School of Nursing

Student Name Lanie Abers

Record of Precepted Clinical Experiences

Date	Exact Time Ex.(0645-1915)	Location	Preceptor's Print & Signature
3/28/25	0632 - 1914	NICU	Shylah McCravens
3/31/25	0638-1916	NICU	Shylah McCravens
4/3/25	0638-1914	NICU	Shylah McCravens
4/7/25	0640-1926	NICU	/Shylah McCravens
4/10/25	0639 - 1910	NICU	Lizeth Venzor / Lizeth Venzor
4/17/25	0641 - 1912	NICU	Moriah Brooks / Moriah Brooks
4/21/25	0640-1948	NICU	Moriah Brooks / Moriah Brooks
4/24	0641-1923	NICU	/Shylah McCravens
4/28	0642 - 1921	NICU	/Shylah McCravens
5/1	0640-1845	NICU	/Shylah McCravens

REMINDER: Do not pre-fill out, Document your actual time after each shift & have your preceptor sign. The time prior shift starting time & the time after does not count extra. 0645-1915 is simply a 12 hour shift.

Preceptor's Signature PRN

Preceptor's Signature

Highlights:

Covenant School of Nursing

IM8 Clinical Experience- Daily Events Record

Student: Lanie Abers **UNIT:** NICU **Preceptor:** Shylah

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:	Date/Initial =Student =Preceptor	Highlights:	Date/Initial =Student =Preceptor
1. SMDF Lipid change - learning 2. Team work - rapid response 3. New admit process Areas to improve: 1. Documentation 2. Assessment on baby 3. recognizing cues Skills observed & performed: 1. Observed IV start 2. observed intubation 3. Blood transfusion 4. oral care	Date: 3/28 L. Abers Student SM Preceptor	1. feeding 2. learning - HIE 3. procedures Areas to improve: 1. Documentation 2. injections on baby 3. Time management Skills observed & performed: 1. IM injection 2. clave change 3. Hanging meds	Date: 3/31 L. Abers Student SM Preceptor

Highlights:	Date/Initial =Student =Preceptor	Highlights:	Date/Initial =Student =Preceptor
1. Discharge process 2. Breastfeeding education 3. learning to care for 2 patients Areas to improve: 1. clustering care/time 2. educating patients/family 3. recognizing cues Skills observed & performed: 1. total care of 2 patients 2. documenting 3. car seat check	Date: 4/3 L. Abers Student SM Preceptor	1. learning - sepsis 2. High acuity pt 3. jaundice baby Areas to improve: 1. clave change 2. managing multiple drips 3. confidence Skills observed & performed: 1. oral care 2. clave change 3. hanging IV drips + platelets 4. Titration	Date: 4/7 L. Abers Student SM Preceptor

Highlights:	Date/Initial =Student =Preceptor	Highlights:	Date/Initial =Student =Preceptor
1. learning opportunity - TC bili 2. isolette patient 3. OG tube patient **Areas to Improve:** 1. breastfeeding education 2. swaddle baths 3. Admission process **Skills observed & performed:** 1. OG gavage feed 2. OG med 3. blood glucose	Date: 4/10 L. Abers Student LV Preceptor	1. Small baby admit 2. UVC/UAC 3. admission documenting **Areas to Improve:** 1. reading orders 2. golden hour routine 3. knowing supplies **Skills observed & performed:** 1. TC bilirubin 2. blood glucose 3. OG tube	Date: 4/17 Student L. Abers Preceptor LV
Highlights:	**Date/Initial =Student =Preceptor**	**Highlights:**	**Date/Initial =Student =Preceptor**
1. Patient extremity deformity 2. SMOF IV 3. Finnegan Abstinence score **Areas to Improve:** 1. changing ostomy 2. blood draws 3. vent settings **Skills observed & performed:** 1. gavage feeding 2. refeeding through fistula 3. ostomy care	Date: 4/21/25 L. Abers Student MB Preceptor	1. intubated pt 2. discharge on O2 3. sedation **Areas to Improve:** 1. comfortable with ET 2. giving report 3. showing chart **Skills observed & performed:** 1. Bath 2. IV start 3. IV Drips	Date: 4/24 L. Abers Student Preceptor
Highlights:	**Date/Initial =Student =Preceptor**	**Highlights:**	**Date/Initial =Student =Preceptor**
1. High acuity baby 2. Transfer to cooks 3. intubated pt **Areas to Improve:** 1. Discharge material 2. talking to doctors 3. labs from PAL **Skills observed & performed:** 1. IV start 2. Art line maintenance 3. Hanging meds/platelets	Date: 4/28 L. Abers Student SM Preceptor	1. 5 m.o. baby care 2. Dealing with death 3. growers/feeders **Areas to Improve:** 1. updating doctors 2. quick thinking 3. education - circ **Skills observed & performed:** 1. OG/NG feeding 2. bath 3. cares	Date: 5/1 L. Abers Student SM Preceptor

IM8: Capstone Appraisal of Student Performance

(preceptor Completes and Review with student)

Student: Lanie Abers

Midterm: ✓

Unit: NICU

Finals:

1. Please reflect on the student's clinical performance during the capstone preceptorship and appraise the following:

Clinical Learning Outcomes	Below Average Performance Needs Significant Guidance	Satisfactory Performance Needs Average Guidance	Outstanding Performance Needs Minimal Guidance
a. **Safety/Quality**: Integrate nursing care using evidence-based practice to promote safety and quality for patients, self and others			SM
b. **Communication**: Communicate and collaborate effectively with patients, family, and members of the interdisciplinary team in various healthcare settings. (SBAR, Documentation, patient advocacy)			SM
c. **Clinical judgement**: Integrate use of current evidence-based practice and clinical competence when making clinical decisions in the provision of patient centered care. (Clinical Judgement model)			SM
d. **Patient centered care**: Integrate nursing care for patients from diverse backgrounds based on patient age, culture, values, and educational needs.			SM
e. **Professionalism**: Integrate knowledge, skills, and attitudes required of the professional nurse, embracing lifelong learning to improve the quality of healthcare.			SM

2. What do you think are the student's personal strengths?

Organization, kind, hard working

3. What have you identified as an opportunity for improvement for the student?

Talking with providers more.

Preceptor Signature: [signature] Date: 5/1/25

Student Signature: Lanie abers Date: 5/1/25

submitted on 10th shift

IM8 Capstone Preceptorship: Student Self-Evaluation

1. **Please reflect on your performance during the capstone preceptorship and rate yourself on the following:**

	I need significant guidance	I need average guidance	I need minimal guidance
a. **Safety/Quality**: I Integrate nursing care using evidence-based practice to promote safety and quality for patients, self and others			✓
b. **Communication:** I Communicate and collaborate effectively with patients, family, and members of the interdisciplinary team in various healthcare settings. (Documentation, Patient advocacy, & SBAR)			✓
c. **Clinical judgement**: I integrate use of current evidence-based practice and clinical competence when making clinical decisions in the provision of patient centered care. (Clinical judgement model)			✓
d. **Patient centered care**: I integrate nursing care for patients from diverse backgrounds based on patient age, culture, values, and educational needs.			✓
e. **Professionalism**: I integrate knowledge, skills, and attitudes required of the professional nurse, embracing lifelong learning to improve the quality of healthcare.			✓

2. **What do you think are your personal strengths?**

I think I have done well in showing my patients and their families compassion and gentle care. I have improved greatly on my confidence level and my time management.

3. **What have you identified as a personal opportunity for improvement?**

I have identified a personal opportunity for improvement in my confidence when speaking to doctors. I just think I need more practice so I can become more comfortable.

Student Signature: Lanie Ahers Date: 5/1/25

Covenant School of Nursing

Evaluation of Preceptor by Student

Name of Preceptor: Shylah Clinical Unit: NICU

Please rate your preceptor on each question 1=Never/Poor; 2=Seldom/Mediocre; 3=Sometimes/Good; 4=Often/Very Good; 5=Always/Superb	Rating Please circle
Establishes a good learning environment (approachable, nonthreatening, enthusiastic, etc.)	1 2 3 4 5
Stimulates me to learn independently	1 2 3 4 5
Allows me autonomy appropriate to my level/ experience/ competence	1 2 3 4 5
Organizes time to allow for both teaching and care giving	1 2 3 4 5
Offers regular feedback (both positive and negative)	1 2 3 4 5
Clearly specifies what I am expected to know and do during the training period	1 2 3 4 5
Adjusts teaching to my needs (experience, competence, interest, etc.)	1 2 3 4 5
Asks questions that promote learning (clarifications, probes, Socratic questions, reflective questions, etc.)	1 2 3 4 5
Gives clear explanations/reasons for opinions, advice, or actions	1 2 3 4 5
Adjusts teaching to divers settings (bedside, charting, nurses station, etc.)	1 2 3 4 5
Coaches me on my clinical/ technical skills (patient history, assessment, procedural, charting)	1 2 3 4 5
Incorporates research data and/or practice guidelines into teaching	1 2 3 4 5
Teaches diagnostic skills (clinical reasoning, selection/interpretation of tests, etc.)	1 2 3 4 5
Teaches effective patient and/or family communication skills	1 2 3 4 5
Teaches principles of cost-appropriate care (resource utilization, etc.)	1 2 3 4 5

1. What did you like best about your preceptor?

My preceptor was fantastic. she was always very helpful and I felt like I could always come to her with any questions or advice. she taught me a lot and pushed me to be confident.

2. Do you have any suggestions for your preceptor to consider when working with future students?

No, I think she did great! :)

Student Signature: Lanii Alers Date: 5/1

Created 9/18 DS: The Cleveland Clinic's Clinical Teaching Effectiveness Instrument – Used with Permission from Dr. Mariana Hewson

Instructional Modeule *: Capstone Precepted Clinical Experience Skills Check list
Critical Care Unit: NICU & PICU

Purpose: This inventory of required skills is to comleted on classroom orientation, Clinical Midterm & Clinical Finals
Introduction: 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.

	Student's Pre-Assessment			Preceptorship Clinical Time				
Skills	**No Experience**	**CPE**	**Clinical**	**Supervised**		**Performed independently**		
I. Assessment			X		X 4/7			
a. Gestational age		X	X		X 4/7			
-EDC/LMP		X	X		X 4/7			
- Ballards Scoring	X							
1.Physical	X		X					
2. Neurological	X		X					
b. Physical assessment			X		X 4/7			
- Integumentary			X	X 3/31 JM	X 4/7			
- HEENT			X	X	X 4/7			
- Respiratory			X	X	X 4/7			
- Cardiovascular			X	X	X 4/7			
- Gastrointestinal			X	X	X 4/7			
- Genitourinary			X	X	X 4/7			
- Muscoskeletal			X	X	X 4/7			
- Neurological			X	X	X 4/7			
c. Behavioral Assess't					X 4/7			
- Neonatal	X				X 4/7			
abstinence	X				X 4/7			
scoring	X				X 4/7			
d. Pain Assessment					X 4/7			
- NPASS/FLAC		X		X 4/9	X 4/7			
- NPASS sedation		X		X 4/9	X 4/7			
e. Vital signs			X	X all	X 4/7			
f. Apgar scoring			X		X 4/7			
II. Medication								
a. Per orem			X	X 3/28	X 4/7			
b.NGT/OGT			X		X 4/7			
c.Topical			X		X 4/7			
d.IM-Vastus lateralis		X		X 3/31	X			
e. Rectal	X							
f.Nasal	X				X 4/10			
g.Opthalmic		X			X 4/10			
h. IV/Central line			X	X 3/31	X 4/7			
i. Calculate dosing		X	X	X 3/31	X 4/7			
j. Calculate drips		X	X	X 4/9	X 4/7			
k. Emergency drug		X		X	X 4/3			
sheet		X						
III. Care management								
a. IVF/CVL			X	X 3/31				
1. UVC	X				X 4/7			
2 UAC	X				X 4/7			
- Change of fluids			X	X 3/31	X 3/31			
- Transducer	X				X			
maintenace &	X							
calibration/level	X				X 3/31			
- Transducer set up	X				X			
- Blood collection		X	X		X			
3. PICC			X	X 4/9	X			
4. BROVIAC	X							
5. Peripheral			X	X 3/31	X			

	no ex		CPE	clinical		supervised		independent		
c. ABG				X		X 3/31	X 4/7			
d. CXR				X		X 3/31	X 4/7			
VIII. Oxygen MGT.										
- HFJV							X 4/10			
- HFOV						X 4/7	X			
- NIPPV							X 4/7			
- A/C Mode				X		X 4/7	X 4/7			
- SIMV-Invasive						X 4/7	X			
- Bubble CPAP							X 4/3			
- CPAP vent						X 4/7	X			
- HFNC						X 3/31	X 4/7			
- Nasal Cannula				X		X 3/31	X			
- Venti Mask				X			X			
- Weaning (ROAR)							X			
VIIII. NICU age appr't										
equipments										
- Incubator			X	X		X 3/31	X 4/7			
- Radiant warmer			X	X		X 3/31	X			
- Phototherapy				X			X			
a. Bililight care				X		X 4/10	X			
b. Check transcu-	X						X			
taneous Bilirubin	X						X			
c. Check Bililigth	X									
distance	X									
X. Documentation						X 3/31				
- Timely				X		X 3/31	X			
- Accurate				X		X 3/31	X			
- Correct abrev't				X		X 3/31	X			
- Process						X 3/31	X			
a. Admission	X				X		X 4/7			
d. Discharge	X				X		X 4/7			
e. Transfer	X						X			
f. Teaching	X				X		X			
g. Assessment	X				X	X 3/31	X			
h. Vital signs				X	X	X 3/31	X			
XI. Collaborative										
Communication										
- Referrals	X				X		X			
- SBAR				X		X	X 4/7			
- Physician	X				X		X			
- Pharmacy	X			X			X 4/7			
- Diagnostic	X									
- Respiratory	X									
- Case manager	X			X			X 4/7			
- Chaplain	X						X			
XII. Adm/Discharge										
a. Admission				X			X			
- Routine adm.	X			X		X	X			
- Small Baby adm	X			X		X	X 4/7	4/7		
- Bed Preparation				X		X	X			
- Unit transport	X			X			X			
- Education	X					X	X			
b. Dscharge	X					X				
- Newborn screening	X			X			X 4/7			
- Hearing screening	X						X			
- CHD screening	X									
- Car seat challenge	X			X		X	X			

	no experience		CPE	clinical		supervised		performed independently	
arterial line				X		X	X 4/7		
- Clave change			X	X 4/9		X	X 4/7		
- Dressing change			X				X 4/7	4/7	
- Adm. of TPN				X 3/31		X	X 4/7		
-Adm. Lipids	X					X	X 4/7		
- Assist CVL	X			X		X	X 4/7		
placement				X					
IV. Chest Tubes Mgt.									
- Check MD orders				X			X		
- Set up CTubes	X								
- Assist in CTubes	X								
placement									
removal									
- CTube dressing	X								
change									
- Monitoring	X								
a. suction level	X								
b. Drainage level	X								
c. Air leaks	X								
V. Enteral Feedings									
- Insertion OGT/NGT			X				X 4/10		
- Removal of tubes			X				X 3/31		
- Check placement				X 4/10		X	X 3/31		
& residual						X	X	4/7	
- Monitor				X		X	X		
- calculate ml/min				X		X	X 4/3		
- Dressing change	X						X 4/3		
- Care of Ostomy	X			X 3/31		X	X 4/10		
- Care of gastric	X								
decompression									
VI. Tracheostomy Mgt.									
- Check placement				X					
- Suctioning			X	X 4/7			X		
- Dressing change			X						
- Check for air leak				X					
site,& O2									
VII. Laboratory									
- Check MD orders				X		X	X 4/3		
- Collection							X		
a. Heel stick	X			X 4/10		X	X	4/7	
b. Blood draw				X			X		
-Broviac	X								
- UC							X		
c. Tracheal /	X								
nasal aspirate	X						X		
d. Skin swab	X						X		
- Diagnostic test									
a. Urinalysis				X			X 4/7		
b. Blood culture	X			X 4/10			X 4/7	4/7	
c. Glucometer				X		X	X 4/7		
d. Urine drug test				X					
e. LP									
f. Thoracentesis	X								
- Interpret Lab.			X	X		X			
results			X	X					
a. CBC			X	X		X	X 4/7		
b. BMP/CMP			X	X		X	X		

	no ex	CPE	clinical		supervised			performed independently	
- Education	X		X		X				
XIII. Others						4/10			
a. Assist					X	4/10			
- Adm. surfactant	X				X				
- Intubation	X		X	X					
- Eye exam	X								
b. Participate in code		X			X				
team									
c. Observe									
- NSDelivery			X						
- Ceasarian section			X						
d. Practice Infection			X		X				
control protocols			X			4/10			
e. Prep for pre-op			X		X				
f. Post op mgt.			X		X	4/10			
g. Monitoring									
- ICP			X						
- EVD			X						
reservoir					X				

Student Name (print): Lanie Abers

Student Signature: Lanie abers

Clinical Unit: NICU Date; 5/1/25