

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2024**

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

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Spring

Date of Completion:

Faculty: Dawn Wikel, MSN, RN, CNE; Rachel Haynes, MSN, RN; Kelly Ammanniti, MSN, RN, CHSE;
Monica Dunbar, DNP, RN; Heather Schwerer, MSN, RN; Nick Simonovich, MSN, RN

Faculty eSignature:

Teaching Assistant: None

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

- Skills Lab Competency Tool & Skills Checklists
- Simulation, Prebriefing, & Reflection Journals
- Nursing Care Map Rubric
- Meditech Documentation
- Clinical Debriefing
- Clinical Discussion Group Grading Rubric
- Evaluation of Clinical Performance Tool
- Lasater’s Clinical Judgment Rubric & Scoring Sheet
- Virtual Simulation Scenarios

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)

Faculty’s Name	Initials
Kelly Ammanniti	KA
Monica Dunbar	MD
Rachel Haynes	RH
Heather Schwerer	HS
Nick Simonovich	NS
Dawn Wikel	DW

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

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

UNSATISFACTORY CLINICAL PERFORMANCE

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

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

OTHER

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

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

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
2/1/2024	Impaired Physical Mobility	Satisfactory/MD	NA	NA

Note: Students are required to submit two satisfactory care maps over the course of the semester. If the care map is not evaluated as satisfactory upon initial submission, the student must revise the care map based on instructor feedback/remediation and resubmit. A maximum of two remediation attempts will be provided for a single care map and if still unsatisfactory, the student will be required to start fresh and initiate a care map on a new patient. At least one care map must be submitted prior to midterm.

Objective

1. Illustrate correlations to demonstrate the pathophysiological alterations in adult patients with medical-surgical problems. (2,3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S	N/A	N/A											
a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)			S	S	N/A	N/A											
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	N/A	N/A											
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	N/A	N/A											
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S	N/A	N/A											
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	N/A	N/A											
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S	N/A	N/A											
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	N/A	N/A											
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	S	N/A	N/A											
Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Meditech, FSBS, IV Pump Sessions		4N-71 Hip fx	5T-78 LTKA	N/A	N/A											
Instructors Initials	DW		NS	MD	DW												

Comments:

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 1 (1h)- During week 1, the Meditech, FSBS and IV pump sessions were all considered clinical hours. You came prepared to each of them and demonstrated competency accordingly. For this reason, you have earned an S for this competency. DW

Week 3 1(a-h) – Kailee, you did a nice job this week making correlations between your patient’s disease process and the nursing care required. You discussed the cause of your patient’s fall and resulting hip fracture. Risk factors and potential complications of immobility were identified. Besides her fall and fracture, she was overall very healthy with limited past medical history to correlate. You identified her symptoms of pain and limited mobility of the affected extremity prior to surgery, including her risks when maintaining bedrest. You identified the rationale behind the foley catheter placement for immobility. You observed the medical treatment performed to stabilize and replace the portion of the hip that was fractured and discussed your observations upon returning. Great job this week! NS

Week 4- Rehab Clinical Objective 1 B-E-This week you were able to identify symptoms, medical treatments, pharmacotherapy, and diagnostic tests that were a part of the patient’s stay on the Rehab unit. You did a great job in correlating all of these with the patient’s diagnosis. Great job! MD

Objective

2. Perform physical assessments as a method for determining deviations from normal. (3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S	N/A	N/A											
a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			S	S	N/A	N/A											
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			S	S	N/A	N/A											
c. Conduct a skin assessment and implement appropriate precautions and care. (Noticing)			S	S	N/A	N/A											
d. Communicate physical assessment. (Responding)			S	S	N/A	N/A											
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S	N/A	N/A											
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	S	N/A	N/A											
	DW		NS	MD	DW												

Comments:

Week 1 (2f)- By attending the Meditech clinical update & providing your full, undivided attention during the demonstration of documenting insulin, IV solutions, and the Meditech 2.2 upgrades, you are satisfactory for this competency. NS

Week 3 2(a,b,e) – Nice job with your assessments this week, noting both normal findings and deviations from normal. You noticed neck stiffness, use of glasses, weakness and pain to the affected extremity, abnormal gait, musculoskeletal trauma, inability to perform ADLs, irregular bowel pattern, and the use of an indwelling urinary catheter on day 1. On day 2 post-surgery, you noticed improvements in assessments and a circulatory assessment that was within normal limits. You maintained patient safety by performing a safety assessment and ensuring all precautions were in place. NS

Week 4- Rehab Clinical Objective 2 A-This week you were able to perform a great head to toe assessment! You were able to translate all of your findings in documentation and while discussing your patient with me. You really did a great job putting the pieces together with the patient's assessment and what you would see with the diagnosis! MD

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:	S		S	S	N/A	S											
a. Perform standard precautions. (Responding)	S		S	S	N/A	S											
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	N/A	N/A											
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S	N/A	N/A											
d. Appropriately prioritizes nursing care. (Responding)			S	S	N/A	N/A											
e. Recognize the need for assistance. (Reflecting)			S	S	N/A	N/A											
f. Apply the principles of asepsis where indicated. (Responding)	S		S	S	N/A	S											
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			S	N/A	N/A	N/A											
h. Implement DVT prophylaxis (early ambulation, SCDs, TED hose, administer enoxaparin or heparin) based on assessment and physicians' orders (Responding)			S	S	N/A	N/A											
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	S	N/A	S											
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S	N/A	S											
	DW		NS	MD	DW												

Comments:

Week 3 3(b,c,d) – You demonstrated good time management skills in the care of your patient this week. By doing so, you ensured all priority care needs were met in a timely manner. During clinical, be sure to utilize your down time to review the patient's chart to correlate abnormal findings with the patient's disease process by filling out the Patient Profile Database. You prioritized your nursing care effectively, and noted the need for assistance related to a leaking and malfunctioning IV site. You responded

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

appropriately by carefully assessing the IV site, noting the IV was coming out of the vein and leaking under the dressing. You appropriately applied a new dressing to reduce the risk of infection and performed a saline flush to confirm patency. Later, you identified an infiltrated IV site when performing a saline flush prior to medication administration. As a result, you decided the best course of action was to remove the IV site, which was performed accurately with the use of aseptic technique. You also gained additional experience with discontinuing a foley catheter, demonstrating independence and knowledge of the procedure to promote positive outcomes. Nice job! NS

Week 4- Rehab Clinical Objective 3 D-You were able to identify the priority assessments with your patient and prioritize interventions that needed to be completed! MD

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S	N/A	N/A											
k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			S	S	N/A	N/A											
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			S	S	N/A	N/A											
m. Calculate medication doses accurately. (Responding)			S	S	N/A	N/A											
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			S	N/A	N/A	N/A											
o. Regulate IV flow rate. (Responding)	S		S	N/A	N/A	N/A											
p. Flush saline lock. (Responding)			S	N/A	N/A	N/A											
q. D/C an IV. (Responding)			S	N/A	N/A	N/A											
r. Monitor an IV. (Noticing)	S		S	N/A	N/A	N/A											
s. Perform FSBS with appropriate interventions. (Responding)	S		S	N/A	N/A	N/A											
	DW		NS	MD	DW												

Comments:

Week 1 (3o,r)- During the IV pump session, you actively participated in the programming and maintenance of the Alaris IV pump. Additionally, you accurately identified abnormal IV site assessment data with an IV site monitoring activity. HS
 (3s)- The student was able to satisfactorily perform a Quality Control check of the glucometer as well as demonstrate skills and knowledge required for proper fingerstick blood glucose measurement with the ACCU-CHEK Inform II glucometer. DW

*End-of-Program Student Learning Outcomes
 Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3 3(k-s) – Great job with medication administration this week! You gained experience administering PRN oral medications for pain, performing a saline flush and IVP medication administration, initiating IV fluids prior to surgery, regulating a flow rate, D/Cing an IV, and monitoring an IV site for complications. See comments above related to IV assessment and intervention. You stated the 6 rights of medication administration and utilized the BMV scanner for patient safety. All dosage calculations were performed accurately. You did well with numerous new experiences related to medication administration. NS

Week 4- Rehab Clinical Objective 3 K-M-This week you were able to identify the rights of medication administration and you were able to accurately administer medications to your patient. You identified safe practice and performed really well with administering your patient's medications! MD

Objective

4. Use therapeutic communication techniques to establish a baseline for nursing decisions. (1,5,7)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S	N/A	S											
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	S	N/A	S											
b. Communicate professionally and collaboratively with members of the healthcare team using hand-off communication techniques. (SBAR) (Responding)			S	S	N/A	N/A											
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	S	N/A	N/A											
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	N/A	S											
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	S	N/A	S											
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	S	N/A	N/A											
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			S	S	N/A	N/A											
			NS	MD	DW												

Comments:

Week 3 4(a,b) – You performed as an accountable and professional member of the health care team. You were active on the unit with your patient and helped others as well. Your communication with the patient's, family members, peers, and health care team were strong. It was evident that you made a therapeutic connection with your patient throughout the week. Nice job! NS

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3 4(e) – Excellent work with your CDG this week! Your responses were well thought out and provided descriptive details. You selected article to summarize was pertinent to your patient’s situation and you did well to summarize the article succinctly. I appreciated the extra insight and research put into your response to Tylie. You were able to enhance the conversation with additional details from an outside resource. All criteria were met for a satisfactory evaluation. You did a great job with your APA formatting! One thing to mention for future success, be sure to *italicize* the journal title and volume number when listing your reference. Otherwise, it was spot on! NS

Week 4- Rehab Clinical Objective 4 E-You had a wonderful CDG this week with response! You were able to turn in your CDG on time, have the adequate word count for both posts, and you were able to provide to the conversation with the information you gave! One thing to note with your references that you provided-both of the references did not have the correct order of information this week. It should be author, year, title, journal, and then website/DOI. For example-in your initial post the reference should look like this: American Hospital Association. (2024). Team-training center: AHA. *Journal*. website/DOI. If you have any questions about this please reach out. MD

Objective

5. Implement patient education based on teaching needs of patients and/or significant others. (1,6)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S	N/A	N/A											
a. Describe a teaching need of your patient.** (Reflecting)			S	S	N/A	N/A											
b. Utilize appropriate terminology and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)			S	S	N/A	N/A											
			NS	MD	DW												

****5a & b- You must address this competency in the comments below for all clinicals on 3T, 4N, or Rehab- describe the patient education you provided; be specific- include the topic, method of delivery, reason for teaching need, materials to support learning through above resources (if applicable), and method used to validate learning.**

Example: Education related to orthostatic hypotension (changing positions slowly by sitting at the side of the bed or chair for a few minutes before moving to another position, utilizing the walker when ambulating) was provided to my patient through discussion and demonstration. This was necessary to maintain patient safety as he/she was experiencing a drop-in blood pressure and dizziness when getting out of bed. A patient education sheet was printed from Lexicomp and given to the patient. The teach back method was used to validate learning.

Comments:

Week 3

- A. A teaching need of my patient was when she was prescribed a laxative. My patient stated that she did not take a laxative at home, so why was she taking one here, so I explained to her that the laxative was due to the pain medications and anesthesia she underwent the day before. Nice job, Kailee! It's important that patients participate in their plan of care and have the opportunity to ask questions. Whenever a new medication is prescribed, patients may wonder why they are on something new. You took the time to explain the risk factors related to immobility and medication side effects related to her bowel pattern and helped her to better understand the rationale behind the prescription to keep her informed. Good work! NS**
- B. I explained how the pain medication and anesthesia affected her bowels after I went and did some research on Skyscape which told me that pain medications can temporarily suppress your central nervous system which is a part of the body that keeps your bowels moving. I also explained to her that anesthesia slows everything down, so it takes time for everything to get moving again. Good use of supplemental resources to support your education! NS**

Week 4

- A. A teaching need of my patient was how to use her ambulation devices. During therapy she did not understand that she was going to need to use her upper body to help her get up her stairs at home, so the physical therapist and I helped explain to her why we were teaching her how to hop up with the use of her walker. Awesome education! MD**

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

B. During one of my patient rounds, I had to recheck my patients' blood pressure as a side effect for one of her medications was orthostatic hypotension. I made sure to recheck this because I knew she would be getting up and down throughout the day for therapy, and I did not want her to have an issue during these interventions. Anyways, when I was checking just her blood pressure, she asked me why I was only checking just one instead of all of them (meaning why was I checking one vital sign and not them all)? I then explained to her that one of her medications I had given her, amantadine, can cause blood pressure to drop when she is changing positions which means she could get dizzy. I had previously searched this information up on Skyscape when looking up my medications which helped me to explain to my patient why I wanted to make sure her blood pressure was normal. **Skyscape is a fantastic resource! MD**

Objective

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

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Develop and implement a priority care map utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)			N/A	S	N/A	N/A											
b. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting)			S	S	N/A	S											
			NS	MD	DW												

****6b- You must address this competency in the comments on a weekly basis. For all clinicals - provide an example of SDOH &/or cultural elements that influenced your patient's care; be specific.**

Comments:

See Care Map Grading Rubrics below.

Week 3

A. Some of the things that would have influenced my patients was the history of her family members. My patient shared with me about her son becoming addicted to a substance, but now is clean. She then shared with me that she was afraid she was also going to develop an addiction like he did due to the medication that she was taking for pain. I talked to her and assured her that if she is worried about that, then I will more than happily talk to her nurse so we could find a better option for her. **Good thoughts! This certainly was a concern of hers that could impact her ability to manage her pain at home adequately which could negatively impact her overall health. NS**

Week 4

A. Some things that would have influenced my patients care would have been her anxiety. My patient had a history of anxiety, and I did notice she seemed very quiet when I first introduced myself. I later noticed that during therapy, she seemed very anxious about learning how to go upstairs to get into her house. She knew she had to learn this to get into her home, but with her recent surgery, she was very worried about falling or hurting herself trying to do this. So, I would say this definitely impacted how she processed everything we were telling her, but I knew she wanted to get better and be back home. **This could definitely affect her support system at home and how they will work with her when performing daily tasks around the house. MD**

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 6

- A. Some things that can influence patient care is proper PPE and precaution signs. During my infection control clinical, I made sure that all patients who were to be under any precaution had the right items available. If these are done incorrectly, then that puts staff, patients, and even visitors at risk. By making sure that all the patients had the right isolation precautions, I helped to protect anyone who went into that room as well as other patients that they came in contact with later in the day.

Objective																	
7. Illustrate professional conduct including self-examination, responsibility for learning, and goal setting. (7)*																	
Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Reflect on an area of strength. ** (Reflecting)	S		S	S	N/A	S											
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S	N/A	S											
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S	N/A	S											
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	S	N/A	S											
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		S	S	N/A	S											
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S	N/A	S											
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S	N/A	S											
h. Actively engage in self-reflection. (Reflecting)	S		S	S	N/A	S											
	DW		NS	MD	DW												

**7a and 7b: You must address these competencies in the comments section on a weekly basis. Please write a different comment each week. Remember that a goal includes what you will do to improve, how often you will do it, and when you will do it by (example- “I had trouble remembering to do the three checks of the six medication rights prior to administering medications. I will review the six

rights and medication administration content in the textbook twice before the next clinical. Additionally, I will request to meet with my clinical faculty member to practice preparing and administering at least three medications before the next clinical.”

Comments:

Week 1- Strength: I think that my strength for this week was my communication. During skills lab and also when leaning IV math this week I was able to ask for help when needed from classmates and educators when needed. If I had not done this then I would have still been confused and when the test came around I would not do as well. **Communication is a very important basic skill. I'm glad you felt comfortable enough to get the information you needed to be successful. Keep up the good work! DW**

Weakness: I would say that my weakness this week was being nervous. When I am doing something that I have not done before or am not use to, I get super shaky which leads to the task being even harder that it should have been. Something that I can do to improve this is giving myself some time before doing the task to make sure that I am ready and can do it correctly. I can also not stress myself so much about getting the task done, but rather doing it correct. **Great reflection here, Kailee! Are there any mindfulness techniques that you can try to reduce the anxious feelings; maybe the 4-7-8 breathing that you learned last semester? I find that this really helps me to focus on the task and not the nervousness. DW**

- A. **Week 3- An area of strength for me would be my confidence. I felt very confident in a lot of my abilities today which I think helped me to develop as a student nurse. Even in pretending to be confident, I realized that I knew how to do the task at hand and did it correctly. Kailee, you did an awesome job this week! You were active and independent with your nursing care throughout the week. You used your clinical judgement and experiences last semester to help drive your care and confidence. I was impressed with your ability to connect with your patient and ability to perform some skills independently! Keep it up. NS**
- B. **Week 3- An area of weakness for me would be my vocabulary and grammar. I realized today that a couple times I had to go back and explain again to my patient because I would get so caught up in what I was saying, I would forget I was talking to a patient who most likely did not understand a word I said. A way that I could fix this is by slowing down and trying to pretend I am talking to someone who has not the slightest idea about what any word I am saying means. By doing this I will be able to make sure that my patient understands the point that I am trying to get across. This is a very good reflection! One of our biggest challenges as health care providers is explaining to patients in a way that they will understand. As our knowledge and experience grows, we can talk over the patients heads at times. It is essential that patients are able to comprehend the education provided in order to implement the plans on discharge. Sometimes we have to take a step back to determine how each individual patient best learns and understands. Good thoughts! NS**

Week 4

- A. **An area of strength for me would be my time management. I felt that I had all of my tasks done in a very timely manner while also having time to see if anyone needed help with any of theirs. You had excellent time management! Keep working on continuing to improve this! MD**
- B. **An area of weakness for me would be that I tend to rush myself. I get very caught up in what I am doing and I sometimes forget that I need to make sure I am doing it correctly. A way that I can improve on this is by taking my time and making sure that I double check myself before proceeding. In doing this, I will ensure that my likeliness of making a mistake is little to none. This is a great goal! Another tactic that I do is I take a deep breath before a procedure or medication pass. It helps calm me and remind me that what I am doing needs to be at a slower pace and that I need to focus closely on what I am about to do. It may help you as well. It is important to try different things to ensure that you are providing the best/safest care for your patients. MD**

Week 6

- A. **An area of strength for me would be that I am comfortable enough to take initiative. Today we had an incorrect sign posted on a door, and I had to explain to the staff why it was wrong and that they are not protecting themselves correctly. I say this is my strength because I think that I did help to protect hospital staff from gaining an unwanted infection from the hospital.**
- B. **An area of weakness I would say is my use of technology. I say this because I think that it was a little more difficult to find things I needed today due to the new charting system, so I was not sure if what I found was the right thing. A way that I can improve this is by in my free time I can use the “test” version of our meditech to get more comfortable with where everything is now.**

Student Name: Kailee Felder		Course Objective:					
Date or Clinical Week: 2/1/2024							
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	You did amazing with noticing all abnormal assessments, labs/diagnostics, and risk factors! MD
	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	Awesome job with interpreting the data that you collected! MD
	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	Amazing responding and interventions for your patient! MD
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
Refl	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	You met all criteria! MD

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

Student Name:		Course Objective:					
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)		
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)		
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	5. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	6. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
	7. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)		
Responding	8. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	9. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		
	11. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		
	12. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
Refl	13. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		

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

Firelands Regional Medical Center School of Nursing
Medical Surgical Nursing 2024
Skills Lab Competency Tool

Student name: Kailee Felder								
Skills Lab Competency Evaluation	Lab Skills							
	Week 1	Week 1	Week 1	Week 1	Week 1	Week 2	Week 2	Week 9
	Insulin (2,3,5,7)*	Assessment (2,3,4,5,7)*	IV Math Application (3,7)*	Lab Day (1,2,3,4,5,6,7)*	IV Skills (2,3,5,7)*	Trach (1,2,3,4,5,6,7)*	EBP (3,7)*	Lab Day (1,2,3,4,5,6,7)*
Performance Codes: S: Satisfactory U:Unsatisfactory	Date: 1/9/24	Date: 1/9/24	Date: 1/11/24	Date: 1/11/24	Date: 1/12/24	Date: 1/18/24	Date: 1/17/24	Date: 3/11 or 3/12/24
Evaluation:	S	S	S	S	S	S	S	
Faculty/Teaching Assistant Initials	DW	DW	DW	DW	DW	DW	DW	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	

*Course Objectives

Comments:

Week 1

(Insulin)- You were able to correctly prepare an insulin pen and administer subcutaneous insulin. Insulin requirements were accurately identified and calculated through the corrective scale and carbohydrate coverage orders. MD

(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. KA/RH

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/9/24 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/11/24. KA/DW

(Lab Day)- You satisfactorily completed the mandatory lab review of nursing foundational skills. This was achieved through simulating care for a patient in a scenario requiring competency in assessment, communication, medication administration (including PO and IM injection), nasogastric tube insertion and maintenance, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, foley insertion, and development of nursing notes. NS/MD

(IV Skills)- You have satisfactorily completed IV lab including a saline flush, IV push medication administration, priming and hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV solution, and monitoring the IV site for infiltration, phlebitis, and signs of complication. DW

Week 2

(Trach Care & Suctioning) - During this lab, you satisfactorily demonstrate competence with tracheostomy care and tracheostomy suctioning. You provided comforting communication with your patient throughout the procedure. You communicated the need to suction based on the assessment findings. You did well to maintain the sterile

field and applying sterile gloves. During the tracheal airway suctioning, you were able to remind yourself to hyper oxygenate the patient when preparing the equipment and setting up suctioning. You also reminded yourself to re-assess the respiratory system prior to suctioning the oropharynx. During tracheostomy care, you reminded yourself to remove the old dressing prior to applying sterile gloves. Continue to work on not letting your nerves interrupt your thought process. It was evident you knew the procedure, but at times you had to slow yourself down. You answered my questions appropriately demonstrating knowledge and competence of each procedure. Keep up the hard work! DW/RH/NS/HS

(EBP Lab)- You actively participated in the online searching process for evidence-based practice literature, as well as reviewing example articles to determine appropriate selection and information needed when summarizing a research article. KA/LK

Firelands Regional Medical Center School of Nursing
 Medical Surgical Nursing 2024
 Simulation Evaluations

<u>Simulation Evaluation</u>	Student Name: Kailee Felder							
	vSim- Vincent Brody (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	vSim- Juan Carlos (Pharmacology) (*1, 2, 3, 4, 5, 6)	vSim- Marilyn Hughes (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Simulation #1 (Musculoskeletal & Resp) (*1, 2, 3, 4, 5, 6, 7)	Simulation #2 (GI & Endocrine) (*1, 2, 3, 4, 5, 6, 7)	vSim- Stan Checketts (Medical-Surgical) (*1, 2, 3, 4, 5, 6)	vSim- Harry Hadley (Pharmacology) (*1, 2, 3, 4, 5, 6)	vSim- Yoa Li (Pharmacology) (*1, 2, 3, 4, 5, 6)
Performance Codes: S: Satisfactory U: Unsatisfactory	Date: 1/29/24	Date: 2/12/24	Date: 2/26/24	Date: 2/28 or 2/29/24	Date: 4/10 or 4/11/24	Date: 4/15/24	Date: 4/25/24	Date: 4/29/24
Evaluation	S							
Faculty/Teaching Assistant Initials	MD							
Remediation: Date/Evaluation/Initials	NA							

* Course Objectives

Comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2024

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

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

Student eSignature and Date:

12/27/2023