Covenant School of Nursing

IM8 Clinical Experience- Daily Events Record

Student: **Michelle Leal**   UNIT: **MS**   Preceptor: **Cindy Tye**

Instructions:	Highlights: Example (written)	Date/Initial =Student = Preceptor
I. Student's responsibility: - This form must be presented to the preceptor on the first day of clinical. - Write the highlights & Skills observed / performed every each clinical time. - Discuss with the preceptor & write the areas to improve before the end of the shift. **2. Preceptor's responsibility:** - Must give feedback on the areas to improve & instruct the student to write on the allotted space. **3.** Student & preceptor must sign their Initial every each clinical day.	1. Team work-Rapid response 2. learning opportunities –Staph infection 3. Post op admission Areas to improve: 1. Assessment 2. Anticipation of patient needs 3. working on skills on Blood draw Skills observed & performed: 1. NGT insertion 2. Orthostatic vital sign 3. Trach suctioning	Date: 10/23/2018 E.Hamilton Student A. Santos Preceptor
Highlights: 1. Safety huddle 2. Teamwork 3. Discharging patients Areas to improve: 1. Documentation 2. Assessment 3. Admission process Skills observed & performed: 1. First IV insertion 2. Blood Transfusion 3. Interprofessional communication	Date/Initial =Student =Preceptor Date: 3/22/2024 m. Leal Student C.Tye Preceptor	**Highlights:** 1. TPCN for one patient 2. Battered woman report 3. Recognizing early s/s of infection Areas to improve: 1. Delegating tasks 2. Hand off report 3. medication teaching Skills observed & performed: 1. Second IV insertion 2. Discharge teaching 3. medication administration	Date/Initial =Student =Preceptor Date: 3/23/2024 m. Leal Student CTye Preceptor
Highlights: 1. Central line removal 2. Post op care 3. Third IV insertion Areas to improve: 1. anticipation of doc orders 2. ~~Daily~~ work routine 3. asking admission questions Skills observed & performed: 1. D/C central line 2. swallow evaluation 3. NGT med admin	Date/Initial =Student =Preceptor Date: 3/28/2024 m. Leal Student CTye Preceptor	**Highlights:** 1. Two new admissions 2. Transfer pt to lbk 3. holter monitor Areas to improve: 1. Confidence 2. Time management 3. Prioritization Skills observed & performed: 1. Increased ↓BG 2. emptied JP drain 3. assessed Stage 1 pressure injury	Date/Initial =Student =Preceptor Date: 3/29/2024 m. Leal Student CTye Preceptor

Highlights / Areas to improve / Skills observed & performed	Date/Initial =Student =Preceptor	Highlights / Areas to improve / Skills observed & performed	Date/Initial =Student =Preceptor
Highlights: 1. Contact ISO for Lice 2. control pain post op 3. Replaced potassium **Areas to improve:** 1. NGT Suction canister 2. Huntington disease 3. family education **Skills observed & performed:** 1. Inserted Foley 2. 4th IV insertion 3. morphine & Toradol administration	Date: 3/30/2024 m. Leal Student (signature) Preceptor	**Highlights:** 1. Pt transfer from ICU 2. Contact ISO - RSV/pneumonia 3. post op - Cholecystectomy **Areas to improve:** 1. organization 2. family education 3. ordering redraw labs **Skills observed & performed:** 1. IC green med admin 2. Pressure injury care 3. 5th IV insertion	Date: 4/4/2024 m. Leal Student (signature) Preceptor
Highlights: 1. 2. 3. **Areas to improve:** 1. 2. 3. **Skills observed & performed:** 1. 2. 3.	Date: Student Preceptor	**Highlights:** 1. 2. 3. **Areas to improve:** 1. 2. 3. **Skills observed & performed:** 1. 2. 3.	Date: Student Preceptor
Highlights: 1. 2. 3. **Areas to improve:** 1. 2. 3. **Skills observed & performed:** 1. 2. 3.	Date: Student Preceptor	**Highlights:** 1. 2. 3. **Areas to improve:** 1. 2. 3. **Skills observed & performed:** 1. 2. 3.	Date: Student Preceptor

Purpose: This Inventory of required nursing skills is to c following:
Orientation, Midterm & Finals

Instructions: Pre-Assessment = Mark an X on each skills that describes your experience
Preceptorship- Clinical time = Write the date & preceptor's initial that describes your experience.

Medical List of	Surgical Skills	Student's skills Pre assessment			Preceptorship clinical time		
		No exp.	CPE	Clinical	Supervised	Independently	
1. Assessment							
a. Vital signs				✓		✓	3/22/24 ♂
b. Neurological				✓	✓		3/23/24 ♂
c. Respiratory				✓	✓		3/23/24 ♂
d. Cardiovascular				✓	✓		3/23/24 ♂
e. Gasrtointestinal				✓	✓		3/23/24 ♂
F. Neuro-vascular				✓	✓		3/23/24 ♂
2. Documentation							
a. Assessment				✓	✓		3/23/24 ♂
b. Vital signs				✓		✓	3/22/24 ♂
c. Admission		✓			✓		3/28/24 ♂
d. Discharge				✓	✓		3/22/24 ♂
e. Transfer				✓	✓		3/29/24 ♂
3. Collaborative communication							
a. SBAReporting				✓		✓	3/23/24 ♂
b. Case Management				✓	✓		3/22/24 ♂
c. Physician				✓	✓		3/22/24 ♂
d. Pharmacy				✓		✓	3/22/24 ♂
e. Diagnostic				✓	✓		3/22/24 ♂
f. respiratory				✓	✓		3/28/24 ♂
g. Physical Therapist				✓	✓		3/22/24 ♂
h. wound nurse				✓	✓		3/23/24 ♂
4. Medication							
a. Per Orem -PO				✓	✓		3/23/24 ♂
b. IVPB-Pump				✓	✓		3/23/24 ♂
c. IV push-CVL/Perip				✓	✓		3/23/24 ♂
d. Topical				✓			
e. tube feeding				✓			
f. Intramuscular				✓	✓		3/23/24 ♂
g. Subcutaneous				✓	✓		3/23/24 ♂
h. Intradermal			✓				
i. Nasal spray				✓			
j. Rectal suppository				✓	✓		4/4/24 ♂
5. Isolation Precat'n							
a. Contact				✓		✓	3/28/24 ♂
b. Airborne				✓			
c. Neutropenic				✓			
d. Positive pressure				✓			

5. Oxygen Mangement								3/22/24 ct
a. Nasal Cannula				✓		✓		
b,Venturi				✓				
c.High flow				✓				
d.CPAP/BIPAP				✓				
6.. Others								

Student Name ; Michelle Leal
Student signature; Michelle Leal
Preceptor: Cindy Tye
Unit: MS
Date :

Start
3/22/24

Covenant
School of Nursing
Name Michelle Leal

Record of Precepted Clinical Experiences

Date	Total Time Ex.(0645-1915)	Location	Preceptor's Signature
3/22/24	0639-1901	MS	Cindy Ty RN
3/23/24	0643-1916	MS	Ty RN
3/28/24	0647-1923	MS	Cindy Ty RN
3/29/24	0645-1918	MS	Cindy Ty RN
3/30/24	0642-1924	MS	Cindy Ty RN
4/4/24	0641-1913	MS	Cindy Ty RN

Preceptor's Signature _____ Cindy Ty _____

Preceptor's Signature _____