

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Medical Surgical Nursing – 2025**

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

**Student:** Colleen Camp

**Final Grade:** Satisfactory/Unsatisfactory

**Semester:** Spring

**Date of Completion:**

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

**Faculty eSignature:**

**Teaching Assistant:** Stacia Atkins, BSN, 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. **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.**

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**METHODS OF EVALUATION:**

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

**ABSENCE (Refer to Attendance Policy)**

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

| Faculty's Name   | Initials |
|------------------|----------|
| Kelly Ammanniti  | KA       |
| Stacia Atkins    | SA       |
| Monica Dunbar    | MD       |
| Rachel Haynes    | RH       |
| Heather Schwerer | HS       |
| Nick Simonovich  | NS       |
| Dawn Wikel       | DW       |

## PERFORMANCE CODE

### SATISFACTORY CLINICAL PERFORMANCE

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

### UNSATISFACTORY CLINICAL PERFORMANCE

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

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

### OTHER

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

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

| Date | Care Map Top Nursing Priority | Evaluation & Instructor Initials | Remediation & Instructor Initials | Remediation & Instructor Initials |
|------|-------------------------------|----------------------------------|-----------------------------------|-----------------------------------|
|      |                               |                                  |                                   |                                   |
|      |                               |                                  |                                   |                                   |

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

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## Objective

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

| Weeks of the Course                                                                                         | 1                                | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Midterm | 9 | 10 | 11 | 12 | 13 | Make Up | Make Up | Final |
|-------------------------------------------------------------------------------------------------------------|----------------------------------|---|---|---|---|---|---|---|---------|---|----|----|----|----|---------|---------|-------|
| <b>Competencies:</b>                                                                                        |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)                    |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| b. Correlate patient's symptoms with the patient's disease process. (Interpreting)                          |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| c. Correlate diagnostic tests with the patient's disease process. (Interpreting)                            |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)                   |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)                 |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)                 |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| g. Assess developmental stages of assigned patients. (Interpreting)                                         |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| h. Demonstrate evidence of research in being prepared for clinical. (Noticing)                              | S                                |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly. | Meditech, FSBS, IV Pump Sessions |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |
| Instructors Initials                                                                                        |                                  |   |   |   |   |   |   |   |         |   |    |    |    |    |         |         |       |

\*\*Evaluate these competencies for the offsite clinicals:

DH: 1h

IC: 1a, b, e, h.

ECSC: 1g, h

## Comments:

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

## Objective

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

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

\*\*Evaluate these competencies for the offsite clinicals:

DH: N/A IC: 2f ECSC: N/A

Comments:

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

\*\*Evaluate these competencies for the offsite clinicals:

DH: 3a

IC: 3a, f, i

ECSC: 3a, j

Comments:

## Objective

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

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

\*\*Evaluate these competencies for the offsite clinicals:

DH: N/A

IC: N/A

ECSC: N/A

Comments:

## Objective

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

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

\*\*Evaluate these competencies for the offsite clinicals:

DH: 4a, b, d

IC: 4b, d, e

ECSC: 4a, b, d, e

Comments:

## Objective

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

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

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

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

Comments:

## Objective

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

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

**\*\*6b- You must address this competency in the comments below for all clinicals on 3T, 4N, or Rehab. Refer to CMS Social Determinates of Health Screening Tool in the Resources folder for the course.**

## Comments:

See Care Map Grading Rubrics below.

## Objective

7. Illustrate professional conduct including self-examination, responsibility for learning, and goal setting. (7)\*

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

\*\*Evaluate these competencies for the offsite clinicals: DH: All IC: All ECSC: All

**\*\*7a and 7b: You must address these competencies in the comments section after each clinical experience. Please write a different comment each week. Remember that a goal includes what you will do to improve, how often you will do it, and when you will do it by (example- "I had trouble remembering to do the three checks of the six medication rights prior to administering medications. I will review the six rights and medication administration content in the textbook twice before the next clinical. Additionally, I will request to meet with my clinical faculty member to practice preparing and administering at least three medications before the next clinical."**

**Comments:**

One competency I feel I performed strongly in was obtaining a FSBS. I have done this before at home for a family member, therefore I felt this was a good review for me!

One competency I feel I need improvement in is programing the IV pump and remembering what buttons to push for setting the medications. To improve I will re-watch the videos in my IV lab lesson on edvance 3 time prior to going to clinical on Wednesday.

| 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*)<br>*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*)<br>*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*)<br>*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: <ul style="list-style-type: none"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Terminate plan of care</li> </ul> | 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:**

| 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*)<br>*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*)<br>*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*)<br>*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: <ul style="list-style-type: none"> <li>Continue plan of care</li> <li>Modify plan of care</li> <li>Terminate plan of care</li> </ul> | 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.

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Total Possible Points= 45 points

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**\*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  
**Medical Surgical Nursing 2024**  
**Skills Lab Competency Tool**

|                                                                                                                                                         |                              |                                   |                                      |                                    |                                |                                    |                                    |                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------|--------------------------------------|------------------------------------|--------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Student name:                                                                                                                                           |                              |                                   |                                      |                                    |                                |                                    |                                    |                                    |
| <b><u>Skills Lab</u></b><br><b><u>Competency Evaluation</u></b><br><br>Performance Codes:<br><br><b>S:</b> Satisfactory<br><br><b>U:</b> Unsatisfactory | <b>Lab Skills</b>            |                                   |                                      |                                    |                                |                                    |                                    |                                    |
|                                                                                                                                                         | <b>Week 1</b>                | <b>Week 1</b>                     | <b>Week 1</b>                        | <b>Week 1</b>                      | <b>Week 1</b>                  | <b>Week 2</b>                      | <b>Week 2</b>                      | <b>Week 9</b>                      |
|                                                                                                                                                         | <b>Insulin</b><br>(2,3,5,7)* | <b>Assessment</b><br>(2,3,4,5,7)* | <b>IV Math Application</b><br>(3,7)* | <b>Lab Day</b><br>(1,2,3,4,5,6,7)* | <b>IV Skills</b><br>(2,3,5,7)* | <b>Trach</b><br>(1,2,3,4,5,6,7)*   | <b>EBP</b><br>(3,7)*               | <b>Lab Day</b><br>(1,2,3,4,5,6,7)* |
|                                                                                                                                                         | <b>Date:</b><br>1/7/25       | <b>Date:</b><br>1/7/25            | <b>Date:</b><br>1/8 or<br>1/9/25     | <b>Date:</b><br>1/8 or<br>1/9/25   | <b>Date:</b><br>1/10/25        | <b>Date:</b><br>1/15 or<br>1/16/25 | <b>Date:</b><br>1/15 or<br>1/16/25 | <b>Date:</b><br>3/10 or<br>3/11/25 |
| Evaluation:                                                                                                                                             |                              |                                   |                                      |                                    |                                |                                    |                                    |                                    |
| Faculty/Teaching Assistant<br>Initials                                                                                                                  |                              |                                   |                                      |                                    |                                |                                    |                                    |                                    |
| <b>Remediation:</b><br><b>Date/Evaluation/Initials</b>                                                                                                  |                              |                                   |                                      |                                    |                                |                                    |                                    |                                    |

\*Course Objectives

**Comments:**

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

| <b><u>Simulation Evaluation</u></b><br><br>Performance Codes:<br><br><b>S:</b> Satisfactory<br><br><b>U:</b> Unsatisfactory | <b>Student Name:</b>                                                    |                                                                   |                                                                          |                                                                     |                                                             |                                                                          |                                                                    |                                                              |
|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------|
|                                                                                                                             | <b>vSim-</b> Vincent Brody<br>(Medical-Surgical)<br>(*1, 2, 3, 4, 5, 6) | <b>vSim-</b> Juan Carlos<br>(Pharmacology)<br>(*1, 2, 3, 4, 5, 6) | <b>vSim-</b> Marilyn Hughes<br>(Medical-Surgical)<br>(*1, 2, 3, 4, 5, 6) | Simulation #1<br>(Musculoskeletal & Resp)<br>(*1, 2, 3, 4, 5, 6, 7) | Simulation #2<br>(GI & Endocrine)<br>(*1, 2, 3, 4, 5, 6, 7) | <b>vSim-</b> Stan Checketts<br>(Medical-Surgical)<br>(*1, 2, 3, 4, 5, 6) | <b>vSim-</b> Harry Hadley<br>(Pharmacology)<br>(*1, 2, 3, 4, 5, 6) | <b>vSim-</b> Yoa Li<br>(Pharmacology)<br>(*1, 2, 3, 4, 5, 6) |
|                                                                                                                             | <b>Date:</b><br>1/27/25                                                 | <b>Date:</b><br>2/10/25                                           | <b>Date:</b><br>2/24/25                                                  | <b>Date:</b><br>2/26 or<br>2/27/25                                  | <b>Date:</b><br>4/9 or<br>4/10/25                           | <b>Date:</b><br>4/14/25                                                  | <b>Date:</b><br>4/24/25                                            | <b>Date:</b><br>4/25/25                                      |
| Evaluation                                                                                                                  |                                                                         |                                                                   |                                                                          |                                                                     |                                                             |                                                                          |                                                                    |                                                              |
| Faculty/Teaching Assistant Initials                                                                                         |                                                                         |                                                                   |                                                                          |                                                                     |                                                             |                                                                          |                                                                    |                                                              |
| <b>Remediation:</b><br><b>Date/Evaluation/Initials</b>                                                                      |                                                                         |                                                                   |                                                                          |                                                                     |                                                             |                                                                          |                                                                    |                                                              |

\* Course Objectives

**Comments:**

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Medical Surgical Nursing – 2025**

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

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

Student eSignature and Date:

-

11/21/24