

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

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

**Student:** April Randleman

**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
2/4/19	Impaired gas exchange r/t bronchospasm, respiratory distress, and hypoxemia	S/EW		

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>			NA	NA	S													
a. Analyze the involved patho-physiology of the patient's disease process. (Interpreting)			NA	NA	S													
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			NA	NA	S													
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			NA	NA	S													
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			NA	NA	S													
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			NA	NA	S													
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			NA	NA	S													
g. Assess developmental stages of assigned patients. (Interpreting)			NA	NA	S													
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		NA	NA	S													
	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	NA	NA	3T,53,SOB and Chest pain.													
	Instructors Initials	LM	DW	EW	LM													

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

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

**Comments:**

WK4 3i: Article summary lacked definitive methods. Be sure to include what method was used for the study, not just who participated. EW

Week 5- 3c, d, e- April demonstrated promptness and recognized the need for assistance when we walked into her patient’s room and her patient was bleeding from one of her wounds. There was a copious amount of blood on the bed under her patient’s arm. April addressed the situation promptly. LM

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

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

**Comments:**

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

WK4 4e: No in-text citation. Please review rubric before discussion submission. Must include in-text citation. APA format incorrect. Use resources to double-check formatting. For example, you do not need to include author credentials. See below as to how your reference should look. Purdue Owl is a good resource for APA. EW

Hartnett, P. O'Keefe, C. (2016). Improving skin cancer knowledge among nurse practitioners. *Journal of the Dermatology Nurses Association*. 8(2), 123-128.

Week 5- 4e- April did improve on her CDG post this week. April provided an in-text citation, however, remember to review the APA format in your reference before you submit the information, including punctuation. There were no periods throughout the reference. LM

**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)			NA	S	S													
b. Utilize appropriate terminology and resources when providing patient education. (Responding)			NA	NA	S													
c. Evaluate health-related information on the intranet. (Responding)			NA	NA	S													
			DW	EW	LM													

**\*\*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:**

Week4-5a- My patient needed to be educated in identifying asthma triggers and continuing with her asthma plan.

Week 5-5a- My patient had a high blood sugar and was educated on controlling blood sugar. This is an appropriate teaching need, April. Nice job. LM

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

**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

<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> April Randleman <b>Date:</b> 2/4/19
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	<b>Nursing Diagnosis:</b> Impaired gas exchange r/t bronchospasm, respiratory distress, and hypoxemia
Nursing Diagnosis: (3 points total) Problem Statement (1) Etiology (1) Defining Characteristics (1)	Total Points 2 Comments: Great job selecting a priority diagnosis for your patient. Your problem statement is NANDA approved and there is no medical diagnosis in the etiology. Bronchospasm is sufficient for you etiology; hypoxemia and respiratory distress are defining characteristics. Also, your defining characteristics should match your outcomes. You only have 2 defining characteristics listed but have five outcomes. See your rubric as well as the nursing care plan guidelines handout to use as a guide. Your defining characteristics are what is negative about your assessment. <ul style="list-style-type: none"> <li>• O2 sat. of 74% - is this on RA or with O2</li> <li>• Audible wheezing- good</li> <li>• Because you have able to cough out secretions as an outcome you should have a defining characteristic such as “inability to clear secretions”.</li> <li>• What is the respiratory rate?</li> <li>• Does patient verbalize lack of understanding regarding diagnosis and management?</li> </ul> You then utilize the outcomes section to make them positive. EW
Goal and Outcome (6 points total) Goal Statement (1) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points 5 Comments: Goal statement is clearly listed. Outcomes need to match defining characteristics and be SMART; see explanation to the left. The only area clearly missing for each outcome is a timeframe
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 8 Comments: Nursing interventions were prioritized and contained all the necessary information. EW
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: Point deduction due to not having a clear goal date so therefore not having a definitive evaluation date. Point deducted due to not all defining characteristics being listed and evaluated. EW

<p>Total possible points = 22 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan ≤ 13 = Unsatisfactory care plan</p>	<p>Total Points for entire care plan = 18</p> <p>Comments: Overall, you did a good job. Refer to the guidelines I listed in the comments for further care plan submission. It will help guide your work.</p>
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<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		NA	S N/A	S													
b. Reflect on an area for improvement and set a goal to meet this need.** (Reflecting)	S		NA	S N/A	S													
c. Demonstrate evidence of growth, initiative, and self-confidence. (Responding)	S		NA	NA	S													
d. Follow the standards outlined in the FRMCSN Student Code of Conduct Policy. (Responding)	S		NA	NA	S													
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S		NA	NA	S													
f. Exhibit professional behavior i.e. appearance, responsibility, integrity, and respect. (Responding)	S		NA	NA	S													
g. Demonstrate the ability to give and receive constructive feedback. (Responding)	S		NA	NA	S													
h. Actively engage in self-reflection. (Reflecting)	S		NA	NA	S													
	LM		DW	EW	LM													

**\*\*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 I feel confident in my skills because, of my experience as a LPN. 7b I feel as I need to continue to review firelands policy and protocols for these skills to prepare myself for clinical. I will continue to read these policies 1 time a week to prepare for clinical.

Week 4-7a-My area of strength was going in and assessing my patient. 7b I need to improve on providing education to my patient. I will review the different ways to education patients two times a week to prepare for this.

Week 5-7a-My area of strength was maintaining the isolation precautions for my patients. 7b-I need to review Firelands policy for checking FSBS. I will review this policy two times before the next clinical.

Week 1 (7a & 7b) – I agree with April, in that she has experience as an LPN with skills reviewed last week. However, it helps to learn and practice the skills in a controlled, step-by-step manner according to the FRMC policy. This is mentioned above by April under areas of improvement. I agree with April’s plan to continue to read the policies in preparation for clinical. LM

Week 5- 7a & 7b- April, you did a great job maintaining contact isolation precautions for your patient. You were aware of the proper donning and removing PPE. In regard to your area of improvement, it is important to be knowledgeable about the FSBS policy at FRMC. If a patient’s blood sugar is out of range (which is what happened to one of April’s patients), then you can follow proper protocol to recheck the blood sugar and notify the physician/nurse if the reading remains out of range. The patient was asymptomatic. LM

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>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>LM</b>	<b>DW</b>	
<b>Remediation: Date/Evaluation/Initials</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</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**

1/16/19-Tracheostomy 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 did not require any prompts during the check-off. Well done. LM

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	ical-Surgical) Jennifer Hoffman	edical-Surgical) Skylar Hansen	5) 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	Dates: 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	EW	EW	EW						
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A						

\* Course Objectives

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
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**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: This box remains blank until the end of the semester

dw 1/3/19