

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Medical Surgical Nursing – 2023**

**Firelands Regional Medical Center School of Nursing  
Sandusky, Ohio**

**Student:**

**Final Grade:** Satisfactory/Unsatisfactory

**Semester:** Spring

**Date of Completion:**

**Faculty:** Dawn Wikel, MSN, RN, CNE; Lora Malfara, MSN, RN; Kelly Ammanniti, MSN, RN, CHSE;  
Monica Dunbar, MSN, RN; Nick Simonovich, MSN, RN

**Faculty eSignature:**

**Teaching Assistant:** Rachel Haynes, BSN, 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 on 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”. 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:**

Skills Lab Competency Tool & Skills Checklists  
Simulation, Prebriefing, PEARLS Debriefing, & Reflection Journals

Nursing Care Map Rubric  
Meditech Documentation  
Clinical Debriefing  
Clinical Discussion Group Grading Rubric  
Evaluation of Clinical Performance Tool  
Lasater’s Clinical Judgment Rubric & Scoring Sheet  
Virtual Simulation Scenarios

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make-up (/Date/Time)
2/3/2023	1	Did not complete survey for ECSC clinical site by due date/time	2/6/2023

Faculty’s Name	Initials
Kelly Ammanniti	KA
Monica Dunbar	MD
Rachel Haynes	RH
Lora Malfara	LM
Nick Simonovich	NS
Dawn Wikel	DW

**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 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, 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.

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**\*Grey shaded boxes do not need a student evaluation rating or faculty/teaching assistant initials.**

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials

Note: Students are required to submit two satisfactory care maps over the course of the semester. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit until satisfactory. At least one care map must be submitted prior to midterm.

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**Objective**

1. Illustrate correlations to demonstrate the pathophysiological alterations in adult patients with medical-surgical problems. (2,3,4,5)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
<b>Competencies:</b>			NA	NA	S												
a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)			NA	NA	S												
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			NA	NA	S												
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			NA	NA	S												
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			NA	NA	S												
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			NA	NA	S												
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			NA	NA	S												
g. Assess developmental stages of assigned patients. (Interpreting)			NA	<del>NA</del> S	S												
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		NA	<del>NA</del> S	S												
	Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Meditech, FSBS, IV Pump Sessions	No clinical	ECSC	Rehab 59 F Pneumonia												
Instructors Initials	LM	LM	DW	NS													

**Comments:**

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 1 (1h) - During week 1, the Meditech, FSBS, and IV pump sessions were all considered clinical hours. You came prepared to each of them and demonstrated competency accordingly. For this reason, you have earned an S for this competency. LM

Week 4 (1g,h)- These competencies were completed by preparing and delivering an age appropriate activity for the older adult clientele at the ECSC clinical experience; therefore S. Please make sure you reflect on each competency in the tool and if it's something that you completed during the clinical, even on alternative sites, make sure you give credit where credit is due. NS



**Objective**

2. Perform physical assessments as a method for determining deviations from normal. (3,4,5)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
<b>Competencies:</b>			NA	NA	S												
a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			NA	NA	S												
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			NA	NA	S												
c. Conduct a skin risk assessment and implement appropriate precautions and care. (Noticing)			NA	NA	S												
d. Communicate physical assessment. (Responding)			NA	NA	S												
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			NA	NA	S												
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		NA	NA	S												
	LM	LM	DW	NS													

**Comments:**

Week 1 (2f)- By attending the Meditech clinical update & providing your full, undivided attention during the demonstration of documenting insulin, IV solutions, saline flushes and IV site assessments you are satisfactory for this competency. NS

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Objective**

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
<b>Competencies:</b>	S		NA	NA	S												
a. Perform standard precautions. (Responding)	S		NA	NA	S												
b. Demonstrate nursing measures skillfully and safely. (Responding)			NA	NA	S												
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			NA	NA	S												
d. Appropriately prioritizes nursing care. (Responding)			NA	NA	S												
e. Recognize the need for assistance. (Reflecting)			NA	NA	S												
f. Apply the principles of asepsis where indicated. (Responding)	S		NA	NA	S												
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			NA	NA	NA												
h. Implement DVT prophylaxis (early ambulation, SCDs, and ted hose) based on assessment and physicians' orders (Responding)			NA	NA	S												
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		NA	NA	S												
j. Identify recommendations for change through team collaboration. (Reflecting)			NA	NA	NA												
	<b>LM</b>	<b>LM</b>	<b>DW</b>	<b>NS</b>													

**Comments:**

\*End-of-Program Student Learning Outcomes  
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Objective**

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
<b>Competencies:</b>			NA	NA	S												
k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			NA	NA	S												
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			NA	NA	S												
m. Calculate medication doses accurately. (Responding)			NA	NA	S												
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			NA	NA	NA												
o. Regulate IV flow rate. (Responding)	S		NA	NA	NA												
p. Flush saline lock. (Responding)			NA	NA	NA												
q. D/C an IV. (Responding)			NA	NA	NA												
r. Monitor an IV. (Noticing)	S		NA	NA	NA												
s. Perform FSBS with appropriate interventions. (Responding)	S		NA	NA	S												
	<b>LM</b>	<b>LM</b>	<b>DW</b>	<b>NS</b>													

**Comments:**

Week 1 (3o, r)- By attending the IV Pump clinical and providing your full, undivided attention and active participation during the demonstration of the Alaris pump, documentation of IV site maintenance and recognition of potential IV complications, you are satisfactory for this competency. LM  
 (3s)- You were able to demonstrate understanding of the rationale of FSBS and the use of the glucometer. You were able to perform a Quality Control check of the glucometer as well as demonstrate skills and knowledge required of proper sample ID, collection, and handling of blood. DW

\*End-of-Program Student Learning Outcomes  
 Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Objective**

4. Use therapeutic communication techniques to establish a baseline for nursing decisions. (1,5,7)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
<b>Competencies:</b>			NA	NA	S												
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			NA	NA S	S												
b. Communicate professionally and collaboratively with members of the healthcare team using hand-off communication techniques. (SBAR) (Responding)			NA	NA	S												
c. Report promptly and accurately any change in the status of the patient. (Responding)			NA	NA	S												
d. Maintain confidentiality of patient health and medical information. (Responding)			NA	NA	S												
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			NA	NA S	S												
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			NA	NA	S												
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			NA	NA	S												
	LM	LM	DW	NS													

**Comments:**

Week 4 (4a)- You communicated professionally with the older adults at the ECSC clinical experience; therefore, S.

\*End-of-Program Student Learning Outcomes  
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 4 (4e)- According to the CDG Grading Rubric, you have earned an S for your participation in the Erie County Senior Center discussion this week. Your post was thoughtful and supported by evidence and met all requirements for a satisfactory evaluation. NS

**Objective**

5. Implement patient education based on teaching needs of patients and/or significant others. (1,6)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
<b>Competencies:</b>			NA	NA	S												
<b>a. Describe a teaching need of your patient.** (Reflecting)</b>																	
<b>b. Utilize appropriate terminology and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)</b>			NA	NA	S												
	LM	LM	DW	NS													

\*\*5a & b- You must address this competency in the comments below for all clinicals on 3T, 4N, or Rehab- describe the patient education you provided; be specific- include the topic, method of delivery, reason for teaching need, materials to support learning through above resources (if applicable), and method used to validate learning.

Example: Education related to orthostatic hypotension (changing positions slowly by sitting at the side of the bed or chair for a few minutes before moving to another position, utilizing the walker when ambulating) was provided to my patient through discussion and demonstration. This was necessary to maintain patient safety as he/she was experiencing a drop-in blood pressure and dizziness when getting out of bed. A patient education sheet was printed from Lexicomp and given to the patient. The teach back method was used to validate learning.

**Comments:**

5a Rehab- A teaching need of my patient was ambulating with a walker, and utilizing the call light. A gave verbal discussion to my patient on the importance of using both the walker and call light since she was a high fall risk. The reasoning behind the education was that she knew how to turn off the bed alarm and would often get out of bed by herself and grab onto other objects in the room that weren't the walker. Learning was expressed when she asked for assistance in ambulating to the bathroom with her walker.

5b Rehab- I used skyscape to learn about my patients medications she used daily and was then able to inform her on what the medication name is and how it is used in the plan of care.

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Objective**

6. Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity. (2,3,4,5)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Develop and implement a priority care map utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)			NA	NA	N												
b. <b>Identify factors associated with Social Determinants of Health (SDOH) &amp;/or cultural elements that have the potential to influence patient care.**</b> (Noticing, Interpreting, Responding, Reflecting)			NA	NA U	S												
	LM	LM	DW	NS													

**\*\*6b- You must address this competency in the comments on a weekly basis. For all clinicals - provide an example of SDOH &/or cultural elements that influenced your patient's care; be specific.**

**Comments:**

Week 4 (6b)- Unfortunately, this competency requires weekly commenting for all clinicals. Your experience at the ECSC would provide opportunities to observe and identify potential SDOH that may impact an older adult's overall health. A couple SDOH that could impact these individuals is food insecurities or transportation. Please be sure to read the directions on page 1 of this tool. This U must be addressed in the comments below with the submission of your week 5 tool. Failure to do so will result in continued U evaluations, regardless of your performance. Please let me know if you have any questions. NS

Week 5- The SDOH I noticed from speaking with the patient is unsafe housing. Due to stairs in the house, she was unable to get to the water because the lack of her mobility. She instead drank only orange juice which resulted in DKA and a blood glucose of nearing 1000. This impacted the activities performed in Therapy. The PT implemented exercises designed for getting up and downstairs with a walker.

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Regarding week 4- Most seniors that arrived to the ECSC lacked transportation mainly because of age and depletion of vision. Luckily, public transportation can be useful when coming to eat lunch at the Senior Center. Since receiving a U last week I went back into the course syllabus and highlighted what needs to be completed for each clinical to better prepare myself for the future and limited mistakes such as this one.

See Care Map Grading Rubrics below.

## Objective

7. Illustrate professional conduct including self-examination, responsibility for learning, and goal setting. (7)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. <b>Reflect on an area of strength. **</b> (Reflecting)	S		NA	NA U	S												
b. <b>Reflect on an area for improvement and set a goal to meet this need.**</b> (Reflecting)	S		NA	NA U	S												
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		NA	NA S	S												
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		NA	NA S	S												
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		NA	NA S	S												
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		NA	NA U	S												
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		NA	NA S	S												
h. Actively engage in self-reflection. (Reflecting)	S		NA	NA S	S												
	<b>LM</b>	<b>LM</b>	<b>DW</b>	<b>NS</b>													

**\*\*7a and 7b: You must address these competencies in the comments section on a weekly basis. Please write a different comment each week. Remember that a goal includes what you will do to improve, how often you will do it, and when you will do it by (example- “I had trouble remembering to do the three checks of the six medication rights prior to administering medications. I will review the six rights and medication administration content in the textbook twice before the next clinical. Additionally, I will request to meet with my clinical faculty member to practice preparing and administering at least three medications before the next clinical.”**

### Comments:

Week 1 Strength- I felt very comfortable and confident when practicing with the finger stick blood sugar. Being able to test for quality control, and having to collect blood was a big strength because of the practice I have done at work. On average I do around 5 FSBS daily. I will continue to use this skill in clinicals to check the glucose level of patients. **Great! LM**

Week 1 Weakness- I struggled with IV dosage calculation more than regular dosage calculation. Doing on paper calculations weren't hard but getting used to looking at the med bags and having to come up with the equations made it most difficult. I plan to practice IV dosage calculations this weekend so become more familiar with how the questions are set up. I will spend at least one hour on Saturday and Sunday practicing in order to become proficient before any tests or clinicals. **This is an appropriate area for improvement. The more you practice IV medication calculations, the more comfortable you will feel. LM**

Week 4 (7a,b)- Unfortunately, these competencies (reflecting on a strength and goal for improvement must be commented on for all clinicals. Because they were not evaluated and not commented on, you have earned a U for each. Please be sure to read the directions on page 1 of this tool. You are required to address these U's in the comments below to describe how you will or have improved. The comments must be included in the week 5 tool submission. Failure to do so will result in a continued U rating until comments to demonstrate satisfactory competency are included. Please let me know if you have any questions. (7c-h)- All of these competencies should be evaluated on a weekly basis. The only time they will not be evaluated is if you have absolutely no clinical scheduled (for example, week 3). 7f was evaluated as "U" for not completing the survey by the due date and time. Be sure to review the syllabus for specific directions for each clinical site. NS

Week 4 Strength- Public speaking in front of large crowd and hosting a game show. The seniors all enjoyed our Jeopardy game and kept asking for more trivia questions after we had finished.

Week 4 Weakness- Failing to Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect by submitting the clinical survey late. I have since went back and looked over the other surveys that are needed to be completed such as Infection Control & Digestive Health. During week 4 I was unaware of this survey but now that I have noticed it, I will complete all other surveys on time.

Week 5 Strength- I felt that I had demonstrated great therapeutic communication between my patient. She was very fun to work with and see her get stronger. Even though it was only 2 days, I noticed the difference in strength with her lower extremities. She complimented me on my help with her recovery and said she wants to bake one of her famous poundcakes for me.

Week 5 Weakness- Medication. Getting back into clinicals I had lost my familiarity from last semester and managed to disappoint myself in my performance. It started off good getting all the medications from the Pyxis but I dropped a pill on the floor when putting it into the medication cup, and even worse I dropped the insulin pen right before injection. I really didn't feel nervous but next med pass I will slow down and learn from this weeks clinical experience.

Student Name:		Course Objective:					
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)		
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)		
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
	7. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)		
Responding	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		
	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
Ref	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		

<b>ecting</b>	14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> <li>• Continue plan of care</li> <li>• Modify plan of care</li> <li>• Terminate plan of care</li> </ul>	<b>Complete</b>			<b>Not complete</b>		
	<p>Total Possible Points= 42 points  42-33 points = Satisfactory  32-21 points = Needs Improvement*  &lt; 21 points = Unsatisfactory*  <b>*Total points adding up to less than or equal to 32 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.</b></p> <p><b>Faculty/Teaching Assistant Comments:</b></p>						<b>Total Points:</b>
						<b>Faculty/Teaching Assistant Initials:</b>	

Student Name:		Course Objective:					
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)		
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)		
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
	7. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)		
Responding	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		
	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
Refl	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		

	14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> <li>• Continue plan of care</li> <li>• Modify plan of care</li> <li>• Terminate plan of care</li> </ul>	<b>Complete</b>			<b>Not complete</b>			
<p>Total Possible Points= 42 points            42-33 points = Satisfactory            32-21 points = Needs Improvement*            &lt; 21 points = Unsatisfactory*  <b>*Total points adding up to less than or equal to 32 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.</b></p> <p><b>Faculty/Teaching Assistant Comments:</b></p>							<p><b>Total Points:</b></p>	<p><b>Faculty/Teaching Assistant Initials:</b></p>

Firelands Regional Medical Center School of Nursing  
**Medical Surgical Nursing 2023**  
**Skills Lab Competency Tool**

Student name: Dylan Wilson								
<b>Skills Lab Competency Evaluation</b>	<b>Lab Skills</b>							
	Week 1	Week 1	Week 1	Week 1	Week 1	Week 2	Week 2	Week 9
	<b>IV Math</b> (3,7)*	<b>Assessment</b> (2,3,4,5,7)*	<b>Insulin</b> (2,3,5,7)*	<b>Lab Day</b> (1,2,3,4,5,6,7)*	<b>IV Skills</b> (2,3,5,7)*	<b>Trach</b> (1,2,3,4,5,6,7)*	<b>EBP</b> (3,7)*	<b>Lab Day</b> (1,2,3,4,5,6,7)*
Performance Codes: <b>S:</b> Satisfactory <b>U:</b> Unsatisfactory	<b>Date:</b> 1/12/23	<b>Date:</b> 1/10/23	<b>Date:</b> 1/10/23	<b>Date:</b> 1/12/23	<b>Date:</b> 1/13/23	<b>Date:</b> 1/18 or 1/19/23	<b>Date:</b> 1/18 or 1/19/23	<b>Date:</b> 3/13 or 3/14/23
Evaluation:	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	
Faculty/Teaching Assistant Initials	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	
<b>Remediation:</b> Date/Evaluation/Initials	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	

\*Course Objectives

**Comments:**

**Week 1**

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/10/23 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/12/23. KA/DW

(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. KA/RH

(Insulin)- You were able to correctly prepare an insulin pen and administer subcutaneous insulin. Insulin requirements were accurately identified and calculated through the corrective scale and carbohydrate coverage orders. MD

(Lab Day)- You satisfactorily completed the mandatory lab review of nursing foundational skills. This was achieved through simulating care for a patient in a scenario requiring competency in assessment, communication, medication administration (including PO and IM injection), nasogastric tube insertion and maintenance, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, and foley insertion. NS/LM

(IV Skills)- You have satisfactorily completed the IV lab including a saline flush, IV push, hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV solution, and monitoring the IV site for infiltration, phlebitis, and signs of complication. NS/MD/RH

## Week 2

(Trach Care & Suctioning) - During this lab, you satisfactorily demonstrate competence with tracheostomy care and tracheostomy suctioning. DW/RH/NS

(EBP Lab)- You actively participated in the online searching process for evidence-based practice literature, as well as reviewing example articles to determine appropriate selection and information needed when summarizing a research article. LM/LK

Firelands Regional Medical Center School of Nursing  
 Medical Surgical Nursing 2023  
 Simulation Evaluations

<b><u>Simulation Evaluation</u></b>	<b>Student Name: Dylan Wilson</b>							
	Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> Unsatisfactory	<b>vSim-</b> Vincent Brody (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	<b>vSim-</b> Juan Carlos (Pharmacology) (*1, 2, 3, 4, 5, 6)	<b>vSim-</b> Marilyn Hughes (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Simulation #1 (Musculoskeletal & Resp) (*1, 2, 3, 4, 5, 6, 7)	Simulation #2 (GI & Endocrine) (*1, 2, 3, 4, 5, 6, 7)	<b>vSim-</b> Stan Checketts (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	<b>vSim-</b> Harry Hadley (Pharmacology) (*1, 2, 3, 4, 5, 6)
	<b>Date:</b> 1/30/23	<b>Date:</b> 2/13/23	<b>Date:</b> 2/24/23	<b>Date:</b> 3/1 or 3/2/23	<b>Date:</b> 4/12 or 4/13/23	<b>Date:</b> 4/17/23	<b>Date:</b> 4/27/23	<b>Date:</b> 5/1/23
Evaluation								
Faculty/Teaching Assistant Initials								
<b>Remediation:</b> Date/Evaluation/Initials								

\* Course Objectives

**Comments:**

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Medical Surgical Nursing – 2023**

**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 and Date:

12/9/2022