

**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)
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	S	S	S	S	NA	NA	S	S	S	S					
a. Manage complex patient care situations with evidence of preparation and organization. (Responding)	NA	NA	S	S	S	S	NA	NA	S	S	S	S					
b. Assess comprehensively as indicated by patient needs and circumstances. (Noticing)	NA	S	S	S	S	S	NA	NA	S	S	S	S					
c. Respect patient and family perspectives, values, and diversity when planning, giving, and adapting care. (Responding)	NA	S	S	S	S	S	NA	NA	S	S	S	S					
d. Evaluate patient's response to nursing interventions. (Reflecting)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
e. Interpret cardiac rhythm; determine rate and measurements. (Interpreting)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
f. Administer medications observing the six rights of medication administration. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
g. Perform venipuncture skill with beginning dexterity and evidence of preparation. (Responding)	NA	NA	S	NA	S	S	NA	NA	S	NA	NA	NA					
h. Respond appropriately to equipment alarms; IV pumps, ECG monitors, ventilators, etc. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
Faculty Initials	AR	AR	AR	CP	CP	CP	CP	CP	CP	BS	BS	BL					
Clinical Location	Quality/core measures	PD/discharge planner	Digestive Health	3T PM	3T PM	4N PM	Simulation			4C	4C	4P					

Comments:

*End-of- Program Student Learning Outcomes

Week 3- Comments per Patient Advocate/Discharge Planner Preceptor: Excellent in all areas. "Asset to nursing." (1c)- Satisfactory discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work! AR

Week 4 (1g)- Satisfactory in IV skills during your Digestive Health clinical experience. Keep up the great work! AR

Week 9- 1 a-f, h- Nice job assessing and providing care for your mechanically ventilated patient(s). As you saw on day 1 it is important to respect the family of a dying patient and give them the time to grieve and say goodbye to their loved one. Nice work administering medications (IV push, IV drips, and medications down the OG tube) while observing the six rights. Good job identifying several cardiac rhythms and responding to alarms. BS

Week 10- 1 a,b,d,e,f- Good job assessing your patient this week and basing care on his particular needs. With such drastic fluctuations in his blood sugar it is difficult to determine if his LOC is due to that or if he is truly withdrawing from alcohol. Once his glucose levels become consistently stable it will be easier to determine. When he is more alert and able to take his medications that might help also. BS

Week 11-1(a-f, h) Stacy, you did an excellent job taking care of your patients this week while managing complex care situations. Your care was very organized and you were well prepared. You did a great job prioritizing your assessments for the patients, and you had excellent communication with the patients on both days while respecting their values. You also did a great job interpreting cardiac rhythm strips, and determining rate and measurements as well. Your medication passes were very well done on both days, and you followed all six rights of medication administration. You were able to administer PO, IVP, and IV medications. You did an excellent job with your patient's dressing changes on Tuesday as well. Keep up all your great work! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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	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	NA	NA	S	S	S	NA	NA	S	S	S	S					
b. Monitor for potential risks and anticipate possible early complications. (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
c. Recognize changes in patient status and take appropriate action. (Noticing, Interpreting, Responding)	NA	NA	NA	S	S	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	NA														
e. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. CC (Noticing, Interpreting, Responding)	NA	S	NA	NA													
Faculty Initials	AR	AR	AR	CP	CP	CP	CP	CP	CP	BS	BS	BL					

Comments:

Week 9- 2 a,b,c,e- Nice job correlating the relationships among your patient’s diagnosis, symptoms, and medications and incorporating them into the ABCDEF bundle for your patient. Satisfactory bundle- Great work! BS

Week 10- 1 a-d- Nice job of correlating the relationship among your patient’s disease process and symptoms and using that information to formulate a care plan utilizing your clinical judgement skills. Good job also of assessing your patient’s glucose levels so that his insulin could be dosed correctly. BS

Week 11-2(a) Stacy, you did an excellent job with your pathophysiology in which you addressed this competency. Please see the Pathophysiology Grading Rubric at the end of this document for my feedback. Keep up all your excellent work! BL

*End-of- Program Student Learning Outcomes

Week 11-2(b, c) Stacy, 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

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

Comments:

Week 2- Comments from Quality Assurance/Core Measures RN's: Excellent in all areas. ER experience has helped in Stacy's application of knowledge and sharing with the group; thank you and best of luck! Competency completed prior to group instruction/discussion. AR

Week 11-3(c) You did a great job ensuring you used the PAR system appropriately when obtaining care items for your patients this week in clinical. This is just one important way to ensure fiscal responsibility in clinical practice. BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

*End-of- Program Student Learning Outcomes

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

Comments:

Week 9- 4a,c- Nice job of discussing legal/ethical issues observed in the clinical setting. Professional behavior observed at all times. BS

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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	S	S	S	S	S	NA	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	S	S	S	S	S	NA	NA	S	S	S	S					
c. Describe factors that create a culture of safety (error reporting, communication, & standardization, etc). (Interpreting)	S	S	S	S	S	S	NA	NA	S	S	S	S					
d. Perform Standard/Standard Plus Precautions. (Responding)	NA	S	S	S	S	S	NA	NA	S	S	S	S					
e. Practice use of standardized EBP tools that support safety and quality. (Responding)	S	S	S	S	S	S	NA	NA	S	S	S	S					
f. Utilize faculty feedback to improve clinical performance. (Responding & Reflecting)	S	S	S	S	S	S	NA	NA	S	S	S	S					
Faculty Initials	AR	AR	AR	CP	CP	CP	CP	CP	CP	BS	BS	BL					

Comments:

Week 5 Objective 5a: Stacy, per the RN you were assigned to on 2-2-21, excellent in all areas except Knowledge base, Technical skills, and Delegation (Satisfactory). RN comments: Stacy did a wonderful job today; we were busy and had lots of skills to review. She hung in there and was very receptive to new teaching. She will make a great nurse! Nice job Stacy! CP

Week 6 Objective 5a: Per the RN you were assigned to on 2-9-21, satisfactory in all areas except Communication skills, Delegation, Professionalism, and Attendance (Excellent). CP

Week 7 Objective 5a: Stacy, per the RN you were assigned to on 2-10-21 – Excellent in all areas. RN Comments: Student did well delegating tasks to the PCT’s. She was also very communicative with family members. CP

Week 8 Objective 5a: Stacy, per the RN you were assigned to on 2-18-21, excellent in all areas except Delegation (Satisfactory). RN Comments: “Student is very personable when communicating with staff as well as patients. She managed patient care and medication accordingly; charting was thorough and completed in a timely manner.” Keep up the great work! CP

Week 9- 5 a,e- Nice job discussing factors that create a culture of safety, and also discussing the use of standardized tools that support safety and quality during debriefing. BS

*End-of- Program Student Learning Outcomes

Week 10 5 a,b,f- Good job performing in the clinical setting this week. You were able to monitor your patient's response to his insulin drip and help manage his dose based off of his hourly blood glucose levels. BS

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	S	S	S	S	S	NA	NA	S	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	NA	NA	S	NA	NA S	S					
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. (Responding)	NA	S	NA	S	S	S	NA	NA	S	S	S	S					
d. Deliver effective and concise hand-off reports. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
e. Document interventions and medication administration correctly in the electronic medical record. (Responding)	NA	NA	NA	S	S	S	NA	NA	S	S	S	S					
f. Consistently and appropriately posts in clinical discussion groups. (Responding and Reflecting)	NA	S	NA	S	S	S	NA	NA	S	S	S	S					
Faculty Initials	AR	AR	AR	CP	CP	CP	CP	CP	CP	BS	BS	BL					

Comments:

Week 3 (6c,f)- Satisfactory discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work! AR

Week 5 Objective 6f: You satisfactorily posted to the clinical discussion group. CP

Week 6 Objective 6d: Stacy, you have satisfactorily completed the Hand-off Report Competency with a score of 30/30. Nice job! CP; Objective 6f: You satisfactorily posted to the clinical discussion group. CP

Week 7 Objective 6f: You satisfactorily posted to the clinical discussion group. CP

*End-of- Program Student Learning Outcomes

Week 9- 6 a,c,e,f- Good job working together with nursing staff and fellow student to provide care to your patient. Documentation was well done. Nice work on your ABCDEF bundle! BS

Week 10 6 a,b,c- Nice job collaborating with your nurse to provide nursing care to your patient. We discussed potential educational topics for your patient during post-conference. Very good job with documentation this week, and great job on your care plan also! BS

Week 11-6(e) Excellent job with all your documentation this week in clinical! Your documentation was done in a timely manner and accurate. You also did a great job taking my feedback on Tuesday and applying it to all your documentation on Wednesday. Keep up the great work! BL

Week 11-6(f) Excellent job with your Pathophysiology CDG this week! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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:	S	S	S	S	S	S	NA	NA	S	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	S	S	S	S	S	NA	NA	S	S	S	S					
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	S	S	S	S	NA	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	S	S	S	S	S	NA	NA	S	S	S	S					
Faculty Initials	AR	AR	AR	CP	CP	CP	CP	CP	CP	BS	BS	BL					

Comments:

*End-of- Program Student Learning Outcomes

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Skills Lab Evaluation Tool
AMSN
2021

Skills Lab Competency Evaluation	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
Performance Codes: S: Satisfactory U: Unsatisfactory										
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: S. Orzech

Clinical Date: 3/16/2021-3/17/2021

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

<u>vSim Evaluation</u>	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	S	S	S	S	S	
Faculty Initials	CP	CP	BS	BS	BL	
Remediation: Date/Evaluation/ Initials	NA	NA	NA	NA	NA	

* Course Objectives

ABCDEF Bundle Grading Rubric
 Firelands Regional Medical Center School of Nursing
 Advanced Medical Surgical Nursing
 2021

Student Name: S. Orzech

Clinical Date: 3/9/21-3/10/21

<p>1. (A) Assess Prevent and Manage Pain (5 points total)</p> <ul style="list-style-type: none"> • 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) 1 • Underlying cause/reason/diagnosis for patient's pain is discussed (1) 1 	<p>Total Points: 5 Comments: Great job assessing your patient's pain using the appropriate pain assessment tools.</p>
<p>2. (B) Both Spontaneous Awakening Trials and Spontaneous Breathing Trials (7 points total)</p> <ul style="list-style-type: none"> • Patient's subjective and objective comprehensive respiratory assessment explained (1) 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 	<p>Total Points: 6.5 Comments: Nice job here also. A suggestion would be to include any trends with the patient's ABGs and CXRs.</p>
<p>3. (C) Choice of Analgesia and Sedation (6 points total)</p> <ul style="list-style-type: none"> • Comprehensive neurological assessment completed and results discussed (1) 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) 1.5 	<p>Total Points: 6 Comments:</p>

<ul style="list-style-type: none"> • 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 	
<p>4. (D) Delirium: Assess, Prevent, and Manage (6 points total)</p> <ul style="list-style-type: none"> • Delirium assessment completed on patient (RASS and CAM-ICU tools) and results discussed (2) 2 • Patient's assessment since admission trended/reviewed and changes discussed (1) 0.5 • 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 	<p>Total Points: 5.5 Comments:</p>
<p>5. (E) Early Mobility and Exercise (6 points total)</p> <ul style="list-style-type: none"> • Patient's strength and mobility assessed and discussed (1) 1 • Patient's cardiac status explained (1) 0.5 • Exercise Safety Screening results discussed. What mobility/exercise was the patient able to complete and how did they tolerate it? (2) 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 	<p>Total Points: 5.5 Comments:</p>
<p>6. (F) Family Engagement and Empowerment (6 points total)</p> <ul style="list-style-type: none"> • 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 	<p>Total Points: 6 Comments: Good discussion of family involvement and of the nurse advocating for their privacy during a difficult time.</p>
<p>Total possible points = 36 32-36 = Satisfactory 27-31 = Needs improvement <27 = Unsatisfactory</p>	<p>34.5/36 Satisfactory Very nice work! BS</p>

Pathophysiology Grading Rubric
 Firelands Regional Medical Center School of Nursing
 Advanced Medical Surgical Nursing
 2021

Student Name: **Stacy Orzech**

Clinical Date: **3/23/21-3/24/21**

<p>1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)</p> <ul style="list-style-type: none"> • Current Diagnosis (1)-1 • Past Medical History (1)-1 	<p>Total Points: 2 Comments: Great job providing a detailed description of your patient's current diagnosis and past medical history. BL</p>
<p>2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)</p> <ul style="list-style-type: none"> • Pathophysiology-what is happening in the body at the cellular level (1)-1 	<p>Total Points: 1 Comments: Excellent job describing the pathophysiology of your patient's current diagnosis accurately and in great detail. BL</p>
<p>3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)</p> <ul style="list-style-type: none"> • 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 	<p>Total Points: 3 Comments: Great job! All patient's signs and symptoms included and correlated accurately with his current diagnosis. BL</p>
<p>4. Correlate the patient's current diagnosis with all related labs. (4 points total)</p> <ul style="list-style-type: none"> • All patient's relevant lab result values included (1)-1 • Rationale provided for each lab test performed (1)-0.5 • Explanation provided of what a normal lab result should be in the absence of current diagnosis (1)-0.5 • Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1)-1 	<p>Total Points: 3 Comments: Overall, very nice job. Your patient did not have many lab values that directly related to his current diagnosis. However, you did a great job including labs that could be correlated. Remember to provide a rationale for all, as well as explain what a normal result should be. BL</p>
<p>5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)</p> <ul style="list-style-type: none"> • 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 	<p>Total Points: 4 Comments: Great job! BL</p>

(1)-1	
6. Correlate the patient's current diagnosis with all related medications. (3 points total) <ul style="list-style-type: none"> 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 medications correlate with current diagnosis (1)-1 	Total Points: 3 Comments: Excellent job! All related medications included, rationales provided, and correlations with current diagnosis are accurate. BL
7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total) <ul style="list-style-type: none"> 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: Excellent job, Stacy! BL
8. Describe nursing interventions related to current diagnosis. (1 point total) <ul style="list-style-type: none"> All nursing interventions provided for patient explained and rationales provided (1)-1 	Total Points: 1 Comments: Great job! All nursing interventions provided for patient explained and rationales provided. BL
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	Total Points: 19/20 Satisfactory Pathophysiology. Excellent job! BL

Lasater Clinical Judgment Rubric Scoring Sheet

STUDENT NAME: **Stacy Orzech (Group 3)** OBSERVATION DATE/TIME: **2/24/21** 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>#1 Patient identified, VS, monitor applied. Abnormal rate/rhythm noticed on monitor. Heart and lung sounds assessed, orientation/LOC assessed. Rhythm change noticed.</p> <p>#2 Patient identified. LOC and orientation assessed. Patient questioned about chest pain, cardiac history.</p> <p>#3 Patient found to be 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>HR interpreted as below normal (sinus bradycardia). Lung sounds noted to be crackles. New rhythm interpreted to be 2nd degree type II heart block. Third degree heart block noted.</p> <p>O2 level noted to be low, also BP. Rhythm interpreted to be Vtach, reinterpreted to be Afib with RVR. Lung sounds interpreted as crackles.</p> <p>Patient noted to be pulseless and apneic.</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>Call to HCP with SBAR report, requests holding metoprolol and new medication for HR. Suggests atropine. Order received and read back-good job! Call to pharmacy to verify order because the doctor was a podiatrist (good thinking!) Patient is kept informed of treatment plan. Very good team communication. Atropine prepared and administered. Treatments for complete heart block verbalized (epi- or dopamine drip, pacing).</p> <p>O2 applied. Call to HCP to report uncontrolled Afib. Suggestion for diltiazem with dosage provided for bolus. (and infusion with prompting). Orders received and read back. Diltiazem bolus given and drip initiated. Call to HCP to update with lower BP, stopped diltiazem. Low volume fluid bolus suggested due to CHF. Order received and read back. Education provided regarding diet, tobacco. Patient starts coughing, fluid dc'd, lung sounds reassessed.</p> <p>Code Blue called immediately, CPR initiated, ambu bag initiated. EPI administered. Fast patches applied (do this immediately). Shock delivered, CPR, EPI.</p>
<p>REFLECTING: (6)*</p> <ul style="list-style-type: none"> • Evaluation/Self-Analysis: E A D B 						<p>Team discussed aspects of the scenario. Very good job confirming drug choice with pharmacy. Discussed treatment options for symptomatic bradycardias. Discussed and demonstrated transcutaneous pacing as a</p>

*End-of- Program Student Learning Outcomes

<ul style="list-style-type: none"> • Commitment to Improvement: E A D B 	<p>treatment option. Discusses aspects of the scenario that went well as well as things that could be changed in the future.</p> <p>Discussed the importance of treating rapid ventricular rate. Treatments discussed include medications such as diltiazem utilizing a bolus followed by a drip, and also synchronized cardioversion. Also discussed the importance of monitoring for fluid overload, especially in a CHF patient. Good call using a 100 ml fluid bolus rather than a larger volume. Very good teamwork and communication.</p> <p>Code Blue scenario discussed, the importance of immediate defibrillation and then resuming CPR. Also discussed ACLS drugs normally utilized (EPI and amiodarone) during a Code Blue. Discussed likely reason for this patient to experience a Code Blue- low K+, vomiting, diarrhea. Great job.</p>
<p>SUMMARY COMMENTS:</p> <p>E = exemplary, A = accomplished, D = developing, B = Beginning Based off of Lasater's Clinical Judgment Rubric</p> <p>Developing to accomplished is required for satisfactory completion of this simulation.</p>	<p>Satisfactory. Very nice work! BS</p>

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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

*End-of- Program Student Learning Outcomes