EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2022

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: KELSIE SAYLER

Semester: Spring

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

Final Grade: Satisfactory/Unsatisfactory

Date of Completion:

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)

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

<h1 style="text-align:center">PERFORMANCE CODE</h1>

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
Competencies: a. Manage complex patient care situations with evidence of preparation and organization. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
b. Assess comprehensively as indicated by patient needs and circumstances. **(Noticing)**	NA	S	S	S	S	S	NA	NA	**S**									
c. Evaluate patient's response to nursing interventions. **(Reflecting)**	NA	S	S	S	S	S	NA	NA	**S**									
d. Interpret cardiac rhythm; determine rate and measurements. **(Interpreting)**	NA	S	S	S	S	S	NA	NA	**S**									
e. Administer medications observing the six rights of medication administration. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. **(Responding)**	NA	S	S	~~S~~ **NA**	NA	NA	NA	NA	**S**									
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
Faculty Initials	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**									
Clinical Location	NO CLINICALS	Infusion center And special procedures	Cardaic diagnostics and quailty scavenger hunt	4C	4C	4P	NO CLINICAL	NO CLINICAL										

Comments:

Week 3- 1a,b,c- Great job discussing the patients you worked with at the infusion center, the medications they received, and the interventions provided. Good job also of explaining the medications administered. Also, nice job of evaluating the patient's responses to the interventions provided. BS

*End-of- Program Student Learning Outcomes

Week 4- 1b,c- Good job of describing the procedures you observed in the Cardiac Diagnostic department, summarizing the interventions for the procedures, and correlating the information obtained to each patient's symptoms. BS

Week 5- 1a-e,g- Nice job assessing and caring for your critical care patient this week. You were able to identify several rhythm strips and did a good job administering medications while observing the six rights. BS

Week 6- 1a-e,f- Great job this week closely assessing and managing care for your patient.. You were also able to interpret and measure several cardiac rhythm strips this week. All medications were administered via several routes (NG, IVP, IV, oropharyngeal, and SQ) while observing the six rights. Nice work! BS

Week 7-1(a-e,g) Excellent job this week managing complex patient care situations. You were well prepared for clinical, and completed all your nursing interventions in a timely manner. You did a great job with your EKG book in which you were able to determine rates and measurements, as well as interpret cardiac rhythms. You did an excellent job with your medication passes and followed all six rights of medication administration. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

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
Competencies: a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. **CC (Noticing, Interpreting, Responding)**	NA	NA	NA	S	S	S	NA	NA	**S**									
b. Monitor for potential risks and anticipate possible early complications. **(Noticing, Interpreting, Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
c. Recognize changes in patient status and take appropriate action. **(Noticing, Interpreting, Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. **CC (Noticing, Interpreting, Responding, Reflecting)**	NA	NA	NA	S	NA	NA	NA	NA	**S**									
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
Faculty Initials	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**									

Comments:
Week 3- 2a,b- Good job discussing some of the potential risks associated with the procedures you were able to observe. BS
Week 5- 2d,e- Nice job formulating a nursing care plan for your mechanically ventilated patient this week. (see rubric below) Nice job contributing during debriefing and discussing cultural/racial inequalities assessed while caring for your patient. BS
Week 6- 2e- Nice job identifying and discussing the social determinants of health that may have an impact on your patient's health and quality of life. BS

Week 7-2(b,c) Great job in debriefing discussing how you monitored your patient for potential risks and anticipated early complications. You also did a great job discussing changes in patient status you noticed, as well as how you responded and took action. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

5

Objective

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
Competencies: a. Critique communication barriers among team members. **(Interpreting)**	NA	S	S	S	S	S	NA	NA	**S**									
b. Participate in QI, core measures, monitoring standards and documentation. **(Interpreting & Responding)**	NA	NA	S	S	S	~~S~~ NA	NA	NA	**S**									
c. Discuss strategies to achieve fiscal responsibility in clinical practice. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
d. Clarify roles & accountability of team members related to delegation. **(Noticing)**	NA	S	S	S	S	S	NA	NA	**S**									
e. Determine the priority patient from assigned patient population. **(Interpreting)** **(Patient Mgmt.)**	NA	NA	NA	NA	NA	NA	NA	NA	**NA**									
Faculty Initials	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**									

Comments:

Week 3- 3c- Nice job discussing witnessed strategies to achieve fiscal responsibility for the patient and the organization. As you were made aware, many of the medications administered at the infusion center are extremely expensive! BS

Week 4- 3b,c- Nice work listing the resources you utilized to complete your quality scavenger hunt, discussing the variances you found, and how these variances can affect an organization's fiscal health. BS

Week 7-3(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 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
Competencies: a. Critique examples of legal or ethical issues observed in the clinical setting. **(Interpreting)**	NA	S	S	S	S	S NA	NA	NA	S									
b. Engage with patients and families to make autonomous decisions regarding healthcare. **(Responding)**	NA	S	S	S	S	S	NA	NA	S									
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. **(Responding)**	NA	S	S	S	S	S	NA	NA	S									
Faculty Initials	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**									

Comments:
Week 5- 4a- Nice job discussing potential legal/ethical issues from the clinical setting this week. BS
Week 6- 4b- Professional behavior observed at all times in the clinical setting. BS

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
Competencies: a. Reflect on your overall performance in the clinical area for the week. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
b. Demonstrate initiative in seeking new learning opportunities. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. **(Interpreting)**	NA	S	S	S	S	S	NA	NA	**S**									
d. Perform Standard/Standard Plus Precautions. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
e. Practice use of standardized EBP tools that support safety and quality. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
f. Utilize faculty feedback to improve clinical performance. **(Responding & Reflecting)**	NA	S	S	S	S	S	NA	NA	**S**									
Faculty Initials	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**									

Comments:
Kelsie Sayler with Amanda Kordupel-Borton
1-26-22 – Excellent in all areas. "Great job jumping in to help patients."
Kelsie Salyer with Diana Gibson
1-27-22 – Satisfactory in all areas. "Kelsie was able to attempt IV starts and watch a paracentesis. She also watched a NG tube replacement and a met arthrogram. She did a nice job!"
Kelsie Sayler with Sarah Potts
2-2-22- Excellent in all areas. "Because of the snowstorm, we had no scheduled procedures. Explained 3 different stress tests and cardioversion; went to cardiac rehab, pacer clinic, and Cath lab.
Week 5- 5c,e- Nice job discussing factors that create a culture of safety and quality, and identifying standardized EBP tools that support safety and quality. BS
Week 6- 5a,b- Overall good performance in the clinical setting. You appear to be gaining confidence! BS

Week 7-5(b) Kelsie, you did an excellent job this week asking appropriate questions to help expand you knowledge and improve your patient care. 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
Competencies: a. Establish collaborative partnerships with patients, families, and coworkers. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
b. Teach patients and families based on readiness to learn and discharge learning needs. **(Interpreting & Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
d. Deliver effective and concise hand-off reports. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
e. Document interventions and medication administration correctly in the electronic medical record. **(Responding)**	NA	S	S	S	S	S	NA	NA	**S**									
f. Consistently and appropriately posts in clinical discussion groups. **(Responding and Reflecting)**	NA	S	S	S	S	S	NA	NA	**S**									
Faculty Initials	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**									

Comments:
Week 3- 6c- Great job providing examples of collaboration you witnessed at the infusion center. Things go very well when members of the team work together effectively. BS
Week 5- 6a,c,e,f- You did a good job working and collaborating with your nurses and with your fellow student. Nice job documenting interventions and medication administration. Nice work on your CDG this week. BS
Week 6- 6a,b,c,e,f- Nice job of working collaboratively with your nurse, fellow students, and other members of the healthcare team in an effort to support optimal patient outcomes. Interventions and medication administration were all documented appropriately, with few modifications necessary. Nice job on your Pathophysiology CDG this week. BS

Week 7-6(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 an excellent job with your CDG. BL

*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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
Competencies: a. Value the need for continuous improvement in clinical practice based on evidence. **(Responding)**	NA	S	S	S	S	S	NA	NA	S									
b. Accountable for investigating evidence-based practice to improve patient outcomes. **(Responding)**	NA	S	S	S	S	S	NA	NA	S									
c. Comply with the FRMCSN *"Student Code of Conduct Policy."* **(Responding)**	NA	S	S	S	S	S	NA	NA	S									
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions**.** **(Responding)**	NA	S	S	S	S	S	NA	NA	S									
Faculty Initials	BS	BS	BS	BS	BS	BL	BL	BL	BL									

Comments:

Week 7-7(a,b) You researched and summarized an interesting EBP article in your CDG titled "Actionable Ventricular Tachycardia During In-Hospital ECG Monitoring and its Impact on Alarm Fatigue." Excellent job! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills									
	Meditech Document (1,2,3,4,5,6)*	Physician Orders (1,2,3,4,5,6)*	Prioritization/ Delegation (1,2,3,4,5,6)*	Resuscitation (1,3,6,7)*	IV Start (1,3,4,6)*	Blood Admin./IV Pumps (1,2,3,4,5,6)*	Central Line/Blood Draw/Ports/IV Push (1,2,3,4,6)*	Head to Toe Assessment (1,2,6)*	ECG/Telemetry Placements/CT (1,6)*	ECG Measurements (1,2,4.5.6)*
	Date: 1/11/2022	Date: 1/11/2022	Date: 1/11/2022	Date: 1/11/2022	Date: 1/13/2022	Date: 1/13/2022	Date: 1/14/2022	Date: 1/14/2022	Date: 1/14/2022	Date: 1/14/2022
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	BS	BS	BS	BS	BS	BS	BS	BS	BS	BS
Remediation: 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
IV Start: 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
Blood Admin/IV Pumps: 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
Central Line Dressing Change/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
Blood Draw/Ports: You were satisfactory in accessing an Infusaport device, demonstrated proper technique for CVAD cap change and satisfactorily demonstrated how to draw blood from a CVAD per hospital policy. Nice work! CB
Head to Toe Assessment: You are satisfactory for the head-to-toe assessment competency. Nice Job! BL/BS
ECG/Telemetry Placements/CT: 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
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: K. Sayler   **Clinical Date:** 2/8/22-2/9/22

*End-of- Program Student Learning Outcomes

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

Student Name: K. Sayler   **Clinical Date: 2/15/22-2/16/22**

1. Provide a description of your patient including current diagnosis and past medical history. (2 points total) • Current Diagnosis (1) 1 • Past Medical History (1) 1	**Total Points: 2** **Comments: Nice job providing your patient's diagnosis and PMH.**
2. Describe the pathophysiology of your patient's current diagnosis. (1 point total) • Pathophysiology-what is happening in the body at the cellular level (1) 1	**Total Points: 1** **Comments: Good job discussing the pathophysiology of acute respiratory failure.**
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total) • All patient's signs and symptoms included (1) 1 • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1) 1 • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1) 1	**Total Points: 3** **Comments: Nice job correlating your patient's current diagnosis with her presenting signs and symptoms.**
4. Correlate the patient's current diagnosis with all related labs. (4 points total) • All patient's relevant lab result values included (1) 1 • Rationale provided for each lab test performed (1) 1 • Explanation provided of what a normal lab result should be in the absence of current diagnosis (1) 1 • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1) 1	**Total Points: 4** **Comments:**
5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total) • All patient's relevant diagnostic tests and results included (1) 0.5 • Rationale provided for each diagnostic test performed (1) 1 • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1) 1 • Explanation of how each of the patient's relevant	**Total Points: 3** **Comments: Suggestions: venous duplex, renal ultrasounds, KUB)**

*End-of- Program Student Learning Outcomes

13

diagnostic test results correlate with current diagnosis (1) 0.5	
6. Correlate the patient's current diagnosis with all related medications. (3 points total) • All related medications included (1) 0.5 • Rationale provided for the use of each medication (1) 1 • Explanation of how each of the patient's relevant medications correlate with current diagnosis (1) 0.5	**Total Points: 2** **Comments: Suggestions: ducosate, lansoprazole, metoclopramide.**
7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total) • All pertinent past medical history included (1) 1 • Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) 1	**Total Points: 2** **Comments:**
8. Describe nursing interventions related to current diagnosis. (1 point total) • All nursing interventions provided for patient explained and rationales provided (1) 0.5	**Total Points: 0.5** **Comments: Good job listing interventions, no rationales.**
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	**17.5/20** **Satisfactory. BS**

*End-of- Program Student Learning Outcomes

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

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

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

*End-of- Program Student Learning Outcomes

STUDENT NAME: K.Sayler   OBSERVATION DATE/TIME: 3/2/22   SCENARIO #: 1

CLINICAL JUDGMENT					OBSERVATION NOTES
COMPONENTS NOTICING: (1, 2, 5)*					Introduces self and identifies patient, begins assessment. VS, patient CO weakness. HR and rhythm recognized as abnormal.
• Focused Observation:	**E**	A	D	B	Patient identified, CO palpitations, begins assessment. Patient CO nausea/ dizziness. SpO2 and BP noted to be low. Lung sounds change following IV bolus.
• Recognizing Deviations from Expected Patterns:	E	**A**	D	B	
• Information Seeking:	E	**A**	D	B	
INTERPRETING: (2, 4)*					Interprets HR as bradycardic. Team discussing heart rhythm and interpreted as 2nd degree type 2. Interprets rhythm change to left heart block, LBBB- then determined to be 3rd degree heart block. Interprets new rhythm and need for pacing.
• Prioritizing Data:	E	**A**	D	B	Rhythm identified as atrial flutter (fibrillation). N/D determined to be symptoms of a-fib. Hypotension and elevated HR also noted. BP interpreted as need for IV fluid. Crackles noted. Low EF interpreted as cause.
• Making Sense of Data:	E	**A**	D	B	
					Patient found to be unresponsive, pulseless. Noted to be in pulseless Vtach.
RESPONDING: (1, 2, 3, 5)*					Interacting well with patient. Inquires about medications RT low heart rate. Call to provider to update and request order for EKG. Explains symptoms of low HR to patient. Call to provider to report rhythm change, requests atropine, order received and read back. Atropine prepared, patient and allergies identified, atropine administered. Call to provider to report left heart block, LBBB. Then correctly identified as third-degree block. Order for more atropine. Alternatives discussed (dopamine, epi). Pacing options discussed.
• Calm, Confident Manner:	E	**A**	D	B	
• Clear Communication:	E	**A**	D	B	
• Well-Planned Intervention/ Flexibility:	E	**A**	D	B	
• Being Skillful: B		E	**A**	D	Call to provider to report atrial flutter (fib) and recommends cardioversion or CCB. Dr asks for VS. Diltiazem suggested, dosages calculated. Patient identified, bolus and drip initiated. Call to physician to report low BP and request IV fluids, cardioversion. Order received- remember to read back. Call to provider symptoms of fluid overload, crackles noted.
					Patient noted to be in Vtach. Code blue called, CPR started, airway maintained. Epi given (q3-5 min). Fast patches applied (remember to defib). Shock delivered at 120j.
REFLECTING: (6)*					Team discussed scenario and the arrhythmias (symptomatic bradycardias) encountered. Discusses clinical symptoms of arrhythmias and associated interventions. Discussed pacing options (transcutaneous, transvenous, permanent) for bradycardias. Teamwork identified as a strength.
• Evaluation/Self-Analysis:	E	**A**	D	B	
• Commitment to Improvement:	**E**	A	D	B	

*End-of- Program Student Learning Outcomes

	Transcutaneous pacing demonstrated. Discussed recognition of a-fib and associated symptoms. Talked about goals of diltiazem therapy. Discussed importance on providing PHM to physician as an aid to guide treatment. Explanation and demonstration of synchronized cardioversion; discussed differences between cardioversion and defibrillation, the need for sedating medications prior to delivering shock. Discussed the importance of immediate CPR with pulseless Vtach. Discussed alternative to epi (amiodarone). Roles of the code team discussed. Potential causes of code blue discussed (review of chart reveals low K+. Defibrillation discussed, starting low and increasing joules with subsequent shocks.
SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric **Developing to accomplished is required for satisfactory completion of this simulation.**	**You are satisfactory for this scenario, good job!**

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2022

*End-of- Program Student Learning Outcomes

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

*End-of- Program Student Learning Outcomes