

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

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

**Student:** RJ Dante

**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
1/24/19	Acute pain r/t disease process	S KA		

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		31, 35 year old male, UTI/Acute Pain														
Instructors Initials	KA	KA	KA															

**Comments:**

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**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)			S	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														
	KA	KA	KA															

**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

Week 3 – 2d – You did a great job thoroughly assessing your patient and communicating any abnormal findings to your assigned RN. KA

\*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		S	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	S														
j. Identify recommendations for change through team collaboration. (Interpreting)			NA	NA														
	KA	KA	KA															

**Comments:**

Week 3 – 3i – You did a nice job choosing an appropriate EBP article and discussing how it associated to nursing as well as your patient. KA

\*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)			NA S	NA														
r. Perform tracheostomy care. (Responding)			NA	NA														
s. Perform FSBS with appropriate interventions. (Responding)	S		NA	NA														
	KA	KA	KA															

### 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

Week 3 – 3k – You did a nice try observing the rights of medication and documenting appropriately in the MAR. KA

Week 3 – 3q – You did a great job assessing your patient’s IV site and documenting findings appropriately. KA

\*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	S														
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														
	KA	KA	KA															

### Comments:

Week 3 – 4a – RJ, you did a nice job communicating with your patient and developing a good rapport with him and his family. You did a terrific job advocating for your patient and helping him receive great care. KA

Week 3 – 4e – RJ, you did a great job posting comments to the CDG questions thoroughly and thoughtfully. You were respectful when responding to your classmates. KA

\*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>																		
a. Describe a teaching need of your patient.** (Reflecting)			S	S														
b. Utilize appropriate terminology and resources when providing patient education. (Responding)			S	NA														
c. Evaluate health-related information on the intranet. (Responding)			NA	NA														
	KA	KA	KA															

**\*\*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:**

Objective 5 (A) = I talked to my patient regarding on keeping his straight catheter as clean as possible. It was brought to my attention by the nurse about how he does not keep his catheter as clean as he should have. I slowly eased in asking my patient about this and he said it was hard due to his job but he said he does pretty good at home. I mentioned that keeping it as clean as possible will reduce the occurrence of UTI. **Great job with educating your patient. This is a great point to focus on for him. You were not judgmental in anyway and provided important information to help prevent this in the future for him. KA**

Objective 5 (A) Week 4 = I educated the patient about the benefits of sitting upright. Sitting in a upright position makes the lungs function easier. This is also a good position for one to be able to auscultate the lung sounds.

\*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	S														
b. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)																		
	KA	KA	KA															

**Comments:**

See Care Plan Grading Rubrics below.

Week 8- See Simulation Scoring Sheet below.

Week 13- See Simulation Scoring Sheet below.

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

Objective # 6a: Implement patient-centered plans of care utilizing the nursing process and clinical judgment. (2,3,4,5)*	Students Name: RJ Dante Date: 1/24/19
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	Nursing Diagnosis: Acute Pain r/t disease process
Nursing Diagnosis: (3 points total) Problem Statement (1) 1 Etiology (1) 1 Defining Characteristics (1) 1	Total Points 3 Comments: Nice job writing your nursing diagnosis. Your patient had both acute and chronic pain. You did a nice job focusing on your patient's acute pain and did not use any defining characteristics associated with his chronic pain which can be difficult. KA
Goal and Outcome (6 points total) Goal Statement (1) 1 Outcome: Specific (1) 1 Measurable (1) 1 Attainable (1) 1 Realistic (1) 1 Time Frame (1) 1	Total Points 6 Comments: RJ nice job on the goals section. Check your care plan for comments on how to improve the verbiage of some of the outcomes. KA
Nursing Interventions: (8 points total) Prioritized (1) 1 What (1) 1 How Often (1) 1 When (1) 1 Individualized (1) 1 Realistic (1) 1 Rationale (1) 1 All pertinent interventions listed (1) 0	Total Points 7 Comments: RJ, you did a nice job writing your interventions. Remember to include all necessary interventions. Please see comments on care map for additional areas where wording could improve to make intervention more clear. KA
Evaluation: (5 points total) Date (1) 1 Goal Met/partially/unmet (1) 1 Defining characteristics (1) 1 Plan to continue/terminate (1) 1 Signature (1) 1	Total Points 5 Comments: RJ, you did a nice job completing the evaluation section of your care plan. KA
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 = 21 Comments: RJ, you did a nice job on your care plan. See the comments on your care plan for areas to improve in the future. You satisfactorily completed your care. KA



<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	NA														
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	NA														
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		S	NA														
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	NA														
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	NA														
h. Actively engage in self-reflection. (Reflecting)	S		S	NA														
	KA	KA	KA															

**\*\*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:**

**Week 1 Objective (A) = I believe my strength during this clinical was my ability to perform the skill that is needed to operate the glucometer. I have never operated one before and only seen the orderly’s do it during my clinical is the only time I have seen the machine. With that said I believe I was able to operate it fairly well with no problems especially seeing how my other classmates did. Great job! I am glad this was a skill you were able to pick up and demonstrate easily. KA**

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

**Week 1 Objective (B) = My weakness during this clinical setting up the drip rate. Even though the skill was fairly easy to do, not having experience with this made it hard. To improve in this area I will review all the steps that is needed to get a accurate drip rate, on top of this if given the opportunity I will set 3 different drip rates before my clinicals at the hospital in week 3. Good plan This will be something you could practice during any scheduled open labs this semester if you wish. KA**

**Week 3 Objective (A) = I believe my strength during this clinical was my ability to have my patient “feel cared for”. I say this as he mentioned that he felt like he was not getting the best care. I was an advocate for him and let my instructor know about this and she was able to have a cleaning lead clean his room as this was not done since he was admitted. On top of this, he felt comfortable enough that he started talking to me about his personal life and business (work). RJ, you did a terrific job advocating for your patient to the best of your abilities. Great job! KA**

**Week 3 Objective (B) = I say my weakness during this clinical was my documentation. Even though I believed I did a great job during this clinical, I have missed some things for example documenting what kind of scale I used to measure his pain. In order to fix this weakness, I will make sure that I will go to the computer lab and have at least 3 mini session going on meditech (test) to practice documentation so I will not make that mistake again. This sounds like a good plan. Documentation is something that will get easier with time and practice. KA**

Week 4 Objective (A) = My strength during this clinical was my knowledge base on the medication. As I reviewed the medication list given to us during orientation and studying it for the class and pharmacology quiz on respiratory. I was instantly able to identify the medication orders and what they do. I say this is a strength as if I did not know what they were I would have to spend additional time looking up everything I can find out about it but by being readily prepared I did not have to do this.

Week 4 Objective (B) = My weakness during this clinical was my ability to give medication specifically methylprednisolone. I say this as I was supposed to give this medicine to the patient over a period of time which I did not. To make up for this weakness I will read at least 2 EBP articles regarding why making sure to look up and follow guidelines of IV push. I will do this before my next clinical.

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	KA	KA	KA	KA	KA	KA	KA	
<b>Remediation: Date/Evaluation/Initials</b>	NA	NA	NA	NA	NA	NA	NA	

\*Course Objectives

**Comments:**

**Week 1**

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/7/19 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 2 Trach Care & 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 one prompt to remember to don sterile gloves after removing the inner canula. Otherwise, well done. EL

Week 3 EBP Lab- During this lab, you were able to satisfactorily demonstrate three 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)	cal-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:

Student eSignature and Date:

-

dw 1/3/19