OSCE checklist for perineal care

An OSCE checklist for perineal care covers consent, privacy and a chaperone if wanted, washing from front to back with a clean area of cloth for each stroke, safe foreskin care, drying, checking the skin and any wound, and recording what you saw.

OSCE checklist for perineal care: steps to practise

1. Clean your hands, introduce yourself, confirm the patient's name and date of birth against the wristband, explain what you will do and gain consent. Encourage the patient to wash themselves if they are able.
2. Offer a chaperone, and a carer of the same sex where possible, as this is intimate care.
3. Check for allergies to soap, cleanser or latex. Close the curtains and collect warm water, a mild cleanser, disposable cloths, towels, a waterproof sheet, a clean pad, gloves and an apron.
4. Check the water temperature, clean your hands and put on gloves and an apron. Place the waterproof sheet under the patient.
5. Position the patient on their back with knees bent, or on their side, and keep the rest of the body covered.
6. For a woman, separate the labia and wash from front to back, using a clean cloth or a clean part of the cloth for each stroke.
7. For a man, gently retract the foreskin only as far as it goes easily, never forcing it. Wash the tip from the urethral opening outwards, then the shaft and scrotum. Always return the foreskin to its normal position straight away to prevent swelling.
8. If a catheter is present, clean around the urethral opening and along the tubing away from the body, without pulling on it.
9. Rinse with clean warm water and pat dry, because moisture causes skin damage. Then wash and dry the anal area last, from front to back.
10. Check for redness, swelling, discharge, sores, bleeding or a wound, and note the state of any stitches.
11. Apply a clean pad if needed, remove the waterproof sheet and make the patient comfortable.
12. Dispose of waste safely, remove gloves and apron, clean your hands and record the findings.

13. Report broken skin, unusual discharge, heavy bleeding, a wound that looks infected, or a foreskin that will not return, to the nurse in charge at once.

What candidates commonly forget

- Washing back to front
- Reusing the same part of the cloth
- Forcing the foreskin or not returning it
- Not offering a chaperone
- Not checking for wounds or discharge
- Not protecting privacy

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Postnatal ward: morning care for Imogen Hart. Back to the nursing foundation OSCE page: nursing foundation OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for perineal care?

Explain and get consent, offer a chaperone, protect privacy, wash front to back with a clean area of cloth for each stroke, return the foreskin, pat dry, check the skin, apply a clean pad and record and report the findings.

Why wash front to back?

This moves germs away from the urethra and lowers the risk of urinary infection.

Is perineal care the same after childbirth?

The steps are similar, but you also check the stitches, the amount of bleeding and pain, and report heavy bleeding or signs of infection at once.

Sources

- NMC: standards of proficiency for registered nurses
- NICE CG139: infection prevention and control

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.