

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Medical Surgical Nursing – 2019**

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

**Student:** CAROLYN R LYNCH

**Final Grade:** Satisfactory/Unsatisfactory

**Semester:** Spring

**Date of Completion:**

**Faculty:** Dawn Wikel, MSN, RN, CNE; Kelly Ammanniti, MSN, RN; Lora Malfara, MSN, RN

**Faculty eSignature:**

**Teaching Assistant:** Devon Cutnaw, BSN, RN; Monica Dunbar, BSN, RN;  
 Nick Simonovich, BSN, RN; Liz Woodyard, BSN, RN, CRN

**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 on the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a “S, NI, or U”. 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, the following week it must be addressed with a comment as to why it is no longer a “U”. If the student does not state why the “U” is corrected, then it will be another “U” until the student addresses it. All clinical competencies are critical to meeting the objectives of the course. If the final performance code is unsatisfactory in any one of the competencies, a grade of unsatisfactory is given. If a pattern of unsatisfactory performance occurs after performing the competency satisfactorily, this also constitutes a grade of unsatisfactory. An unsatisfactory as a final score in any single competency results in a clinical course grade of unsatisfactory; this is a failure of the course. 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, Debriefing, & Reflection Journals
- Nursing Care Plan Rubric
- Meditech Documentation
- Clinical Debriefing
- Clinical Discussion Group Grading Rubric
- Evaluation of Clinical Performance Tool
- Lasater’s Clinical Judgment Rubric & Scoring Sheet
- Virtual Simulation Scenarios

**ABSENCE (Refer to Attendance Policy)**

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

Faculty’s Name	Initials
Kelly Ammanniti	KA
Devon Cutnaw	DC
Monica Dunbar	MD
Lora Malfara	LM
Nick Simonovich	NS
Dawn Wikel	DW
Liz Woodyard	EW

**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 instructor 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 member’s initials.**

Date	Care Plan Diagnosis	Evaluation & Instructor Initials	Remediation & Instructor Initials	Remediation & Instructor Initials
1/28/19	Ineffective Airway Clearance	NI DC		

Note: Students are required to submit two satisfactory care plans over the course of the semester. If the care plan is not evaluated as satisfactory upon initial submission, the student may revise the care plan based on instructor feedback/remediation and resubmit until satisfactory. At least one care plan 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	14	Make Up	Make Up	Final
<b>Competencies:</b>			S	NA														
a. Analyze the involved patho-physiology of the patient's disease process. (Interpreting)			S	NA														
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	NA														
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	NA														
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	NA														
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	NA														
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	NA														
g. Assess developmental stages of assigned patients. (Interpreting)			S	NA														
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	NA														
	Indicate your clinical site as well as your patient's age and primary medical diagnosis in this box weekly.	Meditech, FSBS, D/C IV, IV Pump Sessions		3N														
	Instructors Initials	MD	MD	DC														

**Comments:**

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Wk 3 - E – You were able to explain the reasoning for the patient’s medications and to communicate to need to the patient and their spouse. DCDC**

**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	14	Make Up	Make Up	Final
<b>Competencies:</b>			S	NA														
a. Perform inspection, palpation, percussion, and auscultation in the physical assessment of assigned patient. (Responding)			S	NA														
b. Conduct a fall assessment and implement appropriate precautions. (Responding)			S	NA														
c. Conduct a skin risk assessment and implement appropriate precautions and care. (Responding)			S	NA														
d. Communicate physical assessment. (Responding)			SS	NA														
e. Analyze appropriate assessment skills for the patient's disease process. (Interpreting)			S	NA														
f. Demonstrate skill in accessing electronic information and documenting patient care. (Responding)	S		S	NA														
	<b>MD</b>	<b>MD</b>	<b>DC</b>															

**Comments:**

Week 1 (2f)- By attending the meditech clinical update & providing your full, undivided attention during the demonstration of documenting insulin, IV solutions, saline flushes and IV site assessments you are satisfactory for this competency. NS

Wk 3 - F – Continue to improve in your documentation. If you see an intervention which you are not familiar, please approach a clinical instructor to determine if it is an appropriate intervention for you to document - DC

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**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	14	Make Up	Make Up	Final
<b>Competencies:</b>	S		S	NA														
a. Perform standard precautions. (Responding)	S		S	NA														
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	NA														
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			S	NA														
d. Appropriately prioritizes nursing care. (Responding)			S	NA														
e. Recognize the need for assistance. (Interpreting)			S	NA														
f. Apply the principles of asepsis where indicated. (Responding)	S		NA	NA														
g. Manages a patient in physical restraints according to hospital policy. (Responding)			NA	NA														
h. Implement the appropriate DVT prophylaxis interventions based on assessment and physicians orders. (Responding)			NA	NA														
i. Identify the role of evidence in determining best nursing practice. (Interpreting)			S	NA														
j. Identify recommendations for change through team collaboration. (Interpreting)			S	NA														
	<b>MD</b>	<b>MD</b>	<b>DC</b>															

**Comments:**

\*End-of-Program Student Learning Outcomes  
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

## 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	14	Make Up	Make Up	Final
<b>Competencies:</b>			S	NA														
k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			S	NA														
l. Calculate medication doses accurately. (Responding)			S	NA														
m. Administer IV therapy, piggybacks and/or adding solution to a continuous infusion line. (Responding)			NA	NA														
n. Regulate IV flow rate. (Responding)	S		NA	NA														
o. Flush saline lock. (Responding)			NA	NA														
p. D/C an IV. (Responding)	S		NA	NA														
q. Monitor an IV. (Responding)			S	NA														
r. Perform tracheostomy care. (Responding)			NA	NA														
s. Perform FSBS with appropriate interventions. (Responding)	S		NA	NA														
	<b>MD</b>	<b>MD</b>	<b>DC</b>															

### Comments:

Week 1 (3p)- By attending the D/C IV clinical and providing your full, undivided attention during the demonstration of both the Alaris pump, documentation of IV site maintenance and discontinuing a peripheral IV you are satisfactory for this competency. NS/EW (3s)-The student was able to demonstrate understanding of the rationale of FSBS and the use of the glucometer. The student was able to perform a Quality Control check of the glucometer as well as demonstrate skills and knowledge required of proper sample ID, collection and handling of blood. LM/DC  
 Wk 3 – K – Continue to improve in your usage of the Pyxis. DC

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**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	14	Make Up	Make Up	Final
<b>Competencies:</b>			S	NA														
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	NA														
b. Communicate professionally and collaboratively with members of the healthcare team. (Responding)			S	NA														
c. Report promptly and accurately any change in the status of the patient. (Responding)			S	NA														
d. Maintain confidentiality of patient health and medical information. (Responding)			S	NA														
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	NA														
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			S	NA														
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			S	NA														
	MD	MD	DC															

**Comments:**

\*End-of-Program Student Learning Outcomes  
Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**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	14	Make Up	Make Up	Final
<b>Competencies:</b>			S	NA														
a. Describe a teaching need of your patient.** (Reflecting)			S	NA														
b. Utilize appropriate terminology and resources when providing patient education. (Responding)			S	NA														
c. Evaluate health-related information on the intranet. (Responding)			S	NA														
	MD	MD	DC															

**\*\*5a- You must address this competency in the comments on a weekly basis. For clinicals on 3T, 3N, 4N, or Rehab- describe the patient education you provided; be specific. For clinicals on alternative sites- describe a teaching need you identified.**

**Comments:**

Wk 3 - Education regarding the need for proper peri care was provided several times to this patient due to her risk of infection related to foley insertion. Education was also given to the patient regarding her albuterol inhaler and proper breathing to avoid further respiratory complications. **You did a good job with this education, especially since both she and her husband followed through with your instructions! DC**

\*End-of-Program Student Learning Outcomes  
 Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Objective**

6. Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)\*

Weeks of the Course	1	2	3	4	5	6	7	8	Midterm	9	10	11	12	13	14	Make Up	Make Up	Final
a. Develop and implement a priority care plan utilizing the nursing process and clinical judgment. (Noticing, Interpreting, Responding, Reflecting)			S-NI	S														
b. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)																		
	MD	MD	DC															

**Comments:**

See Care Plan Grading Rubrics below.

Week 8- See Simulation Scoring Sheet below.

Week 13- See Simulation Scoring Sheet below.

Carolyn Lynch

Nursing Care Plan 1-24-2019

**Nursing Diagnosis: Ineffective airway clearance r/t COPD**

**AEB:**

- Wheezing throughout anterior lung sounds
- Wheezing throughout posterior lung sounds
- Shallow, laborious breathing while at rest

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

- Dyspnea on exertion
- SpO2 92% on 3L NC
- Decreased energy/fatigue
- Loss of appetite

## **Patient Outcomes**

**: Patient will experience a clear airway by discharge**

### **AEB:**

- Clear respirations throughout anterior lung sounds
- Clear respirations throughout posterior lung sounds
- Normal, non-laborious breathing while at rest
- SpO2 >94% on 3L NC
- Increased energy/less fatigue
- Increase in appetite

## **Related interventions**

- Auscultate lung sounds anteriorly and posteriorly q2 hrs. (0700,0900,1100 etc)-to determine respiratory distress or accumulation of secretions.
- Assess vital signs q4 hrs (0700,1100, 1500 etc) -to monitor for infection, respiratory distress, increase or decrease in blood pressure/heart rate)
- Assess SpO2 q2 hrs (0700, 0900, 1100 etc)-to determine if oxygen saturation is adequate and to avoid hypoxia
- Administer medications as indicated on MAR. (expectorant, bronchodilators) q4 hrs.

**Budesonide 0.5 mg. inhalation BID (900, 1600)**

**Guaifenesin 1,200mg PO BID (900, 1600)**

**Ipratropium Bromide 0.5mg inhalation QID (2000)**

-to mobilize secretions and open bronchial airways

- Administer albuterol medication 2.5mg. inhalation prn -on exertion or onset of acute respiratory distress  
-to avoid an increase in respiratory exacerbation by opening the airway

- Administer O2 via nasal canula 3L QID 24 hrs.  
-to avoid SpO2 <94% and hypoxia and help with exertion during ADL's
- Encourage deep breathing exercises q2 hrs (0700, 0900, 1100 etc)  
-to avoid atelectasis and maintain SpO2.>94%
- Education on correct usage of albuterol inhaler q shift (teach back) (0700, 1500 etc.) **by receiving order from the doctor and reviewing by teachback that the pt and spouse understand before discharge.**  
-to ensure proper usage will be used upon discharge
- Education on daily inhaler treatment (teach back) QD (2000) **by reviewing with pt and spouse the prescription and teach back initiated.**  
-to ensure proper usage of daily treatment upon discharge.
- Encourage ambulating and slight exercise TID (1100, 1600, 1900)  
-to prevent atelectasis and other respiratory issues
- Encourage Heart Healthy diet TID (0800, 1300, 1800)**and retrieving material from Intranet on good food choices**  
-to assist with weight loss and increase diaphragmatic breathing

(Doenges, Moorhouse, & Murr, 2016)

## Evaluation 1-24-2018

Partially Met

AEB:

- Auscultated clear lung sounds anteriorly throughout
- Slight wheezing auscultated bilaterally posterior bases of lungs.
- Normal, non-laborious breathing at rest
- Dyspnea remains during exertion

- Energy has increased
- Increase in appetite

### **Continue Plan of Care**

Carolyn R. Lynch, SN FRMC  
1-24-2018

### **References**

Doenges, M.E. Moorhouse, M.f., & Murr, A.C. (2016). *Nurses' pocket guide: Diagnoses, prioritized interventions, and rationales* (14<sup>th</sup> ed). F.A. Davis Company: Skyscape Medpresso, Inc.

<b>Objective # 6a:</b> Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)*	<b>Students Name:</b> Carolyn Lynch <b>Date:</b> 1/28/19
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	<b>Nursing Diagnosis:</b> : <b>Ineffective airway clearance</b>
Nursing Diagnosis: (3 points total) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points :3 Comments:
Goal and Outcome (6 points total) Goal Statement (1) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points :4 Comments:  Time frame not listed. Please list "AEB" after the outcomes.
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points:7 Comments:  Include more about your education interventions as this will help to promote outcomes after discharge.
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)	Total Points:3 Comments: Date not listed. If goal is partially met, plan should not be terminated.
Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan ≤ 13 = Unsatisfactory care plan	Total Points for entire care plan = 17 Comments: Please revise care plan and see me for any additional information/help. DC



<b>Objective # 6a:</b> Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)*	<b>Students Name:</b>  <b>Date:</b>
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	<b>Nursing Diagnosis:</b>
Nursing Diagnosis: (3 points total) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points Comments:
Goal and Outcome (6 points total) Goal Statement (1) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points Comments:
Nursing Interventions: (8 points total) Prioritized (1) What (1) How Often (1) When (1) Individualized (1) Realistic (1) Rationale (1) All pertinent interventions listed (1)	Total Points Comments:
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue/terminate (1) Signature (1)	Total Points Comments:
Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan ≤ 13 = Unsatisfactory care plan	Total Points for entire care plan =  Comments:

**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	14	Make Up	Make Up	Final
a. Reflect on an area of strength. ** (Reflecting)	S		S	S														
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		S	S														
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		S	NI														
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	S														
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		S	S														
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	S														
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	S														
h. Actively engage in self-reflection. (Reflecting)	S		S	S														
	MD	MD	DC															

**\*\*7a and 7b: You must address these competencies in the comments section on a weekly basis. 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:**

7A. An area of strength for me this week was the IV math. I thought it would be difficult, but once we were taught-I found it quite fun. I practiced and practiced and helped another student work on hers.  
 7B. An area of weakness was receiving report. When Nick gave us report, I was scribbling everywhere and getting flustered because I couldn’t find where to put the details. This caused me to miss some things that were said. I will practice with another student on getting report and familiarize myself more with the report sheet.  
 Week 1 (7 A and B) Great job with the math portion this week! I am glad you found it quite fun! Receiving report takes time to learn. I am glad you will practice this skill. MD  
 Week 3 (7A-B) Areas of strengths included educating the patient and family on prevention of exacerbation of her COPD and other respiratory issues. An area to work on would be my charting. When I thought I was done charting, it was time to do another charting. In between working with the patient, passing their meds and remembering to be compliant in charting on time will be something I work on for my next clinical.

\*End-of-Program Student Learning Outcomes

Good job Carolyn. Charting and time management are areas that all nurses continue to improve upon. Don't hesitate to ask for help in areas of time management - there are many different ways to improve this skill.  
DC

Week 4: Studying habits are improving as I have eliminated some interruptions. Areas of improvement are that I second guess myself when answering questions on quizzes and tests and this resulted in me getting a D on the quizzes this semester so far. I know the material but review when I am done to make sure I filled in the correct "bubble" and change answers. I need to make sure I select the correct answer and then just move on. I also need improvement in my Nursing Care plans and have corrected to the best of my ability and have inserted it into the clinical tool for this week.

Firelands Regional Medical Center School of Nursing  
**Medical Surgical Nursing 2019**  
**Skills Lab Competency Tool**

<b>Skills Lab Competency Evaluation</b>	<b>Lab Skills</b>							
	<b>Week 1</b>	<b>Week 1</b>	<b>Week 1</b>	<b>Week 1</b>	<b>Week 1</b>	<b>Week 2</b>	<b>Week 3</b>	<b>Week 10</b>
Performance Codes: <b>S:</b> Satisfactory <b>U:</b> Unsatisfactory	<b>IV Math</b> (3,7)*	<b>Assessment</b> (2,3,4,5,7)*	<b>Insulin</b> (2,3,5,7)*	<b>Lab Day</b> (1,2,3,4,5,6,7)*	<b>IV Skills</b> (2,3,5,7)*	<b>Trach</b> (1,2,3,4,5,6,7)*	<b>EBP</b> (3,7)*	<b>Lab Day</b> (1,2,3,4,5,6,7)*
	<b>Date:</b> 1/7 & 1/9/19	<b>Date:</b> 1/8/19	<b>Date:</b> 1/8/19	<b>Date:</b> 1/10/19	<b>Date:</b> 1/11/19	<b>Date:</b> 1/16/19	<b>Date:</b> 1/22/19	<b>Date:</b> 3/22/19
Evaluation:	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	<b>S</b>	
Instructor Initials	<b>MD</b>	<b>MD</b>	<b>MD</b>	<b>MD</b>	<b>MD</b>	<b>MD</b>	<b>DC</b>	
<b>Remediation: Date/Evaluation/Initials</b>								

\*Course Objectives

**Comments:**

**Week 1**

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/7/19 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/9/19. KA

(Assessment)- You were able to satisfactorily demonstrate the Basic Head to Toe Assessment during lab. EW/KA/DW

(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. DW

(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 maintenance, patient mobility and hygiene, use of PPE for Contact Isolation, wound care, and foley insertion. NS/LM/EW/MD/DC

(IV Skills)- You have satisfactorily completed IV lab including a saline flush, hanging a primary and secondary IV solution, adjusting a flow rate to run by gravity, discontinuing IV solution, and monitoring the IV site for infiltration, phlebitis, and signs of complication. NS/EW

Week 3 Trach Care and Suctioning- During this lab, you were able to satisfactorily demonstrate competence with tracheostomy care and tracheostomy suctioning. The steps were completed in an appropriate sequence and sterility was maintained. You required 0 prompts and were able to identify a single break in sterility and correct immediately. Great job! KA

Week 3 EBP Lab- During this lab, you were able to satisfactorily demonstrate 3 different routes to search for evidence-based nursing journals via the internet. You were attentive and actively participated. DW



Firelands Regional Medical Center School of Nursing  
 Medical Surgical Nursing 2019  
 Simulation Evaluations

<b>vSim Evaluation</b>	<b>vSim</b>						
	ical-Surgical) Vincent Brody	)Juan Carlos (Pharmacology)	ical-Surgical) Marilyn Hughes	Vernon Russell *1, 2, 3, 4, 5, 6) (Fundamentals)	ical-Surgical) Stan Checketts	Harry Hadley 1, 2, 3, 4, 5, 6) (Pharmacology)	4, 5, 6)(Pharmacology) Yoa Li
	<b>Date:</b> 1/28/19	<b>Date:</b> 2/12/19	<b>Date:</b> 2/25/19	<b>Date:</b> 3/26/19	<b>Date:</b> 4/15/19	<b>Date:</b> 4/25/19	<b>Date:</b> 4/29/19
Performance Codes:  S: Satisfactory  U: Unsatisfactory							
Evaluation							
Faculty Initials							
<b>Remediation:</b> <b>Date/Evaluation/Initials</b>							

\* Course Objectives

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Medical Surgical Nursing – 2019**

**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:

I included my Nursing Care plan on the page associated with it instead of separately d/t feedback from another student. If this is not where you want the Care plan, will you let me know and I can send a separate attached it to my dropbox?  
Thanks for your time this week.

Student eSignature and Date:

dw 1/3/19