

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

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

**Student:**

**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
<b>Kelly Ammanniti</b>	<b>KA</b>
<b>Devon Cutnaw</b>	<b>DC</b>
<b>Monica Dunbar</b>	<b>MD</b>
<b>Lora Malfara</b>	<b>LM</b>
<b>Nick Simonovich</b>	<b>NS</b>
<b>Dawn Wikel</b>	<b>DW</b>
<b>Liz Woodyard</b>	<b>EW</b>

**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	<b>Ineffective airway clearance r/t infection within the lungs</b>	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		3I, 85 F, Difficulty Breathing, Pneumonia														
	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)			S	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. I could not find where the method for the article was clearly stated. Please make sure to state this when discussing your article in the future. 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		S	NA														
q. Monitor an IV. (Responding)			S	NA														
r. Perform tracheostomy care. (Responding)			NA	NA														
s. Perform FSBS with appropriate interventions. (Responding)	S		S	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 – 3p – Liz, you did a nice job DCing an IV this week. Removing the tape is always the hard part. You did a nice job explaining everything to the patient and performing the skill with accuracy. KA

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 3 – Week 3 – 3q – You did a terrific job assessing your patient’s IV site and documenting findings appropriately. It is unfortunate that it was infiltrated on the second day and we were unable to pass the patient’s IV medications. KA

**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 – Liz, you did a great job developing a rapport with your patient and her family this week. You had a patient who was difficult to understand and by the second day you understood her very well and was able to help her communicate better with others who did not understand her. KA

Week 3 – 4e –Liz, you did a nice job posting comments to the CDG with great thought. You were thorough and 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>			S	S														
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)			S	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:

#### Week 3:

Objective 5a- This week I taught my patient the importance of fall precautions. The first day during her assessment, she told me she has fallen within the past week at home and she can only get around with the use of her walker. She also was weak and had a low Hgb that could contribute to her chances of falling. I initiated the fall precautions and placed a wristband on the patient. I also hung a sign outside the door, and above the bed and notified the nurse. The patient was questioning me as to why I was doing this and I explained to her that this was just a precaution. After explaining to her my reasoning and reassuring her that she can not get up on her own, she agreed with me and had no problem asking for assistance when needed. *Liz, nice job educating your patient on the importance of fall precautions. KA*

#### Week 4:

I explained the teaching need to my V Sim patient this week. My patient was admitted to the ER with signs of hypoglycemia. After assessing the patient and administering the proper interventions, the patient was able to listen to my concerns. I provided education to the patient about how to manage type 1 diabetes and things to do to prevent his sugars from getting too low. The patient should always have carbs or sugar or even Glucagon on hand at all times for a crisis and also count carbs throughout the day to provide your body with the proper nutrients and insulin medication. The patient understood and learned from his mistake.

\*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.

**Week 3: Nursing Care Plan**

**Date and Initials:**

January 23, 2019

E. Gast, SN

**Nursing Diagnosis:**

Ineffective Airway Clearance

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

R/T Infection within the lungs (Doenges, M, 2016) **Okay to use, but remember infection is a borderline medical diagnosis consider revising in the future. KA**  
Aeb:

- Moist Non-productive Intermittent Cough
- Crackles upon Auscultation on Bilateral Lungs with Inspiration and Expiration
- SPO2 95% on Room Air **Is this concerning?**
- WBC 17.6
- CO2 21.2
- RR 18/min **Is this abnormal for your patient? RR normal 12-20. KA**
- Smokes 1PPD of cigarettes

**Patient Outcomes:**

Patient will be able to clear secretions and no longer have an infection in the lungs

Aeb:

- No cough present **Would no cough or productive cough be better since your concern is airway clearance? KA**
- Clear Lung Sounds Bilaterally upon inspiration and expiration
- SPO2 >93% on RA **Patient already met this in assessment so is this a good outcome? KA**
- WBC 3.8-11.6
- CO2 22-30
- RR 12-20/ min **Patient already met this in assessment so is this a good outcome? KA**
- Expresses understanding of smoking cessation

By Discharge

**Related Interventions:**

1. Assess Respiratory Status Q4h (0800,1200,1600, etc.)
  - Notice Worsening or Improvement of Lung Sounds
2. Assess VS Q4h (0800,1200,1600, etc.)
  - Monitor for changes in RR, Pulse, SPO2, Temp, BP
3. Assess cough and sputum Q4h and PRN (0800,1200,1600, etc.)
  - Monitor for change in frequency of cough, production, and color/amount of sputum
4. Assess Diagnostics/ Labs Daily (0400) **and as available or prn KA**
  - Monitor for changes in WBC, and CO2
5. Raise HOB at least 30 degrees AAT
  - Prevent Aspiration of sputum and allow easier ventilation
6. Encourage Cough and Deep Breathing Q2h (0800,1000,1200, etc.)
  - Coughing will excrete the sputum and clear the airway
7. Encourage oral Intake of fluids 8oz Q2h (0800,1000,1200, etc.)
  - Loosen the Secretions in the airway to provide easier expectoration, maintains hydration
8. Administer Medications as Ordered:
  - Albuterol 2.5mg Inhalation Q4h and PRN (0900,1300,1700, etc.)  
Bronchodilation, relaxation of Airway (Vallerand,2017)
  
  - Ipratropium Bromide 0.5mg Inhalation QID (0600,1200,1800,0000)  
Bronchodilation

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

-Azithromycin 500mg in 250mL @ 250mL/hr (0900)  
Antibiotic to kill bacteria causing infection

-Guaifenesin 600mg PO BID (0900,1700)  
Mobilization of mucus and increases respiratory tract fluid (Vallerand,2017)

9. Educate on Smoking Cessation Daily (1200)
  - Provide intervention options that give the patient the opportunity to decrease or stop the habit
10. Ambulate in the hallway TID or as Tolerated (0900, 1400,1800)
  - Regain strength and allows for secretions to move allowing easier expectoration

**Evaluation**

1/24/19

Goal Partially Met

Aeb:

- Moist Non-Productive Intermittent Cough
- Clear Lung Sounds Upon Auscultation Bilaterally with Inspiration and Expiration
- SPO2 95% on RA
- WBC 25.2
- CO2 21.2
- RR 16/min
- Understands Smoking Cessation

Continue Plan of Care

E. Gast, SN FRMC

**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.

Vallerand, A. H., Sanoski, C. A., & Deglin, J. H. (2017). *Davis's drug guide for nurses* (15<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> Liz Gast  <b>Date:</b> 1/24/19
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	<b>Nursing Diagnosis:</b> <b>Ineffective airway clearance r/t infection within the lungs</b>
Nursing Diagnosis: (3 points total) Problem Statement (1) <b>1</b> Etiology (1) <b>1</b> Defining Characteristics (1) <b>1</b>	Total Points <b>3</b> Comments: Liz, you did a nice job writing your nursing diagnosis. Remember infection is a borderline medical diagnosis and you may want consider revising in the future. Maybe state disease process. Also, defining characteristics should be abnormal findings associated with the patient's nursing diagnosis. Do not include normal findings in the future. KA
Goal and Outcome (6 points total) Goal Statement (1) <b>1</b> Outcome: Specific (1) <b>1</b> Measurable (1) <b>1</b> Attainable (1) <b>0</b> Realistic (1) <b>0</b> Time Frame (1) <b>1</b>	Total Points Comments: <b>4</b> Liz, you did a nice job writing your outcomes. When you are worried about airway clearance and evaluating a cough think about is no cough would be a better finding than a moist nonproductive cough becoming productive. Which one shows the airway becoming clear more? KA
Nursing Interventions: (8 points total) Prioritized (1) <b>1</b> What (1) <b>1</b> How Often (1) <b>1</b> When (1) <b>1</b> Individualized (1) <b>1</b> Realistic (1) <b>1</b> Rationale (1) <b>1</b> All pertinent interventions listed (1) <b>1</b>	Total Points <b>8</b> Comments: Liz, great job writing thorough and complete interventions. Nice job including all pertinent interventions. KA
Evaluation: (5 points total) Date (1) <b>1</b> Goal Met/partially/unmet (1) <b>1</b> Defining characteristics (1) <b>1</b> Plan to continue/terminate (1) <b>1</b> Signature (1) <b>1</b>	Total Points <b>5</b> Comments: Liz, you did a nice job thoroughly evaluating 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 = <b>20</b>  Comments: Liz, you satisfactorily completed your care plan. In the future you do not need to include normal in your defining characteristics. Only the abnormal. See comments on care plan to help improve in the future. Good job! 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 NI		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 7a.) My area of strength this week was having the confidence in handling an IV. I have also done FSBS at my current job, so this skill I performed with confidence. I loved doing the skills hands on and can not wait to work with insulin pens and IV pumps on the clinical site. **Nice job. You can truly tell you have confidence in these skills and are enthusiastic to learn more. KA**

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Objective 7b) I need to improve on working with the IV tubing and the setup. My goal is to walk in the patient's room and start an IV infusion with no complications and have confidence in operating the IV pump as well as correlating it with my charting in Meditech. I'm sure this will come with time and experience, but as of right now, I am going to need assistance and guidance when working with the pump and infusion tubing. My plan is to become comfortable with starting an infusion by the end of the semester. **Liz, this sounds like a great goal. In the future try to set a shorter term goal and remember to be more specific with your plan. You plan includes a time, but does not say what you will do to improve this skill or how often. (i.e. "I will review the IV skills video 2 times before my first clinical.")** KA

### **Week 3:**

Objective 7a.) My area of strength this week was in a few areas. First of all, I was offered to take a different assignment due to my patient being in Environmental Isolation. I am a firm believer that you are never given more than you can handle, so I was willing to garb up in the gown to help my patient, and not veer away from the challenge. I was comfortable taking the patient and overall it was a great learning experience. My biggest strength was my outlook on the situation. My patient asked me why I had the blue gown and hat on, and I told her it was my party hat and party dress. I also complimented on her stylish dress that they gave her. The room on 3T was very spacious so I told the patient she needs to get better so we can go dancing on her dance floor! Throughout both days, my patient was laughing and smiling. I feel like my biggest job is done when in spite of all the bad news the doctors told her, I made her smile and laugh. I tried to make the best of her situation just by keeping her water fresh and encouraging her to drink as well as putting her coffee in a different cup to make it easier for her to drink. Multiple times in the two days, my 85-year-old lady told me I am going to be a good nurse, and that is what makes all the silly acts and hard work all worth it. **Liz, you did rise to the challenge and took great care of your patient!** KA

Objective 7b.) My area of weakness this week was trying to understand what my patient was saying. The patient talked in a very garbled and jumbled speech which required heavy attention to what she was saying. I realized that I kept making the patient repeat what she said because I could not understand her. I should have provided alternative communication methods such as a pen and paper available for her to write. The patient enjoyed my company and would tell stories to me while I was in the room about her life and beliefs. I tried to listen closely but could only make out a few words. At times, her daughter noticed me not comprehending her mother and replied "Mama, she doesn't know what you're saying...". The next time I have a patient with a communication disorder, I will provide alternative communication methods to be available in the room and provide education on how to use them. I plan on doing this by midterm this semester and also know that it is an option for every patient I take care of this semester. **Great idea. I think we sometimes forget there are communication boards and cards that can be used when communication can be difficult.** KA

**Week 3 – 7e – Liz you had a challenging situation this week and instead of backing down from the challenge, you rose to the occasion and utilized it as a teaching experience. You had a true ACE attitude this week!** KA

### **Week 4:**

Objective 7a.) This week, my area of strength was my organizing skills. I make sure to read all the orders and write them down to refer from throughout the simulation. I constantly was checking my orders and all the interventions and possible thing to do to make sure I wasn't forgetting anything. This was a good skill to do because I scored a 96% on one and 100% on the other.

Objective 7b.) My weakness this week was the scoring on the V sim post quizzes. I was not impressed with my initial scores so I tried the test again until I received satisfactory scores. My goal is to pay more attention to the questions and try to get a satisfactory score on my first try by the next V sim.

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: S: Satisfactory U: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:</b> Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	

\*Course Objectives

**Comments:**

**Week 1**

(IV Math)-You satisfactorily participated in the IV Math learning session on 1/7/19 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 state to oral suction after trach suctioning and one prompt to remember to state to clean the stoma from the stoma outward. Otherwise, well done. NS

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)	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:

Student eSignature and Date:

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dw 1/3/19