EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Madison Wright

Semester: **Spring**

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

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

Final Grade: **Satisfactory/Unsatisfactory**

Date of Completion:

Faculty eSignature:

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

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**

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

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	NA	S												
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			NA	NA	S												
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	NA	S												
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			NA	NA	S												
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	NA	S												
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			NA	NA	S												
g. Assess developmental stages of assigned patients. (Interpreting)			NA	S	S												
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		NA	S	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		Digestive Health, Infection Control	ECSC Activity	3T, 66 F, Cholecystitis and Pancreatitis												
Instructors Initials	**MD**	**MD**	**DW**	**DW**													

**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

3

Week 1 (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 (Obj 1)- Madison, at a very minimum, please be sure to evaluate the teal highlighted competencies for the alternative clinical sites listed above (DH, IC and ECSC). These are noted on all objectives in this tool. 1b and 1h should have also been evaluated. Please keep this in mind for your remaining Erie County Senior Center experience. DW
Thank you, I did not realize. I have made sure I addressed them this time around! DW

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)			NA	NA	S												
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			NA	NA	S												
c. Conduct a skin assessment and implement appropriate precautions and care. (Noticing)			NA	NA	S												
d. Communicate physical assessment. (Responding)			NA	NA	S												
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			NA	NA	S												
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	NA	S												
	MD	**MD**	**DW**	**DW**													

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

Comments:

Week 1 (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

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)	S		S	S	S												
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	NA	S												
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			NA	NA	S												
d. Appropriately prioritizes nursing care. (Responding)			NA	NA	S												
e. Recognize the need for assistance. (Reflecting)			S	NA	S												
f. Apply the principles of asepsis where indicated. (Responding)	S		NA	NA	S												
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			NA	NA	NA												
h. Implement DVT prophylaxis (early ambulation, SCDs, ted hose, administer enoxaparin or heparin) based on assessment and physicians' orders (Responding)			NA	NA	NA												
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	NA	S												
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S	S												
	MD	**MD**	**DW**	**DW**													

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

Comments:

Week 1 (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

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)			NA	NA	S												
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			NA	NA	S												
m. Calculate medication doses accurately. (Responding)			NA	NA	S												
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			NA	NA	S												
o. Regulate IV flow rate. (Responding)	S		NA	NA	S												
p. Flush saline lock. (Responding)			NA	NA	S												
q. Monitor and/or discontinue an IV. (Noticing/Responding)			NA	NA	S												
r. Perform FSBS with appropriate interventions. (Responding)	S		NA	NA	NA												
	MD	**MD**	**DW**	**DW**													

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

Comments:

Week 1 (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

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	S												
b. Communicate professionally and collaboratively with members of the healthcare team using hand-off communication techniques. (SBAR) (Responding)			NA	S	S												
c. Report promptly and accurately any change in the status of the patient. (Responding)			NA	NA	S												
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	S												
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	S	S												
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			NA	NA	S												
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			NA	NA	S												
	MD	MD	DW	DW													

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

Comments:

Week 3(4e)- According to the CDG Grading Rubric, you have earned a satisfactory for your Infection Control discussion this week. Your discussion was extremely thorough and backed by evidence from Davis's Diseases and Disorders. APA formatting was right on target. DW

Week 4 (4e)- According to the CDG Grading Rubric, you have earned a satisfactory for your Erie County Senior Center discussion this week. Your discussion was thorough and backed by evidence from Nurses' Pocket Guide. Additionally, in terms of APA formatting, I have a couple suggestion: 1. When you are citing a reference within your text, Skyscape is only a platform that houses the actual resource; therefore, you won't say "According to Skyscape…". Instead you will use the author(s) and say, "According to Doenges et al…". 2. Et al. is used when there are more than 2 authors for the citation. Please use this feedback to improve with APA formatting for future CDG's and other course/clinical paperwork. Also keep in mind that there is an APA Formatting Examples document in the Clinical Resources on Edvance360 and online resources to help you (ex. Purdue Owl website- I really like this one! https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/general_format.html). I am always happy to help you if some of these resources are unclear to you. DW

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)			NA	NA	S												
b. **Utilize appropriate termino-logy and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)**			NA	NA	S												
	MD	MD	DW	DW													

**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 big teaching need of my patient was her diet. She suffers from a lack of knowledge of what caused her flair up. In her admission report, it showed she was eating cheeseballs when she first developed pain. I gave her a handout I found on Lexicomp on low-carbohydrate diets and how they are beneficial for hypertension, as well as preventing other disease processes. I was able to sit down and go over the packet with her and answer any of the questions she had and I made sure she understood how her disease process most likely occurred due to her lack of proper nutrition.

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)			NA	NA	S												
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)			NA	NA	S												
	MD	MD	DW	DW													

**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:

6B) One big social determinant of health I noticed from my patient was the fact she was unemployed. This may have played a role in her disease process as she may not have the adequate money to provide for herself with proper nutrition, as well as playing a role in her activity level. If she is unemployed, she may not be able to afford her own gym membership or have the supplies to maintain a proper workout regimen. This may have also led her not to have come in sooner, as she may not have had the funds to pay for her medical bills.

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

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 + 2:

    A) I felt as if one of my strengths for this week's clinical/lab experience was being able to accurately learn how to use IV equipment and label the bags appropriately. I felt confident during the different rotations of how to do each skill. Awesome! MD

B) One area of improvement that I would like to work on is IV math. I get easily confused between the different types of equations, and I would like to have them memorized more thoroughly. To meet this goal, I will work on problems every night in the following week to get them more memorized. I would also like to improve on using the FSBS meter. To improve on this, I will rewatch the videos provided in our resources until I feel comfortable with using the meter properly. Great goals! MD

Week 3:
A) During my clinical experience this week, I felt confident with my ability to recognize where cross contamination would occur when observing for infection control during my clinical. I was able to promptly recognize when a nurse/medical professional did not correctly display use of hand hygiene/PPE. Nice! DW
B) One area of improvement I would like to improve is memorizing proper precautions for each type of isolation. Although I was able to recognize where cross contamination would occur, I struggled with memorizing each type of precaution and what PPE was required with each. To improve on this, I will spend time memorizing the differences between each isolation precautions and what diseases would fall under each isolation by looking at my badge reel cheat-sheet every night under I understand fully. Great idea, Madison, but also keep in mind that we give you the badge quick reference guide for a reason. It is not above a nurse to utilize their resources especially the easily accessible ones. Regardless, as a student this information will be important to retain as it will come up in all areas of nursing care, not just med-surg. Keep up the great work! DW

Week 3 (7f)- Madison, unfortunately, there were a few issues with submitting the clinical paperwork this week, resulting in a U for this competency (submitted the tool late in the wrong version and submitted the infection control scavenger hunt in handwritten form). In the future, please be sure to review all directions before submitting all assignments, as well as taking a few more seconds to confirm that all submissions actually load to the Edvance360 dropbox. Assignments that are not submitted in the correct format or in the correct location may not be accepted for credit in the future. Thank you for being so prompt in submitting the correct versions of the clinical paperwork due this week. Please review the directions on page 1 of this document to ensure you are addressing your U correctly. You must comment on how you have improved for 7f with the next tool submission. Failure to do so will result in a continued U. If you have any questions, please do not hesitate to ask. This will just be a lesson learned and I have no doubt you will get the hang of it moving forward. Thank you! DW

Week 4:
A) I felt as if one of my strengths in this clinical rotation was being able to effectively cater towards my elderly client's needs. I was able to help grab trays and food orders or my clients who may not have been able to do so themselves. Excellent! Keep up the great work! DW
B) Although I was able to cater towards these clients' needs, I was not necessarily expecting to do so. I wish I went into the clinical experience with more of an understanding on what I might experience in a clinical setting such as this one. I was able to work around my client's needs during my activity, but I was not quite expecting it. It is easy to expect abilities to be declined when patients are in a hospital, but I was not expecting to see a big decline in a more casual setting like this. In the future, I will make sure to do more research on physical limitations in activities I might plan, so that all needs can be met without having to pause my activity to make it more compatible with certain clients needs. I would do this every step in planning my next activity so I am sure I am well knowledgeable and know what to expect by the time I have to do my next activity. While you won't necessarily have activities to plan in the remaining clinicals for the MSN course, you will be able to use this logic with all remaining new clinicals this semester. Its always a good idea to do a little preparation before all clinicals. DW

7f) I received a U for this competency last week (week 3), and this week I have made sure I submitted my clinical tools and other due assignments on time, as well as submitting the correct formatting and version of each assignment. I have also double-checked that everything has been submitted before I clicked off, so I do not run into a situation like what occurred last week. (I will also include this in the Evaluation of the Clinical tool as stated on page 2) Thank you! DW

Week 5:

A) I felt that this week's strength was my timing. I was able to move around the clinical floor more freely as I had my interventions lined up and taken care of on time, which led me to be able to help answer call lights and classmates in between. This gave me more practice in skills and interventions, and I have a better understanding of potential patient issues that I could see with my future patients.

B) My biggest weakness in this clinical was my dexterity with sterility. I had a few instances where I broke sterility, and I would have to start over because my hands were either in the improper place or I did not know how to hold things without breaking sterility. To work on this, in future clinicals I will clarify with either my instructor or nurse on the best way to hold things, so I am not having to restart or get new supplies. I am hoping to have this improved by the next clinical, when I have the chance to pass meds or work on IV's.

Student Name:				Course			
Date or Clinical Week:				Objective:			

	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
Reflecting	13. An appropriate rationale is included for each intervention	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**		
	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:**

Student Name:				Course			
Date or Clinical Week:				Objective:			

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

		> 75% complete	50-75% complete	< 50% complete	0% complete		
Reflecting	13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete		
	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 2025
Skills Lab Competency Tool

Student name: Madison Wright								
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:** 1/8/25	**Date:** 1/8/25	**Date:** 1/10/25	**Date:** 1/15/25	**Date:** 1/16/25	**Date:** 3/10 or 3/11/25
Evaluation:	S	S	S	S	S	S	S	
Faculty/Teaching Assistant Initials	MD	MD	MD	MD	MD	MD	MD	
Remediation: **Date/Evaluation/Initials**	NA	NA	NA	NA	NA	NA	NA	

*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. MD

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 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

Simulation Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Student Name: Madison Wright							
	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	DW							
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