

**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)
1/30/2023	2 hours	Late vSim- Vincent Brody	1/30/2023, 2 hours

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>			S	NA	S	S	NA	NA	S								
a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)			S	NA	S	S	NA	NA	S								
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	NA	S	S	NA	NA	S								
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	NA	S	S	NA	NA	S								
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			NA	NA	S	S	NA	NA	S								
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			NA	NA	S	S	NA	NA	S								
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			NA	NA	S	S	NA	NA	S								
g. Assess developmental stages of assigned patients. (Interpreting)			S	NA	S	S	S	NA	S								
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	NA	S	S	NA	NA	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	Infection Control and Digestive Health	No clinical	Rehab, age 68, left ischemic stroke	3T, age 88, dizziness and HTN	Erie County Senior Center	No clinical	NA								
Instructors Initials	KA	KA	DW	DW	MD	KA	LM	KA	KA								

**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. KA

Week 3 (Obj. 1)- For all future clinicals, please be sure to identify the clinical location in the row with the yellow highlighted information. When on inpatient units, you will also include the patients age and medical diagnosis. (1a-c)- You did a great job of discussing the patho, symptoms and diagnostics required for a patient with C-diff. Keep up the good work. DW

Week 5 Objective 1B and D-Great job correlating your patient's symptoms with the pharmacotherapy treatments they are receiving. MD

Week 6 – 1a , b, c, e– You did a nice job discussing on clinical your patient's disease process and what nursing was doing to help the patient. You were able to discuss symptoms we were monitoring and managing in your patient as well as pertinent labs for your patient diagnosis. You were able to discuss the different patients on your team and prioritize the patients according to their diagnosis and assessment. You utilized your knowledge and change in patient status to reprioritize the patients as the day went on. KA

Week 6 – 1d – You did a nice job reviewing all your medications before you administered them to the patient. You were able to discuss the reason why the patient was taking the medication as well as what we were monitoring the patient for. You also were able to discuss what information was needed to determine if the medication should be administered (i.e. blood pressure, pulse). You were able to discuss the medications of all the patients on your team and was able to work with your team member to determine appropriateness of medication administration. KA

Week 7 objective 1(g)- Megan, you recognized and assessed the developmental stages of the individuals participating in the activities at the Erie County Senior Center. Excellent! 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
<b>Competencies:</b>			NA	NA	S	S	NA	NA	S								
a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			NA	NA	S	S	NA	NA	S								
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			NA	NA	S	S	NA	NA	S								
c. Conduct a skin risk assessment and implement appropriate precautions and care. (Noticing)			NA	NA	S	S	NA	NA	S								
d. Communicate physical assessment. (Responding)			NA	NA	S	S	NA	NA	S								
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			NA	NA	S	S	NA	NA	S								
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		NA S	NA	S	S	NA	NA	S								
	KA	KA	DW	DW	MD	KA	LM	KA	KA								

### 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 (2f)- This competency was satisfactorily completed when reviewing the electronic health record of individuals in isolation precautions; exploring reasons for the isolation and appropriate documentation of precautions during the Infection Control clinical experience. DW

Week 5 Objective 2-You did awesome with this set of competencies. You were thorough with your assessment information and you really did well communicating the assessment to me and your primary nurse. MD

Week 6 – 2a, d – You did a nice job thoroughly assessing you patient and notifying your nurse of any pertinent information. You were also able to work with your team to keep up on the assessment changes occurring with all patients on the team. KA

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 6 – 2f – You utilized the EMR to research your patient and determine what care needed to be provided to your patient throughout the day. You also used the EMR to research all the patients on your team and to check your classmates charting for accuracy. KA

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

### Comments:

Week 5 Objective 3I-Great job identifying an evidence-based practice article that correlated with your patient's diagnosis and what he was experiencing. MD

Week 6 – 3b – You did a nice job helping your team with skills such as dressing changes and organizing our day to include the best time to complete such tasks. KA

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

**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 5 Objective 3K, L, M, and S-You did an awesome job with medication administration and performing a fasting glucose assessment with a glucometer. Nicely done!  
MD

Week 6 – 3k – You did a nice job administering your medications this week. You observed the rights of medication administration and was able to answer all questions about your medications. You had the opportunity to pass PO, SQ, and intranasal medications this week. You performed the medication administration process with beginning dexterity. You also worked with your classmates on your team to determine appropriateness of medication administration for their patients and assist them with following the rights of the medication administration process. KA

Week 6 – 3r – You did a nice job monitoring your patient’s IV site this week and documenting your assessment in the EMR. KA

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

### Comments:

Week 3 (4e)- According to the CDG Grading Rubric, you have earned an S for your Infection Control discussion this week. Your post was thoughtful, thorough and included a citation/reference from Everyday Health related to dehydration and diarrhea. Your APA formatting was accurate. I have one additional suggestion for the future. I know the CDG Grading Rubric only requires at a minimum one citation and reference; however, to avoid plagiarizing information from the literature, in the future it is important to cite and reference all information borrowed from another source. The discussion you shared related to the proper technique for hand hygiene was quite

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

specific and should likely require a citation and reference to give credit where credit is due to the original author of the information. Please keep this in mind with all future discussion and written work. Keep up the hard work! DW

Week 5 Objective 4E-You are receiving an NI for this week's discussion post due to not having an in-text citation in your initial posting. Your peer response had both an in-text citation and a reference, however your initial post only had a reference. Please remember this for future posts. MD

Week -6 – 4b, g – You did a nice job keeping your nurse up-to-date on all pertinent information throughout the day. You also provided the nurse with a concise report at the end of the day before leaving. You did a nice job working with your team members to stay up-to-date with their patients and to ensure the nurse is notified as needed. KA

Week 6 – 4e – Megan, you did a great job completing the CDG questions on your team leading experience. Your responses were concise and your response to your classmate was thoughtful and added to the conversation. You included a reference and in-text citation. Keep up the great work! KA

Week 7 objective 4(a, e)- Megan, you communicated and interacted with the individuals at the senior center throughout your clinical day. You did a nice job completing the ECSC CDG post. You provided detailed responses to the questions related to your ECSC experience. Excellent! LM

**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	S	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 NI	S	NA	NA	S								
	KA	KA	DW	DW	MD	KA	LM	KA	KA								

**\*\*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 5: Education related to fall precautions was provided by discussion and demonstration. Use call light for assistance, do not ambulate alone, and always ensure to use walker and wheelchair. This was necessary to maintain patient safety as he had ride sided weakness from a recent stroke. The teach back method was used to ensure patient understanding. **This is really good information to give to him and I love that you provided it with discussion and demonstration. You did not tell me where you received the information from (Skyscape, Lexicomp, ect.) Please be sure to include this information when completing this post. MD**

Week 6: Education related to dizziness and safe ambulation was provided with assistance from dynamic health. Through discussion and demonstration, I explained to the patient to not stand quickly, or move head too quickly to lessen dizziness, as well as changing positions slowly and not rushing walking. Teach back method was used. This teaching helped to ensure patient safety. **Great job this was wonderful information to teach him with the dizziness he had. KA**

## 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														
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)			S	NA	S	S	S	NA	S								
	KA	KA	DW	DW	MD	KA	LM	KA	KA								

**\*\*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: I had the digestive health clinical, one of the patients undergoing a scope stated that he did not have the income to pay for any medications, which is why his condition had become worse. This influences patient care because they may not have the income to care for themselves such as hygiene. **Great observation! This is just one example of why non-judgmental care is important. One could look at the patient's situation and assume that they are noncompliant and just don't care about their health, when in all actuality the patient does not have the financial means to keep himself healthy. Healthcare professionals have a moral responsibility to identify this and assist as able. DW**

Week 5: Rehab, my patients care was influenced by his support system greatly. I spoke with the patient, as well as his spouse on the phone in order to coordinate care to their needs and make him feel at home. **Good! What other areas of SDOH could have affected his care and condition? MD**

Week 6: I had clinical on 3T, my patient's care was influenced due to financial situation. He was 88 years old, retired, and his wife was recently placed in a long term care facility. He was struggling to adjust, so his support system was altered as well. He had children, but only one was willing to help and brought him clothing to make him feel more at home. **These are all important factors that help influence your patient's health and his ability to manage the long-term care of the chronic conditions he has. KA**

Week 7, I had the erie county senior center clinical. I noticed that majority of the seniors that visited showed concern for their financial situation. The center had donations to pass out to them, as well as the meals and drinks. They also had a speaker, a retired minister, come in to pray with the seniors as well, religion can be a factor of healthcare as well. **Great job identifying the needs of the individuals at the senior center. LM**

## 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		S	NA	S	S	S	NA	S								
b. <b>Reflect on an area for improvement and set a goal to meet this need.**</b> (Reflecting)	S		S	NA	S	S	S	NA	S								
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	U	U	S	NA	S	S	S	NA	S								
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	U	U	S	NA	S	S	S	NA	S								
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	U	U	S	NA	S	S	S	NA	S								
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	U	U	S	NA	S	S	S U	NA	U								
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	U	U	S	NA	S	S	S	NA	S								
h. Actively engage in self-reflection. (Reflecting)	U	U	S	NA	S	S	S	NA	S								
	KA	KA	DW	DW	MD	KA	LM	KA	KA								

**\*\*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: for my strength, I made to sure review any given material before in order to be as prepared as possible. An area for improvement would be to keep NF skills fresh in my mind, I will do this by utilizing open lab times, as well as time at home at least once a week to cover the skills details. **This is a nice goal. Continued practice with infrequently used skills will help you maintain competence in them. KA**

Week 1 – 7c, d, e, f, g, h – Any competency left blank will be marked as a “U”. Please remember to write a comment addressing how you will prevent a U in these competencies in the future. KA

Week 2 – 7c, d, e, f, g, h – Any competency left blank will be marked as a “U”. The competencies will remain a U until you write a comment addressing how you will prevent a U in these competencies in the future. If you have any questions or need help on how to this please feel free to contact me. KA

Week 3: to correct my previous Us, I will ensure that I do not leave any boxes blank on my clinical tool. Thank you for addressing the U’s. I am confident this will not be a problem in the future and you will proceed in a satisfactory trajectory. DW This weeks strength would be asking questions about procedures to gain a better understanding of them. I appreciate the active learning approach. DW An area of improvement would be to pay closer attention to my clinical tool comments, I will ensure that I review them weekly, and write to do so in my calendar so I will not forget. DW

Week 5: this week’s strength would be persevering and understanding patients feelings even if they do not match my own. You did really well with this in clinical! MD An area of improvement would be organizing tasks to ensure nothing is missed. I had gone with my patient to therapy and forgotten to look at his tray to see how many carbs he had taken in, and he was a diabetic. For the future, I will ensure I have a laid out list of tasks and time ranges that they need to be completed by so that I do not miss anything of value. This is a great goal! MD

Week 6: this week’s strength would be time and task management, as I was team leader one of those days. Area of improvement would be application. For example, there have been a few times that I remember learning things in class, but applying them to the clinical setting can be difficult. To improve this, I will research when there is symptoms or diseases that can be linked together in order to achieve a better understanding of the situation. Great idea Megan. This is a wonderful way to help yourself start to put the pieces together of an individual’s disease process. KA

Week 7, this week’s strength would be staying open minded and creative, as I had the senior center clinical. This week’s weakness would be time management, as I got caught up in doing activities and talking with the seniors, I did not pay close attention to time and stayed there half hour after scheduled time. I will ensure to keep track of time for future clinicals and experiences. I am glad that you enjoyed your time at the senior center! LM

Megan, unfortunately, you received a U for competency 7f. This competency discusses exhibiting professional behavior through responsibility. It is the student’s responsibility to read the directions for each assignment and listen to the reminders provided. You have not completed a care map at this point. The directions under the care map table specifically state that at least one care map must be completed prior to midterm. I highlighted the area for you (see above). This was also mentioned several times throughout the semester during orientation and during clinical. Please address this U with your next clinical tool submission explaining why it is no longer a “U”. If this is not addressed, you will continue to receive a “U” until it is addressed. LM

Week 8: I will ensure to pay closer attention to detail on the tools, as well as the syllabus or any other resources in order to not miss another assignment. I will also ensure that I complete two care maps before the end of the semester in order to make up for the one missed. KA

Midterm – Megan, you have had a good start to the semester in the first half. You have taken care of a variety of patients and had the opportunity to demonstrate various nursing skills on clinical. You provide thoughtful and considerate care to your patients. You have received a satisfactory for the majority of your competencies at midterm. You have a few skills that are NA at midterm. It appears you have not had the opportunity to manage a patient with a Foley or insert a Foley catheter, prime IV tubing, administer an IV push, flush an IV, or DC an IV while on clinical. Please seek out opportunities to meet these competencies during the second half of the semester. Let your clinical faculty know at the beginning of clinical of these needs so they can help you find opportunities to meet these competencies. You have also received an unsatisfactory for 7f at midterm in relation to not having a least one care map submitted during the first half of the semester. Please seek out opportunities to complete your two care maps early in the second half of the semester. Keep up the hard work and finish strong. KA

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		

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

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

Student name: Megan Barber								
<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
	Performance Codes:  S: Satisfactory  U:Unsatisfactory	<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>Date:</b> 1/11 or 1/12/23	<b>Date:</b> 1/10/23	<b>Date:</b> 1/10/23	<b>Date:</b> 1/11 or 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>KA</b>	<b>KA</b>	<b>KA</b>	<b>KA</b>	<b>KA</b>	<b>KA</b>	<b>KA</b>	
<b>Remediation:</b> <b>Date/Evaluation/Initials</b>	<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 1/11/23 or 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**

(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

(Trach Care & Suctioning 1/18/2023) - During this lab, you satisfactorily demonstrated competence with tracheal airway suctioning and tracheostomy care. You did an excellent job of explaining the procedure to your patient. You have a strong understanding of sterility and maintaining a sterile field. You were confident in the steps and therefore, both skills were performed efficiently. Keep up the good work! DW

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

<b><u>Simulation Evaluation</u></b>	<b>Student Name: Megan Barber</b>							
	<b>vSim- Vincent Brody</b> (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	<b>vSim- Juan Carlos</b> (Pharmacology) (*1, 2, 3, 4, 5, 6)	<b>vSim- Marilyn Hughes</b> (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	<b>Simulation #1</b> (Musculoskeletal & Resp) (*1, 2, 3, 4, 5, 6, 7)	<b>Simulation #2</b> (GI & Endocrine) (*1, 2, 3, 4, 5, 6, 7)	<b>vSim- Stan Checketts</b> (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	<b>vSim- Harry Hadley</b> (Pharmacology) (*1, 2, 3, 4, 5, 6)	<b>vSim- Yoa Li</b> (Pharmacology) (*1, 2, 3, 4, 5, 6)
Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> Unsatisfactory								
	<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	<b>U</b>	<b>S</b>	<b>S</b>					
Faculty/Teaching Assistant Initials	<b>DW</b>	<b>MD</b>	<b>LM</b>					
<b>Remediation:</b> Date/Evaluation/Initials	<b>S</b> <b>DW</b> 1/30/23	<b>NA</b>	<b>NA</b>					

\* Course Objectives

**Comments:**

1/30/2023- The simulation requirements for Vincent Brody were completed late; therefore U. These simulation hours were made up on 1/30/2023 with a satisfactory evaluation as noted in the remediation section above. Please be sure to reference the syllabus and course calendar frequently for due dates/times throughout the course. I am confident that this was just an isolated incident considering it was the very first vSim for this semester. You've got this! DW

**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