EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2025

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Seth Linder

Final Grade: Satisfactory/Unsatisfactory

Semester: Fall

Date of Completion:

Faculty: **Kelly Ammanniti, MSN, RN, CHSE; Monica Dunbar DNP, RN; Rachel Haynes MSN, RN, Brian Seitz, MSN, RN, CNE**

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:
Care Maps
Patient/Family Education
Preparedness for Clinical/Clinical Performance
Online Clinical Discussion Groups
Administration of Medications
Nursing Skills Completion of Clinical Performance Tool
Written Reports of Clinical Experiences
Documentation
Conferences with the Faculty
Lasater Clinical Judgment Rubric
vSim
Simulation Scenarios

7/11/25 KA

Absence: (Refer to Attendance Policy)

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

Faculty's Name	Initials
Kelly Ammanniti	KA
Monica Dunbar	MD
Rachel Haynes	RH
Brian Seitz	BS

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 weekly competency 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
8/29/25	Acute Pain	S KA	NA	NA

Objective																		
1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
Competencies: a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		S	N/A	N/A	N/A	S	S											
b. Provide care using developmentally appropriate communication.		S	N/A	N/A	S	S	S											
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		S	N/A	N/A	N/A	S	**S**											
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		S	N/A	N/A	N/A	S	S											
e. Identify stage of growth and development (**Erikson's Stages**)(**List Below and explain reason for choice)***		S	N/A	N/A	S	S	S											
Clinical Location Age of patient		Fischer Titus OB 30	N/A	N/A	Boys & Girls Club	Fisher Titus ER 25	Firelands OB 38											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: All, H&V: 1A, B, E BG Club: 1B, E Flu: All**

Comments:

Week 2 (1e)- Middle adulthood, generativity vs. stagnation, because the patient is nurturing and creating the next generation by giving birth to her child. Nice job! KA FTMC OB Objective 1 A, B, C, D: This week in OB you had the opportunity to work with postpartum mother and newborns. You did an awesome job with providing appropriate care and communication for the developmental stage of the patients, and provided systematic and developmentally appropriate assessment techniques. We

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

discussed some of the safety measures of each of the patients as well such as fall risk with the patient with the spinal headache and circumcision safety with a newborn. Great job! MD

Week 5 (1e)- Industry vs. Inferiority - Children build confidence by learning and practicing new skills, so fire safety education supports their sense of competence and accomplishment. Nice job correctly identifying the school-age population at BG club. KA
Week 5: 1b- You did a great job interacting with the children at the Boys and Girls Club while using developmentally appropriate communication. This can be a chaotic and challenging environment, but your group did well and kept the kids engaged. BS

Week 6 (1e)- Intimacy vs. Isolation - At this stage the focus is on forming close and meaningful relationships, and her health concerns may affect her ability to feel supported and connected. Nice job identifying the Erikson's stage for your patient in the ER. KA
Week 6 – 1a – You did a nice job discussing a patient you cared for with severe abdominal pain this week while on clinical in the ER department. KA

Week 7 (1e)- Trust vs. Mistrust – The newborn is in this stage of Eriksons growth and development because this is when care, feeding, and comfort from the mother help the baby develop a sense of security. If the baby's needs are not met, the baby may develop mistrust toward their caregivers.

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

Objective

1. Describe the principles of growth and development and knowledge of pathophysiology as a basis for the provision of safe, quality nursing care to children and the childbearing family across the health-illness continuum. (1,2,3,4,7)*

Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	Final
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
Competencies: f. Describe psychological changes in response to the expectant mother's pregnancy. **Maternal**		S	N/A	N/A	N/A	N/A	S											
g. Discuss prenatal influences on the pregnancy. **Maternal**		S	N/A	N/A	N/A	N/A	S											
h. Identify the stage and progression of a woman in labor. **Maternal**		S	N/A	N/A	N/A	N/A	S											
i. Discuss family bonding and phases of the puerperium. **Maternal**		S	N/A	N/A	N/A	N/A	S											
j. Identify various resources available for children and the childbearing family.		S	N/A	N/A	N/A	N/A	S											
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		S	N/A	N/A	S	S	S											
l. Respect the centrality of the patient/family as core members of the health team.		S	N/A	N/A	N/A	S	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: 1K, L H&V: 1J, K BG Club: 1K Flu: 1 K, L**

Comments:

FTMC OB Objective 1 J, K, L: During our day in OB, you were able to identify resources available for a postpartum mother that we provided mother/newborn education to including healthcare providers and discussed utilizing support systems. You were also able to receive a different perspective on gestational carriers by learning about the process with the unit secretary and asking questions to the parents of a newborn from a gestational carrier who were from London. We provided a newborn bathing demo for these parents and we were able to use their products that they brought with them for the bath along with learning about their culture and some of the differences of London versus the US. Awesome job! MD

Week 5: 1k- While interacting with the children at the Boys and Girls Club you did a great job acknowledging their perspectives, diversity, ages, and cultural factors, which all influence their behavior. BS

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

Week 6 – 1k – You identified cultural implications that you observed while you were in the ER on clinical as reproductive health discussions and discussed your observations in your CDG response. KA

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

Objective																		
2. Integrate principles of decision-making in utilizing evidenced-based practice in the nursing process in providing care for the childbearing family and children encompassing cultural sensitivity and diversity. (1,2,3,4,5)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Engage in discussions of evidenced-based nursing practice.		S	N/A	N/A	N/A	S	S											
b. Perform nursing measures safely using Standard precautions.		S	N/A	N/A	N/A	S	S											
c. Perform nursing care in an organized manner recognizing the need for assistance.		S	N/A	N/A	N/A	S	S											
d. Practice/observe safe medication administration.		S	N/A	N/A	N/A	S	S											
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		S	N/A	N/A	N/A	S	S											
f. Utilize information obtained from patients/families as a basis for decision-making.		S	N/A	N/A	N/A	S	S											
g. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting) **(List Below)***		S	N/A	N/A	S	S	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: All H&V: 2B, C, G BG Club: 2G Flu: 2B, C, D, F, G**

Comments:

Week 2 (2g)- Social Determinants of Health that could have potential to influence patient care would be economic stability because taking care of a baby can be very expensive when it comes to needs such as diapers, formula, or childcare. Another SDOH could be social and community context with cultural expectations around childbirth and motherhood such as role pressure. Great thoughts. What are your thoughts about family support? KA

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

FTMC OB Objective 2 A, B, C, D, E, F: Awesome job this week with providing safe medication practices! You were able to identify the rights of medication administration along with providing and demonstrating the safety checks with administration including dosage. You were able to discuss the medications and why the patient was receiving them. You were also able to describe how to administer an IM injection and proficiently complete the administration without difficulty and minimal assistance. We also had conversation on evidenced-based practices, perform standard precautions, organize care and recognized when assistance was needed, and utilize information for decision making. Great job! MD

Week 5 (2g)- While teaching fire safety at the boys and Girls Club, I noticed that factors such as low-income housing, limited resources, and cultural or language barriers could impact how children apply safety education at home. This showed me the importance of using simple language, visuals, and hands on activities to make information accessible for all learners. Nice job! These factors can also influence the education you provide of certain topics related to their availability and access to different resources. KA

Week 6 (2g)- The patients care was influenced by health literacy and cultural sensitivity. The nurse responded by using clear explanations and encouraging questions, which helped the patient understand her diagnosis and discharge instructions. Nice job looking at the SDOH of health literacy. I think this is one that is often over looked for more obvious factors such as lack of support and financial instability. KA
Week 6 – 2b, c – You had the opportunity to work with Amber Farrell RN in the ER and she reported you were excellent with demonstrating your knowledge of your nursing skills and responsibilities while on clinical and had multiple opportunities to perform different nursing skills in the ER. KA
Week 6 – 2d – You had the opportunity to administer PO medications to the patient you worked with in the ER this week. KA

Week 7 (2g)- There are factors such as access to postpartum care, availability of social support, and cultural beliefs that could potentially influence the mothers ability to recover and follow medical recommendations. These can also influence how the mother is able to bong with the baby. As a nurse if you can recognize these, you will be able to provide culturally appropriate and individualized care.

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

Objective																		
3. Summarize the legal, moral and ethical issues related to care of children and the childbearing family. (2,6,7)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Act with integrity, consistency, and respect for differing views.		S	N/A	N/A	S	S	S											
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		S	N/A	N/A	S	S	S											
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		S	N/A	N/A	S	S	S											
d. Critique examples of legal or ethical issues observed in the clinical setting. **(List Below)***		S	N/A	N/A	S	S	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: All H&V: All BG Club: All Flu: All**

Comments:

Week 2 (3d)- An example of an ethical issue is with the patient that had the surrogate child. Some people argue that surrogacy can exploit women, and especially those in financial hardship, if they feel pressured to be surrogates for the money. Great ethical concern. You can also think about it from a legal perspective and what if the surrogate decides they want to keep the baby, especially if her egg was used for conception. KA
FTMC OB Objective 3 A, B, C: Great job with acting with integrity and respecting different views on care of the patients we had this week in clinical! You were also able to respect health and medical information and followed the Student Code of Conduct policy! MD

Week 5 (3d)- I recognized the ethical responsibility to remain within my role as a student nurse and not provide instruction beyond fire safety education.

Week 5: 3a,c- At the Boys and Girls Club, you acted with integrity, consistency, and respect for differing views and perspectives.

Week 6 (3d)- Confidentiality can be a concern in an ER because conversations can easily be overheard. Nurses work hard to protect patient privacy. Another ethical issue was making sure there was informed consent for the CT scan and explaining the CT results and discharge plan clearly to the patient. I can imagine the difficulty of keeping patient privacy in such a busy environment. KA

Week 6 – 3a, b, c – You were professional and considerate with all the care you provided. You made sure to keep patient privacy and follow HIPPA regulations throughout the day. You also maintained all the standards in the FRMCSN code of conduct while in the ER. KA

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

Week 7 (3d)- A legal/ethical issue observed in this clinical setting was the requirement for one of the fathers to have an affidavit to be listed on the newborns birth certificate. This shows the importance of following legal documentation procedures while also addressing the family's needs.

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

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Develop and implement a priority care map and/or plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		S	N/A	N/A	N/A	S	S											
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		S	N/A	N/A	N/A	N/A	S											
c. Summarize witnessed examples of patient/family advocacy.		S	N/A	N/A	N/A	S	S											
d. Provide patient centered and developmentally appropriate teaching.		S	N/A	N/A	S	S	S											
e. Analyze the involved pathophysiology of the patient's disease process. **(noticing, interpreting, responding)**		S	N/A	N/A	N/A	N/A	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: 4A, C, E H&V: 4B, D BG Club: 4D Flu: 4B, D**

Comments:

Week 2 (4d)- I provided one of the mothers on the unit with postpartum education over things such as how to feed the baby, how to bathe the baby, etc. The information was provided from a handout that was made for the nurses to use while educating the patients on the floor. Nice job! This is very important eduction for the postpartum mother and family. KA

FTMC OB Objective 4 C, E: Great job analyzing pathophysiology of your patient's disease process! You also did a great job witnessing examples of patient advocacy when we were providing the bath demonstration to the newborn with the parents from London! You also were able to witness advocacy with your postpartum mother who requested a blood patch for her spinal headache! MD

Week 2 – 4a – You did a great job satisfactorily completing your care map this week on the mother you cared for in postpartum. KA

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

Week 5 (4d)- I provided education, to the kids at the Boys and Girls Club, on fire safety. We discussed topics such as how to use a fire extinguisher, stop drop and roll, and escape plans. Nice job! Did the students practice stop drop and roll? I bet they enjoyed that if they did. KA
Week 5: 4d- As you no doubt noticed at the Boys and Girls Club, when providing teaching to kids of various ages, we must continually adjust our approach based on their developmental level. BS

Week 6 (4d)- The nurse taught the patient about appendagitis and ovarian cysts using clear, simple language and explained how NSAIDs would help with pain and inflammation. She encouraged questions and reviewed the return precautions, supporting the patients autonomy. Great job explaining observed education. Was appendagitis new information to you or had you previously learned about this topic? KA

Week 6 – 4a, c – You did a great job identifying the top nursing interventions for your patient this week. You discussed how they responded to intervention and if it was effective or not. You were able to describe a situation of patient advocacy in the ER setting that you witnessed this week while on clinical related to the nurse advocating the patient completely understood the healthcare providers diagnosis and findings. KA

Week 7 (4d)- The nurse gave the patient education on postpartum self-care such as peri care, rest, nutrition, and how to manage pain at home. She also taught the mother about newborn things like safe sleep practices and when to call the health care provider.

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

Objective																		
4. Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*																		
Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
f. Correlate the diagnostic tests with the patient's disease process. **(noticing, interpreting, responding)**		S	N/A	N/A	N/A	S	S											
g. Correlate the pharmacotherapy in relation to the patient's disease process. **(noticing, interpreting, responding)**		S	N/A	N/A	N/A	S	S											
h. Correlate the medical treatment in relation to the patient's disease process. **(noticing, interpreting, responding)**		S	N/A	N/A	N/A	S	S											
i. Correlate the nutritional needs/diet in relation to the patient's disease process. **(noticing, interpreting, responding)**		S	N/A	N/A	N/A	N/A	S											
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. **(noticing, interpreting, responding)**		S	N/A	N/A	N/A	N/A	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: 4F, G, H H&V: N/A BG Club: N/A Flu: N/A**

Comments:

FTMC OB Objective 4 F, G, H, I, J: During our clinical day we were able to obtain this objective with a newborn who was receiving sepsis work up due to a traumatic delivery and symptoms they were experiencing. We were able to correlate blood glucose and temperature challenges the newborn was experiencing to a possible diagnosis along with the medications being administered. You also did a great job putting pieces together with circumcision care and a patient with a spinal headache. Awesome job! MD

Week 6 – 4f, g, h – You did a nice job discussing the diagnostics, medical treatments, and medications that were performed on the patient you discussed in your CDG and how they related to their diagnosis. KA

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

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

Objective

5. Collaborating professionally with members of the health care team, childbearing and child-rearing families, faculty, and peers through written, verbal and nonverbal methods, and by conferencing, networking, and posting through computer technology. (1,3,5,6,7,8)*

Weeks of Clinical	1	2	3	4	5	6	7	**Midterm**	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Demonstrate interest and enthusiasm in clinical activities.		S	N/A	N/A	S	S	S											
b. Evaluate own participation in clinical activities.		S	N/A	N/A	S	S	S											
c. Communicate professionally and collaboratively with members of the healthcare team.		S	N/A	N/A	N/A	S	S											
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		S	N/A	N/A	N/A	N/A	S											
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		S	N/A	N/A	N/A	N/A	S											
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		S	N/A	N/A	N/A	S	S											
g. Consistently and appropriately post comments in clinical discussion groups.		~~S~~ NA	N/A	N/A	N/A	~~S~~ U	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: 5A, B, C, F, G H&V: 5A, B, C BG Club: 5A, B Flu: 5A, B, C**

Comments:

FTMC OB Objective 5 A, B, C, F: During this clinical experience you were able to evaluate your participation in activities and communicate professionally with the care you provided your patients with the nursing staff. You demonstrating awesome enthusiasm in clinical with excitement with watching a newborn circumcision, various nursing assessments including 24-hour newborn testing, and bathing demonstration. The anesthesiologist stated he was excited about your enthusiasm during the spinal blood patch placement and was happy to assist with your learning! Amazing job this week! MD

Week 2 – 5g – You completed your care map this week versus submitting your OB CDG questions therefore this competency is NA. KA

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

Week 5: 5a,b- You showed interest and enthusiasm as you presented your material to the children at the Boys and Girls Club. Nice work! BS

Week 6 – 5a – You had the opportunity to see how to use a butterfly needle during a lab draw and its implications while on clinical in the ER. You worked with Amber Farrell RN in the ER and she marked you as excellent in all areas. She made the comment, "Student was very eager to learn new things and help out." KA
Week 6 – 5f – You did a nice job writing a concise SBAR report related to your patient this week in the ER. The only addition would maybe include a full abdominal assessment in your assessment section. Nice job! KA
Week 6 – 5g – You thoughtfully responded to all required CDG questions related to your ER experience. You did not include an in-text citation or a reference to support your ideas. Remember you need to include both of these in your posts to receive a satisfactory. Please make sure to write how you will address receiving a U in this competency and prevent receiving this rating for this competency in the future. KA

Week 6 (5g) U - I received a U because I did not include an in-text citation or reference in my CDG. To prevent this in the future, I will use reliable resources, double check my work, and use proper citations before I submit my documents.

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

Objective																		
6. Critique own strengths and areas for improvement modifying behaviors accordingly to achieve personal and professional goals. (7,8)*																		
Weeks of Clinical	1	2	3	4	5	6	7	Midterm	8	9	10	11	12	13	14	15	Make up	**Final**
	8/22	8/29	9/5	9/12	9/19	9/26	10/3		10/10	10/17	10/24	10/31	11/7	11/14	11/21	11/28		
a. Recognize areas for improvement and goals to meet these needs. **(List Below)***		S	N/A	N/A	S	S	S											
b. Accept responsibility for decisions and actions.		S	N/A	N/A	S	S	S											
c. Demonstrate evidence of growth and self-confidence.		S	N/A	N/A	S	S	S											
d. Demonstrate evidence of research in being prepared for clinical.		S	N/A	N/A	S	S	S											
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		S	N/A	N/A	S	S	S											
f. Describe initiatives in seeking out new learning experiences.		S	N/A	N/A	S	S	S											
g. Demonstrate ability to organize time effectively.		S	N/A	N/A	S	S	S											
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		S	N/A	N/A	S	S	S											
i. Demonstrates growth in clinical judgment.		S	N/A	N/A	S	S	S											
	KA	KA	KA	KA	KA	KA												

****Evaluate these competencies for the offsite clinicals: ER: All H&V: All BG Club: All Flu: All**

Comments:

Week 2 (6a)- An area of improvement for me could be time management. I could work on this by creating a prioritized plan of care at the beginning of each clinical, and making sure that at least 90% of the tasks are completed on time. This is a great idea to help with time management. I hope it works when you implement it next time. KA

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

FTMC OB Objective 6 D, E, F, G, H, I: I am so proud of you for being prepared for clinical, exhibiting professional behavior, actively seeking out new learning experiences, your organization, and growth in clinical judgment! You did an awesome job displaying an ACE attitude in clinical this week! Keep up the amazing work! MD

Week 5 (6a)- An area of improvement for me this week could be making sure that the education is more interactive for the kids. I will apply this skill in future patient and community education opportunities to practice. This would be a good consideration when developing the education you are providing to the students at St. Mary's. The more interactive you make it, the more you will keep their attention. KA
Week 5: 6e- Professional behavior was observed throughout your time at the Boys and Girls Club this week. BS

Week 6 (6a)- An area of improvement for me this week could be improving my confidence with clinical skills such as collecting specimens. My goal is to seek more hands-on opportunities and clinical and ask for guidance from experienced nurses to build my confidence. The more skills and experiences you have the more confident you will become. The nurse you worked with did not notice this and commented how eager you were to learn. KA

Week 6 – 6e – You were identified as being actively engaged while in the ER. You actively demonstrated your knowledge and nursing skills while participating in clinical. You demonstrated excellent professionalism and communication skills. KA

Week 7 (6a)- An area of improvement for me this week could be confidence in doing newborn assessments. To work on this skill I will practice while being supervised and review the textbook/skills videos to build more confidence.

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

Student Name: Seth Linder	Course Objective: 4: Construct nursing care plans and clinical reports that demonstrate mastery of clinical judgment skills through holistic, age-appropriate nursing care of the childbearing family and children. (1,2,6)*
Date or Clinical Week: 2	

	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 all the abnormal assessment findings, lab findings, and risk factors for your patient. In the future consider putting the patient's fundal assessment in the assessment box even though it was normal since a fundus it not a normal thing to palpate on a nonpregnant woman. 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 the patient's nursing priorities and highlighting the problem with the highest priority. You set a realistic goal. You highlighted the pertinent information. Consider highlighting the epidural in the assessment box since you are relating her pain to the spinal headache. You included pertinent complications and signs and symptoms the nurse should assess for related to your nursing priority. 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 all nursing interventions relevant for the nursing priority. Interventions were prioritized, included frequency, were realistic, and were individualized. I would consider including an intervention related to dimming the lights and creating a quiet
	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	environment since you highlighted a bright room in your assessment section. KA

	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 great job reassessing all highlighted information in the assessment section. You stated you would discontinue the patient's 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: Nice job satisfactorily completing your care map. See comments above for suggestions to improve your care maps in the future. KA

Total Points: 45/45

Faculty/Teaching Assistant Initials: KA

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2025
Skills Lab Competency Tool

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**														
	Adult Head to Toe Assessment (*1, 2, 5, 6)	Breastfeeding and Bottle Feeding (*1,2,3, 6)	Breast Assessment (*1, 2, 3, 4, 5, 6)	Circumcision Care (* 1,2,6)	Broselow Tape (*1,2,3,5)	Leopold's (*1, 2, 3, 5, 6)	APGAR (*2, 3, 4, 5, 6)	Breast Self-Exam (*1, 4, 5, 6)	Pediatric Vital Signs (*1,4,5)	Pediatric Lab Values (*1,4,5)	C-Section Care (*1, 2, 5, 6)	Health Literacy (*2,5,6)	Safety (*1,2,3,5,6)	Postpartum Assessment (* 1, 2, 6)	Newborn Bath and Cord Care (*2, 4)
	Date: 8/20 & 8/21	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

* Course Objectives

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**									
	Fundus Assessment (*1, 2, 5, 6)	Lochia Assessment (*1, 2, 4)	Pain Assessment (*1, 2, 5, 6)	Newborn Assessment (*1, 2, 5, 6)	Postpartum and Newborn DC Ed (* 1, 2, 6)	Pregnancy History (*1, 2, 3, 4, 5, 6)	Newborn Thermo. (*1, 2, 3, 4, 5, 6)	EDD (*1, 2, 3, 4, 5, 6)	Meditech (* 1,2,3, 5, 6)	Amazing Race (*1, 2, 3, 4, 5, 6)
	Date: 8/20 & 8/21	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 8/20 & 8/21**	**Date: 10/20**
Evaluation	S	S	S	S	S	S	S	S	S	
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	

* Course Objectives
Comments:

Firelands Regional Medical Center School of Nursing
Maternal Child Nursing 2025
Simulation Evaluations

Simulation Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Simulation**												
	Pregnancy and PP Simulation (*1, 2, 3, 5, 6)	vSim Maternity Case 1 (*1, 2, 3, 5, 6)	Shoulder Dystocia and Newborn Care (*1, 2, 3, 5, 6)	vSim Maternity Case 4 (*1, 2, 3, 5, 6)	Patient Care Safety Escape Room (*1, 2, 3, 5, 6)	Pediatric Respiratory Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 3 (*1, 2, 3, 5, 6)	Pediatric GI Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 1 (*1, 2, 3, 5, 6)	Student Developed Simulation (*1, 2, 3, 5, 6)	vSim Pediatric Case 4 (*1, 2, 3, 5, 6)	Comprehensive Simulation (*1, 2, 3, 5, 6)	Empathy Simulation (*1, 2, 3, 5, 6)
	Date: 9/11 & 9/18	**Date: 9/22**	**Date: 9/25 & 10/2**	**Date: 10/6**	**Date: 10/16 & 10//17**	**Date: 10/23 & 10/30**	**Date: 11/3**	**Date: 11/4 & 11/5**	**Date: 11/18**	**Date: 11/18**	**Date: 11/21**	**Date: 11/21**	**Date: 9/18**
		Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz			Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz		Pre-Quiz, Scenario, SBAR, and Post Quiz		
Scenario Evaluation	S	S	S										S
Survey	S		S										S
Faculty Initials	KA	KA	KA										KA
Remediation: Date/Evaluation/Initials	NA	NA	NA										NA

* Course Objectives

Comments:

The student has satisfactorily completed the assigned vSim and met the established objectives by obtaining at least 80% on the scenario (including SBAR), and post-simulation quiz by the due date and time.
vSim Objectives
9/22/2025 vSim Maternity Case 1

1. Performs focused antepartum assessment of patient with severe preeclampsia. (1, 2, 4)*
2. Recognizes signs and symptoms of severe preeclampsia (hypertensive disorders). (1, 2)*
3. Communicates severe preeclampsia to the interprofessional team. (1, 2, 3, 5)*

4. Administers prescribed antihypertensive medication (magnesium sulfate). (1, 2, 3, 5)*
5. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*

* Course Objectives

10/6/2025 vSim Maternity Case 4

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
2. Recognizes signs and symptoms of umbilical cord prolapse. (1, 2, 5)*
3. Performs emergent nursing management strategies for umbilical cord prolapse. (1, 2, 3, 4, 5)*
4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*

* Course Objectives

11/3/2025 vSim Pediatric Case 3

1. Identify and describe patient history, physical assessment findings, and diagnostic information related to dehydration.
2. Prioritize and implement evidence-based nursing interventions that are culturally and situation appropriate for the pediatric patient.
3. Implement clinical orders, patient safety measures, and provide education using therapeutic and confidential communication for the pediatric patient and family members.

*Course Objectives

11/18/2025 vSim Pediatric Case 1

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
2. Recognize signs and symptoms of seizure activity. (1, 2)*
3. Demonstrate appropriate nursing interventions for a patient experiencing a seizure. (1, 2, 3, 4, 5, 6)*
4. Demonstrate therapeutic communication skills when interacting with children and their families. (1, 3, 5, 6)*
5. Discuss how social determinants of health can influence the management of a chronic illness. (2, 3)*

* Course Objectives

11/21/2025 vSim Pediatric Case 4

1. Select physical assessment priorities based on individual patient needs. (1, 2)*
2. Identifies developmentally appropriate and culturally competent nursing interventions based on patient care needs. (1, 2, 4)*
3. Prioritizes patient safety measures and appropriate nursing interventions for a patient with an acute sickle cell pain crisis. (1, 2, 3, 4, 5)*
4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse; C=Charge

STUDENT NAME(S) AND ROLE(S): Bower (C), Fahey (A), Linder (M)
GROUP #: 4
SCENARIO: Pregnancy and PPH
OBSERVATION DATE/TIME(S): 9/11/2025 1200-1330

CLINICAL JUDGMENT COMPONENTS					OBSERVATION NOTES
NOTICING: (1, 2, 5) *					Noticed VS appear WNL. Notices rhythm on fetal monitor. Patient requests mountain dew and cheeseburger, states she is peeing a lot. Notices contractions on fetal monitor, and that they should not occur at 33 weeks. Recognizes UA with +THC, glucose, nitrates. Pain rated at 4/10. Mona CO feeling dizzy and lightheaded. VS reassessed. Notices low BP and rising HR. Bleeding discovered. Notices uterus is firming up in response to fundal massage.
• Focused Observation:	E	A	D	B	
• Recognizing Deviations from Expected Patterns:	E	A	D	B	
• Information Seeking:	E	A	D	B	
INTERPRETING: (2, 4)*					Interprets the need for FSBS. FSBS 225- interpreted as being high. Prioritizes need for fetal monitor. UA results interpreted as abnormal. Prioritizes education on the effects of marijuana. HR interpreted as being high, BP low. Fundus recognized as boggy. Recognize need to massage fundus. Interprets need to weigh pads. BP interpreted to be improving with fundal massage.
• Prioritizing Data:	E	A	D	B	
• Making Sense of Data:	E	A	D	B	
RESPONDING: (1, 2, 3, 5) *					Nurse enters room, identifies patient, begins assessment, VS. Inquires about past pregnancies. Urine sent to lab. Asks questions to determine past/present gestational diabetes. Educates mom about marijuana effects on fetus. Patient assisted to left side. Call to provider, orders received for IV fluid, Nifedipine, US to verify dates. Orders read back. Inquires about home safety. Nifedipine and acetaminophen prepared, patient identified, allergies confirmed, IV fluid initiated, acetaminophen administered. Call to HCP regarding nifedipine. Nifedipine administered. Patient identified. PPH noticed- (you should immediately massage fundus). Fundus massaged after delay. Mona asks for wife to be called. Call to provider to report bleeding, dizziness, boggy uterus. HCP asks how much blood lost. Weighs pad and calls back. Order received for methylergonovine. Methylergonovine prepared and administered. Orders received. Methylergonovine explained to patient. Allergies confirmed, patient identified, methylergonovine administered. BP reassessed.
• Calm, Confident Manner:	E	A	D	B	
• Clear Communication:	E	A	D	B	
• Well-Planned Intervention/ Flexibility:	E	A	D	B	
• Being Skillful:	E	A	D	B	

REFLECTING: (6) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Team discussion of the scenarios. Team recognized the significance of teamwork and communication, and did well with each. Discussed the importance of SBAR communication when calling the provider. Also discussed risk factors for postpartum hemorrhage and that it is ok to ask for help or offer help to team members. Discussed the importance of providing education to patients.
SUMMARY COMMENTS: * = Course Objectives **Satisfactory completion of the simulation scenario is a score of "developing" or higher in all areas of the rubric.** **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning** **Scenario Objectives:** 1. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)* 2. Identify social determinates of health and provide education and resources for pregnancy (1, 3, 4, 5)* 3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the PPH. (1, 2, 4, 5)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)* *Course Objectives	**You are Satisfactory for this scenario! BS** Lasater Clinical Judgement Rubric Comments: Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation

STUDENT NAME: Seth Linder OBSERVATION DATE/TIME: 9/18/25

REFLECTING: (6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	You reflected on many aspects of your time wearing the empathy belly. Your responses were thoughtful and reflective on how you felt and you compared your experience to a real pregnancy. Great job. I enjoyed seeing your pregnancy photo!
SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric **Simulation Objectives:** 1. Identify common possible discomforts of the pregnancy and how to empathize with the pregnant patient and childrearing family. (1, 2, 6)* 2. Describe how patient-centered care is dependent on past medical history, cultural history, and social history. (1, 2, 3, 4)* 3. Describe your psychological and social response to the simulation and how it impacts the care provided to the pregnant patient and child-bearing family. (1, 5, 6)* **Developing to accomplished is required for satisfactory completion of this simulation.**	**Comments** **You are satisfactory for this simulation.**

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

Student Roles: A=Assessment Nurse; M=Medication Nurse; C=Charge Nurse

STUDENT NAME(S) AND ROLE(S): Bower (M), Fahey (C), Linder (A)
GROUP #: 4
SCENARIO: Shoulder Dystocia and Newborn Care
OBSERVATION DATE/TIME(S): 9/25/25 1200-1330

CLINICAL JUDGMENT COMPONENTS					OBSERVATION NOTES
NOTICING: (1,2,5) *					Obtain vitals
• Focused Observation:	E	A	D	B	Pain assessment: rating, location, duration
• Recognizing Deviations from Expected Patterns:	E	A	D	B	Leopolds maneuver to identify baby's position
• Information Seeking:	E	A	D	B	Cervical exam done after calling the healthcare provider but before nubain administration
					Notice change in fetal strip after nubain administration
					Notice baby is stuck and begin HELPERR maneuvers
					APGAR 1 minute: 9
					Newborn assessment: thorough assessment (sucking, rooting, palmar)
INTERPRETING: (2,4) *					Interpret vitals as WDL
• Prioritizing Data:	E	A	D	B	Offer nubain as pain relief due to patient not wanting epidural
• Making Sense of Data:	E	A	D	B	Interpret fetal monitor as accelerations
					Prioritize antibiotics
					Interpret fetal monitor after nubain administration as decelerations. Correlate that to head compression
RESPONDING: (1,2,3,5) *					Verify allergies when initially in room (medication nurse)
• Calm, Confident Manner:	E	A	D	B	Education provided about nubain and if it is safe for the baby
• Clear Communication:	E	A	D	B	Medication administration: penicillin- check name/DOB, scan patient, scan medication. Hand primary fluids below secondary fluids. Provide education about why getting this medication
• Well-Planned Intervention/ Flexibility:	E	A	D	B	Call healthcare provider with update on patient status and ask about nubain administration.

• Being Skillful: E A D B	Medication administration: nubain. Verify name/DOB, verify allergies, scan patient, scan medication, correct dose, correct needle used, correct technique, use of needle safety. Call healthcare provider, put patient in McRoberts position, suprapubic pressure, hands and knees, posterior arm, evaluate for episiotomy, rotational maneuvers Following delivery: dry off baby, place in warmer, Medication administration for baby: education provided to mom about vitamin K and erythromycin ointment. Gets consent to administer. Scan baby, scan medication, correct dose, correct needle size, correct technique, use of needle safety.
REFLECTING: (6) * • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Team discussion of scenario and interventions performed. Group identified good communication throughout the simulation. The team was able to identify strengths and an area for improvement for future simulations. Some team members stated they would have liked to educate more on risk factors for shoulder dystocia prior to delivery to help prepare mom and support person. Emotional intelligence questions asked in relation to patient point of view and support person point of view. Questions also asked about student emotions and how that impacted their actions in their scenario. Reflection on how some emotions wanted to speed through their tasks but after taking a breath and slowing down in order to do tasks properly and efficiently to care for patient in best way possible.
SUMMARY COMMENTS: * = Course Objectives **Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.** **E= Exemplary** **A= Accomplished** **D= Developing** **B= Beginning** **Scenario Objectives:** **1. Select physical assessment priorities based on individual patient needs. (1, 2)*** **2. Identify risk factors and implement appropriate nursing interventions upon completion of focused nursing assessment. (1, 2, 3, 4, 5)***	**You are Satisfactory in this simulation! RH** Lasater Clinical Judgement Rubric Comments: Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads. Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse. Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Displays proficiency in the use of most nursing skills; could improve speed or accuracy. Reflecting: Independently evaluates and analyzes personal clinical performance, noting decision points, elaborating alternatives, and accurately evaluating choices against alternatives. Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered.

3. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the healthcare team. (1, 3, 5, 6)* **4. Identify and implement appropriate nursing interventions in which heat loss occurs in infants. (1, 2, 5)***	

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child 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 & Date: _____