

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Medical Surgical Nursing – 2020**

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

**Student:**   
**Semester:**

**Final Grade: Satisfactory/Unsatisfactory**

**Date of Completion:**   
**Faculty eSignature:**

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

**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
1/29/20	Impaired physical mobility	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	MakeUp	Final
<b>Competencies:</b>			S	S	S													
a. Analyze the involved pathophysiology of the patient's disease process. (Interpreting)			S	S	S													
b. Correlate patient's symptoms with the patient's disease process. (Interpreting)			S	S	S													
c. Correlate diagnostic tests with the patient's disease process. (Interpreting)			S	S	S													
d. Correlate pharmacotherapy in relation to the patient's disease process. (Interpreting)			S	S	S													
e. Correlate medical treatment in relation to the patient's disease process. (Interpreting)			S	S	S													
f. Correlate the nutritional needs in relation to patient's disease process. (Interpreting)			NA	S	NA													
g. Assess developmental stages of assigned patients. (Interpreting)			S	S	NA													
h. Demonstrate evidence of research in being prepared for clinical. (Noticing)	S		S	S	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	Diabetic Educator, AC, & Digestive Health	3T, 86, head laceration with 4 staples d/t falls	PT/OT, Infection													
Instructors Initials	<b>EW</b>		<b>DW</b>	<b>KA</b>														

**Comments:**

Week 4 – 1b – You were able to correlate your patient's symptoms with their disease process during post conference. KA

Week 4 – 1d – You did a nice job describing the purpose of the medications you were administering and how they related to your patient. KA



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

Week 4 – 2a – You did a great job completing a head-to-toe assessment and documenting it in the patient's EMR. KA

Week 4 – 2c – You did a nice job reporting and pertinent findings in your patient's assessment to the nurse. 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	MakeUp	Final
<b>Competencies:</b>	S		S	SS	S													
a. Perform standard precautions. (Responding)	S		S	SS	S													
b. Demonstrate nursing measures skillfully and safely. (Responding)	S		S	S	NA													
c. Demonstrate promptness and ability to organize nursing care effectively. (Responding)			NA	S	NA													
d. Appropriately prioritizes nursing care. (Responding)			NA	S	NA													
e. Recognize the need for assistance. (Interpreting)			S	S	S													
f. Apply the principles of asepsis where indicated. (Responding)	S		NA	S	NA													
g. Implement the appropriate DVT prophylaxis interventions based on assessment and physicians orders. (Responding)			NA	S	NA													
h. Identify the role of evidence in determining best nursing practice. (Interpreting)			S	S	S													
i. Identify recommendations for change through team collaboration. (Interpreting)			S	S	S													
	<b>EW</b>		<b>DW</b>	<b>KA</b>														

**Comments:**

Week 4 – 3h – You chose an appropriate article and did a great job summarizing it. Fall prevention is such a great topic! 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	MakeUp	Final
<b>Competencies:</b>			NA	S	NA													
j. Administer PO, SQ, IM, or ID medications observing the rights of medication administration. (Responding)			NA	S	NA													
k. Calculate medication doses accurately. (Responding)			NA	S	NA													
l. Administer IV therapy, piggybacks and/or adding solution to a continuous infusion line. (Responding)			NA	NA	NA													
m. Regulate IV flow rate. (Responding)	S		NA	NA	NA													
n. Flush saline lock. (Responding)			NA	NA	NA													
o. D/C an IV. (Responding)	S		NA	NA	NA													
p. Monitor an IV. (Responding)			NA	S	NA													
q. Perform FSBS with appropriate interventions. (Responding)	S		NA	S	NA													
	<b>EW</b>		<b>DW</b>	<b>KA</b>														

**Comments:**

Week 1 (3m,o)- 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 (3q)-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 4 – 3j – You did a great job following the rights of medication. KA

Week 4 – 3p – You did a nice job assessing the patient’s IV site and documenting in the EMR. KA

Week 4 – 3q – You did a nice job performing finer stick blood sugars on your patient and providing appropriate coverage when necessary. Please be mindful to make sure to prime the insulin pen before administering the medication. 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	MakeUp	Final
<b>Competencies:</b>			S	S	S													
a. Integrate professionally appropriate and therapeutic communication skills in interactions with patients, families, and significant others. (Responding)			S	S	S													
b. Communicate professionally and collaboratively with members of the healthcare team. (Responding)			S	S	S													
c. Report promptly and accurately any change in the status of the patient. (Responding)			NA	S	NA													
d. Maintain confidentiality of patient health and medical information. (Responding)			S	S	S													
e. Consistently and appropriately post comments in clinical discussion groups. (Reflecting)			S	S NI	S													
f. Obtain report, from previous care giver, at the beginning of the clinical day. (Noticing)			NA	S	NA													
g. Provide a clear, organized hand-off report to your patient's next provider of care. (Responding)			NA	S	NA													
			DW	KA														

**Comments:**

Week 3 (4e)- According to the CDG Grading Rubric, you earned an S for your participation in the Alternative Care, Digestive Health, and Diabetic Educator discussion this week. I do have one suggestion for future improvement with APA formatting include- if your in-text citation is a direct quote, include a page number (author, publication date, page number). DW

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

Week 4 – 4e – Rheanna, you did a nice job thoroughly responding to the CDG questions and your classmate. Please remember to include an in text citation when responding to the CDG questions. Also remember when writing your reference only the first letter of the first word of the title is capitalized. KA

Week 5 (4e): I will make sure to double check my CDG's to make sure I included an in-text citation every week.

Week 4 – 4 f & g – You did a nice job receiving report from the previous shift and providing a thorough report to the nurse when signing off at the end of your shift. KA

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

5(a) Week 3: I did not have any patients under my direct care this week. However, ideally I would have been able to see patients with the diabetic educator. When teaching a newly diagnosed diabetic patient, I would instruct them how to perform a blood sugar reading, dose and prime their insulin pens and how to inject it, how to count carbs, schedule to take oral diabetic medications. I would also answer any specific questions they had about diabetes and have them use the teach-back method to demonstrate understanding. I would do the teaching in sessions to ensure that the patient does not get overwhelmed with their new diagnosis. **Wonderful Rheanna! DW**

5(a) Week 4: My patient needed education on taking bigger steps and not shuffling his feet while walking. He did have a new diagnosis of early signs of Parkinson’s disease. Shuffled gait is often a symptom of Parkinson’s disease. However, his shuffled gait did not resemble this symptom yet, although it could likely be the cause and it just has not progressed that far yet. His altered gait could be the cause of his recurrent falls. He needs to not only be educated on his gait but also on other preventions for falls, like no rugs in the house, keeping cords out of the way, and keeping walkways well lit. **Great education! KA**

5(a) Week 5: My patient needed education on how to ambulate safely when having dizzy episodes. When PT/OT and I came in, the patient stated he did get up one time prior to us coming and that he ambulated to the bathroom and felt dizzy. He could use a urinal/BSC when feeling dizzy to prevent possible falls. If he were to attempt to go to the bathroom when he is dizzy, he should use a stabilizer device to prevent falls as well.

\*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	MakeUp	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	KA														

**Comments:**

See Care Plan Grading Rubrics below.

Week 8- See Simulation Scoring Sheet below.

Week 13- See Simulation Scoring Sheet below.

Week 4 – 6a – You satisfactorily completed your care plan. See the rubric for comments. KA

\*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> Rheanna Tomblin <b>Date:</b> 1/29/20
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	<b>Nursing Diagnosis:</b> <b>Impaired physical mobility related to generalized weakness</b>
Nursing Diagnosis: (3 points total) Problem Statement (1) 1 Etiology (1) 1 Defining Characteristics (1) 1	Total Points 3 Comments: <b>Great job writing a thorough and appropriate nursing diagnosis for your patient. KA</b>
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: <b>You did a nice job writing SMART outcomes to your goal. KA</b>
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) 1	Total Points 8 Comments: <b>You did a nice job writing appropriate nursing interventions for your patient's nursing diagnosis. KA</b>
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: <b>Great job evaluating your care plan. KA</b>
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 = 22 Comments: <b>Rheanna, you did a nice job satisfactorily completing your care plan. All areas were addressed appropriately. Keep up the great work! KA</b>

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

7(a) Week 1: A strength I demonstrated this week is FSBS. I felt very confident in performing this skill because I do it in my job at the hospital. I know that procedure like the back of my hand and my goal is to become proficient in all of my skills the way I am with this one.

\*End-of-Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

7 (b) Week 1: An area of improvement for myself this week is to get organized. I need to come up with a plan of when I will be able to study and allow myself adequate hours for that and to do assignments/projects along with finding the hours I can work as well. I just need to get a game plan for this semester! **EW**

7(a) Week 3: I felt confident in interacting with the visitors at the Alternative Care Center. I work in a nursing home and have since I was 16. I have a special place in my heart for the geriatric population and I had a lot of fun communicating with them and being about to perform a fun activity with them. **DW**

7(b) Week 3: A weakness I felt I had was understanding the colonoscopy when I was observing. I did not know what I was really looking at in the picture (different parts of the colon). I would like to learn more about the colonoscopy procedure and what a normal/abnormal finding looks like. I will do some research both nights before bed this next Monday and Tuesday to learn more. **Great goal, very specific! DW**

7(a) Week 4: An area of strength for this week that I felt I displayed was feeling comfortable with the hospital units and prioritization of care. I think that I have improved my time on performing the assessment and vital signs while completing the morning charting and finished this all before 8am. This is an improvement from last semester and I also added performing a FSBS this week into that routine. **Great job! KA**

7(b) Week 4: An area of improvement for me would be palpating the dorsalis pedis pulses. I have had trouble with this in the past when my patients has pitting edema in their lower extremities, which is some what expected. However, my patient had no edema this week and it took me some time to locate these pulses. I will practice finding my own dorsalis pedis pulses three times before next clinical to hopefully master this technique. **Great measureable goal to improve this area of weakness. KA**

7(a) Week 5: A strength I had during this clinical was transferring and moving patients. I do this every day as a PCT at the hospital and as an aide at Gaymont that I am very comfortable with hard transfers. I did, however, learn the sling method for transferring a difficult patient which helps alleviate the risk for falls.

7(b) Week 5: An area for improvement I noticed this week was remembering the importance of precautions. It is so easy to just slip past the border of the room to set a beverage down or sneak in to set down/pick up a meal tray. However, I recognize how important it is to always wear all the appropriate PPE no matter what the patient contact is. I will specifically double check every precaution room I enter the next week in clinical and at work to help imbed the importance of these precautions into my head. Of course, I will always double check my precautions. But that is my specific goal.

Firelands Regional Medical Center School of Nursing  
**Medical Surgical Nursing 2020**  
**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> 1/6 & 1/8/20	<b>Date:</b> 1/7/20	<b>Date:</b> 1/7/20	<b>Date:</b> 1/9/20	<b>Date:</b> 1/10/20	<b>Date:</b> 1/15/20	<b>Date:</b> 1/21/20	<b>Date:</b> 3/20/20
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>EW</b>	<b>EW</b>	<b>EW</b>	<b>EW</b>	<b>EW</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 1/6/20 as well as the assigned IV Math practice questions and the IV Math Application lab on 1/8/20. 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. MD

(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/MD

(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 1 prompt to have the patient cough and take deep breaths. Otherwise, well done.

**Week 3**

EBP Lab- You actively participated in the online searching process for evidence-based practice literature, as well as reviewing an example article to determine appropriate selection and information needed when summarizing a research article. DW



Firelands Regional Medical Center School of Nursing  
 Medical Surgical Nursing 2020  
 Simulation Evaluations

<b>vSim Evaluation</b>	<b>vSim</b>					
	Medical-Surgical)Vincent Brody	6)Juan Carlos (Pharmacology)	ical-Surgical)Marilyn Hughes	Medical-Surgical)Stan Checketts	Harry Hadley *1, 2, 3, 4, 5, 6) (Pharmacology)	4, 5, 6)(Pharmacology)Yoa Li
Performance Codes:  <b>S:</b> Satisfactory  <b>U:</b> Unsatisfactory	<b>Date:</b> 1/27/20	<b>Date:</b> 2/10/20	<b>Date:</b> 2/24/20	<b>Date:</b> 4/13/20	<b>Date:</b> 4/23/20	<b>Date:</b> 4/27/20
Evaluation	<b>S</b>					
Faculty Initials	<b>KA</b>					
<b>Remediation:</b> Date/Evaluation/Initials	<b>NA</b>					

\* Course Objectives

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Medical Surgical Nursing – 2020**

**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:

lm 12/16/19