

**EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2025**

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

Student:

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

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)
10/24/2025	1 HOUR	Late EMS Survey	10/24/2025 1 HOUR

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

7/11/25 KA

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
8/28/2025	Ineffective Thermoregulation	Satisfactory/MD	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:		S	NA	NA	S	S	S	S	NA	S	NA	NA	NA					
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		S	NA	NA	S	S	S	S	NA	S	NA	NA	NA					
b. Provide care using developmentally appropriate communication.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		S	NA	NA	S	NA	S	S	NA	S	NA	NA	NA					
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		S	NA	NA	S	NA	S	S	NA	S	NA	NA	NA					
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
Clinical Location Age of patient		FRMC OB, baby- 21 hours, mom-	NA	NA	FRMC ER, 80 vis	Belleve Middle School	FRMC OB, Mom- 22yrs,	MIDTERM	Boys and Girls Club, St. Marys	Flu Clinic	Empathy Bellv	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

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

Comments:

Week 2 1e. My mom and baby were in the Trust vs. Mistrust stage. They were in this because the baby was only around 21 hours old and was very dependent on his mom to meet his needs. This is important in development, and the mom helped build this trust by feeding him, holding him, and being there when he was crying. **Awesome job! I would say it is only the newborn in Trust vs. Mistrust. Mom would be in a different category but she is definitely influential to the newborn. MD**

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

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 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. One patient that I took care of in this experience was an 80yr old female who was in the stage of integrity vs. despair stage. She was in this stage because she was upset that she was feeling so sick and kept making comments about how she didn't think that this would happen to her and she also mentioned that she would rather be gone than continuing to go through what she had been feeling for the past few days. This is so hard to hear comments like this in the clinical setting. How would you respond to her with the comments that should would rather be gone then experiencing these symptoms? MD I would sit with her and listen to how she felt and try to provide comfort Awesome! MD

ER Clinical Objective 1A-D: This week in the ER you were able to provide care appropriate for the patient, communicate effectively, provide appropriate assessments, and describe safety measures for the patients you cared for. Great job! MD

Week 6 1e. I felt that these students were in the stage of identity vs. role confusion because they are trying to figure out who they are. I could tell that each student was in a different stage of this development. I agree! MD

H & V Week 6 – 1a, b, & c – You did a great job utilizing the techniques you learned through your training to complete hearing and vision screenings on the high school students this week. You provided instruction, asked appropriate questions, and communicated with the students utilizing your knowledge of growth and development. BS

Week 7 1e. The newborn that I had on this clinical was in the trust vs. mistrust stage. The baby was learning how to adapt to the world and whether or not she could trust her mom to meet her needs. MD

Firelands OB Week 7: 1(a-d)- This week you were able to provide care and communicate with your patients using developmentally appropriate techniques. You were able to care for and communicate with a laboring mom and then transitioned to caring for her postpartum following her birth. We discussed safety of the patients in regards to checking bands with mom/baby upon returning the newborn to the room. RH

Week 8 1e. Most of the students in Boy's and Girl's Club this week were in Erikson's stage of Industry vs. Inferiority. They were trying to development their own self confidence through learning and their interactions with the other kids and their teachers. Perfect! MD

BG Club Objective 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

St. Mary's Week 8 Objective 1B: In your group, you developed and communicated with the different ages of students utilizing your knowledge of growth and development along with responding appropriately to their questions. KA/MD/RH/BS

Week 9 1e. Some of the people that I gave flu shots to on this clinical were in the generativity vs. stagnation stage. These people attended the flu clinic because some of them get this shot to help care for the health of others and to help prevent spreading illness. Absolutely! MD

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

Flu Week 9- 1a,b- You did a great job communicating with the patients at the flu vaccine clinic. Your conversation helped to kept the clients calm throughout the process and you worked in an efficient manner to keep the line moving. Nice work! BS

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
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Competencies:		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
g. Discuss prenatal influences on the pregnancy. Maternal		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
h. Identify the stage and progression of a woman in labor. Maternal		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
i. Discuss family bonding and phases of the puerperium. Maternal		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
j. Identify various resources available for children and the childbearing family.		S	NA	NA	NA	S	S	S	NA	NA	NA	NA	NA					
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
l. Respect the centrality of the patient/family as core members of the health team.		S	NA	NA	S	NA	S	S	NA	S	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

**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

ER Clinical Objective 1 K, L: This week you valued your patient's perspective on disease processes along with how diversity played a role in the care they received. You also provided respect for the patient and family. Great job! MD

H & V Week 6 – 1j, k – You did a great job collaborating with the school nurse and your fellow students to ensure each student was screened in a timely manner and keep the flow going. It was apparent also that the staff at the school were committed to serving the needs of the students. BS

Firelands OB Week 7: 1(f-i) We discussed the changes in a woman's body during pregnancy as well as looked at some charting from the OB/GYN office to discuss prenatal care during clinical. The nurses on the unit were able to point out which stages of labor the laboring patient was in. We also discussed the benefits of skin to skin and bonding with the mother. RH

Firelands OB Week 7: 1(j, k, l)- We were able to identify various resources that are provided to the family at the entrance of the unit at the ward clerk desk. It was also pointed out that all these resources are given to mothers upon discharge. You were able to provide care while also valuing the patient's values and beliefs. We discussed circumcisions and the choice both mothers made to circumcise their children while in the hospital. RH

BG Club Objective 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

St. Mary's Week 8 Objective 1K: You provided opportunities for students to share their personal experiences related to your presentation topic. KA/MD/RH/BS

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	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
b. Perform nursing measures safely using Standard precautions.		S	NA	NA	S	S	S	S	NA	S	NA	NA	NA					
c. Perform nursing care in an organized manner recognizing the need for assistance.		S	NA	NA	S	S	S	S	NA	S	NA	NA	NA					
d. Practice/observe safe medication administration.		S	NA	NA	S	NA	S	S	NA	S	NA	NA	NA					
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
f. Utilize information obtained from patients/families as a basis for decision-making.		S	NA	NA	S	NA	S	S	NA	S	NA	NA	NA					
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	NA	NA	S	S	S	S	S	S	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

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

Comments:

2g. One SDOH that affected one of the clients on the unit was lack of transportation. In this situation the mother did not have a car, therefore they had to wait on a ride home from the hospital from the support person. This could affect the mother and baby in many ways, including getting to appointments for the mother and newborn. **Absolutely! What kinds of resources could you provide or educate her on to assist her with transportation? MD** Local taxi services or public transportation information **Awesome! MD**

***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. 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. One social determinant of health that affected one of the patients that I took care of was lack of education. This patient was not from the U.S. and had just come to work and had little knowledge on how healthcare in the U.S. works. How would you support this patient on foreign practices? MD I could give him educational handouts and explain if needed Perfect! MD

ER Clinical Objective 2 A-F: This week you discussed EBP in nursing, performed standard precautions, observed/gave care in an organized manner, observed safe medication administration with appropriate dosage calculations, and you were able to obtain information for proper decision-making. Awesome! MD

Week 6 2g. Some of the students that I interacted with were influenced by the social determinant of lack of health care access. Some of the students I did the vision screening on that did not pass but did not have glasses already, already knew they needed glasses but had financial barriers to get them. Absolutely! MD

H & V Week 6 – 2b, c – You were organized throughout the screening and assisted others quickly and efficiently when needed. You did a great job working with your fellow students to ensure each student was screened appropriately and answering any questions they had. Nice work! BS

Week 7 2g. Economic stability is one social determinant of health that could influence this mom and her baby. This mom was only 22 years old and it was her second baby, so she might have a lower income level because of her age and possibly not being able to complete school. So true! MD

Firelands OB Week 7: 2(a-f)- We were able to identify some evidence-based nursing practice taking place on the unit in regards to the blood transfusion on the unit. We discussed that mother and one other person get the same band as baby and how this is a safety measure in place to ensure the right baby is given to the right parents. You were able to perform a fresh postpartum assessment with assistance from the RN and you did great. You were able to discontinue an IV this week as well. You did not administer any medications, but you did observe safe medication administration and calculated the proper drug dosages related to these medications. RH

Week 8 2g. Poor economic stability is something that affects many of the students that attend Boys and Girls Club. One of the students while we were there told me that they don't like attending this club, but they have to because their parents cannot pay for a babysitter after school. This makes for tough conversation with the kids. What did you say to them when they told you this? MD

Week 9 2g. A social determinant of health that could influence care during this clinical is economic stability. Someone who does not have health insurance or might have low income may not be able to afford these vaccines. Yes! MD

Flu Week 9- 2d- You did a great job safely administering flu vaccines at the flu vaccine clinic. BS

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	NA	NA	S	S	S	S	S	S	NA	NA	NA					
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

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

Comments:

3d. During clinical I did not specifically run into any legal or ethical issues, but there was a surrogacy situation on the unit. Possible issues that could come up during situations like this are establishing legal rights to children for the receiving parents, especially for the parents that are from other countries. **Absolutely true! It is so important to ensure the proper information is obtained and given to everyone involved. MD**

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. One legal issue that I could have seen is that one of the patients I took care of in the ER was sleeping so her husband thought he could just make decisions for her. If the staff would have allowed that, it could have become an issue with autonomy. **Absolutely! What education did you provide the husband on the importance of discussing this with the patient? MD**

ER Clinical Objective 3 A-C: Great job acting with integrity, respecting privacy, and following the Student Code of Conduct! MD

Week 6 3d. A legal issue that I could see becoming a problem in this setting is doing these hearing and vision screenings on the children without their parents consent to do so. **This is so true! What would you do if a parent confronted you? MD**

H & V Week 6 – 3a, b, c – You were professional and considerate with all the screenings you provided. You made sure to keep student privacy and follow HIPPA regulations throughout the day. You also maintained all the standards in the FRMCSN code of conduct while at the school. BS

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

Week 7 3d. A legal issue that could happen in this setting is consent for care. My patient was younger and her mom was there while she was in labor/giving birth and she could have tried to intervene and make decisions for her. **Absolutely! MD**

Firelands OB Week 7: 3(a-c)- You did a great job acting with integrity and respecting differing views, maintaining HIPAA, and following the Student Code of Conduct. RH

Week 8 3d. A legal issue that could come up at this club is mandatory reporting. The teachers at the club are mandatory reporters of suspected child abuse or neglect, and students at this club come from many different kinds of homes and situations. **Absolutely! MD**

BG Club Objective 3a,c- At the Boys and Girls Club, you acted with integrity, consistency, and respect for differing views and perspectives. BS

St. Mary's Week 8 Objective 3A-C: You were professional and considerate with all students and staff you came in contact with. You made sure to keep student privacy throughout the day. You also maintained all of the standards in the FRMCSN Code of Conduct while at the school. KA/MD/RH/BS

Week 9 3d. A legal issue that could be a problem during this clinical is informed consent. Each client was required to fill out a paper consenting to getting this vaccine and if they did not do that and someone still gave them the shot it would be a huge issue. **This is so true! MD**

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	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		S	NA	NA	NA	S	S	S	NA	S	NA	NA	NA					
c. Summarize witnessed examples of patient/family advocacy.		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
d. Provide patient centered and developmentally appropriate teaching.		S	NA	NA	NA	S	S	S	S	S	NA	NA	NA					
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

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

Comments:

4d. Teaching that I did during clinical was discharge teaching to the mom for her and baby. We gave her information on what is normal and what is not normal for her and baby as well as what to report to the HCP. **You did an awesome job providing this education! As the semester continues it will get easier! MD**

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 were also able to witness advocacy for a laboring patient who was requesting an epidural for pain management! MD

ER Clinical Objective 4 A, C, E: This week in your CDG you were able to determine a care plan based on noticing and interpreting and then how you would respond to the situation. You were also able to describe witnessed advocacy, and analyze what was going on with your patient. Great job! MD

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

ER Clinical Objective 4D: What patient centered and developmentally appropriate teaching did you provide to your patient? Be sure to address all yellow competencies with a comment for all clinical experiences per the email sent out on 9/3. MD

Week 6 3d. Some teaching that I could do during the hearing and vision screening is education on going to doctor to be further evaluated on these things if they needed it and why we thought they might need it. **Great! MD**

H & V Week 6 – 4b, d – You worked with the nurse to gather information on the hearing and vision screenings utilizing the provided papers for documentation. You then helped alphabetize and document the information further on the required ODH documentation forms. This was a terrific help to the school nurse. You did a nice job educating the middle schoolers as needed on the screening process and ensuring they were able to perform it correctly so the results would be valid. You were kind, caring, and professional with your interactions with the students. Keep up the nice work. BS

Week 7 4d. Some teaching that I did with my patient and her primary nurse was educate the mom on how much the baby should be eating and how often. **A very important educational piece! MD**

Firelands OB Week 7: 4(b, c)- You were able to look at the charting and assist with identifying trends on the monitor. You did not actually chart in OBIX but you were able to observe the nurse doing so and assisted with assessment findings. You were able to identify some decreased variability on the fetal monitor and assist with repositioning the patient to see if this corrected the cause. You were able to advocate for a patient on the unit who had her belongings misplaced after surgery and we were able to assist the charge nurse with trying to locate them. RH

Week 8 4d. Some teaching that I did to the students this week was about what they want to be when they grow up and explaining some of the different roles that the different job titles might have to help them think about their futures. **Perfect! MD**

BG Club Objective 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 9 4d. Some education that I provided during the flu clinic was walking each client through the steps of getting the shot and what they contained. **Perfect! MD**

Flu Week 9- 4b- You did a great job documenting the flu (and COVID) vaccines you administered at the flu clinic. BS

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	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
h. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
j. Correlate the patient's growth and developmental level in relation to the patient's disease process. (noticing, interpreting, responding)		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

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

Comments:

*End-of-Program Student Learning Outcomes

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

ER Clinical Objective 4 F-H: For this clinical, you were able to provide information correlating diagnostics, medications, and medical treatment for your patient you saw in your CDG. Great job! MD

Firelands OB Week 7: 4(h-j)- Throughout the clinical day you were able to gather assessment findings that correlated with their diagnostic testing, pharmacotherapy, medical treatment, and their growth/development level. RH

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	NA	NA	S	S	S	S	S	S	NA	NA	NA					
b. Evaluate own participation in clinical activities.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
c. Communicate professionally and collaboratively with members of the healthcare team.		S	NA	NA	S	S	S	S	NA	S	NA	NA	NA					
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		S	NA	NA	NA	NA	S	S	NA	NA	NA	NA	NA					
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
g. Consistently and appropriately post comments in clinical discussion groups.		S	NA	NA	S	NA	S	S	NA	NA	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

**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 epidural placement and was happy to assist with your learning! Amazing job this week! MD

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

ER Clinical Objective 5A: You were marked excellent in all areas. “Good bedside manner.” Hayley Kromer, RN. Great job! MD

ER Clinical Objective 5 B, C, F, G: This week you were able to evaluate your own participation in clinical, communicate professionally with team members, and clearly communicate care in the form of an SBAR on your CDG. You also provided a CDG that met all of the requirements for being satisfactory. Great job! MD

H & V Week 6 – 5a, c, d – You did a great job showing interest and enthusiasm while at the school this week. You asked questions throughout the day to seek out new information while on clinical. You communicated and collaborated with the school nurse and school staff professionally and worked together to ensure the students received the appropriate care. BS

Firelands OB Week 7: 5(a, b, c, e, g)- This week you showed excitement about being able to care for a laboring mom and see a vaginal delivery. You did great with the frequent postpartum assessments that you participated in after the labor was complete. You were able to professionally communicate with the staff on the unit. You were able to navigate meditech when finding information for your CDG and when charting. RH

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

St. Mary’s Week 8 Objective 5A-B: You did a great job showing interest and enthusiasm while at the school this week. You asked questions throughout the day to the students to enhance their learning on the presentation topic. You communicated and collaborated with the staff professionally and worked together to ensure the students received accurate information. KA/MD/RH/BS

Flu Week 9- 5a,c- You had a great attitude and positive demeanor while administering flu vaccinations at the flu clinic. You also communicated effectively with other members of the healthcare team to ensure positive patient outcomes. BS

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	NA	NA	S	S	S	S	S	S	NA	NA	NA					
b. Accept responsibility for decisions and actions.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
c. Demonstrate evidence of growth and self-confidence.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
d. Demonstrate evidence of research in being prepared for clinical.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
f. Describe initiatives in seeking out new learning experiences.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
g. Demonstrate ability to organize time effectively.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
i. Demonstrates growth in clinical judgment.		S	NA	NA	S	S	S	S	S	S	NA	NA	NA					
	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD					

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

Comments:

6a. One way that I could improve during clinical is by being more confident in myself when doing mom and baby assessment. I can do this by believe in myself and continuing to study . Absolutely! I know it was hard being the first week of clinical! You did a great job but I know with your studying and gaining confidence the next time will be even better! MD

***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. One goal that I have based on this week's clinical is to become more confident when passing medications. I will do this by the next time I complete a medication pass and by trusting that I know how to do it. You do! Keep working on it and reminding yourself of the rights to medication administration! MD

ER Clinical Objective 6 B-I: You did amazing in clinical meeting all of this objective! Keep up the fabulous work! MD

Week 6 6a. One improvement that I could make based on this week is that when I first started the vision screening, I was confused about the different numbers. One goal that I could make based on this is studying the test papers. Good goal! MD

H & V Week 6 – 6c, d, e, f, g, h, I – You came to clinical ready and prepared to learn. You were enthusiastic and displayed an ACE attitude while at the Bellevue Middle School. You were organized and timely with your hearing and vision screenings and documenting the findings on the provided forms. Terrific job! BS

Week 7 6a. One area for improvement for this clinical is staying calmer. I was worried when my patient was about to deliver and the doctor was still not on the floor. I could improve in this area by getting more experience in the OB setting. More exposure to high pressure situations can help you find ways to stay on track during times of high adrenaline. Every exposure helps! MD

Firelands OB Week 7: 6(c, e, f, g)- You maintained professional behavior while on clinical throughout the day. During the clinical day, you asked good questions to further your knowledge of the pregnant and postpartum patient. You were able to organize you time efficiently to care for your patient as well as see a birth during the day. RH

MIDTERM-Amazing job during the first half of the semester! I am so proud of you and the progress you have made! Be sure to look for opportunities to continue growing! MD

Week 8 6a. An area for improvement this week is being able to better control large groups of kids. All of the kids did not want to sit still and did not want to focus on our activity. A goal to help with this is to better stand my ground and being firmer when talking to them. Great goal! MD

BG Club Objective 6e- Professional behavior was observed throughout your time at the Boys and Girls Club this week. BS

St. Mary's Week 8 Objective 6A-I: You came to the school ready and prepared to present your topic. You were enthusiastic and willing to share what you learned about your presentation topic to the students. You were organized and timely with your presentation throughout the day. You delivered all presentations with an ACE attitude. Awesome job! KA/MD/RH/BS

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

Week 9 6a. One area of improvement that I have for this clinical is to not forget where I put the shot at in the arm so that I can put the band aid on the right spot. One way that I can meet this is by keeping my hand on the client's arm until I am done. **Great idea! MD**

Flu Week 9- 6d,e,g- You may have been a bit nervous at first, but you worked through it and performed efficiently and administered many vaccines. You also worked in a timely manner to get all of the clients through the line. Professional behavior was observed at all time throughout the clinical experience. Nice work! BS

Week 10 Objective 6E: This week you did not turn in your empathy simulation survey in on time. Please be sure to respond with how you will prevent this from occurring in the future. MD

I will prevent this from happening in the future by completing the survey as soon as I am done with the simulation and making sure I have everything that is due complete by creating a list and checking things off.

Student Name: Stevi Ward		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: 8/27/2025 Ineffective Thermoregulation							
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	All criteria met. MD
	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	All criteria met. MD
	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	For the frequencies-it is important that even if it is an IV to state whether it is continuous or intermittent. That makes a difference. Also, for the educations be sure to state frequency for each even if it is once. MD
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	2	

	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
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	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	All criteria met. MD
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	All criteria met. MD
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> 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. **Completed. MD**
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.

<p>Total Possible Points= 45 points 45-35 points = Satisfactory 34-23 points = Needs Improvement* < 23 points = Unsatisfactory*</p> <p>*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.</p> <p>***Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. ***</p> <p>Faculty/Teaching Assistant Comments:</p>	<p>Total Points: 44/45 Satisfactory MD</p> <hr/> <p>Faculty/Teaching Assistant Initials: MD</p>
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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: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21
Evaluation	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
Faculty Initials	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD
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: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 8/21	Date: 10/20
Evaluation	S	S	S	S	S	S	S	S	S	S
Faculty Initials	MD	MD	MD	MD	MD	MD	MD	MD	MD	MD
Remediation: Date/Evaluation/Initials	NA	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: 9/18	Date: 9/22	Date: 10/2	Date: 10/6	Date: 10//17	Date: 10/30	Date: 11/3	Date: 11/4 & 11/5	Date: 11/18	Date: 11/18	Date: 11/21	Date: 11/21	Date: 10/21
		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	S	U	S						S
Survey	S		S		S	S							U
Faculty Initials	MD	MD	MD	MD	MD	MD	MD						MD
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	NA	NA						S 10/24 MD

* Course Objectives

Comments:

Empathy Simulation-you submitted the survey for this experience late. It was completed on 10/24/2025. MD

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): Miller (A), Rodisel (C), Ward (M)

GROUP #: 7

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/18/2025 0700-0830

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
<p>NOTICING: (1, 2, 5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Noticed VS appear WNL. Asking questions about contractions and associated pain. Patient requests mountain dew and cheeseburger, water offered. Notices rhythm on fetal monitor. Recognizes contractions on fetal monitor, and that they should not occur at 33 weeks. Inquires about pregnancy history and prenatal care. UA results obtained, THC present, glucose, nitrates. Pain rated 4/10. Mona CO feeling dizzy and lightheaded. VS assessed. Notices low BP and rising HR. Bleeding discovered. Begins fundal massage, does not maintain.</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>Interprets VS to be WNL. Prioritizes the need to apply fetal monitor, interprets contractions. FHR interpreted as WNL. Prioritizes the need for FSBS- 225, interpreted as above normal. UA results interpreted. 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.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • 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 						<p>Nurse enters room, identifies patient, begins assessment, VS. Inquires about pain. Applies fetal monitor. Patient assisted to left side. Urine sent to lab. Call to HCP (remember to gather pertinent information prior to calling) who asks about pregnancy history. History obtained, FSBS obtained. Call to HCP, report given. Orders received for US, IV fluid, Nifedipine, and acetaminophen. Orders read back. Call to patient’s wife, Jenny, to provide update. Call to HCP to inquire about giving patient food. Patient identified, allergies confirmed, acetaminophen and IV fluid administered. Mona asks about her contractions and if they should be happening at this point. Call to US for results. Decided against administering nifedipine. Call to HCP, confirms nifedipine is warranted. Patient asks for a “gummy” and education provided regarding their use during pregnancy. Nifedipine</p>

	<p>administered.</p> <p>Call to HCP to report PPH, boggy uterus. Order receive for methylergonovine. Legs elevated. (Remember to continue fundal massage until it is firm). Methylergonovine prepared and administered (make sure to use IM needle, not sub Q)</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of the scenarios. Discussed the use of calcium channel blockers to stop contractions. 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.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 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)* 	<p>You are Satisfactory for this scenario! BS</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>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</p> <p>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</p> <p>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</p> <p>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</p>

<p>4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*</p> <p>*Course Objectives</p>	
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Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Miller (C), Rodisel (M), Ward (A)

GROUP #: 7

SCENARIO: Shoulder Dystocia and Newborn Care

OBSERVATION DATE/TIME(S): 9/25/25 0700-0830

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
<p>NOTICING: (1,2,5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Pain assessment: rating, location, duration, aggravating factors</p> <p>Obtain vitals</p> <p>Continues to assess full head to toe assessment before addressing pain</p> <p>Medication nurse assess pain (rating, location, duration) prior to medication administration</p> <p>Does not perform cervical check prior to nubain administration</p> <p>Reassess vitals after nubain administration</p> <p>Reassess pain after nubain administration</p> <p>Cervical check after healthcare provider calls charge nurse</p> <p>Notice baby is stuck and begin HELPERR maneuvers</p> <p>APGAR 1 minute: 10</p> <p>No newborn assessment completed, does APGAR assessment only</p>

<p>INTERPRETING: (2,4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Offer other pain relief options due to mom not wanting epidural</p> <p>Interpret vitals as WDL</p> <p>Prioritize pain medication</p> <p>Interpret monitor as accelerations prior to nubain administration.</p>
<p>RESPONDING: (1,2,3,5) *</p> <ul style="list-style-type: none"> • 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 	<p>Verify allergies when doing head to toe assessment</p> <p>Verify birth plan with mom in regards to pain medication</p> <p>Does not call healthcare provider prior to administration of nubain</p> <p>Nubain administration: verify allergies. Provide education on side effects and that patient will stay on monitor to watch her and baby for any possible side effects. Correct dosage calculation, correct needle size, correct technique used, use of needle safety. Does not check patient name/DOB, does not scan patient or medication prior to administration.</p> <p>Penicillin administration: verify allergies. Education provided about why she is getting antibiotics. Hang fluids correctly (secondary above primary bag), program pump appropriately. Does not scan patient or medication prior to administration.</p> <p>Healthcare provider calls charge nurse for update.</p> <p>When patient begins to push charge calls healthcare provider. Put patient in McRoberts, suprapubic pressure, roll to hands and knees, evaluate for episiotomy, rotational maneuvers, remove posterior arm.</p> <p>Offer skin to skin with mother. Dry baby off, place under warmer</p> <p>Vitamin K and erythromycin ointment: does not scan baby, does not scan medications, correct needle size used, correct dose administered, correct technique, used needle safety. Education provided to mom prior to administration about what medications are for. States eye ointment would be placed on finger then rubbed on baby eyes.</p> <p>Does not call healthcare provider after delivery. Healthcare provider calls charge to get update,</p>

<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and interventions performed. Group identified good communication between themselves as a strength. Discussion of when to call healthcare provider and how keeping them updated in this situation is important. Students acknowledged steps of medication administration process and described each step that should be taken. Review of proper medication administration process includes scanning medications and patient for each medication. Discussion/demonstration of how to administer eye ointment due to students never having done so in the clinical setting. 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.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 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)* 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, 	<p>You are satisfactory in this scenario! RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>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.</p> <p>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.</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Shows some communication ability (e.g., giving directions); communication with patients, families, and team members is only partly successful; displays caring but not competence. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Is hesitant or ineffective in using nursing skills.</p> <p>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</p>

2, 5)*	weaknesses.
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME:

OBSERVATION DATE/TIME: 10/16-17/2025 SCENARIO: Escape Room

CLINICAL JUDGMENT						OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 						<p>Noticed patient safety issues throughout the room. These included sharps container on bed, patient hanging off the bed, bed not locked, armband not on patient, syringe, and side rails not up. Noticed the assessment findings in the patient assessment supporting the need for a breathing treatment. Noticed math problems in the box and recognized the need to solve. Noticed some boxes needed a code and one needed a key.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 						<p>Interpreted the risk in the safety issues for the patient and recognized the need to be fixed. Interpreted the need to work as a group to solve problems and find clues. Interpreted the need to complete the dosage calculation to administer the correct amount of IV fluids. Interpreted the need to administer meds and the need to call HCP to administer the correct doses.</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • 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 						<p>Responded to safety issues by correcting each of them to provide a safe environment for the patient's care. Responded to instructor cues regarding environment and problem solving. Responded to HCP orders and picked the correct dosage of medication for the patient. Flexible with plan of care and looking for clues as well as communicating with one another effectively. Responded to the patient's respiratory distress by providing the patient with the ordered breathing treatment.</p> <p>Responded to the healthcare providers order and programed the IV to the correct rate and administered the prescribed IV fluids.</p>

<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Worked together with communication and idea sharing. Collaborated and provided suggestions to one another to make sense of riddles, math formulas, medications, and treatments.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Utilize the concepts of growth and development to identify concerns with patient safety and provide appropriate interventions to address safety concerns. (1, 3, 5)* 2. Administer medications utilizing the concepts of growth and development and the rights of medication administration to prevent errors in the process. (1, 2, 5)* 3. Collaborate with members of the healthcare team to provide safe, holistic, and comprehensive patient care. (1, 2, 4, 5, 6)* 4. Utilize SBAR communication in interactions with members of the health team. (5)* <p>*Course Objectives</p>	<p>You are successful in this simulation as you were able to provide a safe environment for the patient. You were also able to work together as a team to solve the math formulas and give appropriate dosages of medications. Good job! KA/MD/RH/BS</p> <p>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</p> <p>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</p> <p>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</p> <p>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</p>

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation

STUDENT NAME:

OBSERVATION DATE/TIME:

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)*

Comments

You are satisfactory for this simulation.

Developing to accomplished is required for satisfactory completion of 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): Miller (M), Rodisel (A), Ward (C)

GROUP #: 7

SCENARIO: Pediatric Respiratory

OBSERVATION DATE/TIME(S): 10/30/25 0700-0830

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
NOTICING: (1, 2, 5) *	Notice unsafe items in bed (medication, needle, scissors)
<ul style="list-style-type: none"> • Focused Observation: E A D B 	Obtain vitals
<ul style="list-style-type: none"> • Recognizing Deviations from Expected Patterns: E A D B 	Respiratory assessment. Take gown down to visualize chest. No retractions noted at this time. Identify lung sounds as wheezes
<ul style="list-style-type: none"> • Information Seeking: E A D B 	Notice medication error for ibuprofen in chart.
	Pain assessment (location only)
	Reassess temperature after ibuprofen administration
	Reassess lung sounds/respiratory assessment
	Notice medication error for amoxicillin
	Ask about cough and sputum
	Respiratory assessment. Only pull gown down minimally. Does not notice retractions. Identifies lung sounds as stridor. Ask about cough
	Pain assessment (location only)
	Obtain vitals (heart rate and oxygen saturation only) Notice low oxygenation and increased heartrate

	<p>Obtain temperature</p> <p>Pain assessment (location, FACES scale)</p> <p>Does not notice medication error for acetaminophen in chart. Gives incorrect/unsafe dose to patient</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Interpret temperature as elevated</p> <p>Identify medication error with orders in chart related to ibuprofen and amoxicillin. Does correct dosage calculation for new orders.</p> <p>Give ibuprofen first due to acetaminophen being given recently</p> <p>Interpret stridor and low oxygen as respiratory distress.</p> <p>Does not stay in room with patient while stridor and with low oxygen level</p> <p>Does not prioritize oxygen for patient, waits to apply to patient</p> <p>Does not identify medication error with acetaminophen or IVF. Does correct dosage calculation related to the orders in the chart.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • 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 	<p>Remove unsafe items from bed</p> <p>Medication administration: verify name/DOB, verify allergies, scan patient, scan medication, educate father why medication is needed, stop medication administration due to questioning dose of ibuprofen.</p> <p>Good teamwork catching medication error and working together to discuss the order and what to do</p> <p>Call healthcare provider and question ibuprofen order. No SBAR used until after prompted, good SBAR provided at that point. Get new order for ibuprofen. Readback order to healthcare provider.</p> <p>Restart medication administration. Verify name/DOB and allergies with patient and father, correct dose administered</p> <p>Education provided about croup (what it is, symptom management, cool mist humidifier/take child outside, fever control). Education provided about smoking around child (wash hands, change clothes, smoke outside)</p> <p>Medication administration (cetirizine): verify name/DOB, verify</p>

	<p>allergies, educate what for and some side effects, scan patient, scan medication, state that it is a chewable pill – not candy.</p> <p>Call healthcare provider to question amoxicillin. Provide SBAR when calling. Receive new order for amoxicillin and readback order.</p> <p>Medication administration amoxicillin: verify name/DOB, verify allergies, scan patient, scan medications, correct dose administered. Education provided is related to throat/cough (actually is for ear infection), education regarding antibiotic compliance.</p> <p>Call healthcare provider and request one-time order for racemic epinephrine due to audible stridor (no audible stridor at this time, only wheezes)</p> <p>Call respiratory therapy for breathing treatment.</p> <p>Apply oxygen via nasal canula. Start at 0.5 L</p> <p>Educate father about stridor and plan of care</p> <p>Medication administration (acetaminophen): verify name/DOB, verify allergies, did not catch medication error in chart but does do correct dosage calculation per order in the chart, scan patient, scan medication.</p> <p>Healthcare provider called students for update. Students receive new order for dexamethasone and readback order.</p> <p>Medication administration (dexamethasone):</p>
<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of scenario and good communication and teamwork through the simulation. Emotional intelligence questions asked about how students were feeling during the respiratory distress part of the scenario. Through discussion, the team was able to discuss how they found two of the medication errors and what prompted them to identify them. Group also discussed how they felt calling and telling the healthcare provider the orders were incorrect. Discussion about stopping medication administration to call the healthcare provider and correct the dose. Discussion about safe dose ranges for medications and proper IV fluid rate for a child with this weight. All group members did correct dosage calculation to determine safe range for acetaminophen and IV fluids. Discussion of how to report medication</p>

	errors and how group members were feeling after debriefing.
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “Developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Select physical assessment priorities based on individual patient needs. (1, 2)* 2. Review appropriateness of prescribed medications for prevention of errors and administer medications utilizing the concepts of growth and development. (1,2,5)* 3. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 4. Utilize the concepts of growth and development to provide therapeutic communication with the toddler and their family. (3, 5)* 	<p>You are unsatisfactory in this scenario. Please refer to remediation assignment for further instructions. RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>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. Makes limited efforts to seek additional information from the patient and family; often seems not to know what information to seek and/or pursues unrelated information.</p> <p>Interpreting: Makes an effort to prioritize data and focus on the most important, but also attends to less relevant or useful 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.</p> <p>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 the most obvious data; monitors progress but is unable to make adjustments as indicated by the patient’s response. Is hesitant or ineffective in using nursing skills.</p> <p>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.</p>

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: _____