

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

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

Student: Yasmin Perez

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: Rachel Haynes MSN, 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

7/11/25 KA

Absence: (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make-up (/Date/Time)
9/11/2025	3	Hearing/Vision Clinical	Scheduled: 10/23/2025
9/22/2025	1	vSim Post quiz not complete	9/25/2025
		Empathy Belly survey not complete	10/3/2025
		Late vSim	

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

PERFORMANCE CODE

SATISFACTORY CLINICAL PERFORMANCE

Satisfactory (S): Safe; accurate each time, efficient, coordinated; confident, focuses on the patient; some expenditure of excess energy; within a reasonable time period; appropriate affective behavior; occasional supporting cues; minimal faculty feedback related to written clinical work.

UNSATISFACTORY CLINICAL PERFORMANCE

Needs Improvement (NI): Safe; accurate each time; skillful in parts of behavior; focuses more on the skill and self rather than the patient; inefficient, uncoordinated, anxious, worried, flustered at times; expends excess energy within a delayed time period, frequent verbal and occasional physical directive cues in addition to supportive cues; faculty feedback required in several areas of clinical written work.

Unsatisfactory (U): Failure to achieve the course competency, safe but needs faculty reminders constantly, not always accurate, unskilled, inefficient, considerable expenditure of excess energy, anxious, disruptive or omitting behaviors, focus on skills and/or self, continuous verbal and frequent physical cues, unsafe, performs at risk to patient/clients/others, unable to function, incomplete, erroneous, faulty, illegible clinical written work, no feedback sought from faculty or response to feedback not evident in submitted written work. If the student does not self-rate a competency the competency is graded "U." A "U" in a competency must be addressed in writing by the student in the Evaluation of Clinical Performance tool. The student response must include how the competency has been or will be met at a satisfactory level. If the student does not address the "U", the faculty member (s) will continue to rate the competency unsatisfactory.

OTHER

Not Available (NA): The clinical experience which would meet the competency was not available

Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.

Date	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
9/17/25	Risk for Postpartum Hemorrhage	NI/RH	S/RH	N/A

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:		N/A	N/A	N/A	S	N/A	N/A	S	S	S	S	S	N/A	NA	NA		NA	S
a. Provide care utilizing techniques and diversions appropriate to the patient's level of development.		N/A	N/A	N/A	S	N/A	N/A	S	S	S	S	S	N/A	NA	NA		NA	S
b. Provide care using developmentally appropriate communication.		N/A	N/A	N/A	S	N/A	N/A	S	S	S	S	S	N/A	NA	NA		NA	S
c. Provide care utilizing systematic and developmentally appropriate assessment techniques.		N/A	N/A	N/A	S	N/A	N/A	S	S	S	N/A	S	N/A	NA	NA		NA	S
d. Describe safety measures for various stages of development. (i.e. monitoring fall risks, restraints, and DVT assessment)		N/A	N/A	N/A	N/A S	N/A	N/A	S	N/A	S	N/A	S	N/A	NA	NA		NA	S
e. Identify stage of growth and development (Erikson's Stages)(List Below and explain reason for choice)*		N/A	N/A	N/A	S	N/A	S	S	S	S	S	S	N/A	NA	NA		NA	S
Clinical Location Age of patient		N/A	N/A	n/a	FT OB	N/A	BG club	MIDTERM	ER St. Mary's	Firelands OB	H&V	Flu clinic	N/a	NA	NA		NA	FINAL
	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH

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

Comments:

Week 5- 1E- The stage is trust vs mistrust. I picked this because newborns are dependent on mom and dad to meet their basic needs and of the caregivers are responsive, consistent, and nurturing the infant will develop a sense of trust. The mom I had promoted bonding with the baby doing skin to skin. **Good job. RH**

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

Week 5: 1(a-d)- This week you were able to provide care and communicate with your patients using developmentally appropriate techniques. You were able to care for and communicate with a postpartum mother as well as care for them and their newborn. We discussed safety of the patients in regards to checking bands with mom/baby upon returning the newborn to the room. RH

Week 7- 1E The stage I used is initiative vs guilty. At this stage children want to try new things, explore, and be active. If they are encouraged, they develop confidence and initiative. If they are criticized or restricted too much, they may feel guilty about trying RH

Week 7: 1b- You did a great job interacting with the children at the Boys and Girls Club while using developmentally appropriate communication. This can be a chaotic and challenging environment, but your group did well and kept the kids engaged. BS

Week 8 The stage I used in Erik Erikson's psychosocial is the stage of Ego Integrity vs. Despair, which occurs in late adulthood. My patient's confusion and hospitalization may have caused fear and loss of control, increasing her risk for despair. As a student nurse, I supported her psychosocial needs by maintaining her dignity, speaking calmly, and including her daughter in care decisions. These interventions helped her feel valued and respected, promoting a sense of comfort and integrity during her illness. RH

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

Week 8 1E- The Erikson stage I used is Intimacy vs. Isolation. The patient is forming close meaningful relationships and developing a sense of emotional connection and commitment to others. Childbirth itself represents the intimacy. Good job! RH

Week 9 – 1a, c – You did a wonderful job providing holistic care to the mother you were assigned in Labor and Delivery this week. You assisted your assigned nurse with providing care and monitoring for your patient who was a multipara in for an induction of labor. KA

Week10 1E The Erikson stage I used is industry vs inferiority due to this stage children are focused on learning and gaining new skills and feel proud of their accomplishments. The kids were all trying to get 20/30 vision and pass their hearing, they were trying to accomplish passing and feel proud. RH

H&V Objective 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. MD

Week11-1E the Erikson's stage I used is generativity vs. Stagnation. I had middle aged patient to give flu vaccines which are aged 40-65. Getting vaccinated demonstrates caring for the community and family. RH

Week 11- 1a,b- You did a great job communicating with the patients at the flu vaccine clinic. Your conversation helped to kept the clients calm throughout the process and you worked in an efficient manner to keep the line moving. Nice work! BS

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

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

Comments:

Week 5: 1(f-i) We discussed the changes in a woman's body during pregnancy. We discussed the benefits of skin to skin and bonding with newborn and mother. We were able to discuss some of the prenatal choices one of the mothers made that could have had an impact on her newborn, such as use of illicit drugs and THC while pregnant. RH

Week 5: 1(k, l)- You were able to provide care while also valuing the patient's values and beliefs. We discussed circumcisions and the choice both mothers made to circumcise their children while in the hospital. RH

Week 7: 1k- While interacting with the children at the Boys and Girls Club you did a great job acknowledging their perspectives, diversity, ages, and cultural factors, which all influence their behavior. BS

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

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

Week 9 – 1h, l – You were able to identify the stages of labor your patient was progressing through and watched the care of the patient from the moment of induction even though you did not have the opportunity to see the delivery. You were able to witness the labor process and how the healthcare provider, nurses, and patient’s support people work together to provide the best experience possible for the patient during the laboring process. The staff commented how much your ability to communicate clearly with the patient was appreciated by the patient, support person, and staff. KA

H&V Objective 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. MD

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

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

Comments:

Week 5- 2G- A social determinants of health I noticed was this patient had emotional support, transportation, and education of her being in her residency. She had her husband and mom to be there for her in labor and after labor, while her sister took care of her other 3 children. **Your patient had a great support system there for her. RH**

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

Week 5: 2(a-f)- We were able to have some discussion with the pediatrician regarding evidence-based practice while they were performing the circumcision on the newborn. You performed safety measures when checking bands with the mother and newborn when returning the newborn to the room from the nursery. You were able to perform a newborn assessment with some assistance from faculty and had no issues asking for help when needed. You were able to administer IV push medications to the postpartum mother during morning medication pass. You correctly administered medications using the rights of medication pass and did correct dosage calculation to ensure right dose was administered. RH

Week 7- 2G- A social determination is neighborhood and environment because even if the kids don't have access to certain toys like balls or bikes they can use different strategies to stay active even if their environment doesn't provide space or resources. RH

Week 8-2g A positive factor was that her daughter was very involved and spoke up for her care, which helped her get the right treatment in the ER. As a student nurse, I learned that things like living situation, support system, and access to good care can strongly affect a person's health **We love an involved family member who is willing to assist with health history and takes good care of their loved ones.** RH

Week 8: 2(e) Did you administer any medications during this clinical? Did you observe any medication administration during this clinical? If the answer to either of these is yes, please change this competency to "S" because you should have done proper dosage calculation prior to administration of any medication. If you only observed medication administration, you can still perform dosage calculation to ensure the correct dose was being given. RH
I administered fluids and observed Rocephin medication. **Thank you!** RH

Week 9-2g A social determinants would be the language and communication barrier. The patient primary speaks Spanish which can limit her understanding of procedures and instructions if no interpreter is present. A cultural element is Hispanic women prefer natural childbirth, and this is why she initially declined any pain medications and wanted to have a natural labor. **Very good SDOH!** RH

Week 9 – 2b, c, d, e – You were able to observe an epidural placement as well as peanut ball usage during the laboring process. You were able to work with your assigned nurse to read and identify EMF monitor strips of your laboring patient. You were able to observe the administration of Pitocin to the laboring patient and how to titrate the medication using the OB protocol. KA

week 10-2g a social determinants learned would be that the school is offering the services that could help kids whose parents don't have enough money to pay for a hearing or vision. By the school helping and taking the exams they are helping families in need. **Great job!** RH

H&V Objective 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!** MD

Week 11-2g cultural beliefs is a cultural element. Some people due to cultural get the flu exemption form due to their culture beliefs and wont get the flu vaccine. RH

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

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

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

Comments:

WEEK 5- 3d- A legal issue I saw in clinical was one the mother of the patient was taking pictures of the baby outside the nursery where other babies were. The other baby was close to the baby and it could cause legal issues if they post the picture somewhere and someone reports of the other baby being in the picture due to not being family or having permission to post. **Good observations! This is very true. RH**

Week 5: 3(a-c)- **You did a great job acting with integrity and respecting differing views, maintaining HIPAA, and following the Student Code of Conduct. RH**

WEEK 7- 3d- a legal issue I Saw is when the kids all tired eachother with a rope and got on a roller sitting thing and one boy then tied himself to the rope and ran making the other kids go out in different direction. One boy fell on top of the other boy and hurt his leg. This could be a legal issue because it was unsafe condition and there was lack of supervision of the 2 other people who were in charge and on their phone. **I am sure the parents of the child who hurt his leg would have been very upset had something been broken. I am also surprised the workers were on their phones, the director usually runs a tight ship and makes sure the children's safety comes first. RH**

Week 7: 3a,c- **At the Boys and Girls Club, you acted with integrity, consistency, and respect for differing views and perspectives. BS**

Week 8-3d

A legal issue in this patient's case was the concern about all medications she was on at the long-term care facility. The daughter reported that her mother had recently been prescribed new medications, such as oxycodone and Xanax, which were not part of her usual regimen. Giving multiple medications without clear medical justification or proper monitoring could be considered negligence and may violate the patient's right to safe and appropriate care. **This is very true! Did the long term care facility provide a reason as to why the patient was given these new prescriptions? RH**

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

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

Week 9-3d A legal concern would be the husband translating. He knew some English but I did not think he knew enough to be able to translate. Healthcare facilities are required to provide qualified medical interpreters and failure to do so may result in legal liability for improper consent or patient harm due to miscommunication. **Very true. It can be hard for family members to translate as well because if they do not agree with what the healthcare provider is saying then they may not provide accurate or truthful information to the patient. RH**

Week 9 – 3a, b, c – You were professional and considerate with all the care you provided. Your care was not only impactful to the patient but was highly praised by the OB staff. 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

Week 10-3d A legal concern would be when the papers with kids name and results were being checked other students were trying to see the results of the other students. This could cause a legal issue if a kid complained to their parents that other students could see their results. **Good observation! Some children also like to compare results without thinking that their results are technically protected health information. RH**

H&V Objective 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. MD

Week 11-3d A legal issue would be if the nurse is giving a flu vaccine to child, they have to make sure the parent is their to sign the form. Since they are underage the parent has to sign the paper. IF they don't that could cause legal issues. **Good observation. 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		
a. Develop and implement a priority care map and/or plan of care utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)		N/A	N/A	N/A	S NI	N/A S	N/A	S	N/A	N/A	N/A	N/A	N/A	NA	NA		NA	S
b. Document assessment findings, interventions, and outcomes accurately on appropriate forms. (Including risk assessment and monitoring of wound care)		N/A	N/A	N/A	N/A S	N/A	N/A	S	N/A	S	S	S	N/A	NA	NA		NA	S
c. Summarize witnessed examples of patient/family advocacy.		N/A	N/A	N/A	N/A S	N/A	N/A	S	S	S	N/A	N/A	N/A	NA	NA		NA	S
d. Provide patient centered and developmentally appropriate teaching.		N/A	N/A	N/A	S U	N/A	S	S	S	S	S	S	N/A	NA	NA		NA	S
e. Analyze the involved pathophysiology of the patient's disease process. (noticing, interpreting, responding)		N/A	N/A	N/A	S	N/A	N/A	S	S	S	N/A	N/A	N/A	NA	NA		NA	S
	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH

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

Comments:

Week 5: 4(b, c)- You were able to document the newborn assessment you performed and compared it to the student nurse who also performed the newborn assessment with you. Documentation was also completed on the postpartum mother you assessed. You were able to witness some postpartum mothers advocate for themselves and their baby when refusing or consenting to vaccinating their newborn with the hepatitis B vaccine. RH

Week 5: 4(d)- this requires a comment due to it being highlighted. Please address this "U" and state how you will prevent from getting another "U: in the future. This will remain a "U" until it is addressed. RH

I did not realize we had to write something about 4d and thought we just had to evaluate it but in the future I will answer this question and and take the time to read through each competency. RH

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

Week 5: 4(a)- This is a NI because there was no intext citation on the care map. There is a reference, but no intext citation. Please add an intext citation and resubmit to your dropbox. RH

Week 6 4d- A patient centered teaching focuses on the child's preferences and using language and examples that the child will understand. For example, for the boys and girls club based on the kids age we taught them exercise games. We did an animal movement for the k-2 and they loved exercising by doing different animal movements Very creative! RH

Week 7: 4d- As you no doubt noticed at the Boys and Girls Club, when providing teaching to kids of various ages, we must continually adjust our approach based on their developmental level. BS

Week 8 4d- A patient-centered and developmentally appropriate teaching focused on promoting understanding of her illness and preventing future infections. Because she is elderly, teaching needed to be simple, clear, and repeated often, using short sentences and a calm tone to reduce confusion. Great use of clear communication that the patient can understand. RH

Week 9-4d A patient centered and developmental teaching would be to use a certified Spanish interpreter to ensure understanding and respect for her language and culture. Also explaining each procedure like when providing a cervical check or when she did not quite understand in medical terms about the meconium in her membrane's fluid. Using simple and clear language would help the patient understand more. Is this what was done for the patient this week? RH

Week 9 -4b, d - You were able to observe the required documentation in the EMR for a patient in labor. You asked appropriate questions regarding documentation and how to locate information in the patient's chart. You were instrumental in the patient education that was provided to the laboring patient throughout the labor process. The staff appreciated how you were able to communicate all of the education in the patient's primary language so they knew she understood it properly. KA

Week 10-4d a patient centered and developmental would be asking how the student prefers doing the hearing screen if sitting or standing. RH

H&V Objective 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. MD

Week 11-4d A patient centered developmental would be to address any health conditions that increase flu risk and ask if they have an allergies to eggs or have Guillen disease RH

Week 11- 4b- You did a great job documenting the flu (and COVID) vaccines you administered at the flu clinic. BS

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

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

Comments:

Week 5: 4(h-j)- During the clinical day you were able to discuss various diagnostic test, medications, and medical treatment that your patient and other patients on the floor were receiving related to their delivery/birth. RH

Week 9 – 4f, g, h, i, j – You utilized information from your patient's chart as well as from your nurse's assessment to fill out the OB patient profile. You were able to identify how the patient's diagnostic tests, medications, medical treatments, nutritional needs, and nursing interventions correlated to the laboring 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

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

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

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

Comments:

Week 5: 5(a, b, c, g)- This week you showed excitement about being able to be in the OR for the c-section. You did great with the newborn assessment and needed minimal prompting. You were able to professionally communicate with the staff on the unit. RH

Week 7: 5a,b- You showed interest and enthusiasm as you presented your material to the children at the Boys and Girls Club. Nice work! BS

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

Week 8: ER comment:- Marked excellent in all areas. “Observed cardioversion” Kelly Cheesman, RN

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

Week 9 – 5a, c, d, e – You did a great job showing interest and enthusiasm while in OB. You sought out new learning experiences while on clinical. You did not get to see a complete delivery, but was able to see the baby crown while on clinical this week! You communicated and collaborated with the OB staff professionally and worked together to ensure the patients received the appropriate care. They could not stop commenting how wonderful you were to work with and the excellent care you provided your patient. 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. KA

H&V Objective 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. MD

Week 11- 5a,c- You had a great attitude and positive demeanor while administering flu vaccinations at the flu clinic. You also communicated effectively with other members of the healthcare team to ensure positive patient outcomes. BS

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

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

Comments:

WEEK 5: 6a- I felt that I can improve in how to feel for the fundus and how remember all questions to ask for postpartum assessment. I can ask to feel more fundus in clinical so I can get the experience and confidence. I can also study my postpartum notes and book to get that more practice in questions. RH

week 5: 6(c, e, f, g)- You were able to watch the c-section from the OR and asked questions throughout the procedure to enhance your learning. You maintained professional behavior while on clinical throughout the day. During the clinical day, you asked good questions to further your knowledge of the pregnant and postpartum patient. You were able to organize you time efficiently to care for your patient as well as see births during the day. RH

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

WEEK 7: 6a- I can improve not getting to nervous when talking. I felt when I first presented I got very nervous and didn't know how to start at first. What I can do is practice with my kids and other friends of my kids so I can get better at calming my nerves. **Good idea RH**

Week 7: 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. RH

Week 8 6a- I can improve in how to prime the IV. I need to practice more in open lab and watch videos on how to prime so it doesn't come out too fast and drip. I forgot to clamp it before spiking it. We are always willing to open the lab for you if you want more practice! We also will have more IV practice in the simulations that are coming up. RH

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

Week 9-6a- An area of improvement would be how to read the monitor for baby's hearing rate and knowing the different accelerations and variables. I can look at the book and go over the different accelerations and variables. This can take some practice, but yes review of this material can help! RH

Week 9 – 6c, d, e, f, g, h, I – Your thought process and clinical judgment 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. You should be proud of the care you provided to the patient this week! Your patient, her newborn, and partner will remember how you were able to be a part of their special day. The genuine impact you made on this patient did not go unnoticed! Keep up the exceptional work! Terrific job! KA

Week 10-6a I can improve in knowing more how the vision works. I struggled a bit in the beginning and had to ask the lady how they students needed to read it. I could see videos on how kids take the vision test and what lines they read from. It is harder for the later groups in the semester to remember when the school nurse came to talk to the class at the beginning of the semester. Reviewing videos is always a good idea. RH

H&V Objective 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 McPherson Middle School. You were organized and timely with your hearing and vision screenings and documenting the findings on the provided forms. Terrific job! MD

Week 11-6a I can improve in explaining the difference between the flu vaccine and the high dose flu vaccine. I can look more into the difference so when a patient asks again I will be able to let them know. RH

Week 11- 6d,e,g- You may have been a bit nervous at first, but I could not tell and you performed well. You also worked in a timely manner to get all of the clients through the line. Professional behavior was observed at all time throughout the clinical experience. Nice work! BS

FINAL: You have satisfactorily completed the clinical portion of the Maternal Child Nursing course. You have had various opportunities to address the competencies throughout the semester. You have worked hard to further develop your nursing skills and clinical judgment throughout the course. You have shown growth in your nursing abilities and knowledge of our patient population. You interact well with patients, your peers, and the staff. Keep up the good work and continue to develop your knowledge into the next semester. RH

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

Student Name: Y. Perez		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: 5							
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. RH
	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	Good list of nursing priorities. Multiple signs/symptoms listed for each complication, good critical thinking.
	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	3 interventions do not have frequency (77% complete so no points lost here, but be aware of this for future care maps.)
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete	3	

Criteria	3	2	1	0	Points Earned	Comments
13. An appropriate rationale is included for each intervention	> 75% complete	50-75% complete	< 50% complete	0% complete	3	One intervention does not have a rationale (92% complete so no points lost here.)
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	3	
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> Continue plan of care Modify plan of care Terminate plan of care 	Complete		Not complete	3	

Reference

An in-text citation and reference are required.

The care map will be graded "needs improvement" if missing either the in-text citation or reference, but not both.

The care map will be graded "unsatisfactory" if both in-text citation and reference are not included.

Total Possible Points= 45 points
45-35 points = Satisfactory
34-23 points = Needs Improvement*
< 23 points = Unsatisfactory*

***Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

*****Students that are not satisfactory after 2 attempts will be required to meet with course faculty for remediation. *****

Faculty/Teaching Assistant Comments:

9/22/25- This is a Needs Improvement because there was no in text citation. Please add an intext citation and resubmit to your dropbox.

RH

9/29/2025- after resubmission your care map is now satisfactory. RH

Total Points: 45/45

Faculty/Teaching Assistant Initials: RH

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

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

* 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)	Meditch (*1, 2, 3, 5, 6)	Amazing Race (*1, 2, 3, 4, 5, 6)
	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 8/20 & 8/21	Date: 10/20
Evaluation	S	S	S	S	S	S	S	S	S	S
Faculty Initials	RH	RH	RH	RH	RH	RH	RH	RH	RH	RH
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

* 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: 9/25
		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	U	S	S	S	U	S	S	S	S	U	S	S
Survey	S		S		S	S		S		S		S	U
Faculty Initials	RH	RH	RH	S	RH	RH	RH	RH	RH	RH	RH	RH	RH
Remediation: Date/Evaluation/Initials	N/A	S 9/26/25 RH	N/A	N/A	N/A	S 11/7/25 RH	N/A	N/A	N/A	N/A	S 11/24/25 RH	N/A	S 10/3/2025 RH

* Course Objectives

Comments:

Pediatric Respiratory Simulation: Please see associated Lasater Rubric for details related to satisfactory completion of remediation. RH

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

vSim Objectives

9/22/2025 vSim Maternity Case 1

1. Performs focused antepartum assessment of patient with severe preeclampsia. (1, 2, 4)*
2. Recognizes signs and symptoms of severe preeclampsia (hypertensive disorders). (1, 2)*

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

10/6/2025 vSim Maternity Case 4

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

11/3/2025 vSim Pediatric Case 3

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

11/18/2025 vSim Pediatric Case 1

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

11/21/2025 vSim Pediatric Case 4

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

Lasater Clinical Judgment Rubric Scoring Sheet

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

STUDENT NAME(S) AND ROLE(S): Perez (M), Porcher (A)

GROUP #: 12

SCENARIO: Pregnancy and PPH

OBSERVATION DATE/TIME(S): 9/18/2025 1500-1630

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. Patient requests cheeseburger. UA results obtained, THC present, glucose, nitrates. FSBS- 225.</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. UA results interpreted as abnormal. FSBS- 225- interpreted as abnormal.</p> <p>HR interpreted as being high, BP low. Fundus recognized as boggy. Recognize need to massage fundus. 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. Urine sample sent to lab. FHM applied. Call to lab for UA results. Ice chips offered. Patient assisted to left side. Call to provider to update UA results. HCP asks about history and possible gestational diabetes. Order to obtain FSBS. Patient questions about prenatal care. Call to provider about FSBS and prenatal care. Order for US to verify dates, IV fluid, nifedipine, acetaminophen. Orders read back. Medications prepared, patient questions nifedipine, nurse to call HCP. Call to HCP to question nifedipine.</p> <p>Fundus immediately massaged when bleeding discovered. Call to HCP to report bleeding, boggy fundus, high HR, low BP. Order received for methylergonovine. Mona asks for her wife. Call to wife to ask her to come in. Methylergonovine prepared and administered.</p>

<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Team discussion of the scenarios. Team recognized the significance of teamwork and communication, and did well with each. Discussed the role of calcium channel blockers in preventing contractions. Discussed the importance of SBAR communication when calling the provider. Also discussed risk factors for postpartum hemorrhage and that it is ok to ask for help or offer help to team members. Discussed the importance of providing education to patients.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of “developing” or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Implement appropriate nursing interventions and test to monitor fetal well-being during pregnancy upon completion of nursing assessment. (1, 2, 3, 5)* 2. Identify social determinates of health and provide education and resources for pregnancy (1, 3, 4, 5)* 3. Identify the signs and symptoms of postpartum hemorrhage (PPH) and implement appropriate management of the PPH. (1, 2, 4, 5)* 4. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the health team. (1, 3, 5, 6)* <p>*Course Objectives</p>	<p>You are Satisfactory for this scenario! BS</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the use of most nursing skills; could improve speed or accuracy</p> <p>Reflecting: Evaluates and analyzes personal clinical performance with minimal prompting primarily about major events or decisions; key decision points are identified, and alternatives are considered Demonstrates a desire to improve nursing performance; reflects on and evaluates experiences; identifies strengths and weaknesses; could be more systematic in evaluating weaknesses</p>

Lasater Clinical Judgment Rubric Scoring Sheet: **SCENARIO: Empathy Simulation**

STUDENT NAME: **Y. Perez**

OBSERVATION DATE/TIME: **9/25/25**

<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 style="color: red;">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 style="color: red;">Great job.</p> <p style="color: red;">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 style="color: red;">Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Comments</p> <p style="color: red;">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 Nurse

STUDENT NAME(S) AND ROLE(S): Perez (A), Porcher (M)

GROUP #: 12

SCENARIO: Shoulder Dystocia and Newborn Care

OBSERVATION DATE/TIME(S): 9/25/25 1500-1630

CLINICAL JUDGMENT COMPONENTS	<u>OBSERVATION NOTES</u>
<p>NOTICING: (1,2,5) *</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Pain assessment: rating, location, Inquire about birth plan/pain control options Obtain vitals Did not perform cervical exam prior to administration of nubain Notice change in fetal strip after nubain administration Notice baby is stuck and starts using HELPERR maneuvers APGAR 1 minute: 10 Pain reassessment after deliver. Reassess vitals APGAR 5 minute: 9</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 Interpret fetal strip as accelerations Offer nubain as pain relief due to patient not wanting epidural Prioritize pain medication Interpret change in fetal strip as decelerations and due to head compression</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/ 	<p>Education about pain management options Call healthcare provider prior to nubain administration Nubain administration: scan patient, scan medications, verify name/DOB, verify allergies, correct dose, correct needle size, correct technique, use of needle safety.</p>

<p>Flexibility: E A D B</p> <p>• Being Skillful: E A D B</p>	<p>Penicillin administration: education on why patient needs antibiotics, hang primary bag below secondary bag, program pump correctly</p> <p>Call healthcare provider with update on patient status</p> <p>Call for help, McRoberts, suprapubic pressures, hands and knees, eval for episiotomy, rotational maneuvers, remove posterior arm</p> <p>Dry baby off and place under warmer immediately after birth. Suction nose and mouth</p> <p>Offer skin to skin with mom</p> <p>Provide education on postpartum topics to mom after delivery (appropriate amount of bleeding, when to call provider about bleeding, baby respiratory signs/symptoms)</p> <p>Vitamin K and erythromycin administration: correct technique for eye ointment, correct dose for vitamin K, correct needle size, correct technique for IM injection, use of needle safety</p> <p>Call healthcare provider with update of delivery and baby assessments.</p>
<p>REFLECTING: (6) *</p> <p>• Evaluation/Self-Analysis: E A D B</p> <p>• Commitment to Improvement: E A D B</p>	<p>Group discussion of scenario and interventions done during the simulation. Group stated they believed their communication was improved from last scenario and they worked well together in both roles. They find it difficult that they have no charge nurse assigned, but feel they both fill the role equally during the simulation. Emotional intelligence questions asked in relation to patient point of view and support person point of view. Questions also asked about student emotions and how that impacted their actions in their scenario.</p>
<p>SUMMARY COMMENTS: * = Course Objectives</p> <p>Satisfactory completion of the simulation scenario is a score of Developing or higher in all areas of the rubric.</p> <p>E= Exemplary</p> <p>A= Accomplished</p> <p>D= Developing</p> <p>B= Beginning</p> <p>Scenario Objectives:</p> <p>1. Select physical assessment priorities based on individual patient needs. (1, 2)*</p>	<p>You are satisfactory in this scenario! RH</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs. Recognizes most obvious patterns and deviations in data and uses these to continually assess. Actively seeks subjective information about the patient's situation from the patient and family to support planning interventions; occasionally does not pursue important leads.</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient's data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success.</p> <p>Responding: 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</p>

<p>2. Identify risk factors and implement appropriate nursing interventions upon completion of focused nursing assessment. (1, 2, 3, 4, 5)*</p> <p>3. Utilize therapeutic communication and interpersonal skills in the interactions with patients, families, and members of the healthcare team. (1, 3, 5, 6)*</p> <p>4. Identify and implement appropriate nursing interventions in which heat loss occurs in infants. (1, 2, 5)*</p>	<p>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 NAME: Yasmin Perez OBSERVATION DATE/TIME: 10/16-17/2025 SCENARIO: Escape Room

CLINICAL JUDGMENT	OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 	<p>Noticed patient safety issues throughout the room. These included sharps container on bed, patient hanging off the bed, bed not locked, armband not on patient, syringe, and side rails not up. Noticed the assessment findings in the patient assessment supporting the need for a breathing treatment. Noticed math problems in the box and recognized the need to solve. Noticed some boxes needed a code and one needed a key.</p>

<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Interpreted the risk in the safety issues for the patient and recognized the need to be fixed. Interpreted the need to work as a group to solve problems and find clues. Interpreted the need to complete the dosage calculation to administer the correct amount of IV fluids. Interpreted the need to administer meds and the need to call HCP to administer the correct doses.</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Responded to safety issues by correcting each of them to provide a safe environment for the patient's care. Responded to instructor cues regarding environment and problem solving. Responded to HCP orders and picked the correct dosage of medication for the patient. Flexible with plan of care and looking for clues as well as communicating with one another effectively. Responded to the patient's respiratory distress by providing the patient with the ordered breathing treatment.</p> <p>Responded to the healthcare providers order and programed the IV to the correct rate and administered the prescribed IV fluids.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Worked together with communication and idea sharing. Collaborated and provided suggestions to one another to make sense of riddles, math formulas, medications, and treatments.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p> <p>Scenario Objectives:</p> <ol style="list-style-type: none"> 1. Utilize the concepts of growth and development to identify concerns with patient safety and provide appropriate interventions to address safety concerns. (1, 3, 5)* 2. Administer medications utilizing the concepts of growth and development and the rights of medication administration to prevent errors in the process. (1, 2, 5)* 	<p>You are successful in this simulation as you were able to provide a safe environment for the patient. You were also able to work together as a team to solve the math formulas and give appropriate dosages of medications. Good job! KA/MD/RH/BS</p> <p>Noticing: Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs Recognizes most obvious patterns and deviations in data and uses these to continually assess Regularly observes and monitors a variety of data, including both subjective and objective; most useful information is noticed; may miss the most subtle signs</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data In most situations, interprets the patient's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or in complicated cases where it is appropriate to seek the guidance of a specialist or a more experienced nurse</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments Displays proficiency in the</p>

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

GROUP #: 12

SCENARIO: Pediatric Respiratory

OBSERVATION DATE/TIME(S): 10/30/25 1500-1630

CLINICAL JUDGMENT COMPONENTS						<u>OBSERVATION NOTES</u>
NOTICING: (1, 2, 5) *						Obtain vitals
<ul style="list-style-type: none"> Focused Observation: E A D B 						Respiratory assessment. Completely remove gown to visualize chest. Identify lung sounds as wheezes.
<ul style="list-style-type: none"> Recognizing Deviations from Expected Patterns: E A D B 						Pain assessment (location, FACES scale)
<ul style="list-style-type: none"> Information Seeking: E A D B 						Does not notice medication in chart (ibuprofen, amoxicillin, or IVF)

	<p>Notices safety items in bed (medication, needle, scissors)</p> <p>Respiratory assessment. Notice stridor. Does not remove gown to visualize chest. Does not notice retractions</p> <p>Obtain vitals. Notice increased heart rate, decreased oxygen saturation</p> <p>Noticed increased coughing</p>
<p>INTERPRETING: (2, 4) *</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 	<p>Interpret temperature as elevated</p> <p>Does not identify medication error with orders in chart related to ibuprofen, IV fluids, or amoxicillin.</p> <p>Does correct dosage calculation related to orders in chart.</p> <p>Correlate stridor, low oxygen saturation, and elevated heart rate as respiratory distress</p> <p>Does not stay in room while patient in respiratory distress</p> <p>Does not identify medication error with acetaminophen or IV fluids. Does correct dosage calculation related to orders in the chart.</p>
<p>RESPONDING: (1, 2, 3, 5) *</p> <ul style="list-style-type: none"> • Calm, Confident Manner: E A D B • Clear Communication: E A D B • Well-Planned Intervention/ Flexibility: E A D B • Being Skillful: E A D B 	<p>Medication administration: ibuprofen and amoxicillin. verify name/DOB, verify allergies, provide education about each medication, scan patient, scan medication. Does not call healthcare provider for new orders. Does correct dosage calculation per order in chart.</p> <p>Education provided to father about croup, signs and symptoms of respiratory distress, secondhand smoke exposure, symptom management</p> <p>Call healthcare provider for update on status. SBAR used. No new orders at this time.</p> <p>Medication administration: cetirizine. verify name/DOB, verify allergies, provide education about each medication, scan patient, scan medication.</p> <p>Remove 2/3 safety items from bed (medication, needle)</p> <p>Call respiratory therapy for breathing treatment</p> <p>Initiate oxygen therapy at 2L</p> <p>Medication administration: acetaminophen. Verify name/DOB, verify allergies, does not catch medication error in chart but does do correct dosage calculation related to orders in chart.</p> <p>Healthcare provider calls students for update. Obtains new order for dexamethasone. Readback order for verification</p> <p>More education provided to father about antibiotics and croup (length of illness, spread of illness)</p>

<p>REFLECTING: (6) *</p> <ul style="list-style-type: none"> Evaluation/Self-Analysis: E A D B Commitment to Improvement: E A D B 	<p>Team discussion of scenario and good communication between team members in simulation. Group identified good team work throughout scenario. Emotional intelligence questions asked about how students were feeling during the respiratory distress part of the scenario. Team discussion of all medication errors. Each group member does medication math to check safe dose range for each medication and what would happen if this were to occur in a real situation. Each medication error discussed in how to monitor patient after administration. Discussion about how to report medication errors and how group members were feeling after debriefing. Discussion about where to find safe dose ranges if skyscape is not available included Lexicomp and pharmacy.</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"> Select physical assessment priorities based on individual patient needs. (1, 2)* Review appropriateness of prescribed medications for prevention of errors and administer medications utilizing the concepts of growth and development. (1,2,5)* Implement appropriate nursing interventions upon completion of nursing assessment. (1, 2, 5)* Utilize the concepts of growth and development to provide therapeutic communication with the toddler and their 	<p>You are unsatisfactory in this scenario. Please refer to remediation assignment for further instructions. RH 10/30/25</p> <p>You have completed the remediation assignment related to proper medication administration and medication errors that pertained to your group’s performance in this simulation. Your assignment was completed satisfactorily, therefore you are now satisfactory for this simulation. RH 11/7/25</p> <p>Lasater Clinical Judgement Rubric Comments:</p> <p>Noticing: Attempts to monitor a variety of subjective and objective data but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information. Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment. Makes limited efforts to seek additional information from the patient and family; often seems not to know what information to seek and/or pursues unrelated information.</p> <p>Interpreting: Generally focuses on the most important data and seeks further relevant information but also may try to attend to less pertinent data. In simple, common, or familiar situations, is able to compare the patient’s data patterns with those known and to develop or explain intervention plans; has difficulty, however, with even moderately difficult data or situations that are within the expectations of students; inappropriately requires advice or assistance.</p> <p>Responding: Generally displays leadership and confidence and is able to control or calm most situations; may show stress in particularly difficult or complex situations. Generally communicates well; explains carefully to patients; gives clear directions to team; could be more effective in establishing rapport. Develops interventions on the basis of relevant patient data; monitors progress regularly but does not expect to have to change treatments. Is hesitant or ineffective in using nursing skills.</p> <p>Reflecting: 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>

family. (3, 5)*	
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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): Perez (A), Porcher (M)

GROUP #: 12

SCENARIO: Pediatric GI

OBSERVATION DATE/TIME(S): 11/5/2025 1500-1630

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>Temp 102.5. Skin turgor, cap refill. Mucous membranes pink and moist. Recognizes that the bruises are suggestive of abuse. Temp reassessed following medication, with improvement.</p> <p>Jack CO stomach pain, assessed with Lego scale- 4th face. Jack vomits 100 ml. Mucous membranes pink and tacky, skin tenting noted.</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>Pain interpreted to be mild. Temp interpreted as high and in need of medication. Assessment findings not suggestive of dehydration at this time. Temp returning to normal following acetaminophen.</p> <p>Pain level interpreted as moderate. Vomit noted to include bile and Pedialyte. Interprets clinical signs of dehydration. BP noted to be better following fluid bolus.</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>Pain scale used to determine pain level- 2. Assessment- VS. Gown lifted to expose abdomen, revealing bruise. Mom answers immediately that he fell off his bike. Legs exposed. Contact precautions initiated. Call to HCP about acetaminophen dose and route. New order received and read back. Also reports suspected abuse situation related to bruise- order for case management referral. Education provided related to hydration and smoking. Call to lab; + for rotavirus. Allergies confirmed, acetaminophen prepared and administered. Call to HCP about cetirizine dose. New order received. Mom instructed to try to push fluid when they go home to flush virus out. Patient identified, cetirizine administered. Mom leaves to get a snack- Jack is then questioned about the bruises. Jack says mom's friend is not nice to him of his mom. Call to HCP to report new findings. Call to case management to report suspicious bruising.</p> <p>Call to HCP to report signs of dehydration. Orders received for fluid bolus and maintenance fluid, Zofran for nausea. Orders read back. Call to pharmacy for Zofran dosage recommendation. Dose confirmed. Patient identified, allergies confirmed, Zofran prepared and administered. IV fluid bolus complete, 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>You are Satisfactory for this scenario! BS</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>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 subtle patterns and deviations from expected patterns in data and uses these to guide the assessment. 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. Even when facing complex, conflicting, or confusing data, is able to (a) note and make sense of patterns in the patient’s data, (b) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (c) develop plans for interventions that can be justified in terms of their likelihood of success</p> <p>Responding: Assumes responsibility; delegates team assignments; assesses patients and reassures them and their families Communicates effectively; explains interventions; calms and reassures patients and families; directs and involves team members, explaining and giving directions; checks for understanding rapport Interventions are tailored for the individual patient; monitors patient progress closely and is able to adjust treatment as indicated by patient response 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 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: Yasmin Perez 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 =</p>						<p>The student developed scenarios were completed successfully. You are satisfactory</p>

<p>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>for this simulation. KA/MD/BS/RH</p>
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Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Aaron Brummett, Melisa Fahey, Yasmin Perez, Saige Ruffing

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

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</p>

	<p>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 inquired about diet but did not provide and specific education related to the topic. You provided a focused assessment to the children of the household recognizing concerns requiring immediate medical assistance. 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 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 were able to interpret safety and health issues with each member of the family. 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 her with education on safety and smoking cessation resources. You also provided important education on not using the unprescribed medications that she had on the table and offered to dispose of them appropriately. You discussed providing her with resources from Job and Family Services as well. Great job with 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 removed excess blankets and toys from the crib. 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</p>

	<p>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 that you only had consent to treat the mother in this situation and sought maternal consent to call for medical assistance and treat the children of the household. 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 of how reviewing the chart during prebrief allowed them to create a plan for the home visit. They did state this plan rapidly changed as they were performing their assessments of each family member. During the visit with the mother, they noticed the filth, poor self-care, bruising on her face, random and unlabeled medications in the room, as well as various foods/drinks and cigarettes. The group was able to assess mother and perform a post-partum assessment as well as a post-partum depression screening. They stated they felt this was a priority because they could tell the mother was withdrawn and not doing well. The provided various resources to her such as transportation access, case management, nutrition, and doctor referrals. Group also provided education related to medications, safe housing, and how to obtain a protection order from the partner. While interacting with the partner, they noticed more filth in this area of the home as well as lack of education on infant nutrition. The group also noticed inappropriate drawings on the refrigerator drawn by a child. The group was able to educate the partner about how to correctly make and heat up a bottle for the infant as well as educate on proper nutrition for children. They offered some resources for WIC and family/individual counseling. When entering the children's room, the group again noticed the filth and multiple safety concerns. Safety concerns included space heater, multiple blankets on top of infant in crib, toys in the crib with infant. The group assessed both children and noticed both were not being taken care of. Group noticed failure to thrive for infant and an acute asthma attack for the older child. They decided to call CPS as well as squad after getting consent from mother to do so. Group was able to lead discussion with minimal prompting to reflect on interventions provided in each situation of the scenario. RH</p> <p>Upon completion of the simulation, you created an education plan focused on Monica for post-partum depression, domestic violence, and nutrition/substance abuse.</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>	<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>

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)*

*Course Objectives

EVALUATION OF CLINICAL PERFORMANCE TOOL
Maternal Child Nursing – 2025
Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

I was given the opportunity to review my final clinical ratings in each course competency. I was given the opportunity to ask questions about my clinical performance. I have the following comments to make about my clinical performance/final clinical evaluation:

Student eSignature & Date: Yasmin Perez 11/27/25