

**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)
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>	S	S	S	S	S	S	NA	S	S									
a. Manage complex patient care situations with evidence of preparation and organization. <b>(Responding)</b>	U																	
b. Assess comprehensively as indicated by patient needs and circumstances. <b>(Noticing)</b>	S NI	S	S	S	S	S	NA	S	S									
c. Evaluate patient's response to nursing interventions. <b>(Reflecting)</b>	S	S	S	S	S	S	NA	S	S									
d. Interpret cardiac rhythm; determine rate and measurements. <b>(Interpreting)</b>	S	S	S	NA	NA	NA	NA	S	S									
e. Administer medications observing the six rights of medication administration. <b>(Responding)</b>	S	NA	S	NA	NA	NA	NA	S	S									
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. <b>(Responding)</b>	S NA	NA	NA	NA	NA	NA	NA	S NA	NA									
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
<b>Faculty Initials</b>	<b>BL</b>	<b>BS</b>	<b>CB</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>BL</b>	<b>BL</b>	<b>BL</b>									
<b>Clinical Location</b>	<b>4P</b>	<b>4C</b>	<b>4C</b>	<b>IS</b>	<b>CD/SH</b>	<b>SP</b>		<b>4P</b>										

Comments:

Week 2-1(a-e, g) Audra, overall you did a nice job in clinical this week. There are a few areas that I would like you to focus on for improvement of managing complex patient situations, and assessing comprehensively as indicated by patient needs and circumstances. On Tuesday, you were unprepared for clinical because you did not have your stethoscope or pen light. It was discovered that you did not have your stethoscope after you asked another student if you could borrow theirs at 1200. You must always come to clinical prepared with the tools needed to perform a comprehensive head to toe assessment in order to care for your patient safely. Additionally, we also discussed in clinical the importance of utilizing the hand-off report sheet for all your patient information and data to help with organization. You had several sheets

\*End-of- Program Student Learning Outcomes

of paper with different information written on each. This made it challenging for you to find certain information about your patient because you had to search through so many different sheets. It is certainly ok to have additional notes and reminders on a separate sheet of paper to help you with all your tasks throughout the shift, however, it is best to have one sheet of paper with all your patient information you are given during report. Lastly, I would like to see you become more confident with your comprehensive head to toe assessment. While reviewing documentation together, there were times that you were unsure about the assessment information asked about. Take some time to review the comprehensive head to toe assessment to help you feel more prepared and confident. You did an excellent job with your medication administration on both clinical days. You had the opportunity to administer PO, SQ, IVP, and IV medications, all while following the six rights. You also did an excellent job interpreting your patient's cardiac rhythm as well. Keep up your hard work, you can do this! Please be sure to address the "U" according to the instructions on page 2 of this document for next week. BL

Week 3 I double check my nursing bag this morning and made sure my stethoscope was in there. Will continue to double check my bag to make sure everything is in there the night before and before leaving the house for school. BS

Also trying to not write super big on one page and use several pages when I do so. I want to remember things that are told to me so I write them I need breathe and slow down write smaller I will continue to work on this it is a bad habit I picked up. BS

Week 3- 1a,b- Good job for your first day in Critical Care. Something you should work on is utilizing a report sheet for your patient information. You will not be able to keep track of information when writing on multiple sheets of paper, especially for a high acuity patient like you had this week. Please keep this in mind for next week. BS

Week 4 (1a,b,c,d): Audra, you did a great job with your patient his week. You appropriately managed the care that he needed, and were able to assess interventions that were performed for the care that he needed. The only suggestion that I have is to be more organized with all of the information and data collected, by using the patient profile data sheets. CB

Week 5 (1c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience! Great job! Preceptor comments: Excellent in all areas. "Helpful and engaging." AR

Week 6 (1b)- Satisfactory discussion via CDG posting related to your Cardiac Diagnostics clinical experience. Great job. Comments per Preceptor: Excellent in all areas. "Today we were very slow with nothing in the morning; we reviewed bubble study, Definity, and she saw a pacer check; explained cardioversion and synchronization. We have a TEE later in ICU and she may stop in and observe. Discussed severe aortic stenosis and talked about valve replacement; observed a 24<sup>o</sup> monitor applied and an EKG." AR

Week 7 (1b.c)- Your discussion related to Special Procedures was satisfactory (see comments related to the CDG Grading Rubric for 6f). Preceptor comments: "Satisfactory in all areas". For future weeks always include the "clinical location" in the appropriate box above. AR

Week 8/Make-Up-1(a-e,g) Audra, 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

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

**Comments:**

Week 2-2(b,c) Audra, great job monitoring your patient’s high blood pressures very closely this week. You noticed the patient’s blood pressure was elevated when you obtained your morning vital signs, informed the bedside RN, and then responded by administering PRN labetalol IVP to help lower the blood pressure. Great job! BL

Week 2-2(e) Excellent job in debriefing discussing cultural considerations and racial inequalities that were assessed while caring for your patient. BL

Week 3- 2d,e- Please see rubric below for feedback on your Care Plan. Nice job discussing your patient during debriefing. BS

Week 4 (2a): Great job on your pathophysiology, please see the grading rubric below. Please answer question #8 related to nursing interventions related to your patient’s diagnosis with an explanation/rationale, and add it to the comment box under your original cdg by Wednesday 2/9/22. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

\*End-of- Program Student Learning Outcomes

**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
<b>Competencies:</b>	S	S	S	S	S	S	NA	S	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>	S NA	NA	NA	NA	NA S	NA	NA	NA	S									
c. Discuss strategies to achieve fiscal responsibility in clinical practice. <b>(Responding)</b>	S	S	S	S	NA S	NA	NA	S	S									
d. Clarify roles & accountability of team members related to delegation. <b>(Noticing)</b>	S	S	S	S	S	S	NA	S	S									
e. Determine the priority patient from assigned patient population. <b>(Interpreting) (Patient Mgmt.)</b>	S NA	NA																
<b>Faculty Initials</b>	<b>BL</b>	<b>BS</b>	<b>CB</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>BL</b>	<b>BL</b>	<b>BL</b>									

**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 3(a): You were able to see communication barriers between interdisciplinary team members related to your patient's care. 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 completion of Quality Scavenger Hunt documentation. Your responses to the CDG questions were minimal. For future CDG postings make sure your answers are in depth (see CDG Grading Rubric). AR

\*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>	S	S	S	S	S	S	NA	S	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>	S	S	S	S	S	S	NA	S	S									
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. <b>(Responding)</b>	S U	S	S	S	S	S	NA	S	S									
<b>Faculty Initials</b>	<b>BL</b>	<b>BS</b>	<b>CB</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>BL</b>	<b>BL</b>	<b>BL</b>									

**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” as it relates to responsibility. On Tuesday, you came to clinical without your stethoscope or pen light. Please be sure to always come to clinical prepared with all the appropriate tools that you need to care for your patient safely. Remember to address this “U” according to the instructions on page 2 of this document for next week. BL

Week 3 I will check my nursing bag the night before and before I leave the next morning to make sure everything is in there so this does not happen again. BS

Week 3- 4c- Professional behavior exhibited on the clinical floor. BS

Week 4 (4b): Audra, you did a great job engaging with your patient this week. You made him feel comfortable during this tough situation that he is going through, great job! 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
<b>Competencies:</b>	S	S	S	S	S	S	NA	S	S									
a. Reflect on your overall performance in the clinical area for the week. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
b. Demonstrate initiative in seeking new learning opportunities. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. <b>(Interpreting)</b>	S	S	S	S	S	S	NA	S	S									
d. Perform Standard/Standard Plus Precautions. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
e. Practice use of standardized EBP tools that support safety and quality. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
f. Utilize faculty feedback to improve clinical performance. <b>(Responding &amp; Reflecting)</b>	S	S	S	S	S	S	NA	S	S									
<b>Faculty Initials</b>	<b>BL</b>	<b>BS</b>	<b>CB</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>BL</b>	<b>BL</b>	<b>BL</b>									

**Comments:**

Week 2-5(c,e) Excellent job this week during debriefing in which you were actively involved in the discussion of these competencies, as well as in your CDG. You researched and shared an interesting EBP article about the effects of Hegu Point Ice Massage and 2% Lidocaine Gel on arteriovenous fistula puncture-related pain in hemodialysis patients. Great job! BL

Week 3- 5a- Good overall job in the clinical environment. I would like you to focus on organization for next week. While caring for your next patient, try and look at the big picture, and prioritize your care based on that. BS

Week 4 (5a): Great job during debriefing, reflecting on the care you provided for your patient and your patient’s diagnosis. 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
<b>Competencies:</b>	S	S	S	S	S	S	NA	S	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>	S	S	S	S	S	S	NA	S	S									
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
d. Deliver effective and concise hand-off reports. <b>(Responding)</b>	S	S	S	NA	NA	NA	NA	S	S									
e. Document interventions and medication administration correctly in the electronic medical record. <b>(Responding)</b>	S NI	NA	S	NA	NA	NA	NA	S	S									
f. Consistently and appropriately posts in clinical discussion groups. <b>(Responding and Reflecting)</b>	S	S	S	S	S NI	S U	NA	S NA	S									
<b>Faculty Initials</b>	<b>BL</b>	<b>BS</b>	<b>CB</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>BL</b>	<b>BL</b>	<b>BL</b>									

**Comments:**

Week 2-6(e) Overall, you did 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) Audra, excellent job with your CDG post this week. You did a great job researching and summarizing your EBP article titled “Comparison of the Effects of Hegu Point Ice Massage and 2% Lidocaine Gel on Arteriovenous Fistula Puncture-Related Pain in Hemodialysis Patients: A Randomized Controlled Trial.” You also did a nice job discussing nursing informatics and technology used in the healthcare setting. BL

Week 3- 6c- Nice job collaborating with and learning from your nurse this week. Care Plan was satisfactory, please see rubric for feedback. BS

\*End-of- Program Student Learning Outcomes

Week 3 I will work on completing documentation more in a timely manner as I gain experience and remember what needs to be done from my last med-surg clinical about 2 years ago this one of my personal goals for myself as well.

Week 4 (6e,f): Audra, you did a great job with documentation this week, referring to the documentation guidelines when you had questions. You successfully administered medication to your patient, being prepared with any questions that I had. You appropriately completed your cdg, please refer to the pathophysiology grading rubric, and please answer question #8 related to nursing interventions related to your patient's diagnosis with an explanation/rationale, and add it to the comment box under your original cdg by Wednesday 2/9/22. CB

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

Week 6 (6f)- Your discussion posting for Cardiac Diagnostics was satisfactory (per CDG Grading Rubric), however your posting for the Quality Scavenger Hunt was minimal and did not meet the minimum number of words (per CDG Grading Rubric). For all future postings make sure to follow all aspects of the rubric. AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

WEEK 7 I will make sure to check the to word count on the rubric in the future to not get an NI in this field on the tools. AR

Week 7 (6f)- Your CDG posting related to Special Procedures is unsatisfactory for the following reasons (see CDG Grading Rubric): You did not provide a reference or in-text citation. While your word count improved from the previous week, you had many issues with grammar, sentence structure, organization, and punctuation. I suggest reading your discussion out loud prior to submitting; this should help you identify areas for improvement. You will also need to address the U (see directions at the beginning of this tool) correctly on your next week's tool. AR

Week 8. I have re-read my paper this week with an intext citation I believe my sentence structure had improve than you. The words on this paper were more than 250. I will continue to read my paper out loud in hopes that this helps with future papers. BL

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

**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>	S	S	S	S	S	S	NA	S	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>	S	S	S	S	S	S	NA	S	S									
c. Comply with the FRMCSN "Student Code of Conduct Policy." <b>(Responding)</b>	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. <b>(Responding)</b>	S	S	S	S	S	S	NA	S	S									
<b>Faculty Initials</b>	<b>BL</b>	<b>BS</b>	<b>CB</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>BL</b>	<b>BL</b>	<b>BL</b>									

**Comments:**

Week 2-7(d) Audra, 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 4 (7d): Audra, you did a great job caring for your patient this week. You provided a safe environment, and also provided compassionate care. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Skills Lab Evaluation Tool  
AMSN  
2022

<b>Skills Lab Competency Evaluation</b>	<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)*
Performance Codes:  S: Satisfactory  U: Unsatisfactory	<b>Date:</b> 1/11/2022	<b>Date:</b> 1/11/2022	<b>Date:</b> 1/11/2022	<b>Date:</b> 1/11/2022	<b>Date:</b> 1/13/2022	<b>Date:</b> 1/13/2022	<b>Date:</b> 1/14/2022	<b>Date:</b> 1/14/2022	<b>Date:</b> 1/14/2022	<b>Date:</b> 1/14/2022
Evaluation:	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>
Faculty Initials	<b>FB</b>	<b>BS</b>	<b>BL</b>	<b>AR</b>	<b>FB</b>	<b>AR</b>	<b>CB/FB</b>	<b>BS</b>	<b>BL/BS</b>	<b>AR</b>
<b>Remediation:</b> <b>Date/Evaluation/Initials</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>

**\*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 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:** Audra Howes

**Clinical Date:** 1/26/2022

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

Student Name: **Audra Howes**

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

<p><b>1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)</b></p> <ul style="list-style-type: none"> <li>• Current Diagnosis (1)</li> <li>• Past Medical History (1)</li> </ul>	<p><b>Total Points: 2</b>  <b>Comments: You gave a very detailed summary of your patient's current diagnosis and past medical history. CB</b></p>
<p><b>2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)</b></p> <ul style="list-style-type: none"> <li>• Pathophysiology-what is happening in the body at the cellular level (1)</li> </ul>	<p><b>Total Points: 1</b>  <b>Comments: Audra, great job discussion end stage liver disease and what is happening at the cellular level. CB</b></p>
<p><b>3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)</b></p> <ul style="list-style-type: none"> <li>• All patient's signs and symptoms included (1)</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)</li> <li>• Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1)</li> </ul>	<p><b>Total Points: 3</b>  <b>Comments: You provided all of your patient's signs and symptoms with a description of why these correlate with the diagnosis. You also explained which symptoms are usually seen that your patient did not have. Good job! CB</b></p>
<p><b>4. Correlate the patient's current diagnosis with all related labs. (4 points total)</b></p> <ul style="list-style-type: none"> <li>• All patient's relevant lab result values included (1)</li> <li>• Rationale provided for each lab test performed (1)</li> <li>• Explanation provided of what a normal lab result should be in the absence of current diagnosis (1)</li> <li>• Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1)</li> </ul>	<p><b>Total Points: 4</b>  <b>Comments: You did a great job with the chart to showing what your patients lab values are, what is normal, and why they are effected by his diagnosis. CB</b></p>
<p><b>5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)</b></p> <ul style="list-style-type: none"> <li>• All patient's relevant diagnostic tests and results included (1)</li> <li>• Rationale provided for each diagnostic test performed (1)</li> <li>• Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1)</li> <li>• Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1)</li> </ul>	<p><b>Total Points: 4</b>  <b>Comments: You explained diagnostic test your patient had, why the results were related to your patient's diagnosis, and what normal results should be. Good job! CB</b></p>
<p><b>6. Correlate the patient's current diagnosis with all related</b></p>	<p><b>Total Points: 3</b></p>

<p><b>medications. (3 points total)</b></p> <ul style="list-style-type: none"> <li>• All related medications included (1)</li> <li>• Rationale provided for the use of each medication (1)</li> <li>• Explanation of how each of the patient's relevant medications correlate with current diagnosis (1)</li> </ul>	<p><b>Comments: You explained all medication your patient was prescribed and how it was related to your patient's diagnosis. CB</b></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)</li> <li>• Explanation of how patient's pertinent past medical history correlates with current diagnosis (1)</li> </ul>	<p><b>Total Points: 2</b>  <b>Comments: You appropriately explained your patient's past medical history and how it was pertinent to his current diagnosis. Great job! CB</b></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)</li> </ul>	<p><b>Total Points: 0</b>  <b>Comments: Audra, you did not respond to this in your pathophysiology. Please add this to the comment box under your original cdg. CB</b></p>
<p>Total possible points = 20  17-20 = Satisfactory  14-16 = Needs improvement  &lt;13 = Unsatisfactory</p>	<p><b>19</b></p>

Advanced Medical Surgical Nursing 2022  
Simulation Evaluations

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

\* Course Objectives

2/19/2022- vSim Rachael Heidebrink: Satisfactory completion and documentation. AR

**Lasater Clinical Judgment Rubric Scoring Sheet**

\*End-of- Program Student Learning Outcomes

STUDENT NAME: **A. Howes**

OBSERVATION DATE/TIME: **3/2/22**

SCENARIO #: **1**

CLINICAL JUDGMENT						OBSERVATION NOTES
<p><b>COMPONENTS NOTICING: (1, 2, 5)*</b></p> <ul style="list-style-type: none"> <li>• Focused Observation:           <b>E</b>       A       D       B</li> <li>• Recognizing Deviations from Expected Patterns:           E       <b>A</b>       D       B</li> <li>• Information Seeking:           E       <b>A</b>       D       B</li> </ul>						<p>Identifies patient, begins assessment. HR noted to be bradycardic. Rhythm change noticed.</p> <p>Patient identified, CO palpitations, monitor applied, noticed elevated heart rate. VS. Patient CO SOB. Crackles noted.</p> <p>Patient noted to be unresponsive, pulseless.</p>
<p><b>INTERPRETING: (2, 4)*</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data:               E       <b>A</b>       D       B</li> <li>• Making Sense of Data:       E       <b>A</b>       D       B</li> </ul>						<p>Interprets HR to be bradycardic, rhythm sinus brady. Rhythm change noticed, determined to be 2<sup>nd</sup> degree type 2.</p> <p>Heart rhythm interpreted to be a-fib, symptomatic, and in need of treatment. SOB interpreted to be because of fluid overload.</p> <p>Rhythm determined to be Vtach.</p>
<p><b>RESPONDING: (1, 2, 3, 5)*</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner:       E       <b>A</b>       D       B</li> <li>• Clear Communication:       <b>E</b>       A       D       B</li> <li>• Well-Planned Intervention/ Flexibility:                   <b>E</b>       A       D       B</li> <li>• Being Skillful:                   B                   E       <b>A</b>       D</li> </ul>						<p>Call to provider (identify yourself), requests atropine. Order received and read back. Atropine prepared, patient identified, medication administered. Call to provider (identify yourself) to inform of new rhythm, recommends transcutaneous pacing, epi drip.</p> <p>Call to provider to report a-fib with RVR, requests CCB (diltiazem). Correct dosages provided, order received and read back. Medication prepared, patient identified, bolus infused, drip initiated. Call to provider to report no relief in symptoms, lower BP, recommends cardioversion. Order for fluid bolus received. Fluid prepared, patient identified, bolus initiated. Patient with SOB.</p> <p>Patient unresponsive and pulseless, CPR initiated, (call Code Blue), patches applied, shock delivered, epi given, joules increased, second shock delivered. Remember to protect airway. Amiodarone discussed as an alternative to epi (300/150/drip).</p>
<p><b>REFLECTING: (6)*</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis:       E       <b>A</b>       D       B</li> <li>• Commitment to Improvement: <b>E</b>       A       D       B</li> </ul>						<p>Discussed first scenario, identification and treatments for symptomatic bradycardias. Talked about the different heart blocks and that atropine will likely not work with a complete heart block. 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</p>

\*End-of- Program Student Learning Outcomes

	<p>goals of diltiazem therapy (and amiodarone as an alternative. Discussed importance on providing PHM (low EF) 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><b>SUMMARY COMMENTS:</b>  E = exemplary, A = accomplished, D = developing, B = Beginning  Based off of Lasater's Clinical Judgment Rubric</p> <p><b>Developing to accomplished is required for satisfactory completion of this simulation.</b></p>	<p><b>You are Satisfactory for this simulation. Nice work!</b></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