

# First Year Nursing Student Tutor Request Form



Tutoring Center  
Cell Phone: 503.791.7494  
Email: gtichenor@clatsopcc.edu

Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Trio Program Member:  Yes  No

What kind of tutoring are you looking for? (check all that apply)

## Course Content and Concepts

Please list all course numbers and names you would like tutoring for:

## Skills

- |   |   |
|---|---|
| <input type="checkbox"/> Principles of Infection control & PPE                      | <input type="checkbox"/> Medication calculation   |
| <input type="checkbox"/> Handwashing  | <input type="checkbox"/> Medication administration: Topical (skin, ear, eye, rectal), Oral, Inhaled |
| <input type="checkbox"/> Isolation technique  | <input type="checkbox"/> Intravenous Therapy and Regulation – Peripheral                            |
| <input type="checkbox"/> Body mechanics   | <input type="checkbox"/> Peripheral Intermittent IV Therapy via Secondary Infusion (piggyback)      |
| <input type="checkbox"/> Client/environment safety, bed making                      | <input type="checkbox"/> Peripheral saline lock flush   |
| <input type="checkbox"/> Vital signs & SpO2 (pulse oximetry)                        | <input type="checkbox"/> NGT insertion and maintenance  |
| <input type="checkbox"/> Height & Weight  | <input type="checkbox"/> Postpartum/newborn assessment  |
| <input type="checkbox"/> Basic 'head to toe' physical assessment                    | <input type="checkbox"/> Sterile Technique  |
| <input type="checkbox"/> Health History interviewing (across the lifespan)          | <input type="checkbox"/> Perioperative Care – Pre/Post  |
| <input type="checkbox"/> Client hygiene   | <input type="checkbox"/> Suture, Staple, & Clip removal   |
| <input type="checkbox"/> Client Skin Care & Pressure Ulcer Prevention               | <input type="checkbox"/> Wound Care   |
| <input type="checkbox"/> Safe patient handling: positioning, transfers & mobilizing | <input type="checkbox"/> Drains: JP, Hemovac, Penrose, T-tube                                       |
| <input type="checkbox"/> Client range of motion                                     | <input type="checkbox"/> Urinary Catheter insertion, maintenance and removal                        |
| <input type="checkbox"/> Client's ADLs, mobility, fall risk                         | <input type="checkbox"/> Bladder Scan   |
| <input type="checkbox"/> Nutrition and elimination procedures, I&O                  | <input type="checkbox"/> Enteral Feedings   |
| <input type="checkbox"/> Pain Assessment & Management: Acute & Chronic              | <input type="checkbox"/> Enteral Medication Administration  |
| <input type="checkbox"/> Nursing Documentation                                      | <input type="checkbox"/> Enterostomal Care  |
| <input type="checkbox"/> Capillary Blood Glucose Measurement                        | <input type="checkbox"/> Telemetry: Basic rhythms   |
| <input type="checkbox"/> Diabetic Care (skin, foot, oral, illness, eyes)            | <input type="checkbox"/> Specimen Collection  |
| <input type="checkbox"/> Intramuscular Injection sites                              |   |
| <input type="checkbox"/> Subcutaneous and Intra dermal Injections sites             |   |
| <input type="checkbox"/> Insulin preparation/injection                              |   |

Please share all of the times you are available to meet with a tutor. The more times you list the greater the opportunity you have for placement with a Tutor.

Tutoring is available in all subjects for which we can find a Tutor. Writing assistance is provided by the Writing Lab. Go to [clatsopcc.edu-->library-->library services-->writing center](http://clatsopcc.edu/library/library-services/writing-center) for tutor hours and contact information. Math assistance is available from the Math Assistance Center.

**Attendance Policy for Students Receiving Tutoring:**

1. Attend all scheduled appointments.
2. Arrive on time and come prepared to be an active learner.
3. If you have to cancel an appointment, it is your responsibility to contact both your Tutor and the Tutor Coordinator at least 24 hours in advance.

**Loss of Tutoring Privileges May Result From:**

1. Not showing up for your first tutoring session.
2. Having two missed appointments in a row.
3. Also, not contacting your Tutor & Tutor Coordinator 24 hours in advance counts as a missed appointment.

Please share what you would like to accomplish with a tutor:

By filling out this sheet and signing below, you agree to attend all scheduled tutoring sessions as well as follow the Tutoring Center's attendance and expectation policies, which will be outlined by your Tutor during your first tutoring session. You also agree to share personal information such as name, email, and phone number with your Tutor.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE REMEMBER TO CHECK YOUR EMAIL FOR A TUTORING CONFIRMATION!