

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2020

Firelands Regional Medical Center School of Nursing
Sandusky, Ohio

Student: Allyson Smith
Semester: Spring

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)
2/14/2020	2H	Missed vSim	2/17/2020 (2)
2/19/2020	4H	Called in sick for Cardiac Diagnostics	2/26/2020 (4H)
Initials	Faculty Name		
FB	Frances Brennan, MSN, RN		
CP	Carmen Patterson, MSN, RN		
AR	Amy Rockwell, MSN, RN		
BS	Brian Seitz, MSN, RN		
BSc	Brittany Schuster, BSN, RN		

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.

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
Competencies:	NA	S	S	NA	S	NA	NA	NA	S	NA	NA	S					
a. Manage complex patient care situations with evidence of preparation and organization.	NA	S	S	NA	S	NA	NA	NA	S	NA	NA	S					
b. Assess comprehensively as indicated by patient needs and circumstances.	NA	S	S	NA	S	NA	NA	NA	S	NA	NA	S					
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
d. Evaluate patient's response to nursing interventions.	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
e. Interpret cardiac rhythm; determine rate and measurements	NA	S	S	NA	NA	NA	S	NA	S	NA	NA	S					
f. Administer medications observing the six rights of medication administration.	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
g. Perform venipuncture skill with beginning dexterity and evidence of preparation.	NA	NA	S	NA	S	NA	S	NA	S	NA	NA	NA					
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc.	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					
Location/Clinical	No Clinical	Preceptorship4 P	Preceptorship4 P/ 4 C	ResQuality / Core	Infusion Center	Infusion Center	Infusion Center	Infusion Center	Infusion Center	Infusion Center	Infusion Center	Infusion Center					

Comments:

Week 6- Infusion Center preceptor comments: Excellent in all areas. confident and helpful. (1d)- Satisfactory Infusion Center clinical and discussion via CDG posting. Great job! AR

*End-of- Program Student Learning Outcomes

Week 8- Preceptor comments regarding Special Procedures clinical: Satisfactory in all areas: Busy day and started one IV; observed paracentesis, carotid angiogram, CT lung bx w/pneumothorax thyroid biopsy. Also observed CT scans and ultrasound. (1b,d)- Satisfactory in Special Procedures and Cardiac Diagnostics clinical and with discussion via CDG postings! AR

Week 11-1(a,b,c,d,f) Allyson, you proved that you are satisfactory with managing complex patient care situations with evidence of preparation and organization based on your performance with your virtual clinical ACS patient in the unfolding case study. Your critical thinking and clinical judgment proved your ability to assess comprehensively as indicated by the patient needs and circumstances throughout the case study, as well as evaluate your patient's response to the nursing interventions. You also showed respect for both the patient and the family's perspectives and values by identifying how the patient was feeling, as well as identifying teaching and learning needs for both the patient and her family. Satisfactory medication administration and cardiac rhythm interpretation with virtual case study. You did an excellent job identifying the relationship of your patient's past medical history with her current medications. You also did a great job correctly identifying the pharmacologic classification of each medication, as well as the expected outcome. Keep up all your great 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
Competencies:	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
a. Correlate relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills. CC (noticing, interpreting, responding)	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
b. Monitor for potential risks and anticipate possible early complications. CC (noticing, interpreting, responding)	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
c. Recognize changes in patient status and take appropriate action. (noticing, interpreting, responding)	NA	S	S	NA	S	NA	S	NA	S	NA	NA	S					
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (noticing, interpreting, responding, reflecting)	NA	NA	NA	NA	NA	NA	S	NA	S	NA	NA	S					
e. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)	NA	NA	NA	NA	NA	NA	S	NA	S	NA	NA	NA					
f. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. CC (noticing, interpreting, responding)	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					

Comments:

*End-of- Program Student Learning Outcomes

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

Week 8- 2e. See Clinical Simulation Rubric at the end of this document. AR

Week 11-2(a,b,c) Excellent job correlating relationships among disease process, patient's history, patient symptoms, and present condition utilizing clinical judgment skills in your virtual clinical experience with your ACS patient. Additionally, you proved that you were satisfactory with monitoring for potential risks and anticipating possible early complications, as well as recognizing changes in patient status and taking appropriate action. Specifically, you anticipated that the patient could possibly be experiencing AKI from her diagnosis of a STEMI, you then noticed and interpreted a change in all the patient's vital signs, lab values, and diagnostic testing correctly, and you responded by calling the physician to seek further treatment for the patient. Great job! BSc

Week 11-2(d) Satisfactory care plan. Please see the Care Plan Rubric at the end of this document for my feedback. Great job! BSc

Objective																	
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
Competencies:	NA	S	S	NA S	S	S	S	NA	S	NA	NA	S NA					
a. Critique communication barriers among team members (Preceptorship)																	
b. Participate in QI, core measures, monitoring standards and documentation.	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
c. Discuss strategies to achieve fiscal responsibility in clinical practice.	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
d. Clarify roles & accountability of team members related to delegation. (Preceptorship)	NA	S	S	NA S	S	S	S	NA	S	NA	NA	S NA					
e. Determine the priority patient from assigned patient population. (Preceptorship)	NA	S	S	NA S	S	S	S	NA	S	NA	NA	S NA					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					

Comments:

Week 5- Quality Department preceptor comments: Showed interest in my presentation; good participation. (3b)- Satisfactory discussion via CDG posting related to your Quality Department clinical experience. (3a,d,e)- Satisfactory for your final preceptorship day. AR

Week 6 (3c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Keep up the great work! AR

*End-of- Program Student Learning Outcomes

Week 11-3(b,c) Satisfactory documentation related to a STEMI with virtual case study on your ACS patient. Satisfactory participation in debriefing synchronous discussion in which we discussed strategies to achieve fiscal responsibility in clinical practice. Excellent job! 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
Competencies:	NA	S	S	NA	S	S	S	NA	S	NA	NA	S NA					
a. Critique examples of legal or ethical issues observed in the clinical setting.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
b. Engage with patients and families to make autonomous decisions regarding healthcare.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
c. Exhibit professional behavior in appearance, responsibility, integrity and respect.	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					

Comments:

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
Competencies:	NA	S	S	NA S	S	S	S	NA	S	NA	NA	S					
a. Reflect on your overall performance in the clinical area for the week.																	
b. Demonstrate initiative in seeking new learning opportunities.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc.).	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
d. Perform Standard Precautions.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
e. Practice use of standardized EBP tools that support safety and quality.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					

Comments:

Week 3: Objective 5a: Allyson, per your preceptor Kara on 1-21-20 – Excellent in all areas except Knowledge base, Collection/Documentation of Data, Delegation, and Establishment of Plan of Care (Satisfactory). Preceptor Comments: “Great first night; she was able to watch MET and care for one patient.” Per your preceptor Kara, on 1-23-20 – Satisfactory in all areas except Technical Skills, Collection/Documentation of Data, Professionalism and Attendance (Excellent). Preceptor Comments: “Inserted foley catheter and straight cath without flaw; confident in giving IVP meds; Great job. Per your preceptor Kara, Excellent in all areas except Knowledge base, Establishment of plan of care, and Delegation (Satisfactory). Preceptor Comments: “Successful IV insertion on first try! Just needs to move a little quicker with time management but overall does a great job.” Nice job Allyson! Keep up the great work! CP

Week 4: Objective 5a: Allyson per your preceptor Kara on 1-27-20 – Excellent in all areas except Knowledge Base, Establishment of Plan of Care, and Delegation (Satisfactory). Per your preceptor Kara on 1-29-20 – Excellent in all areas except Knowledge Base, Establishment of Plan of Care, and Delegation (Satisfactory). Nice job Allyson. CP

Week 5 (5a)- Preceptorship comments per Kara: Excellent in all areas except Knowledge Base, Establishment of Plan of Care, and Delegation (Satisfactory) Allyson was wonderful and always eager to learn and do new things; great rapport with patients’ families. Student Self-Goals: For the future, I hope to continue to better myself in time management! I also hope to improve in all of my skills as an RN. P.S. Kara is great and I had the best experience. Great job Allyson! AR

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
Competencies:	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
a. Establish collaborative partnerships with patients, families, and coworkers.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
b. Teach patients and families based on readiness to learn and discharge learning needs.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes.	NA	S	S	NA	S	S	S	NA	S	NA	NA	S					
d. Deliver effective and concise hand-off reports.	NA	S	S	NA	NA	NA	NA	NA	S	NA	NA	S					
e. Document interventions and medication administration correctly in the electronic medical record.	NA	S	S	NA	S	NA	NA	NA	S	NA	NA	S					
f. Consistently and appropriately posts in clinical discussion groups.	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					

Comments:

Week 3: Objective 6d: Allyson, you satisfactorily completed your Hand-off Report Competency with a score of 38/40. Nice job! CP

Week 5 (6f)- Satisfactory CDG postings related to Quality and Preceptorship. Keep up the great work. AR

Week 6 (6c,f)- Satisfactory CDG posting related to your Infusion Center clinical. Great job! AR

Week 7 (6c,f)- Satisfactory CDG posting related to your Patient Advocate/Discharge Planner clinical. Keep up the great work! AR

Week 8 (6f)- Satisfactory CDG postings related to Special Procedures and Cardiac Diagnostics. Keep up the great work! AR

Week 11-6(a,b,c,d) Satisfactory participation in synchronous debriefing discussion in which we discussed all of these competencies. Additionally, you proved to be satisfactory in each of these competencies with your virtual clinical experience as well. You collaborated with other members of the health care team, educated your patient and her family, and delivered effective and concise hand-off reports. Keep up all your great work! BSc

Week 11-6(e,f) Satisfactory documentation with virtual case study. Excellent job with your CDG as well! 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
Competencies:	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
a. Value the need for continuous improvement in clinical practice based on evidence.																	
b. Accountable for investigating evidence-based practice to improve patient outcomes.	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
c. Comply with the FRMCSN "Student Code of Conduct Policy."	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.	NA	S	S	S	S	S	S	NA	S	NA	NA	S					
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	BSc					

Comments:

Skills Lab Evaluation Tool
AMSN
2020

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

***Course Objectives**

Comments:

IV Start Lab: 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/BS

Blood administration/IV pump: 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/BS

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: Satisfactory central line dressing change using proper technique, as well as line flushing. FB

Ports/Blood Draw: 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: You are satisfactory for the head-to-toe assessment competency. Nice Job! BS

ECG/Telemetry/Chest Tube: Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches

*End-of- Program Student Learning Outcomes

ECG Measurements: Satisfactory participation in and practice of ECG measurements during the ECG Measurements Lab. You accurately measured and interpreted a 6-second rhythm strip for Normal Sinus Rhythm. Great job! AR

Nursing Care Plan Grading Tool

AMSN
2020

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	Acute Pain r/t tissue ischemia
*Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Clinical Date: 3/24-3/25/2020
Nursing Diagnosis: (3 points) Problem Statement (1)-1 Etiology (1)-1 Defining Characteristics (1)-1	Total Points: 3 Comments: Great job! Nursing diagnosis is appropriate for your patient. All defining characteristics are nicely done and specific as well.
Goal and Outcome (6 points total) Goal Statement (1 point)-1/2 Outcome: Specific (1)-1/2 Measurable (1)-1/2 Attainable (1)-1 Realistic (1)-1 Time Frame (1)-1	Total Points: 4.5 Comments: Great job! For your goal statement, remember that this is a positive statement of your nursing diagnosis. You simply just want to state "The patient will have improved pain." You do not need the related to statement. Looking at your outcome statements, be sure that these are specific and measurable. If you look at some of your outcome statements, you and I have no way of measuring them the same because they are not specific enough. For example, "Patient will appear relaxed/comfortable," how can this be rephrased so it is measurable? "Patient will deny any feelings of anxiety."
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)-1/2	Total Points: 7.5 Comments: Allyson, you did an excellent job with all your nursing interventions. My only feedback would be, do you think it would be appropriate to include a focused cardiovascular assessment every 4 hours for this patient?
Evaluation: (5 points total) Date (1)-1 Goal Met/partially/unmet (1)-1 Defining characteristics (1)-1 Plan to continue//modify/terminate (1)-1/2 Signature (1)-1	Total Points: 4.5 Comments: Allyson, your evaluation section of the care plan is very nicely done. However, you stated that you were going to modify your plan of care but did not give any modifications. Be sure to include what you are going to modify in your plan of care if you choose to modify it.
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 = 19.5/22 Comments: Satisfactory care plan. Please review all my feedback for areas that were done incorrectly, and refer to the Nursing Care Plan Guidelines. Please do not hesitate to reach out to me if you need further assistance and clarification. Great job! BSc

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

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

* Course Objectives

2/14/2020- You did not register for the AMSN 2020 class therefore your results were not visible to faculty. AR

2/17/2020- You correctly registered for the class and now your results are visible to faculty. AR

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: Gump, A Smith, Wright

OBSERVATION DATE/TIME: 2/27/20

SCENARIO #: Dysrhythmias

CLINICAL JUDGMENT COMPONENTS NOTICING: (1, 2, 5)* - Focused Observation: E A D B - Recognizing Deviations from Expected Patterns: E A D B - Information Seeking: E A D B	OBSERVATION NOTES Team enters and identifies patient, establishes orientation. Patient CO dizziness, being tired. Begins assessment and applies monitor. Patient noted to be bradycardic. Patient kept informed of plan of care. SpO2 noted to be low. Good education for patient. BP re-evaluated following atropine. Rhythm change noticed. Team enters and identifies patient, attaches monitor and begins assignment. Notices elevated HR. A-fib explained to patient. Following Cardizem initiation, BP noted to be low, patient CO being very dizzy. Patient coughing and SOB.
INTERPRETING: (2, 4)* - Prioritizing Data: E A D B - Making Sense of Data: E A D B	Rhythm initially noted to be sinus bradycardia. Rhythm change interpreted to be 2nd degree type II heart block. Rhythm interpreted to be a-fib. SOB interpreted to be sign of fluid overload. Crackles noted in lungs. Team enters and finds patient unresponsive.
RESPONDING: (1, 2, 3, 5)* - Calm, Confident Manner: E A D B - Clear Communication: E A D B - Well-Planned Intervention/ Flexibility: E A D B - Being Skillful: E A D B	O2 applied. Call to physician to give update and request medication to increase HR, suggests atropine, recommends correct dose. Atropine administered correctly. Fast patches applied. Call to physician to report rhythm change with suggestion to transcutaneous pace. Call to physician to report a-fib and palpitations, suggests amiodarone or diltiazem (good catch, this is a CCB but after 12 years this would be ok). Correct doses provided. Orders received and read back. Fast patches applied. Diltiazem (Cardizem) bolus prepared and administered correctly, drip initiated. Cardizem concentration discussed. Call to physician to report hypotension and patient complaints of palpitations and dizziness. Fluids suggested, physician asks how to administer. Bolus suggested. Order received and read back. Bolus administered. Fluids stopped. Call to physician, history reveals CHF and EF of 40%. Code blue called. CPR initiated. 1 mg EPI, fast patches applied, defibrillator charged and shock delivered, resume CPR, defibrillator charged, shock delivered, EPI. Another drug used in this situation is amiodarone (300 mg bolus, 150 mg bolus, drip)

*End-of- Program Student Learning Outcomes

REFLECTING: (6)* • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B	Team discussion of the treatments for bradycardias and symptomatic bradycardias. Discussion on recognizing the differences between the various heart blocks. Discussion and demonstration of transcutaneous pacing and the need to control pain through the process, also the fact that this is often followed by placement of a trans-venous pacemaker until a decision is made to determine the need for a permanent one. Discussion of the recognition of a-fib with RVR and its effect on HR and cardiac output, as well as associated symptoms. Medications to treat a-fib were discussed, including Cardizem (diltiazem- to decrease ventricular rate) and amiodarone. If medications are unsuccessful, another option is to perform a synchronized cardioversion. Synchronized cardioversion demonstrated. The importance of sedation for this procedure discussed. Code blue scenario and priority of care discussed. Important to immediately; call code, CPR, attach pads and defibrillate, EPI (q 3 min). Another medication option is amiodarone. The importance of teamwork was also discussed.
SUMMARY COMMENTS: E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric Developing to accomplished is required for satisfactory completion of this simulation.	You are satisfactory for this simulation, good job!

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

*End-of- Program Student Learning Outcomes