EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2022

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Beth Prater

Semester: ~~Spring~~

Final Grade: **Satisfactory**

Date of Completion: 4/29/2022

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

Faculty eSignature: Brittany Lombardi, MSN, RN

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: a. Manage complex patient care situations with evidence of preparation and organization. **(Responding)**	S	S	S	S	NA	NA	NA	NA	**S**	NA	S	NA	S	S	S	NA	NA	**S**
b. Assess comprehensively as indicated by patient needs and circumstances**. (Noticing)**	S	S	S	S	NA	NA	NA	NA	**S**	NA	S	~~NA~~ S	S	S	S	NA	NA	**S**
c. Evaluate patient's response to nursing interventions. **(Reflecting)**	S	S	S	S	NA	~~NA~~ S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
d. Interpret cardiac rhythm; determine rate and measurements. **(Interpreting)**	~~S~~ NA	NA	NA	NA	NA	NA	NA	NA	**NA**	NA	NA	NA	S	S	S	NA	NA	**S**
e. Administer medications observing the six rights of medication administration. **(Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	S	NA	S	S	S	NA	NA	**S**
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. **(Responding)**	~~S~~ NA	NA	NA	S	NA	NA	NA	NA	**S**	NA	S	NA	NA	NA	NA	NA	NA	**S**
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. **(Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	NA	NA	S	S	NA	NA	NA	**S**
Faculty Initials	**FB**	**FB**	**FB**	**AR**	**AR**	**AR**	**AR**	**AR**	**AR**	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**
Clinical Location	3T PM	4N PM	3T PM	DH	QC	PA DP	NA	NA		No Clinical	IS	SP CD	4C	4C	4P	NO CLINICAL	NO MAKEUP	

Comments:

Week 2 (1d, f)- This competency was changed to a "NA" because you do not interpret cardiac rhythms until you are on the ICU/4P clinical rotation. 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 7 (1c)- Satisfactory discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work! Preceptor comments: Satisfactory in all areas. AR

Week 10- 1c- Nice job discussing the patients you worked with at the Infusion Center and summarizing the interventions provided to the patients. BS
Week 11- 1b,c- Great job discussing the diagnostic procedures you were able to be a part of in Cardiac Diagnostics. Nice job also of discussing the nursing interventions associated with the procedures you were involved with in Cardiac Diagnostics and Special Procedures, and correlating the information obtained from the procedures and the patient's symptoms and assessment. BS
Week 12- 1a-e,f- Nice work this week assessing and managing care for your mechanically ventilated patient. Several cardiac rhythms were identified and measured. Medications were administered (SQ, IVP, IV, PO, intranasal) appropriately while observing the six rights. BS
Week 13- 1a-e,f- Nice work this week assessing and managing care for your mechanically ventilated patient. Several cardiac rhythms were identified and measured. Medications were administered (OG, IVP, IV, SQ) appropriately while observing the six rights. BS

Week 14-1(a-e) Beth, 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. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies: a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. **CC (Noticing, Interpreting, Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	NA	NA	S	S	S	NA	NA	**S**
b. Monitor for potential risks and anticipate possible early complications. **(Noticing, Interpreting, Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	S	NA	S	S	S	NA	NA	**S**
c. Recognize changes in patient status and take appropriate action. **(Noticing, Interpreting, Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	S	NA	S	S	S	NA	NA	**S**
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. **CC (Noticing, Interpreting, Responding, Reflecting)**	NA	NA	NA	NA	NA	NA	NA	NA	**NA**	NA	NA	NA	NA	S	NA	NA	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	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
Faculty Initials	**FB**	**FB**	**FB**	**AR**	**AR**	**AR**	**AR**	**AR**	**AR**	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**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- 2a-c,e- Great job correlating the relationships among your patient's disease process, history, symptoms, and present condition utilizing your clinical judgment skills. Good job discussing potential cultural considerations assessed while caring for your patient. BS

Week 13- 2d,e- Good work on your care plan. Please see rubric below for feedback. Nice job discussing social determinants of health that could potentially have an impact on your patient's health during debriefing. BS

Week 14-2(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

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

Comments:

Week 2 (3a,b,c)- These competencies will be completed during various clinical rotation (i.e. quality assurance/core measures, ICU/4P rotations). (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. Great job! RN comments: Rapid Response- excellent in all areas; Stroke- Satisfactory in all areas. “Well done! Best of luck continuing your career in long term care nursing!” AR

Week 10- 3c,d- Nice job discussing measures taken at the Infusion Center to help achieve fiscal responsibility for the organization and discussing the teamwork displayed among the team members. BS

Week 11- 3b,c- Nice job discussing the resources you utilized to complete the scavenger hunt and discussing the variances you uncovered while doing it. Good job also of discussing how these variances can affect the fiscal health of the organization. BS

Objective

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make Up	Final
Competencies: a. Critique examples of legal or ethical issues observed in the clinical setting. **(Interpreting)**	~~S~~ NA	NA	NA	NA	NA	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
b. Engage with patients and families to make autonomous decisions regarding healthcare. **(Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. **(Responding)**	S	S	S	S	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
Faculty Initials	**FB**	**FB**	**FB**	**AR**	**AR**	**AR**	**AR**	**AR**	**AR**	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**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- 4a,c- Good job discussing examples of legal/ethical issues observed in the clinical setting during debriefing this week. Professional behavior observed at all times. BS

Week 13- 4c- Professional behavior observed at all times in the clinical setting. BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

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

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

Comments:

Week 2 (5c)- This competency will be completed during the ICU/4P clinical rotation. Reported on by assigned RN on 1/18/2022 Excellent in all areas. Student Goals: My goals for my next clinical is to be able to attempt an IV start, get more experience with hanging IV's, and using the IV pump. Additional preceptor comments: Beth did great with time management and with all aspects of care with her patient. ER/FB

Week 3 (5a)- Reported on by assigned RN on 1-25-22 – Satisfactory in all areas except Communication Skills, Professionalism, Attendance (Excellent).
Student Goals: My goals for tomorrow are to get more time in the mornings to prepare and research my patients before doing AM assessments. VN/FB
Reported on by assigned RN on 1-26-22 – Excellent in all areas. Student Goals: My next clinical experience, I would like to be able to prioritize my patient care better. JW/FB

Week 4 (5a)- Reported on by assigned RN on 2/1/2022– Satisfactory in all areas except Professionalism and Attendance (Excellent). Student Goals: "My goal for my next clinical experience is to do discharge teaching if I have the opportunity." BR/FB Reported on by assigned RN on 2/2/2022 – Excellent in all areas except Knowledge Base and Technical Skills (Satisfactory). Student Goals: "To get a successful IV line in place if possible at Digestive Health next week." Additional Preceptor Comments: Beth was amazing! She was wonderful to work with. Professional, knowledgeable and kind to staff and patients. She will be an asset to any establishment." BR/FB

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

*End-of- Program Student Learning Outcomes

Beth Prater with Tamara Kilbride

3-23-22 – Excellent in all areas except Demonstrates prior knowledge of departmental/nursing responsibilities.

"Beth was able to complete a blood draw off an infusaport and also completed a dressing change on a port. Seems comfortable with patients and attentive to needs.

Week 10 5c- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Great job

Beth Prater with Angela Auxter

3-25-22 – Satisfactory in all areas. "IV start practice, observed paracentesis, multiple biopsies; set up sterile procedure tray."

Beth Prater with Kathleen Mulvin

3-29-22 – Excellent in all areas. "Added on stress stat for surgery today, observed Definity, observed lexiscan, observed an echo, pacer maker.

Week 12- 5a,b,c,e- You performed well in the clinical environment this week. During debriefing you were able to discuss factors that create a culture of safety and discuss the use of EBP tools that support safety and quality, nice work! BS

Week 13- 5a,b- You performed well in the clinical environment this week, providing quality nursing care to your patient. You were also able to observe an intubation. BS

Week 14-5(b) Beth, 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

*End-of- Program Student Learning Outcomes

Objective

6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make Up	Final
Competencies: a. Establish collaborative partnerships with patients, families, and coworkers. **(Responding)**	S	S	S	S	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
b. Teach patients and families based on readiness to learn and discharge learning needs. **(Interpreting & Responding)**	S	S	S	S	NA	S	NA	NA	**S**	NA	S	NA	S	NA	S	NA	NA	**S**
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. **(Responding)**	S	S	S	NA	NA	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
d. Deliver effective and concise hand-off reports. **(Responding)**	NA	S	NA	NA	NA	NA	NA	NA	**S**	NA	NA	NA	S	S	S	NA	NA	**S**
e. Document interventions and medication administration correctly in the electronic medical record. **(Responding)**	S	S	S	NA	NA	NA	NA	NA	**S**	NA	NA	NA	S	S	S	NA	NA	**S**
f. Consistently and appropriately posts in clinical discussion groups. **(Responding and Reflecting)**	S	S	S	NA	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
Faculty Initials	**FB**	**FB**	**FB**	**AR**	**AR**	**AR**	**AR**	**AR**	**AR**	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**

Comments:

Week 3 (6d)- Satisfactory completion, 30/30 points. RN comments: “Beth is a great nurse compassionate to patients and explains and communicates excellent with the paitents” VN/FB (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. AR

Week 7 (6c,f)- Excellent discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work during the second half of the semester! AR

Week 10- 6c- Good job discussing examples of collaboration you were able to witness during your time in the Infusion Center. BS

Week 11- 6f- Great responses to your 3 CDGs this week. BS

*End-of- Program Student Learning Outcomes

Week 12- 6a,c,e,f- Nice job working collaboratively with your nurses this week. Good job documenting nursing interventions and medication administration, and excellent job with your pathophysiology CDG this week. Please see rubric below for feedback. BS
Week 13- 6a,c,e,f- Nice job working collaboratively with your nurses this week. Nice job documenting nursing interventions and medication administration, and great job with your care plan CDG this week. Please see rubric below for feedback. BS

Week 14-6(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

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

7. Devise methods utilized by nursing to develop the profession, advance the knowledge base, ensure accountability, and improve the outcomes of care delivery. (1,3,4,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	**Make up**	**Mid-term**	9	10	11	12	13	14	15	**Make Up**	**Final**
Competencies: a. Value the need for continuous improvement in clinical practice based on evidence. **(Responding)**	S	S	S	S	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
b. Accountable for investigating evidence-based practice to improve patient outcomes. **(Responding)**	S	S	S	S	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
c. Comply with the FRMCSN *"Student Code of Conduct Policy."* **(Responding)**	S	S	S	S	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions**.** **(Responding)**	S	S	S	S	S	S	NA	NA	**S**	NA	S	S	S	S	S	NA	NA	**S**
Faculty Initials	**FB**	**FB**	**FB**	**AR**	**AR**	**AR**	**AR**	**AR**	**AR**	**BS**	**BS**	**BS**	**BS**	**BS**	**BL**	**BL**	**BL**	**BL**

Comments:

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

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

Week 14-7(a,b) You researched and summarized an interesting EBP article in your CDG titled "The Effect of Nurse-Led Interventions on Readmission and Mortality for Congestive Heart Failure" Excellent job! BL

Week 14-7(d) Beth, 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 Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**									
	Meditech Document (1,2,3,4,5,6)*	**Physician Orders (1,2,3,4,5,6)***	**Prioritization/ Delegation (1,2,3,4,5,6)***	**Resuscitation (1,3,6,7)***	**IV Start (1,3,4,6)***	**Blood Admin./IV Pumps (1,2,3,4,5,6)***	**Central Line/Blood Draw/Ports/IV Push (1,2,3,4,6)***	**Head to Toe Assessment (1,2,6)***	**ECG/Telemetry Placements/CT (1,6)***	**ECG Measurements (1.2.4.5.6)***
	Date: 1/11/2022	**Date: 1/11/2022**	**Date: 1/11/2022**	**Date: 1/11/2022**	**Date: 1/13/2022**	**Date: 1/13/2022**	**Date: 1/14/2022**	**Date: 1/14/2022**	**Date: 1/14/2022**	**Date: 1/14/2022**
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S**
Faculty Initials	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: **B. Prater** **Clinical Date:** **4/12/22-4/13/22**

*End-of- Program Student Learning Outcomes

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

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

* Course Objectives

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

*End-of- Program Student Learning Outcomes

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: R. Hager, C. Klaehn, S. Green, B. Prater OBSERVATION DATE/TIME: 3/3/2022 0800-1000 SCENARIO #: 1

CLINICAL JUDGMENT					OBSERVATION NOTES
COMPONENTS NOTICING:					Focuses on head to toe assessment, initially does not notice patient's low heart rate. Notices patient's rhythm is Sinus Bradycardia, and heart rate decreased from 50 to 45. Notices patient's Metoprolol may be the cause of the low heart rate. Notices patient's decreased heart rate after Atropine is administered. Correctly identifies heart rhythm change as a 2nd degree Mobitz II. Notices another rhythm change to 3rd degree block. Focuses on head to toe assessment, initially does not notice patient's elevated heart rate. Notices patient's heart rhythm is in A-fib. Notices patient has decreased BP-90/50 and decreased SpO2-89% on RA after diltiazem is started. Notices patient's heart rhythm is still in A-fib. Notices patient has a low EF and history of heart failure. Notices patient is unresponsive.
• Focused Observation:	E	**A**	D	B	
• Recognizing Deviations from Expected Patterns:	E	**A**	D	B	
• Information Seeking:	**E**	A	D	B	
INTERPRETING:					Prioritizes head to toe assessment, initially does not prioritize patient's low heart rate. Prioritizes calling the physician once Sinus Bradycardia rhythm is identified. Contributes patient's low heart rate to be related to Metoprolol. Prioritizes administering Atropine 1 mg promptly to increase heart rhythm. Interprets second rhythm change correctly as a 2nd Degree Mobitz II. Initially interprets third rhythm change as a 1st degree block, and then correctly interprets the rhythm as a 3rd degree block. Prioritizes head to toe assessment, initially does not prioritize patient's elevated heart rate and rhythm. Interprets patient's heart rhythm as A-fib. Prioritizes calling the physician once patient continues to complain of symptoms. Prioritizes administering diltiazem bolus and gtt. Prioritizes stopping the diltiazem infusion after patient's BP and SpO2 drops. Interprets patient's heart rhythm as v-fib rather than v-tach. Prioritizes starting CPR. Reminder to prioritize defibrillation for pulseless v-tach and v-fib.
• Prioritizing Data:	E	**A**	D	B	
• Making Sense of Data:	E	**A**	D	B	
RESPONDING:					Identifies patient, establishes orientation, and obtains vital signs (T-99.0 F, HR-50, SpO2-91%, BP-104/68, RR-22). Raises HOB. Calls physician, utilizes SBAR. Correctly recommends administering Atropine 1 mg to increase patient's heart rate. Places the patient on oxygen for decreased SpO2. Administers Atropine 1 mg IVP over 1 minute. Reassesses patient's vital signs and heart rhythm. Calls physician to notify of rhythm change and worsening symptoms, recommends another dose of Atropine. Waits to administer second dose of Atropine once third rhythm change is
• 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	

*End-of- Program Student Learning Outcomes

B	identified. Correctly identifies that the patient will need transcutaneous pacing. Identifies patient, completes pain assessment, inquires about patient's symptoms, and obtains vitals (T-97.8, HR-152, SpO2-98%, RR-24, BP-98/58). Places patient on the monitor. Calls physician, reminder to utilize full SBAR (give a recommendation for treatment). Recommends diltiazem, beta-blocker, amiodarone or cardioversion once prompted by the physician. Correctly identifies dose and rate of diltiazem. Reads back orders from physician. Administers diltiazem bolus and gtt. Reassesses patient's vital signs and heart rhythm. Administers oxygen. Discontinues diltiazem infusion, calls physician. Does not recommend fluid bolus due to patient's low EF and history of heart failure. Correctly recommends a cardioversion for the patient. Identifies patient's heart rhythm as v-fib, checks for a pulse. Calls Code. Begins CPR and places pads on patient. Brings crash cart into room. Begins bagging patient. Defibrillates patient. Administers Epinephrine 1 mg IVP. Discusses Amiodarone as an alternative to Epinephrine (300/150/drip).
REFLECTING: • Evaluation/Self-Analysis: **E** A D B • Commitment to Improvement: **E** A D B	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 is 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! 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. Discussed the importance of immediate CPR with pulseless v-tach. 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. Excellent job!

*End-of- Program Student Learning Outcomes

SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric **Developing to accomplished is required for satisfactory completion of this simulation.**	**You are satisfactory for this simulation, great job!**

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

Student Name: B. Prater **Clinical Date: 4/5/22-4/6/22**

*End-of- Program Student Learning Outcomes

1. Provide a description of your patient including current diagnosis and past medical history. (2 points total) • Current Diagnosis (1) 1 • Past Medical History (1) 1	**Total Points:** 2 **Comments:** **Good job discussing your patient's diagnosis and past medical history.**
2. Describe the pathophysiology of your patient's current diagnosis. (1 point total) • Pathophysiology-what is happening in the body at the cellular level (1) 1	**Total Points:** 1 **Comments:** **Good job discussing the pathophysiology of your patient's diagnosis.**
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total) • All patient's signs and symptoms included (1) 1 • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1) 1 • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1) 1	**Total Points:** 3 **Comments:** **Good discussion of the correlations between your patient's symptoms and diagnoses.**
4. Correlate the patient's current diagnosis with all related labs. (4 points total) • All patient's relevant lab result values included (1) 1 • Rationale provided for each lab test performed (1) 1 • Explanation provided of what a normal lab result should be in the absence of current diagnosis (1) 1 • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1) 1	**Total Points:** 4 **Comments:** **Great job providing lab values and rationales, and discussing their correlation to your patient's diagnosis.**
5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total) • All patient's relevant diagnostic tests and results included (1) 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) 1 • Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1) 1	**Total Points:** 4 **Comments:** **Nice work discussing diagnostic tests performed, rationales for the tests, and their correlation to your patient's diagnosis.**
6. Correlate the patient's current diagnosis with all related medications. (3 points total) • 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:**
7. Correlate the patient's current diagnosis with all pertinent	**Total Points:** 2

*End-of- Program Student Learning Outcomes

past medical history. (2 points total) • All pertinent past medical history included (1) 1 • Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) 1	**Comments: Good job discussing patient history and its relevance to the current diagnosis.**
8. Describe nursing interventions related to current diagnosis. (1 point total) • All nursing interventions provided for patient explained and rationales provided (1) 1	**Total Points: 1** **Comments:**
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	**20/20** **Satisfactory. BS** **Excellent job Beth!**

Lasater Clinical Judgment Rubric Scoring Sheet: AMSN

Objectives:

1. Assessment of ACS/STEMI, HF, and Atrial Fibrillation from admission to discharge. (1,6)*
2. Initiate treatment protocols for ACS/STEMI, HF, and Atrial Fibrillation. (1,6)*
3. Collaborate and communicate with interdisciplinary health care providers while transitioning from admission to discharge. (1,2,6)*
4. Summarize the nursing implications for medications and treatments utilized in the care of patients with ACS/STEMI, HF, and Atrial Fibrillation. (1,3,5,6,7)*
5. Demonstrate ability to resolve conflict among interdisciplinary healthcare team members. (6,7)*

*End-of- Program Student Learning Outcomes

CLINICAL JUDGMENT	OBSERVATION NOTES
NOTICING: (2,6)* • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B	Recognized Afib and impending heart failure and suggested appropriate therapies for both conditions. Recognized the different medical diagnosis and past medical history that needed to be considered when developing a discharge care map. Recognized the association between patient history, including non-compliance, and current findings. Recognized the appropriate use of MONAH (morphine, oxygen, nitrates, aspirin, heparin), fluid resuscitation, diuretics, and potassium use for the inferior wall MI patient. Recognized the necessary components of assessment for the post Inferior STEMI patient upon return from the cardiac cath lab. Recognized the appropriate patient information pertinent to communication with oncoming nurse following SBAR.
INTERPRETING: (1,2,3,6)* • Prioritizing Data: E A D B • Making Sense of Data: E A D B	Excellent interpretation of data. Upon reviewing the patient's chart/ECG, Afib was noticed and interpreted to be a priority. When reviewing patient's symptom upon arrival to the Critical Care Unit, symptoms were interpreted to indicate heart failure/fluid overload. Interpreted current diagnosis and past medical history and determined the need for education on current and past health issues as well as lifestyle modifications. Interpreted the areas affected by an inferior wall MI and artery responsible for this particular MI. Excellent job prioritizing appropriate data to include in communication using the SBAR format.
RESPONDING: (1,5,6)* • 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	Multiple dosage calculations performed accurately. Several IV drips and boluses (heparin, nitroglycerin, Bivalirudin, amiodarone) were calculated and initiated appropriately. Sedation medications were calculated and verbalized. Appropriate medications were chosen to treat Afib and heart failure/fluid overload. Potassium level was noted and the need to give supplemental K+ along with furosemide was recognized. Very good job! Active participation in the group discussion related to lifestyle modification including diet/exercise, rest, smoking cessation, monitoring blood pressure, weight management, incision care, and

*End-of- Program Student Learning Outcomes

	symptom recognition. Participated in discussion related to response to symptoms, compliance with follow-up appointment and medications, medication storage, and regular communication with the healthcare provider. Applied appropriate interventions based on assessment findings. Active engagement during debriefing session. Demonstrated clear communication providing the necessary components to include during change of shift hand-off report utilizing SBAR. Provided appropriate response to conflict resolution during shift report.
REFLECTING: (4,6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Able to identify new knowledge obtained through the simulation and how to apply to future patient care scenarios. Acknowledged the importance of customizing teaching to accommodate patient lifestyle. Asked appropriate questions to gain understanding of information provided. Identified areas of improvement to foster clear and concise communication using SBAR. Reflected on ways to resolve conflict in appropriate manner.
Developing to accomplished in all areas is required for satisfactory completion of this simulation.	**Comments:** **Overall fantastic job with the STEMI Comprehensive Simulation.**

E = exemplary, A = accomplished, D = developing, B = Beginning
Based off of Lasater's Clinical Judgment Rubric

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2022

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

*End-of- Program Student Learning Outcomes

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date:

ar 12/15/2021

*End-of- Program Student Learning Outcomes