

**UNIVERSITY OF SOUTH ALABAMA**  
**COLLEGE OF ALLIED HEALTH PROFESSIONS**  
**DEPARTMENT OF CARDIORESPIRATORY CARE**  
**Clinical Competency Checklist**  
**Single-Breath Nitrogen Elimination Test (Optional)**

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Rating Scale: 0 = inappropriate, incorrect, or omitted  
1 = needs additional study and practice  
2 = completed appropriately and correct  
N/A = not applicable

<u>ITEM</u>	<u>RATING</u>
1. Performs calibration.	_____
2. Provides clear instructions to subject.	_____
3. Proficient in use of equipment.	_____
4. Able to recognize a good test. (ATS Standards)	_____
5. Test Subject (2 pts. for patient, 1 pt. for fellow student or instructor.)	_____

Total = \_\_\_\_\_ out of 10      Score = \_\_\_\_\_ pass \_\_\_\_\_ fail

Instructor's Signature: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_ Credential: \_\_\_\_\_  
(Please print)

Student's Signature: \_\_\_\_\_

Comments \_\_\_\_\_