

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Advanced Medical Surgical Nursing- 2022**

**Firelands Regional Medical Center School of Nursing**  
**Sandusky, Ohio**

**Student:**   
**Semester:**

**Final Grade:** Satisfactory/Unsatisfactory

**Date of Completion:**

**Faculty:** Frances Brennan, MSN, RN; Amy M. Rockwell, MSN, RN  
 Chandra Barnes, BSN, RN; Brian Seitz, MSN, RN  
 Brittany Lombardi, MSN, RN

**Faculty eSignature:**

**DIRECTIONS FOR USE:**

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". If the student does not self-rate, then it is an automatic "U". A student who submits the clinical evaluation tool late will be rated as "U" in the appropriate competency(s) for that clinical week. Whenever a student receives a "U" in a competency, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory or needs improvement in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory or needs improvement as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

**METHODS OF EVALUATION:**

- Clinical Assignments
- Completion of Patient Care
- Meditech Documentation
- Observation of Clinical Performance
- Evaluation of Clinical Performance Tool
- Onsite Clinical Debriefing
- Clinical Discussion Rubric
- Preceptor Feedback
- Nursing Care Plan Rubric
- Skills Lab Checklists/Competency Tool
- Lasater Clinical Judgment Rubric
- Virtual Simulation scenarios
- Pathophysiology Grading Rubric

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make Up (Date/Time)
1/18-1/19/2022	16	Missed 4C Clinical- 2 days	
1/13/2022	1	Core Measures Clinical Orientation	
1/13-1/14/2022	8	4H Lab on 1/13/2022 and 4H Lab on 1/14/2022	1/21/22 (1200-1600), 1/27/22 (0930-1330) BL
Initials	Faculty Name		
CB	Chandra Barnes, BSN, RN		
FB	Fran Brennan, MSN, RN		
BL	Brittany Lombardi, MSN, RN		
AR	Amy Rockwell, MSN, RN		
BS	Brian Seitz, MSN, RN		

## PERFORMANCE CODE

### SATISFACTORY CLINICAL PERFORMANCE

**Satisfactory (S):** Safe; accurate each time, efficient, coordinated; confident, focuses on the patient; some expenditure of excess energy; within a reasonable time period; appropriate affective behavior; occasional supporting cues; minimal faculty feedback needed related to written clinical work.

### UNSATISFACTORY CLINICAL PERFORMANCE

**Needs Improvement (NI):** Safe, accurate each time, skillful in parts of behavior, focuses more on the skill and self rather than the patient, inefficient, uncoordinated, anxious, worried, and flustered at times, expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues, faculty feedback required in several areas of clinical written work.

**Unsatisfactory (U):** Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U," the faculty member (s) will continue to rate the competency unsatisfactory.

### OTHER

**Not Available (NA):** The clinical experience which would meet the competency was not available.

Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.

Objective

1. Engage in the coordination and delivery of nursing care measures to groups of patients and to patients with complex problems. (1,3,4,5,7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	Na	S																
a. Manage complex patient care situations with evidence of preparation and organization. <b>(Responding)</b>																		
b. Assess comprehensively as indicated by patient needs and circumstances. <b>(Noticing)</b>	NA	S																
c. Evaluate patient's response to nursing interventions. <b>(Reflecting)</b>	NA	S																
d. Interpret cardiac rhythm; determine rate and measurements. <b>(Interpreting)</b>	NA	S																
e. Administer medications observing the six rights of medication administration. <b>(Responding)</b>	NA	S																
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. <b>(Responding)</b>	NA	NA																
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. <b>(Responding)</b>	NA	S																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																
<b>Clinical Location</b>	SICK	4P 83F																

Comments:

Week 3-1(a-e,g) Brooke, excellent job this week managing complex patient care situations. You were well prepared for clinical, and you performed very thorough and accurate assessments. Going forward, I would like to see you become more confident in your own assessment skills and knowledge. You were accurate with all your assessment findings, but you second-guessed yourself many times. Be confident in all that you have learned and know! You did a great job practicing identifying your patient's cardiac rhythm. You were able to administer SQ and IVP medications, all while following the six rights of medication administration. You monitored your patient closely to ensure positive patient outcomes. Keep up the great work! BL

\*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

<b>Objective</b>																		
2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)*																		
Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	NA	S NI																
a. Correlate relationships among disease process, patient’s history, patient symptoms, and present condition utilizing clinical judgment skills. <b>CC (Noticing, Interpreting, Responding)</b>	NA	S NI																
b. Monitor for potential risks and anticipate possible early complications. <b>(Noticing, Interpreting, Responding)</b>	NA	S																
c. Recognize changes in patient status and take appropriate action. <b>(Noticing, Interpreting, Responding)</b>	NA	S																
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. <b>CC (Noticing, Interpreting, Responding, Reflecting)</b>	NA	NA																
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. <b>(Responding)</b>	NA	S																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																

**Comments:**

Week 3-2(a) Brooke, you are off to a great start with your pathophysiology CDG. There are just a few areas noted on the rubric that are in need of some additional information. Please add this information by 1700 on February 2, 2022 to be graded as satisfactory. If you have any questions, please do not hesitate to ask. BL

\*End-of- Program Student Learning Outcomes

Week 3-2(e) You did a great job this week identifying social determinants of health that may have impacted your patient’s health, well-being, and quality of life. Keep up all your great work! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

<b>Objective</b>																		
3. Plan leadership experiences with a mentor to impact team performance, patient safety, and quality indicators. (1,3,5,7,8)*																		
Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	NA	S																
a. Critique communication barriers among team members. <b>(Interpreting)</b>																		
b. Participate in QI, core measures, monitoring standards and documentation. <b>(Interpreting &amp; Responding)</b>	NA	NA																
c. Discuss strategies to achieve fiscal responsibility in clinical practice. <b>(Responding)</b>	NA	S																
d. Clarify roles & accountability of team members related to delegation. <b>(Noticing)</b>	NA	S																
e. Determine the priority patient from assigned patient population. <b>(Interpreting) (Patient Mgmt.)</b>	NA	Na																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																

Comments:

Week 3-3(c) You did a great job ensuring you used the PAR system appropriately when obtaining care items for your patient this week in clinical. This is just one important way to ensure fiscal responsibility in clinical practice. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

\*End-of- Program Student Learning Outcomes

**Objective**

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	NA	S																
a. Critique examples of legal or ethical issues observed in the clinical setting. <b>(Interpreting)</b>																		
b. Engage with patients and families to make autonomous decisions regarding healthcare. <b>(Responding)</b>	NA	S																
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. <b>(Responding)</b>	NA	S																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																

**Comments:**

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

\*End-of- Program Student Learning Outcomes

**Objective**

5. Construct methods for self-reflection and critiquing healthcare systems, processes, practices and regulations on a weekly basis. (7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	NA	S																
a. Reflect on your overall performance in the clinical area for the week. <b>(Responding)</b>	NA	S																
b. Demonstrate initiative in seeking new learning opportunities. <b>(Responding)</b>	NA	S																
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. <b>(Interpreting)</b>	NA	S																
d. Perform Standard/Standard Plus Precautions. <b>(Responding)</b>	NA	S																
e. Practice use of standardized EBP tools that support safety and quality. <b>(Responding)</b>	NA	S																
f. Utilize faculty feedback to improve clinical performance. <b>(Responding &amp; Reflecting)</b>	NA	S																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																

**Comments:**

Week 3-5(b) Excellent job this week performing all your patients wound dressings, as well as administering an IVP medication for the first time. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

\*End-of- Program Student Learning Outcomes

**Objective**

6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	NA	S																
a. Establish collaborative partnerships with patients, families, and coworkers. <b>(Responding)</b>																		
b. Teach patients and families based on readiness to learn and discharge learning needs. <b>(Interpreting &amp; Responding)</b>	NA	S																
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. <b>(Responding)</b>	NA	S																
d. Deliver effective and concise hand-off reports. <b>(Responding)</b>	NA	S																
e. Document interventions and medication administration correctly in the electronic medical record. <b>(Responding)</b>	NA	S																
f. Consistently and appropriately posts in clinical discussion groups. <b>(Responding and Reflecting)</b>	NA	S NI																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																

**Comments:**

Week 3-6(a,b,c) Excellent job in debriefing discussing these competencies, as well as applying them to practice during your clinical experience this week. BL

Week 3-6(e,f) Excellent job with all your documentation this week in clinical! Your documentation was done in a timely manner and accurate. You also did a great job taking my feedback on Tuesday and applying it to all your documentation on Wednesday. There is additional information that is needed for your Pathophysiology CDG to be completed at a satisfactory level. Therefore, competency 6(f) has been changed to an “NI.” BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

\*End-of- Program Student Learning Outcomes

**Objective**

7. Devise methods utilized by nursing to develop the profession, advance the knowledge base, ensure accountability, and improve the outcomes of care delivery. (1,3,4,6,7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
<b>Competencies:</b>	NA	S																
a. Value the need for continuous improvement in clinical practice based on evidence. <b>(Responding)</b>																		
b. Accountable for investigating evidence-based practice to improve patient outcomes. <b>(Responding)</b>	NA	S																
c. Comply with the FRMCSN "Student Code of Conduct Policy." <b>(Responding)</b>	NA	S																
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. <b>(Responding)</b>	NA	S																
<b>Faculty Initials</b>	<b>BS</b>	<b>BL</b>																

**Comments:**

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

\*End-of- Program Student Learning Outcomes

Skills Lab Evaluation Tool  
AMSN  
2022

<b>Skills Lab Competency Evaluation</b>  Performance Codes:  S: Satisfactory  U: Unsatisfactory	<b>Lab Skills</b>									
	<b>Meditech Document</b> (1,2,3,4,5,6)*	<b>Physician Orders</b> (1,2,3,4,5,6)*	<b>Prioritization/Delegation</b> (1,2,3,4,5,6)*	<b>Resuscitation</b> (1,3,6,7)*	<b>IV Start</b> (1,3,4,6)*	<b>Blood Admin./IV Pumps</b> (1,2,3,4,5,6)*	<b>Central Line/Blood Draw/Ports/IV Push</b> (1,2,3,4,6)*	<b>Head to Toe Assessment</b> (1,2,6)*	<b>ECG/Telemetry Placements/CT</b> (1,6)*	<b>ECG Measurements</b> (1,2,4,5,6)*
	Date: 1/11/2022	Date: 1/11/2022	Date: 1/11/2022	Date: 1/11/2022	Date: 1/27/2022	Date: 1/27/2022	Date: 1/27/2022	Date: 1/21/2022	Date: 1/21/2022	Date: 1/21/2022
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	BS	BS	BS	BS	BL	AR	FB	BL	BL	AR
<b>Remediation:</b> Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

**\*Course Objectives**

**Comments:**

**Meditech Documentation:** Satisfactory participation of assessment documentation including physical re-assessment, safety and fall assessment, RN mechanical ventilator assessment, IV location assessment, and documentation editing. Great job! FB

**Physician Orders:** Satisfactory completion of physician's order lab utilizing SBAR communication and taking orders over the phone. Good job! CB/BS

**Prioritization/Delegation:** Satisfactory completion of the prioritization and delegation skills lab. You satisfactorily prioritized care for multiple patients using multiple methods (e.g. Maslow's hierarchy of needs, ABC, Nursing Process, etc.). You were able to appropriately delegate nursing tasks for the patients, and you actively participated in the group discussion on delegation of nursing tasks. Great job! BL

**Resuscitation:** Satisfactory participation in the practice of Hands-Only CPR, discussion regarding use of and ventilation with bag- valve mask/Ambu bag, and review of crash cart and Code Blue team duties and documentation. AR

**Blood administration/IV pump:** Satisfactory completion of practice with blood administration safety checks activity. Great job with IV pump practice, the use of the medication library, and pump set up of primary and secondary IV medication infusion. AR

**IV Starts:** Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. FB/BS/CB/BL

**Head to Toe Assessment:** You are satisfactory for the head-to-toe assessment competency. Nice Job! BL/BS

**ECG/Telemetry/Chest Tube:** Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches and leads; satisfactory participation in review of Chest Tube/Atrium tutorial. BL/BS

**Ports/Blood Draw:** You were satisfactory in accessing an Infusaport device, demonstrated proper technique for CVAD cap change and you successfully demonstrated how to draw blood from a CVAD per hospital policy. Nice work! CB

**Central Line Dressing/IV push:** Satisfactory central line dressing change using proper technique, as well as line flushing. Great job with preparation of mixing a medication with normal saline and administering as an IV push through the central line. FB

**ECG Measurements:** Satisfactory participation in and practice of ECG measurements during the ECG Measurements Lab. You accurately measured and interpreted a 6-second rhythm strip for Normal Sinus Rhythm. Great job! AR

Nursing Care Plan Grading Tool  
AMSN  
2022

**Student Name:**

**Clinical Date:**

Firelands Regional Medical Center School of Nursing  
Advanced Medical Surgical Nursing 2022  
Simulation Evaluations

<b>vSim Evaluation</b>								
	<b>Rachael Heidebrink (Pharmacology) (1, 2, 6, 7)*</b>	<b>Week 8: Dysrhythmia Simulation (see rubric)</b>	<b>Junetta Cooper (Pharmacology) (1, 2, 6, 7)*</b>	<b>Mary Richards (Pharmacology) (1, 2, 6, 7)*</b>	<b>Lloyd Bennett (Medical-Surgical) (1, 2, 6, 7)*</b>	<b>Kenneth Bronson (Medical-Surgical) (1, 2, 6, 7)*</b>	<b>Carl Shapiro (Pharmacology) (1, 2, 6, 7)*</b>	<b>Comprehensive Simulation (see rubric)</b>
Performance Codes: S: Satisfactory U: Unsatisfactory	<b>Date: 2/18/2022</b>	<b>Date: 3/2-3/2022</b>	<b>Date: 3/4/2022</b>	<b>Date: 3/18/2022</b>	<b>Date: 3/25/2022</b>	<b>Date: 3/31/2022</b>	<b>Date: 4/28/2022</b>	<b>Date: 4/28/2022</b>
Evaluation								
Faculty Initials								
<b>Remediation: Date/Evaluation/ Initials</b>								

\* Course Objectives

Pathophysiology Grading Rubric  
 Firelands Regional Medical Center School of Nursing  
 Advanced Medical Surgical Nursing  
 2022

<b>Student Name:</b> Brooke LoPresto		<b>Clinical Date:</b> 1/25-1/26/2022	
<b>1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)</b> <ul style="list-style-type: none"> <li>Current Diagnosis (1)-1</li> <li>Past Medical History (1)-1</li> </ul>		<b>Total Points: 2</b> <b>Comments:</b> Great job providing a detailed description of your patient's current diagnosis and past medical history. BL	
<b>2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)</b> <ul style="list-style-type: none"> <li>Pathophysiology-what is happening in the body at the cellular level (1)-1</li> </ul>		<b>Total Points: 1</b> <b>Comments:</b> Excellent job! Your pathophysiology of your patient's current diagnosis is described with great detail. Credible resource used for this information as well. BL	
<b>3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)</b> <ul style="list-style-type: none"> <li>All patient's signs and symptoms included (1)-0.5</li> <li>Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1)-0</li> <li>Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1)-0.5</li> </ul>		<b>Total Points: 1</b> <b>Comments:</b> Overall, you did a great job including all the patient's signs and symptoms. However, you did not include her fever, which is a very important sign of sepsis as well. You also did not explain what the typical signs and symptoms are of sepsis, and whether or not those differed from what your patient was experiencing. There was also some information missing related to correlating the signs and symptoms with sepsis. In other words, what is going on in the body with sepsis that is causing the patient to have a low blood pressure, high heart rate, fever, etc.? Don't forget that the patient's surgical wound is where the infection began as well, leading to her diagnosis of sepsis. BL	
<b>4. Correlate the patient's current diagnosis with all related labs. (4 points total)</b> <ul style="list-style-type: none"> <li>All patient's relevant lab result values included (1)-0</li> <li>Rationale provided for each lab test performed (1)-1</li> <li>Explanation provided of what a normal lab result should be in the absence of current diagnosis (1)-1</li> <li>Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1)-1</li> </ul>		<b>Total Points: 3</b> <b>Comments:</b> Overall, very nice job with this section. Unfortunately, you did not include the patient's blood cultures that were positive for MRSA, or her wound culture that was positive for MRSA as well. These are two very important lab results that correlated to her diagnosis of sepsis. BL	
<b>5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)</b>		<b>Total Points: 3.5</b> <b>Comments:</b> Again, there is some information missing	

<ul style="list-style-type: none"> <li>• All patient's relevant diagnostic tests and results included (1)-1</li> <li>• Rationale provided for each diagnostic test performed (1)-1</li> <li>• Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1)-1</li> <li>• Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1)-0.5</li> </ul>	<p>related to the correlation of the diagnostic tests results and the patient's current diagnosis. For example, the EKG that showed Sinus Tachycardia. How does this correlate to a diagnosis of sepsis? Additionally, how do the CXR and CT results correlate to the diagnosis of sepsis? BL</p>
<p><b>6. Correlate the patient's current diagnosis with all related medications. (3 points total)</b></p> <ul style="list-style-type: none"> <li>• All related medications included (1)-0</li> <li>• Rationale provided for the use of each medication (1)-1</li> <li>• Explanation of how each of the patient's relevant medications correlate with current diagnosis (1)-1</li> </ul>	<p><b>Total Points: 2</b>  <b>Comments:</b> Overall, you're off to a good start. The patient received fluid replacement when she was admitted, which is a very important treatment protocol for patients with sepsis. You would want to include the type of fluids she received in the medications. There were also some other antibiotics ordered for her sepsis that should be included as well. BL</p>
<p><b>7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total)</b></p> <ul style="list-style-type: none"> <li>• All pertinent past medical history included (1)-1</li> <li>• Explanation of how patient's pertinent past medical history correlates with current diagnosis (1)-1</li> </ul>	<p><b>Total Points: 2</b>  <b>Comments:</b> Excellent job! BL</p>
<p><b>8. Describe nursing interventions related to current diagnosis. (1 point total)</b></p> <ul style="list-style-type: none"> <li>• All nursing interventions provided for patient explained and rationales provided (1)-0.5</li> </ul>	<p><b>Total Points: 0.5</b>  <b>Comments:</b> There are a few other very important nursing interventions you would want to include such as your head to toe assessment, medication administration, and wound care. BL</p>
<p>Total possible points = 20  17-20 = Satisfactory  14-16 = Needs improvement  &lt;13 = Unsatisfactory</p>	<p><b>Total Points: 15/20</b>  <b>Comments:</b> Needs improvement. Overall, you are off to a great start with your pathophysiology. There are just a few areas noted above that are in need of some additional information. Please add this information by 1700 on February 2, 2022 to be graded as satisfactory. If you have any questions, please do not hesitate to ask. BL</p>

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Advanced Medical Surgical Nursing- 2022**

**Firelands Regional Medical Center School of Nursing  
Sandusky, Ohio**

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date:

ar 12/15/2021