

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2022

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student:
Semester:

Final Grade: Satisfactory/Unsatisfactory

Date of Completion:

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

Faculty eSignature:

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

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

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
1/25/2022	12H	Left clinical ill after 30 minutes	2/16/2022 12.5H
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	NA	NA	NA	S	S	S	NA	NA	NA	S					
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	S	S	S	NA	NA	NA	S	S	S	NA	S	S	S					
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	S	S	S	NA	NA	NA	S	S	S	NA	S	S	S					
c. Evaluate patient’s response to nursing interventions. (Reflecting)	S	S	S	NA	NA	NA	S	S	S	S	S	S	S					
d. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	NA	S	S	NA	NA	NA	S											
e. Administer medications observing the six rights of medication administration. (Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	S NA	NA	NA	S	NA	NA	NA	S	S	NA	NA	S	NA					
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. (Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
Faculty Initials	FB	FB	FB	AR	AR	AR	AR	AR	AR	AR	AR	AR	AR	BL				
Clinical Location	4N (PM)	3T (PM)	4N (PM)	DH	CM/QC	NA	Pt. advocate / dc planner	4P (PM)		Inf. Center	CD/SH	SP	4P					

Comments:

Week 2 (1f)- This competency was changed to a “NA” because you will perform venipuncture skills during your digestive health clinical rotation. **Make sure to read each competency thoroughly and self-rate based on competency completed that week. FB**

Week 3 (1a,b,c)- Great job managing a group of patients, assessing patients to determine needs and priority of care, and evaluating the patient’s response to care delivered. FB

Week 4 (1b)- Great job assessing your patients and responding to needs appropriately. FB

*End-of- Program Student Learning Outcomes

Week 5 (1f)- Great job performing IV starts during the digestive health clinical. Proper technique and aseptic procedures were followed. Keep up the great work! FB
Week 8 (1c)- Excellent discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Great job! Preceptor comments: Excellent in all areas. “Busy day! LeAnn was very engaged and interested.” AR

Week 9 (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 10 (1b)- Satisfactory discussion via CDG posting related to your Cardiac Diagnostics clinical experience. Great job! Preceptor comments: Excellent in all areas. AR

Week 11 (1b,c)- Satisfactory during your Special Procedures clinical and your discussion via CDG posting. Preceptor comments: Excellent in all areas. “IV starts practice, sterile tray set-up; observed paracentesis and angiograms with stent; asked many thoughtful questions; very engaged in this clinical experience.” AR

Week 12-1(a-e,g) LeAnn, you did an 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

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	NA	NA	NA	S	S	NA	NA	NA	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	NA	NA	NA	S	S	NA	NA	NA	S					
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
c. Recognize changes in patient status and take appropriate action. (Noticing, Interpreting, Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (Noticing, Interpreting, Responding, Reflecting)	NA	S																
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
Faculty Initials	FB	FB	FB	AR	BL													

Comments:

Week 3 (2a,b)- Good use of clinical judgement as you correlate the relationship between patient’s disease process, current symptoms, and present condition. You are also assessing for potential risks and anticipating possible complications as you prioritize care for your assigned patients. Keep up the good work! FB

Week 4 (2c)- Great use of clinical judgement as you monitor for risks and possible complications. FB

Week 12-2(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

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

Comments:

Week 2 (3a)- This competency will be completed during the ICU/4P clinical rotation. (3d,e)- Great discussion, noticing accountability of delegation and the clarification of roles. You also did a great job interpreting facts to determine the need for prioritization of assigned patient during this clinical rotation. FB

Week 3 (3d,e)- You have demonstrated the process of delegation, responsibility, and accountability of the interdisciplinary team members. Great job determining priority care of assigned patients and the priority patient of assigned patients. Keep up the great work! FB

Week 4 (3d, e)- Great job with prioritization and using clinical judgement to determine plan of care. Make sure when delegating care, as the RN you are responsible for knowing the abilities to whom you are delegating. FB

Week 6 (3b)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience! Keep up the great work. RN Comments: Rapid Response- Excellent in all areas; Stroke response- Excellent in all areas. "Great job participating; good luck in Med Surg & ICU!" AR

Make up PM (3d,e)- RN and student comments: Excellent in all areas. Student Goals: "As my last day, I want to combine all I have learned and maintain my composure in prioritizing skills." RN Comments: "Good job balancing the different needs of our patients.". Great job on your last day of Patient Management! Keep up the great work! AR

Week 9 (3c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Keep up the great work! AR

*End-of- Program Student Learning Outcomes

Week 10 (3b,c)- Satisfactory Quality Scavenger Hunt and discussion under CDG posting. 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	NA	NA	NA	NA	NA	S											
a. Critique examples of legal or ethical issues observed in the clinical setting. (Interpreting)	NA																	
b. Engage with patients and families to make autonomous decisions regarding healthcare. (Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. (Responding)	S	S	S	S	S	NA	S	S	S	S	S	S	S					
Faculty Initials	FB	FB	FB	AR	BL													

Comments:

Week 2 (4a)- This competency will be discussed during your ICU/4P clinical rotation. FB

Week 3 (4c)- You have presented yourself in a very professional manner during this clinical rotation. Great job! FB

Week 12-4(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

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

Comments:

Week 2 (5c)- This competency will be completed during the ICU/4P clinical rotation. (5a) Reported on by assigned RN on 1/18/2022 – Satisfactory in all areas except Communication skills, Professionalism, and Attendance (Excellent). Student Goals: Prioritize patient care activities for example: medications before bathing. Additional Preceptor Comments: She is a self-starter; always asking what more she can do and receptive to all tips. Extremely attentive and her patient spoke very highly of her! CO/FB

Week 3 (5a)- Reported on by assigned RN on 1/26/2022 – Satisfactory in all areas except Attendance (Excellent). Student Goals: Time management with having multiple patients. Additional Preceptor Comments: Good attention to detail; good bedside manner. TM/FB

Week 4 (5a)- Reported on by assigned RN on 2/1/2022 - Excellent in all areas. Student Goals: “Stay up to date on charting with multiple patients.” Additional Preceptor Comments: LeAnn did very well staying on top of her patient needs; she did not hesitate to look for learning opportunities.” JB/FB Reported on by assigned RN on 2/2/2022 – Excellent in all areas. Student Goals: “Keep in mind cluster care with 4 patients to manage time and efficiency.” Additional Preceptor Comments: LeAnn was extremely helpful with patient care and took initiative with med pass”. CM/FB

Week 6 (5c)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. AR

Week 12-5(b) LeAnn, you do an excellent job working independently and taking initiative in completing nursing interventions for your patient. You consistently ask great questions to help improve your knowledge and overall care as well. Keep up all your hard work! BL

*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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	NA	NA	NA	NA	S	S	NA	NA	NA	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)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. (Responding)	S	S	S	NA	S	NA	S	S	S	S	S	S	S					
d. Deliver effective and concise hand-off reports. (Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
e. Document interventions and medication administration correctly in the electronic medical record. (Responding)	S	S	S	NA	NA	NA	NA	S	S	NA	NA	NA	S					
f. Consistently and appropriately posts in clinical discussion groups. (Responding and Reflecting)	S	S	S	NA	S	NA	S	NA	S	S	S	S	S					
Faculty Initials	FB	FB	FB	AR	BL													

Comments:

Week 2 (6d)- Satisfactory hand-off report competency rubric completed with a score of 30 by assigned RN and returned to faculty. RN comments: Well organized and thorough. Excellent job! (6f)- CDG was posted following all rubric criteria and on-time. FB

Week 3 (6f)- CDG posting is satisfactorily completed following CDG rubric criteria and on time. FB

Week 4 (6e)- Good job recognizing the importance of medication reconciliation and how collaboration assists with positive patient outcomes for the patient. FB

Week 6 (6f)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Great job! AR

Week 8 (6c,f)- Excellent discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience! Keep it up! AR

Week 9 (6c,f)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Great work! AR

*End-of- Program Student Learning Outcomes

Week 10 (6f)- Satisfactory discussion via CDG posting related to your Cardiac Diagnostics and Quality Scavenger Hunt clinical experiences. Keep up the great work!
AR

Week 11 (6f)- Satisfactory discussion via CDG posting related to your Special Procedures clinical experience. Keep up the great work as you complete the semester!
AR

Week 12-6(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 Nursing Care Plan CDG. 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	NA	S	NA	S	S	S	S	NA	NA	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)	S	S	S	NA	S	NA	S	S	S	NA	NA	NA	NA					
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	S	S	S	NA	S	S	S	S	S	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	NA	S	S	S	S	S	S	S					
Faculty Initials	FB	FB	FB	AR	BL													

Comments:

Week 6 (7a)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Keep up the great job! AR

Midterm- You have done an excellent job in all clinical experiences the first half of the semester! Keep up the great work as you complete the course! AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

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	FB	FB	FB	FB	FB	FB	FB	FB	FB
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 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: LeAnn Erf

Clinical Date: 4/5-4/6/2022

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

<u>vSim Evaluation</u>								
	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)
Performance Codes: S: Satisfactory U: Unsatisfactory								
	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	S	S	S		
Faculty Initials	AR	AR	AR	AR	AR	AR		
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA		

* Course Objectives

2/18/2022- Satisfactory completion of vSim- Rachael Heidebrink, including accurate documentation. AR

3/4/2022- Satisfactory during dysrhythmia simulation (see rubric) and vSim Junetta Cooper. Keep up the great work! AR

3/18/2022- Satisfactory completion of vSim Mary Richards, including documentation. AR

3/25/2022- Satisfactory completion of vSim Lloyd Bennett, including documentation. Keep up the great work! AR

3/31/2022- Satisfactory completion of vSim Kenneth Bronson, including documentation. Great job! AR

*End-of- Program Student Learning Outcomes

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: K. Wilson, M. Brown, V. Glaze, L. Erf OBSERVATION DATE/TIME: 3/3/2022 1000-1200 SCENARIO #: 1

CLINICAL JUDGMENT					OBSERVATION NOTES
<p>COMPONENTS NOTICING:</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>Notices patient's heart rate is decreased. Notices the patient's heart rhythm is in Sinus Bradycardia. Notices patient's continued decreased heart rate and symptoms after Atropine is administered. Notices second rhythm change to 2nd degree Mobitz II heart block. Notices patient's third rhythm change to 3rd degree heart block after second dose of Atropine.</p> <p>Notices patient has an elevated heart rate. Notices patient's decreased blood pressure after administration of diltiazem. Notices patient has a history of heart failure and administering fluids is not appropriate.</p> <p>Notices patient is unresponsive.</p>
<p>INTERPRETING:</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 					<p>Prioritizes calling the physician for decreased heart rate and blood pressure. Interprets the initial heart rhythm as Sinus Bradycardia. Prioritizes administering Atropine 1 mg IVP for decreased heart rate. Correctly interprets patient's heart rhythm change as a 2nd degree Mobitz II heart block. Interprets patient's third rhythm change as a 3rd degree heart block.</p> <p>Interprets patient's heart rhythm as A-fib. Prioritizes calling the physician based on assessment findings and patient's symptoms. Prioritizes administering diltiazem promptly after order is received.</p> <p>Interprets patient's heart rhythm as v-tach without a pulse.</p>
<p>RESPONDING:</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: E A D B 					<p>Introduces self, places patient on the monitor, obtains vital signs (HR-50, BP-95/58, SpO2-93%, RR-22). Reminder to identify patient. Performs a focused assessment based on patients signs and symptoms. Calls the physician, utilizes SBAR (remember to give a recommendation), and repeats orders back. Correctly recommends administering Atropine 1 mg IVP for decreased HR after prompted by physician. Administers oxygen. Administers Atropine 1 mg IVP (reminder to use saline flush before and after medication administration). Reassesses patient. Calls MET for continued low heart rate (29). Calls physician for heart rate of 29 and heart rhythm showing 2nd degree Mobitz II heart block. Administers second dose of Atropine 1 mg IVP. Reassesses patient. Calls physician for rhythm change to 3rd degree heart block, recommends epinephrine or dopamine. Recommends transcutaneous pacing after prompt from physician.</p> <p>Introduces self and identifies patient. Places patient on the monitor, performs a focused cardiovascular assessment. Obtains patient's vital</p>

*End-of- Program Student Learning Outcomes

	<p>signs (HR-164, BP-106/69, SpO2 91%, RR-22). Calls physician, utilizes SBAR (remember to give a recommendation). Physician prompts to place the patient on oxygen. Gives recommendation for digoxin or diltiazem after prompt from physician. Correctly identifies dose and rate of diltiazem. Reads back orders from physician. Administers oxygen. Administers diltiazem bolus and gtt. Reassesses patient symptoms and heart rhythm (reminder to reassess vital signs). Calls physician for patient's continued symptoms and decreased BP. Recommends giving Atropine or Epinephrine. Stops diltiazem gtt after order received from physician. Recommends performing a cardioversion on the patient after prompt from physician.</p> <p>Calls Code Blue. Begins CPR. Brings crash cart in room. Begins bagging. Calls physician, utilizes SBAR. Recommends Epinephrine 1 mg IVP Q3-5 minutes. Places pads on patient. Administers Epinephrine 1 mg IVP. Defibrillates patient (Reminder to defibrillate as soon as possible with pulseless v-tach or v-fib). Discusses Amiodarone as an alternative to Epinephrine (300/150/drip).</p>
<p>REFLECTING:</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 will be restored. Alternate drugs for complete heart block discussed (epi, dopamine). Discussed pacing options for symptomatic bradycardias (transcutaneous, transvenous, permanent). Talked about the importance of adjusting electrical current to obtain capture, need for medication). Excellent teamwork!</p> <p>Discussed recognition of A-fib and associated symptoms. Talked about goals of diltiazem therapy. Explanation and demonstration of synchronized cardioversion; discussed differences between cardioversion and defibrillation, the need for sedating medications prior to delivering shock. Great teamwork and communication.</p> <p>Discussed the importance of immediate CPR and defibrillation with pulseless v-tach. 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. Excellent job!</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, great job!</p>
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Pathophysiology Grading Rubric
 Firelands Regional Medical Center School of Nursing
 Advanced Medical Surgical Nursing
 2022

Student Name:

Clinical Date:

<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: Comments:</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: Comments:</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: Comments:</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: Comments:</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) • 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>Total Points: Comments:</p>
<p>6. Correlate the patient's current diagnosis with all related medications. (3 points total)</p>	<p>Total Points: Comments:</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>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:</p> <p>Comments:</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:</p> <p>Comments:</p>
<p>Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory</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