**NURSE DELEGATION:**

**INSTRUCTIONS FOR GENERAL NURSING TASK**

General delegated tasks are those tasks that the Nurse identifies as general in nature and once learned can be performed for all resident. The CAREGIVER to whom the task is delegated must demonstrate the ability to perform the task as instructed by the Nurse. By signing this delegation form, the CAREGIVER being delegated agrees to perform the task as taught. The Nurse will review the CAREGIVER performance annually or as needed to assure continued competency in performance of the task.

**General task: Measuring weight**

**Supplies Needed**

* Standing scale, sitting scale or wheelchair scale
* Disposable, non-sterile gloves
* Impermeable plastic trash bag
* Hand-washing solution

**Procedures/steps to follow to perform the task**

1. Explain the procedure to the resident
2. Put on disposable gloves
3. Use the same scale on the same flooring each time resident is weighed. Avoid weighing on a rug, as this can cause inaccurate weight.
4. If resident is able to stand easily, as standing scale can be used; if not, use either sitting scale or wheelchair scale.
5. If using sitting scale assist resident to sit on scale and position in a manner that resident sits easily in chair with feet on foot rest. If using, wheelchair scale, be sure that wheelchair is sitting entirely on the scale
6. Read resident weight
7. Provide resident comfort measures
8. Remove disposable gloves and discard in plastic trash bag
9. Wash hands with hand-washing liquid
10. Document weight in MAR or vital sign flow sheet (Be sure to subtract weight of wheelchair from total weight if using a wheelchair scale)

**Outcomes**

Weight will be accurately measured

**Potential risks/side effects and appropriate actions to deal with them (include what to observe for and report, what to do, and whom to contact**

* Inaccurate weights can lead to inappropriate interventions. If weight is more than 5 pounds different from last weight, re-weight the resident to assure that reading is accurate before documenting/reporting
* Report to Nurse if weight changes beyond the parameters listed on MAR