

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Cassie Klaehn
Semester: Spring

Final Grade: Satisfactory

Date of Completion:	4/29/2022
Faculty eSignature:	Brittany Lombardi, MSN, RN

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.

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

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:									S									S
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	NA	NA	NA	NA	S
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S	NA	NA	NA	NA	NA	S
c. Evaluate patient's response to nursing interventions. (Reflecting)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	NA S	S	S	NA	NA	S
d. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	NA	NA	NA	NA	NA	NA	NA	NA	NA	S	S	NA	NA	NA	S	NA	NA	S
e. Administer medications observing the six rights of medication administration. (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	NA	NA	NA	NA	NA	S
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	S	NA	NA	NA	S	S	NA	NA	S	S	NA	NA	NA	S	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	S	S	NA	NA	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	BL	BL	BL	BL	BL
Clinical Location	DH	QC	NA	PM	PM	PM				4P	4C	4C	PD	IS/SP	CD/SH	NA		

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 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

*End-of- Program Student Learning Outcomes

Week 9-1(a-g) Excellent job this week managing complex patient care situations. Your care was very well organized, and you did a great job with your time management. Your head to toe assessments were very thorough and well done. You were able to determine rates and measurements on several EKG strips, and practice interpreting cardiac rhythms. Your medication passes were very well done, and you had the opportunity to administer PO and IVP medications all while following the six rights. You had a successful IV start in which you demonstrated correct technique. You monitored your patient very closely to ensure positive patient outcomes.

Great job! BL

Week 10(1d): Great job this week finding cardiac rhythm strips and identifying and measuring them properly. CB

Week 11- 1a,b,c,e,g- Nice work this week assessing and managing care for your patient. Medications were all administered while observing the six rights using various routes (PEG, IV). BS

Week 12-1(c) Excellent job this week with your Patient Advocate/Discharge Planner clinical experience. You did a great job with your CDG in which you discussed the role of the patient advocate in relation to the patient and to the organization, you summarized how the discharge planner assists individual patients and develops a plan that promotes long-term health and relapse prevention, and you explained how the patient advocate and discharge planner each collaborate with members of the health care team to achieve optimal patient outcomes. Comments from preceptor: Excellent in all areas. "Cassie did an amazing job! She had a lot of grace in some difficult encounters. Very kind, compassionate and eager to learn!" BL

Week 13-1(c,f) Cassie, excellent job during your Infusion Center and Special Procedures clinical experiences this week. Comments from preceptor in Infusion Center: Excellent in all areas. "Asked good questions, engaging." Comments from preceptor in Special Procedures: Excellent in all areas. "Cassie did a nice job with this clinical. She had several IV starts and was able to see a fistulogram and an ultrasound of the liver." BL

Week 14-1(c) Excellent job with your CDG in which you identified the appropriate nursing interventions associated with each cardiac diagnostic test based on the patient needs and circumstances. Comments from preceptor in Cardiac Diagnostics: Excellent in all areas. "Cassie demonstrated a high level of initiative to learn from the department, questions demonstrated an understanding, showed a high level of comfort and professionalism and patient/family, personable, anticipated what staff members may need, assisted without being asked, observed CV/Stress/Pacemakers, Clinic, and LPB. Thank you! She will be an asset on any team and a great nurse to her patients." 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
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	S	NA	S	S	NA	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	S	NA	S	NA	NA	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	S	NA	NA	NA	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	S	NA S	NA	NA	NA	NA	NA	S
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	BL	BL	BL	BL	BL

Comments:

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 9-2(e) Excellent job in debriefing discussing cultural considerations and racial inequalities that were assessed while caring for patients. BL

Week 10(2d,e): Great job on your care plan this week, please see the grading rubric below. Cassie, you also did a great job in debriefing talking about social determinants of health that could affect your patient's health. CB

Week 11- 2a,b,c,d- Nice job using your clinical judgement skills to correlating the relationships among your patient's disease process, history, symptoms, and present condition. Nice job monitoring your patient's blood pressure and heart rate. This is especially important for a patient receiving norepinephrine so that changes are noticed promptly and the appropriate action can be taken. BS

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

Comments:

Week 3 (3b)- Excellent discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Keep up the great work! AR

Week 5 (3a)- this competency was not completed during this clinical rotation, therefore competency rating 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 10(3a): I changed this competency to an "S". You were able to critique communication between your patient's family, nurses, and other healthcare providers, regarding diagnostic findings and plan of care. CB

Week 13-3(c) Great job with your CDG discussing strategies to achieve fiscal responsibility in clinical practice. BL

Week 14-3(b,c) Excellent job with the Quality Scavenger Hunt clinical experience, as well as with your CDG for this experience. You did an excellent job discussing the fiscal impact associated with the variances that you found. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

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

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

Comments:

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

Week 9-4(a) Excellent job this week during debriefing in which you were actively involved in the discussion of this competency. You gave great examples of legal and ethical issues observed in the clinical setting. BL

Week 10(4c): You presented yourself in a professional manner throughout your clinical experience. CB

Week 11- 4b,c- Good job this week communicating with your patient and his family members. Professional behavior observed at all times. 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
a. Reflect on your overall performance in the clinical area for the week. (Responding)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
b. Demonstrate initiative in seeking new learning opportunities. (Responding)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. (Interpreting)	S	S	NA	S NA	NA	NA	NA	NA	S	S	NA	S	S	NA	S	NA	NA	S
d. Perform Standard/Standard Plus Precautions. (Responding)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
e. Practice use of standardized EBP tools that support safety and quality. (Responding)	NA	S	NA	S	S	S	NA	NA	S	S	NA S	S	NA	S	S	NA	NA	S
f. Utilize faculty feedback to improve clinical performance. (Responding & Reflecting)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	BL	BL	BL	BL	BL

Comments:

Week 3 (5c)- Excellent discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Great job! AR

Week 5 (5a) Reported on by assigned RN during clinical experience from 2/8/2022 – Satisfactory in all areas except Knowledge Base and Communication Skills (Excellent). Student Goals: “Goals for next experience is to have 2 patients and seek out more opportunities, be more confident with meds.” Additional Preceptor Comments: “Cassie communicated well with the patients explaining things well. Good energy and willing to help wherever needed with all patients.” VS/FB (5c) this competency was not completed during this clinical rotation, therefore competency rating changed to a NA. FB

Week 6 (5a) Reported on by assigned RN during clinical experience 2/15/2022 - Excellent in all areas. Student Goals: “For my next experience, I will try to stay more on top of my documenting and group tasks together so I am not constantly going in and out of patient rooms.” JS/FB Reported on by assigned RN during clinical experience 2/16/2022- Excellent in all areas. Student Goals: I will be more proactive on meds and stay on top of them. I will try to be more confident in doing tasks by myself (example: send urine samples to lab).” Additional Preceptor Comments: “Cassie was able to watch and help with two discharges. She took the time to braid her patient’s hair and it made her whole day. She was great.” JS/FB Cassie you displayed a great deal of compassion while caring for your patients this week. Recognition with a guardian angel pin was well deserved. You are going to be a great RN! FB

Week 7 (5a) Reported on by assigned RN during clinical experience 2/23/2022- Satisfactory in all areas except Professionalism and Attendance (Excellent). Student Goals: “Will be more comfortable and confident in nursing interventions.” No additional preceptor comments were made. KD/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

*End-of- Program Student Learning Outcomes

Week 9-5(b) Cassie, you do an excellent job working independently and taking initiative in completing nursing interventions for your patient. You are very organized and consistently well prepared. You take excellent care of your patients. Keep up all your great work! BL

Week 9-5(c,e) Excellent job this week during debriefing in which you were actively involved in the discussion of these competencies. BL

Week 10(5e): This competency was changed to an “S” because you performed numerous evidence-based interventions for your patient this week. CB

Week 11- 5a,b- Great performance in the clinical setting. You were also able to learn and practice new skill as you and your nurse removed your patient’s surgical staples. BS

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
a. Establish collaborative partnerships with patients, families, and coworkers. (Responding)	S	NA	NA	S	S	S	NA	NA		S	S	S	S	S	S	NA	NA	
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	NA	NA	NA	NA	S
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
d. Deliver effective and concise hand-off reports. (Responding)	NA	NA	NA	NA	S	NA	NA	NA	S	NA S	NA S	S	NA	NA	NA	NA	NA	S
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	NA	NA	NA	S
f. Consistently and appropriately posts in clinical discussion groups. (Responding and Reflecting)	NA	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	BL	BL	BL	BL	BL

Comments:

Week 3 (6f)- Excellent discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Keep up the great work! AR

Week 5 (6f)- CDG was posted following all rubric criteria and on-time. FB

Week 6 (6d)- Satisfactory completion, 30/30 points. RN comments: Cassie provided a detailed report including new findings from a procedure. Well done! JS/FB (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 9-6(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 a great job taking my feedback on Tuesday and applying it to all your documentation on Wednesday. You did an excellent job with your CDG this week. Keep up the great work! BL

*End-of- Program Student Learning Outcomes

Week 10(6a,b,c,d): Great job collaborating with peers and other members of the healthcare team while caring for your patient's this week. I changed the "NA" to a "S" because you did deliver hand off report to the bedside nurse when leaving the unit for the day. CB

Week 11- 6a,b,c,d,f- Nice job developing rapport with your patient and his family and working collaboratively along with your nurses. Nice job also with documenting both nursing interventions and medication administration. BS

Week 13-6(f) Great job with your CDGs this week. Keep up all your excellent work! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

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

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:									S									S
a. Value the need for continuous improvement in clinical practice based on evidence. (Responding)	S	S	NA	S	S	S	NA	NA		S	S	S	S	S	S	NA	NA	
b. Accountable for investigating evidence-based practice to improve patient outcomes. (Responding)	NA	S	NA	S	S	S	NA	NA	S	S	S	S	NA	NA	NA	NA	NA	S
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	NA	S	S	S	NA	NA	S	S	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	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	BL	BL	BL	BL	BL

Comments:

Week 3 (7a)- Excellent discussion via CDG posting related to your Quality Assurance/Core Measures observational experience. Keep up the great work you are doing!
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 9-7(a,b) You researched and summarized an interesting EBP article in your CDG titled "Effect of Implementing Discharge Plan on Health Outcomes of the Adult Congestive Heart Failure Patients." Excellent job! BL

Week 10(7d): Cassie, great job displaying the core values and "ACE" attitude during your clinicals this week. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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	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

Nursing Care Plan Grading Tool
AMSN
2022

Student Name: Cassie Klaehn

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

Pathophysiology Grading Rubric
Firelands Regional Medical Center School of Nursing

*End-of- Program Student Learning Outcomes

Advanced Medical Surgical Nursing
2022

Student Name: **C. Klaehn**

Clinical Date: **3/29/22-3/30/22**

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)	Total Points: 2 Comments: Good job discussing your patient's diagnosis and 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:
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total) - 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)	Total Points: 3 Comments: Nice job correlating our patient's signs and symptoms to his diagnosis.
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: Good explanation of, and rationales for, your patient's related lab values.
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 job discussing the limited diagnostic tests we has access to.
6. Correlate the patient's current diagnosis with all related medications. (3 points total)	Total Points: 3 Comments: Related medications are listed, with

• 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	rationales and correlations provided.
7. Correlate the patient's current diagnosis with all pertinent 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	Total Points: 2 Comments: Past medical history and correlations to diagnosis provided.
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 Great job Cassie! Satisfactory. BS

Simulation Evaluations

<u>vSim Evaluation</u> 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	FB	FB	FB	BL	CB	BS	BL	BL
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

*End-of- Program Student Learning Outcomes

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: - Focused Observation: E A D B - Recognizing Deviations from Expected Patterns: E A D B - Information Seeking: E A D B	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.				
INTERPRETING: - Prioritizing Data: E A D B - Making Sense of Data: E A D B	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.				
RESPONDING: - 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	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 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-				

*End-of- Program Student Learning Outcomes

	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 • 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!

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!
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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)*

*End-of- Program Student Learning Outcomes

5. Demonstrate ability to resolve conflict among interdisciplinary healthcare team members. (6,7)*

DATE: 4/28/2022

Comprehensive Simulation

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				

*End-of- Program Student Learning Outcomes

	modification including diet/exercise, rest, smoking cessation, monitoring blood pressure, weight management, incision care, and 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