

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	NA																
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	S	S	NA	S	NA	S	S	NA	S	S	S	S		
a. Manage complex patient care situations with evidence of preparation and organization.	NA	S	S	S	S	NA	S	NA	S	S	NA	S	S	S	S		
b. Assess comprehensively as indicated by patient needs and circumstances.	NA	S	S	S	S	NA	S	NA	S	S	NA	S	S	S	S		
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care.	NA	S	S	S	S	NA	S	NA	S	S	NA	NA	S	NA	S		
d. Evaluate patient's response to nursing interventions.	NA	S	S	S	S	NA	S	NA	S	S	NA	S	S	S	S		
e. Interpret cardiac rhythm; determine rate and measurements	NA	NA	NA	NA	S	NA	S	NA	S	NA	NA	S	NA	S	S	NA	
f. Administer medications observing the six rights of medication administration.	NA	S	S	S	S	NA	S	NA	S	NA	NA	NA	NA	NA	S		
g. Perform venipuncture skill with beginning dexterity and evidence of preparation.	NA	NA	NA	S	S	NA	NA	NA	S	S	NA	NA	NA	NA	NA		
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc.	NA	S	S	S	S	NA	S	NA	S	NA	NA	NA	NA	NA	S		
Faculty Initials	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	FB	AR	FB	BSc		
cationClinical	NONE TIL 1/18	3T	3T/N	3T/QC/S	SP/CD	NO CLINICA	PD/SIM			DH		Virtual Case	ED VIRTUAL	SEPSIS	RESP FAIL		

Comments:

My preceptorship begins on 1/18.

Week 5 (1d)- Satisfactory discussion via CDG posting related to your Infusion Center clinical. AR

*End-of- Program Student Learning Outcomes

Week 6- Comments per Special Procedures preceptor: Excellent in all areas. Several IV starts w/lab draw; observed fistula gram, barium swallow; interacted well with patients. Comments per Cardiac Diagnostics preceptor: Excellent in all areas. Crystal was an excellent student; she was very attentive and involved all day; she was able to perform all tasks with the RN; she was not able to see a cardioversion d/t a patient already being in sinus. (1b,d)- Satisfactory discussion via CDG posting for Special Procedures and Cardiac Diagnostics clinical experiences. Great job! AR

Week 9 (1g)- Great job with all IV skills during your Digestive Health clinical experience! Keep up the great work! AR

Week 11- Crystal, great job demonstrating the management of patient care through a virtual clinical case study of a patient with an ACS/MI scenario, you provided a lot of detail and the use of clinical judgement skills. FB

Week 12 (1a,b)- Outstanding completion of these competencies via virtual Emergency Department clinical assignment! AR

Week 13 (1a,d)- Great job with participation in synchronous discussion regarding care management and nursing interventions provided for a sepsis patient. FB

Week 13 (1e)- Satisfactory completion of ECG interpretations as per ECG Monitoring Basics booklet assignment. AR

Week 14-1(a,b,c,d,f) Crystal, 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 respiratory 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 his family. Satisfactory medication administration with virtual case study, and synchronous discussion in which we discussed this competency. You did an excellent job identifying the relationship of your patient's past medical history with his 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

Week 14-1(h) Satisfactory participation in synchronous discussion in which we discussed this competency related to your respiratory patient. 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	S	S	NA	S	NA	S	NA	NA	S	S	S	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	S	S	NA	S	NA	S	NA	NA	S	S	S	S		
b. Monitor for potential risks and anticipate possible early complications. CC (noticing, interpreting, responding)	NA	S	S	S	S	NA	S	NA	S	NA	NA	S	S	S	S		
c. Recognize changes in patient status and take appropriate action. (noticing, interpreting, responding)	NA	S	S	S	S	NA	S	NA	S	NA	NA	S	S	S	S		
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (noticing, interpreting, responding, reflecting)	NA	S	S	S NA	NA	NA	NA	NA	S	NA	NA	NA	NA	S	NA		
e. Development of clinical judgment in high-fidelity simulation scenarios. (Noticing, Interpreting, Responding, Reflecting)						NA	S	NA	S					S			
f. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. CC (noticing, interpreting, responding)	NA	S															
Faculty Initials	CP	CP	CP	AR	FB	AR	FB	BSc									

Comments:

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) Great job with pathophysiology CDG, correlating the disease process, signs and symptoms, potential risks, and using clinical judgement skills as you worked through the scenario. FB

Week 12 (2b,c)- Week 12 (1a,b)- Outstanding completion of these competencies via virtual Emergency Department clinical assignment! AR

Week 13 (2 b,c,d)- Great participation noted in synchronous discussion in regards to potential risks, early complications, changes in patient status, and providing appropriate nursing diagnosis. Satisfactory completion of nursing care plan, see nursing care plan rubric below. FB

*End-of- Program Student Learning Outcomes

Week 14-2(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 respiratory 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 going into respiratory failure from a diagnosis of pneumonia, 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 (intubation) for the patient. Great job! BSc

Week 14-2(f) Crystal, excellent job with ABCDEF bundle. You did a great job applying all the tools of the bundle with the patient. The use of any sedating medication can cause delirium in a patient, which can then follow with a wide variety of medical issues. You did a great job using the bundle assessments to assist with clinical judgement skills. 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	S	S	NA	S	NA	S	NA	NA	NA	S	S	S		
a. Critique communication barriers among team members (Preceptorship)															NA		
b. Participate in QI, core measures, monitoring standards and documentation.	NA	S	S	S	S	NA	S	NA	S	NA	NA	NA	NA	NA	NA		
c. Discuss strategies to achieve fiscal responsibility in clinical practice.	NA	S	S	S	S	NA	S	NA	S	S	NA	NA	S	S	S		
d. Clarify roles & accountability of team members related to delegation. (Preceptorship)	NA	S	S	S	S	NA	S	NA	S	NA	NA	NA	S	NA	NA		
e. Determine the priority patient from assigned patient population. (Preceptorship)	NA	S	S	S	S	NA	NA	NA	S	NA	NA	NA	NA	S	NA		
Faculty Initials	CP	CP	CP	AR	FB	AR	FB	BSc									

Comments:

Week 5 (3b,c)- Satisfactory discussions via CDG postings related to Quality Department and Infusion Center clinical experiences. AR
 Week 11- (3c)-Great job participating in the synchronous debriefing for this competency. FB

*End-of- Program Student Learning Outcomes

Week 14-3(b) Satisfactory documentation related to Pneumonia with virtual case study on your respiratory patient. 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	S	S	NA	S	NA	S	S	NA	NA	NA	NA	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	S	S	S	S	NA	S	NA	S	S	NA	NA	S	S	S		
c. Exhibit professional behavior in appearance, responsibility, integrity and respect.	NA	S	S	S	S	NA	S	NA	S	S	NA	NA S	S	S	S		
Faculty Initials	CP	CP	CP	AR	FB	AR	FB	BSc									

Comments:

Week 11 (4c) This competency was changed because even though we are doing all things virtual at this time, professional behavior is also exhibiting by handing assignments in on time and being able to be flexible during this uncertain time. FB

Week 14-4(a) Satisfactory participation in synchronous discussion in which we discussed this competency. BSc

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

Comments:

Week 3: Objective 5a: Crystal, per your preceptor Tiffany on 1-18-20, satisfactory in all areas except communication skills and professionalism (Excellent).

Preceptor Comments: “Works well with all staff and has excellent communication skills when talking to patients; assertive in asking questions to clarify information as needed.” Keep up the great work! CP

Week 3: Objective 5a: Per your preceptor Stephanie on 1-23-20, satisfactory in all areas except technical skills and collection/documentation of data (Needs Improvement). Preceptor Comments: “Time management improved; patients were a little more low key tonight; she was more independent in charting.” CP

Week 4: Objective 5a: Crystal, per your preceptor Stephanie on 1-27-20 – Satisfactory in all areas except Knowledge Base, Professionalism, and Attendance (Excellent) and Delegation (Needs Improvement). Preceptor Comments: “Student did well jumping in during the middle of the shift. **Patient care was again outstanding**; student getting more comfortable with med passes.” Instructor comment: Due to limited opportunities to delegate, it may take more time to become more comfortable and confident with delegating. If there is anything I can do to assist you, please do not hesitate to let me know! Keep up the great work in all other areas! CP Per your preceptor Stephanie on 1-29-20 – Excellent in all areas except Technical Skills, Collection/Documentation of Data, and Delegation (Satisfactory). Preceptor Comments: “Continues to have great bedside manner; charting and med pass improving. Shows increased confidence.” Nice work Crystal! CP

Week 5 (5a)-Preceptor comments per Stephanie: – Excellent in all areas except Delegation (Satisfactory). She did a fantastic job; I enjoyed watching her growth; Crystal is always offering help; not asking for help is why she got satisfactory in delegation. If it came down to it, she would ask for help as able. Student Self-Goals: Be more confident in my abilities. Preceptor comments per Tiffany: – Excellent in all areas. Crystal did a great job and has grown since the first clinical day; she has a wonderful bedside manner and will be a fantastic nurse; good luck Crystal! Student Self-Goals: Tie it all together. Great job Crystal. CP/AR

Week 14-5(c,e) Excellent participation this week in our synchronous discussion in which we discussed both of these competencies related to your respiratory patient. You also did an excellent job utilizing the ABCDEF Bundle for your assigned patient to support safety and quality. BSc

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

Comments:

Week 4: Objective 6d: Crystal, you successfully complete the Hand-off Report Competency with a 38/40, nice job! CP

Week 5 (6c,f)- All content provided in your CDG postings this week were satisfactory, however according to the CDG Grading Rubric you have received a U due to the following: Your Infusion Center CDG did not include an in-text citation or a reference. Be sure to follow the directions at the beginning of this tool in order to address this U for Week 6. AR

Week 6 – I apologize for my oversight regarding the in-text citation. I will ensure that each week an in-text citation is complete prior to submitting it for grading by performing a check list of the rubric. CIngersoll Thank you Crystal. (6f)- Satisfactory CDG postings for Special Procedures and Cardiac Diagnostic clinical experience. Keep up the great work! AR

*End-of- Program Student Learning Outcomes

Week 8 (6c,f)- Satisfactory Patient Advocate/Discharge Planner clinical and CDG posting. Preceptor comments: Satisfactory in all areas except Actively engaged in the clinical experience (Excellent). Here at 0800; stayed until we were finished at 1245; able to attend a readmission meeting; asked lots of thoughtful, intuitive questions. AR

Week 11 (6 a,b,c,d)- Great job participating in the synchronous online debriefing discussion. FB

Week 11- (6f) Excellent job with your CDG post and following all guidelines per the CDG rubric. FB

Week 12 (6b,c,d,f)- Outstanding completion of these competencies via virtual Emergency Department clinical assignment and online discussion! Keep up the incredible work! AR

Week 13 (6f)- Great job participating in the synchronous debriefing discussion and posting appropriately in the weekly discussion post, following the CDG rubric. FB

Week 14-6(a,b,c,d) You proved to be satisfactory in each of these competencies with your virtual clinical experience. You collaborated with other members of the health care team, educated your patient and his family, and delivered effective and concise hand-off reports. Keep up all your great work! BSc

Week 14-6(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	NA	S	NA	S	S	NA	S	S	S	S		
a. Value the need for continuous improvement in clinical practice based on evidence.	NA	S	S	S	S	NA	S	NA	S	NA	NA	S	S	S	S		
b. Accountable for investigating evidence-based practice to improve patient outcomes.	S	S	S	S	S	S	S	NA	S	S	S	S	S	S	S		
c. Comply with the FRMCSN "Student Code of Conduct Policy."	NA	S	S	S	S	NA	S	NA	S	S	NA	S	S	S	S		
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions.	CP	CP	CP	AR	AR	AR	AR	AR	AR	AR	AR	FB	AR	FB	BSc		

Comments:

*End-of- Program Student Learning Outcomes

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
Performance Codes: S: Satisfactory U: Unsatisfactory	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	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/BSc

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 participation in review of Chest Tube/Atrium tutorial. BS/BSc

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

Student Name: **Crystal Ingersoll**

Clinical Date: **4/8/2020**

Objective # 6: Develop patient-centered plans of care utilizing the nursing process. (3,4,5,6,7)*	
**Nursing care plan not appropriate to patient situation = 0 and automatic unsatisfactory rating	Total Points Comments
Nursing Diagnosis: (3 points) Problem Statement (1) Etiology (1) (0) Defining Characteristics (1)	Total Points 2 Comments: Nursing diagnosis is appropriate. The etiology should be the cause not the factors that contribute. For example: Fluid volume deficit r/t decreased intravascular, interstitial, and intracellular fluid would be correct way of stating the nursing diagnosis statement.
Goal and Outcome (6 points total) Goal Statement (1 point) Outcome: Specific (1) Measurable (1) Attainable (1) Realistic (1) Time Frame (1)	Total Points 6 Comments: Great job providing a generalized goal statement and all outcomes followed the SMART acronym.
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: Nice job providing all relevant nursing interventions. Nursing interventions were prioritized, individualized, realistic, and rationales were provided for all interventions.
Evaluation: (5 points total) Date (1) Goal Met/partially/unmet (1) Defining characteristics (1) Plan to continue//modify/terminate (1) Signature (1)	Total Points 5 Comments: Great job with evaluation all aspects of the evaluation are present with each defining characteristic addressed.
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 = 21 Comments: Satisfactory completion of nursing care plan. FB

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

vSim Evaluation	Rachael Heidebrink	Junetta Cooper	Mary Richards	Lloyd Bennett	Kenneth Bronson	Carl Shapiro
Performance Codes: S: Satisfactory U: Unsatisfactory	U	S	S	S	S	S
Evaluation	U	S	S	S	S	S
Faculty Initials	AR	AR	AR	AR	FB	FB
Remediation: Date/Evaluation/ Initials	2/17/2020 S AR	NA	NA	NA	NA	NA

* Course Objectives

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Toole, Ingersoll, O'Dell, Snyder** OBSERVATION DATE/TIME: **2/27/20** SCENARIO #: **Dysrhythmias**

CLINICAL JUDGMENT					OBSERVATION NOTES
<p>COMPONENTS NOTICING: (1, 2, 5)*</p> <ul style="list-style-type: none"> • Focused Observation: E A D B • Recognizing Deviations from Expected Patterns: E A D B • Information Seeking: E A D B 					<p>Team enters and identifies patient, establishes orientation. Patient CO being tired. HR noted to be low. HR and BP decreasing. Patient vomits. HR noted to be changing. Another rhythm change noted.</p> <p>Team enters and identifies patient. Patient CO dizziness, palpitations. Monitor applied. Patient kept informed following call to physician. Nice job engaging with and educating patient. Recheck VS following Cardizem (BP noted to be low). BP rechecked following bolus. Patient CO SOB and coughing.</p> <p>Team enters and finds patient unresponsive.</p>
<p>INTERPRETING: (2, 4)*</p> <ul style="list-style-type: none"> • Prioritizing Data: E A D B • Making Sense of Data: E A D B 					<p>Rhythm interpreted to be sinus bradycardia. Rhythm interpreted correctly as being a heart block -2nd degree, mobitz 2. Another change- interpreted as a 3rd degree block.</p> <p>Rate noted to be tachycardic. Rhythm interpreted to be a-fib. Team suspecting fluid overload.</p>
<p>RESPONDING: (1, 2, 3, 5)*</p> <ul style="list-style-type: none"> • 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 					<p>Patient questioned about her typical heart rate. Monitor applied, patches applied. Call to physician to give update, suggests atropine to increase HR and IV fluid. Order for fluid bolus and maintenance, and atropine. Orders read back. Bolus initiated, atropine prepared and administered. BP reevaluated. Call to physician to inform of complete heart block, suggestion to transcutaneous pace, EPI.</p> <p>Monitor applied in response to symptoms. O2 applied. Fast patches applied. Call to physician to report a-fib and request amiodarone, then Cardizem. Physician asks for dosing information, which is supplied. Orders received and read back. Cardizem bolus prepared and administered correctly. Cardizem drip initiated (discussion of Cardizem concentration). Call to physician to update and request fluid bolus to raise BP. Order received for bolus and to decrease Cardizem, orders read back. Fluids put on hold in</p>

*End-of- Program Student Learning Outcomes

	<p>response to crackles. Call to physician with suspicion of PE, fluid overload, HF. Physician asks for suggestion.</p> <p>Code blue called immediately, CPR, patches applied, defibrillator charged and shock delivered, CPR, EPI (q 3 min), shock delivered, CPR. Amiodarone can also be given (300 mg, 150 mg [IVP] followed by a drip.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D <p style="padding-left: 40px;">B</p>	<p>Team discussion of treatments for symptomatic bradycardias. Discussed what happens electrically and hemodynamically as rhythm progressed from sinus bradycardia to eventual complete heart block. Medications used to treat bradycardias discussed (atropine, EPI of dopamine drip). Prioritization of care discussed. Transcutaneous pacing discussed and demonstrated (also that this would be temporary and likely would be replaced by a trans venous pacer until the need for a permanent device is determined). Need for pain control also discussed.</p> <p>Discussed goals of Cardizem therapy and its potential to lower BP. Given the symptoms, fluid was indicated, but remember the importance of considering history when determining amount of bolus. Discussion and demonstration of synchronized cardioversion. Also discussed the need for sedation/pain control.</p> <p>Code blue scenario discussed. Discussed the importance of immediately; calling the code, beginning CPR, defibrillation, EPI q 3 min. Also discussed amiodarone as an alternative medication during a code blue.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning</p> <p>Based off of Lasater’s Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>You are satisfactory for this simulation, good job!</p>

Lasater Clinical Judgment Rubric Scoring Sheet: AMSN

Objectives

1. Assessment of ACS/STEMI, HF, and Atrial Fibrillation from pre-hospital to discharge. (1,6)*
2. Initiate treatment protocols for ACS/STEMI, HF, and Atrial Fibrillation. (1,6)*
3. Collaborate and communicate with interdisciplinary health care providers while transitioning from pre-hospital to discharge. (1,2,6)*
4. Summarize the nursing implications for medications and treatments utilized in the care of patients with ACS/STEMI, HF, and Atrial Fibrillation. (1,3,5,6,7)*

DATE: 4/9/2020

Comprehensive Simulation

CLINICAL JUDGMENT					OBSERVATION NOTES
NOTICING: (2,6)*					
• Focused Observation:	E	A	D	B	Recognized Afib and impending heart failure and suggested appropriate therapies for both conditions.
• Recognizing Deviations from Expected Patterns:	E	A	D	B	Recognized the different medical diagnosis and past medical history that needed to be considered when developing a discharge care plan.
• Information Seeking:	E	A	D	B	Recognized the association between patient history, including non-compliance, and current findings. Recognized the appropriate use of MONAH, fluid resuscitation, diuretics, and potassium use for the inferior wall MI patient. Recognized the necessary components of assessment for the post Inferior STEMI patient upon return from the cardiac cath lab. Recognized the appropriate patient information pertinent to communication with oncoming nurse following SBAR.
INTERPRETING: (1,2,3,6)*					
• Prioritizing Data:	E	A	D	B	Interpreted data well. Upon reviewing the patient's chart/ECG, Afib was noticed and interpreted to be a priority. When reviewing patient's symptom upon arrival to the Critical Care Unit, symptoms were interpreted to indicate heart failure/fluid overload.
• Making Sense of Data:	E	A	D	B	

*End-of- Program Student Learning Outcomes

	Interpreted current diagnosis and past medical history and determined the need for education on current and past health issues as well as lifestyle modifications. Interpreted the areas affected by an inferior wall MI and artery responsible for this particular MI.
RESPONDING: (1,5,6)* <ul style="list-style-type: none"> • 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 <li style="padding-left: 20px;">B 	<p>Multiple dosage calculations performed accurately. Appropriate medications were chosen to treat Afib and heart failure/fluid overload. Potassium level was noted and the need to give supplemental K+ along with furosemide was recognized. Very good job!</p> <p>Able to identify ways to help improve the patient’s ability to be compliant with new medications after discharge.</p> <p>Discussed several topics related to lifestyle modification including diet/exercise, rest, blood pressure, weight management, incision care, symptom recognition as well as response to symptoms, compliance with follow-up appointment and medications, medication storage, and regular communication with physician. Active engagement verbally and via chat feature during online debriefing session.</p> <p>Discussed the necessary components to include during change of shift hand-off report utilizing SBAR.</p>
REFLECTING: (4,6)* <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B • Commitment to Improvement: E A D B 	<p>Able to identify new knowledge obtained through the virtual simulation and how to apply to future patient care scenarios.</p> <p>Acknowledged the importance of customizing teaching to accommodate patient lifestyle.</p> <p>Asked appropriate questions to gain understanding of information provided.</p>
<p>Developing to accomplished in all areas is required for satisfactory completion of this simulation.</p>	<p>Comments:</p> <p>Overall fantastic job with the STEMI Comprehensive Simulation.</p>

E = exemplary, A = accomplished, D = developing, B = Beginning
Based off of Lasater’s Clinical Judgment Rubric
*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