

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

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

**Student:** Abigayle Adams

**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
2/2/19	Ineffective airway clearance R/T bronchospasms from disease process	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>			N/A	N/A														
a. Analyze the involved patho-physiology of the patient's disease process. (Interpreting)			N/A	N/A														
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	N/A														
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	N/A														
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			N/A	N/A														
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	N/A														
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			S	N/A														
g. Assess developmental stages of assigned patients. (Interpreting)			N/A	N/A														
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	N/A														
	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	Digestive health/Dialysis & PT/OT / infection	Makeup Clinical														
	Instructors Initials	DW	DW	DC														

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

**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 (2b)- This skill is necessary during the PT/OT clinical prior to assisting with mobility in the variety of patient's visited that day; therefore S. DW

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

**Comments:**

Week 3 (3j)- This skills is also required when working with different disciplines, such as PT/OT. The therapists and nursing collaborate to implement the best plan of care for the patient. DW

\*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>			N/A	N/A														
k. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			N/A	N/A														
l. Calculate medication doses accurately. (Responding)			N/A	N/A														
m. Administer IV therapy, piggybacks and/or adding solution to a continuous infusion line. (Responding)			N/A	N/A														
n. Regulate IV flow rate. (Responding)	S		N/A	N/A														
o. Flush saline lock. (Responding)			N/A	N/A														
p. D/C an IV. (Responding)	S		N/A	N/A														
q. Monitor an IV. (Responding)			N/A	N/A														
r. Perform tracheostomy care. (Responding)			N/A	N/A														
s. Perform FSBS with appropriate interventions. (Responding)	S		N/A	N/A														
	DW		DW	DC														

**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

\*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	N/A														
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	N/A														
b. Communicate professionally and collaboratively with members of the healthcare team. (Responding)			S	N/A														
c. Report promptly and accurately any change in the status of the patient. (Responding)			N/A	N/A														
d. Maintain confidentiality of patient health and medical information. (Responding)			S	N/A														
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			N/A	S														
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			N/A	N/A														
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			N/A	N/A														
			DW	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	S														
a. Describe a teaching need of your patient.** (Reflecting)			S	S														
b. Utilize appropriate terminology and resources when providing patient education. (Responding)			S	N/A														
c. Evaluate health-related information on the intranet. (Responding)			N/A	N/A														
			DW	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:**

Week 3: During PT we educated frequently about the importance of moving to promote healing. A post-operative patient stated “you know, this pain will go away in 5 days without all this unnecessary pain you’re causing me right now” while we were trying to transfer her to the toilet. We had to educate her on why she has to move around instead of staying sedentary. DW

Week 4: If my VSIM patient were real, I would educate her on the importance of keeping the head of her bed up and frequent movement to promote airway patency. I would also teach about respiratory medications. (Albuterol, Ipratropium, etc.)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)			N/A	S NI														
b. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)																		
			DW	DC														

**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: Abigayle Adams Date: 2/2/19
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	<b>Nursing Diagnosis: Ineffective airway clearance R/T bronchospasms from disease process</b>
Nursing Diagnosis: (3 points total) Problem Statement (1) 1 Etiology (1) 1 Defining Characteristics (1) 0	Total Points:2 Comments: I would like to see more information in your AEB sections such as characteristics of their breathing (labored, gasping, coughing, etc) You will also need to list if they were on oxygen, room air, etc.DC
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) 0	Total Points 5 Comments: AEB also needs to include more characteristics of the outcome you are trying to obtain. With a SpO2 of 74% and increased RR we would want to see the goal well before discharge. DC
Nursing Interventions: (8 points total) Prioritized (1) 0 What (1) 1 How Often (1) 0 When (1) 1 Individualized (1) 1 Realistic (1)1 Rationale (1) 1 All pertinent interventions listed (1)1	Total Points6 Comments: Look over your interventions for prioritization. For example, O2 PRN should be at the top of the list due to the decreased SpO2. Also, reevaluate your intervention's frequencies, specifically VS Q5min. DC
Evaluation: (5 points total) Date (1) 1 Goal Met/partially/unmet (1) 1 Defining characteristics (1) 0 Plan to continue/terminate (1) 1 Signature (1)1	Total Points 4 Comments: Defining characteristics need to be more specific (ex. Location of wheezes, any oxgen/room air, etc) DC
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: Overall, your input and interventions work well but need to be more specific and prioritized based on the patient needs. Please let me know if you need additional guidance! 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	N/A S														
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		S	N/A S														
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		S	N/A														
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		S	N/A														
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		S	N/A														
h. Actively engage in self-reflection. (Reflecting)	S		S	N/A S														
	DW		DW	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:**

**Week 1 Strength:** I think a strength I had this week was remembering vital signs skills, I was nervous that I wouldn’t be able to remember a manual blood pressure. DW

**Week 1 Weakness:** I think a weakness I had this week was not feeling confident in my NF skills, I was worried about remembering which I think held me back, but I did know them so I should be confident. I think I could help myself with this by reading my skills lists and practicing those skills at least three times before my first clinical. Great idea! DW

\*End-of-Program Student Learning Outcomes

**Week 3 Weakness:** A weakness I had this week on clinical was during the digestive care clinical, I had never seen a procedure in person before, and the first colonoscopy I watched really caught me off guard I guess because I got really lightheaded and sweaty during the procedure, I think this was due to not eating enough before clinical and also my nerves for my first observation of a procedure, but I was still mad at myself because I thought it interfered with the rest of my day because I was nervous about it. I think I can avoid this next time by eating before my next clinical and also knowing what to expect **Abbie, In nursing it will never be 100% possible to prepare ahead of time for everything you will experience. However, whenever possible, preparation can be a good thing, especially to reduce nervousness. How will you prepare for the next clinical you have? DW**

**Week 3 Strength:** I think a strength I had this week was overcoming those nerves during the colonoscopy, even though I was nervous I still watched lots more procedures that day and even observed another kind of procedure in the pain management room. **Perseverance! Great job Abbie! DW**

**Week 4 Strength:** I think a strength I had this week was Jenifer Hoffman's VSIM, I surprised myself with my score after the first try! **Good job! You will be amazed how much you can grow in your clinical judgement abilities and assessment in just a few weeks. DC**

**Week 4 weakness:** A weakness I had this week was in Skyler's VSIM, I administered Glucagon when I shouldn't have, I can improve on this by studying my diabetes medications more. **Diabetes medications can be struggling when you first learn about them. Continue to study them and never hesitate to ask for any additional help. DC**

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>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)*
S: Satisfactory U:Unsatisfactory	<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>DW</b>	<b>DW</b>	<b>DW</b>	<b>DW</b>	<b>DW</b>	<b>EW</b>	<b>DW</b>	
<b>Remediation: Date/Evaluation/Initials</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>	<b>NA</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 2 (Trach Skills)- During this lab, you were able to satisfactorily demonstrate competence with tracheostomy care and tracheostomy suctioning. Trach care was completed without prompting and the steps were completed in the appropriate order. You received two prompts for trach suctioning related to: 1. touching the suction kit with sterile gloves on, this was self-recognized and corrected actions were verbalized; and 2. Replacing the oxygen source between suction attempts. Overall, nice job. EW

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	al-Surgical) Jennifer Hoffman	dical-Surgical) Skyler Hansen	o)Juan Carlos (Pharmacology)	ical-Surgical) Marilyn Hughes	*1, 2, 3, 4, 5, 6) Vernon Russell (Fundamentals)	ical-Surgical) Stan Checketts	*1, 2, 3, 4, 5, 6) Harry Hadley (Pharmacology)	4, 5, 6)(Pharmacology) Yoa Li
Performance Codes:  S: Satisfactory  U: Unsatisfactory	Date: 1/28/19	Date: 1/30/19	Date: 1/30/19	Date: 2/12/19	Date: 2/25/19	Date: 3/26/19	Date: 4/15/19	Date: 4/25/19	Date: 4/29/19
Evaluation	S	S	S						
Faculty Initials	DC	DC	DC						
<b>Remediation: 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