> Meatal Care <input type="checkbox"/> Peri Care <input type="checkbox"/> Secured to leg
Urine Characteristics	<input type="checkbox"/> Blood Clots, Large <input type="checkbox"/> Cloudy <input type="checkbox"/> Mucous Threads
	<input type="checkbox"/> Blood Clots, Small <input type="checkbox"/> Hematuria <input type="checkbox"/> Sediment
	<input type="checkbox"/> Clear <input type="checkbox"/> Purulent <input type="checkbox"/> Stones/Calculi
Urine Color	<input type="checkbox"/> Amber, light <input type="checkbox"/> Green <input type="checkbox"/> Red brown <input type="checkbox"/> Tea colored
	<input type="checkbox"/> Amber, dark <input type="checkbox"/> Orange <input type="checkbox"/> Red, bright <input type="checkbox"/> Yellow, bright
	<input type="checkbox"/> Blue <input type="checkbox"/> Pale <input type="checkbox"/> Red, dark <input type="checkbox"/> Yellow, brown
	<input type="checkbox"/> Brown <input type="checkbox"/> Pink <input type="checkbox"/> Straw <input type="checkbox"/> Yellow, dark
Urine Odor	<input type="checkbox"/> None <input type="checkbox"/> Ammonia <input type="checkbox"/> Fecal <input type="checkbox"/> Foul <input type="checkbox"/> Sweet <input type="checkbox"/> Strong
Irrigation Solution	<input type="checkbox"/> Normal Saline <input type="checkbox"/> Sterile water <input type="checkbox"/> Other: _____
Indwelling Catheter Care Protocol Followed	<input type="checkbox"/> Bag hung below bladder <input type="checkbox"/> Tubing free of kinks <input type="checkbox"/> Closed system intact
	<input type="checkbox"/> Catheter properly secured <input type="checkbox"/> Tubing clipped to bedsheet
Reason for Continuing Indwelling Catheter	<input type="checkbox"/> Epidural catheter <input type="checkbox"/> Prolonged immobilization <input type="checkbox"/> Continue criteria not met
	<input type="checkbox"/> End of life care <input type="checkbox"/> Stage 3/4 pressure injury <input type="checkbox"/> Decision to DC catheter
	<input type="checkbox"/> Surgical procedure <input type="checkbox"/> Acute urinary retention <input type="checkbox"/> Measure accurate output in ICU
	<input type="checkbox"/> Unstable spine <input type="checkbox"/> Invasive procedure
	<input type="checkbox"/> Pelvic fractures <input type="checkbox"/> Assist healing wound <input type="checkbox"/> Other continuation reason
Date Catheter Removed	
Time Catheter Removed	
Catheter Intact After Removal	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date Due to Void	
Time Due to Void	

## References

Feldthouse, D. M., Jacques, D. P., Fenelon, L., Robertiello, G., Pasklinsky, N., Fletcher, J., Groom, L. L., Doty, G. R., & Squires, A. P. (2022). Implementing an academic electronic health record in nursing education. *Journal of Informatics Nursing*, 7(2), 37-42. <https://www.proquest.com/scholarly-journals/implementing-academic-electronic-health-record/docview/2699768964/se-2>

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