

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 2024

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Yasmin Perez

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: Frances Brennan, MSN, RN; Amy Rockwell, MSN, RN;
Chandra Barnes, MSN, RN; Nick Simonovich, MSN, RN
Heather Schwerer, MSN, RN; Brittany Lombardi, MSN, RN, CNE

Faculty eSignature:

Teaching Assistant: Stacia Atkins, BSN, RN

DIRECTIONS FOR USE:

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

Skills Lab Checklists	Faculty Feedback
Care Map Grading Rubric	Documentation
Administration of Medications	Clinical Reflection
Simulation Scenarios	
Skills Demonstration	
Evaluation of Clinical Performance Tool	
Clinical Discussion Group Grading Rubric	
Lasater Clinical Judgment Rubric	

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
Faculty's Name			Initials
Chandra Barnes			CB
Frances Brennan			FB
Amy Rockwell			AR
Nicholas Simonovich			NS
Heather Schwerer			HS
Brittany Lombardi			BL

Stacia Atkins	SA
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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. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. (2,4,6)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Identify spiritual needs of patient (Noticing).									NA	N/A	N/A					
b. Identify cultural factors that influence healthcare (Noticing).									NA	N/A	N/A					
c. Coordinate care based on respect for patient's preferences, values, and needs (Responding).						n/a	n/a	S	S	S	S					
d. Use Maslow's Hierarchy of needs to determine the care needs of the assigned patient (Interpreting).						n/a	n/a	S	S	S	S					
Clinical Location: Patient age**						CB	CB	SA	SA	NS						
						NA	NA	3T 67 year old male	NA	4N 86 year old male	4N 86 year old F					

Comments

****Document your clinical location and patient age in the designated box above.**

Week 8 (1c,d) Great job showing respect for your patient's needs, being compassionate and kind while delivering care. You also demonstrated the appropriate use of Maslow's hierarchy of needs during the head to toe assessment performed on your patient during this clinical experience, being you able to recognize physiological needs of your patient when performing head to toe assessment. SA

Week 9 1(c,d) – You did well this week to coordinate your care appropriately based on your patient's preferences and needs. You used Maslow's to appropriately prioritize your care, promoting safety in the post-operative period following hip replacement surgery. NS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																
1. Summarize knowledge of anatomy, physiology, chemistry, nutrition, psychosocial and developmental principles in performance of basic physical assessment through use of clinical judgment skills. (3,4, 5)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Perform head to toe assessment utilizing techniques of inspection, palpation and auscultation (Responding).						n/a	n/a	S	S	S	S					
b. Use correct technique for vital sign measurement (Responding).						n/a	n/a	S	S	S	S					
c. Conduct a fall/safety assessment and institute appropriate precautions (Responding).						n/a	n/a	n/a	NA	S	S					
d. Conduct a skin risk assessment and institute appropriate precautions (Responding).									NA	n/a S	S					
e. Collect the nutritional data of assigned patient (Noticing).									NA	S	S					
f. Demonstrates appropriate insertion, maintenance, and/or removal of NG tube (Responding).									NA	n/a	N/A					
g. Describe the findings and the rationale for diagnostic studies with the nursing implications for assigned patient (Interpreting).									NA	S	S					
						CB	CB	SA	SA	NS						

Comments

Week 8 (2a,b): Yasmin, you performed a systematic head to toe assessment and retrieved all vital signs within a timely manner. SA

Week 9 2(a) – Nice job with your assessment this week, noticing numerous deviations from normal in addition to normal assessment findings. Notably, you identified abnormal musculoskeletal findings including an unsteady gait, limited movement, and muscle weakness as a result of his recent hip replacement surgery. You noticed the use of a walker for ambulation assistance. You also noticed abnormal findings to the integumentary system, including a hip incision with healthy appearing surrounding skin, dryness to the lower extremities with rough skin, and the presence of a wound vac to the incision site. Good work! NS

Week 9 2(d) – this competency was changed to “S” because you were able to perform an assessment of the wound vac to the right hip and the skin surrounding the dressing. NS

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

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																
2. Select communication techniques and appropriate boundaries with patients, families, and health care team members. (1,2,3,4,6,7)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:						n/a	n/a	S	S	S	S					
a. Receive report at beginning of shift from assigned nurse (Noticing).						n/a	n/a	S	S	S	S					
b. Hand off (report) pertinent, current information to the next provider of care (Responding).						n/a	n/a	n/a	NA	S	S					
c. Use appropriate medical terminology in verbal and written communication (Responding).						n/a	n/a	s	S	S	S					
d. Report promptly and accurately any change in the status of the patient (Responding).						n/a	n/a	n/a	NA	S	S					
e. Communicate effectively with patients and families (Responding).						n/a	n/a	S	S	S	S					
f. Participate as an accountable health care team member in the provision of patient centered care (Responding).						n/a	n/a	S	S	S	S					
						CB	CB	SA	SA	NS						

Comments

Week 8 (3a,c,d,e): Great job receiving hand off report on your patient. Good job using medical terminology while communicating with your patient, reporting abnormal findings, and communicating effectively with your staff RN. Good job participating according to (f) by attending to your patient's needs and walking him to the restroom.SA

Week 9 3(a,b) – You are beginning to gain more experience and confidence in receiving and providing hand-off report. You were able to utilize the SBAR sheet to update the assigned RN on your patient's status prior to leaving the floor. (e,f) – you communicated well with the patient, his family member, and the health care team throughout the day. You were accountable for your assessments and nursing interventions and participated as an active member of the health care team. Well-done! NS

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

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																
3. Exemplify advanced searches in accessing electronic health care information and documenting patient care. (1,4,8)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:									S							
a. Document vital signs and head to toe assessment according to policy (Responding).						n/a	n/a	S	S	S						
b. Document the patient response to nursing care provided (Responding).						n/a	n/a	S	S	S						
c. Access medical information of assigned patient in Electronic Medical Record (Responding).		S				n/a	n/a	S	S	S						
d. Demonstrate beginning skill in accessing patient education material on intranet (Responding).		S							S	S						
e. Provide basic patient education with accurate electronic documentation (Responding).									NA	n/a	N/A					
f. Consistently and appropriately post comments for clinical discussion groups on Edvance360 website (Reflection).						n/a	n/a	S	S	S						
*Week 2 –Meditech		CB				CB	CB	SA	SA	NS						

Comments

Week 2(4c,d): Satisfactory for listening attentively and actively participating in the Meditech orientation clinical. You showed beginning competence in the ability to access a patient's EHR, document care in an intervention, and locate patient data. You were able to access Lexicomp to locate patient education materials. Additionally, nursing policies and procedures were located on the health system intranet. Great job! NS/CB

Week 8(4a,b,c,f): Satisfactory job with documentation of the head to toe assessment and vital signs of your patient. Make sure to note any areas you may have forgot to assess, so that assessments and documentation are thorough and accurate. You did a good job utilizing Meditech for documentation and to look up patient information. You

completed your first cdg, meeting all requirements per the grading rubric, excellent job! For future reference remember to appropriately utilize the sheet that Brittany and Nick handed out with proper APA formatting, by siting something out of the reference. Example; you stated, “In our nursing foundations book, I was able to see the table how to assess for pitting in the edema”, this is where I would paraphrase in your own words what specific information related to edema, and then your in text would look like this (Potter et. al, 2023). SA

Week 9 4(a,b) – Good job with your documentation this week. You communicated your findings in a timely manner to ensure appropriate understanding of the patient’s condition for all members of the health care team. NS

Week 9 4(e) – Overall you did very well with your CDG this week. You identified the correct priority problem related to impaired mobility and did well to explain your assessment findings to support your discussion. You utilized a reputable resource to enhance the discussion and included an in-text citation and reference appropriately. In your response to Marilyn, I have one tip for future success: Be sure that your in-text citation and reference match. You provided an in-text citation for (Myers, 2023) but referenced Sawyer-Sommers (2023) diseases and disorders. The reference author(s) should always match the author(s) of the in-text citation. Otherwise, all criteria were met for a satisfactory evaluation. NS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																
4. Exemplify psychomotor skills and nursing care safely using evidence-based practice. (3,4,5,7,8)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Demonstrate correct body mechanics and practices safety measures during the provision of patient care (Responding).						n/a	n/a	S	S	S						
b. Apply the principles of asepsis and standard/infection control precautions (Responding).						n/a	n/a	S	S	S						
c. Demonstrates appropriate skill with foley catheter insertion, maintenance, and removal (Responding).									NA	n/a	N/A					
d. Manage basic patient care situations with evidence of preparation and beginning dexterity (Responding).						n/a	n/a	S	S	S						
e. Organize time providing patient care efficiently and safely (Responding).						n/a	n/a	S	S	S						
f. Manages hygiene needs of assigned patient (Responding).									NA	S	S					
g. Demonstrate appropriate skill with wound care (Responding).									NA		N/A					
h. Document the location of fire pull stations and fire extinguishers. ** (Interpreting).						n/a	n/a	S	S							
						CB	CB	SA	SA	NS						

Comments

****You must document the location of the pull station and extinguisher here for your first clinical experience.**

There was a fire extinguisher across from room 3036 and a pull station by the nurse director's office **Thank you SA**

Week 8(5a,b): Great job utilizing correct body mechanics and raising the bed while performing an assessment. I know there was confusion to your patient's ambulatory status, but you did a great job by asking for help taking him to the restroom. You did a great job ensuring that you foamed in/out when entering/exiting patients' rooms as well. SA

Week 9 5(d,e) – Yasmin, you did very well this week with your time management and organization. You provided all patient care in a timely manner to ensure his needs were met. As a result, you were able to observe and participate in other patient care activities with your peers to enhance your learning experience. Nice job! NS

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

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																
5. Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Utilize clinical judgment skills to develop a patient-centered plan of care (Responding).									NA	S	S					
									SA	NS						

Comments

Week 9 6(a) – Clinical judgement skills were utilized to identify a priority nursing problem based on the patient care provided and assessments performed. You correctly identified impaired mobility as a priority concern related to his post-operative status following hip replacement surgery. NS

* End-of-Program Student Learning Outcomes

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

Objective																
6. Convert basic pharmacology principles into safe medication administration. (3,5,6,7)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Identify the action, rationale, dosage, side effects and the nursing implications of medications (Interpreting).									NA							
b. Recognize patient drug allergies (Interpreting).									NA							
c. Practice the 6 rights and 3 checks prior to medication administration (Responding).									NA							
d. Administer oral, intra-muscular, subcutaneous, and intradermal medications using correct techniques (Responding).									NA							
e. Review the patient record for time of last dose before giving PRN medication (Interpreting).									NA							
f. Assess the patient response to PRN medications (Responding).									NA							
g. Demonstrate medication administration documentation appropriately using BMV (Responding).									NA							
*Week 11: BMV									SA	NS						

Comments

* End-of-Program Student Learning Outcomes

Objective																
2. Exemplify professional conduct through self-reflection, responsibility for learning, and goal setting. (1,5,7)*																
Clinical Experience	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Mid-Term	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14 Make-Up	Final
Competencies:																
a. Reflect on areas of strength** (Reflecting)						n/a	n/a	s	S	S	S					
b. Reflect on areas for self-growth with a plan for improvement. ** (Reflecting)						n/a	n/a	s	S	S	S					
c. Incorporate instructor feedback for improvement and growth (Reflecting).						n/a	n/a	s	S	S	S					
d. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct" (Responding).						n/a	n/a	s	S	S	S					
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions (Responding).						n/a	n/a	s	S	S	S					
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect (Responding).						n/a	n/a	s	S	S	S					
g. Comply with patient's Bill of Rights (Responding).						n/a	n/a	s	S	S	S					
h. Respect the privacy of patient health and medical information as required by federal HIPAA regulations (Responding).						n/a	n/a	s	S	S	S					
i. Actively engage in self-reflection. (Reflecting)						n/a	n/a	s	S	S	S					
*						CB	CB	SA	SA	NS						

Clinical judgment terminology embedded in each competency – noticing, interpreting, responding, reflecting

**** Strength/weakness reflection (a,b): Must have different written example each week of clinical/lab. You must explain your plan for how you will improve. Example, "I am having a difficult time with obtaining a manual BP. I will get a BP cuff from Amy and practice**

manual BP's with at least three members of my family this week." Please ensure that you answer this section in-depth with your plan of action. Each week must be different.

My strength I felt was being able to put my nerves aside and think about the patient's needs first. My weakness was locating posterior tibial pulses. I will keep practicing posterior tibial pulses with my family members at home this weekend. I will try on my kids and husband so by next clinical I am able to perform. I could also use a doppler if the patient has a weak pulse. I am glad you recognized your strengths and weaknesses! This is a great plan to practice on your family as well as future plans for assessments! Do not be too hard on yourself as you are learning, it is great you also put your nerves aside and made the patient's needs your priority, that is what will make an excellent nurse! SA

Week 8(8d,f,h): Excellent job following the student code of conduct, exhibiting professionalism while in the clinical setting, and ensuring that patient privacy was respected. SA

Week 9A Strength for me is being able to get my patient to perform self-hygiene care. At first, he kept saying no and was saying I asked to many questions but I kept conversating with him and said we could do it later. After helping him with his breakfast and getting him situated he felt better and agreed with self-hygiene and even did self-shaving. Awesome strength to note! While patient's at times may be resistant to personal hygiene care, it is important for many different reasons. Sometimes some education and discussion go a long way in promoting ADLs to be performed in the hospital setting. For his sake, he will feel more refreshed, reduce his chance of infection, and improve his post-operative outcomes. Well done! NS

Week 9B my weakness in this clinical was knowing where some things were that a patient needed. For example, knowing where there the menu to order food was. To improve where to find stuff I will go to 4 north before my clinical starts and recognize the rooms where the nutrition is at, the bed changing and where the medical equipment is at. You will get more familiar with the clinical unit as the weeks progress. However, I love your plan for improvement in this area and it will benefit you moving forward. Keep up the hard work! NS

Week 10a my strength was being able to control my face expressions to the smell of bowel incontinence. At first, I felt like throwing up but my concern for helping the patient helped me put my senses aside and help her get cleaned up. I feel like I am not used to it but with time I know I will be.

Week 10b my weakness for this week was learning how to get the patient with a diaper cleaned from lying in bed when they have a bowel movement. There were 3 of us student nurses and we have never done this before so with her left fracture hip we did not want to lift her leg up to much. We didn't know how to clean her. We had help from an RN to show us how to use a pillow and put her left foot on tip and the other under and then turn her to her left side to wipe her. I think the way I could do learn more is looking at videos of how patients are turned and moved when they get changed and being immobile in bed. This will help me next time, so I don't have that issue

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials
		*	*

Note: Students are required to submit one satisfactory care map by 11/18/2024 at 0800. If the care map is not evaluated as satisfactory upon initial submission, the student may revise the care map based on instructor feedback/remediation and resubmit one time by 11/25/2024 at 0800 to receive a satisfactory evaluation. ***See Attached Nursing Care Map Grading Rubric**

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

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		

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 no in-text citation AND reference is 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:

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

<u>Simulation Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	Simulation #1 (2,3,5,8) *	Simulation #2 (2,3,5,7,8) *
	Date: 11/5/2024 or 11/12/2024	Date: 11/25/2024 or 11/26/2024
Evaluation (See Simulation Rubric)		
Faculty Initials		
Remediation: Date/Evaluation/Initials		

* Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Nursing Foundations – 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: _____