



OCCUPATIONAL THERAPIST SKILLS CHECKLIST

Date: _____

Full Name: _____

INSTRUCTIONS

Please provide accurate answers so we can correctly match your abilities to our client job requirements. Please check the level of experience and expertise you have in each skill category, using the following scale:

#1 = Familiar with procedure but will usually or almost always require some assistance.

#2 = Competent and familiar with procedure: I can perform this procedure with excellence, usually without assistance.

#3 = Very competent: I have at least 12 months experience and can perform this procedure with excellence and without assistance.

NOTE: Leave blank any procedures which you have **no experience, training or low competence.**

SKILLS:	1	2	3
ADULT			
Orthopedic:			
Fractures			
Total Joint Replacements			
Osteoarthritis-Frozen Shoulder			
Hand Injuries			
Post Operative Care			
Amputations			
Neurologic:			
Stroke Rehabilitation			
Cognitive Disorders			
Head Trauma			
Spinal Cord Injury			
Neuromuscular Diseases			
Adaptive Equipment-Wheelchair			
Prosthetics / Orthotics:			
Upper Extremity Prosthetics			
Procedures / Treatments:			
Splinting - Wrist			
Splinting - Hand			
Splinting - Elbow			
Functional - Dynamic Splinting			
Adaptive Equipment			
Joint Mobilization			
Myofacial Release			
Soft Tissue Manipulation			
Iontophoresis			
TENS			
Hydrotherapy - Whirlpool			
Sterilization Techniques			
Cryotherapy			
Wound Management			

SKILLS:	1	2	3
Debridement			
Ultrasound			
Phonophoresis			
Cognitive Techniques			
Vision Therapy			
Neurodevelopmental Techniques			
Adaptive Equipment Assessment			
Adaptive Equipment Training			
Feeding Techniques			
Exercise Programs			
Postural Education			
Home Safety Evaluation			
Community Re-entry			
Group Treatment			
Other			
Cardiac Rehab			
ICU Procedures			
CCU Procedures			
SICU Procedures			
Burn Management			
Work Hardening - Work Site Eval			
Functional Capacity Eval			
Transfers			
Gait Training			
Muscle Energy Techniques			
Activities of Daily Living			
GERIATRIC			
Orthopedic:			
Fractures			
Total Joint Replacements			
Osteoarthritis-Frozen Shoulder			
Hand Injuries			

SKILLS:	1	2	3
Post Operative Care			
Amputations			
Neurologic:			
Stroke Rehabilitation			
Cognitive Disorders			
Head Trauma			
Spinal Cord Injury			
Neuromuscular Diseases			
Adaptive Equipment-Wheelchair			
Alzheimer's / Dementia			
Prosthetics / Orthotics:			
Upper Extremity Prosthetics			
Procedures / Treatments:			
Splinting - Wrist			
Splinting - Hand			
Resting Splints			
Functional - Dynamic Splinting			
Transfers			
Neurodevelopment Testing (NDT)			
Activities of Daily Living			
Gait Training			
Ultrasound			
TENS			
Hydrotherapy - Whirlpool			
Sterilization Techniques			
Massage			
Wound Management			
Ultrasound			
Cognitive Rehab			
Vision Therapy			
Feeding Techniques			
Home Safety Eval			
Adaptive Equipment Assessment			
Adaptive Equipment Training			
Community Re-entry			
Skilled Nursing Documentation:			
Medicare A			
Medicare B			
State Healthcare			
Other			
Cardiac Rehab			
ICU Procedures			
CCU Procedures			
SICU Procedures			
Burn Management			
Exercise Programs			
Geriatric Psychiatric			
Diabetes			

SKILLS:	1	2	3
Cardiovascular Disease			
Pacemakers			
PEDIATRIC			
Orthopedic			
Fractures			
Birth Defects			
Developmental Diseases of Bone			
Neurologic			
Developmental Disability Sequencing Test			
Congenital Defects			
Neurodevelopmental Techniques			
Head Injury			
Spinal Cord Injury			
Sensory Integrative Deficits			
Neurodevelopmental Deficits			
Visual Perceptual Disorders			
Prosthetics / Orthotics			
Upper Extremity Prosthetics			
Lower Extremity Prosthetics			
Other			
ICU Procedures			
CCU Procedures			
SICU Procedures			
Procedures / Treatment Techniques			
Vision Therapy			
Sensory Integration Techniques			
Splinting - Wrist			
Splinting - Hand			
Splinting - Lower Extremity			
Resting Splints			
Dynamic Splints			
Feeding			
Adaptive Equipment Assessment			
Adaptive Equipment Training			
Postural Balance Training			
Other			
Muscular Dystrophy			
Cerebral Palsy			
Cystic Fibrosis			
Burn Care			
Spina Bifida			
Isolation Precautions			
Neonatal Intensive Care Unit			
Trauma			

AGE	
Newborn (birth-30 days)	
Infant (30 days - 1 year)	
Toddler (1 - 3 years)	
Preschooler (3 - 5 years)	
School Age (5 - 12 years)	
Adolescents (12 - 18 years)	
Young Adults (18 - 39 years)	
Middle Adults (39 - 64 years)	
Older Adults (64+ years)	

Certification:

I hereby certify all statements and claims as true and that any misrepresentation of the facts on this skills checklist is sufficient cause for dismissal at any time without prior notice even if I have been already employed.

Full Name (Print): _____

Signature: _____
Retyped name acts as signature, if submitting form by email

Reviewed by _____ : Date: _____