**EVALUATION OF CLINICAL PERFORMANCE TOOL**
**Advanced Medical Surgical Nursing- 2024**

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

**Student:** Allison Martin

**Final Grade:** **Satisfactory**

**Semester: Spring**

**Date of Completion:** 4/26/2024

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

**Faculty eSignature:** Fran Brennan MSN, RN

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

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

**ABSENCE (Refer to Attendance Policy)**

| Date | Number of Hours | Comments | Make Up (Date/Time) |
|---|---|---|---|
| 3/15/2024 | 2H | Didn't complete vSim Mary Richards | 3/16/2024 2H |
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| Initials | Faculty Name |
|---|---|
| CB | Chandra Barnes, MSN, RN |
| FB | Fran Brennan, MSN, RN |
| BL | Brittany Lombardi, MSN, RN, CNE |
| 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:**<br>a. Manage complex patient care situations with evidence of preparation and organization. **(Responding)** | S | S | S | S | S | S | NA | NA | S | NA | NA | NA | S | S | S | NA | NA | S |
| b. Assess comprehensively as indicated by patient needs and circumstances**. (Noticing)** | S | S | S | S | S | S | NA | NA | S | S | NA | NA | S | S | S | NA | NA | S |
| c. Evaluate patient's response to nursing interventions. **(Reflecting)** | S | S | S | S | S | S | NA | NA | S | ~~NA~~<br>S | NA | S | S | S | S | NA | NA | S |
| d. Interpret cardiac rhythm; determine rate and measurements. **(Interpreting)** | S | NA | S | S | S | S | NA | NA | S | NA | NA | NA | S | S | S | NA | NA | S |
| e. Administer medications observing the six rights of medication administration. **(Responding)** | NA | S | NA | S | S | S | NA | NA | S | NA | NA | NA | S | S | S | NA | NA | S |
| f. Perform venipuncture skill with beginning dexterity and evidence of preparation. **(Responding)** | S | S | NA | NA | NA | NA | NA | NA | S | S | NA | NA | NA | NA | NA | NA | NA | S |
| g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. **(Responding)** | S | S | S | S | S | S | NA | NA | S | NA | NA | S | S | S | S | NA | NA | S |
| **Faculty Initials** | AR | AR | AR | BL | CB | CB | CB | CB | CB | AR | AR | AR | FB | FB | FB | FB | FB | FB |
| Clinical Location | Special Procedures | Infusion Center | Cardiac and Core Measures | 4P | 4C | 4C | NA | NA | NA | DIGESTIVE HEALTH | NA | PA/DP SCAVENGER | 3T | 3T | 4N | NA | NA | |

**Comments:**

Week 2 (1b,c)- Satisfactory discussion via CDG posting related to your Special Procedures clinical experience. Preceptor comments: "Excellent in all areas. Allison did a nice job with clinical today. She was able to watch a fistulogram and a lung biopsy. She had some IV attempts and observed in CT. Nice job." Keep up the great work! AR

*End-of- Program Student Learning Outcomes

Week 3 (1c)- Satisfactory Infusion Center clinical and with discussion via CDG. Preceptor comments: “Excellent in all areas. Pt. de-accessed peds pt. port, witnessed multiple dressing changes, IVIG, blood products and Remicade”. Great job! AR
Week 4 (1b)- Satisfactory during Cardiac Diagnostics clinical and with discussion via CDG posting. Preceptor comments: “Excellent in all areas. Allison was very willing to take in as much experience as she could. Was very pleasant also.”. Great job! AR
Week 5-1(a-e, g) Excellent job this week managing complex patient care situations. Your care was very well organized, and you did a great job with your time management. Your head to toe assessments were very thorough and well done. Your medication passes were safely done, and you had the opportunity to administer PO and IV medications all while following the six rights. Great job monitoring your patient closely to ensure positive patient outcomes. BL
Week 6(1a,e): Great job this week managing complex care situations. You did a great job being prepared for clinical, and ensuring that your assessments were detailed and thorough. You did a great job administering medications to your patient this week (IV, IVP, SQ, and PO given via an OG), following the six rights of medication administration. Great job! CB
Week 7(1a,b,c,e,g): You did a great job this week managing complex patient situations while in the ICU. You performed and documented thorough assessments, performed interventions, and evaluated your patient’s response to those interventions. You completed your ECG booklet, interpreting cardiac rhythm strips with measurements. You did a great job administering medications this week (PO via an OG tube, IV, IVP, and SQ), following the six rights of medication administration. You appropriately responded to alarms related to your patient, great job! CB
Week 9 (1f)- Great job with several successful IV attempts, appropriate technique was demonstrated. FB
Week 11 (1c)- Satisfactory during Patient Advocate/Discharge Planner clinical and with discussion via CDG posting. Preceptor comments: “Excellent in all areas.” Great job! AR

Week 12 (1a,b)- Great job managing patient care and prioritizing care based on your comprehensive assessments. FB

Week 13 (1a,b,c)- Satisfactory with managing patients during your patient management clinical experiences this week! Great job! FB

Week 14 (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. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

**Objective**

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

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

***When completing the 4T Care Map CDG refer to the Care Map Rubric**

**Comments:**

Week 5-2(d) Excellent job utilizing your clinical judgment skills to formulate a prioritized plan of care for your patient on 4P this week. Please refer to the Care Map Rubric for my feedback. 2(e) Great job in debriefing discussing cultural considerations and racial inequalities that may need to be assessed while caring for patients. BL
Week 6(2a,e): Great job completing your pathophysiology, you were Satisfactory, please see the grading rubric below. You do a great job respecting your patients and family's needs, ensuring that optimal care is provided around their needs. I changed competency 2d to a "S" because although you didn't complete a care map, you are always formulating a plan of care when caring for your patient's. CB

*End-of- Program Student Learning Outcomes

Week 7(2b,c,d): Great job in debriefing discussing how you monitored your patient for potential risks and anticipated early complications. You also did a great job discussing changes in patient status you noticed, as well as how you responded and took action. CB

Week 12 (2a,b)- Great use of clinical judgment skills to determine patient needs, plan care for patients and implement appropriate nursing interventions. FB

Week 13 (2 a,b) Good job with identifying potential complications. Remember to use all subjective and objective data to determine plan of care. Investigate the reasons behind patient signs and symptoms and correlate with the pathophysiology of disease processes. FB

Week 14 (2c) Good job recognizing changes in patient status and taking appropriate action. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

**Objective**

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

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

**Comments:**

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

Week 4 (3b)- Satisfactory during Quality/Core Measures observation and with discussion via CDG posting. Great job! AR

Week 5-3(c) Excellent job demonstrating fiscal responsibility in clinical practice this week, as well as discussing additional strategies to achieve this in debriefing. BL

Week 6(3a): Great job in debriefing this week discussing communication barriers you witnessed between healthcare team members while at clinical. CB

Week 7(3b): Great job in debriefing participating in discussion of quality indicators and core measures. CB

Week 11 (3b,c)- Satisfactory during Quality Scavenger Hunt, documentation, and with discussion via CDG posting. Great job! AR

Week 12 (3c) This competency was changed to a NA, because you did not discuss fiscal responsibility during or for this clinical rotation. Make sure to self-rate on actual competencies completed the corresponding week. (3 d,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

*End-of- Program Student Learning Outcomes

Week 13 (3e) Great job with prioritizing the delivery of care to assigned patients assigned to you this week. Remember the acronym ABC-S and pain for prioritization. FB

Week 14 (3e) Great job being able to prioritize care for a group of patients during this clinical rotation. FB

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

Objective 4a: Provide a comment for the highlighted competency each week. If no clinical experiences, put "NA" for that week.

**Comments:**

4a – week 2 – During the special procedures clinical before each procedure an informed consent signature must be obtained. If there was a time when this signature would not be obtained and the procedure was performed then the physician would be violating the patient's legal rights and could be charged with malpractice. Very good example. AR

4a – Week 3 – During this clinical experience a legal issue that could have occurred is when a patient is receiving blood products. If the blood products are not properly checked or if the patient isn't properly monitored during the infusion, the patient could react negatively during the infusion and the nurses would be held responsible if not caught. Perfect example, especially because they are in the outpatient setting. AR

4a – Week 4 - During the Core Measures Clinical a big topic was focused on advocating for your patient. By advocating for our patient, we respect their ethical beliefs and legal rights. If we were to not properly advocate for our patients their ethical beliefs my not be known or understood by other healthcare members. This may cause something to happen to the patient that goes against their beliefs and this can cause major issues. Very true. AR

4a – Week 5 – During the 4P clinical I experienced a medication error made by one of the nurses. When receiving an updated order for a heparin infusion the dosage calculation on the order was incorrect and the nurse had chosen to follow the order rather than calling pharmacy or the physician. This caused a change in the patients

*End-of- Program Student Learning Outcomes

clotting time taking them out of the therapeutic level. It is important to remember that if you do not understand or are confused about an order you should always ask for clarification and have the order fixed. Great example, Allison. The other ethical issue here is that the patient/legal guardian is unaware that the wrong dose of heparin was given. BL

4a – Week 6 – During my 4C clinical I had a patient who was intubated and receiving mechanical ventilation. During the shift report, I was told that my patient was a DNRCCA without intubation. She was admitted to the ER where they decided to intubate her based on her ABGs. They were unaware of her code status even though it had been put into the EMR a month before. At that point, they were going to leave it in till she was better since it had already been done. An important ethical issue was made that goes against her autonomy. It is important to respect a patient's wishes and always make sure to check that patient's code status before making a big decision such as intubation. Allison, great example. And as you seen this week in clinical, your patient was adamant about getting that tube out and her family agreed. It is so important to have those hard conversations with patients and their families, so that everyone is on the same page. CB

4a – Week 7 – This week on 4C I had a mechanically vented patient that was able to be extubated on the second day. After he was extubated, we asked the nurse if the family should be notified of this change. The nurse seemed like she wasn't in a hurry to notify the family because the wife hadn't visited much. This could have potentially caused a legal issue between the hospital staff and the family for not being notified. Allison, this is a great point, especially if the patient would not have done well after being extubated. What if the patient would have needed to be reintubated and there were complications. My advice to you, always notify the NOK/contact person with any change that is significant to the patient's care. CB

4a – Week 9 – This week in digestive health a major ethical principal take came up was autonomy. As we were inserting IVs it was made aware to the patient that we are students, and they have the right to refuse care from a student. They have the autonomy to make decisions regarding the care that they are given. In this clinical I had no patients that refused to get an IV by me but if they had requested that, I would have respected their decision. This is a perfect example for Digestive Health! AR

Week 10 (4c)- You have received an unsatisfactory for this competency due to not submitting your clinical evaluation tool by the due date/time (for week 10 this was 3/22/2024 at 0800). Be sure to properly address this unsatisfactory by following the directions at the beginning of this tool- for Week 11. AR I understand that last week I had turned in my clinical tool late. It was an accident because I did not have clinical last week and normally it is something I do right after the clinical experience. This week I believe I should earn a S because I have learned from this mistake and will make sure to go over all of my assignments and turn them in before the due date. Thank you! AR

4a – Week 11 – This week I had the scavenger hunt on 4C and I noticed a few things that were done incorrectly and should have been fixed. I noticed that a few of the IV bandages were not dated and initialed as well as a few IV lines that did not have a tubing sticker to identify when it needed to be changed. This could cause issues for the patient such as developing an infection or reaction from using tubing for an extended time. This could lead to further issues with the patient and hospital-acquired infections. Exactly!! Perfect examples! AR

4a – Week 12 – This week I noticed my nurse preceptor demonstrating beneficence. A hard-of-hearing older lady was being discharged and the nurse was going to wait for the family before giving discharge instructions. Once the family got there, they said they were going to wait in the lobby instead of coming up to the floor. The nurse didn't like the idea of only giving the patient the discharge instructions, so the nurse took the patient down and then proceeded to educate the patient and the family. The nurse did this for the greater good of the patient to make sure there was more than one person trying to understand the education. Great example, it is always a good idea to include at least one more set of ears. Patients can miss important details related to the anxiety of being in an unfamiliar place and the excitement of being discharged. (4c)- You are doing a great job presenting yourself in a professional manner through your attitude, commitment, and eagerness to learn. FBFB

4a – Week 13 – This week in clinical I had to do a few wound changes on patients and used the par room for obtaining supplies. When removing supplies with a white tag it is necessary to charge the patient for those supplies. A major issue that could result is if supplies are being removed from the room without being charged to a

patient and this will cause the hospital loss in money and materials. Great example, you also want to be fiscally responsible to the facility, payer of care, and patient by not bringing too many supplies into the room. FB

4a – Week 14 – This week in clinical I witnessed the principle of autonomy. When discharging a confused patient, the wife was his POA and decided for the patient to go back home. Even though the patient should have gone to the rehab floor and worked with therapy, we had to respect the patient's and family's wishes by sending him back home. Great example. Ultimately it is the patient's decision or the primary caregiver responsible for care. Educating on the benefits is important so they can make an informed decision is the only option. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Objective**

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

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

**Comments:**

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

Week 5-5(b) Allison, you do an excellent job working independently and taking initiative in completing nursing interventions for your patient. You are very organized and consistently well prepared. You took excellent care of your patient this week. 5(c,e) Great job this week during debriefing in which you were actively involved in the discussion of these competencies. BL

*End-of- Program Student Learning Outcomes

Week 6(5b): You do a great job seeking opportunities to learn this week. You are very engaged during clinical and always ask appropriate questions so that you understand. Keep up all your hard work! CB
Week 7(5b,c) Allison, you do an excellent job working independently and taking initiative in completing nursing interventions for your patient. Great job discussing actions you took to create a culture of safety for your patient in your CDG this week. CB

Week 12 (5a)- Reported on by assigned RN from clinical rotation 4/2/2024- Excellent in all areas. Student goals provided: "I would like to gain experience by getting to insert a foley catheter or an NG tube." Additional Preceptor comments: "Very enthusiastic to learn." BA/FB

Week 13 (5a)- Reported on by assigned RN during clinical rotation 4/9/2024–Excellent in all areas. Student goals: "I would like to insert an NG or foley catheter. I would like to perform more extensive wound care." Additional Preceptor comments: "Great job at multitasking, figuring out things on own than asking to make sure. Will be an amazing nurse." LC/FB Reported on by assigned RN during clinical rotation 4/10/2024- Excellent in all areas. Student goals: "I hope to insert a foley catheter or an NG tube. I hope to continue getting better with my time management." Additional preceptor comments: "Did amazing with 3 patients. She handled it like a champ especially with learning new things." LC/FB

Week 14 (5a)- Reported on by assigned RN during clinical rotation 4/16/2024. Excellent in all areas. Student goals: "Better my time management and stay on top of charting." No additional Preceptor comments." RM/FB Reported on by assigned RN during clinical rotation 4/17/2024 Excellent in all areas." No student goals provided, last patient management clinical. No additional Preceptor comments. RM/FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

**Objective**

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

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

**Comments:**

Week 2 (6f)- Satisfactory CDG posting related to your Special Procedures clinical experience. Keep up the good work! AR

Week 3 (6c,f)- Satisfactory discussion via CDG posting related to your Infusion Center clinical. Keep it up! AR

Week 4 (6f)- Satisfactory CDG postings related to your Quality/Core Measures observation and Cardiac Diagnostics clinical. Keep up the great work! AR

Week 5-6(d) Allison, great job giving an organized, thorough and accurate hand-off report during debriefing. You received 30/30 points. 6(e) Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and accurate. 6(f) Satisfactory completion of your CDG this week. Keep up the great work! BL

Week 6(6a,b,c,f): Great job this week collaborating with peers and bedside nurses to achieve optimal patient outcomes. Good job with your documentation this week, it was very thorough and completed on time. Your CDG was Satisfactory, meeting all requirements. CB

*End-of- Program Student Learning Outcomes

Week 7(6e,f): Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and accurate. Satisfactory completion of your CDG this week. Keep up the great work! CB
Week 11 (6c,f)- Satisfactory CDG postings related to your scavenger hunt and Patient Advocate/Discharge Planner clinicals. Keep it up! AR

Week 12 (6d,f)- Satisfactory completion of hand-off report with 30/30 points. Additional RN comments: "Very thorough." BA/FB Satisfactory discussion CDG posting related to this clinical experience. FB

Week 13 (6 f) Satisfactory CDG posting related to your patient management clinical experiences this week! Keep up the great work! FB

Week 14 (6f)- Satisfactory completion of CDG post. Good job with medication reconciliation and education plan for assigned patient. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

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

**Comments:**

Week 4 (7a)- Satisfactory discussion related to your Quality/Core Measures observational experience. AR

Week 5-7(d) Allison, you consistently demonstrate all the qualities of "ACE." Keep up all your hard work. You will be an excellent RN! BL

Week 6(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. CB

Week 7(7a,b) You researched and summarized an interesting EBP article in your CDG titled "Reducing Tubing and Device Misconnections." Excellent job! CB

Week 14 (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 of their lives. FB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Care Map Evaluation Tool**
AMSN
2024

| Date | Nursing Priority Problem | Evaluation & Instructor Initials | Remediation & Instructor Initials |
|---|---|---|---|
| 02/06/2024-02/07/2024 | Ineffective Tissue Perfusion | Satisfactory BL | NA |

**
AMSN students are required to submit one satisfactory care map (CDG) 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.

Comments:

*End-of- Program Student Learning Outcomes

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric
AMSN
2024

| | |
|---|---|
| **Student Name:** Allison Martin | **Course Objective:** Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. |
| **Date or Clinical Week:** 02/06/2024-02/07/2024 | |

| | 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 | Excellent job identifying all abnormal assessment findings, lab findings and diagnostic tests for your patient. You also did a great job identifying all risk factors relevant to your patient as well. |
| | 2. Identify all abnormal lab findings/diagnostic tests; include specific patient data. | **(lists at least 3*) *provides explanation if < 3** | | **(lists 3 but no specific patient data included)** | **(lists < 3 or gives no explanation)** | 3 | |
| | 3. Identify all risk factors relevant to the patient. | **(lists at least 5*) *provides explanation if < 5** | **(lists 4)** | **(lists 3)** | **(lists < 3 or gives no explanation)** | 3 | |
| **Interpreting** | 4. List all nursing priorities and highlight the top priority problem. | **> 75% complete** | **50-75% complete** | **< 50% complete** | **0% complete** | 3 | Great job listing nursing priorities for your patient, as well as identifying the top priority problem. It would have also been important to include risk for bleeding. You correctly highlighted all of the related/relevant data from the noticing boxes that support the top priority nursing problem. Nice job identifying potential complications for your top nursing priority problem. You could have considered including wound/ulcer as well. |
| | 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 | Great job with all of your nursing interventions. Some additional interventions that would be important to include would be to assess the patient's cardiovascular system (specifically the peripheral pulses and capillary refill) and integumentary system. |
| | 9. Interventions are prioritized | **> 75% complete** | **50-75% complete** | **< 50% complete** | **0% complete** | 3 | |
| | 10. All interventions include a frequency | **> 75% complete** | **50-75% complete** | **< 50% complete** | **0% complete** | 3 | |

*End-of- Program Student Learning Outcomes

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| | 11. All interventions are individualized and realistic | **> 75% complete** | **50-75% complete** | **< 50% complete** | **0% complete** | 3 | |
| | 12. An appropriate rationale is included for each intervention | **> 75% complete** | **50-75% complete** | **< 50% complete** | **0% complete** | 3 | |
| **Reflecting** | 13. List all of the highlighted reassessment findings for the top nursing priority. | **>75% complete** | **50-75% complete** | **<50% complete** | **0% complete** | 3 | Excellent job! |
| | 14. Evaluation includes one of the following statements:<br>• Continue plan of care<br>• Modify plan of care<br>• Terminate plan of care | **Complete** | | | **Not complete** | 3 | |

| | |
|---|---|
| Total Possible Points= 42 points<br>42-33 points = Satisfactory<br>32-21 points = Needs Improvement*<br>< 21 points = Unsatisfactory*<br>***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.**<br><br>**Faculty/Teaching Assistant Comments:** Satisfactory completion of your Nursing Care Map. Please review all my feedback above. Excellent job! BL | **Total Points:** 42/42<br><br>**Faculty/Teaching Assistant Initials:** BL |

*End-of- Program Student Learning Outcomes

Firelands Regional Medical Center School of Nursing
Skills Lab Evaluation Tool
AMSN
2024

*End-of- Program Student Learning Outcomes

| **Skills Lab Competency Evaluation**<br><br>Performance Codes:<br><br>**S**: Satisfactory<br><br>**U**: Unsatisfactory | **Lab Skills** | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | **Meditech Document** (1,2,3,4,5,6)* | **Physician Orders/SBAR** (1,2,3,4,5,6)* | **Prioritization/ Delegation** (1,2,3,4,5,6)* | **Resuscitation** (1,3,6,7)* | **IV Start** (1,3,4,6)* | **Blood Admin./IV Pumps** (1,2,3,4,5,6)* | **Central Line/Blood Draw/Ports** (1,2,3,4,6)* | **Head to Toe Assessment** (1,2,6)* | **ECG/Hand-off report/CT** (1,6)* | **ECG Measurements** (1.2.4.5.6)* |
| | **Date: 1/9/2024** | **Date: 1/9/2024** | **Date: 1/9/2024** | **Date: 1/9/2024** | **Date: 1/11/2024** | **Date: 1/11/2024** | **Date: 1/12/2024** | **Date: 1/12/2024** | **Date: 1/12/2024** | **Date: 1/12/2024** |
| 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 Documentation:** 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/SBAR:** Satisfactory completion of physician's order lab per the SBAR skills competency rubric: phone call to physician with SBAR report, receiving and reading back multiple physician orders, and hand-off report given to the next student in rotation. Discussion of the treatment, medications, and plan of care for a patient experiencing NSTEMI and STEMI. 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 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 Start:** Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. FB/BL/CB/BS

**Blood Admin/IV Pumps:** 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 Change:** Satisfactory central line dressing change participation providing proper technique guidelines, maintenance of central line ports, and line flushing. FB

**Ports/Blood Draw:** You were satisfactory in accessing and de-accessing an infusaport device, demonstrated proper technique on how to draw blood from a CVAD, and properly labeled a blood tube per hospital policy. Great job! CB

**Head to Toe Assessment:** Satisfactory completion of the Head to Toe Assessment. Great job! LB/BS

**ECG/Telemetry Placements/Hand-off report/CT:** Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches and leads; satisfactory participation in review of Chest Tube/Atrium tutorial; satisfactory completion of handoff report activity. BL/BS

*End-of- Program Student Learning Outcomes

Pathophysiology Grading Rubric
Firelands Regional Medical Center School of Nursing
Advanced Medical Surgical Nursing
2024

**Student Name:** **Allison Martin** **Clinical Date:** **2/13-14/2024**

| | |
|---|---|
| **1. Provide a description of your patient including current diagnosis and past medical history. (4 points total)**<br>• Current Diagnosis (2)-2<br>• Past Medical History (2)-2 | **Total Points:4**<br>**Comments:** Great job discussing your patient's current diagnosis and past medical history. |
| **2. Describe the pathophysiology of your patient's current diagnosis. (6 points total)**<br>• Pathophysiology-what is happening in the body at the cellular level (6)-6 | **Total Points:6**<br>**Comments:** Excellent job! Pathophysiology is detailed and accurate for your patient's current diagnosis. |
| **3. Correlate the patient's current diagnosis with presenting signs and symptoms. (6 points total)**<br>• All patient's signs and symptoms included (2)-2<br>• Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (2)-2<br>• Explanation of how all patient's signs and symptoms correlate with current diagnosis. (2)-2 | **Total Points:6**<br>**Comments:** All patient's signs and symptoms included with detailed explanation of correlation to current diagnosis. Great job discussing the signs and symptoms that are typically expected with a patient who is diagnosed with this disease. |
| **4. Correlate the patient's current diagnosis with all related labs. (12 points total)**<br>• All patient's relevant lab result values included (3)-3<br>• Rationale provided for each lab test performed (3)-3<br>• Explanation provided of what a normal lab result should be in the absence of current diagnosis (3)-3<br>• Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (3)-3 | **Total Points:12**<br>**Comments:** Excellent job, Allison! All relevant labs were included with rationales. Normal lab values were included and an explanation of how each lab correlates to the patient's diagnosis. |
| **5. Correlate the patient's current diagnosis with all related diagnostic tests. (12 points total)**<br>• All patient's relevant diagnostic tests and results included (3)-3<br>• Rationale provided for each diagnostic test performed (3)-3<br>• Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (3)-3<br>• Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis<br>• (3)-3 | **Total Points:12**<br>**Comments:** Excellent job! All relevant diagnostic test were included with rationales. Normal findings were included and an explanation of how each test correlates to the patient's diagnosis. |
| **6. Correlate the patient's current diagnosis with all related** | **Total Points:9** |

*End-of- Program Student Learning Outcomes

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|---|---|
| **medications. (9 points total)**<br>• All related medications included (3)-3<br>• Rationale provided for the use of each medication (3)-3<br>• Explanation of how each of the patient's relevant medications correlate with current diagnosis (3)-3 | **Comments:** Great job including all medications, all information is detailed and accurate. |
| **7. Correlate the patient's current diagnosis with all pertinent past medical history. (4 points total)**<br>• All pertinent past medical history included (2)-2<br>• Explanation of how patient's pertinent past medical history correlates with current diagnosis (2)-2 | **Total Points:4**<br>**Comments:** Great job correlating the patient's past medical history with current diagnosis. |
| **8. Prioritize nursing interventions related to current diagnosis. (6 points total)**<br>• All nursing interventions provided for patient prioritized and rationales provided (6)-5 | **Total Points:5**<br>**Comments:** Pertinent nursing interventions are prioritized and you provided detailed rationales. My only suggestion is that also include assessing the ET and OG tube, gastric residual, assess labs and abg's, and also dressing change q3d(mepilex). |
| **9. Discuss the role of interdisciplinary team members in the care of the patient. (6 points total)**<br>• Identifies all interdisciplinary team members currently involved in the care of the patient (2)-2<br>• Explains how each current interdisciplinary team member contributes to positive patient outcomes (2)-2<br>• Identifies additional interdisciplinary team members (not involved currently) that should be included in the care of the patient to ensure positive patient outcomes (2)-2 | **Total Points:6**<br>**Comments:** Great job identifying additional interdisciplinary team members that should be included to ensure positive outcomes for your patient. |
| Total possible points = 65<br>51-65 = Satisfactory<br>33-50 = Needs improvement<br><32 = Unsatisfactory<br><br>**Course 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)*<br><br>**Clinical Competency:** 2(a.) Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. (Noticing, Interpreting, Responding)<br><br>*End-of-Program Student Learning Outcomes | **Total Points: 64/65**<br>**Comments:** Excellent job, Allison! Your pathophysiology was very detailed, thorough and well done. Keep up all your hard work! CB |

*End-of- Program Student Learning Outcomes

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

| **vSim Evaluation**<br><br>Performance Codes:<br><br>**S**: Satisfactory<br><br>**U**: Unsatisfactory | **Rachael Heidebrink (Pharmacology) (1, 2, 6, 7)*** | **Week 8: Dysrhythmia Simulation** (see rubric) | **Junetta Cooper (Pharmacology) (1, 2, 6, 7)*** | **Mary Richards (Pharmacology) (1, 2, 6, 7)*** | **Lloyd Bennett (Medical-Surgical) (1, 2, 6, 7)*** | **Kenneth Bronson (Medical-Surgical) (1, 2, 6, 7)*** | **Carl Shapiro (Pharmacology) (1, 2, 6, 7)*** | **Comprehensive Simulation** (see rubric) |
|---|---|---|---|---|---|---|---|---|
| | **Date:** 2/16/2024 | **Date:** 2/26-27/2024 | **Date:** 3/1/2024 | **Date:** 3/15/2024 | **Date:** 3/22/2024 | **Date:** 3/28/2024 | **Date:** 4/19/2024 | **Date:** 4/19/2024 |
| Evaluation | S | S | S | U | S | S | S | S |
| Faculty Initials | CB | CB | CB | AR | AR | AR | FB | FB |
| **Remediation: Date/Evaluation/ Initials** | NA | NA | NA | S 3/16/2024 AR | NA | NA | NA | NA |

* Course Objectives

3/15/2024: Initially unsatisfactory due to not completing assignment per syllabus guidelines. Completed on 3/16/2024 at a satisfactory level. AR

*End-of- Program Student Learning Outcomes

# Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME(S): Sela Berry, Allison Martin, Tabitha Thom
GROUP #: 8
SCENARIO: Week 8 Simulation
**OBSERVATION DATE/TIME(S): 2/27/2024 1430-1630**

| CLINICAL JUDGMENT COMPONENTS | | | | | OBSERVATION NOTES |
|---|---|---|---|---|---|
| **NOTICING: (1,2)*** | | | | | Notices patient's heart rate is decreased. Notices patient's SpO2 is decreased. Notices patient's heart rhythm change after Atropine is administered. Recognizes patient's metoprolol could be the cause of decreased heart rate.<br><br>Notices patient's heart rate is increased and irregular. Notices patient is dizzy after diltiazem is administered and blood pressure is decreased. Notices patient's heart rhythm does not change after diltiazem is administered. Notices patient has gone into fluid overload after administration of fluid bolus.<br><br>Notices patient is unresponsive and pulseless. |
| • Focused Observation: | **E** | A | D | B | |
| • Recognizing Deviations from Expected Patterns: | E | **A** | D | B | |
| • Information Seeking: | E | **A** | D | B | |
| **INTERPRETING: (1,2)*** | | | | | Prioritizes performing a full head to toe assessment rather than a focused cardiovascular assessment. Interprets patient's heart rhythm as sinus bradycardia. Recognizes the need for medication to treat patient's decreased heart rate. Interprets patient's heart rhythm change as second-degree type II heart block. Interprets the second heart rhythm change as a third-degree heart block. Recognizes the need for a transcutaneous pacemaker.<br><br>Interprets patient's heart rhythm as atrial fibrillation. Interprets the need for medication to decrease the patient's heart rate. Interprets accurate dose of diltiazem. Recognizes the need for fluids to increase patient's blood pressure. Interprets patient's lung sounds as crackles.<br><br>Interprets patient's heart rhythm as ventricular tachycardia. Interprets correct medications for treatment. Interprets patient's low potassium as a potential cause for cardiac arrest. |
| • Prioritizing Data: | E | **A** | D | B | |
| • Making Sense of Data: | **E** | A | D | B | |
| **RESPONDING: (1,2,3,5,6,7)*** | | | | | Introduces self. Obtains vital signs and places patient on the monitor. Performs head to toe assessment. Identifies patient. Calls physician and provides SBAR. Recommends Atropine to increase heart rate. Places patient on 2L of oxygen via nasal cannula. Verifies patient's allergies and administers Atropine 1 mg IVP. Increases oxygen to 3L via nasal cannula. Reassesses patient and obtains vital signs. Calls physician and provides update. Recommends epinephrine 1mg IVP to treat decreased heart rate rather than an epinephrine gtt. Recommends a dopamine gtt and transcutaneous pacing. |
| • Calm, Confident Manner: | **E** | A | D | B | |
| • Clear Communication: | **E** | A | D | B | |
| • Well-Planned Intervention/ Flexibility: | **E** | A | D | B | |
| • Being Skillful: | | E | **A** | D | |
| B | | | | | |

*End-of- Program Student Learning Outcomes

| | |
|---|---|
| | Introduces self and identifies patient. Obtains vital signs and places patient on the monitor. Places patient on 2L of oxygen via nasal cannula. Calls physician and provides SBAR. Recommends a beta blocker (sotalol), calcium channel blocker (diltiazem) and amiodarone for treatment. Communicates well and educates the patient. Administers diltiazem. Reassesses patient and obtains vital signs. Calls physician and provides update. Initially recommends Atropine to increase the blood pressure, then recommends a fluid bolus. Administers fluid bolus. Reassesses patient. Stops fluid bolus. Calls physician and provides update. Recommends cardioversion.<br><br>Introduces self and attempts to identify patient. Checks pulse. Places fast patches on patient. Begins CPR and bagging. Calls physician, then a code blue. Defibrillates patient. Administers epinephrine 1 mg IVP. Recommends amiodarone (300 mg, 150 mg). |
| **REFLECTING: (1,2,5)***<br>• Evaluation/Self-Analysis: **E** A D B<br>• Commitment to Improvement: **E** A D B | Discussed first scenario, identification and treatments for symptomatic bradycardias. Reviewed chart to look for causes of heart block (metoprolol, patient history). Talked about holding medication to see if sinus rhythm will be restored. Alternate drugs for complete heart block discussed (epi, dopamine). Discussed pacing options for symptomatic bradycardias (transcutaneous, transvenous, permanent). Talked about the importance of adjusting electrical current to obtain capture, need for medication). Excellent teamwork!<br><br>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.<br><br>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! |
| **SUMMARY COMMENTS: * = Course Objectives**<br><br>**Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.**<br><br>**E= Exemplary**<br><br>**A= Accomplished**<br><br>**D= Developing**<br><br>**B= Beginning** | Lasater Clinical Judgement Rubric Comments:<br><br>Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads.<br><br>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and |

*End-of- Program Student Learning Outcomes

| | |
|---|---|
| **Scenario Objectives:**<br>• **Differentiate the clinical characteristics and ECG patterns of common dysrhythmias. (1,2)***<br>• **Choose nursing interventions for patients who are experiencing dysrhythmias. (1)***<br>• **Differentiate between defibrillation and cardioversion. (1,2,6)***<br>• **Communicates collaboratively to other healthcare providers utilizing SBAR. (3,5,6,7)*** | make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.<br><br>Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.<br><br>Reflecting: Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Demonstrates commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses.<br><br>Satisfactory completion of the simulation scenario. Great job! |

## Lasater Clinical Judgment Rubric Scoring Sheet

*End-of- Program Student Learning Outcomes

STUDENT NAME(S): Allison Martin
GROUP #: 2
SCENARIO: Comprehensive Simulation
OBSERVATION DATE/TIME(S): 4/19/2024

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

*End-of- Program Student Learning Outcomes

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| • Making Sense of Data: | E | A | D | B | Inferior wall MI), and lab values (Troponin) in ER.<br><br>ECG interpreted correctly. Recognized the need to continually interpret vital signs, heart rhythm, and pain throughout the case.<br><br>Interpreted the areas affected by an inferior wall MI and artery responsible for this particular MI.<br>Excellent job prioritizing appropriate data to include in communication using the SBAR format.<br><br>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.<br><br>Interpreted current diagnosis and past medical history and determined the need for education on current and past health issues as well as lifestyle modifications. |
| **RESPONDING: (1,5,6)***<br>• Calm, Confident Manner:<br>• Clear Communication:<br>• Well-Planned Intervention/ Flexibility:<br>• Being Skillful:<br>B | <br>E<br>E<br>E | <br>A<br>A<br>A<br>E | <br>D<br>D<br>D<br>A | <br>B<br>B<br>B<br>D | 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.<br><br>Provided patient education related to lifestyle modifications including medication compliance and smoking cessation.<br><br>Demonstrated clear communication providing the necessary components to include during-hand-off report for transition of care utilizing SBAR.<br>Applied appropriate interventions based on assessment findings in all departments.<br>Active engagement throughout scenario.<br>Provided accurate and pertinent information when phoning healthcare provider; accurately read orders back to verify.<br>Provided appropriate communication and conflict management responses to healthcare provider and team members.<br>Provided accurate and pertinent information in the development of a Satisfactory care map. |

*End-of- Program Student Learning Outcomes

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| **REFLECTING: (4,6)***<br>• Evaluation/Self-Analysis: E A D B<br>• Commitment to Improvement: E A D B | Able to identify new knowledge obtained through the simulation and how to apply to future patient care scenarios.<br>Acknowledged the importance of customizing teaching to accommodate patient lifestyle.<br>Asked appropriate questions to gain understanding of information provided.<br>Identified areas of improvement to foster clear and concise communication using SBAR. Reflected on ways to resolve conflict in appropriate manner. |
| **SUMMARY COMMENTS: * = Course Objectives**<br>**Satisfactory completion of the simulation scenario is a score of "Developing" or higher in all areas of the rubric.**<br>**E= Exemplary**<br>**A= Accomplished**<br>**D= Developing**<br>**B= Beginning**<br><br>**Scenario Objectives:**<br>• **Assessment of ACS/STEMI, HF, and Atrial Fibrillation from admission to discharge. (1,6)***<br>• **Initiate treatment protocols for ACS/STEMI, HF, and Atrial Fibrillation. (1,6)***<br>• **Collaborate and communicate with interdisciplinary health care providers while transitioning from admission to discharge. (1,2,6)***<br>• **Summarize the nursing implications for medications and treatments utilized in the care of patients with ACS/STEMI, HF, and Atrial Fibrillation and develop plan of care. (1,2,3,5,6,7)***<br>• **Demonstrate ability to resolve conflict among interdisciplinary healthcare team members. (6,7)***<br>***Course Objectives** | Lasater Clinical Judgement Rubric Comments:<br>**Noticing**: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. Actively seeks subjective information about the patient's situation from the patient to support planning interventions; occasionally does not pursue important leads.<br>**Interpreting**: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.<br>**Responding**: Assumes responsibility; delegates team assignments; assesses patients and reassures them. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response. Displays proficiency in the use of most nursing skills; could improve speed or accuracy.<br>**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. |

*End-of- Program Student Learning Outcomes

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| | Overall excellent performance during the comprehensive simulation on a patient experiencing an inferior myocardial infarction. Total care from ED to Catherization lab to ICU and discharge education was completed satisfactorily. |



*End-of- Program Student Learning Outcomes

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

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

Student eSignature & Date:

ar 12/13/2023

*End-of- Program Student Learning Outcomes