

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

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

Student: Sarah Kopp

Final Grade: Satisfactory

Semester: Spring

Date of Completion: 4/25/2023

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: Amy M. Rockwell, MSN, RN

DIRECTIONS FOR USE:

Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S)**, **Needs Improvement (NI)**, **Unsatisfactory (U)**, and **Not Available (NA)**. The faculty member will initial if in agreement with the student’s evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written 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)
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	S	S	S	S	NA	NA	NA	NA	S
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)																		
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S	S	NA	S	NA	NA	S
c. Evaluate patient's response to nursing interventions. (Reflecting)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
d. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	NA	S	S	NA	NA	NA	NA	NA	S									
e. Administer medications observing the six rights of medication administration. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S	S	NA	NA	NA	NA	S
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	NA	S	NA	NA	NA	NA	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	S	S	S	S	NA	NA	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	AR	AR	AR	AR	AR
Clinical Location	DH	QC	NA	PM	PM	PM	NA	NA		4P	4C	4C	IS/4P	CD SH	SP	NA	NA	

Comments:

Week 2 (1f)- Satisfactory with IV skills during your Digestive Health clinical experience! Great job! AR/FB

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

*End-of- Program Student Learning Outcomes

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

Week 9-1(a-e, g) Excellent job this week managing complex patient care situations. Your care was 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 nicely done, and you had the opportunity to administer PO, SQ and IV medications all while following the six rights. Great job monitoring your patient closely to ensure positive patient outcomes. BL

Week 10(1a,b,c,d,e,g): Sarah, you did a great job this week on 4C with your patient who was mechanically ventilated. You were able to anticipate your patient's needs, respond appropriately, and evaluate your patient's response to interventions performed. You were able to obtain cardiac rhythm strips for your ECG booklet. Great job this week passing medications, following the six rights of medication administration. CB

Week 11- 1a-e,f- Great job this week assessing and managing care for your patient who was sedated and on a mechanical ventilator. Nice job doing thorough assessments and documenting interventions. Medications were all administered through various routes (OG, IV, IVP) while following the six rights. Keep up the great work! BS

Week 12-1(a-c) Sarah, you did an excellent job taking care of your patient this week on 4P. You completed all nursing interventions independently and in a timely manner. Keep up all your hard work! BL

Week 12-1(c)- Satisfactory during Infusion Center clinical and with discussion via CDG posting. Preceptor comments: "Excellent in all areas." Great job! AR

Week 13 (1b)- Satisfactory during Cardiac Diagnostics clinical and with discussion via CDG posting. Preceptor comments: "Excellent in all areas. Observed tilt table, cardioversion, regular stress. Talked with Dr. Whitfield (peds cardiology), observed definity, cath, cardioversion. Excellent questions." Great job! AR

Week 14 (1b,c,f)- Satisfactory during Special Procedures clinical and with discussion via CDG posting. Preceptor comments: "Satisfactory in all areas. IV start practice, observed paracentesis, lung biopsy, carotid angiogram, and leg angiogram." Great job! AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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:	NA	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
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	S	S	S	S	S	S	NA	NA	S
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	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	S	S	S	S	NA	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	S	S	S	S	NA	NA	NA	NA	S
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	AR	AR	AR	AR	AR

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

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

*End-of- Program Student Learning Outcomes

Week 9-2(e) Great job in debriefing discussing cultural considerations and racial inequalities that may need to be assessed while caring for patients. BL
Week 10(2a,e): Great job completing the pathophysiology, correlating your patient's diagnosis with labs, diagnostic test, and medication that were ordered. Please see the pathophysiology grading rubric below. You also did a great job in debriefing discussing social determinants of health that may affect your patient. CB

Week 11- 2a,b,c,d- Great job correlating the relationships among your patient's disease process, history, symptoms, and present condition utilizing your clinical judgment skills to formulate a prioritized nursing plan of care. (40/42- Satisfactory). Great job also monitoring your patient for potential complications, recognizing changes in your patient's status, and responding with the appropriate actions. BS

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 NA	NA	NA	NA	NA	NA	S	S	S	S	S	S	NA	NA	S
a. Critique communication barriers among team members. (Interpreting)																		
b. Participate in QI, core measures, monitoring standards and documentation. (Interpreting & Responding)	NA	S	NA	S NA	NA	NA	NA	NA	S	NA S	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	S	NA	NA	S
d. Clarify roles & accountability of team members related to delegation. (Noticing)	NA	NA	NA	S	S	S	NA	NA	S	S	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	S	S	S	NA	NA	NA	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	AR	AR	AR	AR	AR

Comments:

Week 3 (3b)- Satisfactory during your Quality Assurance/Core Measures observation experience. RN comments: Stroke- "Satisfactory in all areas. Thanks for participating!"; Core Measures & Rapid Response/Standards of Care- "Excellent in all areas.". Satisfactory discussion via CDG posting related to this observation experience. Keep up the great work! 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 9-3(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 10(3a): This week you were able to critique communication that took place between the bedside nurse, pulmonologist, hospitalist, and dialysis nurse. CB

*End-of- Program Student Learning Outcomes

Week 12-3(c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical. Keep up the great work! AR

Week 13 (3b,c)- Satisfactory during Quality Scavenger Hunt and with documentation and discussion. Great job! AR

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

Comments:

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 9-4(a) Excellent job this week during debriefing in which you were actively involved in the discussion of this competency. You gave great examples of legal and ethical issues observed in the clinical setting. BL

Week 10(4c): You did a great job presenting yourself in a professional manner throughout the clinical experience. CB

Week 11- 5a,b- Good performance in the clinical setting this week. Nice job working together with the nursing staff and your fellow students. BS

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:	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
a. Reflect on your overall performance in the clinical area for the week. (Responding)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
b. Demonstrate initiative in seeking new learning opportunities. (Responding)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. (Interpreting)	NA	NA S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
d. Maintain the principles of asepsis and standard/infection control precautions (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
e. Practice use of standardized EBP tools that support safety and quality. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
f. Utilize faculty feedback to improve clinical performance. (Responding & Reflecting)	S	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	AR	AR	AR	AR	AR

Comments:

Week 3 (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: My goals are to have more patient interaction and look up more medications that I'm giving. Additional Preceptor comments: Sarah did a wonderful job with her first patient management clinical! She got to change her first ileostomy. SJ/FB

Week 6 (5a)- Reported on by assigned RN during clinical rotation 2/14/2023. Excellent in all areas. Student goals: My goal for my next experience is to take 3 patients instead of 2. Additional Preceptor comments: Student asked question when appropriate knew her meds and reason for them, managed time well and kept up to date with her charting. DM/FB Reported on by assigned RN during clinical rotation 2/15/2023 Student goals: Today I wanted 3 patients but I had some discharges and ended with 1 so my goal to seek out more learning opportunities on my downtime. Additional Preceptor comments: Great job! She is great with time management. Even with it being a slow day she had a great attitude. TS/FB

*End-of- Program Student Learning Outcomes

Week 7 (5a) Reported on by assigned RN during clinical rotation on 2/21/2023 – Excellent in all areas. Student goals: “I would like to have more knowledge on medication when being asked about them.” Additional Preceptor comments: “Great job!” CA/FB Reported on by assigned RN during clinical rotation on 2/22/2023 – Excellent in all areas. Student goals: “Continue to seek opportunities to improve my skills and knowledge.” Additional Preceptor comments: “Another amazing day! Stayed on task handled 4 patients. Looked for learning opportunities assisted with discharge instructions. Very helpful to staff will make a great RN!” CA/FB

Week 9-5(c,e) Excellent job this week during debriefing in which you were actively involved in the discussion of these competencies. BL

Week 10(5d): Sarah, you did a great job maintaining the principles of asepsis, and ensuring standard precautions were utilized for your patient. CB

Week 11- 6a,c,d,e,f- Great job this week working together with nursing and other staff, and your fellow students to provide excellent care to your patient. You also did a nice job during debriefing with your hand-off report, which was thorough and organized (30/30). Your documenting of nursing interventions and medication administration was also very well done. Keep up the good work! BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	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	S	NA	NA	NA S	NA	NA	NA	NA	S
c. Collaborate and communicate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. (Responding)	S	NA	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
d. Deliver effective and concise hand-off reports. (Responding)	NA	NA	NA	S NA	S	NA	NA	NA	S	NA S	NA S	S	NA S	NA	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	S	S	S	S	NA	NA	NA	NA	S
f. Consistently and appropriately posts in clinical discussion groups. (Responding and Reflecting)	NA	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	AR	AR	AR	AR	AR

Comments:

Week 3 (6f)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observation experience. Keep up the great work! AR

Week 5 (6d)-This competency can be rated a “S” when you hand in the hand-off report competency rubric completed by your assigned RN.

Week 6 (6d)- Satisfactory hand-off report 30/30 completion. RN comments: Very organized, clear report! LS/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

*End-of- Program Student Learning Outcomes

Week 9-6(e,f) Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and accurate. You also did an excellent job with your CDG this week. Keep up the great work! BL

Week 10(6a,b,c,f): You did a great job discussing collaborative partnerships and communication that took place with patients, families, and other members of the healthcare team during debriefing this week. Great job including an intext citation and reference for your cdg this week. CB

Week 12-6(c,f)- Satisfactory CDG posting related to your Infusion Center clinical experience. Great work! AR

Week 13 (6f)- Satisfactory CDG postings related to your Cardiac Diagnostics and Quality Scavenger Hunt clinical experiences. Keep up the great work on your last CDG! AR

Week 14 (6f)- Satisfactory discussion via CDG posting related to your Special Procedures clinical. Great job! 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	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	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	S	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	NA	S	S	S	NA	NA	S	S	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	NA	S	S	S	NA	NA	S	S	S	S	S	S	S	NA	NA	S
Faculty Initials	AR	AR	AR	FB	FB	FB	FB	FB	FB	BL	CB	BS	BL	AR	AR	AR	AR	AR

Comments:

Week 3 (7a)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core Measures observation experience. Keep it up! 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 9-7(a,b) You researched and summarized an interesting EBP article in your CDG related to central line-associated bloodstream infections. Excellent job! BL

Week 10(7d): Great job having an "ACE" attitude during your clinical rotation this week! CB

Final- You have done a great job in all clinical experiences this semester! It has been a pleasure working with you and seeing your growth as a nurse. Best of luck in your career! AR

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	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)*	EKG/Telemetry Placements/CT (1,6)*	EKG Measurements (1,2,4,5,6)*
Performance Codes: S: Satisfactory U: Unsatisfactory	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

*End-of- Program Student Learning Outcomes

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

EKG/Telemetry/Chest Tube: Satisfactory participation with review of monitoring tutorial and placement of EKG/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: S. Kopp		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	Nice job identifying abnormal assessment findings, lab and diagnostic results, 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	Top nursing priority identified and relevant assessment data that support it also highlighted Potential complications related to the priority problem are identified with associated symptoms.
	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	Priority interventions are listed (not in prioritized order), interventions include a frequency, are individualized and realistic, and include
	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	rationale.
	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	Nice job addressing/re-evaluating assessment data.
	14. Evaluation includes one of the following statements: <ul style="list-style-type: none"> Continue plan of care Modify plan of care 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.						Total Points: 40/42 Satisfactory. BS	
Faculty/Teaching Assistant Comments:						Faculty/Teaching Assistant Initials: Nice work Sarah! BS	

Care Map Evaluation Tool
AMSN
2023

Date	Care Map **	Evaluation & Instructor Initials	Remediation & Instructor Initials
03/28-03/29/2023	4T	S/BS	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.

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

Student Name: Sarah Kopp

Clinical Date: 3/21-3/22/23

<p>1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)</p> <ul style="list-style-type: none"> • Current Diagnosis (1) • Past Medical History (1) 	<p>Total Points: 2 Comments: Great job describing your patient, including their current and past medical history. CB</p>
<p>2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)</p> <ul style="list-style-type: none"> • Pathophysiology-what is happening in the body at the cellular level (1) 	<p>Total Points: 1 Comments: Great job discussing your patient's diagnosis and explaining what is happening at a cellular level. CB</p>
<p>3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)</p> <ul style="list-style-type: none"> • 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) 	<p>Total Points: 3 Comments: You provided all of your patient's signs and symptoms with a description of why these correlate with the diagnosis. You also explained which symptoms are usually seen that your patient did not have. Good job! CB</p>
<p>4. Correlate the patient's current diagnosis with all related labs. (4 points total)</p> <ul style="list-style-type: none"> • 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) 	<p>Total Points: 4 Comments: You did a great job with the chart to showing what your patients lab values are, what is normal, and why they are effected by his diagnosis. CB</p>
<p>5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)</p> <ul style="list-style-type: none"> • All patient's relevant diagnostic tests and results included (1) • 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) 	<p>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 be. Good job! CB</p>
<p>6. Correlate the patient's current diagnosis with all related medications. (3 points total)</p>	<p>Total Points: 3 Comments: You explained all medication your</p>

<ul style="list-style-type: none"> • 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) 	<p>patient was prescribed and how it was related to your patient's diagnosis. CB</p>
<p>7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total)</p> <ul style="list-style-type: none"> • All pertinent past medical history included (1) • Explanation of how patient's pertinent past medical history correlates with current diagnosis (1) 	<p>Total Points: 1 Comments: You appropriately explained your patient's past medical history and how it was pertinent to his current diagnosis. My suggestion is to add how your patient's ESRD plays a role into the current diagnosis. CB</p>
<p>8. Describe nursing interventions related to current diagnosis. (1 point total)</p> <ul style="list-style-type: none"> • All nursing interventions provided for patient explained and rationales provided (1) 	<p>Total Points: 1 Comments: Great job discussing interventions that were provided to your patient based on their current diagnosis, with rationales included. CB</p>
<p>9. Discuss the role of interdisciplinary team members in the care of the patient. (3 points total)</p> <ul style="list-style-type: none"> • 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) 	<p>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</p>
<p>Total possible points = 23 18-23 = Satisfactory 13-17 = Needs improvement <12 = Unsatisfactory</p>	<p>22/23. Sarah, great job with your pathophysiology. You were very thorough and met all requirements per the grading rubric. CB</p>

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: 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
Faculty Initials	FB	FB	FB	BL	CB	BS	AR	AR
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME(S): Sarah Kopp, Gloria Plue, Livia Suresh, John Zura

GROUP #: 4

SCENARIO: Week 8 Simulation

OBSERVATION DATE/TIME(S): February 27, 2023 1430-1630

CLINICAL JUDGMENT COMPONENTS						OBSERVATION NOTES
<p>NOTICING: (1,2)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Notices patient is complaining of fatigue and nausea. Notices patient's heart rate is low. Notices patient's SpO2 is decreased. Notices patient's heart rhythm change with a decrease in blood pressure. Notices second heart rhythm change.</p> <p>Notices patient's heart rate is elevated and SpO2 is decreased. Notices there is no change in patient's heart rate or rhythm after medication administration. Notices decreased blood pressure. Notices patient is in fluid overload. Notices patient has crackles.</p> <p>Notices patient is unresponsive and pulseless.</p>
<p>INTERPRETING: (1,2)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>Initially prioritizes performing assessment. Interprets patient's initial heart rhythm as sinus bradycardia. Recognizes a need for medication to increase heart rate. Interprets heart rhythm change as a second degree type II heart block. Interprets second heart rhythm change as first degree heart block.</p> <p>Initially interprets patient's heart rhythm as atrial flutter; then recognizes it is atrial fibrillation. Recognizes a need to administer medication to decrease patient's heart rate. Recognizes a need for a fluid bolus to increase patient's blood pressure. Prioritizes stopping patient's fluids when patient shows signs of fluid overload.</p> <p>Interprets patient's heart rhythm as ventricular fibrillation.</p>
<p>RESPONDING: (1,2,3,5,6,7)*</p> <ul style="list-style-type: none"> • 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 						<p>Introduces self and identifies patient. Obtains vital signs, performs assessment. Notifies physician of patient's decreased heart rate and SpO2. Recommends Atropine 0.5-1 mg IVP. Applies 2L of oxygen via nasal cannula. Calms and reassures the patient. Administers Atropine 0.5 mg IVP. Reassesses patient's heart rhythm. Notifies physician of rhythm change. Obtains vital signs, increases oxygen. Reassesses heart rhythm.</p> <p>Introduces self and identifies patient. Obtains vital signs and places patient on the monitor. Applies oxygen 2L via nasal cannula. Auscultates patient's heart. Notifies physician of patient's elevated heart rate and abnormal rhythm. Recommends administering diltiazem bolus followed by a drip. Asks the patient to cough and bear down to help bring down heart rate. Educates patient on diltiazem. Administers diltiazem bolus and drip. Reassesses patient</p>

*End-of- Program Student Learning Outcomes

	<p>and obtains vital signs. Notifies physician about patient’s decreased blood pressure. Recommends IV fluid bolus. Administers fluid bolus IV. Reassesses patient and vital signs. Stops IV fluids when patient has symptoms of fluid overload. Performs a focused respiratory assessment. Calms and reassures the patient. Notifies physician that patient is in fluid overload after IV fluid bolus. Recommends administering Amiodarone or performing a cardioversion.</p> <p>Calls MET. Initiates CPR. Applies fast patches. Defibrillates patient. Restarts CPR. Administers epinephrine 1 mg IVP.</p>
<p>REFLECTING: (1,2,5)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>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!</p> <p>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.</p> <p>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!</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ul style="list-style-type: none"> • Differentiate the clinical characteristics and 	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>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. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family.</p> <p>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 exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse.</p> <p>Responding: Generally displays leadership and confidence and is able to</p>

<p>ECG patterns of common dysrhythmias. (1,2)*</p> <ul style="list-style-type: none"> • 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)* 	<p>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.</p> <p>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.</p> <p>You are satisfactory for this simulation. Great job!</p>
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*End-of- Program Student Learning Outcomes

Lasater Clinical Judgment Rubric Scoring Sheet

SCENARIO: **Comprehensive Simulation**

OBSERVATION DATE/TIME(S): **4/21/2023**

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
<p>NOTICING: (2,6) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Recognized all signs and symptoms associated with patient’s inferior wall MI upon arrival to the ER (ex. chest pain, diaphoresis, vital signs, labs)</p> <p>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.</p> <p>Recognized the appropriate use of MONAH (morphine, oxygen, nitrates, aspirin, heparin), fluid resuscitation, diuretics, and potassium use for the inferior wall MI patient.</p> <p>Recognized the association between patient history, including non-compliance, and current findings.</p> <p>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.</p> <p>Recognized patient’s allergy to contrast dye and the importance of pre-medicating so that any potential allergic reaction can be minimized.</p> <p>Recognized the appropriate patient information pertinent to communication with next caregiver following SBAR.</p> <p>Recognized the necessary components of assessment for the post Inferior STEMI patient upon return from the cardiac cath lab.</p> <p>Recognized abnormal vital sign, Atrial fibrillation, impending heart failure, and ecchymosis at right radial arterial site upon admission to critical care unit.</p> <p>Recognized the different medical diagnosis and past medical history that needed to be considered when developing a discharge education plan.</p>
<p>INTERPRETING: (1,2,3,6) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>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.</p> <p>ECG interpreted correctly. Recognized the need to continually</p>

*End-of- Program Student Learning Outcomes

	<p>interpret vital signs, heart rhythm, and pain throughout the case.</p> <p>Interpreted the areas affected by an inferior wall MI and artery responsible for this particular MI.</p> <p>Excellent job prioritizing appropriate data to include in communication using the SBAR format.</p> <p>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.</p> <p>Interpreted current diagnosis and past medical history and determined the need for education on current and past health issues as well as lifestyle modifications.</p>
<p>RESPONDING: (2,3,6,7) *</p> <ul style="list-style-type: none"> • 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 B 	<p>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.</p> <p>Provided patient/family education related to lifestyle modifications including medication compliance and smoking cessation.</p> <p>Demonstrated clear communication providing the necessary components to include during-hand-off report for transition of care utilizing SBAR.</p> <p>Applied appropriate interventions based on assessment findings in all departments.</p> <p>Active engagement throughout scenario.</p> <p>Provided accurate and pertinent information when phoning healthcare provider; accurately read orders back to verify.</p> <p>Provided appropriate communication and conflict management responses to daughter.</p>
<p>REFLECTING: (4,5,6,7) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Able to identify new knowledge obtained through the simulation and how to apply to future patient care scenarios.</p> <p>Acknowledged the importance of customizing teaching to</p>

*End-of- Program Student Learning Outcomes

	<p>accommodate patient lifestyle. Asked appropriate questions to gain understanding of information provided.</p> <p>Identified areas of improvement to foster clear and concise communication using SBAR. Reflected on ways to resolve conflict in appropriate manner.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.</p> <p>E= Exemplary A= Accomplished D= Developing B= Beginning</p> <p>Scenario Objectives:</p> <ul style="list-style-type: none"> • Assessment of ACS/STEMI, HF, and Atrial Fibrillation from admission to discharge. (1,6)* • Initiate treatment protocols for ACS/STEMI, JF, and Atrial Fibrillation. (1,6)* • Collaborate and communicate with interdisciplinary health care providers while transitioning from admission to discharge. (1,2,6)* • 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)* • Demonstrate ability to resolve conflict among interdisciplinary healthcare team members. (6,7)* 	<p>Lasater Clinical Judgement Rubric Comments:</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>Overall excellent performance during the comprehensive simulation on a patient experiencing an inferior myocardial infarction. Total care</p>

*End-of- Program Student Learning Outcomes

<ul style="list-style-type: none">• *Course Objectives	from ED to Catherization lab to ICU and discharge education was completed satisfactorily.
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**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:

Although I have so much room to improve, I feel that I have learned a lot and achieved more confidence throughout this semester. I feel more prepared to start my career as a nurse. Thank you!

Student eSignature & Date:

Sarah J. Kopp 04/25/2023

ar 12/20/2022