

Temperature, Pulse, Respirations & Blood Pressure Check-Off Sheet

Name: _____

Pass/Fail

Date: _____

Before beginning any procedure you should do the following three things (verbal):

1. Wash hands
2. Assemble, gather, clean equipment
3. Explain procedure to the person

ORAL TEMPERATURE	Yes	No
The above named individual successfully demonstrated how to take an oral temperature using the equipment located in this residential setting.	<input type="checkbox"/>	<input type="checkbox"/>
PULSE (RADIAL)	Yes	No
The above named individual successfully demonstrated for 60 seconds how to take a pulse.	<input type="checkbox"/>	<input type="checkbox"/>
RESPIRATIONS	Yes	No
The above named individual successfully demonstrated for 60 seconds how to count a person's respirations.	<input type="checkbox"/>	<input type="checkbox"/>
BLOOD PRESSURE	Yes	No
The above named individual successfully demonstrated how to take a blood pressure using the equipment located in this residential setting.	<input type="checkbox"/>	<input type="checkbox"/>

After completing any procedure you should do the following three things (verbal):

1. Record the vital sign.
2. Wash hands.
3. Report any abnormalities.

Normal Ranges:

Temperature (oral): 96-99

Pulse: 50-100 per minute

Respirations: 12 – 28 per minute

Blood Pressure: Systolic (top number) should be less than 130

Diastolic (bottom number) should be less than 85

Trainer Signature: _____

Date: _____

