

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2021

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
Brittany Lombardi, MSN, 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 in the comment section by the faculty member with the rationale for the evaluation. All competencies must be rated a "S, NI, U, or NA". 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, it must be addressed with a comment as to why it is no longer a "U" the following week. If the student does not state why the "U" is corrected, 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 or needs improvement 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 or needs improvement 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
ABCDEF Bundle Grading Rubric
Pathophysiology Grading Rubric

ABSENCE (Refer to Attendance Policy)

Date	Number of Hours	Comments	Make Up (Date/Time)
1/15/2021	1H	Didn't complete Scavenger Hunt CDG	1/19/2021/1H
1/19/2021	6H	Unable to attend SP clinical	Sch: 2/23/2021
2/12/2021	2H	Did not register for vSim on time	2/22/2021 2H
Initials	Faculty Name		
FB	Frances Brennan, MSN, RN		
CP	Carmen Patterson, MSN, RN		
AR	Amy Rockwell, MSN, RN		
BS	Brian Seitz, MSN, RN		
BL	Brittany Lombardi, MSN, 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.

Grey shaded weekly competency boxes do not need a student evaluation rating or faculty/teaching assistant initials.

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	NA	NA	S	S	S											
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	NA	NA	NA	S	S	S											
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	NA S	NA	S	S	S	S											
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	S	NA	S	S	S	S											
d. Evaluate patient's response to nursing interventions. (Reflecting)	NA	NA	S	S	S	S											
e. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	NA	NA	NA	S	S	S											
f. Administer medications observing the six rights of medication administration. (Responding)	NA	NA	NA	S	S	S											
g. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	NA	NA	S	NA	NA	S NA											
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. (Responding)	NA	NA	NA	S	S	S											
Faculty Initials	AR	AR	AR	BS	BS	BL											
Clinical Location					4C	4P											

Comments:

Week 2 (1b)- Satisfactory discussion of this competency via CDG posting related to your Cardiac Diagnostics clinical experience. AR

*End-of- Program Student Learning Outcomes

Week 4- Comments per Infusion Center Preceptor: Excellent in all areas. “Started IV and great helper; eager to learn.” (1d)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Keep up the great work! AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Week 5- 1a,b,f- Nice job assessing and caring for your Critical Care patient this week. BS

Week 6- 1a-f- Good job this week of caring for your patient. You were able to observe several procedures and see the importance of teamwork, especially when the patient’s condition is changing. Nice job with medication administration while observing the six rights. BS

Week 7-1(a-f, h) Katlyn, you did an excellent job taking care of your patient this week while managing complex care situations. Your care was very organized and timely. You did a great job prioritizing your cardiac assessment for this patient, and monitoring her heart rhythm and blood pressure very closely. You had excellent communication with the patient and respected her values. You also did a great job interpreting her cardiac rhythm strip, as well as responding appropriately to equipment alarms. Your medication pass was very well done, and you were able to administer PO and SubQ medications, as well as hang IV maintenance fluids following the 6 rights of medication administration. Keep up all your great work! BL

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	NA	NA	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	NA	NA	S	S	S											
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	S											
c. Recognize changes in patient status and take appropriate action. (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	S											
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. CC (Noticing, Interpreting, Responding, Reflecting)	NA	NA	NA	NA	S	NA											
e. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. CC (Noticing, Interpreting, Responding)	NA	NA	NA	S U	NA S	NA											
Faculty Initials	AR	AR	AR	BS	BS	BL											

Comments:

Week 5- 2e- Please review the rubric for your ABCDEF bundle. I will need you to provide some additional information. It does not need to be redone, it just needs some more information to be complete. Please read the feedback and email me the additional information by 2/10/21 at 0800. BS Also, a suggestion for the future would be to proof-read your writing assignments before turning them in to reduce the number of grammatical errors. BS

Week 6- 2d,e- Care Plan was completed at a satisfactory level. Additional information was added to your ABCDEF bundle, which is now satisfactory as well. BS

Week 7-2(a) Katlyn, you did an excellent job with your pathophysiology in which you addressed this competency. Your pathophysiology was very detailed and well done. It was clear that you spent a substantial amount of time on this assignment. Please see the Pathophysiology Grading Rubric at the end of this document for my feedback. BL

Week 7-2(b,c) You did an excellent job with both of these competencies this week in the clinical setting, as well as discussing them in debriefing also. BL

*End-of- Program Student Learning Outcomes

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

Comments:

Week 2 (3b)- Active participation in Quality Scavenger Hunt clinical. AR

Week 4 (3c)- Satisfactory discussion via CDG posting related to Infusion Center clinical. Keep up the great work! AR

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	NA	NA	S	S	S											
a. Critique examples of legal or ethical issues observed in the clinical setting. (Interpreting)	NA	NA	NA	S	S	S											
b. Engage with patients and families to make autonomous decisions regarding healthcare. (Responding)	NA	NA	NA	S	S	S											
c. Exhibit professional behavior in appearance, responsibility, integrity and respect. (Responding)	S	NA	S	S	S U	S U											
Faculty Initials	AR	AR	AR	BS	BS	BL											

Comments:

Week 5- 4a- Good participation during post-conference as you were able to discuss a legal/ethical issue your observed in the clinical setting. BS

Week 6- 4c- You received a U here for showing up to clinical without your student ID badge. You were able to find it in your car, but had to leave the clinical floor to do so. Please respond below as to how you will prevent this from happening in the future. BS

I will make sure my badge is in my bag. I thought it was in there but must of fell out of the bag and into my car. I always have my badge with me and that was the first time it was not in that bag. **Thank you! BL**

Week 7-4(c) Katlyn, unfortunately I did have to change this competency to a “U” again for this week as it relates to responsibility because you did not have your glucometer ID number accessible during clinical. Your patient was a diabetic and needed finger sticks checked, therefore, I had to put my information in so you could utilize the glucometer. Going forward, please be sure to have this ID number readily accessible. You can reach out to Amy Rockwell if you are unable to find your ID number. Please let me know if you have any questions, and remember to address this “U” on your clinical tool for Week 8. BL

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:	S	NA	S	S	S	S											
a. Reflect on your overall performance in the clinical area for the week. (Responding)																	
b. Demonstrate initiative in seeking new learning opportunities. (Responding)	S	NA	S	S	S	S											
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc. (Interpreting)	NA	NA	NA	S	S	S											
d. Perform Standard/Standard Plus Precautions. (Responding)	S	NA	S	S	S	S											
e. Practice use of standardized EBP tools that support safety and quality. (Responding)	NA	NA	NA	S	S	S											
f. Utilize faculty feedback to improve clinical performance. (Responding & Reflecting)	S	NA	S	S	S	S											
Faculty Initials	AR	AR	AR	BS	BS	BL											

Comments:

Week 2: 5A- I felt I learned a lot from Kathy Mulvin and the staff in cardiac diagnostics. I was able to ask questions and feel I have gained knowledge from this clinical to help in future lecture. **AR**

5B- I was able to learn about stent placement by asking the RN questions about the procedure and was able to identify the balloon and the stent on the film. **AR**

Comments from Preceptor: Excellent in all areas. "Cath flipped to stent, lexiscan, bubble study, observed EEG, learned anatomy of heart, conduction, flow, and reviewed stress tests". **AR**

Week 4- I learned so much from the team at the infusion center. Mary worked with me and let me start an IV. I was able to start the IV and it was patent. That was exciting for me because I did not get an IV in lab. I was able to access a port as well. I am so grateful for every opportunity at the infusion center. If they asked if I wanted to do something I jumped at the chance to try something new.

Week 5- ICU seemed to be a very different atmosphere then a medical surgical unit. I learned a lot the first day from Sami and learned quickly the second day how much time and responsibility goes into one patient. There is a lot of time management that is needed to take care of these patients. I feel I really need more work with

*End-of- Program Student Learning Outcomes

the IV pumps and administering meds through IV. I had issues with that this week, but this was the first week I have actually been able to perform that task. I learned not to get into a rush because that's when things get messed up as well. Good observations Katelyn. You will get more experience with this in the weeks to come. BS
Week 5- 5c,e- Great job reflecting on your first week in the ICU and good discussion of the use of standardized EBP tools that support safety and quality during post-conference. BS

Week 6a- I felt this week went much better than last other than miss placing my badge. I felt more confident performing tasks and care the second day with a vented patient. I learned a lot and how the ICU team collaborates for stat procedures. I felt I communicated well with the bedside nurse as well as the other student nurse I was working with. I felt unsure how to give meds this week due to the patient having an OG tube. That was the first time I performed that task as well. There were a lot of first this week.

Week 6- 5a,b,c- Nice job this week. As you described, you were able to do some things for the first time this week. You were also able to witness a few bedside procedures being performed. Good job! BS

Week 7a- I felt this patient was not as busy as my previous patients and felt I was able to handle the situation well. I did feel that at times I was not sure how I could help the patient or my classmates in my downtime. I felt my patient needed time to rest and I kept checking on her, but I feel that doesn't happen often when you have more than one patient to care for at a time. I feel I communicated well this week with the nurse and was able to help her with the pre op check list by helping her get fluids running before the patient left for surgery. You did a great job this week, Katlyn! Yes, there are going to be times when you just need to let the patient rest and that is totally fine. You did a great job making use of your down time by looking information up in your patient's chart, and checking in with me to see if there were any other learning opportunities available for you. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

Comments:

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

Week 3 (6f)- Satisfactory CDG posting related to Scavenger Hunt clinical experience. AR

Week 4 (6c,f)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Keep up the great work! AR

Week 5- 6e- Good job with documentation this week. You will be getting plenty of practice throughout the semester. BS

Week 6- 6a,b,c- Nice job working collaboratively with the nursing staff and with your fellow students. Nice job with documentation this week. BS

Week 7-6(e) Excellent job with all your documentation this week in clinical! Your documentation was done in a timely manner and accurate. Keep up the great work! BL

Week 7-6(f) Excellent job with your Pathophysiology CDG this week! BL

*End-of- Program Student Learning Outcomes

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	NA	NA	S	S	S											
a. Value the need for continuous improvement in clinical practice based on evidence. (Responding)																	
b. Accountable for investigating evidence-based practice to improve patient outcomes. (Responding)	NA	NA	NA	S	S	S											
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	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. (Responding)	S	NA	S	S	S	S											
Faculty Initials	AR	AR	AR	BS	BS	BL											

Comments:

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

Skills Lab Evaluation Tool
AMSN
2021

Skills Lab Competency Evaluation Performance Codes: S: Satisfactory U: Unsatisfactory	Lab Skills									
	Critical Care Meditech Document (1,2,3,4,5,6)*	Physician Orders (1,2,3,4,5,6)*	Prioritization/ Delegation (1,2,3,4,5,6)*	Resuscitation (1,3,6,7)*	IV Start (1,3,4,6)*	Blood Admin./IV Pumps (1,2,3,4,5,6)*	Central Line/Blood Draw/Ports/IV Push (1,2,3,4,6)*	Head to Toe Assessment (1,2,6)*	ECG/Telemetry Placements/CT (1,6)*	ECG Measurements (1,2,4,5,6)*
	Date: 1/5/2021	Date: 1/5/2021	Date: 1/5/2021	Date: 1/5/2021	Date: 1/7/2021	Date: 1/7/2021	Date: 1/8/2021	Date: 1/8/2021	Date: 1/8/2021	Date: 1/8/2021
Evaluation:	S	S	S	S	S	S	S	S	S	S
Faculty Initials	AR	AR	AR	AR	AR	AR	AR	AR	AR	AR
Remediation: Date/Evaluation/Initials	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA

***Course Objectives**

Comments:

Meditech Documentation: Satisfactory participation 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's order lab utilizing SBAR communication and taking orders over the phone. Good job! BL/BS

Prioritization/Delegation: You have successfully completed the prioritization and delegation skills lab. You satisfactorily prioritized care for multiple patients using multiple methods (e.g. Maslow's hierarchy of needs, ABC, and ABCD methods). You were able to appropriately delegate nursing tasks for your assigned patients. 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

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

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/BL

Blood Admin/IV Pumps: Satisfactory completion of practice with blood administration safety checks activity. Great job with IV pump practice, the use of the medication library, and pump set up of primary and secondary IV medication infusion. FB

Central Line Dressing Change/IV Push: Satisfactory central line dressing change using proper technique, as well as line flushing. Great job with preparation of mixing a medication with normal saline and administering as an IV push through the central line. FB

Ports/Blood Draw: You were satisfactory in accessing an Infusaport device, demonstrated proper technique for CVAD cap change and satisfactorily demonstrated how to draw blood from a CVAD per hospital policy. Nice work! CP

Head to Toe Assessment: You are satisfactory for the head-to-toe assessment competency. Nice Job! BL/BS

ECG/Telemetry Placements/CT: Satisfactory participation with review of monitoring tutorial and placement of ECG/Telemetry patches and leads; satisfactory participation in review of Chest Tube/Atrium tutorial. BL/BS

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

*End-of- Program Student Learning Outcomes

Nursing Care Plan Grading Tool
AMSN
2021

Student Name: K. Canada

Clinical Date: 2/9/21-2/10/21

Firelands Regional Medical Center School of Nursing
Advanced Medical Surgical Nursing 2021
Simulation Evaluations

<u>vSim Evaluation</u> Performance Codes: S: Satisfactory U: Unsatisfactory	Rachael Heidebrink (Pharmacology) (1. 2. 6. 7)*	Junetta Cooper (Pharmacology) (1. 2. 6. 7)*	Mary Richards (Pharmacology) (1. 2. 6. 7)*	Lloyd Bennett (Medical-Surgical) (1. 2. 6. 7)*	Kenneth Bronson (Medical-Surgical) (1. 2. 6. 7)*	Carl Shapiro (Pharmacology) (1. 2. 6. 7)*
	Date: 2/12/2021	Date: 2/26/2021	Date: 3/12/2021	Date: 3/19/2021	Date: 3/25/2021	Date: 4/22/2021
Evaluation	U					
Faculty Initials	BS					
Remediation: Date/Evaluation/ Initials	S 2/22/21 BL					

* Course Objectives

ABCDEF Bundle Grading Rubric
Firelands Regional Medical Center School of Nursing

*End-of- Program Student Learning Outcomes

Advanced Medical Surgical Nursing
2021

Student Name: **K. Canada**

Clinical Date: **2/2/21-2/3/21**

1. (A) Assess Prevent and Manage Pain (5 points total) - Results of subjective and objective comprehensive pain assessment are explained including the clinical tool results and validation of pain (1) 1 - Comparison results/trending (1) 1 - Explanation of what the patient is receiving for pain management, and whether or not it is working (1) 1 - Non-pharmacological interventions discussed for pain management (1) - Underlying cause/reason/diagnosis for patient's pain is discussed (1) 1	Total Points: 5 Comments: Good discussion of your patient's pain utilizing the appropriate pain scales.
2. (B) Both Spontaneous Awakening Trials and Spontaneous Breathing Trials (7 points total) - Patient's subjective and objective comprehensive respiratory assessment explained (1) 0/1 - Background history provided on patient's respiratory status (1) 1 - Explanation provided of patient's cardiac status (1) 1 - Safety screening assessments for SAT and SBT discussed (1) 1 - Spontaneous Awakening Trials and Breathing Trials tried on patient discussed (1) 1 - Explanation of sedation medication titrations based on results (1) 1 - All diagnostic pulmonary results discussed (1) 0.5/1	Total Points: 5.5/7 Comments: Suggestion: Respiratory assessment not provided. No diagnostic pulmonary results discussed other than one set of ABGs (is this your interpretation of the ABGs? Elsewhere you refer to her being in metabolic acidosis) . (no CXR results). Otherwise good job. Respiratory assessment provided as well as additional information regarding diagnostic pulmonary results.
3. (C) Choice of Analgesia and Sedation (6 points total) - Comprehensive neurological assessment completed and results discussed (1) 0/1 - RASS results discussed (1) 1 - Medications patient is receiving for anxiety, agitation, and sedation discussed. Medications that may cause anxiety, agitation, and sedation discussed (2) 1/1.5 - Other reasons for patient's change in mentation status or sedation identified and explained (1) 1 - Trending/changes in patient's status since admission to unit reviewed and discussed (1) 1	Total Points: 4/5.5 Comments: Suggestion: RASS results are discusses but no mention on neurological assessment. Patient was not on any medications for anxiety, agitation, or sedation. What about the levetracitam? Additional information provided regarding neurological assessment and medications that may cause anxiety, agitation, and sedation.
4. (D) Delirium: Assess, Prevent, and Manage (6 points total) Delirium assessment completed on patient (RASS and CAM-	Total Points: 4.5/5 Comments: Suggestion: CAM-ICU and RASS are

- ICU tools) and results discussed (2) 0.5/1 - Patient's assessment since admission trended/reviewed and changes discussed (1) 1 - Medications and conditions that place the patient at risk for delirium are identified and explained (2) 2 - Family's feelings and observations about patient's confusion, mentation, and agitation discussed now and prior to admission (1) 1	mentioned. Follow and explain the steps of the CAM-ICU and determine if she has delirium.
5. (E) Early Mobility and Exercise (6 points total) - Patient's strength and mobility assessed and discussed (1) 1 - Patient's cardiac status explained (1) 1 - Exercise Safety Screening results discussed. What mobility/exercise was the patient able to complete and how did they tolerate it? (2) 1/2 - Explanation of interdisciplinary team and family involvement in patient's mobility and exercise (1) 1 - Problems/diagnoses/results hindering patient's mobility and exercise identified and explained (1) 1	Total Points: 5/6 Comments: Suggestion: No mention of the components of the safety screening. Additional information provided regarding the steps of the safety screening.
6. (F) Family Engagement and Empowerment (6 points total) - Family/significant others concerns, wishes, participation, and involvement in patient's care identified and discussed (2) 2 - Rapport and communication between patient, family, and health care providers discussed (2) 2 - Long term care needs, educational needs, emotional support, discharge needs, and community resources needed for patient/family identified and discussed (2) 2	Total Points: 6 Comments: Nice job here.
Total possible points = 36 32-36 = Satisfactory 27-31 = Needs improvement <27 = Unsatisfactory	30/36 Unsatisfactory. BS 34.5/36 Satisfactory BS

Student Name: Katlyn Canada

Clinical Date: 2/17/2021

1. Provide a description of your patient including current diagnosis and past medical history. (2 points total) • Current Diagnosis (1)-1 • Past Medical History (1)-1	Total Points: 2 Comments: Great job providing a detailed description of your patient's current diagnosis and past medical history. BL
2. Describe the pathophysiology of your patient's current diagnosis. (1 point total) • Pathophysiology-what is happening in the body at the cellular level (1)-1	Total Points: 1 Comments: Excellent job! Credible resource used for this information as well. BL
3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total) • All patient's signs and symptoms included (1)-1 • Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1)-1 • Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1)-1	Total Points: 3 Comments: Great job correlating your patient's signs and symptoms with her current diagnosis. You did a nice job explaining other signs and symptoms we would have expected your patient to have that she wasn't presenting with as well. BL
4. Correlate the patient's current diagnosis with all related labs. (4 points total) • All patient's relevant lab result values included (1)-1 • Rationale provided for each lab test performed (1)-1 • Explanation provided of what a normal lab result should be in the absence of current diagnosis (1)-1 • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1)-1	Total Points: 4 Comments: Excellent job! All relevant labs results included, normal values explained, rationales provided, and correlation with current diagnosis provided. BL
5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total) • All patient's relevant diagnostic tests and results included (1)-1 • Rationale provided for each diagnostic test performed (1)-1 • Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1)-1 • Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1)-1	Total Points: 4 Comments: Great job! BL
6. Correlate the patient's current diagnosis with all related medications. (3 points total) • All related medications included (1)-1 • Rationale provided for the use of each medication (1)-1 • Explanation of how each of the patient's relevant	Total Points: 3 Comments: Excellent job! Great job explaining why some of her medications were discontinued as well. BL

medications correlate with current diagnosis (1)-1	
7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total) - All pertinent past medical history included (1)-1 - Explanation of how patient's pertinent past medical history correlates with current diagnosis (1)-1	Total Points: 2 Comments: Great job, Katlyn! You provided a very detailed explanation of the correlation between the patient's current diagnosis and all her pertinent past medical history. BL
8. Describe nursing interventions related to current diagnosis. (1 point total) All nursing interventions provided for patient explained and rationales provided (1)-1	Total Points: 1 Comments: Great job! BL
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	Total Points: 20/20 Satisfactory Pathophysiology. Excellent job! BL

EVALUATION OF CLINICAL PERFORMANCE TOOL
Advanced Medical Surgical Nursing- 2021

**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 12/28/2020