

**EVALUATION OF CLINICAL PERFORMANCE TOOL  
Advanced Medical Surgical Nursing- 2020**

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

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

**Final Grade:** Satisfactory/Unsatisfactory

**Date of Completion:**

**Faculty:** Frances Brennan, MSN, RN; Amy M. Rockwell, MSN, RN  
Carmen Patterson, MSN, RN; Brian Seitz, MSN, RN  
**Teaching Assistant:** Brittany Schuster, BSN, RN

**Faculty eSignature:**

**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:**

- Clinical Assignments
- Completion of Patient Care
- Meditech Documentation
- Observation of Clinical Performance
- Evaluation of Clinical Performance Tool
- Onsite Clinical Debriefing
- Clinical Discussion Rubric
- Preceptor Feedback
- Nursing Care Plan Rubric
- Skills Lab Checklists/ Competency Tool
- Lasater Clinical Judgment Rubric
- Virtual simulation scenarios

**ABSENCE (Refer to Attendance Policy)**

Date	Number of Hours	Comments	Make Up (Date/Time)
2/11/2020 BSc	8	Glasses broke/appointment to get repaired	2/26/2020 0700-1500 BSc
2/14/2020 BSc	2	vSim: Rachel Heidebrink not submitted on time	2/17/2020 0800 BSc
<b>Initials</b>	<b>Faculty Name</b>		
<b>FB</b>	<b>Frances Brennan, MSN, RN</b>		
<b>CP</b>	<b>Carmen Patterson, MSN, RN</b>		
<b>AR</b>	<b>Amy Rockwell, MSN, RN</b>		
<b>BS</b>	<b>Brian Seitz, MSN, RN</b>		
<b>BSc</b>	<b>Brittany Schuster, BSN, RN</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 needed 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, and 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 faculty 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.

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Objective

1. Engage in the coordination and delivery of nursing care measures to groups of patients and to patients with complex problems. (1,3,4,5,7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	NA	NA	NA	S	S	S	NA	S	S								
a. Manage complex patient care situations with evidence of preparation and organization.	NA	NA	NA	S	S	S	NA	S	S								
b. Assess comprehensively as indicated by patient needs and circumstances.	NA S	S	S	S	S	S	NA	S	S								
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care.	NA	S	S	S	S	S	NA	S	S								
d. Evaluate patient's response to nursing interventions.	S	S	S	S	S	S	NA	S	S								
e. Interpret cardiac rhythm; determine rate and measurements	NA	NA	NA	S	NA	S	NA	S	S								
f. Administer medications observing the six rights of medication administration.	NA	S	S	S	S	S	NA	S	S								
g. Perform venipuncture skill with beginning dexterity and evidence of preparation.	NA	S	S	S	NA	NA	NA	NA	S								
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc.	NA	NA	NA	S	S	S	NA	S	S								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								
onClinical Cardiac Diagnostics	ED & QC	SP IS	4C	4P	4C	MA KEU P	4P										

**Comments:**

Week 2: Per Cardiac Diagnostics preceptor you were excellent in all areas! Great job! (1b)- Excellent CDG posting related to this competency. Keep up the great work!  
AR  
Week 3- Great job in both Quality Department and Emergency Department clinical experiences this week. AR Preceptor comments: Awesome group; seemed interested in info and asked appropriate questions. AR

\*End-of- Program Student Learning Outcomes

Week 4- Preceptor comments for Special Procedures: Satisfactory in all areas except Actively engaged in the clinical experience (Excellent). Preceptor Comments: Observed several procedures; attempted IV starts; could use more practice to gain confidence. Preceptor comments for Infusion Center: Excellent in actively engaged in the clinical experience and Demonstrates prior knowledge of departmental/nursing responsibilities; Satisfactory in Appropriate use of communication skills and Demonstrates professionalism in nursing. Preceptor Comments: Needs to be more confident with patients; says "I'm sorry" a lot and has to approach more confidently; good techniques; port accessed; IV stats. (1b)- Satisfactory discussion via CDG posting related to Special Procedures clinical. (1d)- Satisfactory discussion via CDG posting related to Special Procedures and Infusion Center clinical experiences. Great job! AR

Week 5- Great job managing care of a complex patient, evaluating and implementing nursing interventions, and administering medications. FB

Week 6-1(f) Great job administering all your medications this week in clinical while observing the six rights of medication administration. You were very well prepared and organized. Additionally, you did an excellent job administering your IV-Push medication as well. Keep up the hard work! BSc

Week 7- (1e) Satisfactory completion of ECG booklet. (1a) Great job caring for a complex ventilated patient. (1f) You also did an excellent job with medication administration including IVP, OG, SQ, and titration medication administration. FB

Week 8/Make-up-1(f) Excellent job with administration of all of your patient's medications while observing the six rights of medication administration. You also did a great job with the IV fluids as well. Keep up all your hard work! BSc

**Objective**

2. Formulate nursing care plans, correlations, or clinical reports that demonstrate patient-centered care, evidence-based practice, and clinical judgment. (1,2,3,4,5,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	NA	S	S	S	S	S	NA	S	S								
a. Correlate relationships among disease process, patient’s history, patient symptoms, and present condition utilizing clinical judgment skills. <b>CC (noticing, interpreting, responding)</b>	NA	S	S	S	S	S	NA	S	S								
b. Monitor for potential risks and anticipate possible early complications. <b>CC (noticing, interpreting, responding)</b>	NA	NA	S	S	S	S	NA	S	S								
c. Recognize changes in patient status and take appropriate action. <b>(noticing, interpreting, responding)</b>	NA	NA	NA	S	S	S	NA	S	S								
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. <b>CC (noticing, interpreting, responding, reflecting)</b>	NA	NA	NA	NA	S	S	NA	S NA	S								
e. Development of clinical judgment in high-fidelity simulation scenarios. <b>(Noticing, Interpreting, Responding, Reflecting)</b>						S	NA	S NA	S								
f. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. <b>CC (noticing, interpreting, responding)</b>	NA	NA	NA	NA	NA	S	NA	NA	S								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								

**Comments:**

2d. See Care Plan Rubric at the end of this document.

2e. See Clinical Simulation Rubric at the end of this document.

\*End-of- Program Student Learning Outcomes

Week 5 (2a)- Katie, you did an excellent job providing a lot of detail about the disease process and risk factors. Your patient had a lot of those risk factors which you presented well explaining how they relate to his current diagnosis. FB

Week 6-2(d) Great job formulating a prioritized nursing care plan. Please see the Care Plan Rubric at the end of this document for my feedback. BSc

Week 7- (2b,c,d) Great job contributing to discussion on possible complications, recognition of changes, priority nursing diagnosis for your assigned patient. (2f) Great job with ABCDEF bundle on your patient, you provided a great deal of assessment data regarding your patient’s status and the use of all the tools used within the bundle. FB

Week 8/Make-up-2(d,e) These competencies have been changed to “NA” for this week because you did not create a formal Care Plan for your patient, and you did not have simulation this week. BSc

<b>Objective</b>																	
3. Plan leadership experiences with a mentor to impact team performance, patient safety, and quality indicators. (1,3,5,7,8)*																	
Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	NA	NA	S	NA	NA	NA	NA	S	S								
a. Critique communication barriers among team members <b>(Preceptorship)</b>	NA	NA	S	NA	NA	NA	NA	NA	NA								
b. Participate in QI, core measures, monitoring standards and documentation.	NA	S	NA	NA	NA	NA	NA	S	S								
c. Discuss strategies to achieve fiscal responsibility in clinical practice.	NA	S	S	NA	NA	NA	NA	NA	S								
d. Clarify roles & accountability of team members related to delegation. <b>(Preceptorship)</b>	NA	NA	NA	NA	NA	NA	NA	NA	NA								
e. Determine the priority patient from assigned patient population. <b>(Preceptorship)</b>	NA	NA	NA	NA	NA	NA	NA	NA	NA								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								

**Comments:**

\*End-of- Program Student Learning Outcomes

Week 3 (3b)- Satisfactory discussion via CDG posting related to Quality Assurance/Core Measures clinical experience. Keep up the great work! AR  
Week 4 (3c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical. Great job! AR

Week 8/Make-up-3(b) Katie, excellent job with your core measure documentation this week in clinical. BSc

**Objective**

4. 4. Plan for a future in the nursing profession by analyzing information concerning employment, licensure, ethical, and legal issues in nursing focusing on accountability and respecting patient autonomy. (1,2,4,5)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	NA	NA	NA	S	NA	NA	NA	S	S								
a. Critique examples of legal or ethical issues observed in the clinical setting.																	
b. Engage with patients and families to make autonomous decisions regarding healthcare.	NA	NA	S	S	S	S	NA	S	S								
c. Exhibit professional behavior in appearance, responsibility, integrity and respect.	NA	S	S	S	S	S	NA	S	S								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								

**Comments:**

Week 4 (4a)- Great job with discussion regarding legal and ethical issues during post conference. FB

**Objective**

5. Construct methods for self-reflection and critiquing healthcare systems, processes, practices and regulations on a weekly basis. (7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	S	S	S	S	S	S	NA	S	S								
a. Reflect on your overall performance in the clinical area for the week.	S	S	S	S	S	S	NA	S	S								
b. Demonstrate initiative in seeking new learning opportunities.	S	S	S	S	S	S	NA	S	S								
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc.).	S	S	S	S	S	S	NA	S	S								
d. Perform Standard Precautions.	S	S	S	S	S	S	NA	S	S								
e. Practice use of standardized EBP tools that support safety and quality.	S	S	S	S	S	S	NA	S	S								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								

**Comments:**

5a-I think overall, I had a very positive attitude, I felt much more confident at clinical in engaging with patients and nurses. I learned a lot about Cardiac Diagnostics and the patient care during these various procedures. I communicated well and helped when I could. I was not sure what skills I could do at this clinical exactly, so I wasn't sure if I was able to put in an IV with the RN I was observing during the Stress Tests. I will be more proactive in asking what I can or cannot do at the various sites I am at for the future and I will verify with my instructors what I can and cannot do if I am uncertain before clinical. **AR**

Week 4 (5a)- You are doing a great job while on clinical. Refer to feedback given by preceptors this week and continue to work on building your confidence level. **AR**

Week 5 (5c,e)- Great job describing factors that create a culture of safety, and the use of standardized EBP. **FB**

Week 6-5(b) Great job assisting your classmate with changing a colostomy bag during clinical this week. **BSc**

Week 7- (5a) Katie, you are very thorough and are going to be a great nurse. Some areas for you to work on are your confidence, you have a lot of knowledge and can put all the pieces together. I can see you put the knowledge you have gained through school into practice. Try not to second guess yourself, you know what you are doing! Go into a patient's room with confidence and take care of them like a RN. You will never know everything, there is just too much to know, but you know enough to take great care of your patient. **FB**

Week 8/Make-up-5(b) This week you had the opportunity to watch your patient have a heart catheterization done while in clinical. I hope you enjoyed this experience and learned a lot as well. **BSc**

\*End-of- Program Student Learning Outcomes

**Objective**

6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	S	S	S	S	S	S	NA	S	S								
a. Establish collaborative partnerships with patients, families, and coworkers.																	
b. Teach patients and families based on readiness to learn and discharge learning needs.	NA	S	NA	S	S	NA	NA	S	S								
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes.	S	S	S	S	S	S	NA	S	S								
d. Deliver effective and concise hand-off reports.	NA	NA	NA	NA	S	NA	NA	S	S								
e. Document interventions and medication administration correctly in the electronic medical record.	NA	S	NA	S	S	S	NA	S	S								
f. Consistently and appropriately posts in clinical discussion groups.	S	S	S	S	S	S	NA	S NA	S								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								

**Comments:**

Week 2 (6f)- Excellent CDG posting related to Cardiac Diagnostics clinical experience. AR

Week 3 (6b,c)- Excellent CDG posting related to your Emergency Department clinical this week! Keep up the great work! (6f)- Excellent CDG postings related to this week's clinical experiences. AR

Week 4 (6c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical. (6f)- Excellent job with your CDG postings this week. Both were very thorough and complete! Keep up the great work! AR

Week 5 (6c)- Great job collaborating with health care team members to achieve optimal patient outcomes with a combative patient. FB

\*End-of- Program Student Learning Outcomes

Week 6-6(e) You did a great job overall with all of your documentation this week in clinical. There were minor areas in which we discussed that needed to be changed. Be sure to incorporate the feedback that was given in the weeks to come. BSc

Week 6-6(f) Great job with your CDG posting this week. BSc

Week 8/Make-up-6(f) This competency was changed to “NA” because you did not have to complete a clinical discussion group for your make-up clinical. BSc

Week 8/Make-up-6(e) Katie, you did an excellent job with all of your documentation this week in clinical. There was much improvement, and your hard work with this did not go unnoticed. Keep up the great work! BSc.

**Objective**

7. Devise methods utilized by nursing to develop the profession, advance the knowledge base, ensure accountability, and improve the outcomes of care delivery. (1,3,4,6,7,8)\*

Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	S	S	S	S	S	S	NA	S	S								
a. Value the need for continuous improvement in clinical practice based on evidence.	S	S	S	S	S	S	NA	S	S								
b. Accountable for investigating evidence-based practice to improve patient outcomes.	S	S	S	S	S	S	NA	S	S								
c. Comply with the FRMCSN “Student Code of Conduct Policy.”	S	S	S	S	S	S	NA	S	S								
e. Incorporate the core values of caring, diversity, excellence, integrity, and “ACE”- attitude, commitment, and enthusiasm during all clinical interactions.	S	S	S	S	S	S	NA	S	S								
<b>Faculty Initials</b>	<b>AR</b>	<b>AR</b>	<b>AR</b>	<b>FB</b>	<b>BSc</b>	<b>FB</b>	<b>BSc</b>	<b>BSc</b>	<b>BSc</b>								

**Comments:**

\*End-of- Program Student Learning Outcomes

Week 8/Make-up-7(e) Katie, you consistently demonstrate an “ACE” attitude during all your clinical interactions. You do an excellent job communicating with your patients and with other members of the health care team. You have a very calming, nurturing, and kind demeanor. You are very intelligent, and you are going to be an amazing nurse. Keep up your confidence going into the last 8 weeks of the semester. If you ever need anything, I am always here to help. BSc

Skills Lab Evaluation Tool  
AMSN  
2020

Skills Lab Competency Evaluation	Lab Skills									
	(1,3,4,6)*IV Start	3,4,5,6)* Blood Admin./IV Pumps	Delegation/Prioritization/	* Critical Care Meditech Document	3,4,5,6)*Physician Orders	(1,3,6,7)*Resuscitation	4,6)* Central Line/Blood Draw/Ports/IV Push	Assessment/Head to Toe	ents/CTECG/Telemetry	5,6)*ECG Measurements
	Date: 1/7/20	Date: 1/7/20	Date: 1/9/20	Date: 1/9/20	Date: 1/9/20	Date: 1/9/20	Date: 1/10/20	Date: 1/10/20	Date: 1/10/20	Date: 1/10/20
Performance Codes:  S: Satisfactory  U: Unsatisfactory										
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	AR/BS/ CP/BSc	FB	CP	FB	BS/BSc	AR	FB/CP	BS/BSc	BS/BSc	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

**\*Course Objectives**

**Comments:**

**IV Start:** Satisfactory participation in the IV Start lab, including practice with technique, initiation and discontinuation of IV site, and placement of IV dressing. AR/BS/CP/BSc

**Blood Admin/IV Pumps:** Satisfactory participation practice with blood administration safety checks. Great job with priming tubing, secondary IV medication pump set up, and the use of the IV drug dose library. FB

**Prioritization/Delegation:** You have successfully completed your skills lab for delegation and prioritization. You satisfactorily prioritized care for multiple patients using multiple methods (i.e. Maslow's hierarchy of needs, ABC, and ABCD methods). You were able to appropriately delegate nursing tasks based on the skill level and scope of practice for each member of your team. You actively participated in the group discussion on delegation of nursing tasks and your team shared several important factors to consider when delegating, including scope of practice and skill level of the delegate, nursing laws, facility policy, and condition of the patient. Great job! CP

**Meditech Documentation:** Satisfactory completion of assessment documentation including physical re-assessment, safety and fall assessment, RN mechanical ventilator assessment, IV location assessment, and documentation editing. Great job! FB

**Physician Orders:** Satisfactory completion of physician order labs utilizing SBAR communication and taking orders over the phone. Good job! BS/BSc

**Resuscitation:** Satisfactory participation in the practice of Hands-Only CPR, ventilation with bag- valve mask/Ambu bag, and review of crash cart and Code Blue team duties and documentation. AR

**Central Line Dressing Change:** Satisfactory central line dressing change using proper technique, as well as line flushing. FB

\*End-of- Program Student Learning Outcomes  
**Blood Draw, Ports:** You were satisfactory in accessing an Infusaport device. You also satisfactorily demonstrated proper technique for CVAD cap change and satisfactorily demonstrated how to draw blood from a CVAD per hospital policy. CP

**IV Push:** Great job with reconstitution of powder with NS, and medication administration. FB

**Head to Toe Assessment:** Satisfactory completion of Head to Toe Assessment. BS/BSc

Nursing Care Plan Grading Tool  
 AMSN  
 2020

Student Name: **Katie Darkow**

Clinical Date: **2/12/2020**

<b>Objective # 6:</b> Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	<b>Caregiver Role Strain R/T Unstable health condition</b>
<b>**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating</b>	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1)-1 Etiology (1)-1 Defining Characteristics (1)-1	Total Points: <b>3</b> Comments: <b>Katie, great job with your choice of a nursing diagnosis for your patient. I agree with you completely that the role strain she was experiencing as a caregiver was causing her to neglect her own health, ultimately leading to multiple unstable health conditions. Excellent job with your defining characteristics.</b>
Goal and Outcome (6 points total) Goal Statement (1 point)-1 Outcome: Specific (1)-1 Measurable (1)-1/2 Attainable (1)-1 Realistic (1)-1 Time Frame (1)-1	Total Points: <b>5.5</b> Comments: <b>Excellent job with your goal statement and outcomes. Looking at your last outcome statement "Displays improved coping skills and less anxiety." How could we measure this? This statement needs an example as to how we will be able to measure that her coping skills have improved and her anxiety has been reduced. Overall, you did an excellent job with this section.</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)-1/2 All pertinent interventions listed (1)-1	Total Points: <b>7.5</b> Comments: <b>Katie, great job with your nursing interventions. You listed all pertinent nursing interventions for your patient. I do feel that you could've added more detail for some of your rationales. There were a few that were too brief. You want to make sure you are being very specific as to why you are performing the interventions that you have chosen. In regards to your intervention related to administering Lasix, you timed this as PRN. This medication was actually ordered BID (0800, 1600). Overall, this section was very nicely done.</b>
Evaluation: (5 points total) Date (1)-1 Goal Met/partially/unmet (1)-1 Defining characteristics (1)-1/2 Plan to continue//modify/terminate (1)-1 Signature (1)-1	Total Points: <b>4.5</b> Comments: <b>Katie, nice job with your evaluation section. Remember, for your defining characteristics you want to be as specific as possible. Therefore, you would want to list what the patient's actual Hgb, blood glucose, and WBC levels were.</b>
Total possible points = 22 *End-of-Program Student Learning Outcomes 18-22 = Satisfactory care plan 17-14 = Needs improvement care plan <13 = Unsatisfactory care plan	Total Points for entire Care plan = <b>20.5/22</b> Comments: <b>Satisfactory care plan. Great job! BSc</b>

## Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Darkow, Souslin, Whitmore, Conley**      OBSERVATION DATE/TIME: **2/20/20**      SCENARIO #: **Dysrhythmias**

CLINICAL JUDGMENT						OBSERVATION NOTES
<p><b>COMPONENTS NOTICING: (1, 2, 5)*</b></p> <ul style="list-style-type: none"> <li>• Focused Observation:            E        <b>A</b>        D        B</li> <li>• Recognizing Deviations from Expected Patterns:            <b>E</b>        A        D        B</li> <li>• Information Seeking:            E        <b>A</b>        D        B</li> </ul>						<p>Team identifies patient and identifies self. Begins assessment, begins assessment. Cardiac monitor applied. Establishes orientation. Patient CO dizziness, reassured that medication was just given and should help. Rhythm change noticed.</p> <p>Team introduces members and identifies patient. Patient CO chest “jumping”. Orientation established. Cardiac monitor applied. Patient begins to cough during second bolus and CO SOB.</p> <p>Team enters, patient has no response, feels for pulse.</p>
<p><b>INTERPRETING: (2, 4)*</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data:                <b>E</b>        A        D        B</li> <li>• Making Sense of Data:            E        <b>A</b>        D        B</li> </ul>						<p>HR noted to be bradycardic. New rhythm interpreted as 3<sup>rd</sup> degree AV block. Interprets the need to transcutaneous pace.</p> <p>Rhythm interpreted to be A-fib. Team notices lowered BP. With bolus, team notices patient history of CHF and EF of 40% and auscultates lungs.</p>
<p><b>RESPONDING: (1, 2, 3, 5)*</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner:        <b>E</b>        A        D        B</li> <li>• Clear Communication:            E        <b>A</b>        D        B</li> <li>• Well-Planned Intervention/ Flexibility:                            <b>E</b>        A        D        B</li> <li>• Being Skillful:                      <b>E</b>        A        D        B</li> </ul> <p style="padding-left: 40px;">B</p>						<p>Call to physician to update on heart rate, suggests atropine with appropriate doses. Order received and read back. O2 applied. Atropine prepared and administered correctly. Fast patches applied.</p> <p>Patches applied and O2 administered. Call to physician to inform of A-fib with a recommendation for Cardizem bolus. Orders received for bolus and drip, read back. Cardizem bolus administered and drip initiated correctly. Call to physician with a suggestion for amiodarone. Suggestion for a fluid bolus (discussion regarding Cardizem being the cause of the lowered BP). Order received and read back. Fluid bolus of 250 prepared and administered. Lung sounds assessed. Another bolus administered. Bolus DC’d after patient begins to cough.</p> <p>Code called, CPR started immediately. Patches applied. Defibrillator charged, shock delivered, CPR, patient bagged, shock delivered, shock delivered, EPI administered, shock delivered (great job!)</p>

\*End-of- Program Student Learning Outcomes

<p><b>REFLECTING: (6)*</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis: <b>E</b>      A      D      B</li> <li>• Commitment to Improvement: <b>E</b>      A      D      B</li> </ul>	<p>Team discusses treatments for bradycardia and symptomatic bradycardia. Discussion of transcutaneous pacing, how to initiate it, and the probable need for pain medication. Pacing demonstrated. Discussion about bradycardia resulting in low cardiac output and resulting drop in BP. Also discussed prioritization of care as the scenario developed and the importance of teamwork.</p> <p>Team discussion about the common treatments for A-fib and prioritization of care for patients with A-fib. Nice job considering patient's history (CHF, EF 40%) when contemplating treatment. Synchronized cardioversion explained and demonstrated (also precautions, medications, indications).</p> <p>Team discussion about Code Blue scenario, difference between cardioversion and defibrillation. Medication alternative for EPI discussed (amiodarone). Team discussed noticing and responding appropriately.</p>
<p><b>SUMMARY COMMENTS:</b></p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p><b>Developing to accomplished is required for satisfactory completion of this simulation.</b></p>	<p><b>You are satisfactory for this simulation, great job!</b></p>

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

<b><u>vSim Evaluation</u></b>	<b>g)</b> Rachael Heidebrink	<b>acology)</b> Junetta Cooper	<b>acology)</b> Mary Richards	<b>Surgical)</b> Lloyd Bennett	<b>gical)</b> Kenneth Bronson	<b>macology)</b> Carl Shapiro
	<b>Date:</b> 2/14/20	<b>Date:</b> 2/28/20	<b>Date:</b> 3/13/20	<b>Date:</b> 3/20/20	<b>Date:</b> 3/26/20	<b>Date:</b> 4/9/20
Performance Codes:  S: Satisfactory  U: Unsatisfactory	<b>U</b>	<b>S</b>				
Evaluation	<b>U</b>	<b>S</b>				
Faculty Initials	<b>BSc</b>	<b>BSc</b>				
<b>Remediation:</b> <b>Date/Evaluation/</b> <b>Initials</b>	2/17/2020 <b>S</b> <b>BSc</b>					

\* Course Objectives

\*End-of- Program Student Learning Outcomes

**EVALUATION OF CLINICAL PERFORMANCE TOOL**  
**Advanced 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 & Date:

AR 12/20/19