

EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Taylor Fox

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)

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.

***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
02/24/23	Impaired Gas Exchange			

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.

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
Competencies:			S	S	NA	NA	S										
a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)			S	S	NA	NA	S										
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	NA	NA	S										
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	NA	S	S										
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S	NA	NA	S										
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	NA	S	S										
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S	NA	NA	S										
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	NA	NA	S										
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	S	NA	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		Small Bowel 4N: 78	5T: 77 Left Temporal	NA	Digestive Health and Infection Control	5T: 65 CVA due to left carotid										
Instructors Initials	LM	LM	NS	LM	DW	DW											

Comments: 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

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3 1(a-h) – Taylor, great job this week discussing your patient’s medical condition and correlating the treatments associated with the disease process. You were able to discuss what led to his bowel obstruction and complications that could arise as a result. You correlated his nausea, abdominal distention, and lack of appetite as being related to the obstruction and ileus that were present. You identified the importance of maintaining NPO status and supplementing with IV hydration that included electrolytes and glucose during the NPO period. You were able to discuss the rationale behind the NG tube being in place and demonstrated good preparation for the clinical setting. NS

Week 4 objective 1(a-h) - Taylor, you analyzed the pathophysiology and correlated your patient’s signs and symptoms to her disease process. You used this information to provide appropriate nursing care for your patient on the rehab unit. Your patient had a Lt. temporal infarction and correlated her expressive aphasia to her diagnosis. You interpreted lab results, nutritional needs, and medical treatments to guide you in your decision-making process. Great job! LM

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
Competencies:			S	S	NA	NA	S										
a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			S	S	NA	NA	S										
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			S	S	NA	NA	S										
c. Conduct a skin risk assessment and implement appropriate precautions and care. (Noticing)			S	S	NA	NA	S										
d. Communicate physical assessment. (Responding)			S	S	NA	NA	S										
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S	NA	NA	S										
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	S	NA	NA	S										
	LM	LM	NS	LM	DW	DW											

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

Week 3 2(a,d,e) – You did a nice job prioritizing your focus on both his recent knee procedure as well as his gastrointestinal alterations. You used good assessment skills to notice numerous deviations from normal, including limited movement and abnormal gait as a result of his recent knee procedure, missing teeth that could relate to potential nutritional problems, abdominal distention, hyperactive bowel sounds, and tenderness upon palpation. You focused your assessment on the NG tube ensuring proper placement and monitoring. Overall job well done! Your documentation was thorough. Just make sure to open up all the boxes, specifically in the neuro assessment, to ensure information is not omitted. NS

Week 4 objective 2(a, d, e, f) - Taylor, you performed a thorough head-to-toe assessment on your patient. You communicated your assessment findings to your primary nurse and instructor. You correctly identified assessment skills specific for your patient such as a detailed neuro assessment. You are continuing to become more comfortable with accessing and documenting in the EMR. Keep up the good work! LM

*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
Competencies:	S		S	S	NA	S	S										
a. Perform standard precautions. (Responding)	S		S	S	NA	S	S										
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	NA	NA	S										
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S	NA	NA	S										
d. Appropriately prioritizes nursing care. (Responding)			S	S	NA	NA	S										
e. Recognize the need for assistance. (Reflecting)			S	S	NA	NA	S										
f. Apply the principles of asepsis where indicated. (Responding)	S		S	S	NA	S	S										
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			NA	NA	NA	NA	NA										
h. Implement DVT prophylaxis (early ambulation, SCDs, and ted hose) based on assessment and physicians' orders (Responding)			S	S	NA	NA	S										
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	S	NA	NA	S										
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S	NA	NA	S										
	LM	LM	NS	LM	DW	DW											

Comments:

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3 3(b,c,d) – overall this week I thought you managed your time very well. You were timely in your assessments and charting, ensuring all members of the health care team were on the same page with the most recent data. You prioritized your care appropriately, meeting his pain control needs and nausea. Your timeliness allowed you to better understand your patient while also allowing you to perform additional nursing skills. In your skills, you demonstrated excellent proficiency and confidence. Job well done! NS

Week 4 objective 3(a-d, i, j) - Taylor, you demonstrated safe, skillful nursing measures throughout your clinical days on the rehab unit. You were aware of your patient's needs regarding promotion of skin integrity, fall risk, transferring limitations, and hygiene needs. You organized and prioritized your time well, including structuring your medication pass around OT and PT times. As team leader, you planned your day by prioritizing the needs of your two assigned patients. You collaborated with other members of the health care team by discussing priority needs for each patient and assisted your peers when needed. You did a terrific job! LM

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
Competencies:			S	S	NA	NA	S										
k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			S	S	NA	NA	S										
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			S	S	NA	NA	S										
m. Calculate medication doses accurately. (Responding)			S	S	NA	NA	S										
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			S	NA	NA	NA	NA										
o. Regulate IV flow rate. (Responding)	S		S	NA	NA	NA	NA										
p. Flush saline lock. (Responding)			S	NA	NA	NA	NA										
q. D/C an IV. (Responding)			S	NA	NA	NA	NA										
r. Monitor an IV. (Noticing)	S		S	NA	NA	NA	NA										
s. Perform FSBS with appropriate interventions. (Responding)	S		NA	NA	NA	NA	NA										
	LM	LM	NS	LM	DW	DW											

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

Week 3 3(k-s) – Very nice job this week with medication administration. You utilized good safety precautions, performing the three safety checks and ensuring all patient rights were met. Although your patient was NPO and did not receive oral medications, you still gained valuable experience with IV route. You were able to demonstrate competence with reconstituting an IVP medication. You accurately performed a saline flush using good aseptic technique while also monitoring the IV site for potential complications. You utilized the EHR for appropriate timing of pain medications which you administered via IVP with good technique. Appropriate dosage calculations were performed. Awesome job priming and hanging your first continuous infusion! You flawlessly primed the tubing without any bubbles occurring and programmed the rate correctly according to physician orders. Lastly, you gained experience with assessing a non-functioning IV site and discontinued the IV appropriately, ensuring that it was intact. Job well done with new medication skills!! NS

Week 4 objective 3(k, l, m) – Taylor, you administered several medications to your patient this week. You were knowledgeable about each medication's use, dosage, route, common side effects, classification, and nursing considerations. You observed the rights of medication administration and completed the 3 medication checks appropriately. Great job! LM

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
Competencies:			S	S	NA	S	S										
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)																	
b. Communicate professionally and collaboratively with members of the healthcare team using hand-off communication techniques. (SBAR) (Responding)			S	S	NA	NA	S										
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	S	NA	NA	S										
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	NA	S	S										
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	S	NA	S	S										
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	S	NA	NA	S										
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			S	S	NA	NA	S										
	LM	LM	NS	LM	DW	DW											

Comments:

Week 3 4(b) – Nice work with your communication and collaboration with other members of the health care team. You provided frequent updates to the assigned RN and collaborated with your classmates to learn additional skills. Nice job! NS

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3 4(e) –Overall your CDG this week was well done. I thought you found a relevant article based on your patient’s situation that helped you learn more about your experience. Great job succinctly summarizing the information. See my comments on your posts for further detail. Overall APA formatting looked pretty good. Something to consider, for journal articles, the journal title and volume # should be italicized. Proper APA formatting for your initial post would be as follows:

Erbay Dalli, Ö., Ceylan, İ., & Kelebek Girgin, N. (2022). Incidence, characteristics and risk factors of medical device-related pressure injuries: An observational cohort study. *Intensive and Critical Care Nursing*, 69. <https://doi.org/10.1016/j.iccn.2021.103180> These are tips for future success. All necessary criteria were met for a satisfactory evaluation, nice job. NS

Week 4 objective 4(a, b, e) - Taylor, you communicated effectively with your patient and other members of the health care team throughout each clinical day. You explained each task before performing them. You frequently updated me on the progress made with each patient in your role as team leader. You collaborated with OT and PT regarding your patient’s care and follow up therapy needs. You identified a SBAR situation that was appropriately communicated utilizing this technique. You accurately completed a detailed team leader CDG, including your initial post and peer post. You used the TeamSTEPPS mutual support concept for your in-text citation; however, an in-text citation needs to be placed in quotes because you are retrieving direct information from the source. This was not properly completed in your initial post. Also, remember to place end quotes in your in-text citation for your peer post. Overall, you did a nice job on your CDG posts! LM

Week 6 (4e)- According to the CDG Grading Rubric, you have earned an S for your participation in your Infection Control discussion this week. Your post was detailed, thoughtful and supported by evidence. Suggestions for future improvement with APA formatting- 1. When you directly quote something from your resource, the citation should include either the page number that the quote is found on, or a paragraph number if there are not page numbers. Ex- (Surawicz, 2021, para 6). 2. In scholarly writing, the expectation is that there will be little to no direct quoting of information and that paraphrasing of information will be used whenever possible. DW

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
Competencies:			S	S	NA	NA	S										
a. Describe a teaching need of your patient.** (Reflecting)																	
b. Utilize appropriate terminology and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)			S	S	NA	NA	S										
	LM	LM	NS	LM	DW	DW											

****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:

Week 3

5a & 5b Education was given to the patient of what Ondansetron was, he expressed his concerns as to not knowing what the medication use was. Prior to administering I was able to identify by looking the medication up on Skyscape that it is used to prevent nausea and vomiting, I also educated pt on the side effect of constipation. I then was properly able to discuss to him that this medication was being given via IV push to better the nausea he was experiencing from the Small Bowel Obstruction. This was necessary prior to administering the drug so he was aware of the medication and potential side effects to look out for. He was able to express that he had an understanding of the medication after education was given, prior to administering the drug. **Very good! Its important to educate our patients on each medication they are receiving, even if it seems like a routine medication for us. The more informed the patient is, the better their experience. Educating him on the potential for constipation is especially important considering his admission for a bowel obstruction. Great job with med education this week! Consider utilizing print outs for the patient to take home in future education opportunities. NS**

Week 4:

5a & 5b: While caring for my patient I noticed the need for teaching about Incentive Spirometry. She was unsure of how often to use it, or when the best time is. I was able to utilize Lexicomp, along with knowledge I learned throughout lecture to educate my patient. I was able to let her know that she could set a goal of using it 10 times an hour, while awake. She was able to teach back to me how often she should use it, along with when. I also made sure it was within reach on her bedside table, I feel as though the location before was out of reach so she wasn't able to utilize it as much. As I moved it, the patient began to pick it up and use it! I also passed on to the next student nurse about the possible education on coughing and deep breathing, and the benefits she could gain doing it often. Both are excellent ways to expand the lungs, along with strengthening them. **This is an excellent teaching topic for your patient! You correctly taught her the process for using an incentive spirometer. Great job! LM**

Week 7:

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

5a & 5b- A teaching need for my patient was the need to improve impaired gas exchange while suffering from COPD. I included teaching on the importance of coughing and deep breathing every 2 hours, encouraged patient to increase fluid intake to thin secretions since she has developed a productive cough. Lastly, I encouraged the use of an incentive spirometer 10 times while awake, since she lacked the knowledge on when or how often to use device. I used Lexicomp as a resource and printed a copy of how to correctly use the incentive spirometer to my patient. To make sure she understood the information given, I used the teach back method and had the patient repeat how often to use it and when.

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	NA	NA	S										
b. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting)			S	S	NA	S	S										
	LM	LM	NS	LM	DW	DW											

****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:

See Care Map Grading Rubrics below.

Week 3:

6b: My patient is a Veteran that is visually and hearing impaired, because of his 3 years in service he has been given the opportunity to go to through the VA clinic for health needs. This has tremendously helped him financially and medically. Through conversation I learned that they have paid for a set of hearing aids for my patient and even some medications that aren't fully covered by his primary insurance. My patient has been able to live with a better quality of life because of this, which is fantastic! **Awesome!! It sounds like you were able to learn a lot about your patient and the potential for determinants of health! I encourage you to review SDOH online to learn a little bit more about what can negatively impacts one's health, weather its low education status, lack of support, etc. Great job identifying his positive influences to his care.**
NS

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 4:

6b: My patient explained to me that she lives with her sister in a condo, her support system is consisted of her sister and kids. She gets around the house very well, with the use of her glasses and prosthetic right eye, she is still very mobile. She still enjoys to make herself breakfast and is very excited to be going home soon to her sister. My patients strength is very good, she did very well with both Occupational and Physical Therapies, she has also been advanced to thin liquids from nectar thick, by passing her swallow evaluation. My patient states that she has no worries as to going home or being able to get around her home as there are not many obstacles, such as stairs. Her sister is still able to drive so they go to the grocery store together often to get their needs. **You identified several SDOH for your patient. What would be some examples of the negative impacts on health that would be specific to your patient? Nice job! LM**

Week 6:

6b: One of Arabella and I's patients explained to me that her support system was her boyfriend. He was the one that takes her to appointments and drives her around. She is diagnosed and living with COPD, and is a current smoker. She uses oxygen continuously at home, and also was on 6 liters nasal cannula during her Endoscopy followed by Colonoscopy. **DW**

Week 7:

6b: My patient lives with her boyfriend in Fremont, they have stairs in their home. She is usually accompanied by her son most days, and he is her transportation for doctors' appointments, he also works night shift while her boyfriend works dayshift, often times meaning he cannot take her to appointments. She is a current smoker in which she smokes 1 pack a day, along with being a chronic alcoholic and consuming around 6 alcoholic beverages a day. She now suffers from COPD and has frequent spells of SOB during rest and exertion.

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. Reflect on an area of strength. ** (Reflecting)	S		S	S	NA	S	S										
b. Reflect on an area for improvement and set a goal to meet this need. ** (Reflecting)	S		S	S	NA	S	S										
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S	NA	NA	S										
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	S	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		S	S	NA	S	S										
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S	NA	S	S										
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S	NA	NA	S										
h. Actively engage in self-reflection. (Reflecting)	S		S	S	NA	S	S										
	LM	LM	NS	LM	DW	DW											

****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: 7A: An area of strength this week was being able to successfully complete a head to toe assessment, change a wound dressing, and give an IM injection, while maintaining patient comfort and privacy. **Great job! LM**

7B: An area of improvement would be to better understand how to figure out IV infusion rates. To better understand how to calculate them I plan to take 3 practice quizzes from the website found under Dosage Calculation resources on Edvance. I plan to do these quizzes before the quiz on January 17th. **This is an excellent area for improvement and you provided a specific plan on how you are going to achieve this goal. Great job! LM**

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3:

7a: An area of strength this week for me was being able to successfully administer multiple IV flushes, give 2 IV push medications, and hang/properly spike a new bag of replacement fluids and started running them properly. **Excellent strengths to note! These were all new skills for you in the clinical setting. You were confident in your approach, asked appropriate questions, and performed each skill very well. Numerous strengths to be proud of this week! NS**

7b: An area of weakness that I experienced this week was figuring out where everything was on the IV monitor screen. To better familiarize myself with it I plan on going in the Skills Lab this upcoming week and practice starting replacement fluids at least 3 times. I think this will take some getting used to since it is so new and we aren't working with them everyday. **As we discussed in debriefing, familiarity and comfort with skills and equipment comes with experience. The more you see and do the more comfortable you will be. I think you have a very solid plan in place for improvement that will allow you to feel comfortable with the IV equipment. Nice reflection! Keep up the hard work. NS**

Week 4:

7a: An area of strength this week for me was being able to use my time management skills to prioritize the needs of my patient. With OT, PT, and ST all morning, I was able to prioritize a half hour break my patient had between OT and PT to attain a set of vitals, do a safety assessment, pain assessment, complete a full head to toe, while still being able to pass her PO medications that were due at 0900. Because of this my patient was able to get the benefit of all therapy sessions and was able to take correct medications at the proper time per doctor orders. **You did an excellent job coordinating care for your patient this week on the rehab unit! LM**

7b: An area of weakness this week for me was documentation. I had forgot to put nursing notes in q2 hours, along with a few mistakes on my physical reassessment. To remind myself each clinical to do nursing notes every 2 hours I plan to make a reminder sheet on my clipboard of the documentation that needs to be done every clinical along with the times it should be addressed. As to better familiarize myself with the physical reassessment, I plan to go in the Computer Lab this week, and practice going through the assessment twice on the Meditech "Test." I do think practice and time will help me better document, as this week I was unsure as to how to document patients prosthesis, or what all should have been documented with it. **This is an appropriate area for improvement. You also provided a detailed plan of action. Great job! LM**

Week 6:

7a: An area of strength for me this week was being able to take one of my patients safely to the bathroom after his procedure. I was able to help him use proper body mechanics, while providing privacy to him by holding his gown together. **Excellent! This is a very important skill to have...prevention of back injuries and safety for both you and the patient. DW**

7b: An area for improvement would be to better know the correct PPE for Contact, Droplet, and Airborne precautions. I had trouble remembering the proper PPE for different infection processes. In order to better understand the proper PPE for the different infections I plan to go over the precaution handout that was provided under clinical resources and quiz myself 3 times on them before next week's clinical experience on 5 tower. **Great idea! May I also suggest that you add this quick reference guide to your clipboard for all future clinicals. DW**

Thank you Dawn, I now carry that with me on my clipboard!

Week 7:

7a: An area of strength this week was being able to identify my patients Rhonchi while doing her head to toe assessment. I also provided my patient with information on incentive spirometry, coughing and deep breathing, along with increasing intake.

7b: An area for improvement would be to better plan my day of care while on Rehab clinicals. Wednesday there was only about a half hour of time to do all assessments after therapy to be able to make it to therapeutic dining group on time. Thursday I did a better job of this by doing her safety and falls assessment, along with pain assessment before going down for therapy. To get better at time management I plan to make an hourly checklist of things holding high priority after report in the morning, before heading to therapy. I plan to do this each clinical to improve the care and efficiency of my patients by the end of this semester.

Student Name: Taylor Fox			Course Objective: Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity. (2,3,4,5)*			
Date or Clinical Week: 02/22/23 – 02/23/23 Week 7						
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		
Reflecting	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: - Continue plan of care - Modify plan of care - Terminate plan of care	Complete			Not complete		

Total Possible Points= 42 points 42-33 points = Satisfactory 32-21 points = Needs Improvement* < 21 points = Unsatisfactory* *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. Faculty/Teaching Assistant Comments:	Total Points:
	Faculty/Teaching Assistant Initials:

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

	14. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	Complete			Not complete		
Total Possible Points= 42 points 42-33 points = Satisfactory 32-21 points = Needs Improvement* < 21 points = Unsatisfactory* *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. Faculty/Teaching Assistant Comments:							Total Points: Faculty/Teaching Assistant Initials:

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

Student name: Taylor Fox								
Skills Lab Competency Evaluation	Lab Skills							
	Week 1	Week 1	Week 1	Week 1	Week 1	Week 2	Week 2	Week 9
	IV Math (3,7)*	Assessment (2,3,4,5,7)*	Insulin (2,3,5,7)*	Lab Day (1,2,3,4,5,6,7)*	IV Skills (2,3,5,7)*	Trach (1,2,3,4,5,6,7)*	EBP (3,7)*	Lab Day (1,2,3,4,5,6,7)*
	Date: 1/12/23	Date: 1/10/23	Date: 1/10/23	Date: 1/12/23	Date: 1/13/23	Date: 1/18 or 1/19/23	Date: 1/18 or 1/19/23	Date: 3/13 or 3/14/23
Evaluation:	S	S	S	S	S	S	S	
Faculty/Teaching Assistant Initials	LM	LM	LM	LM	LM	LM	LM	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	

*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 1/19/2023) – During this lab, you satisfactorily demonstrated competence with tracheal airway suctioning and tracheostomy care. You explained each step to your patient and made sure they were tolerating the procedure well. You did a great job of maintaining the sterile field. Keep up the good work! RH

(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

<u>Simulation Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	Student Name: Taylor Fox							
	vSim- Vincent Brody (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	vSim- Juan Carlos (Pharmacology) (*1, 2, 3, 4, 5, 6)	vSim- 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)	vSim- Stan Checketts (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	vSim- Harry Hadley (Pharmacology) (*1, 2, 3, 4, 5, 6)	vSim- Yoa Li (Pharmacology) (*1, 2, 3, 4, 5, 6)
	Date: 1/30/23	Date: 2/13/23	Date: 2/24/23	Date: 3/1 or 3/2/23	Date: 4/12 or 4/13/23	Date: 4/17/23	Date: 4/27/23	Date: 5/1/23
Evaluation	S	S						
Faculty/Teaching Assistant Initials	NS	DW						
Remediation: Date/Evaluation/Initials	NA	NA						

* Course Objectives

Comments:

Week 3 Vincent Brody – All requirements were completed by the assigned due date and time. NS

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