

EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2026

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student:

Final Grade: Satisfactory/Unsatisfactory

Semester: Spring

Date of Completion:

Faculty: Rachel Haynes, MSN, RN, CNE; Heather Schwerer, MSN, RN; Kelly Ammanniti, MSN, RN, CHSE;
 Monica Dunbar, DNP, RN; Nick Simonovich, MSN, RN Dawn Wikel, MSN, RN, CNE;

Faculty eSignature:

Teaching Assistant: Stacia Atkins, BSN, 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. Faculty and teaching assistants will complete a cumulative evaluation of each competency at the midterm and final. The terms Satisfactory and Unsatisfactory will be used in evaluating the final grade or clinical course performance.**

METHODS OF EVALUATION:

- Skills Lab Competency Tool & Skills Checklists
- Simulation, Prebriefing, & Reflection Journals
- Nursing Care Map Rubric
- Meditech Documentation
- Clinical Debriefing
- Clinical Discussion Group Grading Rubric
- Evaluation of Clinical Performance Tool
- Lasater’s Clinical Judgment Rubric & Scoring Sheet
- Virtual Simulation Scenarios

ABSENCE (Refer to Attendance Policy)

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

Faculty’s Name	Initials
Kelly Ammanniti	KA
Stacia Atkins	SA
Monica Dunbar	MD
Rachel Haynes	RH
Heather Schwerer	HS
Nick Simonovich	NS
Dawn Wikel	DW

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 boxes do not need a student evaluation rating or faculty/teaching assistant initials.**

Week	Care Map Top Nursing Priority	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
3	Fall	S KA	NA	NA

Note: Students are required to submit two satisfactory care maps over the course of the semester. If the care map is not evaluated as satisfactory upon initial submission, the student must revise the care map based on instructor feedback/remediation and resubmit. A maximum of two remediation attempts will be provided for a single care map and if still unsatisfactory, the student will be required to start fresh and initiate a care map on a new patient. At least one care map must be submitted prior to midterm.

Objective

1. Illustrate correlations to demonstrate the pathophysiological alterations in adult patients with medical-surgical problems. (2,3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:																	
a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)			S	S													
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S													
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S													
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S													
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S													
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S													
g. Assess developmental stages of assigned patients. (Interpreting)			S	S													
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	S													
	Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Meditech, FSBS, IV Pump Sessions	3T-82-Right sided weakness	4N-79-Fall													
Instructors Initials	DW		KA														

**Evaluate these competencies for the offsite clinicals:

DH: 1h

IC: 1h.

ECSC: 1g, h

OR: All

Comments:

*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 1 (1h)- During week 1, the Meditech, FSBS and IV pump sessions were all considered clinical hours. You came prepared to each of them and demonstrated competency accordingly. For this reason, you have earned an S for this competency. NS/SA/DW/HS

Week 3 – 1a-h – You did a nice job discussing on clinical and in debriefing your patient’s pathophysiology, signs and symptoms, diagnostic studies, medications, medical treatments, and their current diet/nutritional needs and how it correlated to their admitting diagnosis. You were able to discuss your medications on clinical and researched their purpose, side effects, and related nursing interventions before administering medication to your patient. You came to clinical on time and prepared to care for your two patients, one diagnosed with right sided weakness and the other diagnosed with an infected wound. Great job this week on your first week on clinical for the semester.
KA

Objective

2. Perform physical assessments as a method for determining deviations from normal. (3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:																	
a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Noticing)			S	S													
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			S	S													
c. Conduct a skin assessment and implement appropriate precautions and care. (Noticing)			S	S													
d. Communicate physical assessment. (Responding)			S	S													
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S													
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	S													
	DW		KA														

**Evaluate these competencies for the offsite clinicals: DH: N/A IC: 2f ECSC: N/A OR:2a,b,c,d,e

Comments:

Week 1 (2f)- You satisfactorily completed the Meditech clinical update including documentation of IV solutions and the IV assessment. NS

Week 3 – 2 a-f – You did a nice job completing your physical assessment. You recognized abnormal assessment findings and documented them appropriately. You made sure your patient was on high risk fall precautions and ensured they were utilized throughout your day as you cared for them. You ensured your frequent neuro checks were completed on time and documented in a timely fashion. You did not get to complete a through wound assessment on your patient due to the fact that the dressing was changed on night shift, however you monitored the dressing and ensured that it is was dry and intact. You utilized the EMR to research your patient and ensured your assessment findings were documented appropriately. You did a nice job documenting and made changes when needed promptly. KA

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:	S		S	S													
a. Perform standard precautions. (Responding)	S		S	S													
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S													
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S													
d. Appropriately prioritizes nursing care. (Responding)			S	S													
e. Recognize the need for assistance. (Reflecting)			S	S													
f. Apply the principles of asepsis where indicated. (Responding)	S		S	S													
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			N/a S	N/a													
h. Implement DVT prophylaxis (early ambulation, SCDs, TED hose, administer enoxaparin or heparin) based on assessment and physicians' orders (Responding)			S	S													
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	S													
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S													
	DW		KA														

**Evaluate these competencies for the offsite clinicals:

DH: 3a

IC: 3a, f

ECSC: 3a, j

OR: All

Comments:

Week 3 – 3 a-g – You did a nice job ensuring standard precautions were utilized throughout your day when caring for your patient. You worked well with your classmates to assist one another when needed. You cared for a patient with an indwelling urinary catheter. You monitored the catheter for patency, urine color and clarity, and

provided peri care as needed. You managed a patient on oxygen and monitored their SpO2 to ensure oxygen therapy was effective and still needed. You did a great job setting a goal for your patient related to ambulation and assisting them in achieving it to help them get closer to discharge. KA

Objective

3. Execute safety precautions in the implementation of quality, patient-centered care and evidence-based nursing interventions. (2,3,4,5,8)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S													
k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			S	S													
l. Ensure patient safety through proper use of EHR, IV flow sheet, and BMV. (Responding)			S	N/a													
m. Calculate medication doses accurately. (Responding)			S	S													
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			S	N/a													
o. Regulate IV flow rate. (Responding)	S		S	N/a													
p. Flush saline lock. (Responding)			S	N/a													
q. Monitor and/or discontinue an IV. (Noticing/Responding)			S	N/a													
r. Perform FSBS with appropriate interventions. (Responding)	S		N/a	S													
	DW		KA														

**Evaluate these competencies for the offsite clinicals: DH: N/A IC: N/A ECSC: N/A OR: All

Comments:

Week 1 (3o)- During the IV pump session, you actively participated in the programming and maintenance of the Alaris IV pump. Additionally, you accurately identified abnormal IV site assessment data with an IV site monitoring activity. HS/NS

(3r)- You satisfactorily performed a Quality Control check of the glucometer as well as demonstrate skills and knowledge required for proper fingerstick blood glucose measurement with the ACCU-CHEK Inform II glucometer. SA/DW

Week 3 – 3 k-m – You did a nice job administering medications this week. You looked all medications up before administering and ensured the rights of medication administration were followed. You ha the opportunity to administer transdermal, SubQ, and IV medication this week. You made sure all medications were properly documented in the eMAR and updated your nurse when the process was complete. KA

Week 3 – 3n, o – You monitored the flow of a primary infusion while on clinical. You had the opportunity to connect a new bag to the existing primary tubing. You did a great job following direction and completing the process flawlessly. You did a nice job administering an IV piggyback this week. You primed the tubing ensuring no bubbles and programed the pump for the correct medication. KA

Week 3 – 3p – You had the opportunity to flush your patient’s IV site before and after medication administrations. You ensured patency even though you did not see blood return with aspiration. Nice job! KA

Week 3 – 3q – You did a nice job monitoring your patient’s saline lock for complications and documenting your IV site assessment in the patient EMR correctly. KA

Objective

4. Use therapeutic communication techniques to establish a baseline for nursing decisions. (1,5,7)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S													
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	S													
b. Communicate professionally and collaboratively with members of the healthcare team or next provider of care using clear, organized hand-off communication techniques. (SBAR) (Responding)			S	S													
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	S													
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S													
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	S													
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	S													
			KA														

**Evaluate these competencies for the offsite clinicals: DH: 4a, b, d IC: 4b, d ECSC: 4a, b, d, e OR: 4a, b, c, d, e, f

CDG	Week Completed	Initials
EBP Article: Discussing Evidence in Nursing Research		
Patient Education: Identifying and Intervening on Knowledge Deficit		
Safety: Restorative Care and Managing Potential Complications		

Comments:

Week 3 – 4 a-d, f – You worked well with classmates, assigned RN, and staff members to provide care for your assigned patient. You received report for your patient and asked questions as needed. You utilized the EMR to research information on your patient and ensured confidentiality was maintained. You provided an SBAR to your nurse when reporting off and made sure all pertinent information was passed on before leaving. KA

Objective

5. Implement patient education based on teaching needs of patients and/or significant others. (1,6)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
Competencies:			S	S													
a. Describe a teaching need of your patient.** (Reflecting)			S	S													
b. Utilize appropriate terminology and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)			S	S													
			KA														

****5a & b- You must address this competency in the comments below for all clinicals on 3T, 4N, or Rehab- describe the patient education you provided; be specific- include the topic, method of delivery, reason for teaching need, materials to support learning through above resources (if applicable), and method used to validate learning.**

Example: Education related to orthostatic hypotension (changing positions slowly by sitting at the side of the bed or chair for a few minutes before moving to another position, utilizing the walker when ambulating) was provided to my patient through discussion and demonstration. This was necessary to maintain patient safety as he/she was experiencing a drop-in blood pressure and dizziness when getting out of bed. A patient education sheet was printed from Lexicomp and given to the patient. The teach back method was used to validate learning.

Comments:

Week 3: Competency (a): A teaching need for my patient was educating him on what to do when feeling lightheaded, dizzy, and/or vertigo. When he starts feeling any of these symptoms go to the nearest wall, have your back facing the wall, and up against it, and slowly slide down to avoid falling down and risk getting hurt. **This was such great education to provide to your patient since they were status post-fall. KA**

Week 3: Competency (b): I provided patient education, when I provided education to my patient, I explained to her what kinds of medications she was going to take in the morning. To help me figure out why she was taking the medication I used skyscape to help me. I administered enoxaparin which is a subcutaneous shot, and anticoagulant. I assessed for any bleeding before administering and asked her where she would want her shot administered at. The next medication I gave her was her nicotine patch. I asked her where the other one was last put and she stated she had no idea and that they just easily fall off. I then asked her where she wanted it at and she didn't care. I applied it to her left shoulder. Another medication I gave was ceftriaxone fosamil, which is an antibiotic. It was specifically given to her because she had a stage 4 pressure ulcer, and it was used to prevent infection. The last medication I administered was sodium chloride IV push so I could flush out her IV before and after the antibiotic began and finished. **When answering a and b please use the same patient so you can connect the information provided to the source utilized. This comment for b actually addresses both a and b. Overall you did a nice job educating both patient's appropriately. KA**

Week 4: Competency (a): A teaching need for my patient is to teach her the importance of turning and repositioning herself every two hours to avoid developing pressure ulcers. I also feel like another teaching need for my patient is to try to educate her on the need to perform leg and arm exercises such as leg and arm pumps to help her move around her extremities to avoid the risk of deep vein thrombosis.

Week 4: Competency (b): I provided patient education, when I explained to my patient where she could have her heparin shot administered and why she was getting it. The other 8 medications that I administered to my patient, I asked her if she wanted to know about any of the medications I was going to give to her and she didn't want to know any of them. Another education point I made to my patient was the importance of repositioning herself every 1 to 2 hours so she didn't develop any future pressure ulcers or worsen the one she already had on her right ankle.

Objective

6. Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity. (2,3,4,5)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Develop and implement a priority care map utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)			S	N/a													
b. Identify factors associated with Social Determinants of Health (SDOH) &/or cultural elements that have the potential to influence patient care.** (Noticing, Interpreting, Responding, Reflecting)			S	S													
			KA														

****6b- You must address this competency in the comments below for all clinicals on 3T, 4N, or Rehab. Refer to CMS Social Determinates of Health Screening Tool in the Resources folder for the course.**

See Care Map Grading Rubrics below.

Comments:

Week 3: Competency (b): The factors associated with Social Determinants of Health is based off of components such as your living situation, food, transportation, utilities, safety, financial issues, employment, family and community support, education, physical activity, substance use, and lastly mental health. I feel if you're struggling with any of these issues regarding any of the components of social determinants of health while in the hospital it's going to be stressful for you. Like for example employment wise. If you're in the hospital and you have work the next day, you can't go into work the next day because you're in the hospital. Also that plays a key role into your financial situation since you're not able to go into work, but you need the money to pay your bills. My patient, for example, was asking about when she'll be able to go home since she needs to go to work. She lives alone and does everything herself. She stated that being in the hospital was making her have anxiety because she knew that there was a huge snowstorm coming this week, and she needed to go to her job to work. I could tell just being in the hospital was upsetting her and she had a foley also that made her stressed out because she was nervous that she would have to take it home and manage it by herself. I then let the nurse know and he went into the room to talk her through the process of foley. My reflection of this process was I knew she was going through a lot, so I tried to talk to her and make her more at ease, and tried to get the answers she needed. **You did a nice job looking at several aspects of SDOH that impact your patient's ability to manage their overall health. Nice job focusing on managing her anxiety while she was in the hospital. KA**

Week 3 – 6a – You satisfactorily completed your first care map. Please see the rubric at the end of your clinical tool for details. KA

Week 4: Competency (B): To start off my patient lives at home with her daughter. My patient relates to the factors of social determinants of health by being unable to go through day-to-day life on her own due to being wheelchair bounded. She's also unable to move any of her right extremities due to her having a stroke which is causing her right sided weakness. She is incontinent and unable to go through basic hygiene needs by herself. She goes to dialysis 3 times a week which I know does make her drowsy and fatigue so she's unable to do most things afterwards. She has a lack of physical mobility, she does have family and a support person which is her daughter. She has a caregiver which is her daughter that helps her get around to her appointments and etc.

S

7. Illustrate professional conduct including self-examination, responsibility for learning, and goal setting. (7)*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	Make Up	Make Up	Final
a. Reflect on an area of strength. ** (Reflecting)	S		S	S													
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S													
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S													
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	S													
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		S	S													
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S													
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S													
h. Actively engage in self-reflection. (Reflecting)	S		S	S													
	DW		KA														

**Evaluate these competencies for the offsite clinicals: DH: All IC: All ECSC: All OR: ALL

**7a and 7b: You must address these competencies in the comments section after each clinical experience. Please write a different comment each week. Remember that a goal includes what you will do to improve, how often you will do it, and when you will do it by (example- “I had trouble remembering to do the three checks of the six medication rights prior to administering medications. I will review the six rights and medication administration content in the textbook twice before the next clinical. Additionally, I will request to meet with my clinical faculty member to practice preparing and administering at least three medications before the next clinical.”

Comments:

Week 1 (strength)- During the first week of classes I have been using my resources such as the book and lecture slides to get me prepared for my upcoming quizzes. This is an excellent strength and will serve you well throughout your schooling. Keep it up! One suggestion for the future- The strengths and goals for improvement mentioned in this tool should focus on

clinical experiences; for example from week 1 and 2, Meditech, FSBS, and IV Pump skills. Regardless, I am pleased that you are also reflecting on theory and the best ways to develop that baseline knowledge for application to clinical. DW

Week 1 (weakness) A weakness I need to focus on is breaking up material to study and give myself a timeframe of how many hours I will be studying each material. To improve this, I will start making myself up a plan in my calendar of what times I will be devoting my time to studying for quiz 1 and quiz 2. So I am not cramming in studying material all in a short amount of time. Love this, Rylee! Time management skills are so important. Not only will they help you with studying, but they will also translate into clinical. It also forces you to work on building prioritizations skills. Best wishes with this goal. I know you can and will achieve it. DW

Week 3 (strength): One strength of mine is not procrastinating on getting things done. I feel like I'm consistent and get things done in a timely manner. Like for example I kept going into my patients room every hour making sure she didn't need anything and making sure all of my interventions were done. Great job managing you time and ensuring all interventions were performed efficiently. KA

Week 3 (weakness): One weakness of mine is that I self-criticize on myself way too much. I talk down on myself and feel like I don't give myself grace. From now on I will give myself some positive talk because I know I'm just getting myself back into the swing of things and need to be easier on myself. Definitely give yourself grace when performing new skills as well. We all need to start somewhere. Do your best and learn from your actions to improve your overall nursing capabilities. You got this! KA

Week 4(strength): One strength of mine is my time management skills. I feel like I get things done on time such as when I got my patients wound care, bath, and vital signs all done while I was in the room.

Week 4(weakness): One of my weaknesses is forgetting little things in my head to toe. From now on I'll write myself down a list of everything from my head to toe and once I finish my head to toe I'll go over that list and see if I missed anything.

Student Name: Rylee Bollenbacher		Course Objective: 6. Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity. (2,3,4,5)*					
Date or Clinical Week: 3							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)	3	You did a nice job identifying all abnormal assessment findings, labs/diagnostics, and risk factors for you patient this week. KA
	2. Identify all abnormal lab findings/diagnostic tests; include specific patient data.	(lists at least 3*) *provides explanation if < 3		(lists 3 but no specific patient data included)	(lists < 3 or gives no explanation)	3	
	3. Identify all risk factors relevant to the patient.	(lists at least 5*) *provides explanation if < 5	(lists 4)	(lists 3)	(lists < 3 or gives no explanation)	3	
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	You did a nice job identifying all nursing priorities for your patient and highlighting the patient's highest nursing priority. You had a realistic measurable goal for your nursing priority and highlighted all associated information from the noticing section. You identified 3 complication for you priority and signs and symptoms the nurse should assess the patient for. KA
	5. State the goal for the top nursing priority.	Complete			Not complete	3	
	6. Highlight all of the related/relevant data from the Noticing boxes that support the top priority nursing problem.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)	3	
	8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)	3	
Responding	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete	3	You did a nice job listing all nursing interventions related to your nursing priority and ensuring they were prioritized, included a frequency, were individualized, realistic, and included a rationale. For the first two interventions the frequency would be q4 hours and prn versus q 4 prn. Nice job! KA
	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	
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete	3	You did a nice job reassessing your highlighting information from the noticing section. You did not reassess the patient's right sided weaknesses, but did reassess all other associated findings. You identified you would discontinue the plan of care since your patient was discharged. KA
	15. Evaluation includes one of the following statements: <ul style="list-style-type: none"> Continue plan of care Modify plan of care Terminate plan of care 	Complete			Not complete	3	

Reference

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

Total Possible Points= 45 points
45-35 points = Satisfactory
34-23 points = Needs Improvement*
< 23 points = Unsatisfactory*
***Total points adding up to less than or equal to 34 points require revision and resubmission until Satisfactory. Refer to the course specific requirements for resubmission deadlines.**

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

Faculty/Teaching Assistant Comments: Great job satisfactorily completing your first care map. Please see comments above on areas to consider in the future to make your care map more clear, Overall you did a terrific job setting up this plan of care for your patient! KA

Total Points: 45/45

Faculty/Teaching Assistant Initials: KA

Student Name:		Course Objective: 6. Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity. (2,3,4,5)*					
Date or Clinical Week:							
Criteria		3	2	1	0	Points Earned	Comments
Noticing	1. Identify all abnormal assessment findings (subjective and objective); include specific patient data.	(lists at least 7*) *provides explanation if < 7	(lists 5-6)	(lists 5-7 but no specific patient data included)	(lists < 5 or gives no explanation)		
	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. 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)		
Interpreting	4. List all nursing priorities and highlight the top priority problem.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	5. State the goal for the top nursing priority.	Complete			Not complete		
	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		
	7. Identify all potential complications for the top nursing priority problem.	(lists at least 3)	(lists 2)		(lists < 2)		
8. Identify signs and symptoms to monitor for each complication.	(lists at least 3)	(lists 2)		(lists < 2)			
Responding	9. List all nursing interventions relevant to the top nursing priority.	> 75% complete	50-75% complete	< 50% complete	0% complete		
	10. Interventions are prioritized	> 75% complete	50-75% complete	< 50% complete	0% complete		
	11. All interventions include a frequency	> 75% complete	50-75% complete	< 50% complete	0% complete		
	12. All interventions are individualized and realistic	> 75% complete	50-75% complete	< 50% complete	0% complete		

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		
Reflecting	14. List all of the highlighted reassessment findings for the top nursing priority.	>75% complete	50-75% complete	<50% complete	0% complete		
	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		

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:

Total Points:

Faculty/Teaching Assistant Initials:

Firelands Regional Medical Center School of Nursing
Medical Surgical Nursing 2026
Skills Lab Competency Tool

Student name: Rylee Bollenbacher								
Skills Lab Competency Evaluation	Lab Skills							
	Week 1	Week 1	Week 1	Week 1	Week 1	Week 2	Week 2	Week 9
Performance Codes: S: Satisfactory U: Unsatisfactory	Insulin (2,3,5,7)*	Assessment (2,3,4,5,7)*	IV Math Application (3,7)*	Lab Day (1,2,3,4,5,6,7)*	IV Skills (2,3,5,7)*	Trach (1,2,3,4,5,6,7)*	EBP (3,7)*	Lab Day (1,2,3,4,5,6,7)*
	Date: 1/6/26	Date: 1/6/26	Date: 1/7/26	Date: 1/7/26	Date: 1/9/26	Date: 1/14/26	Date: 1/14/26	Date: 3/9/26
Evaluation:	S	S	S	S	S	S	S	
Faculty/Teaching Assistant Initials	DW	DW	DW	DW	DW	DW	DW	
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	

*Course Objectives

Comments:

Week 1

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/6/26 as well as the assigned IV Math practice questions and the IV Math Application Lab on 1/7/26. KA/DW/HS

(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. KA/RH (Insulin)- You were able to correctly prepare an insulin pen and administer subcutaneous insulin. Insulin requirements were accurately identified and calculated through the corrective scale and carbohydrate coverage orders. MD

(Lab Day)- You satisfactorily completed the mandatory lab review of nursing foundational skills. This was achieved through simulating care for a patient in a scenario requiring competency in assessment, communication, medication administration (including PO and IM injection), nasogastric tube insertion and removal, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, Foley insertion and removal, development of nursing notes, and providing SBAR hand-off report. NS/MD/RH

(IV Skills)- You have satisfactorily completed IV lab including a saline flush, IV push medication administration with reconstitution, priming and hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV therapy, and monitoring the IV site for infiltration and signs of complications. SA

Week 2

(Trach Care & Suctioning) - During this lab, you satisfactorily demonstrated competence with tracheostomy care and tracheostomy suctioning, great job! You were able to maintain sterility throughout both procedures and were conscientious of your sterile field. During trach suctioning, you required one prompt related to hyper oxygenating the patient prior to performing suctioning. Otherwise, no additional prompts were needed for trach suctioning. During trach care, you did not require any prompts, well done. You were efficient, confident, and communicated well with your “patient” throughout. Keep up the hard work! RH/DW/NS/HS

(EBP Lab)- You actively participated in the online searching process for evidence-based practice literature, as well as reviewing example articles to determine appropriate selection and information needed when summarizing a research article. KA/SA/LK

Firelands Regional Medical Center School of Nursing
 Medical Surgical Nursing 2026
 Simulation Evaluations

Student Name: Rylee Bollenbacher					
Performance Codes: S: Satisfactory U: Unsatisfactory			Evaluation	Faculty Initials	Remediation Date/Evaluation/Initials
Date: 1/26/26	Shadow Health (Respiratory Hourly Rounds: Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Scenario	S	KA	NA
		DCE Score	100		
Date: 2/9/26	Shadow Health (Endocrine Hourly Rounds: Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Scenario			
		DCE Score			
Date: 2/23/26	Shadow Health (Basic Patient Case: Pharmacology) (*1, 2, 3, 4, 5, 6)	Scenario			
		DCE Score			
Date: 2/25 or 2/26/26	Simulation #1 (Musculoskeletal & Resp) (*1, 2, 3, 4, 5, 6, 7)	Prebrief			
		Scenario			
		Reflection Journal			
		Survey			
Date: 3/24/26	Shadow Health (Perioperative Care Hourly Rounds: Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Scenario			
		DCE Score			
Date: 4/8 or 4/9/26	Simulation #2 (GI & Endocrine) (*1, 2, 3, 4, 5, 6, 7)	Prebrief			
		Scenario			
		Reflection Journal			
		Survey			
Date: 4/13/26	Shadow Health (Intermediate Patient Case: Pharmacology) (*1, 2, 3, 4, 5, 6)	Scenario			
		DCE Score			
Date: 4/23/26	Shadow Health (Renal Hourly Rounds: Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Scenario			
		DCE Score			

* Course Objectives

Comments:

EVALUATION OF CLINICAL PERFORMANCE TOOL
Medical Surgical Nursing – 2026

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 and Date:

12/19/25