

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

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

Student: Nevaeh Walton

Final Grade: Satisfactory

Semester: Fall

Date of Completion: 11/24/2025

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

Faculty eSignature: M. Dunbar DNP, RN

DIRECTIONS FOR USE:

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

METHODS OF EVALUATION:

- 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)

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
9/9/2025	Impaired Skin Integrity	NI/MD	Satisfactory/MD	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:		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S
b. Provide care using developmentally appropriate communication.		NA	NA	S	S	S	S	S	S	S	NA	NA	NA	NA	NA		NA	S
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		NA	NA	S	S U	S NI	S	S	S	S	NA	NA	NA	NA	NA		NA	S
Clinical Location Age of patient		NA	NA	FRMC OB 30 vrs.	FRMC ER 88vrs.	Belleve Middle School	Boys and Girls Club	MIDTERM	Fisher Titus OB(30)/Saint	Flu Clinic	NA	NA	NA	NA	NA		NA	FINAL
	MD	MD	MD	MD	MD	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:

1.e. Intimacy versus Isolation; I chose this because this is a stage experience in young adulthood, usually from ages 20-40 years. Successfully navigating this stage is shown by developing strong bonds with partner or family, which was shown during this clinical experience by how many friends and family came to visit her after she gave birth. Excellent! MD

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

1.e.(Week 5) Integrity vs. Despair; I chose this because at this stage individuals reflect on their life and face either acceptance or reject. Choosing not to accept any medications could be part of his acceptance of the natural course of aging and his confidence in the choices he made throughout his life, such as potentially not using a lot of medications in general. MD

1.e.(week 6)-Industry vs. Inferiority. I chose this because at this age children are developing new skills and abilities. Success leads to a sense of industry, or accomplishment, while struggles lead to a sense of inferiority. Hearing and vision screening are especially important because difficulties in these areas can affect learning and self-confidence. Awesome! MD

1.e. (week 7)- Industry vs. Inferiority. I chose this because at this age these kids are learning skills and becoming more confident after succeeding. This club was able to provide activities like dodge ball and freeze tag, that helped build the kids confidence when they won. However, it also upset some of the kids when they lost, which may create feelings of inferiority. Great! MD

1.e. (week 8)- Intimacy vs. Isolation. I chose this because at this stage you are forming meaningful relationships and commitments. During this clinical I witnessed the patient continuing to form emotional bonds with her newborn. Perfect! MD

1.e. (week 9)-Generativity vs. Stagnation. I chose this because many of the hospital employees ages were around middle adulthood. During this stage individuals focus on contributing to society, which they did by participating in preventative health measures like vaccinations. Absolutely! MD

Firelands OB Week 4 – 1a, c, d – You did a wonderful job providing holistic care to the mom and baby you were assigned to this week. You did a great job assessing your assigned mother utilizing developmentally appropriate assessment skills and reporting any abnormal findings. You were able to identify safety measures used to keep newborns stay safe on the OB unit and completed mother newborn verification process whenever returning the newborn to the parents from the nursery. KA

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

ER Clinical Objective 1E: This competency needs addressed with every clinical experience. It was not addressed on your clinical tool this week which turns the rating to an unsatisfactory. Please address this and state how you will work to include this in future submissions. MD

Objective 1. E. - I will work to include this in future admissions by reading over the objectives more carefully before I submit by clinical tool every time in the future before submissions. Thank you for stating how you will be sure to work on this in the future. You are receiving an NI because I still need an Erikson's stage of development for ER clinical. 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

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

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

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

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

Flu Week 9: 1(a, b)- You did a good job communicating with patients at the flu/COVID clinic. You were able to work quickly and efficiently to provide vaccines to everyone who attended. RH

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

Firelands OB Week 4 – 1k and l – You recognized the uniqueness of the family you were caring for and ensured the opinions and questions were responded to with thoughtfulness and their perspective was validated. You respected the family and their right to make decisions for their infant and ensured they had the necessary information to do so. KA

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

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

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

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

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

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.		NA	NA	S	S	NA	NA	S	S	NA	NA	NA	NA	NA	NA		NA	S	
b. Perform nursing measures safely using Standard precautions.		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S	
c. Perform nursing care in an organized manner recognizing the need for assistance.		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S	
d. Practice/observe safe medication administration.		NA	NA	S	S	NA	NA	S	S	S	NA	NA	NA	NA	NA		NA	S	
e. Calculate pediatric and adult drug dosages correctly and determine appropriateness of the dose.		NA	NA	S	S	NA	NA	S	S	NA	NA	NA	NA	NA	NA		NA	S	
f. Utilize information obtained from patients/families as a basis for decision-making.		NA	NA	S	S	NA	NA	S	S	S	NA	NA	NA	NA	NA		NA	S	
g. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting) (List Below)*		NA	NA	S	S	S	S	S	S	S	NA	NA	NA	NA	NA		NA	S	
	MD	MD	MD	MD	MD	MD	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:

2.g. Nausea and vomiting throughout pregnancy as well as low Hgb and Hct may suggest nutrition issues, which could show a limited assess in food, finical resources, or perhaps have a poor health literacy. **This is a good connection for all of these! What resources could you provide the patient? MD**

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

2g. I could tell at times he had a slight difficult time hearing the nurse when she asked questions. This could possibly lead to him maybe having difficulty understanding discharge instructions or follow up care. This could lead to him having poor health literacy. **Absolutely! What additional interventions could you perform to ensure the patient understands the information being provided? MD**

2g. (week 6). One social determinant of health that have the potential to influence patient care is lack of financial resources. After having their hearing or vision screened, kids might find out that they need glasses, hearing aids, or medical treatment. If their family lack finical resources this could be a struggle or an added stressor. It could also prolong the time before proper treatment of either vision or hearing is done, potentially causing academic or social delays. **Yes! MD**

2g. (week 7). One social determinant of health is economic stability. Families may face finical stress that can affect their access to nutritious foods, safe housing, or being able to participate in extracurricular activities. This also could lead to some kids not having regular primary care or any preventative services, like vision or dental. **Good! MD**

2g. (week 8)- One social determinant of health could be mental health or stress factors. The patient seemed to have a great support system and seemed to be pretty prepared, especially with her being her second pregnancy. One potential stress factor could be her son adjusting to the presence of his new brother. This could create relationship issues and can influence her recovery. **Absolutely! Mental health is such an important after delivery! MD**

2g (week 9)- One social determinant of heath that could've influenced patient care would be lack of access to healthcare. Employees that have easy access to workplace vaccination clinics are more likely to stay up to date on their immunizations, rather than someone who either lives in remote areas or does not have heath insurance. **Absolutely! MD**

Firelands OB Week 4 – 2b, c, d, e –You utilized appropriate precautions on the newborn who had not had their first bath. You did a wonderful job providing a baby bath to the newborn and monitored their temperature before and after bath as well as helped prevent hypothermia by utilizing appropriate warming techniques. You provided the congenital heart screening to the newborn ensuring the pulse oximeter was placed on the corrects limbs and monitored for 1 minute on each site. You did a nice job following the rights of medication administration and appropriately documenting the medication administration in the MAR this week on clinical. You had the opportunity to administer PO medications to the postpartum mother while on clinical this week. **KA**

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**

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**

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 assist with discussing medication administration for the mother and calculate medications for the patients. **Great job! MD**

Flu Week 9: 2(d)- You did a great job safely administering the vaccines (flu and COVID) at the vaccine clinic **RH**

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

3.d. One ethical issue I observed was the potential for judgment in caring for a postpartum patient who tested positive for THC and nicotine use. While staff were all very professional and I did not see any judgement from any of them, I could see how easily stigma could influence the quality of care that patient may receive. **This is absolutely true. How would you address this if you found this was occurring? MD**

3.d. While at this clinical I observed the patient refuse any pain medication for this pain. Older adults may downplay symptoms, but there could still be hidden injuries or health risks. Nurses have to respect the patient's autonomy while also preventing the patient from being harmed, which can be both a legal and ethical issue. **Absolutely! Patient advocacy is so important! MD**

3. d. (week 6). One ethical issue I could have potentially seen was the lack of maintain confidentiality when discussing results. While at this clinical everyone was very good at keeping student information private, but I could see that this could be a potential issue at other places. For example, if as student's friend was curious on what their friend got compared to themselves. Legally student health information must be protected, but ethically it also builds trust between the nurse and the student. **You are absolutely correct! MD**

3.d. (Week 7). While there I noticed the kids really like to talk and share things about their lives. This could potentially lead to the kids talking about sensitive information such as family issues health concerns. This could lead to the staff potentially to the ethical issues of having to balance the kids trust with the duty to protect them. **This is so true. What would you do if this happened to you? MD**

3.d. (week 8)- One potential example of legal or ethical issues that could happen on the OB floor is a health care provider pressuring a mother to breast feed when she expresses that she wants to formula feed. This undermines the principle of autonomy. In this potential scenario, the mother's choice should be respected and supported without judgment. **Absolutely! How would you respond to the healthcare provider if they do pressure the mother to formula feed? MD**

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

3.d. (week 9)- One legal issue could have been maintaining patient privacy and confidentiality. Since the clinic was in a more public area where many employees came to receive vaccines, there could have been a risk of others overhearing personal information. **Absolutely! How did you combat this? Were you able to discuss items with the patient? MD**

Firelands OB Week 4 – 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 through the day. You also maintained all the standards in the FRMCSN code of conduct while on the OB unit. **KA**

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

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

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**

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**

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

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

Comments:

4.d. Although the patient planned to bottle feed, I provided education on breast engorgement management, including avoiding breast stimulation. This can help her manage some of her discomfort during her postpartum period. **Great! MD**

4d. Since this patient refused pain medication, he might not feel pain as intensely, so one teaching point is to give him education of other signs of injury like dizziness, confusion, or difficulty walking. This could help him better recognize signs complications. **Excellent education! MD**

4d.(Week 6). One way I did this was by using age appropriate language. I explained the purpose of the hearing and vision screening by using simple and reassuring terms. I said something like, "We are checking how well you can see the board or hear your teacher so we can make sure nothing is getting in your way of learning". This can help them feel more involvement and included. **Great! MD**

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

4d.(Week 7). One way I did this was by using simple language and visual aids when explaining what activity, we would like them to do. When explaining how the game worked, we demonstrated where they would stand and the game was played simply. When they were later confused on another game some of us join the game ourselves to help give a better visual example for them. **Awesome! MD**

4d. (week 8) (St. Marys)-One way I did this was by explaining the process of CPR in a way that was easy to understand for the younger groups of kids that we presented to. I also gave them a visual demonstrated of what to do in order to help them better comprehend. When it was their turn to practice we were able to provide one on one teaching and hands on learning to the kids too. **Awesome! You did a great job! MD**

4.d. (week 9)-One possible way to do this would be to provide clear information about the importance of preventative health measures like vaccines and explaining possible side effects. **Yes! MD**

Firelands OB Week 4 -4b, d - You did a nice job documenting the postpartum assessment in the EMR for the first time. You asked appropriate questions to ensure you were able to document the assessments accurately. You kept up on your charting and ensured documentation was completed in real time. You provided patient education that was focused on the parents' concerns and answered all of the questions appropriately. **KA**

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**

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**

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**

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

Flu Week 9: 4(b)- Good job documenting your administration of vaccines. **RH**

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

Firelands OB Week 4 – 4f, g, h, I, j – You utilized information from your patient's chart as well as from your assessment to create a care map that correlated the patient's diagnostic tests, medications, medical treatments, nutritional needs, and nursing interventions to their disease process. You were knowledgeable on clinical and were able to discuss how these aspects interrelated and if you did not have an answer you looked the information up to assist you with making the connections. KA

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

FTMC OB Objective 4 F-J: During our clinical day we were able to obtain this objective with a postpartum mother and newborn on their delivery day. 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	S	S	S	S	S	S	S	NA	NA	NA	NA	NA		NA	S
b. Evaluate own participation in clinical activities.		NA	NA	S	S	S	S	S	S	S	NA	NA	NA	NA	NA		NA	S
c. Communicate professionally and collaboratively with members of the healthcare team.		NA	NA	S	S	S	NA	S	S	S	NA	NA	NA	NA	NA		NA	S
d. Document assessment findings, interventions, and outcomes accurately in the electronic health record.		NA	NA	S	NA	NA	NA	S	S	NA	NA	NA	NA	NA	NA		NA	S
e. Demonstrate skill in accessing and navigating information in the electronic health record. (Responding)		NA	NA	S	NA	NA	NA	S	S	NA	NA	NA	NA	NA	NA		NA	S
f. Clearly communicate care provided and needed at each transition in care using hand off communication techniques. (I-SBAR-R)		NA	NA	S	S	NA	NA	S	S	NA	NA	NA	NA	NA	NA		NA	S
g. Consistently and appropriately post comments in clinical discussion groups.		NA	NA	S NA	S U	NA	NA	U	S	NA	NA	NA	NA	NA	NA		NA	S
	MD	MD	MD	MD	MD	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:

Firelands OB Week 4 – 5a, c, d, e, f, – You did a great job showing interest and enthusiasm while in OB. You sought out new learning experiences while on clinical. You communicated and collaborated with the OB staff professionally and worked together to ensure the patients received the appropriate care. You did a nice job navigating the EMR and gathering information on your patient to ensure you could provide appropriate care throughout your clinical day. You provided hand off report to the appropriate nurse when leaving clinical at the end of shift. KA

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

Firelands OB Week 4 Objective 5G: This week you completed a care map and not a CDG. This competency is an NA for this week. MD

ER Clinical Objective 5A: You were marked excellent in all areas by your nurse with the comment “Foley catheter, female with success! Removed IV good technique.” Marcie Caporini, RN. Great job! MD

ER Clinical Objective 5 B, C, F: 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. Great job! MD

ER Clinical Objective 5G: This week you were to provide a CDG based on your experience in the ER. You wrote a great CDG that met the requirements for satisfactory submission based on content and word count. However, this competency is an unsatisfactory based on the lack of reference and in-text citation. Please be sure to include these items on all CDGs. In addition, please write a response with how you will include this in future CDG posts. MD

Objective 5G- I will look over the objectives of the CDG more carefully and make sure that I have an in-text citation every time it’s needed. I will double check every time before I post in the future. **Don’t forget the reference too! 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

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

MIDTERM Objective 5G-You are receiving an unsatisfactory rating due to not having the opportunity to submit another CDG. Once you submit your CDG for FT OB clinical that meets all of the criteria for a satisfactory submission this rating will change. MD

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 and watching a circumcision. The nursing staff were happy to assist with your learning! Amazing job this week! MD

FTMC OB Objective 5G-You provided a satisfactory CDG including a reference and in-text citation! Great job! MD

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: 5(a, c)- You showed a positive attitude while at the flu/COVID clinic this week. You were able to communicate effectively with other members of the healthcare team while there. RH

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

6.a. One area for improvement is that I am still getting comfortable explaining health concepts clearly and in patient friendly language. I will practice explaining one health topic a week in simple terms to practice explaining these concepts better to patients so that they can have a better understanding. This is a great plan! Let me know if you need any assistance! MD

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

6. a. One area of improvement would be in my SBAR delivery for handoffs and reporting. I will practice delivery SBAR once a week and consider what went well and what could be more precise next time. **Awesome! MD**

6.a. I want to improve my ability to give age-appropriate explanations so students clearly understand the purpose of screenings without feeling nervous. I could do this by practicing scenarios where I practice explaining a health concept or procedure in different ways depending on the target age group three times this week. **Great plan! MD**

6.a. I want to improve on giving health education based on each child developmental level and keeping them engaged throughout. I could do this by learning a new age-appropriate teaching technique five times this week. **Excellent! MD**

6.a. I want to improve my confidence and communication skills when providing education to postpartum patients. I can do this by reviewing postpartum education materials including discharge teaching points on newborn care three times this week. **Excellent! MD**

6.a. I want to improve on my patient education, especially making sure I explain information about vaccines clearly and confidently. I can do this by looking up the side effects and main differences between the Flu and Covid vaccine two times this week. **Absolutely! Practice makes progress! MD**

Firelands OB Week 4 – 6c, d, e, f, g, h, I – Your thought process and time management skills have grown from previous semesters. You came to clinical ready and prepared to learn. You were enthusiastic and willing to learn whatever your faculty and staff was able to teach you. You were organized and timely with your care and documentation and delivered all your care with an ACE attitude. **Terrific job! KA**

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

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

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**

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**

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**

Flu Week 9: 6(d, e, g)- It had been a while since you have given an IM injection, but once you did a few injections, you were able to do so confidently and get through everyone in a timely manner. You also maintained professionalism throughout the experience. **RH**

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

FINAL-Congratulations! You have satisfactorily completed the clinical portion of the Maternal Child Nursing course! It has been amazing watching you grow in confidence and skill throughout the semester! I cannot wait to see you be successful and graduate! Good luck next semester! MD

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

Student Name: Nevaeh Walton		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: 9/9/2025, Impaired Skin Integrity							
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	All criteria met. 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	3	

	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	
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.

The care map will be graded “needs improvement” if missing either the in-text citation or reference, but not both. Reference provided, in-text citation missing. This care map is a NI. MD

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:

Unfortunately, due to the missing in-text citation, your care map is automatically graded NI. Please add this to the care map so it can be regraded. MD

In-text citation provided on resubmission. Your care map is now satisfactory. MD

Total Points: 45/45 Needs Improvement due to missing in-text citation. MD
45/45 Satisfactory MD

Faculty/Teaching Assistant Initials: MD MD

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	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20
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: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	Date: 8/20	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: 11/5	Date: 11/18	Date: 11/18	Date: 11/21	Date: 11/21	Date: 8/26
	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	S	S	S	S	S	S	S	S	S	S	S
Survey	S		S		S	S		S		S		S	S
Faculty Initials	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

* Course Objectives

Comments:

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

vSim Objectives

9/22/2025 vSim Maternity Case 1

1. Performs focused antepartum assessment of patient with severe preeclampsia. (1, 2, 4)*
2. Recognizes signs and symptoms of severe preeclampsia (hypertensive disorders). (1, 2)*
3. Communicates severe preeclampsia to the interprofessional team. (1, 2, 3, 5)*
4. Administers prescribed antihypertensive medication (magnesium sulfate). (1, 2, 3, 5)*
5. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)*

* Course Objectives

10/6/2025 vSim Maternity Case 4

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

* Course Objectives

11/3/2025 vSim Pediatric Case 3

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

*Course Objectives

11/18/2025 vSim Pediatric Case 1

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

* Course Objectives

11/21/2025 vSim Pediatric Case 4

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

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet: SCENARIO: Empathy Simulation

STUDENT NAME:

OBSERVATION DATE/TIME:

8/26/2025

<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>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.</p> <p>Great job.</p> <p>I enjoyed seeing your pregnancy photo!</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Simulation Objectives:</p> <ol style="list-style-type: none"> 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)* <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Comments</p> <p>You are satisfactory for this simulation.</p>

*Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Palagyi (A), Riedy (M), Walton (C)

GROUP #: 8

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/18/2025 0830-1000

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. Inquires about pain. Notices rhythm on fetal monitor. Recognizes contractions on fetal monitor, and recognizes that they should not occur at 33 weeks. Pain rated 4/10. Patient requests mountain dew and cheeseburger. UA results obtained, THC present, glucose, nitrates.</p> <p>Mona CO feeling dizzy and lightheaded. VS assessed. Notices low BP and rising HR. Bleeding discovered. Legs elevated. Begins fundal massage. Notices uterus is firming up in response to fundal massage. BP reassessed.</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 the need to apply fetal monitor. Prioritizes the need to obtain FSBS- 225- recognized as high. Interprets that contractions at 33 weeks is not normal.</p> <p>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. Assists patient to left side. Call to lab for UA results. Inquires about pregnancy history and history of GD. Call to HCP to report FSBS and UA results. Orders received for LR, nifedipine, and acetaminophen and read back. Also for US to verify due date. UA results discussed with patient, education provided on GD and THC use. Patient identified, medications prepared, allergies confirmed, acetaminophen administered. Patient requests confirmation of the nifedipine order. IV fluid initiated. Call to HCP to question nifedipine order, explanation received.</p> <p>Fundus immediately massaged upon discovery of bleeding. Calls to team for assistance. Call to provider to report low BP, high HR, bleeding, dizziness, boggy uterus. Good report. Order received for methylergonovine. Patient identified, allergies confirmed, Methylergonovine prepared and administered. BP reassessed. Call to</p>

	patient's wife to update.
<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)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)* 	<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>

*Course Objectives	
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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): Palagyi (C), Riedy (A), Walton (M)

GROUP #: 8

SCENARIO: Shoulder Dystocia and Newborn Care

OBSERVATION DATE/TIME(S): 9/25/25 0830-1000

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>Obtain vitals</p> <p>Pain assessment: type, rating, description,</p> <p>Obtain thorough history on patient and verify information that was given from report. Very detailed assessment on mom and baby. Leopold’s position assessment. Cervical check.</p> <p>Pain reassessment after nubain administration.</p> <p>Ask about contractions. How long, how frequent, how strong</p> <p>Notice change in fetal strip after nubain administration</p> <p>Repeat cervical exam. Notice change. Notice water breaks.</p> <p>Water breaks: asks about color, consistency, odor, and amount</p> <p>APGAR 1 minute: 9</p> <p>Newborn assessment: thorough assessment (sucking, palmar grasp)</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 vitals as WDL</p> <p>Interpret fetal monitor as accelerations and identify baseline fetal heart rate</p> <p>Prioritize pain medication</p>

	Interpret change in fetal strip as early decels and identifies that baby is coming (relates to head compression)
<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>Communicate birth plan with mom and offer various options for pain relief</p> <p>Provide education on risk factors for shoulder dystocia and what possible interventions may take place during birth</p> <p>Call healthcare provider prior to nubain administration</p> <p>Nubain administration: provide education on potential side effects, does not scan medication, does not scan patient, does not check name/DOB, correct dose administered, correct needle size, correct technique, use of needle safety.</p> <p>Penicillin administration: scan medication and scan patient, verify patient/DOB, verify allergies, hang secondary above primary fluids. Pump programmed to correct rate and amount of fluid to be administered, but not programmed to be penicillin. This bypasses all safety measures in place by the pump/facility and is not appropriate nursing practice.</p> <p>Education provided to patient and sister about change in fetal strip and what it means for labor process</p> <p>Call healthcare provider with updated cervical exam and water breaking</p> <p>Call for help, call healthcare provider with update, roll to hands and knees, evaluate for episiotomy, McRoberts position, suprapubic pressure, remove posterior arm, rotational maneuvers</p> <p>Offer skin to skin to mother immediately after birth, dry baby off, suction mouth and nose,</p> <p>Provide education to mom about vitamin K and erythromycin ointment prior to administering.</p> <p>Vitamin K administration: verify name/DOB, correct dose, correct needle size, correct technique, use of needle safety</p> <p>Call healthcare provider with update, great SBAR provided with all</p>

	assessment findings
<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 each other throughout simulation. Team was able to identify areas for improvement for next simulation. team identified missed scanning of medications and patient prior to one medication administration but did do so for all other med administrations. Great education provided to patient and support person in regards to what to expect during delivery. 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. Each team member identified an area of personal improvement and something they did well.</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)* 	<p>You are satisfactory in this scenario! RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family.</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. Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding. 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</p>

<p>4. Identify and implement appropriate nursing interventions in which heat loss occurs in infants. (1, 2, 5)*</p>	<p>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 NAME:

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

<p>CLINICAL JUDGMENT</p> <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>OBSERVATION NOTES</p> <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>

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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): Palagyi (M), Riedy (C), Walton (A)

GROUP #: 8

SCENARIO: Pediatric Respiratory

OBSERVATION DATE/TIME(S): 10/30/25 0830-1000

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>Obtain vitals</p> <p>Notice safety items in bed (medication, needle, scissors)</p> <p>Respiratory assessment. Remove gown to visualize chest. Ask about color, temperature of skin, positioning of patient</p> <p>Notice medication errors in orders in chart (ibuprofen, IVF, and amoxicillin)</p> <p>Pain assessment (location, FACES scale)</p> <p>Reassess vitals</p> <p>Pain reassessment (location, FACES scale)</p> <p>Respiratory reassessment. Pull gown down to visualize chest</p> <p>Obtain vitals</p> <p>Pain assessment (location, FACES scale)</p> <p>Respiratory assessment. Identify stridor lung sounds. take gown down to visualize chest but not enough to visualize retractions</p> <p>Acetaminophen order checked in skyscape and safe dose range ordered and per skyscape order was correct. Verified skyscape resource during debriefing to be correct.</p>
INTERPRETING: (2, 4) *	Interpret temperature as elevated

<ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Look up safe dose range for medication orders in chart.</p> <p>Give ibuprofen first due to acetaminophen not being due</p> <p>Interpret temperature as elevated, interpret heart rate as elevated, interpret oxygen saturation as low. Interpret combination of symptoms as respiratory distress</p> <p>Prioritize oxygen application to patient</p> <p>Stay in room with patient while in respiratory distress</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>Education provided to father about plan of care and asked if he had any questions</p> <p>Call healthcare provider to clarify orders including ibuprofen, amoxicillin, and IVF. Had healthcare provider readback orders to them rather than students reading back orders to healthcare provider.</p> <p>Change IV rate on pump</p> <p>Medication administration: verify name/DOB, verify allergies, educate on what medications are for (ibuprofen, amoxicillin, and cetirizine), scan patient, scan medication, give correct dose administered.</p> <p>Verify with pharmacy that cetirizine is a chewable tablet</p> <p>Education provided to father about croup (what it is, signs/symptoms to look for, how to manage at home, signs/symptoms of respiratory distress) education provided about ear infection and how to take antibiotics at home</p> <p>Put oxygen on patient due to low oxygen saturation. Start at 0.5 L</p> <p>Call respiratory for breathing treatment. Stress importance of treatment and communication respiratory status.</p> <p>Educate father on plan of care and what is happening with patient while waiting on breathing treatment</p> <p>Medication administration after breathing treatment</p> <p>Call healthcare provider. Give update on symptoms/respiratory</p>

	<p>distress episode. Receive an order for dexamethasone. Had healthcare provider read back order to students.</p> <p>Education provided to father about steroid.</p> <p>Medication administration: acetaminophen, 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 recognition of teamwork and communication throughout simulation. Discussion of medication orders and how team identified the doses were wrong. Students stated they were nervous addressing orders but knew they needed to address them 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. During debriefing, skyscape resource checked for acetaminophen safe dose range. Student had 10-20 mg/kg as safe dose range but did not have a route associated with it. Order in the chart was appropriate for this dose range, so they did administer it. Instructed that they need to double check route for future simulations and the PO safe dose range is listed as 10-15 mg/kg.</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. Review appropriateness of prescribed 	<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. 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</p>

<p>medications for prevention of errors and administer medications utilizing the concepts of growth and development. (1,2,5)*</p> <p>3. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)*</p> <p>4. Utilize the concepts of growth and development to provide therapeutic communication with the toddler and their family. (3, 5)*</p>	<p>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>
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Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Palagyi (C), Riedy (A), Walton (M)

GROUP #: 8

SCENARIO: Pediatric GI

OBSERVATION DATE/TIME(S): 11/5/2025 0830- 1000

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
NOTICING: (1, 2, 5) *						
<ul style="list-style-type: none"> Focused Observation: 	E	A	D	B		
<ul style="list-style-type: none"> Recognizing Deviations from Expected Patterns: 	E	A	D	B		
<ul style="list-style-type: none"> Information Seeking: 	E	A	D	B	<p>Notices temp of 102.5. Notices mucous membranes moist and pink. Notices bruise on abdomen. Reassessed following medication administration. Temp- 99.2.</p> <p>Jack CO stomach pain, nausea, says he feels like vomiting (get the bed pan), and vomits. Temp 102.1. Assessed for signs of dehydration.</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 temp as being high. Notices bruises in different areas- interpreted as suspicious. Interprets improvement in temperature.</p> <p>Temp reassessed and found to be higher again. Interpreted assessment findings and determines Jack is dehydrated.</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>Introduction, patient identified, allergies confirmed. Establishes orientation. Begins assessment, VS, pain. Questions Jack about his symptoms. Exposes abdomen, questions about bruise, mom immediately says he fell off his bike. Verbalizes suction is ready. Educates mom about BRAT diet and inquires about normal dietary habits. Call to HCP, questions acetaminophen and cetirizine doses. New orders received and read back. HCP informed of suspicious bruise- will investigate further. Patient identified, allergies confirmed, acetaminophen and cetirizine prepared and administered. Begins to question Jack about bruises. Additional bruises discovered, all from the same fall. Call to lab; + for rotavirus. Call to case management to report suspicious bruising. Call to HCP to report lab findings. Contact precautions initiated.</p> <p>Mom leaves room. Call to provider to report signs of dehydration and recommends fluid. Orders provided for fluid bolus and maintenance fluid, Zofran. Orders read back. With mom out of the room, begins to question Jack further about the origin of the bruises. Uncovers that mom's friend pushed and punched Jack and he also abuses mom as well. Call to pharmacy about Zofran dose, dose confirmed. Call to case management to report new information about bruises. Patient identified, Zofran and acetaminophen prepared and administered. Education provided to mom regarding rotavirus. IV fluid bolus initiated, maintenance fluid initiated.</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 scenario. Teamwork and communication were great. Discussed the nurse's role when they discover a potential abusive situation, which was handled well during the scenario. Discussed the potential benefit of separating mom and child to have individual conversations with each. Team noticed the clinical signs of dehydration and reacted appropriately to request IV fluid from the HCP.</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"> 5. Select physical assessment priorities based on individual patient needs. (1, 2)* 6. Provide quality, patient-centered care in an organized, safe manner to a toddler with gastroenteritis. (1, 2, 4, 5)* 7. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 8. Utilize the concepts of growth and development to identify concerns in assessment findings associated with potential child abuse and make appropriate referrals as necessary. (1, 3, 5)* 9. Utilize interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5)* <p>*Course Objectives</p>	<p>You are Satisfactory for this scenario! BS</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information Recognizes most obvious patterns and deviations in data and uses these to continually assess. Assertively seeks information to plan intervention; carefully collects useful subjective data from observing and interacting with the patient and family.</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: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families Communicates effectively; explains interventions; calms and reassures patients and families; directs 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 commitment to ongoing improvement; reflects on and critically evaluates nursing experiences; accurately identifies strengths and weaknesses and develops specific plans to eliminate weaknesses</p>
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: OBSERVATION DATE/TIME: 11/18/25 SCENARIO #: Student Developed Scenarios

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 deviations from normal with physical assessment and inquiry. Information seeking regarding patient condition as well as with parent/support person at bedside when appropriate.</p> <p>When developing your scenario, you noticed the important assessment aspects to include for a patient/support person with your assigned diagnosis.</p> <p>Through the scavenger hunt you were able to notice various details of each of the ten scenarios simulated.</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>You were able to interpret data pieces and prioritize accordingly.</p> <p>For each scenario, care was given in gathering details needed in order to phone the healthcare provider and provide SBAR.</p> <p>When developing your scenario, you interpreted the expected path of the disease process and necessary nursing interventions to include in the patient's care.</p> <p>You utilized clinical judgment to interpret appropriate responses to NCLEX style questions related to each scenario.</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 with communication that was collaborative between roles. Clear communication was utilized between colleagues.</p> <p>Clear communication was utilized with patient and family and layman's terms were utilized when appropriate.</p> <p>Responded with interventions that were planned accordingly and verbalized when necessary.</p> <p>Skill in identifying focused assessments as well as timely reassessments were utilized.</p> <p>Family members and others of the healthcare team were kept up to date on patient condition.</p> <p>Education was provided to patient and family on for current health status as well as for preventative measures.</p> <p>In response to your assigned disease process you developed a comprehensive simulation that encompasses aspects of assessment, interprofessional communication, and nursing interventions appropriate for the patient.</p>

	<p>You developed appropriate NCLEX questions for your scenario based on your disease process.</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>Reflected with a self-analysis of assessment and analyzation of data to identify missing pieces of the scenario.</p> <p>Actively participated in providing constructive feedback to all groups observed throughout the simulation.</p> <p>You developed debriefing questions specific to your scenario to assist your peers in reflecting on the importance of your simulation.</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 or higher in all areas is required for satisfactory completion of this simulation.</p> <p>Objectives</p> <ol style="list-style-type: none"> 1. Select physical assessment priorities based on individual patient needs. (1, 2)* 2. Provide quality, prioritized patient-centered care in an organized, safe manner to patients and families. (1, 2, 4, 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 patient and family. (1, 3, 5, 6)* 5. Utilize interpersonal skills in the interactions with patients, families, and members of the health team. (3, 5)* 	<p>The student developed scenarios were completed successfully. You are satisfactory for this simulation. KA/MD/BS/RH</p>

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Jameson Lee, Cathryn Palagyi, Neveah Walton, Madison Wright
Simulation

OBSERVATION DATE/TIME: 11/21/25 SCENARIO: Comprehensive

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>In the mother encounter you noticed suspicious bruising on the mother's face and neck. You also noticed the poor environment with chips, pop, rats, spider, and cockroaches scattered throughout the room. You obtained vital signs and asked if she was experiencing pain. Additionally, you noticed that the mother had an unprescribed medication, is a current cigarette smoker, and had a dysfunctional family dynamic when having conversations on home life. MD</p> <p>Noticed rodents and pizza boxes in kitchen. Noticed exposed cleaning supplies that kids could get into. Noticed expired infant formula. Noticed lack of nutritious foods in the refrigerator. Noticed open beer bottles. Witnessed father preparing bottle improperly and intervened. BS</p> <p>You noticed the signs of respiratory distress and dehydration in the children. You noticed environmental concerns throughout the home that would be safety hazards. You asked excellent questions focusing on multiple concerns and gather as much data as possible including nutrition, bugs/rats, and medications. KA</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>In the mother encounter you interpreted the suspicious bruising on the mother's face for physical abuse from her partner. You identified there were educational opportunities for abused women and children. You were also able to interpret the safety concerns throughout the room with the environment, unprescribed medications, cigarette smoking. You connected the patient's pain with the bruising around her eye. You encouraged the mother to discuss more of her dysfunctional family dynamic. MD</p> <p>Interpreted conditions in the kitchen as being dirty, messy, and unsafe for children. Interpreted exposed cleaning supplies as dangerous for children. Interpreted the lack of nutritious foods as not ideal for the family. Interpreted multiple empty beer bottles as potential alcohol abuse. Interpreted father's bottle preparation method to be inadequate (formula</p>

	<p>expired, not using the correct quantity). BS</p> <p>You interpreted there were multiple safety concerns as well as education opportunities throughout the family unit. You interpreted the need to seek out further information on the health, safety, and environmental concerns found throughout the home visit. You interpreted acute respiratory status changes and lethargy as major assessment concerns in the children in this home environment. KA</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>In the mother encounter you provided education about community resources for the safety of her and the children. You provided the mother with information for an exterminator for the poor home environment that could lead to severe health risks for the family. Additionally, you gave the mother information on smoking cessation and to not take unprescribed medications. You took the medication to be disposed of properly as well. Great job in the mother encounter! MD</p> <p>Educated father that cleaning supplies should not be stored in places where the children could get access to them. Educated father to pay attention to expiration dates and how to properly and safely prepare a bottle. Educated that there are resources available to assist with healthy food choices. BS</p> <p>You responded to safety, psychosocial issues calmly. You were confident in your approach to each family member. You sought further information regarding potential abuse from all members of the family. You responded by prioritizing the safety and health concerns of each family member and seeking further treatment for them. You responded with intervention regarding safety of children; flexible and creative with ideas and interviewing each member of the family. You provided a focused assessment to the children of the household recognizing concerns requiring immediate medical assistance. You recognized the need for involvement by CPS, law enforcement, and hospitalization for medical treatment of both children. You recognized the need for involvement by CPS, law enforcement, and hospitalization for medical treatment of both children and chose to go the route of seeking emergency placement for the children. You recognized the need and ability to educate the 8-year-old son in the family and educated him on no juice for the infant, no extra</p>

	<p>blankets in the crib, safe space heater usage, and no drinking of alcoholic beverages. You removed excess toys and blankets from the crib, cleaned the area and cleaned and changed the children. KA</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>Group discussion about how they were able to develop a plan from the chart in prebriefing. They decided their main focus would be the patient’s potential domestic abuse and history of post-partum depression. Group was able to immediately notice the mother was anxious and not making eye contact while they were assessing her. They did not perform a post-partum assessment but in reflecting on the encounter said they would have if they did it again. The group was able to educate about the importance of follow up care, nutrition, and the importance of medication compliance while in the room with mother. They were able to provide resources about WIC, family counseling, birth control, and transportation. When moving onto the partner encounter, the group noticed the partner had a vastly different story from the mother. The group was concerned with the pictures on the refrigerator and the partner’s stand offish attitude. Group was able to educate the partner on how to properly make a bottle (amount of formula/water, not using expired items, how to warm it appropriately) and proper nutrition for family unit. The group provided resources for WIC and counseling for the family unit. When the group inquired about the pictures on the refrigerator, the partner was not concerned and said it was just a drawing. When moving into the children’s room, the group noticed many safety issues. The specific examples provided by the group included multiple blankets on the baby while in the crib, the space heater, and the toys in the crib. They also noticed the lack of food and poor nutrition for both of the children. Group decided Jill was most likely failure to thrive and Jack was in acute respiratory distress. Group decided to call child protective services for the children. During debriefing, discussion was had about possibility of calling for an ambulance to take children to the hospital rather than leaving them in the home. The group said they were not convinced the mother would have given consent so they were not sure what to do. Group lead discussion during debriefing with minimal prompting while discussing their assessments and interventions. RH</p> <p>Upon completion of the simulation, you created an education plan focused on Monica for family safety resources, counseling for post-partum depression, and methods of birth control.</p>

<p>SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing or higher in all areas is required for satisfactory completion of this simulation.</p> <p>Objectives</p> <ol style="list-style-type: none"> 1. Provide quality, patient-centered care in an organized, safe manner. (1, 2, 4, 5)* 2. Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* 3. Utilize the concepts of growth and development to provide therapeutic communication with the family unit. (3, 5)* 4. Identify safety measures for the family unit in the home setting. (1,3,5)* 5. Demonstrate thorough environmental assessment in the home setting. (1,3,5)* <p>*Course Objectives</p>	<p>Excellent job in communicating without judgement and providing appropriate education, information regarding resources, and intervention for family.</p> <p>You are satisfactory for this scenario. KA/MD/BS/RH</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:

I was given the opportunity to review and ask questions about my clinical performance and ratings.

Student eSignature & Date: Nevaeh Walton 11-27-25