EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Cora Meyer

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)

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
1/27/2025	Impaired gas exchange	S/HS	NA	NA
1/31/25	Impaired Verbal Communication	S KA	NA	NA

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	S	S											
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	S	S											
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	S	S											
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S	S	S											
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	S	S											
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S	S	S											
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	S	S											
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	S	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		3T: 72M PE & 82M cellulitis	3T 89F: CVA aphagia	4N 55F: Diabetes	Rehab: 69F CVA R sided weakness											
Instructors Initials	RH		HS	KA	NS												

****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 (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- (1 a, b, c, d, e)-Great job this week! This week you did a great job discussing your patient's pathophysiology of their illness. You were also able to review the diagnostics and discuss how they correlated with the patient's diagnosis. You were able to discuss the importance of the medications that your patient was taking and how they impacted the plan of care. HS

Week 4 – 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. KA
Week 4 – 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 5 1(a-h) – Good work this week discussing alterations to your patient's health and making correlations based on priority nursing care needs. Your patient was admitted with a non-healing wound leading to osteomyelitis causing the needs for a below the knee amputation. You discussed her underlying medical conditions, including diabetes, that contributed to the pathophysiology of the disease process. In our discussions, you were able to correlate her lab values in the EHR to the symptoms she was experiencing. Specifically, you did well discussing hemoglobin and the priority nursing concerns related to a low hgb level. You were able to review the diagnostic testing performed, and identified the rationale behind the medical treatment of the amputation. You did a great job reviewing your medications and correlating them to her current and past medical history. Her nutritional needs were discussed, with an important emphasis placed on her protein intake for healing, in addition to monitoring her carbohydrate intake related to her diabetes. Great job being prepared for clinical and using your clinical judgement to answer my questions! NS

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

****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

Week 3 (2a-f)- You did a nice job with your assessment as well as documenting it within the electronic medical record. You also did a nice job communicating your findings to the RN. You were also able to discuss your focused assessment and the reasoning behind your decision of focus. HS

Week 4 – 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. KA

Week 4 – 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

Week 5 2(a,c,d,f) – Good work with your assessments this week, noticing numerous deviations from normal. You were able to notice numerous amputations which you correlated with poorly controlled diabetes. You also noticed psychosocial aspects of the assessment, noting a flat affect, which you correlated with her difficult medical history. Numerous additional abnormal findings were noted. (c) – You identified and attempted to prioritize the importance of repositioning related to her skin breakdown

risk. Despite your numerous efforts, she continued to decline. You were, however, able to eventually assess the skin on her back and noticed that is was intact. Based on her reluctance to move in bed, you analyzed appropriate assessment skills to be performed and implemented them as you best could. You documented thoroughly and accurately in the chart, including the use of nursing notes to document her refusal of wound care and repositioning. Great job this week! 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	S											
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	S	S											
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S	S	S											
d. Appropriately prioritizes nursing care. (Responding)			S	S	S	S											
e. Recognize the need for assistance. (Reflecting)			S	S	S	S											
f. Apply the principles of asepsis where indicated. (Responding)	S		S	S	S	S											
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			NA	NA	NA	NA											
h. Implement DVT prophylaxis (early ambulation, SCDs, ted hose, administer enoxaparin or heparin) based on assessment and physicians' orders (Responding)			S	S	S	S											
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	S	S	S											
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S	S	S											
	RH		**HS**	**KA**	**NS**												

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

Comments:

Week 3 (3 c, d, e)- You were able to prioritize your care for the day and adjust when necessary based on changes that occurred during the day. You were available to help others when needed, and ask for assistance when needed. HS

Week 4 – 3b – You had the opportunity to care for a patient on droplet precautions. You ensured proper precautions were followed throughout the day until they were discontinued. You made sure proper signage was visible and that the necessary supplies were easily available for those entering the patient's room. You also had the opportunity to take care of a patient receiving frequent neurological checks because of their diagnosis of a stroke. You monitored the patient closely and reported any changes immediately. Nice job! KA

Week 5 3(a) – You did a great job of maintaining standard precautions throughout the week. On day one, you noticed that masks were present outside of the patient's room and implemented the use of the mask during patient interaction. Good job of being observant and playing it safe. After further discussion, it was identified that contact precautions were charted, despite lack of additional isolation supplies in/outside of the room. You questioned this and learned that the precautions were due to bacteria present in the foot wound, that was no longer applicable following the amputation procedure. NS

Week 5 3(c,d) – You did an excellent job this week with time management and prioritization. You consistently rounded on your patient, provided motivation and encouragement, and ensured all aspects of care were addressed appropriately. You were independent in your care and did a great job organizing your day. NS

Week 5 3(i) – You identified and selected an evidence-based article pertinent to the patient situation. As you noted, self-efficacy and self-management of her disease processes were a concern based on her mental state and lack of motivation. You were able to review EBP that could be beneficial to the situation. Well done! 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: k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			S	S	S	S											
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			S	S	S	S											
m. Calculate medication doses accurately. (Responding)			S	S	S	S											
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			S	S	NA	NA											
o. Regulate IV flow rate. (Responding)	S		S	S	NA	NA											
p. Flush saline lock. (Responding)			S	S	NA	NA											
q. Monitor and/or discontinue an IV. (Noticing/Responding)			S	S	NA	NA											
r. Perform FSBS with appropriate interventions. (Responding)	S		S	NA	S	NA											
	RH		**HS**	**KA**	**NS**												

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

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

(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, l, m, n, p, q)- You did a nice job with medication administration this week! You were able to administer PO and IV push medications. You followed the rights of medication administration and completed all checks prior to administering. You were able to research each medication and answer all questions related to the medications. You did a good job flushing the IV and monitoring the site before during and after the administration of the medications. HS

Week 4 – 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, transdermal, and IV medications this week. You performed the medication administration process with beginning dexterity. KA
Week 4 – 3n –You had the opportunity to practice reconstituting a medication and drawing up it up from a vial and administering the medication 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 4 – 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 4 – 3q – You did a nice job monitoring your patient's IV site this week and documenting your assessment in the EMR. Great job! KA

Week 5 3(k,l,m,r) – You did very well this week with medication administration. You were prepared to answer questions based on the medication, indication, side effects, and nursing implications for each. The rights of medication administration were observed and safety checks were performed. Accurate dosage calculations were performed, specifically related to insulin administration via the corrective scale. You noticed that your patient had requested a PRN medication for vertigo the 1st day, and ensured that this medication was administered on day 2 without her prompting. Good use of nursing judgment to be prepared! Experience was gained with several PO medications in addition to a subQ injection. You were able to perform a FSBS using correct technique in order to properly dose the short-acting insulin that was prescribed. Correct technique was demonstrated with the subQ injection, well done! NS

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

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

Comments:

Week 3 (4a-c) You did a great job communicating with the nurse this week and informing her of the concern with the patient swallowing.

(4e)- Nice job overall this week on your CDG post! You were able to turn in your CDG on time, have the adequate word count for both posts, and you were able to provide to the conversation with the information you gave. Your initial response had both an in-text citation and a reference and your peer response had a reference. However, your

peer response did not have an in-text citation, therefore this was changed to an NI. Please review the CDG rubric prior to submitting the initial post and peer response in the following weeks. Please let me know if you have any questions. HS
I will review my CDG rubric prior to turning in my response for future CDGS. KA

Week 4 – 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 4 – 4e – Cora, you did a great job choosing a relevant EBP article and responding to the CDG questions on it this week. You were thorough with your responses to the CDG questions and your response to your classmate. You included an in-text citation and reference in both posts. Great job overall! Keep up the excellent work! KA

Week 5 4(a) – I think it's especially important to note the compliment received from your patient this week. During much of your care, you noticed that she had a flat affect and seemed to lack motivation following the amputation of her lower extremity. You were empathetic to the situation and understood the emotions she was experiencing. You did not allow this to negatively impact your care, and used therapeutic communication to provide motivation for repositioning. At the end of the 2nd day, your patient made it a point to compliment the care that you provided. Its awesome to see that you were able to make a positive impact on her throughout the week. Great job!! NS

Week 5 4(e) – You did a nice job with all of your CDG requirements this week. All areas of the CDG grading rubric were appropriately addressed for a satisfactory evaluation. See my comments on both of your posts for further details. For APA formatting, overall you did well. One tip for future success with APA formatting: in your initial post's reference, the journal title should be italicized along with the volume number and the journal title should have all first letters capitalized .. *Journal of Complementary & Integrative Medicine. 17*(4)… Otherwise, you were spot on! NS

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	S	S											
b. Utilize appropriate terminology and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)			~~S~~ NI	S	S	S											
			HS	**KA**	**NS**												

****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:
Week 3- My patient was on a heparin IV drip. I educated him on reporting chills, lightheadedness, new bruising, black and tarry stools, and other signs of bleeding. I also educated him on using a soft bristle toothbrush and shaving with an electric razor. This education was done through discussion. The teach back method was used to confirm learning. He asked multiple questions as well. Great job educating him on the heparin. Teach back method is great to ensure that the patient has retained the information that was provided.
(5b)-You did not state what resource you used to obtain the education provided to the patient. You must list the resources utilized on 5B. HS
I will for the future use a resource when educating and be sure to include it in my clinical tool. This week I used skyscape, Davis's drug guide.

Week 4- A teaching need for my patient is that she came from home alone and had difficulty speaking/ aphasia . I instructed her that her speaking and getting words out is difficult, but it is very important to keep working hard and talking as much as possible. It is up to those taking care of her to listen and be patient, she can get the words out, it just takes a little longer. Another thing I educated her on is that parroting speech is important in helping her as well. If she listens to me or someone speaks to her that if she repeats what she hears, she's working her brain and is picking up more words. My source was my instructor on giving me the parroting tip as well as further research on the NIH (National Institutes of Health). I am glad I could help and that you did your own research to support this education. I am glad you were able to help her work on gaining her communication ability back. KA

Week 5- My patient had many teaching needs. I educated my patient on cough and deep breathing, ambulation, turning/repositioning, wound care, hygiene care and others. I offered the patient many times to perform these tasks and educated on each need in multiple ways however she refused care multiple times. She would tell me she is too tired to do any of these interventions, when attempting to do these interventions would most likely improve her motivation, drowsiness, and improve how she's feeling overall. I used my knowledge on the subjects as well as skyscape to educate my patient. Very good! I appreciated your level of commitment in continuing to attempt to motivate her. These are all important topics to consider for any hospitalized patient, especially one that is post-op following an amputation. I hope she was at minimum working with PT/OT, but her lack of motivation is concerning for complications. Good job with education this week! NS

Week 6- An education need for my patient is slowing down her eating. Because of her stroke she has impulsive tendencies and would keep spooning food into her mouth while her mouth already had a bite. Her swallowing was difficult for her and she was on a honey thick/puree diet. This is a constant education during her rehab stay. I also educated on the need to sit up in bed when taking a drink from her honey thick liquids to prevent aspiration and to improve lung function/ expansion. I used skyscape for my 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	S	S	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)			S	S	S	S											
			HS	**KA**	**NS**												

****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.

Week 3- My patient lives at home with his wife. He also has three sons, and grandchildren that come to visit him and his wife often. Based on the family that you have listed it seems that he has a strong social support. Was there anything regarding the SDOH that could impact his patient care such as financial concerns or transportation issues? HS
(6a)- You satisfactorily completed your nursing care map. Nice job! HS

Week 4- My patient on Thursday came from home alone. In relation to her care she is unable to carry out ADLs, she is incontinent, has difficulty in coordination, and was very unkept and dirty. I asked if she had any family and she told me she had 3 children living and that her daughter helps take care of her. While in the hospital, I offered to assist in washing her up and she refused many times. I was able to wash up her hands and face as well as her perineal area after a bowel movement. I also was able to offer her facial shaving/ grooming. I can understand that her family might also be very similar to my patient and have a sense of pride that they feel they don't need assistance. Also family members could also have stopped offering care when she has refused multiple times. She could also be refusing other kinds of help either from pride and or financial issues. I was not able to meet her family while I was there. Another thing to add is if she is living alone and is not able to perform ADLs then her home must also

be unkept and she is living in an unsuitable environment. She confirms that she also smokes a half pack of cigarettes a day. Great job overall assessing your patient's SDOH and not assuming that because she has family support that all of her needs are being met. KA

Week 4 – 6a – You satisfactorily completed your care map on your patient this week. Please see comments on the rubric at the end of the tool for details. KA

Week 5- My patient came from a skilled nursing facility, she was having issues with her care there and is in the process of working with case management to locate another SNF to continue her rehab. Which is wonderful for her healing process as well as PT to get used to her new abilities and possibly a prosthetic following her BKA. She has limited family members, is divorced, but has friends that help keep her company and assist her as need. She is on Medicare and disability so there is possibly limitations on her financial status. For the future she would also possibly have issues with transportation to and from her appointments with her small support system. She also has trouble performing ADLs, this is mostly from lack of motivation coupled with physical weakness and new limitations. Excellent reflection on SDOH that could impact your patient. These are all pertinent concerns to note related to her discharge planning. Case management is a great resource to help collaborate with to best help meet her needs. NS

Week 6- My patient is from home with her son. He is her only son, and he is there to help transport her to appointments and to ensure she is given nutritious meals, well hydrated, and helps maintain her safety when she is at home. After she is discharged from Firelands if she is not ready for home with her son I see her possibly going to another form of rehab like a SNF for further rehab. She has insurance to help cover her costs to remain in Firelands rehab program until she is strong enough to go home.

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	S											
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S	S	S											
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S	S	S											
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		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	S											
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S	S	S											
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S	S	S											
h. Actively engage in self-reflection. (Reflecting)	S		S	S	S	S											
	RH		**HS**	**KA**	**NS**												

****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:

7a- An area of strength I have had this semester is that I am working on coming to labs and theory more prepared, by reviewing concepts more frequently than I did last semester. This is a great habit to start now and continue through the remaining courses in the program. RH

7b- An area that I feel I am struggling with is my IV math. I have gotten 2 wrong answers in my most recent tests for silly mistakes because I was not confident in my abilities. I plan to review my IV math and do 5 practice problems before each quiz to prepare myself. If you need additional assistance, any faculty or teaching assistant is able to help you. Kelly is great at breaking it down step by step if you need a refresher or are stuck on a specific area of the math problems. RH

Week 3- 7a-An area of strength for me is that I am managing my time better when assessing my patient and providing care. I work around other specialties more effectively than last semester. Great job! This can be very challenging at times and it is great to adapt and make the necessary changes during the shift in order to provide the best possible care to the patient. HS

7b- An area of improvement for me is that I need to review my IV catheter sizes as well as needle size for IM and SQ injections. I second guess myself often and I want to review this to be more confident. I will review IV catheter sizes, needle sizes, and how to administer IM and SQ injections twice every week prior to clinical. Great plan! HS

Week4 7a- An area of strength for me is my organizational skills. I didn't realize it until my instructor pointed out this ability during my medication administration. I try my best to keep myself organized in ways that make sense to me and hopefully those around me to prevent error in all aspects of my patient care. Yes! I feel you are very organized and prepared when providing care which makes you efficient and helps you provide care in a timely manner. KA
7B- An area of weakness I see in myself is during my medication administration I forgot to hold my sub Q needle in my patient for 10 seconds after I gave a medication. This resulted in some light bleeding at the site. This is something I knew I needed to do and in the moment, it slipped my mind. I will review my injection medication administration notes as well as find videos online to review prior to my next clinical days. Great job reviewing this skill to improve in the future. KA

Week 5
7a- An area of strength I noticed this week is that I kept chipping away at my patient and kept pushing and educating on my nursing interventions. I pushed to provide cough and deep breathing, hygiene care, wound care, turning/ repositioning and ambulation. I got nowhere because she just wasn't motivated/ had no energy for them. However, on the last day when administering her lunchtime insulin, she appreciated me continuing to try to provide these interventions. It kind of showed me that I wish I was able to get this sort of breakthrough sooner and get her to open up more on why she didn't want certain care. It proved to me that she was listening to me and understanding all of the education I gave to her, and that she thought I did a fine job being part of her care team. I love this reflection! It can be easy as the nurse to simply accept the patient's refusal and avoid discussions in future interactions. However, our job as the nurse is to continue to push and motivate, even if they don't want to listen. I appreciate your persistence in attempting to provide education. How awesome was it to hear her tell you at the end of day 2 that her pushing back on your meant you were doing the right things. She appreciated your level of care and compassion and was taking in what you had to say. It's great to see that you made an impact!! NS

7b- A weakness for me this week is that I forgot to click on the note on the glucometer after taking my sugars twice. I plan to write out a reminder on my clipboard for next time and make sure that I watch the video using the glucometer at Firelands one more time prior to my next clinical days. Good reflection and plan for improvement moving forward! Keep up the hard work. NS

Week 6
7a- A strength I had this week was working around my patients therapy schedule. I was able to assess her and get dressing changes and hygiene care done within her time windows.
7b- An area of improvement I noticed in myself this week is my communication skills. My patient was kind of flat and quiet when communicating with her and I'm also pretty quiet as well so it was hard for me to get her to talk and open up. I plan to look up nursing communication skills online as well as maybe skyscape and use the tips/tricks I lean to communicate more with my future patients.

Student Name: Cora Meyer	**Course Objective:** 6a
Date or Clinical Week: 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 listed 8 assessment findings however "feeds self" would not be considered abnormal. You listed 3 abnormal lab/diagnostic findings. You listed 7 risk factors for the patient. HS
	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 listed 4 nursing priorities and identified the priority problem. You determined an appropriate goal for the patient. You highlighted the pertinent related data. You could also include the hx of TIA and HTN as well. You listed 3 potential complications that could occur and the symptoms to monitor the patient for. HS
	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)**	3	
Responding	9. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	You provided a nice list of interventions pertinent to the priority problem. Be sure to prioritize them as: assess, do, educate on future care maps. You included a frequency for each intervention. You did not make all of them specific to the patient and include a rationale to state why the intervention was included in the plan of care. For example, auscultate the lung sounds would be an intervention and the rationale would include why you are doing so. HS
	10. Interventions are prioritized	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	2	
	11. All interventions include a frequency	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	
	12. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	2	

	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**	2	
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	**>75% complete**	**50-75% complete**	**<50% complete**	**0% complete**	2	You did not reassess the skin or lung sounds. You stated that the EKG was not resulted however that was not listed in the original diagnostic findings, neither was the BP. HS
	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.
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:
Nice job on your care map! You were able to identify the abnormal assessment findings to determine the priority problem for your patient. You then selected interventions and evaluated the plan of care to determine that it should be continued. There are a couple areas for improvement on your future care maps. Please see the comments above and let me know if you have any questions or concerns. HS

Total Points:41/45

Faculty/Teaching Assistant Initials: HS

Student Name: Cora Meyer	**Course Objective:** 6
Date or Clinical Week: 4	

	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 listing the abmornal assessment findings, labs/diagnostics, and risk factors for your patient. I believe they did officially diagnose her with a stroke so this would be a risk factor you would want to include. 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 your patient's nursing priorities and highlighting the highest priority. You wrote an appropriate goal for you chosen nursing priority. You highlighted the related data in the noticing section. You identifies 3 complications for your nursing priority and signs and symptoms for each the nurse should assess for. 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)**	3	
Responding	9. List all nursing interventions relevant to the top nursing priority.	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	You did a nice job listing relevant nursing interventions for your identified nursing priority. You made sure the nursing interventions were prioritized, had frequencies, were individualized, realistic, and had rationales. You would want to include consulting speech as an intervention as well. Also you consults would be timed as on admission, before discharge, or prn. 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**	3	
	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**	3	You did a nice job reassessing all highlighted data in the noticing section. In the future state the specific assessment finding that is unchanged versus stating the whole assessment is unchanged (i.e. generalized weakness still present versus no change in neuro assessment). 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.
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: **You satisfactorily completed your second care map for the semester! Congratulations! See comments above on areas to consider in the future when you are writing your care maps. KA**

Total Points: **45/45**

Faculty/Teaching Assistant Initials: KA

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	S	
Faculty/Teaching Assistant Initials	RH	RH	RH	RH	RH	RH	RH	
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

*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. RH

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

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