**EVALUATION OF CLINICAL PERFORMANCE TOOL**
**Advanced Medical Surgical Nursing- 2023**

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

**Student:** | Jenna Strayer |                                    **Final Grade:** <mark>Satisfactory</mark>

**Semester: Spring**                                                 **Date of Completion:** | April 25, 2023 |

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

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**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.

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**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) |
|---|---|---|---|
| 3/15/2023 | 8 | 4C Clinical- Make-up scheduled. | 4/12/2023 0700-1500 |
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| 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:** a. Manage complex patient care situations with evidence of preparation and organization. **(Responding)** | NA | NA | NA | S | S | S | NA | NA | S | NA | S | S | NA | S | S | NA | NA | S |
| b. Assess comprehensively as indicated by patient needs and circumstances. **(Noticing)** | NA | NA | NA | S | S | S | NA | NA | S | NA | S | S | S | S | S | NA | NA | S |
| c. Evaluate patient's response to nursing interventions. **(Reflecting)** | NA | S | NA | S | S | S | NA | NA | S | NA | S | S | S | S | S | NA | NA | S |
| d. Interpret cardiac rhythm; determine rate and measurements. (**Interpreting)** | NA | NA | NA | NA | NA | NA | NA | NA | NA | NA | S | S | S | S | S | NA | NA | S |
| e. Administer medications observing the six rights of medication administration. **(Responding)** | NA | NA | NA | S | S | S | NA | NA | S | NA | S | S | NA | S | S | NA | NA | S |
| f. Perform venipuncture skill with beginning dexterity and evidence of preparation. **(Responding)** | NA | NA | S | S | S | S | NA | NA | S | NA | NA | NA | S | NA | S | NA | NA | S |
| g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. **(Responding)** | NA | NA | NA | S | S | S | NA | NA | S | NA | S | S | NA | S | S | NA | NA | S |
| **Faculty Initials** | AR | CB | AR | FB | FB | FB | FB | FB | FB | BS | BS | BL | AR | CB | CB | CB | CB | CB |
| Clinical Location | Quality/ Core Measures | Patient advocate/discharge planning | DH | PM-3T | PM-3T | PM-4N | NA | NA | | Need to make this week up. | ICU | 4P | Specials, cardiac diagnostic and scavenger hunt | 4C make up | 4C make up/ Infusion center | NA | NA | |

**Comments:**

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Week 3(1c): Satisfactory during Quality Assurance/Core Measures observation and with discussion via CDG posting. RN comments: "Jenna did a great job talking with patients." Excellent in all areas. CB

Week 4 (1f)- Great job performing IV starts during the digestive health clinical. Proper technique and aseptic procedures were followed. Keep up the great work! FB

Week 5 (1a,b)- Great job managing patient care and prioritizing care based on your comprehensive assessments. FB

Week 6 (1,b)- Excellent job managing and prioritizing patient care during Patient Management clinical experiences this week. Great job comprehensively assessing patients to provide care that is required. Keep up the great work! FB

Week 7 (1c)- Great job evaluating the plan of care and patient needs to determine the order of care for several patients during this clinical rotation. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 10 1a,b,e- Nice job this week assessing and managing care for your patient who was mechanically ventilated and sedated. Medications were administered through several routes (IVP, IV, Oral swab) while observing the six rights. BS

Week 11-1(a-e, g) Excellent job this week managing complex patient care situations. Your care was very well organized and you did a great job with your time management. Your head to toe assessments were very thorough and well done. Your medication passes were safely completed, and you had the opportunity to administer PO, IVP, IV and SQ medications all while following the six rights. You monitored your patient very closely to ensure positive patient outcomes. Keep up all the great work! BL

Week 12 (1b,c,f)- Satisfactory during Cardiac Diagnostics and Special Procedures clinical experiences, and with discussion via CDG postings. Preceptor comments: Special Procedures- "Excellent in all areas. IV starts with labs. Observed lung biopsy and paracentesis." Cardiac Diagnostics- "Excellent in all areas. Thanks for your help!" Great job! AR

Week 13(1a,d,e): Great job this week managing complex care situations.  You did a great job being prepared for clinical, and ensuring that your assessments were detailed and thorough.  You were able to complete your ECG booklet, identifying and measuring cardiac rhythm strips.  You did a great job administering medications to your patient this week, following the six rights of medication administration.  Great job! CB

Week 14(1b,c): Jenna, you did a great job this week of assessing your patients' needs and responding appropriately.  Satisfactory during Infusion Center clinical experience and with discussion via CDG posting. Preceptor comments: "Satisfactory in 'actively engaged in the clinical experience, demonstrates prior knowledge of departmental/nursing responsibilities, and demonstrates safe completion of nursing skills'.  "Excellent in 'appropriate use of communication skills and demonstrates professionalism in nursing'. CB

*End-of- Program Student Learning Outcomes

**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:**<br>a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. **(Noticing, Interpreting, Responding)** | NA | NA | NA | S | S | S | NA | NA | **S** | NA | S̶ U | S | S | S | S | NA | NA | **S** |
| b. Monitor for potential risks and anticipate possible early complications. **(Noticing, Interpreting, Responding)** | NA | NA | NA | S | S | S | NA | NA | **S** | NA | S | S | NA | S | S | NA | NA | **S** |
| c. Recognize changes in patient status and take appropriate action. **(Noticing, Interpreting, Responding)** | NA | NA | NA | S | S | S | NA | NA | **S** | NA | S | S | NA | S | S | 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 | S | S | NA | S | S | NA | NA | **S** |
| e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. **(Responding)** | NA | NA | NA | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **S** |
| **Faculty Initials** | **AR** | **CB** | **AR** | **FB** | **FB** | **FB** | **FB** | **FB** | **FB** | **BS** | **BS** | **BL** | **AR** | **CB** | **CB** | **CB** | **CB** | **CB** |

**Comments:**
Week 5 (2a,b)- Great use of clinical judgement skills to determine patient needs, plan care for patients, and implement appropriate nursing interventions. FB
Week 6 (2c) Good job recognizing changes in patient status and taking appropriate action. FB

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Week 7 (2a,b)- Good use of clinical judgement as you correlate the relationship between patient's disease process, current symptoms, and present condition. You are also assessing for potential risks and anticipating possible complications as you prioritize care for your assigned patients. Keep up the good work! FB

Week 10- 2a- Please see pathophysiology rubric below, and respond here on how you will prevent this in the future. 2e- Nice job identifying social determinants of health that may have an impact on your patient's health and well-being. BS

To prevent another U in the future I will be sure explain information more in depth and not worry about just getting it finished and turned in but make sure it is done correctly the first time. I will give my best effort moving forward to better myself as well as those around me. BL

Week 11-2(b,c) Great job in debriefing discussing how you monitored your patient for potential risks and anticipated early complications. You also did a great job discussing changes in patient status you noticed, as well as how you responded and took action. 2(d) Satisfactory completion of your Nursing Care Map Assignment. Please see the rubric at the end of this document for my feedback. BL

Week 13(2d,e): Jenna, you did a great job this week modifying your patients plan of care based on her needs.  You also did a great job respecting your patient's wishes. CB

Week 14(2b,c,d): Excellent job in debriefing discussing potential risk for your patient, actions you took due to changes in your patients status, and nursing diagnosis that are appropriate for your patient.  CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

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

**Comments:**
Week 2 (3b)- Satisfactory during Quality Assurance/Core Measures observation, and with discussion via CDG posting. RN comments: Rapid Response & Standards of Care- "Excellent in all areas. Good participation in the discussion."; Core Measures- "Satisfactory in all areas."; Stroke- "Satisfactory in all areas. Good luck at CCF!" AR
Week 5 (3a,b,c) These competencies will be addressed during another clinical rotation.  (3d,e)- Great discussion, noticing accountability of delegation and the clarification of roles. You also did a great job interpreting facts to determine the need for prioritization of assigned patient during this clinical rotation. FB
Week 6 (3e) Great job being able to prioritize care for a group of patients during this clinical rotation. FB
Week 7 (3d,e)- You have demonstrated the process of delegation, responsibility, and accountability of the interdisciplinary team members. Great job determining priority care of assigned patients and the priority patient of assigned patients. Keep up the great work! FB
Week 11-3(c) You did a great job ensuring you used the PAR system appropriately when obtaining care items for your patient this week in clinical. This is just one important way to ensure fiscal responsibility in clinical practice. BL
Week 12 (3b,c)- Satisfactory during Quality Scavenger Hunt clinical, with documentation, and discussion via CDG posting. Keep up the good work. AR

*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

### 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:** a. Critique examples of legal or ethical issues observed in the clinical setting. **(Interpreting)** | NA | NA | NA | S NA | NA | NA | NA | NA | NA | NA | S | S | NA | S | S | NA | NA | S |
| b. Engage with patients and families to make autonomous decisions regarding healthcare. **(Responding)** | NA | NA | NA | S | S | S | NA | NA | S | NA | S | S | S | S | S | NA | NA | S |
| c. Exhibit professional behavior in appearance, responsibility, integrity and respect. **(Responding)** | S | S | S U | S | S | S | NA | NA | S | NA | S | S | S | S | S | NA | NA | S |
| **Faculty Initials** | AR | CB | AR | FB | FB | FB | FB | FB | FB | BS | BS | BL | AR | CB | CB | CB | CB | CB |

**Comments:**

Week 4 (4c)- You have received a "U" for this competency based on your tool being submitted past the due date and time (0800). Be sure to follow the directions at the beginning of this tool to properly address the "U" for Week 5. Failure to do so will result in continued unsatisfactory ratings. Please let me know if you need any assistance. AR

Week 4 U: Last week I did my clinical tool earlier in the week and forgot to turn it in. To prevent this from happening again in the future I am going to be sure to complete my tool as soon as possible and turn it in once I complete it. It was unresponsible of me to forget to turn it in so I will be holding myself accountable to make sure that I am turning all of my assignments in on time. Good idea, you have some on your mind that if you do not turn it in right after the clinical experience it can easily be forgotten. FB

Week 5 (4a) This competency will be addressed during another clinical rotation. (4c)-You are doing a great job presenting yourself in a professional manner through your attitude, commitment, and eagerness to learn. FB

Week 13(4b): Great job engaging with your patient and allowing for autonomous decisions to be made. CB

Week 14(4b,c): Great job this week engaging with your patient, allowing autonomous decisions to be made. CB

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Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**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:**<br>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 | S | S | NA | NA | **S** |
| b. Demonstrate initiative in seeking new learning opportunities. **(Responding)** | S | S | S | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **S** |
| c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. **(Interpreting)** | S | S | S | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **S** |
| 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 | S | S | NA | NA | **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 | S | S | NA | NA | **S** |
| f. Utilize faculty feedback to improve clinical performance. **(Responding & Reflecting)** | S | S | S | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **S** |
| **Faculty Initials** | **AR** | **CB** | **AR** | **FB** | **FB** | **FB** | **FB** | **FB** | **FB** | **BS** | **BS** | **BL** | **AR** | **CB** | **CB** | **CB** | **CB** | **CB** |

**Comments:**
Week 2 (5c)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observation experience. Great job! AR
Week 5 (5a)- Reported on by assigned RN during clinical rotation 2/7/2023. Excellent in all areas. Student goals: Make sure that you are providing a self-goal for each patient management clinical experience. Additional Preceptor comments: Jenna was very knowledgeable and asked questions when needing clarification. She provided excellent patient care. KW/FB
Week 6 (5a)- Reported on by assigned RN during clinical rotation 2/14/2023. Satisfactory in all areas except excellent in Provider of care: demonstrates safe completion of nursing skills, Manager of care: communication skills, Member of profession: demonstrates professionalism in nursing. Student goals: Learn it is okay to delegate tasks and not to try and do it all on my own. Additional Preceptor comments: Great job today! Dealt with difficult patient very well. TM/FB Reported on by assigned RN during clinical rotation 2/15/2023 Student goals: Cluster care so don't have to go into patient's room a bunch. No Additional Preceptor comments. TM
Week 7 (5a) Reported on by assigned RN during clinical rotation on 2/21/2023 – Excellent in all areas. Student goals: "Better communication with family."  Additional Preceptor comments: "Jenna did outstanding today! Always asked to help and learn new things. Able to keep up with this crazy assignment." AG/FB Reported on by assigned RN during clinical rotation on 2/22/2023 – Excellent in all areas. Student goals: "Next clinical I would like to work on my organization between patients and

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getting work clustered." Additional Preceptor comments: "Very knowledgeable student. Background of ER shows in her bedside manner. Able to correlate pertinent data with meds, labs, plan of care etc. Managed 4 patients with new post-op patient today." JW/FB

Week 10- 5c- You were able to observe a number of bedside procedures this week during clinical (Intubation, central-line placement, extubation). It is important to see as many of these emergent procedures as you can so that when you are the RN and it is your patient, you can react appropriately. BS

Week 13(5a,b): Great job this week describing in your CDG ways that you were able to create a culture of safety for your patient.  You did a great job replacing your patient's NG tube this week.  Keep up the great work! CB

Week 14(5d): Jenna, you did a very good job maintaining asepsis, and ensuring that you "foam in and out" when entering a patient's room. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

**Comments:**

Week 2 (6f)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observation experience. Keep up the good work! AR

Week 3(6c,f)- Satisfactory discussion via CDG posting related to your Patient advocate/discharge planner observation experience. Keep up the good work! CB

Week 6 (6d)- Satisfactory hand-off report 30/30 completion. No RN comments. TM/FB (6f)- Satisfactory discussion via CDG posting related to your patient management clinical experience. Keep up the great work! FB

Week 7 (6e)- Great job with documenting accurately and appropriately for all aspects of care delivered. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 10- 6a,b,c- Nice job discussing collaboration and communication with patients, families, and other members of the healthcare team during clinical debriefing. Nice job also discussing patient and family teaching during debriefing. BS

Week 10- 6f- You received a U in this competency related to your pathophysiology CDG. Please see the feedback on your rubric below, make adjustments to your CDG, and return to me via email by Wednesday, March 29 at 0800. It appears as if you took this assignment pretty lightly. The purpose of this assignment is for you to

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show us how well you can make sense of your patient's assessment data, lab values, medications, and diagnostic tests, and provide a narrative to explain everything in a way in which you are making accurate correlations. You can do much better than you did.  Please also respond below as to how you will prevent this in the future. BS

In the future to prevent getting another U on an assignment like this I will be sure to take my time and make sure that all sections of the assignment is filled out to the best of my abilities. BL

Week 10-6(d) Satisfactory completion of your hand-off report during debriefing. You received 30/30 points. Great job! BS

Week 11-6(e) Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and accurate. You also did a great job taking my feedback on Tuesday and applying it to all your documentation on Wednesday. 6(f) Although your Nursing Care Map assignment was satisfactory, you did not include an in-text citation or a reference. Remember all CDG assignments must include both an in-text citation and a reference in order to be graded as satisfactory. Please be sure to address this "U" on your tool next week following the guidelines on pg. 2 of this document. Let me know if you have any questions. BL

In the future to prevent from getting another U, I will make sure that all parts of my CDG are complete. I was worried about getting everything in and making sure I did it correctly and forgot to add my citation. In the future, I will add an intext citation and reference. AR

Week 12 (6f)- Your CDG postings for Cardiac Diagnostics, Quality Scavenger Hunt, and Special Procedures were Satisfactory, however for future CDG 's I suggest you provide more depth into the discussions to maintain a Satisfactory rating. AR

Week 13(6a,c,f): Jenna, you did a great job this week collaborating with your patient and your bedside nurse to provide optimal patient care.  You did a great job on your CDG this week, meeting all requirements to receive a Satisfactory. CB

Week 14(6c,f): Great job discussing examples of witnessed collaboration while you were at the Infusion Center.  You did a great job on your CDG, meeting all requirements. CB

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**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:** <br> a. Value the need for continuous improvement in clinical practice based on evidence. **(Responding)** | S | S | S | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **S** |
| b. Accountable for investigating evidence-based practice to improve patient outcomes. **(Responding)** | S | S | S | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **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 | S | S | NA | NA | **S** |
| d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions**. (Responding)** | S | S | S | S | S | S | NA | NA | **S** | NA | S | S | S | S | S | NA | NA | **S** |
| **Faculty Initials** | **AR** | **CB** | **AR** | **FB** | **FB** | **FB** | **FB** | **FB** | **FB** | **BS** | **BS** | **BL** | **AR** | **CB** | **CB** | **CB** | **CB** | **CB** |

**Comments:**
Week 2 (7a)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observation experience. AR
Week 7 (7d)- Great job displaying a great attitude, commitment to provide optimal care, and enthusiasm for the caring of individuals at a very vulnerable and often difficult time. FB
Week 13(7a,b): Great job on your CDG, researching and summarizing the evidence-based article "Improving Language Interpretation Practices". CB

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

*End-of- Program Student Learning Outcomes

| Skills Lab Competency Evaluation<br><br>Performance Codes:<br><br>S: Satisfactory<br><br>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:** Jenna Strayer | **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 11 | | |

| | 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 | Great job identifying abnormal assessment, lab and diagnostic findings for your patient. For the abnormal assessment data, be sure to also include the patient's heart rate and oxygen delivery amount. For lab findings, you would also want to include the patient's magnesium level. Excellent job identifying all risk factors relevant to the patient. |
| | 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 | Excellent job listing all the nursing priorities for your patient. I would recommend including fluid volume excess as a priority as well. I agree that "Decreased Cardiac Output" is the top priority problem. Relevant data such as SpO2, SOB, CXR results, and Troponin were not highlighted and should be included. You would not want to include the lactic acid. You did a great job identifying potential complications. Points were deducted for the signs and symptoms because you listed medical diagnoses as a sign or symptom, and some of the other signs and symptoms listed are not accurate. |
| | 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 | 2 | |
| | 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) | 1 | |
| **Responding** | 8. List all nursing interventions relevant to the top nursing priority. | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 2 | Overall you did a nice job listing nursing interventions relevant to the top nursing priority. There are some additional interventions that should be included related to EKG monitoring, lab monitoring, oxygen delivery, and education. Additionally, the nursing |
| | 9. Interventions are prioritized | > 75% complete | 50-75% complete | < 50% complete | 0% complete | 1 | |
| | 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 | interventions are not prioritized correctly. Remember that you should always prioritize assessments first. You would not want to administer any medications until you have performed all necessary assessments. |
| | 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** | 1 | Unfortunately, the evaluation portion of your Nursing Care Map is not completed correctly. A reassessment for all of the highlighted information in the noticing boxes (assessment, lab/diagnostics, risk factors) should be included. Be sure to utilize the Nursing Care Map guidelines to assist you in completing this section going forward. |
| | 14. Evaluation includes one of the following statements: <br> • Continue plan of care <br> • Modify plan of care <br> • Terminate plan of care | **Complete** | | | **Not complete** | 3 | |

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:** Satisfactory Nursing Care Map. Nice job! Please be sure to review all the feedback provided above to assist you going forward. If you have any questions or concerns, please do not hesitate to reach out.

**Total Points: 34/42**

**Faculty/Teaching Assistant Initials: BL**

*End-of- Program Student Learning Outcomes

Care Map Evaluation Tool
AMSN
2023

| Date | Care Map ** | Evaluation & Instructor Initials | Remediation & Instructor Initials |
|---|---|---|---|
| 03/28-03/29/2023 | Decreased Cardiac Output | S/BL | NA |

** 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.

*End-of- Program Student Learning Outcomes

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

**Student Name: J. Strayer**                                    **Clinical Date: 3/21-3/22/2023**

| | |
|---|---|
| **1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)**<br>• Current Diagnosis (1)<br>• Past Medical History (1) | **Total Points: 0.5/1**<br>**Comments: Diagnosis and history are listed but with no explanation of anything provided.**<br>**Nice job discussing your patient's diagnosis and its correlation to his past medical history.** |
| **2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)**<br>• Pathophysiology-what is happening in the body at the cellular level (1) | **Total Points: 1/1**<br>**Comments: Description of the pathophysiology of cardiac arrest provided.**<br>**Nice job describing the pathophysiology of cardiac arrest.** |
| **3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)**<br>• All patient's signs and symptoms included (1)<br>• Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1)<br>• Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1) | **Total Points: 0.5/3**<br>**Comments: A list of symptoms are provided with no explanation regarding if they are the patient's presenting symptoms or not. No explanation of what signs and symptoms are typically expected with this current diagnosis or if/how they differ from what is expected (Only that they are "not far off.) No explanation of how each of the patient's relevant lab result values correlate with current diagnosis, only that the patient's symptoms "correlate to the current diagnosis as he was very anemic dur to the GL bleed and ESRD."**<br>**Good job discussing your patient's presenting signs and symptoms and their correlation to his diagnosis. Good job also o including the typical signs and symptoms expected with the diagnosis.** |
| **4. Correlate the patient's current diagnosis with all related labs. (4 points total)**<br>• All patient's relevant lab result values included (1)<br>• Rationale provided for each lab test performed (1)<br>• Explanation provided of what a normal lab result should be in the absence of current diagnosis (1)<br>• Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1) | **Total Points: 1.5/4**<br>**Comments: Relevant labs included with normal values provided. No rationales provided for the labs. 2-3-words is not sufficient to explain how the lab values relate to the diagnosis.**<br>**Nice work! Relevant lab values included with normal reference ranges. Rationales provided with explanations regarding their relation to the diagnosis of cardiac arrest.** |

*End-of- Program Student Learning Outcomes

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|---|---|
| **5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)**<br>• All patient's relevant diagnostic tests and results included (1)<br>• Rationale provided for each diagnostic test performed (1)<br>• Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1)<br>• Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1) | **Total Points: 2.0/4**<br>**Comments: Relevant diagnostic tests with results and normal findings provided. No rationales provided for any of the tests. This is an example of what a normal CXR result would be in the absence of current diagnosis "The lungs look normal in size and shape, and the lung tissue looks normal. No growths or other masses can be seen within the lungs. The pleural spaces (the spaces surrounding the lungs) also look normal. All supporting tubing is in satisfactory placement." Very minimal answere provided for Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis.**<br>**Great job discussing results of your patient's diagnostic tests, providing the expected normal results. Results were correlated to the patient's diagnosis with rationales provided.** |
| **6. Correlate the patient's current diagnosis with all related medications. (3 points total)**<br>• All related medications included (1)<br>• Rationale provided for the use of each medication (1)<br>• Explanation of how each of the patient's relevant medications correlate with current diagnosis (1) | **Total Points: 1.5/3**<br>**Comments: Relevant medications provided. 1-3-word rationales and brief correlations provided.**<br>**Good job providing the medications related to the patient diagnosis, rationales for their use, and explaining the rationale for their use in your patient's case.** |
| **7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total)**<br>• All pertinent past medical history included (1)<br>• Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) | **Total Points: 1**<br>**Comments: Past medical history is briefly listed with no explanation of how it rates to the current diagnosis.** |
| **8. Describe nursing interventions related to current diagnosis. (1 point total)**<br>• All nursing interventions provided for patient explained and rationales provided (1) | **Total Points: 0.5/1**<br>**Comments: I would suggest adding interventions for respiratory assessment, ventilator assessment…**<br>**Good job listing nursing interventions and providing rationales.** |
| **9. Discuss the role of interdisciplinary team members in the care of the patient. (3 points total)**<br>• Identifies all interdisciplinary team members currently involved in the care of the patient (1)<br>• Explains how each current interdisciplinary team member contributes to positive patient outcomes (1)<br>• Identifies additional interdisciplinary team members (not | **Total Points: 1.5/2**<br>**Comments: Members are listed with minimal, several word explanations on how they contribute to positive patient outcomes. Ex. Palliative care "due to patient's status."**<br>**Additional team members identified that should/will be included in the patient's care to help** |

*End-of- Program Student Learning Outcomes

| | |
|---|---|
| involved currently) that should be included in the care of the patient to ensure positive patient outcomes (1) | **ensure positive patient outcomes.** |
| Total possible points = 23<br>18-23 = Satisfactory<br>13-17 = Needs improvement<br><12 = Unsatisfactory | **10/23**<br>**Unsatisfactory. BS**<br>**22/23**<br>**Satisfactory. BS**<br>**Nice work Jenna, this was much better and shows an understanding of your patient's disease process and the care necessary to give the patient the best chances for recovery! BS** |

Simulation Evaluations

| vSim Evaluation<br><br>Performance Codes:<br><br>S: Satisfactory<br><br>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: 2/27-28/2023 | 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 | S | S |
| Faculty Initials | FB | FB | FB | BS | BS | BL | CB | CB |
| **Remediation: Date/Evaluation/ Initials** | NA | NA | NA | NA | NA | NA | NA | NA |

* Course Objectives

# Lasater Clinical Judgment Rubric Scoring Sheet

*End-of- Program Student Learning Outcomes

STUDENT NAME(S): Dorresha Green, Tamica Ivey, Rebecca Lamons, Jenna Strayer
GROUP #: 2
SCENARIO: Week 8 Simulation
OBSERVATION DATE/TIME(S): February 27, 2023 1000-1200

| CLINICAL JUDGMENT COMPONENTS | | | | | OBSERVATION NOTES |
|---|---|---|---|---|---|
| **NOTICING: (1,2)\*** | | | | | Notices patient is complaining of fatigue and nausea. Notices patient's heart rhythm is initially sinus bradycardia. Notices patient has a rhythm change after Atropine is administered; blood pressure is decreased. Notices patient has a second rhythm change. |
| • Focused Observation: | E | A | D | B | |
| • Recognizing Deviations from Expected Patterns: | E | A | D | B | Notices patient has an elevated heart rate with complaints of palpitations. Notices patient is in atrial fibrillation. Notices patient's blood pressure is decreased after medication is administered. Notices patient has crackles in lungs. |
| • Information Seeking: | E | A | D | B | |
| | | | | | Notices patient is unresponsive and in ventricular tachycardia. |
| **INTERPRETING: (1,2)\*** | | | | | Initially prioritizes performing a focused GI assessment. Initially does not prioritize patient's low heart rate. Interprets patient's initial heart rhythm as sinus bradycardia. Recognizes the patient's ordered metoprolol may be contributing to the low heart rate. Prioritizes treating nausea and vomiting before decreased heart rate when phoning physician. Recognizes a need to administer medication to treat patient's low heart rate. Interprets rhythm change as a second degree type II heart block. Initially interprets second rhythm change as a first degree heart block; then interprets it as a third degree heart block. |
| • Prioritizing Data: | E | A | D | B | |
| • Making Sense of Data: | E | A | D | B | |
| | | | | | Interprets patient's heart rhythm as atrial fibrillation. Recognizes patient has a need for medication to decrease heart rate. Initially does not recognize that the diltiazem is causing patient's blood pressure to decrease. Recognizes a need for fluids to increase blood pressure. Prioritizes stopping fluids after patient begins to have crackles in lungs. |
| | | | | | Interprets patient's heart rhythm as pulseless ventricular tachycardia. Interprets correct dose of medications. Interprets patient's low potassium as a potential cause for cardiac arrest. |
| **RESPONDING: (1,2,3,5,6,7)\*** | | | | | Introduces self and identifies patient. Obtains patient's vital signs. Inquires about patient's symptoms and admitting diagnosis. Performs a focused GI assessment. Places patient on the monitor. Notifies physician of patient's symptoms and heart rhythm of sinus bradycardia; recommends an order for something to treat nausea and vomiting. Recommends a dose of Atropine 0.5 mg IVP. Administers Atropine 0.5 mg IVP. Notifies physician of decreasing heart rate and change in rhythm. Places 2L of oxygen via nasal cannula on the patient after prompted by physician. Reassesses patient's vital signs. Places fast patches on patient. Reassures and calms patient. Notifies physician of |
| • 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 | | | | | |

\*End-of- Program Student Learning Outcomes

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| | |
|---|---|
| | <span style="color:red">patient's increasing symptoms and heart rhythm change.</span><br><br><span style="color:blue">Introduces self and identifies patient. Inquires about patient's admitting diagnosis and symptoms. Places patient on the monitor. Obtains vital signs. Applies oxygen 2L via nasal cannula. Notifies physician of patient's abnormal heart rhythm and vital signs. Recommends diltiazem bolus followed by a drip. Administers diltiazem. Reassesses patient and vital signs. Places fast patches on patient. Notifies physician of patient's decreased blood pressure. Recommends a fluid bolus. Administers fluid bolus. Notifies physician of patient's fluid overload symptoms.</span><br><br><span style="color:green">Calls for help. Does not check for pulse. Initiates CPR. Calls code blue. Places fast patches on patient. Administers epinephrine 1 mg IVP. Defibrillates patient. Restarts CPR.</span> |
| **REFLECTING: <span style="color:red">(1,2,5)*</span>**<br><br>- Evaluation/Self-Analysis:    <span style="color:red">E</span>     A     D     B<br>- Commitment to Improvement: <span style="color:red">E</span>     A     D     B | <span style="color:red">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). Excellent teamwork!</span><br><br><span style="color:blue">Discussed recognition of A-fib and associated symptoms. Talked about goals of diltiazem therapy. Explanation and demonstration of synchronized cardioversion; discussed differences between cardioversion and defibrillation, the need for sedating medications prior to delivering shock. Great teamwork and communication.</span><br><br><span style="color:green">Discussed the importance of immediate CPR and defibrillation with pulseless v-tach. 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!</span> |
| **SUMMARY COMMENTS: * = Course Objectives**<br><br><span style="color:red">**Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.**</span><br><br><span style="color:red">**E= Exemplary**</span><br><br><span style="color:red">**A= Accomplished**</span><br><br><span style="color:red">**D= Developing**</span><br><br><span style="color:red">**B= Beginning**</span> | <span style="color:red">Lasater Clinical Judgement Rubric Comments:</span><br><br><span style="color:red">Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family.</span><br><br><span style="color:red">Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the</span> |

*End-of- Program Student Learning Outcomes

| | |
|---|---|
| **Scenario Objectives:**<br><br>    • **Differentiate the clinical characteristics and ECG patterns of common dysrhythmias. (1,2)***<br><br>    • **Choose nursing interventions for patients who are experiencing dysrhythmias. (1)***<br><br>    • **Differentiate between defibrillation and cardioversion. (1,2,6)***<br><br>    • **Communicates collaboratively to other healthcare providers utilizing SBAR. (3,5,6,7)*** | exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.<br><br>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.<br><br>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.<br><br><br>You are satisfactory for this simulation. Great job! |

# Lasater Clinical Judgment Rubric Scoring Sheet

*End-of- Program Student Learning Outcomes

STUDENT NAME(S): Hailey Giles, Macy Schafer, Alicia McGraw, Abigail Woodyard, Rebecca Lamons, Jenna Strayer, Tamica Ivey, Gloria Plue
GROUP #: 3
SCENARIO: Comprehensive Simulation
OBSERVATION DATE/TIME(S): 4/21/2023 1000-1300

| CLINICAL JUDGMENT COMPONENTS | | | | | OBSERVATION NOTES |
|---|---|---|---|---|---|
| **NOTICING: (2,6) \*** <br><br> • Focused Observation: <br><br> • Recognizing Deviations from Expected Patterns: <br> • Information Seeking: | <br><br>E <br><br><br>E <br>E | <br><br>A <br><br><br>A <br>A | <br><br>D <br><br><br>D <br>D | <br><br>B <br><br><br>B <br>B | Recognized all signs and symptoms associated with patient's inferior wall MI upon arrival to the ER (ex. chest pain, diaphoresis, vital signs, labs) <br> Recognized the need to clarify patient's last dose of Sildenafil in order to administer nitrates, as well as the importance of holding patient's Metformin for 48 hours after the heart catheterization. <br> Recognized the appropriate use of MONAH (morphine, oxygen, nitrates, aspirin, heparin), fluid resuscitation, diuretics, and potassium use for the inferior wall MI patient. <br> Recognized the association between patient history, including non-compliance, and current findings. <br> Recognized the importance of identifying the culprit vessel during a STEMI so that the appropriate equipment can be prepared to treat an inferior STEMI, with catheters that will engage the right coronary artery. <br> Recognized patient's allergy to contrast dye and the importance of pre-medicating so that any potential allergic reaction can be minimized. <br> Recognized the appropriate patient information pertinent to communication with next caregiver following SBAR. <br> Recognized the necessary components of assessment for the post Inferior STEMI patient upon return from the cardiac cath lab. <br><br> Recognized abnormal vital sign, Atrial fibrillation, impending heart failure, and ecchymosis at right radial arterial site upon admission to critical care unit. <br><br> Recognized the different medical diagnosis and past medical history that needed to be considered when developing a discharge education plan. |
| **INTERPRETING: (1,2,3,6) \*** <br><br> • Prioritizing Data: <br> • Making Sense of Data: | <br><br>E <br>E | <br><br>A <br>A | <br><br>D <br>D | <br><br>B <br>B | Accurately interprets abnormal assessment findings (chest pain, diaphoresis, SOB), vital signs (BP, HR, SpO2), ECG (ST elevation-Inferior wall MI), and lab values (Troponin) in ER. <br><br> ECG interpreted correctly. Recognized the need to continually |

*End-of- Program Student Learning Outcomes

| | | | | | interpret vital signs, heart rhythm, and pain throughout the case. |
|---|---|---|---|---|---|
| | | | | | Interpreted the areas affected by an inferior wall MI and artery responsible for this particular MI. Excellent job prioritizing appropriate data to include in communication using the SBAR format. |
| | | | | | Excellent interpretation of data. Upon reviewing the vital signs and monitor/ECG, Afib was noticed and interpreted to be a priority. When reviewing patient's symptom upon arrival to the Critical Care Unit, symptoms were interpreted to indicate heart failure/fluid overload. |
| | | | | | Interpreted current diagnosis and past medical history and determined the need for education on current and past health issues as well as lifestyle modifications. |

**RESPONDING: (2,3,6,7) \***

- 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

Multiple dosage calculations performed accurately. Several IV drips and boluses (heparin, nitroglycerin, Bivalirudin, amiodarone) were calculated and initiated appropriately. Sedation medications were calculated, verbalized, and administered. IV pump correctly programmed for bivalirudin bolus and drip. Nice job with SBAR communication when transferring patient throughout the scenarios. Appropriate medications were chosen to treat Afib and heart failure/fluid overload.

Provided patient/family education related to lifestyle modifications including medication compliance and smoking cessation.

Demonstrated clear communication providing the necessary components to include during-hand-off report for transition of care utilizing SBAR.
Applied appropriate interventions based on assessment findings in all departments.
Active engagement throughout scenario.
Provided accurate and pertinent information when phoning healthcare provider; accurately read orders back to verify.
Provided appropriate communication and conflict management responses to daughter.

**REFLECTING: (4,5,6,7) \***

- Evaluation/Self-Analysis:    E    A    D    B
- Commitment to Improvement:    E    A    D    B

Able to identify new knowledge obtained through the simulation and how to apply to future patient care scenarios.

Acknowledged the importance of customizing teaching to

\*End-of- Program Student Learning Outcomes

| | accommodate patient lifestyle.<br>Asked appropriate questions to gain understanding of information provided.<br><br>Identified areas of improvement to foster clear and concise communication using SBAR. Reflected on ways to resolve conflict in appropriate manner. |
|---|---|
| **SUMMARY COMMENTS: \* = Course Objectives**<br><br>**Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.**<br><br>**E= Exemplary**<br><br>**A= Accomplished**<br><br>**D= Developing**<br><br>**B= Beginning**<br><br>**Scenario Objectives:**<br><br>  • **Assessment of ACS/STEMI, HF, and Atrial Fibrillation from admission to discharge. (1,6)\***<br><br>  • **Initiate treatment protocols for ACS/STEMI, HF, and Atrial Fibrillation. (1,6)\***<br><br>  • **Collaborate and communicate with interdisciplinary health care providers while transitioning from admission to discharge. (1,2,6)\***<br><br>  • **Summarize the nursing implications for medications and treatments utilized in the care of patients with ACS/STEMI, HF, and Atrial Fibrillation and develop plan for discharge. (1,2,3,5,6,7)\***<br><br>  • **Demonstrate ability to resolve conflict among interdisciplinary healthcare team members. (6,7)\*** | Lasater Clinical Judgement Rubric Comments:<br><br>**Noticing**: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads.<br><br>**Interpreting**: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.<br><br>**Responding**: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.<br><br>**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.<br><br>Overall excellent performance during the comprehensive simulation on a patient experiencing an inferior myocardial infarction. Total care |

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|---|---|
| • **\*Course Objectives** | from ED to Catherization lab to ICU and discharge education was completed satisfactorily. |

**EVALUATION OF CLINICAL PERFORMANCE TOOL**
**Advanced Medical Surgical Nursing- 2023**

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

*End-of- Program Student Learning Outcomes

I was given the opportunity to review my final clinical ratings in each course competency.  I was given the opportunity to ask questions about my clinical performance.  I have the following comments to make about my clinical performance/final clinical evaluation:

Thank you all for getting me ready to become a nurse on my own. You all are amazing.

Student eSignature & Date:

Jenna Strayer 04/25/23

ar 12/20/2022

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