

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)
9/26/25	1	Missing Simulation Survey	9/29/25 KA
9/26/25	1	Missing OB Survey	9/29/25 KA
10/31/25	6	Missing Simulation Survey and incomplete Empathy Reflection Journal	

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
9/26/25	Risk of Fetal Injury	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.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
b. Provide care using developmentally appropriate communication.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
Clinical Location Age of patient		No clinical	No clinical	No clinical (Simulatio	No Clinical	FRMC OB 41	FRMC ER & Hearing	NA	Boys and Girls Club & St	No Clinical	FTMC OB 31	Flu Clinic	No Clinical	No clinical	No clinical		No Clinical	
	KA	KA	KA	KA	KA	KA	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 6:

1e. Erikson's stage trust vs. mistrust is from ages birth to 18 months. This is the stage where the infant develops a sense of basic trust of their needs from their caregivers, consistently such as the needs for nourishment, comfort, and security. A lack of consistent care can lead to mistrust and insecurities. I choose this stage, from watching the

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

baby be born. In the womb they are all nice, warm and comfy in the mom's belly and rely on nutrients from the placenta. After being born the baby now must trust that the mother will feed them either by breastfeeding or by bottle. When the needs are met, the infant learns to trust others and develops hope which can be the foundation for future relationships. Nice job! KA

Week 6: 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 mother and care for her immediately postpartum. We discussed safety of the patients in regards to checking bands with mom/baby upon returning the newborn to the room. RH

Week 7:

1e. Erikson's stage Industry vs. Inferiority is from ages 6-12 years old. This stage the child's developmental task is to develop a sense of confidence through academic and social interactions. If the child feels different from others or less capable to do something from having to wear glasses or hearing aids it contributes to the feeling of inferiority. Having good communication with teachers and students helps, maintain a sense of industry with tools for success for the children learning and participating. Good job! KA

Week 7 – 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 – 1a – You did a nice job discussing a patient you cared for with increased confusion who had a history of Alzheimer's disease this week while on clinical in the ER department. KA

Week 8:

1e. An Erikson's Stage I identified in my clinicals this week is initiative vs. guilt focuses on ages 5-6 and is the sense of initiative through play, exploration, and social interaction with others. During the activity this age group eagerly volunteered to help pick up the tools from the different papers to restart the game and play again. The children are learning to take initiative and develop a purpose in social situations. At this stage it is important to praise positive efforts and encourage participation. Great job correctly identifying the stage. KA

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 8 – 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 10

1e. An Erikson's stage I identified in my patient was intimacy vs. isolation stage. The mother gave birth to a baby boy. I noticed mom was focused on trying to build a nurturing relationship with the baby. She was focused on trying to breastfeed the baby and develop the maternal bond with the baby. Nice job! KA

Week 10: FTMC OB Objective 1 A, B, C, D: This week in OB you had the opportunity to work with a postpartum mother and newborn. 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 them as well such as fall risk of a mom post vaginal delivery and security for the newborn. Great job! MD

Week 10 – 1a, d – You did a nice job discussing your patient this week in your CDG. You were able to identify your patient as being a gravida 2 para 2 and the baby's APGAR scores as 9/9. You discussed safety concerns in the OB setting including postpartum hemorrhage and how it can be sudden onset and needs to be identified and addressed promptly. KA

Week 11:

1e. An Erikson's stage I identified is intimacy vs. isolation stage. I identified this stage when the patient's came up to be get their flu shot I was friendly, and was asking about the client's day to help build a trusting relationship before I administered their shot. Nice job! KA

Week 11 – 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:		NA	NA	NA	NA	S	NA	S	NA	NA	S	NA	NA	NA	NA		NA	
f. Describe psychological changes in response to the expectant mother's pregnancy. Maternal		NA	NA	NA	NA	S	NA	S	NA	NA	S	NA	NA	NA	NA		NA	
g. Discuss prenatal influences on the pregnancy. Maternal		NA	NA	NA	NA	S	NA	S	NA	NA	S	NA	NA	NA	NA		NA	
h. Identify the stage and progression of a woman in labor. Maternal		NA	NA	NA	NA	S	NA	S	NA	NA	S	NA	NA	NA	NA		NA	
i. Discuss family bonding and phases of the puerperium. Maternal		NA	NA	NA	NA	S	NA	S	NA	NA	S	NA	NA	NA	NA		NA	
j. Identify various resources available for children and the childbearing family.		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
k. Value patient's perspective, diversity, age and cultural factors that influence their behaviors.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
l. Respect the centrality of the patient/family as core members of the health team.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	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:

Week 6: 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 patients were in. We also discussed the benefits of skin to skin and bonding with the mother. RH

Week 6: 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

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

Week 7 – 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

Week 7 – 1k – You identified cultural implications that you observed while you were in the ER on clinical as a hard of hearing patient and how this affected communication with the patient and discussed your observations in your CDG response. KA

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

Week 8 – 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

Week 10: FTMC OB Objective 1 J, K, L: During our day in OB, you were able to assess a postpartum mother and newborn. You were able to identify resources available for her and her newborn. You also were able to discuss the patient’s perspective, diversity, and centrality of the patient and family needs as a health team. Awesome job! MD

Week 10 – 1i – You described the mother being in the taking hold phase of postpartum adjustment in your CDG and supported this with behaviors you observed. You also described bonding that occurred in the family unit during the postpartum period. KA

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.		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
b. Perform nursing measures safely using Standard precautions.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
c. Perform nursing care in an organized manner recognizing the need for assistance.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
d. Practice/observe safe medication administration.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
f. Utilize information obtained from patients/families as a basis for decision-making.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	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)*		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	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 6:

2g. A SDOH, I identified is the social and community of the mother and baby. The strong support system provided by the 20-year-old daughter and the father had a positive impact. The older daughter was very engaged with the baby and helped with caregiving, while the father ensured that the mother's needs were met. This level of family support promotes maternal well-being and healthy infant development. **Great job identifying positive SDOH factors for this patient! KA**

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

Week 6: 2(a-f)- We were able to identify some evidence-based nursing practice taking place on the unit in regards to the use of antibiotics with a GBS + mother. 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/assist with medication administration on the labor unit. You were able to prime some tubing for the antibiotics and assist with administration. You also were able to assist with a straight cath for your patient. You were able to perform a fresh postpartum assessment with assistance from the RN and you did great. RH

Week 7:

2g. A SDOH, I think could be an issue for the student's I screened for hearing and vision is even with the screenings identifying the deficits, some families may have limited resources or limited access to follow-up care and may not be able to afford glasses or hearing aids if the child needs them. Great job recognizing the impact these deficits can have on a patient managing their overall health. KA

Week 7 – 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 – 2b, c – You had the opportunity to work with Erica Ruth RN in the ER and she reported you were excellent with demonstrating your knowledge of your nursing responsibilities while on clinical. KA

Week 7 – 2d – You had the opportunity to administer PO and IV medications while on clinical in the ER this week. KA

Week 8:

2g. A SDOH is social and community, this could possibly be an issue for some of the students I encountered this week when teaching the children about emergency safety and different occupations. With that the student may live in a unstable home environment or may not have good role models to look up to which can lead to behavioral and emotional difficulties during class. Nice job identifying potential concerns with this population. KA

Week 10:

2g. A SDOH that I identified throughout my clinical experience was social and community. When talking with the mom and dad they stated that they had no family that lived around here to help them out with the little girl and the baby. With the limited family support can be hard and affect mental health and even increase stress. Great job identifying that the patients had a good support system to help with care. KA

Week 10: FTMC OB Objective 2 A-F: This week we had conversations on evidenced-based practices, performed standard precautions, organize care and recognized when assistance was needed, and utilize information for decision making for our post vaginal delivery patient and newborn. You also were able to perform satisfactory medication administration for the mother and calculate medications for the patients. Great job! MD

Week 11:

2g. A SDOH I identified at my clinical experience administer flu shots was cultural beliefs and practices. Some cultures it is their religious belief or traditional health practices to not receive vaccines. They may not believe in vaccines and may even not trust them; they may prefer more natural remedies. Great thoughts about cultural beliefs related to vaccinations. KA

Week 11 – 2d- You did a great job safely administering flu vaccines at the flu vaccine clinic. BS

***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.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
b. Respect the privacy of patient health and medical information as required by federal HIPAA regulations.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
c. Follow the standards outlined in the FRMCSN policy, "Student Code of Conduct"		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
d. Critique examples of legal or ethical issues observed in the clinical setting. (List Below)*		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	KA	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 6:

3d. I observed two mothers were completely dilated and ready for delivery of their baby's, but the physician did not arrive until 1 hour after he said he would be back. The nurses monitored the mothers and the babies fetal heart strips closely, ensuring there was no immediate harm to mom or baby. The physician's delay could pose risks if complications arose and may be seen as neglectful or unprofessional. **Good observation. KA**

Week 6: 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 7:

3d. I observed a student talking out loud with their classmate about the screening results. This violates the ethical standards of confidentiality with that health results should not be shared among other but the be communicated privately to avoid embarrassment, or bullying. **KA**

Week 7 – 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**

Week 7 – 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**

Week 8:

3d. At the Boys and Girls Club during the activity, I observed two students begin wrestling and physically fighting. The teacher voiced to the children to

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

stop, then it continued the teacher then intervened and sent the students to the office. This violated the ethical principle of nonmaleficence and beneficence, if the teacher allowed the fight to continue without stopping the children. Nice job identifying the ethical principle and the actions taken by the staff. KA

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 8 – 3a,c- At the Boys and Girls Club, you acted with integrity, consistency, and respect for differing views and perspectives.

Week 10:

3d. An example of an ethical issue I observed during my clinical experience was while I was providing discharge teachings to mother, the young child started to act out, the father then picked up the child and took her into the bathroom, and stated they would stay in there. This is a concern of child well-being, the father isolating himself and the child in the bathroom could be concerning for the child's safety and emotional welfare. The father also came in vomiting at bedside which raises concern about possible illness or impairment. We reported what we saw to the charge nurse. That does appear to be concerning. I am glad you identified these concerns and addressed them appropriately. KA

Week 10: 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 11:

3d. An example of an ethical issue is confidentiality and privacy. Confidentiality is the ethical principle of maintaining the patient's privacy to develop trust which is protected under HIPAA. If patient information, was discussed in front of others it would break HIPAA. I can imagine the environment you were put into made it difficult to maintain HIPAA. I am glad you did not best to manage everyone's privacy. KA

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)		NA	NA	NA	NA	S	S	S	NA	NA	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)		NA	NA	NA	NA	NA S	S	S	NA	NA	S	S	NA	NA	NA		NA	
c. Summarize witnessed examples of patient/family advocacy.		NA	NA	NA	NA	NA S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
d. Provide patient centered and developmentally appropriate teaching.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	KA	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 6:

4d. A patient centered teaching I made to my patient was while me and the nurse were assessing the fetal strips we noticed variable decelerations, the nurse and I went in and educated about the variable on the strip and how we need to reposition her on her side to help relieve the cord compression, and put a peanut ball in between her legs to help open pelvis for baby. **Nice job educating your patient on the reason for position changes. KA**

Week 6: 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 witness the family advocate that they wanted the daughter to also have a wristband to match the baby due to her being the other visitor and helper for the mother. RH

Week 7:

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

4d. During my hearing and vision clinical some patient centered teaching I provided to the students was instructing them on to where to stand, what eye to use, and what line to read during the vision screenings. For the hearing screening I taught the students to raise their hand high if they heard any sort of noise, how to properly put on the headphones and assisted the students as needed. **Nice job educating the students on how to perform the screening. KA**

Week 7 – 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 – 4a, c – You did a great job identifying the top nursing interventions for your patient this week. You were able to describe a situation of patient advocacy in the ER setting that you witnessed with a patient’s wife advocating for the care of the patient this week while on clinical. **KA**

Week 8:

4d. This week at clinical I had the opportunity to engage with children at the Boys and Girls Club and St. Mary’s school. During the Boys and Girls Club I got to talk to the children about different occupations and tools that those occupations may use. At St. Mary’s I got to teach 5th grade- kindergarten about safety and what to do and bring with them during an emergency situation. **Great job educating the children at B&G Club and St. Mary’s. KA**

Week 8 – 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 10:

4d. This week at Fisher Titus I had the opportunity to educate a postpartum mom on some discharge teachings about baby. Such as giving baby a sponge bath until cord falls off, keeping the cord dry, stool changes in baby can be normal, call the doctor if baby has a fever or is jaundice, using a rear facing car seat for at least 2 years, baby needs their own bed no co-sleeping, making the baby’s first appointment before discharge, and follow up the doctor is 6 weeks for mom. **Great job providing discharge teaching to a postpartum mother. KA**

Week 10: FTMC OB Objective 4 C: **Great job analyzing pathophysiology of your mother’s vaginal delivery and the newborn’s potential complications! MD**

Week 11:

4d. This week a patient centered care I provided to patients was educating on egg allergy with the flu vaccine and also when and where I was going to administer the flu vaccine. **Nice job educating people at the flu vaccine clinic. KA**

Week 11- 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)		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
g. Correlate the pharmacotherapy in relation to the patient's disease process. (noticing, interpreting, responding)		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
h. Correlate the medical treatment in relation to the patient's disease process. (noticing, interpreting, responding)		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
i. Correlate the nutritional needs/diet in relation to the patient's disease process. (noticing, interpreting, responding)		NA	NA	NA	NA	S	S	S	NA	NA	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)		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	KA	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:

Week 6: 4(h-j)- During the clinical day you were able to complete a care map that discussed the patient's diagnostic tests, medications, and medical treatment. RH

Week 7 – 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

Week 10: FTMC OB Objective 4 F-J: During our clinical day we were able to obtain this objective with a postpartum mother and newborn during their stay. We were able to determine what types of diagnostic test, pharmacotherapy, medical treatment, nutritional needs, and growth and developmental level of the patients. Awesome job! MD

***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.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
b. Evaluate own participation in clinical activities.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
c. Communicate professionally and collaboratively with members of the healthcare team.		NA	NA	NA	NA	S	S	S	NA	NA	S	S	NA	NA	NA		NA	
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		NA	NA	NA	NA	NA	NA	NA	NA	NA	S	NA	NA	NA	NA		NA	
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		NA	NA	NA	NA	S	NA	S	NA	NA	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)		NA	NA	NA	NA	S	S	S	NA	NA	S	NA	NA	NA	NA		NA	
g. Consistently and appropriately post comments in clinical discussion groups.		NA	NA	NA	NA	NA	S	S	NA	NA	S	NA	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	KA	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:

Week 6: 5(a, b, c, e, g)- This week you showed excitement about being able to be in the labor area and see two vaginal deliveries. You did great with the frequent postpartum assessments. You were able to professionally communicate with the staff on the unit. You were able to navigate meditech when finding information for your care map. RH

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

Week 7 – 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

Week 7 – 5a – You described the new technology you were able to see in action while on clinical in the ER as the portable vein finding light and ultrasound machine. You worked with Erica Ruth RN in the ER and she marked you as excellent in all areas. KA

Week 7 – 5f – You did a nice job writing a concise SBAR report related to your patient this week in the ER. Your SBAR was clear and included pertinent information. In the recommendations section you might want to add a request for further orders since the patient is being admitted. KA

Week 7 – 5g – You thoroughly and thoughtfully responded to all required CDG questions related to your ER experience. You included an in-text citation and a reference to support your ideas. Terrific job sharing your ideas and experiences. Keep up the excellent work! KA

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

Week 8 – 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 10: 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 demonstrated awesome enthusiasm in clinical with excitement with mother/newborn instructions. The nursing staff were happy to assist with your learning and stated it was awesome to have students with huge passion for learning! Amazing job this week! MD

Week 10 – 5a – You had the opportunity to see a patient who had a postpartum hemorrhage and how it is managed in the hospital setting. You also had the opportunity to work with the nurse as they completed 24 hour newborn screening and assessment this week on clinical. KA

Week 10 – 5e – You discussed the purpose for tracking vaccinations in the population and the usage of a statewide system to keep track of all immunizations administered. You identified the vaccines being placed in the EMR and from there being recorded into the statewide system. KA

Week 10 – 5f – You did a nice job writing an SBAR for your patient in your CDG this week. It was clear and concise. I would be more specific related to your patient's lochia assessment (i.e. small amount of lochia rubra) in your SBAR. I would also include estimated blood loss from hemorrhage. Other than that, you had a clear purpose and intention behind your SBAR. Great job! KA

Week 10 – 5g – You thoughtfully responded to all required CDG questions related to your OB experience. You included an in-text citation and a reference to support your ideas. You did a great job sharing your unique experience from the clinical setting. Keep up the excellent work! KA

Week 11- 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)*		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
b. Accept responsibility for decisions and actions.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
c. Demonstrate evidence of growth and self-confidence.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
d. Demonstrate evidence of research in being prepared for clinical.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
e. Exhibits professional behavior i.e. appearance, responsibility, integrity, and respect.		NA	NA	NA	NA	S U	S	S	S	NA	S	S	NA	NA	NA		NA	
f. Describe initiatives in seeking out new learning experiences.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
g. Demonstrate ability to organize time effectively.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
h. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
i. Demonstrates growth in clinical judgment.		NA	NA	NA	NA	S	S	S	S	NA	S	S	NA	NA	NA		NA	
	KA	KA	KA	KA	KA	KA	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 6 :

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

6a. An area of improvement I would like to work on is being more involved with newborn assessments such as the APGAR scoring, reflexes, baths, and feedings if possible. Some goals to meet my improvement is reviewing normal vs. abnormal newborn findings using my notes and book to help build my confidence in recognizing the newborns health status. I will review newborn findings every day for 15 minutes to be able to reach my goal for my next OB clinical. **Nice idea. Good luck! KA**

Week 6: 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 births during the day. **RH**

Week 6 – 6e – You did not complete your survey for your Firelands OB experience. Once it is completed you will be counted as making up the 1 hour of missed clinical. Please make sure to make a comment on how you will prevent receiving a U in the competency in the future. **KA** I completed my survey! To prevent receiving a U in the future for a missing survey. I will complete the survey right after my clinical experiences and set a reminder each week.

Week 7:

6a. An area of improvement I would like to work on is practicing my head-to-toe assessment for a pediatric patient and an adults. Goals to meet my improvements are to practice my head-to-toe assessment on a family member twice a week to build confidence and have more efficient head to toe assessments. **Great idea. It is important to refresh on skills you have not utilized in awhile. KA**

Week 7 – 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 – 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**

Midterm – You are satisfactory for clinical at midterm. You have had a variety of clinical opportunities in the first half of the semester and have had the opportunity to complete all competencies except 5d. This competency relates to documenting in the EHR. You will have the chance to meet this competency when you attend OB clinical at FRMC. You have grown in your skills and confidence this semester. Keep working on staying calm and reminding yourself you have the knowledge and capabilities to perform all tasks in front of you. Be proud of your accomplishments in the first half of the semester and work hard to finish strong in the second half of the semester! **KA**

Week 8:

6a. An area of improvement during this week’s clinical is practicing my IV pump skills. Goals to meet my improvements are during open lab Friday practice priming and programming the IV bag in the pump to gain confidence. **Great idea. Did you get to practice this on Friday? KA**

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**

Week 8 – 6e- Professional behavior was observed throughout your time at the Boys and Girls Club this week. **BS**

Week 10:

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

6a. An area of improvement for this week that I would like to work on is to continue practicing more assessments on patients to gain more confidence. Goals to meet my improvements, is to continue to practice assessments on family members 2 a week. *If you ever want to use the simulator as well let us know. KA*

Week 10: FTMC OB Objective 6 D-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 11:

6a. An area of improvement for this week is to keep fresh on my skills that I have learned leading up to this semester. Goals to meet my improvements are to watch the videos in the resource tab on Edvance, watching 1-2 videos every week. *It is always good to refresh on skills you do not get to utilize often. Great idea in prep for next semester. KA*

Week 11- 6d,e,g- You may have been a bit nervous at first, but I could not tell and you performed well. 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

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

Student Name:		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:							
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 abnormal assessment findings, lab findings, and risk factors for your patient. You may want to include a full set of vital signs, epidural placement, and current position on peanut ball in your assessment section. 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	2	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 patient's blood pressure, urine results, and obesity related to your chosen nursing priority. 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 included frequency, were realistic, and were individualized. Your intervention prioritization could be a little better. Remember first are assessments followed by procedures,
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	2	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	medication, and monitoring interventions and lastly are education interventions. KA
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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	
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: <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.
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: 43/45

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	S
Faculty Initials	KA	KA	KA	KA	KA	KA	KA	KA	KA	KA
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: 9/11 & 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:
	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	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	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	U	S	S	S						U	
Survey	S		U		S	S						U	
Faculty Initials	KA	KA	KA	KA	KA	KA						KA	
Remediation: Date/Evaluation/Initials	NA	NA	S	NA	NA	NA							

* Course Objectives

Comments:

Week 6 – Your simulation survey for your Labor/Shoulder dystocia simulation was not completed by Friday at 0800. Once it is completed you will be counted as making up your 1 hour of missed simulation and S for the simulation survey. KA I completed my survey! To further prevent this I will fill it out after each simulation and set a reminder every week. KA

Week 11 – Empathy Simulation – Your simulation survey for your Empathy simulation was not completed by Friday at 0800. You also did not submit a picture of you caring for the newborn as instructed in the reflection journal questions. Once both pieces are completed you will be counted as making up your 6 hours of missed simulation for the missing survey and incomplete reflection assignment and S for the simulation survey. I completed the survey and turned in my picture! I am going to put multiple reminders on my phone and calendar and complete each survey after a simulation.

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): Brummett (M), Fox (C), Lee (A)

GROUP #: 1

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/11/2025 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. Notices rhythm on fetal monitor. Patient requests drink, states she is peeing a lot. Notices contractions on fetal monitor, and that they should not occur at 33 weeks. UA results obtained, THC present. Pain rated 4/10. Patient requests mountain dew and McDonalds.</p> <p>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.</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>Prioritizes need for VS, interprets VS to be normal. Interprets accelerations on fetal monitor. Interprets need to reposition patient. Interprets need for FSBS. Interprets BS of 225 to be high.</p> <p>HR interpreted as being high, BP low. Fundus recognized as boggy. Recognize need to massage fundus. VS assessed. 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. Applies fetal monitor. Assists patient to left side. Urine sample sent to lab. Obtains FSBS- 225. Call to physician to report patient history of gestational diabetes, BS of 225. Provider orders UA to confirm dates, LR at 250 ml/hr, Procardia, acetaminophen. Orders read back. Inquires about marijuana use, prenatal care. Asks questions in attempt to verify dates. Explains that mountain dew and McDonalds may not be the best dietary choices. Education provided about dietary choices and suggests better choices. Also recommends prenatal care for pregnancy. Call to provider to question order for Procardia, inform about the lack of prenatal care. Medications prepared, patient identified, confirms allergies, begins IV infusion, administers Procardia and acetaminophen. Education provided about marijuana use.</p> <p>Fundus immediately massaged. Feet elevated and head put down. Explains to patient about the PPH. VS reassessed. Call to provider to report bleeding, dizziness, boggy uterus. Order</p>

	received for methylergonovine. Call to HCP to confirm dose of methylergonovine. Confirmed, methylergonovine administered. BP reassessed. Pad weighed- 600 gm.
<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. 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)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)* <p>*Course Objectives</p>	<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>

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Brummett (A), Fox (M), Lee (C)

GROUP #: 1

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: location, rating, duration, description</p> <p>Obtain vitals</p> <p>Medication nurse reassesses pain prior to pain medication administration</p> <p>Assess IV site prior to medication administration</p> <p>Cervical exam prior to nubain administration</p> <p>Cervical exam after nubain administration. Identify that water broke. Ask about odor, consistency, color, amount, and verify time.</p> <p>Notice baby is stuck and start HELPERR maneuvers to deliver baby</p> <p>APGAR 1 minute: 9</p> <p>Newborn assessment on baby: thorough newborn assessment including reflexes (sucking, rooting, Babinski)</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 vitas as WDL</p> <p>Offer nubain for pain relief due to not wanting epidural</p> <p>Interpret fetal monitor as accelerations</p> <p>PCN administered prior to delivery</p> <p>Interpret that water broke and has cervical change after nubain administration</p> <p>Interpret early decelerations after medication 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 birth plan/visitors with patient</p> <p>Medication administration: offer education on nubain prior to administration. Verify name/DOB, verify allergies, scan pt, scan medications. Education on GBS status and antibiotics. Hang primary and secondary fluids correctly (secondary bag above primary bag). Call healthcare provider prior to nubain administration per order. Nubain administration with correct needle, correct technique, correct dose, use of needle safety.</p> <p>Call healthcare provider after medication administration/cervical recheck. Update with ROM and new cervical change</p> <p>Call healthcare provider when patient states she needs to push. Asks for new orders. Stops oxytocin.</p> <p>Evaluate for episiotomy, put in McRoberts position, provide suprapubic pressure, attempt to remove posterior arm, roll patient on hands and knees, rotational maneuvers</p> <p>Newborn care: dry off, put on hat, skin to skin with mom, put under warmer if needed</p> <p>Medication for newborn: erythromycin and vitamin K. education provided to mother prior to administration. Vitamin K administration: use of correct needle size, correct location, use of needle safety, incorrect dose administered.</p> <p>Call healthcare provider with update on delivery and self-report medication error with vitamin K. Due to recognition of medication error, a “D” is given for evaluation rather than “B”</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 stated good teamwork, communication, and proper interventions (HELPERR). Team identified medication error and discussion about how this could have been prevented. Each member identified a strength and area for improvement for next simulation. Emotional intelligence questions related to patient point of view and support person point of view. Each member also identified their emotions throughout the simulation and how it impacted their actions/how they reacted during the 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>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. 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</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, 2, 5)* 	<p>try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient’s data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.</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. Is hesitant or ineffective in using nursing skills.</p> <p>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.</p> <p>You have completed the remediation assignment related to proper medication administration and medication errors that pertained to your group’s performance in this simulation. Your assignment was completed satisfactorily, therefore you are now satisfactory for this simulation. RH</p>
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Sydney Fox

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)* 	<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</p>

<p>3. Collaborate with members of the healthcare team to provide safe, holistic, and comprehensive patient care. (1, 2, 4, 5, 6)*</p> <p>4. Utilize SBAR communication in interactions with members of the health team. (5)*</p> <p>*Course Objectives</p>	<p>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>
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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): Brummett (C), Fox (A), Lee (M)

GROUP #: 1

SCENARIO: Pediatric Respiratory

OBSERVATION DATE/TIME(S): 10/23/25 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>Introduce self, obtain vitals</p> <p>Skin assessment and mucous membranes assessed for dehydration status</p> <p>Pull gown down while performing respiratory assessment. Ask about cough (productive, sounds).</p> <p>Perform circulatory assessment (brachial pulses, radial pulses)</p> <p>Patient complain of throat pain, does not do pain assessment</p>

	<p>Visualize ears and notice yellow drainage from left ear</p> <p>Does not ask respiratory history once father enters room</p> <p>Notices medication errors in chart</p> <p>Pain assessment done prior to ibuprofen administration (location, rating using FACES scale)</p> <p>Notice increased cough upon reassessment.</p> <p>Pain reassessment with FACES scale. Notice increased pain from previous</p> <p>Respiratory assessment. Ask about difficulty breathing. Remove gown to visualize chest. Identify stridor lung sounds. Does not ask about retractions.</p> <p>Notice increased heartrate and decreased oxygen.</p> <p>Ask about cough</p> <p>Reassess lungs after breathing treatment. Notice increased oxygen saturation</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 elevated temperature</p> <p>Look up safe dose ranges for medications in chart and calls healthcare provider for clarification</p> <p>Give ibuprofen first due to acetaminophen not being due</p> <p>Prioritize staying in room with patient while having stridor</p> <p>Correlate stridor with respiratory distress and an emergency</p> <p>Calculate correct dose for dexamethasone</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>Provide education to father about croup (signs/symptoms of respiratory distress, what causes croup, smaller airways, length of illness, cool mist humidifier, take out in cool air)</p> <p>Call healthcare provider with questions about medications. Ask about clarification of orders (fluid rate, amoxicillin, ibuprofen). Readback new orders back to healthcare provider.</p> <p>Additional education provided to father about smoking in the home.</p> <p>Change IV fluid rate on pump</p> <p>Medication administration: verify name/DOB, verify allergies with patient and father, scan patient, scan medications, education provided on each medication (ibuprofen, cetirizine, amoxicillin), administer in cheek</p>

	<p>Call respiratory therapy for breathing treatment. Stresses importance of urgency.</p> <p>Apply oxygen at 0.5 liters to increase oxygen</p> <p>Educate/reassure father on what is going on</p> <p>Reassured patient when says he is scared</p> <p>Call healthcare provider with update on patient status and ask for oxygen order. Receive order for steroid. Readback orders</p> <p>Medication administration: verify name/DOB, verify allergies, scan patient, scan medications, correct dose/med math</p> <p>Call healthcare provider to question acetaminophen order. Readback new order to provider.</p> <p>Medication administration: verify name/DOB, verify allergies, scan patient scan medications, correct dose administered</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 recognition of teamwork and communication throughout simulation. Discussion of medication orders and how team identified the doses were wrong. Students stated they were comfortable addressing orders because patient safety comes first. Team provided great education to father about croup and what to watch for at home. Emotional intelligence questions asked in relation to how students would feel if that was their child and how they felt during the respiratory distress part of the scenario. Students admitted to feeling nervous and stressed at that time but really wanted to make sure they were doing everything they could for their patient prior to “freaking out.”</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>	<p>You are Satisfactory for 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. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient’s data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.</p> <p>Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families. Communicates effectively; explains interventions; calms and reassures patients and families; directs</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>and involves team members, explaining and giving directions; checks for understanding. Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response. Shows mastery of necessary 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>
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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: _____