

**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)
2/18/2022	2H	vSim: Rachael Heidebrink	2/21/2022
3/4/2022	2H	vSim: Junetta Cooper	3/4/2022
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
Competencies:	s	s	s	s	s	s	na	s	S									
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	s	s	s	s	s	s	na	s	S									
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	s	s	s	s	s	s	na	s	S									
c. Evaluate patient's response to nursing interventions. (Reflecting)	s	s	s	s	s	s	na	s	S									
d. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	na	na	s	na	s	s	na	s	S									
e. Administer medications observing the six rights of medication administration. (Responding)	s	s	s	na	na	na	na	s	S									
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	na	na	na	na	na	s	na	na	S									
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. (Responding)	s	s	s	s	s	s	na	na	S									
Faculty Initials	BL	BS	CB	AR	AR	AR	BL	BL	BL									
Clinical Location	4p	4c	4c	is	Cardiac diagnostics	sp		4p										

Comments:

Week 2-1(a,b,c,e,g) Christina, excellent job this week managing complex patient care situations. You were well prepared for clinical, and you performed very thorough assessments. You were able to administer PO, SQ, IVP, and IV medications, all while following the six rights of medication administration. Keep up the great work! BL
 Week 3- 1a,b,c,e- Good job assessing and providing care to your mechanically ventilated, critical care patient. IVP and IV medications were administered observing the rights of medication administration. BS
 Week 4 (1d): You did a great job finding cardiac rhythm strips for your ECG book. CB

*End-of- Program Student Learning Outcomes

Week 5 (1c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Great job! Preceptor comments: Satisfactory in all areas except Demonstrates professionalism in nursing (Excellent). “Shy, engaging among staff, great questions.” AR

Week 6 (1b)- Satisfactory discussion via CDG posting related to your Cardiac Diagnostics clinical experience. Great job! Preceptor comments: Excellent in all areas. “Christina was able to observe a cardioversion and a chemical stress; we spoke about PDA’s and atrial fib. She watched a Definity infusion and spoke to Pacemaker nurse.” AR

Week 7 (1b,c)- Satisfactory discussion via CDG posting related to your Special Procedures clinical experience! Great job! Preceptor Comments: Satisfactory in all areas. “Christina was able to get experience with IV starts; she also saw a paracentesis, fistulogram, leg angio and HD catheter insertion.” AR

Week 8/Make-Up-1(a-e) Christina, you did an excellent job this week caring for your patient. Your medication pass was very well done, and you followed all six rights of medication administration. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

Comments:

Week 2-2(a,b,c) Excellent job this week monitoring your patient closely for potential risks, as well as anticipating possible early complications. Your patient was admitted for sepsis and was receiving fluid replacement. You noticed that your patient was having high temperatures throughout the day, as well as increased swelling in their bilateral lower extremities. You responded appropriately by notifying the bedside RN so the physician could be updated. Excellent job! BL

Week 2-2(d,e) Satisfactory Nursing Care Plan. Please see the Care Plan Rubric at the end of this document for my feedback. Excellent job in debriefing discussing cultural considerations and racial inequalities that were assessed while caring for your patient. BL

Week 3- 2a- Nice job correlating the relationships among your patient’s disease process, history, symptoms, and present condition. Nice job also of respecting the family’s need for privacy during what had to be a difficult time. BS

*End-of- Program Student Learning Outcomes

Week 4 (2a): You did a great job with your pathophysiology. Please remember if you use a reference, always include an intext citation for that reference. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

Comments:

Week 2-3(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

Week 4 (3a): You were able to observe communication barriers between interdisciplinary team members that cared for your patient this week. CB

Week 5 (3c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Keep up the great work! AR

Week 6 (3b,c)- Satisfactory documentation of Quality Scavenger Hunt, and satisfactory discussion via CDG posting. Great job! AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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:	s	s	s	s	s	s	na	s	S									
a. Critique examples of legal or ethical issues observed in the clinical setting. (Interpreting)																		
b. Engage with patients and families to make autonomous decisions regarding healthcare. (Responding)	na	s	s	s	s	s	na	s	S									
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. (Responding)	S U	S U	s	s	s	s	na	s	S									
Faculty Initials	BL	BS	CB	AR	AR	AR	BL	BL	BL									

Comments:

Week 2-4(a) Excellent job this week during debriefing in which you were actively involved in the discussion of this competency. You gave great examples of legal and ethical issues observed in the clinical setting. BL

Week 2-4(c) Unfortunately, I had to change this competency to a “U” this week as it relates to responsibility. You did not submit your clinical tool in your dropbox by the appropriate due date and time. Going forward, please be sure that your clinical tool is submitted every week by Friday at 0800. Remember to address this “U” according to the instructions on page 2 of this document for next week. BL

Week 3-4c- You are receiving U in this competency for not addressing below as to how you will prevent this from happening again. BS

Week 4 I will double check my tool to ensure it was sent ,and sent at the appropriate time to avoid this happening again. CB

Week 4 (4b): You did a great job engaging with your patient this week, making him feel comfortable and safe during a difficult time. CB

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

Comments:

Week 2-5(c,e) Excellent job this week during debriefing in which you were actively involved in the discussion of these competencies. BL

Week 3- 5c- Nice job describing how nursing informatics can create a culture of safety. BS

Week 4 (5a): You did a great job in debriefing, reflecting on your clinical time this week in the ICU. CB

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:	s	s	s	s	s	s	na	s	S									
a. Establish collaborative partnerships with patients, families, and coworkers. (Responding)																		
b. Teach patients and families based on readiness to learn and discharge learning needs. (Interpreting & Responding)	na	Na S	s	s	s	s	na	s	S									
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. (Responding)	s	s	s	s	s	s	na	s	S									
d. Deliver effective and concise hand-off reports. (Responding)	s	s	s	na	na	na	na	s	S									
e. Document interventions and medication administration correctly in the electronic medical record. (Responding)	S NI	s	s	na	na	na	na	s	S									
f. Consistently and appropriately posts in clinical discussion groups. (Responding and Reflecting)	U S	S U	s	s	s	s	na	na	S									
Faculty Initials	BL	BS	CB	AR	AR	AR	BL	BL	BL									

Comments:

Week 2-6(e) Overall, you did very well with your documentation this week. This competency was changed to an “NI” because you required a lot of faculty guidance to ensure you were documenting accurately and completely. With that being said, you did a great job taking my feedback on Tuesday and applying it to all your documentation on Wednesday. Going forward, you will want to try to work on completing your documentation in a more timely manner. This will become easier for you as you gain more experience throughout the semester. BL

Week 2-6(f) Great job with your Nursing Care Plan CDG this week. BL

Week 3- 6a,b,c- Nice job discussing collaboration in your CDG regarding the nurse speaking with and explaining things to the family in a caring manner. BS

*End-of- Program Student Learning Outcomes

Week 3- 6f- You are receiving a U in this competency for not summarizing your EBP article in your CDG. I will need you to summarize the article and submit to me via email by Wednesday, February 2 at 0800. Remember this must be a minimum of 200 words. You will also need to respond below as to how you will prevent this from happening again. BS

Week 4 I will clearly label my answers to each question and make sure I read all the instructions before turning in my work to prevent this from happening again By providing the additional information requested, your CDG is now satisfactory. BS

Week 4 (6f): Christina, you did a great job on your cdg this week. Please just remember, if you have a reference, you must provide an intext citation. CB

Week 5 (6c,f)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Great job!! AR

Week 6 (6f)- Satisfactory CDG postings related to Cardiac Diagnostics and Quality Scavenger Hunt clinical experiences. Keep up the great work! AR

Week 7 (6f)- Satisfactory CDG posting related to your Special Procedures clinical experience. Great work! AR

Week 8/Make-Up-6(e) You did an excellent job with all of your documentation this week in clinical. Your documentation was completed in a timely manner and accurate. Keep up the great work! BL

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

Comments:

Week 2-7(d) Christina, you are very caring and compassionate when providing patient care. You also do an excellent job communicating with your patients. Keep up the great work! BL

Week 3- 7a,b-You found an acceptable EBP article, I will just need your summary. BS

Week 4 (7d): Christina, this week you were very kind and compassionate with your patient, who was going through a very difficult time. Great job! CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Skills Lab Evaluation Tool
AMSN
2022

Skills Lab Competency Evaluation	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)*
Performance Codes: S: Satisfactory U: Unsatisfactory	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	FB	CB	BL	AR	BS	AR	CB/FB	BL	BL/BS	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

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

Meditech: 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

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 satisfactorily 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

*End-of- Program Student Learning Outcomes

and preparing to administer 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: Christina Lopez

Clinical Date: 1/18-1/19/2022

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

Student Name: **Christina Lopez**

Clinical Date: **2/1/22-2/2/22**

<p>1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)</p> <ul style="list-style-type: none"> • Current Diagnosis (1) • Past Medical History (1) 	<p>Total Points: 2 Comments: You provided your patient's current diagnosis and past medical history. CB</p>
<p>2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)</p> <ul style="list-style-type: none"> • Pathophysiology-what is happening in the body at the cellular level (1) 	<p>Total Points: 1 Comments: You described in great detail what happens to your body with the diagnosis of end stage liver disease. Great job! CB</p>
<p>3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)</p> <ul style="list-style-type: none"> • All patient's signs and symptoms included (1) • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1) • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1) 	<p>Total Points: 3 Comments: You were able to explain your patient's signs and symptoms and how they correlated with his diagnosis, along with expected signs and symptoms for end stage liver disease. CB</p>
<p>4. Correlate the patient's current diagnosis with all related labs. (4 points total)</p> <ul style="list-style-type: none"> • All patient's relevant lab result values included (1) • Rationale provided for each lab test performed (1) • Explanation provided of what a normal lab result should be in the absence of current diagnosis (1) • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1) 	<p>Total Points: 4 Comments: You addressed all lab values, normal ranges, and how the diagnosis of your patient correlates to those lab values. CB</p>
<p>5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)</p> <ul style="list-style-type: none"> • All patient's relevant diagnostic tests and results included (1) 	<p>Total Points: 4 Comments: You described all diagnostic test for your patient and how the results correlated with his diagnosis. You also described what normal test</p>

<ul style="list-style-type: none"> • Rationale provided for each diagnostic test performed (1) • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1) • Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1) 	<p>results would be. CB</p>
<p>6. Correlate the patient's current diagnosis with all related medications. (3 points total)</p> <ul style="list-style-type: none"> • All related medications included (1) • Rationale provided for the use of each medication (1) • Explanation of how each of the patient's relevant medications correlate with current diagnosis (1) 	<p>Total Points: 3 Comments: You listed all appropriate medication, and explained why these medications were ordered for your patient. CB</p>
<p>7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total)</p> <ul style="list-style-type: none"> • All pertinent past medical history included (1) • Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) 	<p>Total Points: 2 Comments: You correlated your patient's past medical history with his current diagnosis. Good job! CB</p>
<p>8. Describe nursing interventions related to current diagnosis. (1 point total)</p> <ul style="list-style-type: none"> • All nursing interventions provided for patient explained and rationales provided (1) 	<p>Total Points: 1 Comments: You listed appropriate nursing interventions and why they were important for your patient and his diagnosis. CB</p>
<p>Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory</p>	<p>20 Christina, you did a great job with your pathophysiology! CB</p>

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

vSim Evaluation	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
Performance Codes: S: Satisfactory U: Unsatisfactory								
Evaluation	U	S	U					
Faculty Initials	AR	BL	BL					
Remediation: Date/Evaluation/ Initials	2/21/2022 S AR	NA	3/4/2022 S BL					

* Course Objectives

2/18/2022- vSim: Rachael Heidebrink: Initially you had not enrolled in the AMSN 2022 class for vSim Pharmacology therefore your results weren't visible and you received an unsatisfactory. Once you joined the class your results were visible and your completion satisfactory. AR

3/4/2022-vSim: Junetta Cooper-Did not complete pre-simulation quiz by the due date and time. Pre-simulation quiz was resubmitted and you are now satisfactory. BL

*End-of- Program Student Learning Outcomes

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **C. Lopez** OBSERVATION DATE/TIME: **3/2/22** SCENARIO #: **1**

CLINICAL JUDGMENT						OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p style="color: red;">Enter room and begins assessment. Establishes orientation. Patient identified. VS. Rhythm change noted.</p> <p style="color: blue;">Inquiring about patient symptoms, remember to identify patient. Patient CO dizziness, palpitations. Patient showing signs of fluid overload following bolus.</p> <p style="color: green;">Patient found unresponsive.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p style="color: red;">Spo2 noted to be low, O2 applied. Heart rhythm interpreted to be 2nd degree type 2. Rhythm change noted and interpreted as 3rd degree block.</p> <p style="color: blue;">Rhythm noted to be a-fib. Patient symptoms determined to be signs of fluid overload.</p> <p style="color: green;">Patient unresponsive, pulseless.</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • 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 						<p style="color: red;">Fast patches applied, patient CO dizziness and being tired. Call to physician, informs of heart block (good report). Suggests atropine and pacing. Order for atropine received and read back. Atropine prepared and administered (remember to identify patient). Called a MET. Complete heart block noticed. Alternate drugs for complete heart block discussed (epi, dopamine). Good communication among team members.</p> <p style="color: blue;">Call to provider, patient identified, report given. Amiodarone recommended. Diltiazem recommended. Dose requested from physician. Bolus/drip dose provided. Order received and read back. Bolus and drip initiated. Patient CO increasing dizziness. Attempted Valsalva maneuvers. Fast patches applied. A-fib explained to patient. Call to provider (low BP). Diltiazem drip stopped. Alternate medications proposed. Fluid bolus recommended. Order received. Recognized that patient is experiencing fluid overload. (PMH shows an EF of 40%). Cardioversion suggested.</p> <p style="color: green;">Patient found unresponsive, Code Blue, CPR initiated, patches applied, , shock delivered, epi given q3 min, (remember to maintain airway). Amiodarone mentioned as an alternative to epi. (300/150/drip).</p>

*End-of- Program Student Learning Outcomes

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Discussed first scenario, identification and treatments for symptomatic bradycardias. Reviewed chart to look for causes of heart block (metoprolol, patient history). Talked about holding medication to see if sinus rhythm gets restored. Discussed pacing options for symptomatic bradycardias (transcutaneous, transvenous, permanent). Talked about the importance of adjusting electrical current to obtain capture, need for medication). Good teamwork!</p> <p>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.</p> <p>Discussed the importance of immediate CPR with pulseless Vtach. Nice job getting fast patches applied quickly. Discussed alternative to epi (amiodarone). Roles of the code team discussed (recorder, CPR, airway, meds, lead). Potential causes of code blue discussed (review of chart reveals low K+). Defibrillation discussed, starting low and increasing joules with subsequent shocks.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>You are Satisfactory for this simulation. Nice wrok!</p>

*End-of- Program Student Learning Outcomes

**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