EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Yasmin Perez

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

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 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)
1/16/25	1	EBP LAB	1/16/25 0930-1030

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.

***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
1/24/25	Risk for Bleeding	NI KA		

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

Objective

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

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies: a. Analyze the involved patho-physiology of the patient's disease process. (Interpreting)			S	S													
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S													
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S													
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			N/A	N/A													
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			N/A	N/A													
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			N/A	N/A													
g. Assess developmental stages of assigned patients. (Interpreting)			N/A	N/A													
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	U		U	N/A													
Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Meditech, FSBS, IV Pump Sessions		3T, 85 year old, acute GI bleed	Rehab, 67 years old, Lumbar radiculopathy													
Instructors Initials	**SA**		KA														

****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

Week 1 (h)- You received a “U” on this competency due to not correctly self -evaluating the correct weeks on this tool (you evaluated all of week 3 instead of 1 & 2). Please address each “U” on your next clinical tool in order to receive a Satisfactory evaluation. If you do not address these “U’, you will continue to receive a “U” until it is addressed. SA
Week 1(h) I will pay more attention next time when filling out my clinical to not make mistakes and not put it in the wrong week and put it in the correct week. KA

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

Week 3 – 1a, b, c, e– You did a nice job discussing on clinical your patient’s disease process and what nursing was doing to help the patient. You were able to discuss symptoms we were monitoring and managing in your patient as well as pertinent labs for your patient diagnosis. You also set a goal for your patient and were able to discuss your patient’s work towards meeting that goal. You had two different patients with similar diagnoses and were able to compare and contrast their care to understand the diagnosis better. KA
Week 3 – 1d – You did a nice job reviewing all your medications before you administered them to the patient. You were able to discuss the reason why the patient was taking the medication as well as what we were monitoring the patient for. You also were able to discuss what information was needed to determine if the medication should be administered (i.e. blood pressure, pulse). KA
Week 3 – 1h – According to policy, any competency left unevaluated will be marked as unsatisfactory for the week. Please be mindful to make sure your clinical tool is filled out completely before submission. Please make sure to make a comment on how you will address this U and prevent receiving a U in this competency in the future. KA * I need to slow down and check every box before submitting my clinical tool. This way I can prevent from getting a U. yp

*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
Competencies: a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			S	S													
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			S	S													
c. Conduct a skin assessment and implement appropriate precautions and care. (Noticing)			S	S													
d. Communicate physical assessment. (Responding)			S	S													
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S													
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	U		S	S													
	SA		**KA**														

****Evaluate these competencies for the offsite clinicals:** **DH: N/A** **IC: 2f** **ECSC: N/A**

Comments:

Week 1 (2f)- You received a "U" on this competency due to not correctly self -evaluating the correct weeks on this tool (you evaluated all of week 3 instead of 1 & 2). Please address each "U" on your next clinical tool in order to receive a Satisfactory evaluation. If you do not address these "U', you will continue to receive a "U" until it is addressed. SA

Week 1 (2f)- I did not realize I evaluated my clinical tool in the wrong week. I will double check next time to make sure I am in the right week. KA

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

Week 3 – 2a, d – You did a nice job thoroughly assessing your patient and notifying your nurse of any pertinent information. You were able to identify the focused assessment needing to be completed for your patient related to their diagnosis and monitored abnormal assessment findings. You managed your patient's decreased orientation well and continued to assist with reorienting her as needed. KA

Week 3 – 2f – You utilized the EMR to research your patient and determine what care needed to be provided to your patient throughout the day. You also utilized the EMR to research your patient's health history and information related to the patient's current hospital visit. KA

Objective

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

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

****Evaluate these competencies for the offsite clinicals:** **DH: 3a** **IC: 3a, f, i** **ECSC: 3a, j**

Comments:

Week 1 (3a,b,f,I,j)- You received a "U" on this competency due to not correctly self -evaluating the correct weeks on this tool (you evaluated all of week 3 instead of 1 & 2). Please address each "U" on your next clinical tool in order to receive a Satisfactory evaluation. If you do not address these "U', you will continue to receive a "U" until it is addressed. SA

Week 1 I evaluated in the wrong week instead of week 1, I will make sure I am double checking when evaluating my clinical tool KA

Week 3 – 3b –You had the opportunity to manage a pure wick this week. You monitored the patient's output and documented the findings in the EMR. You provided peri care as appropriate and monitored the patient for signs and symptoms of complications related to pure wick device. You also had the opportunity to observe blood administration with your nurse and assisted with gathering vital signs during the process. KA

Objective

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

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

****Evaluate these competencies for the offsite clinicals:** **DH: N/A** **IC: N/A** **ECSC: N/A**

Comments:

Week 1 (3o,r)- You received a "U" on this competency due to not correctly self -evaluating the correct weeks on this tool (you evaluated all of week 3 instead of 1 & 2). Please address each "U" on your next clinical tool in order to receive a Satisfactory evaluation. If you do not address these "U', you will continue to receive a "U" until it is addressed. SA

week 1 I evaluated in the wrong week instead of the right week, I will make sure I double check before submitting my clinical tool KA

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

Week 3 – 3k – You did a nice job administering your medications this week. You observed the rights of medication administration and was able to answer all questions about your medications. You had the opportunity to pass PO, SQ, IV medications this week. You performed the medication administration process with beginning dexterity. KA
Week 3 – 3n –You had the opportunity to practice reconstituting a medication and drawing it up from a vial and administering it slow IV push to your patient. You performed all IV skills with beginning dexterity. You documented all medication administration and line care appropriately in the EMR. Nice job! KA
Week 3 – 3p – You did a nice job flushing your patient's IV this week and ensuring patency of the IV line. You were able to document this appropriately in the EMR. KA
Week 3 – 3q – You did a nice job monitoring your patient's IV site this week and documenting your assessment in the EMR. KA

Objective

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

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

****Evaluate these competencies for the offsite clinicals:** **DH: 4a, b, d** **IC: 4b, d, e** **ECSC: 4a, b, d, e**

Comments:

Week 3 – 4b – You completed the SBAR worksheet and provided your RN with handoff communication related to your patient utilizing the SBAR you developed. You made sure all pertinent information and changes in patient status were communicated to your nurse during hand-off report. You also practiced your SBAR during debriefing and provided an accurate report to your classmates and faculty. KA

Week 3 – 4e – Yasmin, you did a great job locating an EBP article and responding to the CDG questions on your article. In the future try to explain the meaning behind the numbers in the results section a little more. The specific numbers are not as important as the actual findings that are generally discussed in the discussion section are. Also, in your reference the first letter of the first word after a colon should be capitalized and "palliative" and medicine" in the journal title should be capitalized as well. Also, you intext citation should look like this (Ai, 2021). In the future, remember to include the page number or the paragraph number if there are no page numbers when you are in-text citing a direct quotation. Overall your CDG was well written and easy to follow, but you had some minor grammatical errors in response to your peer. Please be mindful of this in the future. KA

Objective

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

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

****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:
5A &B- A teaching need to my patient was taking her medications. She was refusing to take medications due to not wanting to be bothered and confusion. I explained to the patient the need to take her medications. I told her the medications we were given were insulin, Protonix and blood glucose medications. I explained what each medication was for and it was to stabilize her blood glucose. Her blood glucose was 180 when last taken. This was necessary to maintain the patients sugar levels controlled and not go high. Protonix was to keep her stabilize and decrease rates of GI bleed again. We explained this medicine needed to be given due to her being admitted for a GI bleed and that we were preventing this from reoccurring. Education related is that taking her medications will keep her sugar, GI bleed, and hemoglobin stable. Skyscape helped me know what each medication was for so I was able to educate the person correctly on what those medications were for and why it was important to take. Great job attempting to provide appropriate education to your patient even though she was not always able to be oriented to a level to understand. Skyscape is a great resource for medication education. KA

5A&5B- A teaching need for my patient was using the incentive spirometer. She would forget to do it and since I saw she had some SOB with her walking and since she had surgery, I reminded her that she needs to do it 3 times daily as she was told so it would help with lung expansion. In her case since she received lumbar surgery, she needs to do it to prevent lung complications. The patient understood and said thank you for reminding her she had completely forgotten about it.
The educations was related was using her incentive spirometer will help prevent lung complications and help lung expansion. I used Lexicomp to help give my patient education.

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)			~~S~~ NI	N/A													
b. **Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.**** (Noticing, Interpreting, Responding, Reflecting)			S	S													
			KA														

****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.
6B- Some factors associated with social determinants of health for my patient was she has Alzheimer's and that affects her mental health. She forgets things and that can affect the patients care. She can forget about taking her medications putting her at risk for another GI bleed. She could forget following up with her consults and appointments with doctors. These are all great examples including the fact she lives at a long-term care facility. All of these aspects affect her overall ability to manage her chronic medical condition. KA

Week 3 – 6a – You received a needs improvement on your care map related to having a reference without an in-text citation. Please see comments on the rubric at the end of the tool for details. KA

6B- some factors associated with SDOH for my patient was she lives alone and that affects her living situation. She had a recent surgery and won't be able to do things on her own as much as she did before and is at risk of fall. She is also diagnosed with depression and that can affect her mental status. She said her husband passed away and caused major depression. This can affect her too as she already lives alone and on top she is depressed and could increase more depression in the fact she can't do much for herself and has to rely on other people.

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)	U		S	S													
b. Reflect on an area for improvement and set a goal to meet this need. (Reflecting)**	U		S	S													
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	U		S	S													
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	U		S	S													
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	U		S	S													
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	U		S	S													
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	U		S	S													
h. Actively engage in self-reflection. (Reflecting)	U		S	S													
	SA		**KA**														

****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:

Week 1 (7a-h)- You received a "U" on this competency due to not correctly self -evaluating the correct weeks on this tool (you evaluated all of week 3 instead of 1 & 2). Please address each "U" on your next clinical tool in order to receive a Satisfactory evaluation. If you do not address these "U', you will continue to receive a "U" until it is addressed. SA

week 1 I evaluated in the wrong week instead of the right week, I will make sure I double check before submitting my clinical tool KA

Week 3 - 7A An area of strength for me was giving IV push Protonix to the patient and feeling confident in it and knowing when to flush and how long to. I was excited to do IV and hope to do more. You did a great job with this skill! KA

Week 3 - 7B An area I need for improvement is knowing how to document the insertion if an IV. I assess the IV but I forget to put the insertion date. I will look at documentation and see when it was first placed so I can document when I do my assessment. I can also ask my instructor where to find the date of insertion of IV. Continued practice with documentation with help improve your navigation of the system as well as your overall documenting. You quickly fixed all missing information which is what is important. Keep up the hard work! KA

Week 4- 7A An area of strength this week for me was being able to assist my patient with all her needs and make her comfortable. I was able to know more about my patient getting her trust. More importantly, just hearing her say she was grateful to have me and that I will be a great nurse makes me happy I was able to help her and make her feel comfortable.

Week 4- 7B An area for improvement for me would be to not get so nervous when getting asked questions by instructors. I totally go blank and don't know what to answer. I need to breathe in and step back and think and think of it more of them helping me instead of getting all nervous. I will look at stuff ahead of time so when the instructor asks me questions of my patients, I can give them an answer.

Student Name: Yasmin	**Course Objective:** 6
Date or Clinical Week: 3	

	Criteria	3	2	1	0	Points Earned	Comments
Noticing	1.Identify all abnormal assessment findings (subjective and objective); include specific patient data.	**(lists at least 7*) *provides explanation if < 7**	**(lists 5-6)**	**(lists 5-7 but no specific patient data included)**	**(lists < 5 or gives no explanation)**	3	You did a nice job with your noticing section. You identified the pertinent assessment findings, lab/diagnostics, and risk factors for your patient. Did your patient have EGD or colonoscopy results that should be included in you diagnostics? KA
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	**(lists at least 3*) *provides explanation if < 3**		**(lists 3 but no specific patient data included)**	**(lists < 3 or gives no explanation)**	3	
	3. Identify all risk factors relevant to the patient.	**(lists at least 5*) *provides explanation if < 5**	**(lists 4)**	**(lists 3)**	**(lists < 3 or gives no explanation)**	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	You did a nice job listing appropriate nursing priorities for your patient this week. You highlighted your highest nursing priority as "Risk for bleeding" risks tend to be secondary to actually nursing diagnosis, however in this case with your patient having a history of repeat GI hemorrhage this would be a priority for your patient. You highlighted pertinent data in the noticing section. You chose three complications, but only 2 had 3 signs and symptoms. Your anemia complication only had 2 signs and symptoms to look for. Remember each complication needs a minimum of 3 in the future. KA
	5. State the goal for the top nursing priority.	**Complete**			**Not complete**	3	
	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**	3	
	7. Identify all potential complications for the top nursing priority problem.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**	3	
	8. Identify signs and symptoms to monitor for each complication.	**(lists at least 3)**	**(lists 2)**		**(lists < 2)**	2	
Responding	9. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	2	You did a nice job to ensure all your nursing interventions were prioritized, individualized, realistic, and included rationales. Three of your interventions were not timed with a frequency. Education can be timed on admission, before discharge, daily, or prn. Your blood administration can be timed as order by healthcare provider for hemoglobin less than 7. You would want to make sure each of your highlighted data in your assessment and lab/diagnostic sections has an associated interventions. You would want to add an assessment intervention for the abdomen and the patient's appetite. All other areas were addressed. KA
	10. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	11. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	2	
	12. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	

	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**	3	
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**	1	Remember the reassess all of your highlighted data in your assessment and lab/diagnostic sections. If the finding has not changed, you can state that. Only 3 of 14 highlighted pieces of data was reassessed. You identified you would continue your plan of care. KA
	15. Evaluation includes one of the following statements: • Continue plan of care • Modify plan of care • Terminate plan of care	**Complete**			**Not complete**	3	

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. Your care map did not include an in-text citation. KA
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: Yasmin, you received a 40/45 which falls in the satisfactory range, however you did not include an in-text citation only a reference which means your care map is needs improvement. Please review the comments above for areas to improve on and resubmit your care map with corrections by next Saturday February 1, 2025 at 2200. If you have any questions please let me know. KA

Total Points: 40/45

Faculty/Teaching Assistant Initials: KA

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 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:**

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

Student name:								
Skills Lab Competency Evaluation	**Lab Skills**							
	Week 1	**Week 1**	**Week 1**	**Week 1**	**Week 1**	**Week 2**	**Week 2**	**Week 9**
Performance Codes: **S**: Satisfactory **U**:Unsatisfactory	**Insulin** (2,3,5,7)*	**Assessment** (2,3,4,5,7)*	**IV Math Application** (3,7)*	**Lab Day** (1,2,3,4,5,6,7)*	**IV Skills** (2,3,5,7)*	**Trach** (1,2,3,4,5,6,7)*	**EBP** (3,7)*	**Lab Day** (1,2,3,4,5,6,7)*
	Date: 1/7/25	**Date:** 1/7/25	**Date:** 1/8 or 1/9/25	**Date:** 1/8 or 1/9/25	**Date:** 1/10/25	**Date:** 1/15 or 1/16/25	**Date:** 1/15 or 1/16/25	**Date:** 3/10 or 3/11/25
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**U**	
Faculty/Teaching Assistant Initials	SA	SA	SA	SA	SA	SA	SA	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	S 1/16/25 930-1030 SA	

*Course Objectives

Comments:
Week 1
(Insulin)- You were able to correctly prepare an insulin pen and administer subcutaneous insulin. Insulin requirements were accurately identified and calculated through the corrective scale and carbohydrate coverage orders. MD
(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. KA/RH
(IV Math)-You satisfactorily participated in the IV Math learning session on 1/7/25 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/8/25. KA/DW/HS/SA
(Lab Day)- You satisfactorily completed the mandatory lab review of nursing foundational skills. This was achieved through simulating care for a patient in a scenario requiring competency in assessment, communication, medication administration (including PO and IM injection), nasogastric tube insertion and removal, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, foley insertion and removal, development of nursing notes, and providing SBAR hand-off report. NS/MD/RH
(IV Skills)- You have satisfactorily completed IV lab including a saline flush, IV push medication administration with reconstitution, priming and hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV therapy, and monitoring the IV site for infiltration and signs of complications. SA

Week 2
(Trach Care & Suctioning) - During this lab, you satisfactorily demonstrate competence with tracheostomy care and tracheostomy suctioning. DW/RH/NS/SA
(EBP Lab)- You were initially late to your assigned lab time and were rescheduled for a new time. This resulted in one hour of missed lab time. During your makeup, you actively participated in the online searching process for evidence-based practice literature, as well as reviewing example articles to determine appropriate selection and information needed when summarizing a research article. KA/LK/SA

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

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

* 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