

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2023

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Spring

Date of Completion:

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

Faculty eSignature:

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". If the student does not self-rate, then it is an automatic "U". A student who submits the clinical evaluation tool late will be rated as "U" in the appropriate competency(s) for that clinical week. Whenever a student receives a "U" in a competency, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory or needs improvement in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory or needs improvement as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.

METHODS OF EVALUATION:

Clinical Assignments
Completion of Patient Care
Meditech Documentation
Observation of Clinical Performance
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Clinical Discussion Rubric
Preceptor Feedback
Nursing Care Map Rubric
Skills Lab Checklists/Competency Tool
Lasater Clinical Judgment Rubric
Virtual Simulation scenarios
Pathophysiology Grading Rubric
SBAR/Physician Orders Rubric
Hand-Off Report Competency Rubric

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
2/28/2023	2	Week 8 Simulation-Bereavement	3/23/2023 2H
Initials	Faculty Name		
CB	Chandra Barnes, MSN, RN		
FB	Fran Brennan, MSN, RN		
BL	Brittany Lombardi, MSN, RN		
AR	Amy Rockwell, MSN, RN		
BS	Brian Seitz, MSN, RN, CNE		

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

Satisfactory (S): Safe; accurate each time, efficient, coordinated; confident, focuses on the patient; some expenditure of excess energy; within a reasonable time period; appropriate affective behavior; occasional supporting cues; minimal faculty feedback needed related to written clinical work.

UNSATISFACTORY CLINICAL PERFORMANCE

Needs Improvement (NI): Safe, accurate each time, skillful in parts of behavior, focuses more on the skill and self rather than the patient, inefficient, uncoordinated, anxious, worried, and flustered at times, expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues, faculty feedback required in several areas of clinical written work.

Unsatisfactory (U): Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded “U.” A “U” in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the “U,” the faculty member (s) will continue to rate the competency unsatisfactory.

OTHER

Not Available (NA): The clinical experience which would meet the competency was not available.

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

Objective

1. Engage in the coordination and delivery of nursing care measures to groups of patients and to patients with complex problems. (1,3,4,5,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	NA S	S	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
c. Evaluate patient's response to nursing interventions. (Reflecting)	S	S	NA	S	S	S	NA	NA	S	NA	NA S	S	S					
d. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	S NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
e. Administer medications observing the six rights of medication administration. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	NA	S	NA	S	NA	NA	NA	NA	S	NA	NA	S	NA					
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
Faculty Initials	AR	BL	AR	BS	BS	CB	CB	CB	CB	AR	AR	AR						
Clinical Location	Cardiac Diagnostics / Scavenger Hunt	Special procedures	Quality Assurance/ Core Measures	Infusion Center/Critical care ICU	Critical Care ICU	Critical Care ICU	NA	NA	NA	NA	Patient advocate and discharge planner	Digestive Health	Patient management 3T (1 patient)					

Comments:

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Week 2 (1b)- Satisfactory during your Cardiac Diagnostics clinical experience and with your discussion via the CDG posting.. Preceptor comments: “Excellent in all areas. Pacer lab- Karen raved about you. Observed cardioversion, TEE X2, and regular stress test”. You added comments on the evaluation form related to how you participated and that you had a good experience. Great job. (1d)- NA at this time, as you have not learned the different cardiac rhythms so you are unable to interpret. AR

Week 3-1(b,c,f) Avery, excellent job discussing nursing interventions you observed during your Special Procedures clinical this week. You also did a nice job evaluating the patients’ response to the nursing interventions performed as well. Comments from your preceptor in Special Procedures: Excellent in all areas. “Nice job with this clinical. Good IV technique with successful starts. Observed bone marrow biopsy, angiogram and paracentesis.” Keep up all your great work! BL

Week 5- 1a-e,g- Nice job this week assessing and providing care to your patient(s). You were also able to interpret and measure several cardiac rhythms. You did a nice job administering medications (IV, PO SQ) while observing the six rights. BS

Week 6- 1a-e,g- Great job this week assessing and managing care for your patients, one of which was intubated and on mechanically ventilated. Additional rhythm strips were interpreted and measured. Nice job also administering medications through various routes (SQ, TOP, IVP, IV, OG) while observing the six rights of medication administration. BS

Week 7(1a,d,e): Avery, excellent job this week managing complex patient care situations. You were well prepared for clinical, and you performed very thorough assessments. You were able to administer PO and SQ medications, while following the six rights of medication administration. You were able to complete your ECG booklet, appropriately interpreting and measuring strips. Keep up the great work! CB

Week 10 (1c)- Satisfactory during Patient Advocate/Discharge Planner clinical experience, and with discussion via CDG posting. Preceptor comments: “Excellent in all areas. Avery did a great job talking with patients!”. Keep up the great work! AR

Week 11 (1f)- Great job performing IV starts during the digestive health clinical. Proper technique and aseptic procedures were followed. Keep up the great work! FB

Objective

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

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	S	S	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. (Noticing, Interpreting, Responding)	S	S	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	S	S	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
c. Recognize changes in patient status and take appropriate action. (Noticing, Interpreting, Responding)	S	S	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
d. Formulate a prioritized nursing plan of care utilizing clinical judgment skills. (Noticing, Interpreting, Responding, Reflecting)	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	S	NA	S	S	S	NA	NA	S	NA	S	S	S					
Faculty Initials	AR	BL	AR	BS	BS	CB	CB	CB	CB	AR	AR	AR						

Comments:

Week 3-2(a) Excellent job in your CDG correlating the patient's signs and symptoms to the vascular procedure you observed in your Special Procedures clinical experience this week. BL

Week 5- 2e- Great job formulating a prioritized nursing plan of care utilizing your clinical judgment skills. Nice job discussing cultural considerations/racial inequalities assessed while caring for your patients this week during debriefing. BS

*End-of- Program Student Learning Outcomes

Week 6- 2b,e- Nice job monitoring information contained in the electronic health record and from your own observations to provide great care to your patients. Nice job also identifying social determinants of health during debriefing that could have an impact on your patient's health, well-being, and quality of life. BS

Week 7(2a,b,c,d): Great job this week in debriefing discussing potential risk and potential complications with your patient. You also were able to discuss recognizing changes in your patient's status and actions that would be taken, along with nursing diagnosis or problems related to your patient. You also did a great job on your pathophysiology, please see the grading rubric below. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

3. Plan leadership experiences with a mentor to impact team performance, patient safety, and quality indicators. (1,3,5,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies:	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	S					
a. Critique communication barriers among team members. (Interpreting)																		
b. Participate in QI, core measures, monitoring standards and documentation. (Interpreting & Responding)	S	NA	S	S	S	S	NA	NA	S	NA	S	S	S					
c. Discuss strategies to achieve fiscal responsibility in clinical practice. (Responding)	S	NA	S	S	S	S	NA	NA	S	NA	S	NA	NA					
d. Clarify roles & accountability of team members related to delegation. (Noticing)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	S					
e. Determine the priority patient from assigned patient population. (Interpreting) (Patient Mgmt.)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA					
Faculty Initials	AR	BL	AR	BS	BS	CB	CB	CB	CB	AR	AR	AR						

Comments:

Week 2 (3b,c)- Satisfactory Quality Scavenger Hunt experience, documentation of data, and discussion via CDG posting. Keep up the great work! AR

Week 4 (3b)- Satisfactory during Quality/Core Measures observation experience. RN Comments: Stroke- "Satisfactory in all areas. Nice job! Good luck!"; Core Measures and Rapid Response/Standards of Care- "Satisfactory in all areas.". Satisfactory discussion via CDG posting. Great job! AR

Week 7(3a): Avery, this week you were able to witness different types of communication among team and the importance of communication when it comes to patient outcomes. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5,7)*

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

Comments:

Per your Infusion Center preceptor: "Student open to learning and actively engages new skills."

Week 5- 4a,c- Nice job discussing examples of legal/ethical issues observed in the clinical setting during clinical debriefing. Professional behavior observed at all times in the clinical setting. BS

Week 6- 4c- Professional behavior observed at all times in the clinical setting. BS

Week 7(4c): Great job in clinical displaying professional behavior, and being a team player! CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

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

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

Comments:

Week 4 (5c)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Keep up the great work! AR

Week 5- 5a,c,e- You performed well in the clinical setting this week. Good job discussing factors that create a culture of safety in the clinical setting and the use of evidence-based tools that support safety and quality. BS

Week 6- 5a-e- Great performance in the clinical setting this week. You were able to insert a foley catheter, using sterile technique, for your sedated and mechanically ventilated patient. You did a nice job on your CDG, finding and discussing an evidence-based article related to the prevention of infection for ventilated patients, and discussing the use of informatics in the clinical setting. BS

Week 7(5b): Avery, you do a great job in clinical looking for new opportunities to learn, keep up the great work! CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

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

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

Comments:

Week 2 (6f)- Satisfactory CDG postings related to Cardiac Diagnostics and Quality Scavenger Hunt clinical experiences. Great job! AR

Week 3-6(f) Satisfactory completion of your CDG for Special Procedures this week. Keep up all your great work! BL

Week 4 (6f)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Keep job! AR

Week 5- 6d,e,f- Very good job delivering your hand-off report during debriefing. Good job also documenting nursing interventions and medication administration while on the clinical floor. Care Map- 39/42- Satisfactory. BS

Week 6- 6a,b,c,f- Nice job this week working together with the nursing staff and your fellow students to provide care to your patients. As I'm sure you realized, it would be quite difficult to provide safe care without help from those around you. You all worked together very well! BS

*End-of- Program Student Learning Outcomes

Week 7(6f): Great job on your cdg this week, meeting all requirements and receiving a Satisfactory. CB

Week 10 (6c,f)- Satisfactory discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work! AR
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

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

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

Comments:

Week 4 (7a)- Satisfactory discussion via CDG posting related to your Quality/Core Measures observation experience. Keep it up! AR

Week 6- 7a,b- Articles like the one you chose illustrate the importance on continuous improvement and that evidence-based practice in not just a term, but a way to enhance the process of the continuous improvement we all strive for. Nice job! BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Firelands Regional Medical Center School of Nursing
Skills Lab Evaluation Tool
AMSN
2023

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills									
	Meditech Document (1,2,3,4,5,6)*	Physician Orders/SBAR (1,2,3,4,5,6)*	Prioritization/Delegation (1,2,3,4,5,6)*	Resuscitation (1,3,6,7)*	IV Start (1,3,4,6)*	Blood Admin./IV Pumps (1,2,3,4,5,6)*	Central Line/Blood Draw/Ports/IV Push (1,2,3,4,6)*	Head to Toe Assessment (1,2,6)*	ECG/Telemetry Placements/CT (1,6)*	ECG Measurements (1,2,4,5,6)*
	Date: 1/10/2023	Date: 1/10/2023	Date: 1/10/2023	Date: 1/10/2023	Date: 1/12/2022	Date: 1/12/2023	Date: 1/13/2023	Date: 1/13/2023	Date: 1/13/2023	Date: 1/13/2023
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	AR	AR	AR	AR	AR	AR	AR	AR	AR	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

Meditech: Satisfactory participation of assessment documentation including physical re-assessment, safety and fall assessment, RN mechanical ventilator assessment, IV location assessment, and documentation editing. Great job! FB

Physician Orders: Satisfactory completion of physician's order lab per the SBAR skills competency rubric. You utilized SBAR communication while communicating with a physician and while taking orders over the phone. Good job! CB/BS

Prioritization/Delegation: Satisfactory completion of the prioritization and delegation skills lab. You satisfactorily prioritized care for multiple patients using multiple methods (e.g. Maslow's hierarchy of needs, ABC, Nursing Process, etc.). You were able to appropriately delegate nursing tasks for the patients, and you actively participated in the group discussion on delegation of nursing tasks. Great job! BL

Resuscitation: Satisfactory participation in the practice of Hands-Only CPR, discussion regarding use of and ventilation with bag- valve mask/Ambu bag, and review of crash cart and Code Blue team duties and documentation. AR

IV Starts: Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. FB/BS/CB/BL

Blood administration/IV pump: Satisfactory completion of practice with blood administration safety checks and quality assurance audit. Great job with IV pump practice, the use of the medication library, and pump set up of primary and secondary IV medication infusion. AR

Central Line Dressing/IV push: Satisfactory central line dressing change using proper technique, as well as line flushing. Great job with preparation of mixing a medication with normal saline and administering as an IV push through the central line. FB

Ports/Blood Draw: You were satisfactory in accessing an Infusaport device, demonstrated proper technique for CVAD cap change and satisfactorily demonstrated how to draw blood from a CVAD per hospital policy. Nice work! CB

Head to Toe Assessment: You are satisfactory for the head-to-toe assessment competency. Nice Job! BL/BS

ECG/Telemetry/Chest Tube: Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches and leads; satisfactory participation in review of Chest Tube/Atrium

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric
AMSN
2023

Student Name: A. Tubbs				Course Objective: Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)*			
Date or Clinical Week: Week 5							
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)	3	Nice job providing assessment data and risk factors.
	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	
	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)	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Great job identifying your patient’s nursing priorities and identifying the top priority. Nice job also identifying potential complications related to the priority problem, with signs and symptoms for each complication.
	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	3	
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	7. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)	3	
Responding	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	Nice job prioritizing nursing interventions.
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

*End-of- Program Student Learning Outcomes

	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
Reflecting	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	
	14. Evaluation includes one of the following statements: - Continue plan of care - Modify plan of care - Terminate plan of care	Complete			Not complete	0	
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: 39/42 Satisfactory. BS	
						Faculty/Teaching Assistant Initials: Nice job Avery! BS	

Care Map Evaluation Tool
AMSN

Date	Care Map **	Evaluation & Instructor Initials	Remediation & Instructor Initials
2/7-2/8/2023		S/BS	NA

2023

** AMSN students are required to submit one satisfactory care map during the 3-week 4T clinical rotation. If the care map is not evaluated as satisfactory upon initial submission, the student has one opportunity to revise the care map based on instructor feedback.

Pathophysiology Grading Rubric
Firelands Regional Medical Center School of Nursing
Advanced Medical Surgical Nursing
2023

Student Name: Avery Tubbs

Clinical Date: 2/21-2/22/23

1. Provide a description of your patient including current diagnosis and past medical history. (2 points total) - Current Diagnosis (1) - Past Medical History (1)	Total Points: 2 Comments: You did a great job describing your patient and her current diagnosis and past medical history. CB
2. Describe the pathophysiology of your patient's current diagnosis. (1 point total) Pathophysiology-what is happening in the body at the cellular level (1)	Total Points: 1 Comments: Great job describing what is happening to your patient on a cellular level. You were very thorough and detailed. CB
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total) - All patient's signs and symptoms included (1) - Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1) - Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1)	Total Points: 3 Comments: You provided all of your patient's signs and symptoms with a description of why these correlate with the diagnosis. Good job! CB
4. Correlate the patient's current diagnosis with all related labs. (4 points total) - All patient's relevant lab result values included (1) - Rationale provided for each lab test performed (1) - Explanation provided of what a normal lab result should be in the absence of current diagnosis (1) - Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1)	Total Points: 4 Comments: You did a great job showing what your patients lab values are, what is normal, and why they are effected by her diagnosis, with a rationale of why each was performed. CB
5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total) All patient's relevant diagnostic tests and results included (1)	Total Points: 4 Comments: You explained diagnostic test your patient had, why the results were related to your patient's diagnosis, and what normal results should

• Rationale provided for each diagnostic test performed (1) • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1) • Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1)	be. Good job! CB
6. Correlate the patient's current diagnosis with all related medications. (3 points total) • All related medications included (1) • Rationale provided for the use of each medication (1) • Explanation of how each of the patient's relevant medications correlate with current diagnosis (1)	Total Points: 3 Comments: You explained all medication your patient was prescribed and how it was related to your patient's diagnosis. CB
7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total) • All pertinent past medical history included (1) • Explanation of how patient's pertinent past medical history correlates with current diagnosis (1)	Total Points: 2 Comments: You appropriately explained your patient's past medical history and how it was pertinent to his current diagnosis. Great job! CB
8. Describe nursing interventions related to current diagnosis. (1 point total) • All nursing interventions provided for patient explained and rationales provided (1)	Total Points: 1 Comments: Great job discussing interventions that were provided to your patient based on their current diagnosis, with rationales included. CB
9. Discuss the role of interdisciplinary team members in the care of the patient. (3 points total) • Identifies all interdisciplinary team members currently involved in the care of the patient (1) • Explains how each current interdisciplinary team member contributes to positive patient outcomes (1) • Identifies additional interdisciplinary team members (not involved currently) that should be included in the care of the patient to ensure positive patient outcomes (1)	Total Points: 3 Comments: You were able to identify all healthcare team members that are involved in your patient's care, and list appropriate interdisciplinary team members that could be involved to ensure high quality care for your patient. Great job! CB
Total possible points = 23 18-23 = Satisfactory 13-17 = Needs improvement <12 = Unsatisfactory	Total Points: 23/23. Avery, great job on your pathophysiology! You were very thorough and met all requirements per the grading rubric. CB

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

<u>vSim Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory								
	Rachael Heidebrink (Pharmacology) (1, 2, 6, 7)*	Week 8: Dysrhythmia Simulation (see rubric)	Junetta Cooper (Pharmacology) (1, 2, 6, 7)*	Mary Richards (Pharmacology) (1, 2, 6, 7)*	Lloyd Bennett (Medical-Surgical) (1, 2, 6, 7)*	Kenneth Bronson (Medical-Surgical) (1, 2, 6, 7)*	Carl Shapiro (Pharmacology) (1, 2, 6, 7)*	Comprehensive Simulation (see rubric)
	Date: 2/17/2023	Date: 3/23/2023	Date: 3/3/2023	Date: 3/17/2023	Date: 3/24/2023	Date: 3/30/2023	Date: 4/21/2023	Date: 4/21/2023
Evaluation	S	S	S	S	S	S		
Faculty Initials	BS	AR	AR	AR	AR	AR		
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA		

* Course Objectives

3/23/2023: Satisfactory with Dysrhythmia simulation make-up. See rubric on the next page. AR

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME(S): Avery Tubbs

GROUP #: NA

SCENARIO: Week 8 Simulation (Dysrhythmia)

OBSERVATION DATE/TIME(S): 3/23/2023

CLINICAL JUDGMENT COMPONENTS	OBSERVATION NOTES				
NOTICING: (1,2)* - Focused Observation: E A D B - Recognizing Deviations from Expected Patterns: E A D B - Information Seeking: E A D B	Notices patient is complaining of fatigue and nausea. Notices patient's heart rate is low. Notices patient's SpO2 is decreased. Notices heart rhythm change. Notices second heart rhythm change. Notices patient's heart rate is elevated and rhythm is abnormal. Notices there is no change in patient's heart rate or rhythm after medication administration. Notices patient's blood pressure is low. Notices patient has crackles and shortness of breath. Notices patient is unresponsive.				
INTERPRETING: (1,2)* - Prioritizing Data: E A D B - Making Sense of Data: E A D B	Interprets patient's initial heart rhythm as sinus bradycardia. Interprets heart rhythm change as a second -degree type II heart block. Recognizes a need for medication to increase patient's heart rate. Interprets final heart rhythm as third-degree heart block. Recognizes heart rhythm as atrial fibrillation. Recognizes the need for medication to decrease patient's heart rate. Recognizes the need for a fluid bolus to increase blood pressure. Prioritizes stopping the fluids when fluid overload is recognized. Interprets heart rhythm as ventricular fibrillation. Interprets correct dose of medications. Interprets patient's low potassium as a potential cause for cardiac arrest.				
RESPONDING: (1,2,3,5,6,7)* - Calm, Confident Manner: E A D B - Clear Communication: E A D B - Well-Planned Intervention/Flexibility: E A D B - Being Skillful: E A D B	Places patient on the monitor and obtains vital signs. Notifies physician of patient's decreased heart rate and rhythm of sinus bradycardia. Applies oxygen 2L via nasal cannula. Recommends Atropine 0.5 mg IVP. Educates patient on Atropine. Administers Atropine 0.5 mg IVP. Reassesses patient. Recommends IV infusion of Dopamine or Epinephrine; then transcutaneous pacemaker. Places fast patches on patient. Places patient on the monitor. Obtains vital signs. Notifies the physician of patient's abnormal heart rhythm and elevated heart rate. Recommends				

*End-of- Program Student Learning Outcomes

	diltiazem bolus followed by a drip. Administers diltiazem bolus. Reassesses patient. Applies oxygen 2L via nasal cannula; then increased to 4L. Reassesses blood pressure. Notifies physician of low blood pressure with continued elevated heart rate. Recommends fluid bolus to increase blood pressure. Recognizes medical history of heart failure and decreased EF. Administers fluid bolus. Stops the fluids when the patient has symptoms of fluid overload. Reassesses the patient's vital signs. Notifies physician of fluid overload; recommends synchronized cardioversion. Discussed use of Amiodarone. Places patient on the monitor. Calls a code blue. Places fast patches on patient. Initiates CPR and bagging. Defibrillates patient. Restarts CPR and bagging. Defibrillates patient for a second time. Restarts CPR and bagging. Administers 1 mg of epinephrine IVP. Discusses use of Amiodarone.			
REFLECTING: (1,2,5)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Discussed first scenario, identification and treatments for symptomatic bradycardias. Reviewed chart to look for causes of heart block (metoprolol, patient history). Talked about holding medication to see if sinus rhythm will be restored. Alternate drugs for complete heart block discussed (epi, dopamine). Discussed pacing options for symptomatic bradycardias (transcutaneous, transvenous, permanent). Talked about the importance of adjusting electrical current to obtain capture, need for medication). Discussed recognition of A-fib and associated symptoms. Talked about goals of diltiazem therapy. Explanation and demonstration of synchronized cardioversion; discussed differences between cardioversion and defibrillation, the need for sedating medications prior to delivering shock. Discussed the importance of immediate CPR and defibrillation with pulseless v-tach/vfib. Discussed alternative to epi (amiodarone). Roles of the code team discussed (recorder, CPR, airway, meds, lead). Potential causes of code blue discussed (review of chart reveals low K+). Defibrillation discussed, starting low and increasing joules with subsequent shocks. Excellent job!			
SUMMARY COMMENTS: * = Course Objectives Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric. E= Exemplary A= Accomplished D= Developing B= Beginning	Lasater Clinical Judgement Rubric Comments: Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions. Interpreting: Focuses on the most important data and seeks further relevant information. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale.			

Scenario Objectives: • Differentiate the clinical characteristics and ECG patterns of common dysrhythmias. (1,2)* • Choose nursing interventions for patients who are experiencing dysrhythmias. (1)* • Differentiate between defibrillation and cardioversion. (1,2,6)* • Communicates collaboratively to other healthcare providers utilizing SBAR. (3,5,6,7)*	Responding: Displays leadership and confidence and is in control or calm. Communicates well; explains carefully to patients; gives clear directions. Interventions are tailored for the individual patient; monitors patient progress closely and adjusts treatment as indicated by patient response. Displays proficiency in the use of nursing skills. Reflecting: Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses. You are satisfactory for this simulation. Great job!
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EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced 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 & Date:

ar 12/20/2022

*End-of- Program Student Learning Outcomes