

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

Comments:

Week 2 (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 4 (1c)- Excellent during Patient Advocate/Discharge Planner clinical experience and discussion via CDG posting. Preceptor comments: “Excellent in all areas”. Keep up the great work! AR

Week 5 (1d)- This competency will be completed during your ICU/4P clinical rotation when you complete ECG booklet, therefore it was changed to a “NA”. FB

*End-of- Program Student Learning Outcomes

Week 6 (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 7 (1c)- Great job evaluating the plan of care and patient needs to determine the order of care as you cared for several patients during this clinical rotation. FB

Week 9- Week 9- 1a-e- Nice work assessing and managing care for your patient(s) this week. You were able to interpret a few cardiac rhythm strips. Medications were all administered (PO, OG, IVP, IV) while following the six rights, good job! (Please remember to include your clinical location each week) BS

Week 10- 1a-e- Good job assessing and managing care for your patient this week. You were able to interpret some additional cardiac rhythm strips. Medications were all administered while following the six rights and using various routes of administration (OG, SQ, IVP, IV), good job! BS

Week 11-1(a-e,g) Maura, 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 an excellent job with your medication passes and followed all six rights of medication administration. You satisfactorily completed your ECG book, and you monitored your patient very closely to ensure positive patient outcomes. Keep up the great work! BL

Week 13-1(c) Maura, excellent job during your Infusion Center clinical experience. You did a great job with your CDG in which you discussed the nursing interventions you performed during this experience. Comments from preceptor in the Infusion Center: Excellent in all areas. "Helpful, engaging, excited to learn." 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:	NA	NA	NA	S	S	S	NA	NA	S	S	S	NA	S					
a. Correlate relationships among disease process, patient’s history, patient symptoms, and present condition utilizing clinical judgment skills. CC (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	NA	S					
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	NA	S					
c. Recognize changes in patient status and take appropriate action. (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	NA	NA					
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (Noticing, Interpreting, Responding, Reflecting)	NA	NA	NA	S NA	NA	NA	NA	NA	S	S	S NA	NA	NA					
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	NA	S	S	S	S	NA	NA	S	S	S	NA	S					
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BS	BS	BL	BL	BL				

Comments:

Week 5 (2d)- This competency will be completed during the ICU/4P clinical rotation. FB

Week 6 (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 7 (2c)- Great job recognizing any changes associated with your group of patients and responding appropriately. FB

Week 9- 2a,b,c- Nice job correlating the relationships among your patient’s disease process, history, symptoms, medications, lab values, diagnostic tests, and present condition utilizing your clinical judgment skills. BS

Week 10- 2a-e- Nice job correlating the relationships among your patient’s disease process, history, symptoms, medications, lab values, diagnostic tests, and present condition utilizing your clinical judgment skills. You then used this information to formulate a prioritized care plan for your patient, nice work! Please see feedback on your rubric below. Nice job also identifying social determinants of health that could have an impact on your patient’s health and quality of life. BS

*End-of- Program Student Learning Outcomes

Week 11-2(b,c) Great job in debriefing discussing how you monitored your patient for potential risks and anticipated early complications. You also did a great job discussing changes in patient status you noticed, as well as how you responded and took action. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

Comments:

Week 3 (3b)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Keep up the great work! AR
 Week 5 (3a,b,c)- These competencies will be completed during your other assigned clinical rotations, therefore they are changed to a NA. (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 6 (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 13-3(c) Great job with your CDG discussing strategies to achieve fiscal responsibility in clinical practice. BL

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

Comments:

Week 6 (4c)- You have presented yourself in a very professional manner during this clinical rotation. Great job! FB

Week 9- 4a,c- Nice job discussing potential legal/ethical issues observed in the clinical setting. Professional behavior was observed at all times. BS

Week 10- 4c- Professional behavior observed at all times on the clinical floor. BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

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

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

Comments:

Week 3 (5c)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Keep it up! AR
 Week 5 (5a) Reported on by assigned RN during clinical experience from 2/8/2022 – Excellent in Knowledge Base and Technical Skills. Student Goals: No comments made. Additional Preceptor Comments: “Great job with assessments, charting, passing medications, and taking control of stressful situations.” EO/FB
 Week 6 (5a) Reported on by assigned RN during clinical experience from 2/15/2022 – Satisfactory in all areas except Knowledge Base, Communication Skills, and Professionalism (Excellent). Additional Preceptor Comments: “Maura displays great professionalism with patient and to workers. She will be a great addition to our staff upon graduation.” VS/FB Reported on by assigned RN during clinical experience from 2/16/2022 – Excellent in all areas. Additional Preceptor Comments: “Maura was amazing with patients; she was very knowledgeable and if she needed to ask questions, she did. Kept up with a very busy day today! Time management was great! AG/FB
 Week 7 (5a)- Reported on by assigned RN during clinical experience from 2/22/2022- Excellent in areas except Technical skills and Delegation (Satisfactory). Student Goals: No comments made. Additional Preceptor Comments: “Great time management; asks lots of great questions; very eager to learn and very hands on.” JF/FB Reported on by assigned RN during clinical experience from 2/23/2022-Excellent in all areas except Delegation (Satisfactory) Student Goals: “Will be more confident with med pass.” Additional Preceptor Comments: “Passed meds very well; explains what is being given.” JF/FB (5b) Great job seeking out new skills and taking the initiative to learn as much as possible during the last 3 weeks of the patient management clinical rotation. FB
 Week 9- 5a,c,e- Good overall performance in the clinical setting this week. Nice job discussing factors that create a culture of safety and discussing the use of EBP tools that support safety and quality during debriefing. BS

*End-of- Program Student Learning Outcomes

Week 10- 5 a,b- Nice work in the clinical setting this week. Nice job seeking out new learning opportunities as you were able to observe a patient have a central line placed. BS

Week 11-5(b) Maura, 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. BL

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

Comments:

Week 3 (6f)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Great job! AR

Week 4 (6c)- Excellent discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience! (6f)- Although your discussion post was excellent you have received an unsatisfactory due to not providing a reference or in-text citation. Please be sure to always follow the CDG grading rubric for every post. You will need to address the U (according to the directions at the beginning of this tool) on next week’s tool. Failure to do so will result in continued unsatisfactory evaluations. Do not hesitate to reach out to me for assistance or clarification. AR

Week 5 6f: I have received a “U” in this competency this week due to not providing a in-text citation and reference with my discussion board. I will improve on this competency this week by posting in my discussion board in a timely manner and providing an in-text citation and reference. **Make sure to always follow the CDG rubric to ensure postings are complete. FB**

*End-of- Program Student Learning Outcomes

Week 5 (6d) Satisfactory completion of Hand Off Report with a 30/30, RN comments: Great job giving report, thorough report. (6f)- CDG was posted following all rubric criteria and on-time. FB

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

Week 7 (6e)- Great job with documenting accurately and appropriately for all aspects of care delivered. FB

Week 9- 6a,c,e- Great job working collaboratively with your nurses this week to support positive patient outcomes. Nursing interventions and medication administration were documented accurately. 6f- Please see your rubric below for feedback and email me the missing information by Wednesday, March 23 at 0800. BS

Week 10- 6a,b,c- Nice job working collaboratively with your patient and the nurses to help achieve positive patient outcomes. Nice work documenting both nursing interventions and medication administration. Keep it up. BS

Week 11-6(e,f) Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and accurate. You also did an excellent job with your CDG. BL

Week 13-6(c) Excellent job discussing examples of collaboration witnessed in the Infusion Center between interdisciplinary team members in your 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	S	S	S	NA	NA	S	S	S	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	S	S	S	NA	NA	S	S	S	NA	S					
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	S	S	S	S	NA	NA	S	S	S	NA	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	NA	S	S	S	NA	S					
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BS	BS	BL	BL	BL				

Comments:

Week 3 (7a)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Keep up the great work! AR
 Week 7 (7d)- Great job displaying a great attitude, commitment to provide optimal care, and enthusiasm for the caring of individuals at a very vulnerable and often difficult time. FB

Week 11-7(a,b) You researched and summarized an interesting EBP article in your CDG titled "Weight Management Telehealth Intervention for Overweight and Obese Rural Cardiac Rehabilitation Participants: A Randomized Trial" Excellent job! BL

Week 11-7(d) Maura, you provided very compassionate care to your patient this week. You demonstrated all the core values of "ACE" during your clinical experience. Keep up all your hard work! You are going to transition very nicely into the RN role. BL

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	AR	AR	AR	AR	AR	AR	AR	AR	AR	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 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

*End-of- Program Student

Nursing Care Plan Grading Tool
AMSN
2022

Student Name: **M. Brown**

Clinical Date: **3/22/22-3/23/22**

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
Evaluation	S	S	S	S	S	S		
Faculty Initials	FB	FB	FB	BS	BS	BL		
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA		

* Course Objectives

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
COMPONENTS NOTICING: <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>
INTERPRETING: <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>
RESPONDING: <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 <li style="padding-left: 20px;">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</p>

*End-of- Program Student Learning Outcomes

	<p>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 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: 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>

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

Student Name: **M. Brown**

Clinical Date: **3/15/22-3/16/22**

<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) 1 • Past Medical History (1) 1 	<p>Total Points: 2 Comments: Nice job discussing your patient's diagnosis and past medical history.</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) 1 	<p>Total Points: 1 Comments: Good job discussing the pathophysiology of amphetamine overdose.</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) 1 • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1) 1 • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1) 0.5 	<p>Total Points: 2.5 Comments: Would have been helpful to discuss heart rate, temp., blood pressure and discuss if these values would be consistent with someone who overdosed on amphetamines.</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) 1 • Rationale provided for each lab test performed (1) 1 • Explanation provided of what a normal lab result should be in the absence of current diagnosis (1) 1 • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1) 1 	<p>Total Points: 4 Comments: Nice job here.</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) 1 • Rationale provided for each diagnostic test performed (1) 1 • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1) 0 • Explanation of how each of the patient's relevant 	<p>Total Points: 3 Comments: Nice job here but no mention of what a normal result would be in the absence of his diagnosis.</p>

diagnostic test results correlate with current diagnosis (1) 1	
6. Correlate the patient's current diagnosis with all related medications. (3 points total) <ul style="list-style-type: none"> All related medications included (1) 1 Rationale provided for the use of each medication (1) 1 Explanation of how each of the patient's relevant medications correlate with current diagnosis (1) 1 	Total Points: 3 Comments: Nice job discussing your patient's medications and providing rationales and correlations.
7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total) <ul style="list-style-type: none"> All pertinent past medical history included (1) 0/1 Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) 0/1 	Total Points: 0/2 Comments: No discussion of past medical history. Past medical history and how it relates to current diagnosis has been supplied.
8. Describe nursing interventions related to current diagnosis. (1 point total) <ul style="list-style-type: none"> All nursing interventions provided for patient explained and rationales provided (1) 1 	Total Points: 1 Comments: I would suggest listing rationales for each intervention as you list them rather than saying "All these interventions are included to..."
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	16.5/20 Needs Improvement. BS 18.5/20- Satisfactory. BS

**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