EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2026

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Leah McNeely

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)
2/20/2026	1H	Didn't complete CD survery	2/20/2026 1H

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)**	S	S	S	S	NA	S	S	NA										
b. Assess comprehensively as indicated by patient needs and circumstances**. (Noticing)**	S	S	S	S	NA	S	S	NA										
c. Evaluate patient's response to nursing interventions. **(Reflecting)**	S	S	S	S	NA	S	S	NA										
d. Interpret cardiac rhythm; determine rate and measurements. **(Interpreting)**	S	S	S	NA	NA	S	S	NA										
e. Administer medications observing the seven rights of medication administration. **(Responding)**	S	S	S	S	NA	NA	S	NA										
f. Perform venipuncture skill with beginning dexterity and evidence of preparation. **(Responding)**	S	S	~~S~~ NA	S	NA	~~S~~ NA	S	NA										
g. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. **(Responding)**	S	S	S	S	NA	S	S	NA										
Faculty Initials	BS	CB	BL	AR	AR	AR												
Clinical Location	4C	4C	4P	IS & SP	NA	CD	4P	NA										

Comments:

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 2- 1a-e, g- You did a nice job this week caring for your patient(s), having been prepared and organized. Assessments were thorough and well done, and documented appropriately. You administered medications appropriately while observing the seven rights of medication administration. You had the opportunity to DC one of your patients' IVs. Nice work! BS

Week 3(1a-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

*End-of- Program Student Learning Outcomes

gained interpreting cardiac rhythms through observation and one on one discussion. You had a successful IV start, with proper technique, good job! Great job monitoring your patient closely to ensure positive patient outcomes. CB
Week 4-1(a-e,g) This week, you demonstrated strong clinical competence in effectively managing complex patient care situations. Your approach to patient care was well-organized, and you demonstrated effective time management skills. Your head-to-toe assessments were thorough and accurate. Medication administration (via numerous routes) was conducted safely and accurately, adhering to all rights of medication administration. Your attentiveness in closely monitoring your patient on 4P significantly contributed to promoting positive patient outcomes. Overall, excellent work! BL

Week 5 (1b,c,f)- Satisfactory during your Special Procedures clinical and with discussion via CDG posting. Preceptor comments: “Excellent in all areas. Nice job! Observed paracentesis, liver biopsy, fistulogram. Had some IV start practice.” (1c,f)- Satisfactory during your Infusion Center clinical and with discussion via CDG posting. Preceptor comments: “Excellent in all areas. Started one IV successfully; good job! Participated in patient education, observed nephron tube dressing changes and wound care.” Great job! AR

Week 7 (1b)- Satisfactory during Cardiac Diagnostics clinical and with discussion via CDG posting. Preceptor comments: “Excellent in all areas.” Great job. AR

*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)**	S	S	S	S	NA	S	S	NA										
b. Monitor for potential risks and anticipate possible early complications. **(Noticing, Interpreting, Responding)**	S	S	S	S	NA	S	S	NA										
c. Recognize changes in patient status and take appropriate action. **(Noticing, Interpreting, Responding)**	S	S	S	S	NA	S	S	NA										
d. Formulate a prioritized nursing plan of care utilizing clinical judgment skills. **(Noticing, Interpreting, Responding, Reflecting)** *	~~N/A~~ S	S	S	~~S~~ NA	NA	NA	S	NA										
e. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. **(Responding)**	S	S	S	S	NA	S	S	NA										
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	S	S	S	NA	S	S	NA										
Faculty Initials	BS	CB	BL	AR	AR	AR												

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

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

*End-of- Program Student Learning Outcomes

Comments:

Week 2; 2f – One social determinate of health with one of my patient's this week was she is a full-time employee of Firelands Hospital. This could affect her by possibly not wanting to seek medical treatment at her place of work due to confidentiality issues. Yes, that could get kind of awkward. BS
Week 2- 2a-f - You were able to correlate the relationships among your patients' disease processes, history and symptoms, and present condition utilizing your clinical judgment skills, and utilize that information to satisfactorily complete your pathophysiology CDG. You also did a nice job providing a prioritized list of nursing interventions for your patient. BS
Week 3; 2f – One social determinate of health with my patient this week was his insurance being Medicaid. I believe this is an important social determinate of health because he was only 63 years old, had a prior stroke, and was living in a nursing facility. There could be financial strain if he was not on this insurance due to his medical costs. Great example, Leah. Insurance plays a big role when it comes to individuals seeking healthcare needs and affording extensive care. CB
Week 3(2b,c,d,e): Excellent job utilizing your clinical judgement skills to formulate a prioritized plan of care for your patient this week. Please refer to the Care Map Rubric for my feedback. Great job recognizing changes in your patient this week and monitoring for risk/potential complications. CB
Week 4; 2f – One social determinate of health with my patient this week would be her minimal family support. While she did speak of her nephew and niece in law, it didn't seem like she had many other family or friends as a support system. With her major and chronic medical conditions, it is more likely that she will need to pay for care at home or require a nursing facility if recommended by health care professionals. Nice job recognizing the patient's lack of support as a potential concern. Limited support can negatively impact the patient's ability to manage their health, follow treatment plans, and cope with illness or recovery. Recognizing this allows you as the nurse to advocate for appropriate resources and referrals that can help improve the patient's outcome once discharged. BL
Week 5; 2f – One social determinate of health I saw with patient's this week was the lack of ability to work due to chronic illnesses such as cancer and dialysis. This can cause patients to have concerns about paying for medical treatment, getting to appointments and increase overall financial stress. These are huge stresses for patients. Great example. AR
Week 7; 2f – One social determinate of health that my patient today had was her access to health care. This patient lives in Willard and travels all the way to Firelands for treatment by the cardiologist. This could cause issues for her ability to receive health care as she ages which could cause her to not be able to drive this distance or have someone bring her to her scheduled appointments. Transportation concerns are common among our patients, and more so as they age. This is a good example to share and discuss. AR
Week 8; 2f – One social determinate of health for my patient this week would be her being considered disabled at the age of 65. This is a decently young age to be considered completely disabled and unable to work. This could cause financial strain due to no employment and increase in medical needs.

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)**	S	S	S	S	NA	S	S	NA										
b. Participate in QI, core measures, monitoring standards and documentation. **(Interpreting & Responding)**	S	S	S	S	NA	NA	S	NA										
c. Discuss strategies to achieve fiscal responsibility in clinical practice. **(Responding)**	S	S	S	S	NA	S	S	NA										
d. Clarify roles & accountability of team members related to delegation. **(Noticing)**	S	S	S	S	NA	S	S	NA										
e. Determine the priority patient from assigned patient population. **(Interpreting)** (**Patient Mgmt.**)	~~S~~ NA	NA	NA	NA	NA	NA	NA	NA										
Faculty Initials	BS	CB	BL	AR	AR	AR												

Comments:

Week 2- 3c- You did a good job remembering to scan your flushes when administering medications. BS

Week 3(3a-d): Satisfactory completion of the Quality Assurance/Core Measures cdg and activity. CB

Week 4-3(c) Excellent work this week demonstrating fiscal responsibility in your clinical practice. It's important to make thoughtful, cost-conscious decisions that support high-quality patient care. These are essential skills as you transition into professional practice. BL

Week 5 (3c)- Satisfactory discussion via CDG posting related to fiscal responsibility in the Infusion Center. Great job. AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*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	S	S	S	NA	S	S	NA										
b. Engage with patients and families to make autonomous decisions regarding healthcare. **(Responding)**	S	S	S	S	NA	S	S	NA										
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. **(Responding)**	S	S	S	S	NA	S	S	NA										
Faculty Initials	**BS**	**CB**	**BL**	**AR**	**AR**	**AR**												

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

Comments:

Week 2; 4a – One legal issue that would potentially become a problem was my one patient was an employee of the hospital. This has the possibility to become a patient confidentiality issue. Yes, very important to remember your professional responsibilities with regard to patient confidentiality. BS

Week 3; 4a – One ethical issue that I witnessed was the nursing speaking her opinion about organ donation in the patient's room. This could be an ethical issue because the last sense to go for the patient is the hearing and her opinion was against what the patient wanted. I agree Leah, there is a fine line when nurses start talking about what they think and how they feel. In this situation, discussing opinions is totally fine, but in the patient's room with the doctor was inappropriate. CB

Week 4; 4a – One legal issue that occurred this week during clinical was my patient's resuscitation decisions. There was a DNR that was revoked in her chart. She was ordered as a full code, but expressed that she didn't want to be. The nurse basically pushed off onto the day shift nurse to figure out if she was mentally competent to make that decision for herself. You identified a significant concern related to patient autonomy and end-of-life decision-making. When a patient expresses wishes that conflict with the documented code status, it is critical for the healthcare team to clarify goals of care rather than delaying or deferring the issue. It is the nurse's ethical responsibility to advocate for the patient and ensure that her expressed preferences are addressed in a timely and legally appropriate manner. BL

Week 4-4(b) You demonstrated excellent communication and interpersonal skills this week by actively engaging your patient in decision-making processes. Your ability to listen empathetically, provide clear information, and respect individual values supported patient autonomy and fostered trust. Keep up the great work! BL

Week 5; 4a – One legal issue that I witnessed during special procedures was the one nurse was managing discrepancies in medication counts from a prior procedure. This could be a large issue is medications like narcotics are missing or unaccounted for. Perfect example of a legal concern. Hopefully they were able to determine what happened quickly. Thank you for sharing. AR

Week 7; 4a – One legal issue that I witnessed during my clinical in the Cardiac diagnostics unit was my patient's nephew was a security officer at the hospital. I am unaware if he knew she was in the facility for her cardioversion prior but he was in the patient's room on multiple occasions even though he was working for the hospital at the time. This could cause legal issues if this patient did not want her family member knowing she was receiving treatment. Yes, this could be a concern if the security officer only knew they were there due to working at the hospital. Hopefully, in this case, the patient had told his nephew he would be there so the nephew could stop in while working. I find that very frequently, when a family member knows their relative or close friend will be working, they tell them and appreciate they stop in. AR

*End-of- Program Student Learning Outcomes

Week 8; 4a – One issue I witnessed this week could possibly be considered a legal and ethical issue would be my patient not receiving her feedings through her tube feeding. I found this very concerning because she was already diagnosed with malnutrition and had been without tube feedings since the 22nd. In addition, her blood glucose was 72 during her last lab draw, she wasn't scheduled for blood glucose checks or receiving any kind of IV medications to maintain her blood glucose. I believe that this could turn into a legal issue if she was to go unresponsive due to hypoglycemia and wasn't being monitor appropriately. This also could be an ethical issue to withhold nutrition from a patient for long periods of time.

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

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)**	S	S	S	S	NA	S	S	NA										
b. Demonstrate initiative in seeking new learning opportunities. **(Responding)**	S	S	S	S	NA	S	S	NA										
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. **(Interpreting)**	S	S	S	S	NA	S	S	NA										
d. Maintain the principles of asepsis and standard/infection control precautions **(Responding)**	S	S	S	S	NA	S	S	NA										
e. Practice use of standardized EBP tools that support safety and quality. **(Responding)**	S	S	S	S	NA	S	S	NA										
f. Utilize faculty, preceptor and mentor feedback to improve clinical performance. **(Responding & Reflecting)**	S	S	S	S	NA	S	S	NA										
Faculty Initials	**BS**	**CB**	**BL**	**AR**	**AR**	**AR**												

Comments:

Week 2- 5a,b,d- Great performance in the clinical setting this week, both with patient care and documentation. Hand hygiene observed at all times when entering and exiting patient rooms. BS

Week 3(5b,c,f): Excellent job working independently and taking initiative in completing nursing interventions for your patient. You are very organized and well prepared. You took excellent care of your patient this week. CB

Week 4-5(b) Great job this week demonstrating initiative and enthusiasm for learning. You actively sought out new learning opportunities, successfully practiced several skills for the first time in the clinical setting, and showed growing confidence and independence while carrying out nursing interventions. BL

*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)**	S	S	S	S	NA	S	S	NA										
b. Teach patients and families based on readiness to learn and discharge learning needs. **(Interpreting & Responding)**	S	S	S	S	NA	S	S	NA										
c. Collaborate and communicate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. **(Responding)**	S	S	S	S	NA	S	S	NA										
d. Deliver effective and concise hand-off reports. **(Responding)** *	N/A	S	~~NA~~ S	NA	NA	NA	NA	NA										
e. Document interventions and medication administration correctly in the electronic medical record. **(Responding)**	S	S	S	NA	NA	NA	S	NA										
f. Consistently and appropriately posts in clinical discussion groups. **(Responding and Reflecting)**	S	S	S	S	NA	S	S	NA										
Faculty Initials	BS	CB	BL	AR	AR	AR												

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

Comments:

Week 2- 6a-c, e,f- You did a good job interacting with patients and other members of the healthcare team. This is an important skill in healthcare. You also did a great job documenting interventions and medication administration. Nice work! BS

Week 3(6a,c,d,e,f): Great job this week collaborating with peers and members of the healthcare team, communicating needs to provide patient centered care. Great job delivering a thorough detailed hand-off report on your patient in debriefing, scoring 30/30 per the Hand-off grading rubric posted below. You did a great job thoroughly documenting your assessments and med administration. Satisfactory completion of your cdgs this week, per the cdg grading rubric. CB

*End-of- Program Student Learning Outcomes

Week 4-6(e) Excellent job with all of your documentation this week in clinical. Your documentation was done in a timely manner and accurate. 6(f) Satisfactory completion of your CDG this week. Just as a reminder, every reference listed should have a corresponding in-text citation within the body of your post. Your EBP article was included in the reference list; however, it was not cited within the text. Please be sure to add the appropriate in-text citations to ensure proper adherence to APA guidelines. BL
Week 5 (6c,f)- Satisfactory discussion via CDG posting related to the Infusion Center, along with Special Procedures. Keep up the good work. AR

Week 7 (6f)- Satisfactory CDG posting discussion related to your Cardiac Diagnostics clinical experience. Keep up the good work as you complete the semester. AR
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*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)**	S	S	S	S	NA	S	S	NA										
b. Accountable for investigating evidence-based practice to improve patient outcomes. **(Responding)**	S	S	S	S	NA	S	S	NA										
c. Comply with the FRMCSN *"Student Code of Conduct Policy."* **(Responding)**	S	S	S	S	NA	S	S	NA										
d. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions**.** **(Responding)**	S	S	S	S	NA	S	S	NA										
Faculty Initials	BS	CB	BL	AR	AR	AR												

Comments:

Week 2- 7d- An ACE attitude was displayed at all times while during the clinical experience. BS

Week 3(7d): Excellent job this week displaying a great ACE attitude during clinical. CB

Week 4-7(a,b) You researched and summarized an interesting EBP article in your CDG titled "A Clinical Prediction Model to Predict Heparin Treatment Outcomes and Provide Dosage Recommendations: Development and Validation Study." Excellent job! 7(d) Your positive attitude, strong sense of commitment, and genuine enthusiasm for nursing were evident in every interaction with your patient this week. These qualities not only enhance patient care but also contribute meaningfully to the clinical team. Keep up all your hard work! BL

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: Leah McNeely	**Course Objective:** Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care of diverse populations, evidence-based practice, and clinical judgment.
Date or Clinical Week: 1/20-1/21/2026	

	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	Great job listing all abnormal assessment findings and lab/diagnostic testing. The only assessment finding I would have included would be missing teeth, considering you have impaired dentition as a nursing priority. I would have also listed left BKA as a risk factor.
	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	The top priority problem was highlighted for your patient as well as all assessment findings in the noticing/recognizing cues boxes. Excellent job listing all related nursing priorities for your patient. You did a great job including a goal statement, potential complications related to your priority problem with s/sx of each.
	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)**	2	
	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**		Included interventions were prioritized, included a frequency and rationale that were appropriate for your patient, and were individualized. Interventions that could have been included would be administering tube feedings and educating the family on LifeBanc and what is all involved.
	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**		Excellent job reassessing all highlighted findings related to your top nursing priority problem. You included to continue the plan of care, which is appropriate.
	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: **Leah, great job completing a Satisfactory nursing care map on your patient this week! CB**

Total Points:
42/45

Faculty/Teaching Assistant Initials:
CB

*End-of- Program Student Learning Outcomes

Care Map Evaluation Tool**
AMSN
2026

Date	Nursing Priority Problem	Evaluation & Instructor Initials	Remediation & Instructor Initials
1/20-1/21-2026	Impaired Gas Exchange	S/CB	NA

** 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: L. McNeely **Clinical Date: 1/13-1/14/2026**

1. Provide a description of your patient including current diagnosis and past medical history. (4 points total) • Current Diagnosis (2) • Past Medical History (2)	**Total Points: 4** **Comments:** Nice job providing a description of your patient's current diagnosis and past medical history. BS
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)	**Total Points: 6** **Comments:** Great job describing the pathophysiology of your patient's medical diagnoses. BS
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (6 points total) • All patient's signs and symptoms included (2) • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (2) • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (2)	**Total Points: 6** **Comments:** All signs and symptoms included and correctly correlated to the patient's diagnosis. Great job identifying the signs and symptoms that are typically associated with a NSTEMI as well. BS
4. Correlate the patient's current diagnosis with all related labs. (12 points total) • All patient's relevant lab result values included (3) (1) • Rationale provided for each lab test performed (3) • Explanation provided of what a normal lab result should be in the absence of current diagnosis (3) • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (3)	**Total Points: 10** **Comments:** What you provided was well done. Several important labs not provided (lactic acid, platelets, ABGs, BUN, creatinine, NA, K+, PT, INR, D-Dimer). BS
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) • Rationale provided for each diagnostic test performed (3) • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (3) • Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (3)	**Total Points: 12** **Comments:** All relevant diagnostic tests and results included with rationales. Detailed explanation provided related to how the results correlate with the patient's current diagnosis. BS
6. Correlate the patient's current diagnosis with all related medications. (9 points total)	**Total Points: 7** **Comments:** Nice job listing the patient's medications

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• All related medications included (3) (1) • Rationale provided for the use of each medication (3) • Explanation of how each of the patient's relevant medications correlate with current diagnosis (3)	with appropriate rationale and correlation to the current diagnosis. Aspirin, Levothyroxine, and Metoprolol omitted. BS
7. Correlate the patient's current diagnosis with all pertinent past medical history. (4 points total) • All pertinent past medical history included (2) • Explanation of how patient's pertinent past medical history correlates with current diagnosis (2)	**Total Points: 4** **Comments:** Patient's pertinent past medical history and family history is correctly correlated to the current diagnosis. BS
8. Prioritize nursing interventions related to current diagnosis. (6 points total) • All nursing interventions provided for patient prioritized and rationales provided (6)	**Total Points: 6** **Comments:** Nice job providing a prioritized list of nursing interventions. BS
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) • Explains how each current interdisciplinary team member contributes to positive patient outcomes (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) (0)	**Total Points: 4** **Comments:** Good job identifying the members of the interdisciplinary team and their roles in the care of your patient. Another member would be the hospitalist. No additional team members mentioned. (I would suggest maybe PT/OT, home health.)
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: 59/65** **Comments:** Satisfactory completion of your pathophysiology assignment. Nice work! BS

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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: ____Leah McNeely_____ **Date**: _____1/21/2026_____

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	5
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 explain CT ordered. Includes patient	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

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	teaching provided.			
			TOTAL POINTS	30/30

Faculty Comments: _____Leah, great job giving a thorough and detailed hand-off report on your patient this week. _____

Faculty Signature:__Chandra Barnes, MSN, RN_____Date: ____1/21/2026_____

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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	S	AR	NA
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:

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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	FB/CB/ BS/BL	AR	CB	BS/DW	BS	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

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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

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