EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2024

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Andrea Pulizzi

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: **Kelly Ammanniti, MSN, RN, CHSE; Monica Dunbar DNP, RN; CNE; Rachel Haynes MSN, RN, Brian Seitz, MSN, RN**

Faculty eSignature:

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

METHODS OF EVALUATION:
Care Maps
Patient/Family Education
Preparedness for Clinical/Clinical Performance
Online Clinical Discussion Groups
Administration of Medications
Nursing Skills Completion of Clinical Performance Tool
Written Reports of Clinical Experiences
Documentation
Conferences with the Faculty
Lasater Clinical Judgment Rubric
vSim
Simulation Scenarios

7/18/24 KA

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)
8/23/24	1	Lab Survey not complete	8/23/24

Faculty's Name	Initials
Kelly Ammanniti	KA
Monica Dunbar	MD
Rachel Haynes	RH
Brian Seitz	BS

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

SATISFACTORY CARE MAPS		
Date	**Priority Nursing Problem/Diagnosis**	**Faculty's Initials**

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
Competencies: a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		N/A	N/A	S	S													
b. Provide care using developmentally appropriate communication.		N/A	N/A	S	S													
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		N/A	N/A	S	S													
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		N/A	N/A	N/A	S													
e. Identify stage of growth and development (**Erikson's Stages**)(**List Below and explain reason for choice)***		N/A	N/A	S	S													
Clinical Location Age of patient		N/A	N/A	Lactation	Firelands OB: 1 day													
		RH	RH	RH														

Comments:

Week 4: 1e.) Trust vs mistrust. During lactation consoling, mothers are learning proper techniques to make breastfeeding easy and effective for both themselves and baby. Baby is relying on mother for nourishment and begins to build trust with mother. Good job. RH

Week 4: 1a, c: you did a good job describing the care techniques you and the lactation consultant used while caring for your patient in your CDG. You also provided information about how to assess baby latching and having a good suck and swallow for feeding. RH

***End-of-Program Student Learning Outcomes**

Week 5: 1e.) Trust vs mistrust. For a one day old infant, they are developing trust for their caregivers. This trust is established through feeds when infant is hungry, cleaning them when they soil a diaper, and keeping them warm and dry.

***End-of-Program Student Learning Outcomes**

Objective

1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*

Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
Competencies: f. Describe psychological changes in response to the expectant mother's pregnancy. **Maternal**		N/A	N/A	N/A	N/A													
g. Discuss prenatal influences on the pregnancy. **Maternal**		N/A	N/A	N/A	S													
h. Identify the stage and progression of a woman in labor. **Maternal**		N/A	N/A	N/A	N/A													
i. Discuss family bonding and phases of the puerperium. **Maternal**		N/A	N/A	N/A	S													
j. Identify various resources available for children and the childbearing family.		N/A	N/A	N/A	S													
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		N/A	N/A	S	S													
l. Respect the centrality of the patient/family as core members of the health team.		N/A	N/A	S	S													
		RH	RH	RH														

Comments:

Week 4: 1j- did you provide any resources for the family (mother, baby, siblings, etc) during your visit? If so, this should be changed to "S" but if not it can remain "N/A"
RH

***End-of-Program Student Learning Outcomes**

Objective																		
2. Integrate principles of decision-making in utilizing evidenced-based practice in the nursing process in providing care for the childbearing family and children encompassing cultural sensitivity and diversity. (1,2,3,4,5)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Engage in discussions of evidenced-based nursing practice.		N/A	N/A	S	S													
b. Perform nursing measures safely using Standard precautions.		N/A	N/A	S	S													
c. Perform nursing care in an organized manner recognizing the need for assistance.		N/A	N/A	S	S													
d. Practice/observe safe medication administration.		N/A	N/A	N/A	S													
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		N/A	N/A	N/A	S													
f. Utilize information obtained from patients/families as a basis for decision-making.		N/A	N/A	S	S													
g. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting) **(List Below)***		N/A	N/A	S	S													
		RH	RH	RH														

Comments:
Week 4: 2g.) A couple returned with their 4 day old daughter for a follow up lactation visit. At the end of the appointment, the lactation consultant encouraged them to schedule another follow up next week. The mother expressed concern regarding leaving the house next week as it is supposed to be hot outside, and they do not have a working AC unit in either of their cars; she felt uncomfortable traveling from Norwalk to Sandusky with her new baby in a hot car. It was decided that she would call next week with an update about breastfeeding and schedule an appointment at that time. Great job identifying this SDOH. I am impressed the mother thought of this and was willing to voice her concern and come up with an alternate plan that would still benefit them. RH

***End-of-Program Student Learning Outcomes**

Week 5: 2g.) The mother for my newborn patient this week was asked if she would be ok with having a student. While she was ok with having a student care for her she expressed that she did not want the student to palpate her fundus; while this can be disappointing to us as students, we need to be understanding that she may have personal reasons as to why. This was her third childbirth and she had 2 miscarriages in her past. It is not our place as nurses to expect an explaination or understand why, but to accept a patient's choices.

***End-of-Program Student Learning Outcomes**

Objective																		
3. Summarize the legal, moral and ethical issues related to care of children and the childbearing family. (2,6,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Act with integrity, consistency, and respect for differing views.		N/A	N/A	S	S													
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		N/A	N/A	S	S													
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		N/A	N/A	S	S													
d. Critique examples of legal or ethical issues observed in the clinical setting. **(List Below)***		N/A	N/A	S	S													
		RH	RH	RH														

Comments:

Week 4: 3d.) A mother who had returned for a lactation follow up wanted the lactation consultant to look at her c-section incision as she had some concerns. The lactation consulted did express that she was unsure if she should look at it and should tell the mother to follow up with her doctor instead. She did, however, look at the incision and found it to be healing well. In situations like these, were nurses find themselves in a sticky position as they are unable to diagnose, I believe it does not hurt to assess a patient's concern. Though we can't diagnose, nurses can steer patients in the right direction, to easy their concerns or suggest that they seek further medical attention. This could become a legal issue if the nurses says it looks okay and the patient does not seek further medical attention for their concerns. This could lead to worsening infection or a wound that may not be healing properly. The patient could say the nurse said it looked fine so they did not do anything about it, which could cause delayed care. RH

Week 5: 3d.) One of my classmates had a newborn patient that tested positive for cocaine and THC. The nurses caring for this patient were going to have to call CPS regarding this. I feel that this situation is both a legal and ethical issue. There is the obvious legal implications that could arise for mother, and I could see a potential ethical dilemma regarding the care for the mother. If I was her nurse, I would be upset to know that she exposed her newborn to those substances and the newborn had to suffer after the birth. The mother is still a patient herself, however, and she deserves quality and nonjudgemental care.

***End-of-Program Student Learning Outcomes**

***End-of-Program Student Learning Outcomes**

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Develop and implement a priority care map and/or plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		N/A	N/A	N/A	S													
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		N/A	N/A	N/A	S													
c. Summarize witnessed examples of patient/family advocacy.		N/A	N/A	S	S													
d. Provide patient centered and developmentally appropriate teaching.		N/A	N/A	S	S													
e. Analyze the involved pathophysiology of the patient's disease process. **(noticing, interpreting, responding)**		N/A	N/A	N/A	S													
		RH	RH	RH														

Week 4: 4d- you described in detail the different ways to teach a mom how to have a better latch for breastfeeding, great use of resources. RH

***End-of-Program Student Learning Outcomes**

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. State the goal for the top nursing priority.	**Complete**			**Not complete**		
	6. 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**		
	7. Identify all potential complications for the top nursing priority problem.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**		
	8. Identify signs and symptoms to monitor for each complication.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**		
Responding	9. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	10. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	11. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	12. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		

***End-of-Program Student Learning Outcomes**

	Criteria	3	2	1	0	Points Earned	Comments
	13. An appropriate rationale is included for each intervention	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**		
	15. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**		

Reference

An in-text citation and reference are required.
The care map will be graded "needs improvement" if missing either the in-text citation or reference, but not both.
The care map will be graded "unsatisfactory" if both in-text citation and reference are not included.

Total Possible Points= 45 points
45-35 points = Satisfactory
34-23 points = Needs Improvement*
< 23 points = Unsatisfactory*
***Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

*****Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. *****

Faculty/Teaching Assistant Comments:

Total Points:

Faculty/Teaching Assistant Initials:

***End-of-Program Student Learning Outcomes**

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
f. Correlate the diagnostic tests with the patient's disease process. **(noticing, interpreting, responding)**		N/A	N/A	N/A	S													
g. Correlate the pharmacotherapy in relation to the patient's disease process. **(noticing, interpreting, responding)**		N/A	N/A	N/A	S													
h. Correlate the medical treatment in relation to the patient's disease process. **(noticing, interpreting, responding)**		N/A	N/A	N/A	S													
i. Correlate the nutritional needs/diet in relation to the patient's disease process. **(noticing, interpreting, responding)**		N/A	N/A	N/A	S													
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. **(noticing, interpreting, responding)**		N/A	N/A	N/A	S													
		RH	RH	RH														

Comments:

***End-of-Program Student Learning Outcomes**

Objective																		
5. Collaborating professionally with members of the health care team, childbearing and child-rearing families, faculty, and peers through written, verbal and nonverbal methods, and by conferencing, networking, and posting through computer technology. (1,3,5,6,7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Demonstrate interest and enthusiasm in clinical activities.		N/A	N/A	S	S													
b. Evaluate own participation in clinical activities.		N/A	N/A	S	S													
c. Communicate professionally and collaboratively with members of the healthcare team.		N/A	N/A	S	S													
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		N/A	N/A	N/A	S													
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		N/A	N/A	N/A	S													
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		N/A	N/A	N/A	S													
g. Consistently and appropriately post comments in clinical discussion groups.		N/A	N/A	~~S~~ NI	S													
		RH	RH	RH														

Comments:

Week 4: 5g- I changed this to "NI" because though you provided a reference, you did not provide an intext citation and per the grading rubric, this bumps you to an NI. In the future, be sure to have both a reference and an intext citation. RH This was an error, I'm sure, from me rushing to finish the assignment. I need to proofread my discussion posts before I submit them to catch errors like this in the future.

Week 4: 5a- lactation comment- marked excellent in all areas. Rebecca Smith RN, CLC

***End-of-Program Student Learning Outcomes**

***End-of-Program Student Learning Outcomes**

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	**Final**
	8/23	8/30	9/6	9/13	9/20	9/27	10/4		10/11	10/18	10/25	11/1	11/8	11/15	11/22	11/29		
a. Recognize areas for improvement and goals to meet these needs. **(List Below)***		N/A	N/A	S	S													
b. Accept responsibility for decisions and actions.		N/A	N/A	S	S													
c. Demonstrate evidence of growth and self-confidence.		N/A	N/A	S	S													
d. Demonstrate evidence of research in being prepared for clinical.		N/A	N/A	S	S													
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		N/A	N/A	S	S													
f. Describe initiatives in seeking out new learning experiences.		N/A	N/A	S	S													
g. Demonstrate ability to organize time effectively.		N/A	N/A	S	S													
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		N/A	N/A	S	S													
i. Demonstrates growth in clinical judgment.		N/A	N/A	S	S													
		RH	RH	RH														

Comments:
Week 4: 6a.) Before seeing patients together, the lactation consultant asked if I had any questions about breastfeeding; I did not have any specific questions, so she gave me a general run down about it. While I did research in our book about breastfeeding so I had an idea about it before the clinical, I wish I had come with a few questions so we could better engage in a conversation about breastfeeding. In the future, I will prepare 2-3 questions to ask. This will allow the other person to know that I did some previous research and I am interested in the topic. This is a great goal to have! RH

***End-of-Program Student Learning Outcomes**

Week 5: 6a.) After giving my patient her hep B vaccine, I tossed the syringe in the sharps container not knowing that I needed the sticker off of it. I needed the sticker for the paper documentation of the vaccine. I luckily was able to grab the syringe before it fell into the container. Going forward, I will not assume what is the next step and wait for my instructor to provide me with the next step. As students, we may begin to feel confident with procedures, however, we need to remember that processes may be different depending on what floor we are on.

***End-of-Program Student Learning Outcomes**

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

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**														
	Adult Head to Toe Assessment (*1, 2, 5, 6)	Breastfeeding and Bottle Feeding	Breast Assessment (*1, 2, 3, 4, 5, 6)	Circumcision Care (* 1,2,6)	Broselow Tape (*1,2,3,5)	Leopold's (*1, 2, 3, 5, 6)	APGAR (*2, 3, 4, 5, 6)	Breast Self-Exam (*1, 4, 5, 6)	Pediatric Vital Signs (*1,4,5)	Pediatric Lab Values (*1,4,5)	C-Section Care (*1, 2, 5, 6)	Health Literacy (*2,5,6)	Safety (*1,2,3,5,6)	Postpartum Assessment (* 1, 2, 6)	Newborn Bath and Cord Care (*2, 4)
	Date: 8/20	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**
Evaluation	S	U	U	U	U	U	U	U	U	U	U	U	U	U	U
Faculty Initials	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH
Remediation: Date/Evaluation/Initials		S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23

* Course Objectives

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**									
	Fundus Assessment (*1, 2, 5, 6)	Lochia Assessment (*1, 2, 4)	Pain Assessment (*1, 2, 5, 6)	Newborn Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (* 1, 2, 6)	Pregnancy History (*1, 2, 3, 4, 5, 6)	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	EDD (*1, 2, 3, 4, 5, 6)	Meditech (* 1,2,3, 5, 6)	Amazing Race (*1, 2, 3, 4, 5, 6)
	Date: 8/21	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/21**	**Date: 8/22**	**Date: 10/21**
Evaluation	U	U	U	U	U	U	U	U	U	
Faculty Initials	RH	RH	RH	RH	RH	RH	RH	RH	RH	
Remediation: Date/Evaluation/Initials	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	S RH 8/23	

* Course Objectives

Comments:

Firelands Regional Medical Center School of Nursing

Maternal Child Nursing 2024
Simulation Evaluations

Simulation Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Simulation**												
	Pregnancy and PP Simulation (*1. 2. 3. 5. 6)	vSim Maternity Case 1 (*1, 2, 3, 5, 6)	Shoulder Dystocia and Newborn Care (*1, 2, 3, 5, 6)	vSim Maternity Case 4 (*1, 2, 3, 5, 6)	Patient Care Safety Escape Room (*1, 2, 3, 5, 6)	Pediatric Respiratory Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 5 (*1, 2, 3, 5. 6)	Pediatric GI Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 1 (*1, 2, 3, 5, 6)	Student Developed Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 4 (*1, 2, 3, 5, 6)	Comprehensive Simulation (*1, 2, 3, 5, 6)	Empathy Simulation (*1, 2, 3, 5, 6)
	Date: 9/12 & 9/19	**Date: 9/23**	**Date: 9/26 & 10/3**	**Date: 10/7**	**Date: 10/17 & 10//18**	**Date: 10/24 & 10/31**	**Date: 11/4**	**Date: 11/5 & 11/6**	**Date: 11/15**	**Date: 11/19**	**Date: 11/22**	**Date: 11/22**	**Date:**
Evaluation													
Faculty Initials													
Remediation: Date/Evaluation/Initials													

* Course Objectives

Comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child 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 & Date: _____