EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2026

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Yasmin Perez

Final Grade: Satisfactory/Unsatisfactory

Semester: Spring

Date of Completion:

Faculty: Frances Brennan, MSN, RN; Amy M. Rockwell, MSN, RN
Chandra Barnes, MSN, RN; Brian Seitz, MSN, RN, CNE
Brittany Lombardi, MSN, RN, CNE

Faculty eSignature:

DIRECTIONS FOR USE:
Each week the students evaluate themselves based on the competencies using the performance code on page 2. The performance code includes the terms **Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U), and Not Available (NA).** The faculty member will initial if in agreement with the student's evaluation. If there is a discrepancy in the performance code evaluation between the student and the faculty member, a note is written in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". If the student does not self-rate, then it is an automatic "U". A student who submits the clinical evaluation tool late will be rated as "U" in the appropriate competency(s) for that clinical week. Whenever a student receives a "U" in a competency, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, it will be another "U" until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. **An unsatisfactory or needs improvement as a final evaluation in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. 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:
Clinical Assignments
Completion of Patient Care
Meditech Documentation
Observation of Clinical Performance
Evaluation of Clinical Performance Tool
Onsite Clinical Debriefing
Clinical Discussion Rubric
Preceptor Feedback
Nursing Care Map Rubric
Skills Lab Checklists/Competency Tool
Lasater Clinical Judgment Rubric
Virtual Simulation scenarios
Pathophysiology Grading Rubric
SBAR/Physician Orders Rubric
Hand-Off Report Competency Rubric

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
1/23/2026	4H	Cardiac Diagnostics clinical- absent	
1/30/2026	5.5H	Special Procedures clinical	

Initials	Faculty Name
CB	Chandra Barnes, MSN, RN
FB	Fran Brennan, MSN, RN
BL	Brittany Lombardi, MSN, RN, CNE
AR	Amy Rockwell, MSN, RN
BS	Brian Seitz, MSN, RN, CNE

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 needed 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, and 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.

Objective

1. Engage in the coordination and delivery of nursing care measures to groups of patients and to patients with complex problems. (1,3,4,5,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies: a. Manage complex patient care situations with evidence of preparation and organization. **(Responding)**	N/A	N/A	N/A	S	S													
b. Assess comprehensively as indicated by patient needs and circumstances**. (Noticing)**	N/A	N/A	N/A	S	S													
c. Evaluate patient's response to nursing interventions. **(Reflecting)**	N/A	N/A	S	S	S													
d. Interpret cardiac rhythm; determine rate and measurements. **(Interpreting)**	N/A	N/A	N/A	~~N/A~~ S	S													
e. Administer medications observing the seven rights of medication administration. **(Responding)**	N/A	N/A	S	S	S													
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. **(Responding)**	~~N/A~~ S	N/A	~~N/A~~ S	N/A	N/A													
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. **(Responding)**	N/A	N/A	S	S	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														
Clinical Location	DH		IS	4C	4P													

Comments:

Week 2 (1f)- Great job with several successful IV attempts, appropriate technique was demonstrated. FB

Week 4 (1c,f)- Satisfactory during Infusion Center clinical and with discussion via CDG posting. Preceptor comments: "Satisfactory in all areas. Observed PRBC transfusion, port access, IV starts, gave subq medications, observed therapeutic phlebotomy. Showed good initiative. Great job!" Great job. Keep up the good work. AR

Week 5(1a-e,g): Excellent job this week managing complex patient care situations. Your care was very organized, and you did a great job with your time management. Your head to toes assessments were very thorough and well done. Medication passes were safely done following all rights of medication administration. Practice was gained interpreting cardiac rhythms through observation and one on one discussion. Great job monitoring your patient closely to ensure positive patient outcomes. CB

*End-of- Program Student Learning Outcomes

Objective

2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies: a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. **(Noticing, Interpreting, Responding)**	N/A	N/A	N/A	S	S													
b. Monitor for potential risks and anticipate possible early complications. **(Noticing, Interpreting, Responding)**	N/A	N/A	N/A	S	S													
c. Recognize changes in patient status and take appropriate action. **(Noticing, Interpreting, Responding)**	N/A	N/A	N/A	~~N/A~~ S	S													
d. Formulate a prioritized nursing plan of care utilizing clinical judgment skills. **(Noticing, Interpreting, Responding, Reflecting)** *	N/A	N/A	N/A	S	S													
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. **(Responding)**	N/A	N/A	S	S	S													
f. 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	N/A	S	S	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														

***When completing the 4T Care Map CDG refer to the Care Map Rubric**

*End-of- Program Student Learning Outcomes

**Objective 2f: Provide a comment for the highlighted competency each week. If no clinical experiences, put "NA" for that week.

Comments:

Week 2 - 2f. A SDOH would be a patient having difficulty understanding prep instructions like NPO status, bowel preps, and what medications to hold, this could impact the procedures they are getting done. This is a good example for Digestive Health patients. Many people are unable to read or fully understand medical information which can lead to delays, etc. in their treatment. AR

Week 4- 2f A positive SDOH that I saw during my clinical is how the 85-year-old female patient had both daughters there helping with transportation and being there emotionally for her. The patient had stated to me that if it wasn't for her daughters support system she would feel depressed so having her daughters emotionally supports her needs. That is wonderful. So many people aren't as fortunate. Thanks for sharing a positive SDOH event. AR

Week 5-2f ASDOH for this patient would be support system, such as family and caregivers who can assist during hospitalization and recovery, would positively impact her outcomes in getting better. Great example of a positive SDOH. In your patient's situation it is nice that they have family for support. CB

Week 5(2a,b,c,e): You did an excellent job correlating the relationships amongst your patient's disease process, past medical history, symptoms, and present condition utilizing clinical judgement skills, and then using that information to satisfactorily complete your pathophysiology CDG this week. Please refer to the Pathophysiology Rubric below for my feedback. Great job monitoring your patient for changes and taking appropriate action (the difference in Tuesday and Wednesday with oxygenation and secretions). Good job respecting your patient during care and clinical this week. CB

Week 6 2f A SDOH would be that this patient has no support. She told me that she did not have any family and lives alone. This could affect her when she goes home because she will need someone to care for her due to her heart failure, Afib and a high risk of falling. She had fallen three times before she came into the hospital. She said the help she is getting is from the hospital but once she is out she won't have that support system.

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Objective

3. Plan leadership experiences with a mentor to impact team performance, patient safety, and quality indicators. (1,3,5,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies: a. Critique communication barriers among team members. **(Interpreting)**	N/A	N/A	N/A	S	S													
b. Participate in QI, core measures, monitoring standards and documentation. **(Interpreting & Responding)**	N/A	S	N/A	~~N/A~~ S	S													
c. Discuss strategies to achieve fiscal responsibility in clinical practice. **(Responding)**	N/A	N/A	S	S	N/A													
d. Clarify roles & accountability of team members related to delegation. **(Noticing)**	N/A	N/A	S	S	S													
e. Determine the priority patient from assigned patient population. **(Interpreting)** (**Patient Mgmt.**)	N/A	N/A	N/A	N/A	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														

Comments:

Week 3 (3b)- Satisfactory Quality Assurance/Core Measures assignment and discussion via CDG posting. Great job! AR

Week 4 (3c)- Satisfactory Infusion Center clinical experience and discussion via CDG posting. Keep up the great work. AR

Week 5(3a-d): Great job observing communication between healthcare team members. You participated in QI and core measures by appropriately documenting standards of care. Fiscal responsibility was practiced by charging items from the PAR room and scanning all medications/flushes. CB

*End-of- Program Student Learning Outcomes

Objective

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5,7)*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Mid-term	9	10	11	12	13	14	15	Make up	Final
Competencies: a. Critique examples of legal or ethical issues observed in the clinical setting. **(Interpreting)**	S	N/A	S	S	S													
b. Engage with patients and families to make autonomous decisions regarding healthcare. **(Responding)**	N/A	N/A	N/A	S	S													
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. **(Responding)**	~~N/A~~ S	N/A	S	S	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														

Objective 4a: Provide a comment for the highlighted competency each week. If no clinical experiences, put "NA" for that week.

Comments:

4a. A legal issue would be some nurses left the patients chart on the desk and not covered. This would be a legal issue cause someone else could see the chart and a patients family might see and take legal issue. Good example. The desk area in Digestive Health is large and open and patient's privacy could easily be invaded. AR

4a A potential legal or ethical issue I observed was that the curtains around the beds were not fully closed during care. This could compromise patient privacy and confidentiality which are both legal and ethical due to other patients being so close to them. This is a definite concern. Good example. AR

Week 5-4A legal issue would be that the dad brought legal papers stating he was legal guardian and he made all the decisions and not mom. This could be a legal issue because the mom was the one there with her there and if something was to happen with the patient and decisions needed to be made and mom was the one to make the decision and then dad was aware or agreed it could cause legal issues. Great example of something that could very well become a legal issue. This is why it is very important to have that paperwork in place. CB

4a- A ethical issue I saw this clinical would be that I found a needle on the patients' bed that was open laying on her bed. This is a ethical issue because nurses must maintain a safe environment and prevent harm to the patient which is nonmaleficence.

*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

5. Construct methods for self-reflection and critiquing healthcare systems, processes, practices and regulations on a weekly basis. (7,8)*

Weeks of Course:	2	3	4	5	6	7	8	**Make up**	**Mid-term**	9	10	11	12	13	14	15	**Make up**	**Final**
Competencies: a. Reflect on your overall performance in the clinical area for the week. **(Responding)**	~~N/A~~ S	N/A	S	S	S													
b. Demonstrate initiative in seeking new learning opportunities. **(Responding)**	~~N/A~~ S	~~S~~ NA	S	S	S													
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. **(Interpreting)**	~~N/A~~ S	~~N/A~~ S	S	S	S													
d. Maintain the principles of asepsis and standard/infection control precautions **(Responding)**	~~N/A~~ S	N/A	S	S	S													
e. Practice use of standardized EBP tools that support safety and quality. **(Responding)**	~~N/A~~ S	N/A	N/A	~~N/A~~ S	S													
f. Utilize faculty, preceptor and mentor feedback to improve clinical performance. **(Responding & Reflecting)**	~~N/A~~ S	N/A	S	S	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														

Comments:

Week 3 (5c)- Satisfactory Quality Assurance/Core Measures assignment and discussion via CDG posting. AR

Week 5(5b,d): Excellent job working independently and as a team, while completing interventions for your patient. Great job using standard precautions while caring for your patients this week! EBP tools are used each clinical day, including John Hopkins and Braden scales. CB

*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective

6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	**Make up**	**Mid-term**	9	10	11	12	13	14	15	**Make up**	**Final**
Competencies: a. Establish collaborative partnerships with patients, families, and coworkers. **(Responding)**	~~N/A~~ S	N/A	S	S	S													
b. Teach patients and families based on readiness to learn and discharge learning needs. **(Interpreting & Responding)**	N/A	N/A	N/A	N/A	N/A													
c. Collaborate and communicate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. **(Responding)**	~~N/A~~ S	N/A	S	S	S													
d. Deliver effective and concise hand-off reports. **(Responding)** *	N/A	N/A	N/A	S	N/A													
e. Document interventions and medication administration correctly in the electronic medical record. **(Responding)**	N/A	N/A	N/A	S	S													
f. Consistently and appropriately posts in clinical discussion groups. **(Responding and Reflecting)**	N/A	~~N/A~~ S	S	S	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														

***When completing 4T Hand-Off Report see 4T Hand- Off Competency Rubric**

Comments:

Week 3 (6f)- Satisfactory CDG posting related to your Quality Assurance/Core Measures observation experience. Keep up the good work. AR

Week 4 (6c,f)- Satisfactory discussion via CDG posting related to your Infusion Center clinical. Great job. AR

Week 5(6d,e,f): Great job with your hand off report during debriefing, scoring 28/30, please see the grading rubric below. Excellent job with all your documentation this week in clinical. Your documentation was done in a timely manner and was accurate. Satisfactory completion of your CDG this week. Keep up the great work! CB

*End-of- Program Student Learning Outcomes

Objective

7. Devise methods utilized by nursing to develop the profession, advance the knowledge base, ensure accountability, and improve the outcomes of care delivery. (1,3,4,6,7,8)*

Weeks of Course:	2	3	4	5	6	7	8	**Make up**	**Mid-term**	9	10	11	12	13	14	15	**Make up**	**Final**
Competencies: a. Value the need for continuous improvement in clinical practice based on evidence. **(Responding)**	~~N/A~~ S	S	S	S	S													
b. Accountable for investigating evidence-based practice to improve patient outcomes. **(Responding)**	~~N/A~~ S	S	S	~~N/A~~ S	S													
c. Comply with the FRMCSN *"Student Code of Conduct Policy."* **(Responding)**	~~N/A~~ S	N/A	S	S	S													
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions**.** **(Responding)**	~~N/A~~ S	N/A	S	S	S													
Faculty Initials	**AR**	**AR**	**AR**	**CB**														

Comments:

Week 2- Be sure to carefully read each competency weekly and evaluate yourself on all that are pertinent. AR

Week 3 (7b)- Satisfactory discussion via CDG posting related to your Quality Assurance/Core measures experience. Keep it up. AR

Week 5(d): Excellent job this week displaying a great ACE attitude during clinical and showing enthusiasm for the caring of individuals at a very vulnerable and often difficult time. CB

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Firelands Regional Medical Center School of Nursing
Care Map Grading Rubric

Student Name: **Date or Clinical Week:**				**Course Objective:**	Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment.		
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**		

*End-of- Program Student Learning Outcomes

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: • 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:

*End-of- Program Student Learning Outcomes

Care Map Evaluation Tool**
AMSN
2026

Date	Nursing Priority Problem	Evaluation & Instructor Initials	Remediation & Instructor Initials

** AMSN students are required to submit one satisfactory care map (CDG) during the 3-week 4T clinical rotation. If the care map is not evaluated as satisfactory upon initial submission, the student has one opportunity to revise the care map based on instructor feedback. **Students that are not satisfactory after these 2 attempts will be required to meet with course faculty for remediation.**

Comments:

*End-of- Program Student Learning Outcomes

Pathophysiology Grading Rubric
Firelands Regional Medical Center School of Nursing
Advanced Medical Surgical Nursing
2026

Student Name: **Yasmin Perez** **Clinical Date:** **2/3-2/4/2026**

1. Provide a description of your patient including current diagnosis and past medical history. (4 points total) • Current Diagnosis (2)-2 • Past Medical History (2)-2	**Total Points: 4** **Comments:** Great job providing a description of your patient's current diagnosis and past medical history.
2. Describe the pathophysiology of your patient's current diagnosis. (6 points total) • Pathophysiology-what is happening in the body at the cellular level (6)-6	**Total Points: 6** **Comments:** Excellent job! Pathophysiology is detailed and accurate.
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (6 points total) • All patient's signs and symptoms included (2)-2 • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (2)-2 • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (2)-2	**Total Points: 6** **Comments:** All patient's signs and symptoms included with detailed explanation of correlation to current diagnosis. Great job discussing the signs and symptoms that are typically expected with a patient who is diagnosed with this disease.
4. Correlate the patient's current diagnosis with all related labs. (12 points total) • All patient's relevant lab result values included (3)-3 • Rationale provided for each lab test performed (3)-3 • Explanation provided of what a normal lab result should be in the absence of current diagnosis (3)-3 • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (3)-3	**Total Points: 12** **Comments:** Excellent job! All relevant labs were included with rationales. Normal lab values were included and an explanation of how each lab correlates to the patient's diagnosis. I would have also included a triglycerides lab value considering your patient is getting propofol.
5. Correlate the patient's current diagnosis with all related diagnostic tests. (12 points total) • All patient's relevant diagnostic tests and results included (3)-3 • Rationale provided for each diagnostic test performed (3)-3 • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (3)-3 • Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (3)-3	**Total Points: 12** **Comments:** Excellent job! All relevant diagnostic test were included with rationales. Normal findings were included and an explanation of how each test correlates to the patient's diagnosis.

*End-of- Program Student Learning Outcomes

6. Correlate the patient's current diagnosis with all related medications. (9 points total) • All related medications included (3)-3 • Rationale provided for the use of each medication (3)-3 • Explanation of how each of the patient's relevant medications correlate with current diagnosis (3)-3	**Total Points: 9** **Comments:** Great job including all medications, all information is detailed and accurate.
7. Correlate the patient's current diagnosis with all pertinent past medical history. (4 points total) • All pertinent past medical history included (2)-2 • Explanation of how patient's pertinent past medical history correlates with current diagnosis (2)-2	**Total Points: 4** **Comments:** Great job correlating the patient's past medical history with current diagnosis.
8. Prioritize nursing interventions related to current diagnosis. (6 points total) • All nursing interventions provided for patient prioritized and rationales provided (6)-4	**Total Points: 4** **Comments:** Pertinent interventions were listed with rationales. A couple of interventions I would have added would be provide enteral feedings, monitor daily CXR, offload heels, wound assessment, surgical dressing changes, sedation vacation, ventilator settings, restraints, and suctioning.
9. Discuss the role of interdisciplinary team members in the care of the patient. (6 points total) • Identifies all interdisciplinary team members currently involved in the care of the patient (2)-2 • Explains how each current interdisciplinary team member contributes to positive patient outcomes (2)-2 • Identifies additional interdisciplinary team members (not involved currently) that should be included in the care of the patient to ensure positive patient outcomes (2)-2	**Total Points: 6** **Comments:** Great job identifying additional interdisciplinary team members that should be included to ensure positive outcomes for your patient. Pharmacist are already involved in your patient's care but I do agree with case management and therapy.
Total possible points = 65 51-65 = Satisfactory < 51 = Unsatisfactory **Course Objective:** 2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)* **Clinical Competency:** 2(a.) Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. (Noticing, Interpreting, Responding) *End-of-Program Student Learning Outcomes	**Total Points: 63/65** **Comments:** Great job, Yasmin! Your pathophysiology was very detailed, thorough and well done. Keep up all your hard work! CB

*End-of- Program Student Learning Outcomes

Firelands Regional Medical Center School of Nursing
AMSN –4 Tower - Hand-Off Report Competency Rubric
Faculty: Brittany Lombardi, MSN, RN, CNE; Brian Seitz, MSN, RN, CNE; Chandra Barnes, MSN, RN

Student Name: ____Yasmin Perez_____ **Date**: ____2/4/26_____

Must complete satisfactorily during 4 Tower debriefing.

23-30 points = Satisfactory	< 23 points = Unsatisfactory

CRITERIA

	Meets Expectations 5	Needs Improvement 3	Does Not Meet Expectations 0	POINTS
Introduction Safety (1,2)*	Introduction provided (includes patient name, room number etc.). Provides socioeconomic factors (e.g. social support), allergies, and alerts (falls, isolation, etc.)	Provides introduction and communicates most of the safety concerns of the patient.	Does not provide introduction and/or does not address the safety concerns of the patient.	**5**
Situation (3)*	Presents chief complaint and current status (including code status, recent changes, and response to treatment).	Presents most information but missing pertinent data e.g. current status, changes etc.	Information is incomplete and/or disorganized. Not possible to understand and obtain an adequate and clear picture of the patient's situation.	**5**
Background (4)*	Provides detailed and organized background information regarding presenting diagnosis and signs/symptoms; includes pertinent past medical and surgical history.	Provides background information but information disorganized and difficult to understand. Missing some information related to past medical and surgical history.	Background information is incomplete and/or inaccurate. Missing pertinent information related to past medical and surgical history	**3**
Assessment Laboratory/Diagnostic Testing (5)*	Provides clear, concise, pertinent assessment information e.g. vital signs, cardiac assessment, respiratory assessment. Communicates pertinent laboratory and diagnostic information and relates findings to current diagnosis/presentation.	Provides assessment information but material is disorganized. Communicates laboratory and diagnostic findings but information is not specific. Example: states hemoglobin is low without stating specific number or why it is abnormal.	Assessment information is incomplete and needs improvement. Does not communicate findings in a way that can be understood.	**5**
Actions (4,5)*	Explains interventions performed or required. Provides rationale.	Explains interventions performed/required but does not provide rationales.	Does not include all interventions performed and does not provide rationales.	**5**
Communication Prioritization (1,4,5,6)*	Communicates and prioritizes any outstanding patient issues and the plan of care. Example: patient having change in mental status - would	Communicates all information but is slightly disorganized in presentation.	Overall communication of hand-off report needs improvement. Incomplete report and/or disorganized in presentation	**5**

*End-of- Program Student Learning Outcomes

	explain CT ordered. Includes patient teaching provided.			
			TOTAL POINTS	**28/30**

Faculty Comments: _____ Yasmin, great job with your hand-off report. You scored 2/30, missing points for background information. You need to tell a story of things that happen with your patient and it needs to be accurate and complete**.**

Faculty Signature:_____Chandra Barnes, MSN, RN_____Date: _____2/4/26_____

*End-of- Program Student Learning Outcomes

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

Students Name:					
Performance Codes: **S**: Satisfactory **U**: Unsatisfactory			**Evaluation**	**Faculty Initials**	**Remediation Date/Evaluation/Initials**
Date: **2/13/2026**	vSim (Rachael Heidebrink) (Pharm) (*1, 2, 6)	Pre-Quiz, Scenario, SBAR, and Post Quiz			
Date: **2/23/2026** **2/24/2026**	Week 8 Simulation (*1, 2, 3, 5, 6, 7)	Scenario			
		Survey			
Date: **2/27/2026**	vSim (Junetta Cooper) (Pharm) (*1, 2, 6)	Pre-Quiz, Scenario, SBAR, and Post Quiz			
Date: **3/13/2026**	vSim (Mary Richards) (Pharm) (*1, 2, 6)	Pre-Quiz, Scenario, SBAR, and Post Quiz			
Date: **3/20/2026**	vSim (Lloyd Bennett) (Med-Surg) (*1, 2, 6)	Pre-Quiz, Scenario, SBAR, and Post Quiz			
Date: **3/26/2026**	vSim (Kenneth Bronson) (Med-Surg) (*1, 2, 6)	Pre-Quiz, Scenario, SBAR, and Post Quiz			
Date: **4/6/2026**	vSim (Carl Shapiro) (Med-Surg) (*1, 2, 6)	Pre-Quiz, Scenario, SBAR, and Post Quiz			
Date: **4/6/2026**	Comprehensive Simulation (*1, 2, 3, 5, 6, 7)	Scenario			
		Survey			

* Course Objectives

Comments:

Skills Lab Evaluation Tool
AMSN
2026

*End-of- Program Student Learning Outcomes

Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**: Unsatisfactory	**Lab Skills**									
	Meditech Document (6)*	**Physician Orders/SBAR (1,5,6)***	**Prioritization/ Delegation (1,2,5,6)***	**Resuscitation (1,5,6)***	**IV Start (1,6)***	**Blood Admin./IV Pumps (1,2,6)***	**Central Line/Blood Draw/Ports (1,6)***	**Head to Toe Assessment (1,6)***	**ECG/Hand-off report/CT (1,6)***	**ECG Measurements (1.6)***
	Date: 1/6/2026	**Date: 1/6/2026**	**Date: 1/6/2026**	**Date: 1/6/2026**	**Date: 1/8/2026**	**Date: 1/8/2026**	**Date: 1/9/2026**	**Date: 1/9/2026**	**Date: 1/9/2026**	**Date: 1/9/2026**
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S**	**S**
Faculty Initials	FB	BS/CB	BL	AR	BS/CB/ BL/FB	AR	CB	BS/DW	BS/DW	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

Meditech Documentation: Satisfactory participation of assessment documentation including physical re-assessment, safety and fall assessment, RN mechanical ventilator assessment, IV location assessment, vital signs, and feeding method. Great job! FB

Physician Orders/SBAR: Satisfactory completion of physician's order lab per the SBAR skills competency rubric: phone call to physician with SBAR report, receiving and reading back multiple physician orders, and hand-off report given to the next student in rotation. Discussion of the treatment, medications, and plan of care for a patient experiencing NSTEMI and STEMI. CB/BS

Prioritization/Delegation: Satisfactory completion of the prioritization and delegation skills lab. You demonstrated satisfactory performance in all four lab activities, including patient prioritization, assigning tasks to the appropriate provider role (RN, LPN, and UAP), prioritizing nursing interventions, and identifying appropriate patient assignments for both the RN and LPN. You successfully prioritized care for multiple patients using established frameworks such as Maslow's hierarchy of needs, ABCs, and the nursing process. You appropriately delegated nursing tasks and actively participated in group discussions related to delegation and clinical decision-making. Great job! BL

Resuscitation: Satisfactory participation in the practice of Hands-Only CPR, discussion regarding use of and ventilation with bag-valve mask/Ambu bag, and review of crash cart and Code Blue team duties and documentation. AR

IV Start: Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. FB/CB/BS/BL

Blood Admin/IV Pumps: Satisfactory completion of practice with blood administration safety checks and quality assurance audit. Great job with IV pump practice, the use of the medication library, and pump set up of primary and secondary IV medication infusion. AR

Central Line Dressing Change/Ports/Blood Draw: Satisfactory central line dressing change participation providing proper technique guidelines, maintenance of central line ports, and line flushing. You were satisfactory in accessing and de-accessing an infusaport device, demonstrated proper technique on how to draw blood from a CVAD, and properly labeled a blood tube per hospital policy. Great job! CB

*End-of- Program Student Learning Outcomes

Head to Toe Assessment: Satisfactory completion of the Head to Toe Assessment. Great job! DW/BS

ECG/Telemetry Placements/Hand-off report/CT: Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches and leads; satisfactory participation in review of Chest Tube/Atrium tutorial; satisfactory completion of

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced 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 & Date:

ar 12/12/2025

*End-of- Program Student Learning Outcomes