



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

Comments:

\*End-of- Program Student Learning Outcomes

Week 6- Per Patient Advocate/Discharge Planner Preceptor: Satisfactory in all areas. (1c)- Satisfactory discussion via CDG posting related to your Patient Advocate/Discharge Planner clinical experience. Keep up the great work. AR

Week 8 (1g)- Satisfactory in all venipuncture skills while in Digestive Health. Keep up the great work! AR

Week 9- Comments per Cardiac Diagnostics Preceptor: Excellent in all areas. Cayla was great when interacting with patients. She asked appropriate questions and seemed very eager to learn. She saw a cardioversion, spoke to Pacer representative, observed a Lexiscan, spoke about Definity and studies. (1b)- Satisfactory discussion via CDG posting related to your Cardiac Diagnostics clinical experience. Keep up the great work! AR

Week 10- Comments per Special Procedures Preceptor: Satisfactory in all areas. Several successful IV starts today; good questions and did well communicating with patients. (1b,d)- Satisfactory discussion via CDG posting related to your Special Procedures clinical experience. Keep up the great work! AR

Week 11- Comments per Infusion Center Preceptor: – Excellent in all areas. IV starts, engaging and helpful. (1d,g)- Satisfactory during Infusion Center clinical and in discussion via CDG posting. Great job! AR

Week 12 (1a)- Great job providing care to a complex care patient who was intubated and had multiple IV, IVP, SQ and OG medications. You also did a great job with central line dressing change using proper technique. (1b,d) You provided comprehensive assessments and evaluated data received from assessments to provide appropriate care. (1f) Medication administration was performed following all rights of administration and evaluation of effects on patient. FB

**Week 13-1(a-h) Cayla, 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 cardiac and respiratory assessments for your patients, and monitoring their heart rhythms and oxygenation status very closely. You had excellent communication with the patients on both days, and respected their values. You also did a great job responding appropriately to equipment alarms. Your medication pass was very well done, and you followed all six rights of medication administration. You also did an excellent job performing trach care on your patient as well. You were able to attempt to start an IV, although it was an unsuccessful attempt you demonstrated great dexterity and evidence of preparation. 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
<b>Competencies:</b>	NA	S	S														
a. Correlate relationships among disease process, patient’s history, patient symptoms, and present condition utilizing clinical judgment skills. <b>CC (Noticing, Interpreting, Responding)</b>	NA	S	S														
b. Monitor for potential risks and anticipate possible early complications. <b>(Noticing, Interpreting, Responding)</b>	S	S	S	NA	NA	NA	NA	NA	S	NA	NA	NA	S	S			
c. Recognize changes in patient status and take appropriate action. <b>(Noticing, Interpreting, Responding)</b>	S	S	S	NA	NA	NA	NA	NA	S	NA	NA	NA	S	S			
d. Formulate a prioritized nursing care plan utilizing clinical judgment skills. <b>CC (Noticing, Interpreting, Responding, Reflecting)</b>	NA																
e. Incorporate the ABCDEF Standardized Bundle of interventions for assigned patient. <b>CC (Noticing, Interpreting, Responding)</b>	NA	S	NA														
<b>Faculty Initials</b>	<b>CP</b>	<b>CP</b>	<b>CP</b>	<b>AR</b>	<b>FB</b>	<b>BL</b>											

**Comments:**

Week 12 (2 a,c,e)- Cayla, great job correlating your patient’s status with disease processes, recognizing changes in her status, and providing care based off those changes. ABCDEF was completed satisfactorily, see rubric below for details. FB

**Week 13-2(a) Cayla, 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. BL**

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

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

**Comments:**

Week 5 (3b,c)- Satisfactory during Quality Assurance/Core Measures clinical experience. Keep up the great work! AR

Week 9 (3b,c)- Satisfactory Quality Scavenger Hunt clinical and discussion via CDG posting. Great job! AR

Week 11 (3c)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. AR

**Week 13-3(c) You did a great job ensuring you used the PAR system appropriately when obtaining care items for your patient this week in clinical. This is just one important way to ensure fiscal responsibility in clinical practice. BL**

**Objective**

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

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

**Comments:**

Week 12 (4a)- Great discussion regarding legal and ethical issues you observed in the clinical setting. FB

**Objective**

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

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

**Comments:**

Week 2 Objective 5a: Cayla, per the RN you were assigned to on 1-12-21, excellent in all areas except Knowledge Base and Technical Skills (Satisfactory). Comments: Cayla was knowledgeable and willing to learn. Very respectful to the patients as well as preceptor. Great work Cayla! CP

Week 3 Objective 5a: Cayla, per the RN you were assigned on 1-20-21 – Satisfactory in all areas except Communication Skills, Professionalism, and Attendance (Excellent). Comments: Great job today; administered medication though PEG; started tube feed; communicated well with patients; watched discharge process. Keep up the great work Cayla! CP

Week 4 Objective 5a: Cayla, per the RN you were assigned to on 1-27-21 – Excellent in all areas. Comments: “Cayla was knowledgeable and prepared; helpful with other staff; very polite and professional; willing to learn. Unfortunately, we did not have many IV meds to practice.” Great job Cayla! CP 1-28-21 – Excellent in all areas.

Student Goals: To gain more experience caring for multiple patients; balance time management skills; to gain more experience with IV meds & IVP Med administration. Comments: Cayla is very organized, professional, and compassionate. She gained experience in charting, reviewing new orders, passing meds, starting IV infusions (primary and secondary) including IVP med administration. She obtained Ortho vitals; kept up with documentation on 2-4 patients; she gave a thorough report to the night shift on 2 patients. It was a pleasure to have Cayla along side of me today. I wish her the best! Thank you.

\*End-of- Program Student Learning Outcomes

Week 12 (5 c,e)- Great job with discussion on factors that focus on creating a culture of safety and the use of EBP tools that support patient safety and quality improvement. FB

Week 13-5(b) This week you had the opportunity to observe a central line being discontinued on your patient, as well as perform tracheostomy care. You do an excellent job seeking out new learning opportunities. Keep up all your great work! BL

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

<b>Objective</b>																	
6. Engage with members of the healthcare team, patients, families, faculty, and peers through written, verbal and nonverbal methods, and by utilizing computer technology. (1,2,6,7,8)*																	
Weeks of Course:	2	3	4	5	6	7	8	Make up	Midterm	9	10	11	12	13	14	Make up	Final
<b>Competencies:</b>	S	S	S	NA	S	NA	S	NA	S	S	S	NA	S	S			
a. Establish collaborative partnerships with patients, families, and coworkers. <b>(Responding)</b>																	
b. Teach patients and families based on readiness to learn and discharge learning needs. <b>(Interpreting &amp; Responding)</b>	NA	NA	S	NA	S	NA	NA	NA	S	NA	NA	NA	S	S			
c. Collaborate with members of the healthcare team, patients, and families to achieve optimal patient outcomes. <b>(Responding)</b>	S	S	S	NA	S	NA	S	NA	S	S	S	NA	S	S			
d. Deliver effective and concise hand-off reports. <b>(Responding)</b>	S	S	S	NA	NA	NA	NA	NA	S	NA	NA	NA	S	S			
e. Document interventions and medication administration correctly in the electronic medical record. <b>(Responding)</b>	S	S	S	NA	NA	NA	NA	NA	S	NA	NA	NA	S	S			
f. Consistently and appropriately posts in clinical discussion groups. <b>(Responding and Reflecting)</b>	S	S	S	NA	S	NA	NA	NA	S	S	S	NA	S	S			
<b>Faculty Initials</b>	<b>CP</b>	<b>CP</b>	<b>CP</b>	<b>AR</b>	<b>FB</b>	<b>BL</b>											

**Comments:**

\*End-of- Program Student Learning Outcomes

Week 2 Objective 6f: You satisfactorily posted in the clinical discussion group. CP

Week 3 Objective 6f: You satisfactorily posted in the clinical discussion group. CP

Week 3 Objective 6d: You satisfactorily completed the Hand-off Report Competency with a score of 30/30. Great work Cayla! Objective 6f: You satisfactorily posted in the clinical discussion group. Nice job posting in the CDG each week during the patient management experience! CP

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

Week 9 (6f)- Satisfactory CDG postings related to your Cardiac Diagnostics and Quality Scavenger Hunt clinical experiences. Keep it up! AR

Week 10 (6f)- Satisfactory CDG posting related to your Special Procedures clinical experience. Great job! AR

Week 11 (6c,f)- Satisfactory discussion via CDG posting related to your Infusion Center clinical experience. Keep up the great work. AR

Week 12 (6a,e)-Great job collaborating with healthcare disciplines to provide good quality care to your assigned patient. Documentation was appropriate with minimal errors, medication documentation was nicely done. FB

**Week 13-6(a-c) Excellent job this week during debriefing in which you were actively involved in the discussion of these competencies. You also did an excellent job communicating with your patients this week and providing education to them when possible as well. BL**

**Week 13-6(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 13-6(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
<b>Competencies:</b>	S	S	S	NA	S	NA	S	NA	S	S	S	NA	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)	S	S	S	NA	S	NA	S	NA	S	S	S	NA	S	S			
c. Comply with the FRMCSN "Student Code of Conduct Policy." (Responding)	S	S	S	S	S	NA	S	NA	S	S	S	NA	S	S			
e. Incorporate the core values of caring, diversity, excellence, integrity, and "ACE"- attitude, commitment, and enthusiasm during all clinical interactions. (Responding)	S	S	S	S	S	NA	S	NA	S	S	S	NA	S	S			
<b>Faculty Initials</b>	<b>CP</b>	<b>CP</b>	<b>CP</b>	<b>AR</b>	<b>FB</b>	<b>BL</b>											

**Comments:**

Midterm- You have done a great job during the first half of the semester Cayla! Keep up the great work as you complete the course! AR

Clinical Judgment Terminology: Noticing, Interpreting, Responding, Reflecting

Skills Lab Evaluation Tool  
AMSN  
2021

<u>Skills Lab Competency Evaluation</u>	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)*
Performance Codes: S: Satisfactory U: Unsatisfactory	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	CP	CP	CP	CP	CP	CP	CP	CP	CP	CP
Remediation: Date/Evaluation/Initials	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

**\*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

Nursing Care Plan Grading Tool  
AMSN  
2021

**Student Name:**

**Clinical Date:**

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

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

\* Course Objectives

### Lasater Clinical Judgment Rubric Scoring Sheet

\*End-of- Program Student Learning Outcomes

CLINICAL JUDGMENT						OBSERVATION NOTES
<p><b>COMPONENTS NOTICING: (1, 2, 5)*</b></p> <ul style="list-style-type: none"> <li>• Focused Observation:            E        <b>A</b>        D        B</li> <li>• Recognizing Deviations from Expected Patterns:            E        <b>A</b>        D        B</li> <li>• Information Seeking:            E        <b>A</b>        D        B</li> </ul>						<p><b>#1 Patient identified. Orientation assessed. VS, monitor applied, HR noted to be bradycardic. Patient CO being tired, weak, SOB. Rhythm change.</b></p> <p><b>#2 Patient identified. Monitor applied, VS, HR noted to be elevated. BP and O2 sat begins to drop. Patient begins to cough and be SOB.</b></p> <p><b>#3 Patient found to be unresponsive. Patient put on monitor. CPR initiated.</b></p>
<p><b>INTERPRETING: (2, 4)*</b></p> <ul style="list-style-type: none"> <li>• Prioritizing Data:            E        <b>A</b>        D        B</li> <li>• Making Sense of Data:            E        A        <b>D</b>        B</li> </ul>						<p><b>Rhythm interpreted to be sinus bradycardia. Next rhythm interpreted as a 2<sup>nd</sup> degree type II heart block. Another rhythm change interpreted as 1<sup>st</sup> degree block, reinterpreted as 3<sup>rd</sup> degree heart block.</b></p> <p>Heart rhythm interpreted to be Afib. Fluid overload identified.</p> <p>Rhythm interpreted to be Vtach.</p>
<p><b>RESPONDING: (1, 2, 3, 5)*</b></p> <ul style="list-style-type: none"> <li>• Calm, Confident Manner:            E        A        D        B</li> <li>• Clear Communication:            E        <b>A</b>        D        B</li> <li>• Well-Planned Intervention/ Flexibility:            E        <b>A</b>        D        B</li> <li>• Being Skillful:            E        A        <b>D</b>        B</li> </ul>						<p><b>O2 applied. Call to HCP with SBAR report and request for EKG, O2, atropine, and to hold metoprolol. Orders received and read back. Good communication with patient. Patient identified, allergies Atropine administered (remember to flush before and after). 2<sup>nd</sup> dose of atropine. Call to HCP to report new rhythm and that atropine not likely to be effective (good job!). Suggests epi drip or pacing.</b></p> <p>Call to HCP with SBAR, reports sinus tachycardia, team reevaluated rhythm to be Afib, suggests cardioversion or Cardizem (diltiazem) drip (good recommendations). Orders received and read back. Diltiazem bolus administered and drip initiated. Call to HCP to report low BP and O2 sat. IV fluids suggested (bolus), order received and read back. Fluid bolus initiated, DC'd when patient begins to cough, crackles noted in lungs.</p> <p>CPR initiated, Code called, ambu bag, epi delivered, fast patches applied, shock delivered, CPR, epi.</p>
<p><b>REFLECTING: (6)*</b></p> <ul style="list-style-type: none"> <li>• Evaluation/Self-Analysis:            <b>E</b>        A        D        B</li> <li>• Commitment to Improvement:            <b>E</b>        A        D        B</li> </ul>						<p><b>Discussion of the various heart blocks and how to recognize them. Talked about the need to raise HR to increase CO. Epi and dopamine drips discussed as options. Transcutaneous pacing discussed and demonstrated. Talked about the importance of capture and how to achieve it, and once we have consistent capture, our CO and BP should increase, improving symptoms.</b></p> <p>Discussion of the importance of controlling a rapid ventricular rate (Afib with RVR), and various therapies to do so. Diltiazem bolus and drip discussed, synchronized cardioversion discussed and demonstrated. When patient converts to a NSR, CO will increase, as will BP and symptoms should resolve. Also discussed the likely need for pain medication.</p>

\*End-of- Program Student Learning Outcomes

	<p>Discussed code blue scenario, the importance of defibrillation ASAP, immediately calling code and beginning CPR, epi q 3 min. Discussed additional drugs to be used in a code-amiodarone (300mg, 150mg). Also discussed the likely reason for the patient to go into Vtach as being low K+.</p>
<p><b>SUMMARY COMMENTS:</b>  E = exemplary, A = accomplished, D = developing, B = Beginning  Based off of Lasater's Clinical Judgment Rubric</p> <p><b>Developing to accomplished is required for satisfactory completion of this simulation.</b></p>	<p><b>Nice work! You are Satisfactory for this scenario. BS</b></p>

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

\*End-of- Program Student Learning Outcomes

**Student Name:** Cayla Selka

**Clinical Date:** 3/30-31/2018

<p><b>1. (A) Assess Prevent and Manage Pain ( 5 points total)</b></p> <ul style="list-style-type: none"> <li>• Results of subjective and objective comprehensive pain assessment are explained including the clinical tool results and validation of pain (1)</li> <li>• Comparison results/trending (1)</li> <li>• Explanation of what the patient is receiving for pain management, and whether or not it is working (1)</li> <li>• Non-pharmacological interventions discussed for pain management (1)</li> <li>• Underlying cause/reason/diagnosis for patient's pain is discussed (1)</li> </ul>	<p><b>Total Points: 5</b>  <b>Comments:</b> A pain assessment with results of subjective and objective data were provided with evidence of pain level. Comparison of previous trends was discussed. Both pharmacological and non-pharmacological were discussed as well as underlying causes.</p>
<p><b>2. (B) Both Spontaneous Awakening Trials and Spontaneous Breathing Trials ( 7 points total)</b></p> <ul style="list-style-type: none"> <li>• Patient's subjective and objective comprehensive respiratory assessment explained (1)</li> <li>• Background history provided on patient's respiratory status (1)</li> <li>• Explanation provided of patient's cardiac status (1)</li> <li>• Safety screening assessments for SAT and SBT discussed (1)</li> <li>• Spontaneous Awakening Trials and Breathing Trials tried on patient discussed (1)</li> <li>• Explanation of sedation medication titrations based on results (1)</li> <li>• All diagnostic pulmonary results discussed (1)</li> </ul>	<p><b>Total Points: 7</b>  <b>Comments:</b> Great job explaining a comprehensive respiratory assessment. Background history regarding respiratory status was provided. Cardiac status was also discussed. SAT and SBT safety screen and trial assessments were discussed. Sedation medication including titration was explained with patient response. All pertinent diagnostic testing results were discussed.</p>
<p><b>3. (C) Choice of Analgesia and Sedation (6 points total)</b></p> <ul style="list-style-type: none"> <li>• Comprehensive neurological assessment completed and results discussed (1)</li> <li>• RASS results discussed (1)</li> <li>• Medications patient is receiving for anxiety, agitation, and sedation discussed. Medications that may cause anxiety, agitation, and sedation discussed (2)</li> <li>• Other reasons for patient's change in mentation status or sedation identified and explained (1)</li> <li>• Trending/changes in patient's status since admission to unit reviewed and discussed (1)</li> </ul>	<p><b>Total Points: 6</b>  <b>Comments:</b> A comprehensive neurological assessment and results were discussed. RASS results were provided. All medications were addressed in relation to sedation. Other reasons for changes in mental status were identified and explained. Trends since admission were reviewed and discussed.</p>
<p><b>4. (D) Delirium: Assess, Prevent, and Manage (6 points total)</b></p> <ul style="list-style-type: none"> <li>• Delirium assessment completed on patient (RASS and CAM-ICU tools) and results discussed (2)</li> <li>• Patient's assessment since admission trended/reviewed and</li> </ul>	<p><b>Total Points: 6</b>  <b>Comments:</b> Delirium assessment was discussed with trends since admission. Medications that place patient at risk for delirium are identified and explained. Family</p>

<ul style="list-style-type: none"> <li>changes discussed (1)</li> <li>• Medications and conditions that place the patient at risk for delirium are identified and explained (2)</li> <li>• Family's feelings and observations about patient's confusion, mentation, and agitation discussed now and prior to admission (1)</li> </ul>	<p>feelings were discussed.</p>
<p><b>5. (E) Early Mobility and Exercise (6 points total)</b></p> <ul style="list-style-type: none"> <li>• Patient's strength and mobility assessed and discussed (1)</li> <li>• Patient's cardiac status explained (1)</li> <li>• Exercise Safety Screening results discussed. What mobility/exercise was the patient able to complete and how did they tolerate it? (2)</li> <li>• Explanation of interdisciplinary team and family involvement in patient's mobility and exercise (1)</li> <li>• Problems/diagnoses/results hindering patient's mobility and exercise identified and explained (1)</li> </ul>	<p><b>Total Points: 6</b>  <b>Comments:</b> Patient strength and mobility were assessed and challenges discussed. Cardiac status was explained. Progressive mobility safety screen results were discussed including patient's current ability. Interdisciplinary team and family involvement were explained as well as issues hindering current progression.</p>
<p><b>6. (F) Family Engagement and Empowerment (6 points total)</b></p> <ul style="list-style-type: none"> <li>• Family/significant others concerns, wishes, participation, and involvement in patient's care identified and discussed (2)</li> <li>• Rapport and communication between patient, family, and health care providers discussed (2)</li> <li>• Long term care needs, educational needs, emotional support, discharge needs, and community resources needed for patient/family identified and discussed (2)</li> </ul>	<p><b>Total Points: 6</b>  <b>Comments:</b> Family concerns and understanding of care were identified and discussed as well as, communication between wife and health care providers. Long term and educational needs were discussed with appropriate resources for patient.</p>
<p>Total possible points = 36  32-36 = Satisfactory  27-31 = Needs improvement  &lt;27 = Unsatisfactory</p>	<p style="text-align: center;"><b>Total: 36</b>  <b>Excellent job! Satisfactory ABCDEF bundle.</b>  <b>FB</b></p>

Student Name: **Cayla Selka**

Clinical Date: **4/6/21-4/7/21**

<b>1. Provide a description of your patient including current diagnosis and past medical history. (2 points total)</b> <ul style="list-style-type: none"><li>• Current Diagnosis (1)-1</li><li>• Past Medical History (1)-1</li></ul>	<b>Total Points: 2</b> <b>Comments:</b> Great job providing a detailed description of your patient's current diagnosis and past medical history. BL
<b>2. Describe the pathophysiology of your patient's current diagnosis. (1 point total)</b> <ul style="list-style-type: none"><li>• Pathophysiology-what is happening in the body at the cellular level (1)-1</li></ul>	<b>Total Points: 1</b> <b>Comments:</b> Excellent job! Your pathophysiology of your patient's current diagnosis is described with great detail. Credible resource used for this information as well. BL
<b>3. Correlate the patient's current diagnosis with presenting signs and symptoms. (3 points total)</b> <ul style="list-style-type: none"><li>• All patient's signs and symptoms included (1)-1</li><li>• Explanation of what signs and symptoms are typically expected with this current diagnosis (Do these differ from what your patient presented with?) (1)-1</li><li>• Explanation of how all patient's signs and symptoms correlate with current diagnosis. (1)-1</li></ul>	<b>Total Points: 3</b> <b>Comments:</b> Great job! All patient's signs and symptoms included and correlated accurately. Very detailed and thorough response. BL
<b>4. Correlate the patient's current diagnosis with all related labs. (4 points total)</b> <ul style="list-style-type: none"><li>• All patient's relevant lab result values included (1)-1</li><li>• Rationale provided for each lab test performed (1)-1</li><li>• Explanation provided of what a normal lab result should be in the absence of current diagnosis (1)-1</li><li>• Explanation of how each of the patient's relevant lab result values correlate with current diagnosis (1)-1</li></ul>	<b>Total Points: 4</b> <b>Comments:</b> Excellent job! All relevant lab results included, normal values explained, rationales provided, and correlation with current diagnosis provided. BL
<b>5. Correlate the patient's current diagnosis with all related diagnostic tests. (4 points total)</b> <ul style="list-style-type: none"><li>• All patient's relevant diagnostic tests and results included (1)-1</li><li>• Rationale provided for each diagnostic test performed (1)-1</li><li>• Explanation provided of what a normal diagnostic test result would be in the absence of current diagnosis (1)-1</li><li>• Explanation of how each of the patient's relevant diagnostic test results correlate with current diagnosis (1)-1</li></ul>	<b>Total Points: 4</b> <b>Comments:</b> Great job! BL
<b>6. Correlate the patient's current diagnosis with all related medications. (3 points total)</b> <ul style="list-style-type: none"><li>• All related medications included (1)-1</li><li>• Rationale provided for the use of each medication (1)-1</li></ul>	<b>Total Points: 3</b> <b>Comments:</b> Cayla, excellent job correlating the patient's current diagnosis with all related medications. BL

<ul style="list-style-type: none"> <li>Explanation of how each of the patient's relevant medications correlate with current diagnosis (1)-1</li> </ul>	
<b>7. Correlate the patient's current diagnosis with all pertinent past medical history. (2 points total)</b> <ul style="list-style-type: none"> <li>All pertinent past medical history included (1)-1</li> <li>Explanation of how patient's pertinent past medical history correlates with current diagnosis (1)-1</li> </ul>	<b>Total Points: 2</b> <b>Comments: Excellent job! BL</b>
<b>8. Describe nursing interventions related to current diagnosis. (1 point total)</b> <ul style="list-style-type: none"> <li>All nursing interventions provided for patient explained and rationales provided (1)-1</li> </ul>	<b>Total Points: 1</b> <b>Comments: Excellent job! All nursing interventions listed and rationales provided. BL</b>
Total possible points = 20 17-20 = Satisfactory 14-16 = Needs improvement <13 = Unsatisfactory	<b>Total Points: 20/20</b>  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