EVALUATION OF CLINICAL PERFORMANCE TOOL

Medical Surgical Nursing – 2026

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Cassidy Verlie

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)
1/22/2026	7 hrs	Missed 3T clinical and debriefing	2/18/26 3T – 6hours 2/19/26 Debriefing – 1 hour
2/7/2026	1 hour	Handwritten IC Scavenger Hunt Submitted	2/10/2026

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
Week 4	Excess Fluid Volume	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 patho-physiology of the patient's disease process. (Interpreting)			S	S	NA	NA											
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	NA	NA											
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	NA	NA											
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	~~S~~ NI	NA	NA											
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	NA	NA											
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	S	NA	NA											
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	NA	NA											
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	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, kidney stones, hydronephrosis	3T, 65, chf and asthma	DH, IC	ESCS only											
Instructors Initials	**SA**		**HS**	**KA**	**MD**												

****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- (1 a, b, c, d, e)-You were able to discuss your patient's pathophysiology of his current admitting diagnosis and past medical history. You were also able to review the diagnostics and discuss how they correlated with the patient's diagnosis. HS

Week 4 – 1a-h – You discussed 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 asked thoughtful questions and sought out further knowledge regarding your patient's pathophysiology. You had some difficulty discussing your medications on clinical and did not thoroughly research 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 patient diagnosed with shortness of breath related to congestive heart failure. KA

Week 5 IC/DH Objective 1 H- Please utilize the highlighted suggestions for competencies to evaluated above when attending the alternative clinical sites (DH, IC, ECSC, and OR). This will allow you to give full credit where it is due with every clinical experience! MD

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	NA	NA											
b. Conduct a fall assessment and implement appropriate precautions. (Noticing)			S	S	NA	NA											
c. Conduct a skin assessment and implement appropriate precautions and care. (Noticing)			S	S	NA	NA											
d. Communicate physical assessment. (Responding)			S	S	NA	NA											
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	S	NA	NA											
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	S	NA	NA											
	SA		**HS**	**KA**	**MD**												

****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 (2a-f)- You did a nice job with your assessment this week. You also did a nice job communicating your findings to the RN. You were also able to discuss your focused assessment and the reasoning behind your decision of focus. HS

Week 4 – 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 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: a. Perform standard precautions. (Responding)	S		~~S~~ U	S	S	S											
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	NA	NA											
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	S	NA	NA											
d. Appropriately prioritizes nursing care. (Responding)			S	S	NA	NA											
e. Recognize the need for assistance. (Reflecting)			S	S	NA	NA											
f. Apply the principles of asepsis where indicated. (Responding)	S		~~S~~ U	S	S	NA											
g. Demonstrate appropriate skill with Foley catheter insertion, maintenance, & removal (Responding)			NA	NA	NA	NA											
h. Implement DVT prophylaxis (early ambulation, SCDs, ted hose, administer enoxaparin or heparin) based on assessment and physicians' orders (Responding)			NA	NA	NA	NA											
i. Identify the role of evidence in determining best nursing practice. (Interpreting)	S		S	S	NA	NA											
j. Identify recommendations for change through team collaboration. (Reflecting)			S	S	NA	S											
	SA		**HS**	**KA**	**MD**												

****Evaluate these competencies for the offsite clinicals:** **DH: 3a** **IC: 3a, f** **ECSC: 3a, j** **OR: All**

Comments:

Week 3 (3 c, d, e)- You were able to prioritize your care for the day and adjust your plans when necessary, based on changes that occurred during the day. You were available to help others when needed, and ask for assistance when needed.

(3 a, f)- These competencies were changed to U's because you were observed not performing hand hygiene when entering a patient room. Hand hygiene should be performed each time when entering and exiting a patients room, and any other time necessary. You also entered a patient's room that was on contact precautions without the proper PPE as displayed outside the room. You also came into the hallway with your contact isolation PPE (isolation gown) on after being in the patient's room and providing care. HS

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. HS

1/29/2026

a, f. This week I satisfactorily demonstrated standard precautions and maintained aseptic technique throughout my clinical experience. I agree. You were very mindful of standard precautions and I witnessed you several times foaming in and out of the patient room. KA

Week 4 – 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 managed a patient on oxygen and monitored their SpO2 to ensure oxygen therapy was effective and still needed. Your patient was on a fluid restriction and you kept accurate documentation on the patient's intake and output to make sure that the patient stayed within the prescribed fluid restriction. You had some difficulty utilizing the bedside monitor and did not recognize the BP cuff was upside and the monitor was set to show the MAP instead of the BP, but did ask for assistance appropriately. Please continue to work on your skillfulness as we discussed by slowing yourself down and providing efficient, purposeful nursing care. You did a great job setting a goal for your patient related to increasing 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: k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			NA	~~S~~ U	NA	NA											
l. Ensure patient safety through proper use of I, IV flow sheet, and BMV. (Responding)			NA	~~S~~ U	NA	NA											
m. Calculate medication doses accurately. (Responding)			NA	S	NA	NA											
n. Administer IV therapy, piggybacks, IV push, and/or adding solution to a continuous infusion line. (Responding)			NA	NA	NA	NA											
o. Regulate IV flow rate. (Responding)	S		NA	NA	NA	NA											
p. Flush saline lock. (Responding)			NA	NA	NA	NA											
q. Monitor and/or discontinue an IV. (Noticing/Responding)			S	~~NA~~ S	NA	NA											
r. Perform FSBS with appropriate interventions. (Responding)	S		S	S	NA	NA											
	SA		**HS**	**KA**	**MD**												

****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

Week 1 (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 (3q, r)-You were able to monitor your patients IV site with the primary fluids infusing prior to his surgery. You were able to perform a FSBS on your patient prior to surgery. HS

Week 4 – 3 k-l – You had the opportunity to administer PO and SubQ medications this week. You looked all medications up before administering, but did not have a complete knowledge on all medications to ensure safe administration. You attempted to follow the rights of medication administration, but there were wholes in the process. You were directed to educate the patient about each medication prior to completing their breathing treatment and wait to administer medication until faculty was present. You did not follow this as directed by faculty and administered 2 medications without completing the scanning process in the MAR before administration. With my assistance you were able to make sure all other medications were properly documented and scanned in the MAR correctly before administration. Upon debriefing of the situation, you recognized that one of the rights of medication administration was violated causing a safety breech that could have caused potential harm to your patient. Please be mindful to follow all rights of administration in the future to prevent this error in the process. Remember to write a comment on how you will prevent receiving a "U" in this competency in the future. KA
Week 4 – 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
Week 4 – 3r – You had the opportunity to complete FSBS screenings on your patient this week and documented the results in the necessary areas and utilized the findings to administer any sliding scale coverage insulin. KA

comment about week 4
Week 5- 3k-l- This experience helped me recognize the importance of slowing down and being fully intentional with each step of the medication administration process. I realized that when I move too quickly, I'm more likely to miss critical steps that are vital to patient safety. Going forward, I will organize my workflow before entering the room, verify each medication with the MAR in real time, and complete patient education before administering anything. I will also make sure I follow faculty instructions exactly and wait for supervision when required. My goal is to build consistency and confidence in my med admin skills so I can meet competency expectations and prevent these errors in the future. CV Great goal! Keep working hard to meet these goals and the next medication administration would be satisfactory if performed! MD

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: a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	S	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	S	S											
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	S	NA	NA											
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	S	S											
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	~~S~~ NA	NA	S											
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	S	NA	NA											
			HS	**KA**	**MD**												

****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	Week 3	HS
Patient Education: Identifying and Intervening on Knowledge Deficit		
Safety: Restorative Care and Managing Potential Complications		

Comments:

Week 3 (4a, b)- You did a nice job communicating with your patient and the primary nurse caring for him. You were also able to communicate with the other staff members including PCT's while answering call lights for other patients. (4e)- You satisfactorily met the requirements for the CDG post this week. You were able to find an article related to your patient and treatment and care of kidney stones. HS

Week 4 – 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
Week 4 – 4e – You chose to complete a care map this week versus completing a CDG therefore this competency is NA for the week. 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: **a. Describe a teaching need of your patient.**** (Reflecting)			S	S	NA	NA											
b. Utilize appropriate termino-logy and resources (Lexicomp, UpToDate, Dynamic Health, Skyscape) when providing patient education. (Responding)			S	S	NA	NA											
			HS	**KA**	**MD**												

****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:
1/21/2026

b. I found my patient this week to be well-educated on the needs related to his chief complaint. We discussed the importance of routine bladder screenings and meeting with a urologist to manage and treat his condition. We also talked about how vital it is that he has sufficient fluid intake in order to best prevent kidney stones from reoccurring. HS

b. I utilized skyscrape as my primary resource to find the preventative and treatment measures. Due to a procedure, my patient was on NPO; however, he was able to verbalize understanding of this information. Great job! HS

1/28/2026

a. My patient this week had left sided congestive heart failure, asthma, COPD, type 2 diabetes, and several other diagnonses. His o2 sat was low and being supported by supplemental oxygen. I educated my patient on the importance of deep breathing, coughing to clear secretions, and regularly using his incentive spirometer to improve lung function. I used clinical judgement and skyscape to help me verbalize this to the patient and he expressed understanding.

b. I used Nurse's Pocket Guide on Skyscape to look up appropriate nursing inventions and teaching materials. I also used Skyscape to educate my patient on his prescribed medications. Great job educating your patient this week. I am sure he appreciated the time you spent with him. I know he was very happy he was being discharged. KA

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)			NA	S	NA	NA											
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	NA	NA											
			HS	**KA**	**MD**												

****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:

1/21/2026

This week through my assessment, I found a social determinant to be related to be my patient's occupation. He has had issues with kidney stones chronically for the last ten years. Upon inquiring about his occupation, he told me he was employed at a factory job. I researched how this might have affected his condition. "Working in high-temperature environments (e.g., factories, farming, construction) increases fluid loss through perspiration, leading to dehydration and concentrated urine, which can cause stones" (Knauf et al., 2025).There is a potential that my patient had a decrease fluid intake, which may play a role in his impaired renal function.

Reference:

Knauf, F., Luft, F. C., Nath, K. A., et al. (2025). Shift work and the risk of kidney stones.
Mayo Clinic Proceedings, 100(10), 1693–1695.

Great job looking into the potential cause of his frequent kidney stones. Did he ever have his urine tested to determine what may be causing his kidney stones? HS

1/28/2026

My patient lives in a nursing home, which increases his risk for a sedentary lifestyle, infection, and potentially limited access to specialists and consistent health management. His family lives about an hour away, which may reduce his motivation to stay active and engaged. He is a non-smoker, but he previously served in the Air Force and worked as a firefighter for over 25 years, contributing to the development of multiple diagnoses later in life. He also has immediate family members with a history of myocardial infarction and colon cancer. Nice job looking at multiple SDOH factors that affect his overall ability to manage his health. KA

Week 4 – 6a – You satisfactorily completed your first care map. Please see the rubric at the end of your clinical tool for details. KA

Objective

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	S	S											
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S	S	S											
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	S	S	S											
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	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	S	S											
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		~~S~~ U	~~S~~ U	~~S~~ U	S											
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S	S	S											
h. Actively engage in self-reflection. (Reflecting)	S		S	S	S	S											
	SA		**HS**	**KA**	**MD**												

****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:

1/13/2026

a. My strengths this week included staying proactive in my studying and actively participating in both lecture and lab. I made sure to ask questions whenever I needed clarification. Great job! SA

b. An area I would like to improve is my approach to studying this semester's material. I plan to implement a variety of study strategies to enhance my retention and understanding of the content, such as study sheets, flash cards, and small study groups. Nice idea! Be sure to include how often you will work on improving your goals, nice job this week! SA

1/21/2026

a. This week I took the initiative to answer more call lights and pushed myself to become more involved on the unit. I was able to apply several skills I've learned in NF, including performing FSBS and hygiene care. During these tasks, I ensured that skin integrity was maintained by thoroughly cleaning the patient and changing soiled bedding and gowns. I left clinical feeling more confident in my improvements and more comfortable integrating myself into the workflow of the floor Great job answering call lights. Each experience will help expand your knowledge base and experience level. HS
b. *Needs improvement* I missed my second clinical day because my phone died and my alarm clock did not go off. I was extremely disappointed to miss out on that clinical experience. This situation taught me the importance of double-checking both my phone alarm and my physical alarm clock to make sure they are set and functioning. I plan to implement this moving forward to prevent the same mistake from happening again, and to demonstrate consistent professionalism. Great plan moving forward. HS

Week 3 (7f)- This competency was changed to a U because you did not submit the correct version of your clinical tool by the due dates.
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. HS

1/28/2026

a. I was happy with how I performed this week in clinicals. I had the same patient both days and was able to establish a more comprehensive view of his baseline and attitude. I utilized therapeutic communication to collect subjective data and help direct the flow of my patients care. I performed my head to toe, administer several medications and ask other nurses and PCT's if they needed any help with anything. You do a great job working with others and asking appropriate questions to help gain more knowledge to better care for your patients. KA
b. This week, I administered several medications, including insulin, to my patient. I struggled with scanning, educating, and administering the medications in a smooth and organized way. I accidentally removed some of the PO medications before scanning them into the MAR, but I was able to correct the issue with the help of my instructor. Moving forward, I plan to improve my organization by slowing down, staying intentional, and thinking through each step carefully, especially when handling patient medications. This is a great goal. I am glad you are able to recognize this as an area to work on. I know you can do this! KA

Week 4 – 7f – This competency is marked with a U because I could not locate where you addressed this U from last week. According to policy, "If the student does not state why the "U" is corrected, it will be another "U" until the student addresses it." You addressed all of your other U's so if I missed your comment for this one please let me know and I can correct your tool. If this was an oversight, please make sure to make a statement this week addressing this competency so you do not continue receiving a U. KA

Week 5- 7f. (Correction for Week 3- 4 unsatisfactory) Moving forward I will improve my professionalism by making sure that my assignments are ready to be submitted promptly at the due date. I will take time to double check my clinical tool to verify that I am using the correct document for the week. MD

2/06/2026

a. This week I was prepared, attentive, and teachable at each clinical experience. Excellent! MD
b. I would like to improve the way I am studying this week. I've noticed that I've been getting distracted while studying, so I plan to change my environment and my habits. To stay focused, I will study in a quiet place and keep my phone put away so I can eliminate distractions and stay engaged with the material. Great goal! MD

Week 5 IC/DH Objective 7 F-This week you submitted a handwritten IC Scavenger Hunt when it was to be typed. Please be sure to read the directions carefully with every assignment. Please respond with how you will prevent this in the future. MD

Week 6 (Correction for week 5- unsatisfactory) I submitted my IC Scavenger Hunt in the wrong format due to not thoroughly reading the requirements. I have resolved this by resubmitting the correct version typed on the provided document. This week, I exhibited professional behavior and timeliness in my clinical experience and thoroughly read clinical expectations prior to submission.

2/11/2026

a. I felt very good after this clinical experience at Erie County Senior Center. My classmates and I were able to connect new people and help the seniors have a great time with our activity. I believe we did a great job representing FRMCSN.
b. A general area of improvement for me to focus on would be my organizational skills. I have noticed that as the semester has progressed, I have struggled with my time management/keeping all of my responsibilities accounted for. I started utilizing a week by week calendar to physically write out my schedule. This has helped me in the past to stay organized and less stressed.

Student Name: Cassidy Verlie	**Course Objective:**	6. Implement patient-centered plans of care utilizing the nursing process, clinical judgment, and consideration for cultural, ethnic, and social diversity.
Date or Clinical Week: 4		

				(2,3,4,5)*			
	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	You did a nice job identifying abnormal assessment findings, labs/diagnostics, and risk factors for you patient this week. I would include the patient's fluid restriction under your assessment section. Outside of that you did a very thorough job. 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, but it does not encompass all aspects of the patient's excess fluid volume. Ex: "The patient will demonstrate improved fluid volume balance within 48 hours, as evidenced by clear lung sounds, decreased peripheral edema, and urine output of at least 30 mL/hr." You highlighted associated information from the noticing section. I would consider highlighting BNP and Troponin from the lab/diagnostics section as well. You identified 3 complication for your priority and signs and symptoms the nurse should assess the patient for. Under respiratory list the specific vital changes you would expect to see such as SpO2 <90%. Under Electrolyte imbalances list specific lab changes such as low potassium and low sodium. 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)**	2	
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, individualized, realistic, and included a rationale. For the medication intervention please make sure to differentiate between IV and PO medications and make sure to place a frequency for all medications in the future. Also, the last 3 interventions did not have frequencies. For collaboration you could state "at all times." For the 2 education interventions
	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**	2	
	12. All interventions are individualized and realistic	**> 75% complete**	**50-75% complete**	**< 50% complete**	**0% complete**	3	

							you could state “before discharge”, “on admission”, “daily”, or “as needed.” All of these options would be acceptable frequencies for education, Nice job on your interventions as a whole! KA

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 highlighted information from the noticing section. You stated the labs improved, but in the future list the actual values to show improvement. You identified you would continue the patient’s the plan of care. KA
	15. Evaluation includes one of the following statements: • 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 maps clearer, Overall you did a terrific job setting up this plan of care for your patient! KA**

Total Points: **43/45**

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: • 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
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< 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: Cassidy Verlie								
Skills Lab Competency Evaluation Performance Codes: **S**: Satisfactory **U**:Unsatisfactory	**Lab Skills**							
	Week 1	**Week 1**	**Week 1**	**Week 1**	**Week 1**	**Week 2**	**Week 2**	**Week 9**
	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: 1/8 or 1/9/26**	**Date: 1/8 or 1/9/26**	**Date: 1/9/26**	**Date: 1/14 or 1/15/26**	**Date: 1/14 or 1/15/26**	**Date: 3/9 or 3/10/26**
Evaluation:	**S**	**S**	**S**	**S**	**S**	**S**	**S**	
Faculty/Teaching Assistant Initials	SA	SA	SA	SA	SA	SA	SA	
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 1/8/2026. 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 returning the oxygen

to previous settings after hyper oxygenating the patient prior to leaving the room. Otherwise, no additional prompts were needed. During trach care, you were able to remind yourself about removing the inner cannula and soiled tracheostomy dressing prior to applying your sterile gloves. You were able to verbalize how to proceed in the process if this were to occur without contaminating supplies and satisfactorily remediated the process. You were efficient, confident, and communicated well with your "patient" throughout. Keep up the hard work! NS

(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: Cassidy Verlie					
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**	**HS**	**NA**
		DCE Score	88.9		
Date: 2/9/26	Shadow Health (Endocrine Hourly Rounds: Medical-Surgical) (*1, 2, 3, 4, 5, 6)	Scenario	**S**	**MD**	**NA**
		DCE Score	97.7		
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