



**SCIENCE & HEALTH
PROFESSIONS**

NURSING PROGRAM

NURSING 120

COURSE INFORMATION AND FORMS

SPRING 2012

STUDENT NAME: _____

**MERCER COUNTY COMMUNITY COLLEGE
SCIENCE AND HEALTH PROFESSIONS
NURSING PROGRAM
INFORMATION & FORMS**

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Information Resources

Classroom – Theory

Classroom theory presentation is based on unit objectives. The focus will be on discussion of relevant theoretical basis of pathophysiology, medical management, and the nursing process for patients with varied psychiatric, pediatric, and medical/surgical problems. The purpose of the theoretical discussions is to update information, to clarify problem areas, to emphasize important concepts, and to assist students to correlate theoretical knowledge into clinical situations; thus strengthening students' critical thinking and problem solving skills. **Students are expected to have completed related readings and answer the pre-class assignment prior to classroom theory presentation.**

Pre-Class Assignment – There will be a 5-question pre class assignment that must be submitted at the beginning of each theory class. Submitting this assignment signifies that the student is ready to take the pre-class quiz. Should this assignment not be submitted, the quiz grade will begin at 75% taking into account the late required assignment.

1. The written pre-class assignment is composed of questions regarding subject matter contained in the textbook (med-surg and pharmacology) readings.
2. Complete this assignment as your original work. Do not share with other students.
3. Complete the written assignment in long hand – use pen; write legibly in your own handwriting.
4. Cite references used to answer question or set of questions.
5. Use the reverse side of the sheet should you need more space to answer a question.
6. Please read and answer each question completely.

College Lab

Four College labs will focus on discussion, relevant article review and discussion, skills, video, computer assisted learning, and math calculations. Students are expected to read assigned text and articles prior to the lab and be prepared to work in small groups to discuss pathophysiology, medical management, and the nursing process for assigned topics.

Clinical Lab

Preparation for clinical lab will focus upon weekly unit clinical objectives. Specific instructions will be given by the clinical instructor. You may be asked to submit selected assignments; these papers, videos and/or oral presentations will be graded satisfactory/unsatisfactory and this notation included in the clinical evaluation.

Medical Surgical Clinical Lab:

One written **Concept Map** will be submitted during the final week of the med/surg rotation. The due date will be announced by the course coordinator. The nursing care map will be graded by the clinical instructor. Nursing Care Plan Guidelines are on page 5.

Clinical Post-Conference presentation. See page 4.

Clinical Post-Conference

Each student will present an individual oral presentation and lead discussion regarding the nursing process of a client with a selected medical-surgical disease or illness related to clinical experience during a post-clinical conference. A written overview/study guide should be prepared for student colleagues. Selected topic should be related to a selected client assignment. Evaluation will be incorporated into clinical grade. **Please choose one topic from the following list and select a presentation date:**

**Medical Surgical Clinical Lab
Post-Clinical Conference Topics**

Topic	Student	Date
Stepped approach to drug therapy for treatment of Hypertension with review of diuretics – action on specific site in kidney, side effects, dosages, and nursing implications.		
Stepped approach to drug therapy for treatment of Hypertension with review of antihypertensive medications – Beta adrenergic Blockers		
Stepped approach to drug therapy for treatment of Hypertension with review of antihypertensive medications – ACE (Angiotensin-Converting Enzyme) Inhibitors		
Stepped approach to drug therapy for treatment of Hypertension with review of antihypertensive medications – Direct vasodilators		
Normal Coagulation and actions of on coagulation by the anticoagulant Coumadin – include actions, indications, dosage, side effects, untoward effects, antidote + lab values to monitor		
Normal Coagulation and actions of on coagulation by the anticoagulant Heparin – include actions, indications, dosage, side effects, untoward effects, antidote + lab value to monitor		
Acid Base Balance – respiratory disturbances related to altered ventilation problems.		
Care of the patient with tracheostomy—including suction and care		
Overview of medications used in the treatment of chronic obstruction lung disease including indications, actions, side effects, dosage, and nursing implications of bronchodilators—long and short acting, anticholinergic drugs, and steroids.		
Medications used to treat patients with angina.		
Medications used to treat patients with heart failure.		
Immunizations – infant, Child and Adult Schedule Overview – patient preparation for immunization		
Other topic (approved by clinical instructor):		

**MERCER COUNTY COMMUNITY COLLEGE
DIVISION OF SCIENCE AND HEALTH PROFESSIONS
NRS 120
NURSING CONCEPT MAP GUIDELINES**

I. Purpose of Nursing Concept Map

To Map for the physical, emotional and cultural needs of a particular client with a major health problem or exacerbation of a chronic illness, who is expected to recover to his/her previous level of function. Planning for homecare should be included.

II. Requirements

Use an 8 ½ x 11” bond paper (lined, onion skin or thin erasable paper is not acceptable). Typing is required. Paper should be thoroughly proofread and all corrections made. All papers must be formatted according to APA, numbered and stapled together.

Title page or cover sheet must include student’s name, client’s initials, date of care and instructor’s name. A copy of the clinical assignment information must be attached as Page 2.

The Nursing Care Map will be constructed using the “Concept Map Creator” from the medical-surgical text authored by: Ignatavicius, D.D. (2006), entitled **Medical-Surgical Nursing Critical Thinking for Collaborative Care**. (5th ed.), published by: Elsevier Saunders in St. Louis, Mo.

A brief synopsis of a nursing journal article that addresses problems pertinent to your client and how this information will help you in your nursing practice is also required.

III. Grading

The Nursing Concept Map will be graded with 100 points as being the possible maximum points earned. The points are allocated to the various parts of the Nursing Care Map as follows:

Percentages:

PART I	Assessment	Done in clinical – handwritten reference
PART II	Analysis and Synthesis of Problems	25%
PART III	Nursing Care Map: Outcomes Nursing Actions Nursing Action Rationales Implementation	45%
PART IV	Community Resources/Referrals	10%
PART V	Evaluation of Outcomes	10%
PART VI	Bibliography and Format	5%
PART VII	Related Journal Article & Synopsis	5%
<i>Total</i>		100%

IV. **Due Date**

The Nursing Concept Map must be submitted by Week 5 Wednesday at clinical pre-conference to the clinical instructor grading the paper.

V. **Clinical Assignment** information needed for Page 2.

FRAMEWORK OF THE NURSING CARE MAP

Part I - Assessment - done in clinical – submit handwritten weekly prep with final paper (used as a reference when reviewing the concept map).

1. Data Collection

A. Demographic Data

1. Biographical data (i.e. date of care, client's initials, age, sex, occupation, diagnosis, marital status, type of living arrangements, wage earner, primary language).
2. Chief complaint from client and other sources.

B. Psychological Health

1. Coping patterns (i.e. handling the illness, etc.)
2. Interaction patterns (i.e. interacting with others, family, MD's, hospital staff).
3. Cognitive patterns (i.e. reality oriented, understanding one's own illness).
4. Self concept (i.e. self image and self worth).
5. Emotional patterns (i.e. stable, moody, etc.)
6. Family coping patterns (i.e. response to patient's illness by family members).

C. Biophysical Health (document sources if obtained other than from client directly)

1. General appearance and overall physical assessment.
2. Growth and development level according to Erickson.
3. Daily activity patterns, for example:
 - **Safety**
 - **Nutrition/Fluids**
 - **Elimination**
 - **Rest/Activity**
 - **Hygiene/Comfort**
 - **Sleep**
 - **Oxygenation (include neurologic, cardiovascular, respiratory)**
 - **Comfort/Pain**
 - **Substance Use/Abuse (medications/alcohol)**
 - **Human Sexuality**
4. Previous biophysical health history
 - Previous hospitalizations/surgeries/illnesses
 - Past restorative interventions (i.e. prescribed medications and interventions)
 - Immunization history
 - Allergies
 - Family health history (diabetes/hypertension/heart disease)
 - Tobacco or alcohol use

- D. Socio-Economic Health
 - 1. Cultural patterns (significant relationships)
 - 2. Recreational patterns
 - 3. Financial patterns/economic health

- E. Spiritual Health/Values/Beliefs
 - 1. Religious beliefs and practice
 - 2. Indicators of values (i.e. orderliness, cleanliness, upkeep of belongings, open dialogue, active listening, praise)
 - 3. Incorporating values into lifestyle

- F. Physician's Map of action for the pathological state
 - 1. Admission diagnosis

- G. Describe the pathology – review trends and abnormal findings.
 - 2. Describe the medical/surgical Map (i.e. medications must include generic/trade name, classification, dosage, route, frequency, rationale for med, nursing precautions and/or measures; tests; treatments; surgeries; consultations and recommendations from other Allied Health disciplines).

- a. Other contributing diagnosis that have direct affect on client's current illness
 - 1. Describe pathology and how they affect the client's current illness.
 - 2. Describe the concurrent medical treatment Map in effect.

*It is recommended that the Assessment be documented suing the format set forth in this section.

Part II Analysis and Synthesis of Data (25 points)

Alteration of Basic Needs	Textbook Synopsis of Pathophysiology	Compare Client's Data	Identify ALL Nursing Care Problem Areas (Nursing Diagnoses)
Describe the relevance of this basic need in light of patient's medical condition and clinical presentation.	Referenced text synopsis of pathophysiology	Give relevant data (i.e. signs, symptoms, behavior, etc., that confirms the alterations	List all relevant nursing diagnoses for each basic need alteration. Bold the top three nursing diagnoses to be used in the care map.

Select top three relevant nursing diagnoses:

Part III Nursing Concept Map for the Client (45 points) for THREE (3) Nursing Diagnoses

The Nursing Concept Map will be constructed using the “Concept Map Creator” from the medical-surgical text authored by: Ignatavicius, DD and Workman, M. Linda. (2010). *Medical-Surgical Nursing Patient-Centered Collaborative Care*. St. Louis: Elsevier Saunders. (6th.ed)

1. Access the medical-surgical text student online resource by accessing the Evolve/Elsevier website through your student user code and password.
2. Using the resource, go to Chapter 1, Critical Thinking, then access “Concept Map Creator”
3. Following the Concept Map Creator guidelines for creating the nursing care map. Using the Concept Map Creator guidelines, or a concept map creator of your choice including an original work, the Nursing Concept Map should include information regarding the client’s:

- i. Problem or basic need alteration.
- ii. May include the applicable medical diagnosis
- iii. Supporting signs and symptoms
- iv. Nursing Diagnosis by priority
- v. For each of the three Nursing Diagnoses+:
 1. Short and Long Term Goal for each Nursing Diagnosis
 2. Nursing Interventions* with related rationale to include
 - a. Further assessment priorities
 - b. Nursing Actions
 - c. Client Education (this may be included in a separate section of the paper named “Client Education” with specific client education for each nursing diagnosis)

Link concepts and explain relationships by drawing an arrow between all related components. EACH arrow should identify what the relationship is and include pathophysiology wherever present.

Links: comments on arrows may include: causes, side effects of treatment or medication, intended action of treatment or medication, increases risk for: side effect or complication, decreases risk for: side effect or complication.

+ A separate nursing care map be developed for each of the three (3) nursing diagnoses or one large nursing care map including all may be done.

Indicate by * those nursing interventions implemented during your care of the client.

The concept map creator will allow you to print each concept map along with each set of “data” that you enter to create the map. Please include these documents as a part of your paper under this section.

Part IV Community Resources (10 points)

List your recommended community resource(s) and referral (s) related to respective nursing diagnosis with a description of the community resource/referral and a rationale for recommendation. Local as well as Internet resources and references are recommended.

Community Resource/Referral	Description	Rationale
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Part V Evaluation* of Outcomes (10 points)

1. Evaluate each goal/outcome that you have stated, indicating whether or not they were met.
2. Identify factors (other than limited time with your client) that interfered with meeting the goals/outcomes.

Part VI Bibliography and Format (5 points)

1. Format includes:
 - A. Use of correct English in complete sentences. Abbreviations, other than the standard medical Latin, are not acceptable. The meaning of the abbreviation must be given upon its initial use.
 - B. APA format when referencing.
 - C. Correct spelling and punctuation.
 - D. Bibliography and references must be current (i.e. within the past five (5) years).

Part VII Nursing Journal Article (5 points)

Review nursing journals/online journals and choose one article that addresses a problem pertinent to your client. Write a **succinct synopsis** of the article and document how this information will help you in your nursing practice. Articles must be a minimum of two (2) pages from a professional nursing journal. Include a copy of the article with your nursing care Map. **Include a copy of the article with your NCP.**

DEFINITIONS

The definition of terms used in the Nursing Concept Map:

1. **Analysis** – the arrangement of data into categories to identify the relationship between basic needs and the data.
2. **Assessment – (completed as clinical assignment)** the systematic way of obtaining data about a client, including:
 - a. Interviewing client and/or family
 - b. Physical examination
 - c. Reviewing written records
 - d. Collaborating with other health team members
 - e. Observe interpersonal relationships
 - f. Observe developmental levels
3. **Evaluation** – assessing the client’s response against predetermined goals.
4. **Implementation** – putting the Map into action.
5. **Links** – arrows or lines between concepts that explain relationships between all related nursing concept map components.
6. **Nursing Diagnosis** – is a clear, concise, specific statement about a client’s responses to the actual or potential problems that require nursing interventions. This should include:
 - Etiology or contributing factors
 - Scientific explanation to these factors
7. **Outcome** – a desired goal that you and your client hope to achieve in order to remedy or to lessen the problem.
8. **Nursing Concept Map** – is the act of determining what can be done to assist the client in restoring, maintaining or promoting health. This should include:
 - Stating nursing diagnosis;
 - Client problem based on basic need deficit;
 - Stating goals (short and long term) according to priorities
 - Identifying specific strategies or techniques for implementation to include what to further assess, nursing actions, and client/family education.
 - Stating rationale for the specific strategies.
9. **Scientific Rationale** – the knowledge of natural, behavioral, medical, nursing and social sciences that give a purpose and explanation of your study.
10. **Synthesis** – the putting of the relevant data in order to formulate a nursing diagnosis. This should include:
 - Comparison of client’s data with norms
 - Interpretations of the deviations

Reviewed and Revised Aug 2011

PART IV	<u>Community Resources/Referrals</u> <u>Strengths/Areas to Improve:</u> Describe the resource(s) & explain how it will benefit the client in the home setting.	Total 10%	
PART V	<u>Evaluation of Outcomes</u> <u>Strengths/Areas to Improve:</u> Evaluate each goal/outcome that you have stated, & describe how the goal was met or not met. Identify factors (other than limited time with your client) that interfered with meeting the goals/outcomes. The Evaluation Section will be listed separately	Total 10%	
PART VI	<u>Bibliography and Format</u> <u>Strengths/Areas to Improve:</u> Correct and appropriate English content APA Format (5 th edition) Correct and appropriate English grammar (spelling, punctuation, appropriate abbreviations) Bibliography and references: Current Relative and appropriate Evidence based	Total 5%	
PART VII	<u>Related Journal Article & Synopsis</u> <u>Strengths/Areas to Improve:</u>	Total 5%	
Total		100%	

A copy of the completed grading form will be given to the student.

Faculty Signature **Date**

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NRS 120 Alterations I

Written Clinical Prep Guidelines

Nursing 120 Clinical Prep:

- May be typed or handwritten – must be legible.
- Done once per week for clinical for one assigned patient. If you are assigned more than one patient, you need only write one concept map, but plan in your mind care for the second assigned pt.
- Presented in the format of a concept map – using the forms/shapes that were given out during orientation.
- Based on the nursing process.

The weekly prep contains all of the following elements:

Medical Diagnosis – write a short synopsis of diagnosis, medical treatment, and any medical history. – Including pathophysiology, clinical picture (signs & symptoms), pertinent labs and radiology studies that are routinely done to make the medical diagnosis. (Include clinical signs and symptoms)

Basic Needs: List the basic needs that may be affected by the client's present health status. (You may have more than one nsg diagnosis for any basic need).

For each basic need, list the following:

Basic Need #1:

- **Nursing Diagnosis**
- **Goal – Short term and long term – written in patient behavioral statements**
- **Nursing Care Plan:**
 - **Assessment** – List priority assessments for this client related to this basic need
 - **Action** – list nursing actions will you perform for this client related to this basic need
 - **Client Education** – what will you teach (be specific) this client related to this nsg dx – could be treatments, body mechanics, respiratory tx, medications, community resources.

Basic Need #2:

- **Nursing Diagnosis**
- **Goal – Short term and long term – written in patient behavioral statements**
- **Nursing Care Plan:**
 - **Assessment** – List priority assessments for this client related to this basic need
 - **Action** – list nursing actions will you perform for this client related to this basic need
 - **Client Education** – what will you teach (be specific) this client related to this nsg dx – could be treatments, body mechanics, respiratory tx, medications, community resources.

Basic Need #3:

- **Nursing Diagnosis**
- **Goal – Short term and long term – written in patient behavioral statements**
- **Nursing Care Plan:**
 - **Assessment** – List priority assessments for this client related to this basic need
 - **Action** – list nursing actions will you perform for this client related to this basic need
 - **Patient Education** – what will you teach (be specific) this client related to this nsg dx – could be treatments, body mechanics, respiratory tx, medications, community resources.

Please do not cluster the NCP, but list each plan out after each basic need. Also, you may list the basic need twice because you may have more than one nursing diagnosis. However, there should be separate goals, areas to assess, actions, and patient education.

Use the bolded titles as headings for your plan of care.

Weekly clinical prep will be the foundation of your cap map project.

Your clinical instructor will provide you with written feedback on your weekly clinical prep.

**MERCER COUNTY COMMUNITY COLLEGE
DIVISION OF SCIENCE AND HEALTH PROFESSIONS
NUR 201**

EMERGENCY ROOM OBSERVATION

Students will report to pre-conference, thereafter reporting to the ER Nurse Manager to be assigned a specific RN within whom the student will observe the nursing process in the Emergency Room.

Student objectives:

1. Describe the nurse's role in priority setting when providing nursing care in the Emergency Room.
2. Observe client triage and preparation for diagnostic procedures.
3. Observe client emergency care and transport to hospital unit.
4. Observe monitoring equipment commonly used in client assessment.
5. Observe RN administering emergency medications; describe their effect on the client as it relates to their medical diagnosis.
6. Describe the nursing care pre and post any emergency procedure.

Student Preparation:

Students will review the following chapters in Ignatavicius & Workman Textbook of Medical Surgical Nursing – Critical Thinking for Collaborative Care

Chapter 36 -- Assessment of the Cardiovascular System

Chapter 30 – Nursing Assessment of the Respiratory Function

Chapter 41 – Intervention for Clients with Acute Coronary Syndromes

Student will also prepare a weekly prep nursing care plan on a selected patient scenario.

**MERCER COUNTY COMMUNITY COLLEGE
 DIVISION OF SCIENCE AND HEALTH PROFESSIONS
 NUR 201: COLLEGE & CLINICAL LABORATORY SKILLS & PROCEDURE REVIEW FORM**

STUDENT'S NAME: _____ CLASS OF 20_____

**Each NURSING 120 student should keep the original copy of this form with them during college and clinical labs.
 Please have faculty document each time you were observed performing the procedure or skill.**

Procedure	Dates Observed & Faculty Initials	Dates Observed & Faculty Initials	Dates Observed & Faculty Initials	Dates Observed & Faculty Initials
Tracheostomy Care: <p style="text-align: right;">Suction</p> <p style="text-align: center;">Cleaning inner cannula Replacing inner cannula</p> <p style="text-align: center;">Hyperoxygenation</p>				
Assessment – Lung Sounds				
Oxygen Administration <p style="text-align: right;">Nasal Cannula</p> <p style="text-align: center;">Rebreather Mask</p> <p style="text-align: center;">Nonrebreather Mask</p> <p style="text-align: center;">Ventimask</p>				
Assessment – Heart Sounds				
Assessment – Peripheral Vascular Checks				
Subcutaneous Injection				
Intramuscular Injection				

NURSING 120: COLLEGE & CLINICAL LABORATORY SKILLS & PROCEDURE REVIEW FORM

Procedure	Dates Observed & Faculty Initials	Dates Observed & Faculty Initials	Dates Observed & Faculty Initials	Dates Observed & Faculty Initials
Intravenous Therapy: Preparing large volume IV solutions				
Intravenous Therapy: Adding secondary or piggyback medications to primary IV setups				
Intravenous Therapy: Calculating IV Drip Rate				
Intravenous Therapy: Marking IV bags according to hours to be infused				
Intravenous Therapy: Setting up infusion pumps				
Intravenous Therapy: Converting a running IV to a capped IV (heparin lock)				
Intravenous Therapy: Removing an IV catheter				
Central Venous Lines: PICC Care (peripherally inserted central catheter – single & double lumen) <p align="center">PICC Line Check</p> <p align="center">Flush before & after medication</p> <p align="center">Adding IV line after flush</p>				

Mercer County Community College
 Division of Science & Health Professions
 Nursing Program
 Clinical Laboratory Performance Evaluation
 NRS 120 – Alterations in Health I

Course: (Medical-Surgical Nursing - 5 week Clinical Experience)

Student: _____ MCCC ID # _____

Semester: _____ Clinical Facility: _____

1. **Program objective:** Functions within the provisions of the Nurse practice Act while maintaining professional standards, the Code of Ethics and accepting responsibility for self growth and life-long learning

Evaluation Period	Week 3		Week 5
Clinical Competency: Demonstrate professional and ethical behaviors			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to):			
<ol style="list-style-type: none"> 1. Complies with agency and MCCC nursing program policies and standards. 2. Treats all individuals with dignity and respect. 3. Is prepared for clinical experiences and observations. 4. Utilizes objectives for clinical/observation experience preparation and actively evaluates the experience in post conference. 5. Protects patient rights (privacy, autonomy, confidentiality) 6. Practices within the legal and ethical framework of nursing. 7. Demonstrates appropriate professional behaviors (attendance, punctuality, honesty, appearance, attitude, acceptance of criticism) 8. Reports errors promptly 9. Assumes responsibility for learning. 10. Maintains professional boundaries. 11. Accepts responsibility for assigned patients. 12. Demonstrates accountability for actions. 			

2. **Program Objective:** Assess the patient's health status in a comprehensive and holistic manner.

Evaluation Period	Week 3		Week 5
Clinical Competency: Collects and analyzes comprehensive patient assessment data			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to): <ol style="list-style-type: none"> 1. Uses correct techniques for physical assessment. 2. Uses effective interview and data collection techniques. 3. Identifies support systems and appropriately assesses patient hemodynamics. 4. Collects and analyzes relevant diagnostic testing results, interventional radiological and cardiovascular procedures, as well as surgical procedures. 5. Validates data collected for accuracy. 6. Adapts assessment techniques based on individual patient needs and characteristics (culture, spiritual, age, developmental level, illness, mental state). 7. Reports abnormal data and changes in patient's condition to the instructor and appropriate health care professionals within appropriate timeframe. 8. Assesses patients in a timely and efficient manner. 9. Assesses patients and families based on basic human needs. 10. Anticipates changes in health status based on assessments. 11. Utilizes an efficient method of data collection when organizing collected information for assigned patients (student created form, hospital form, course form) 12. Utilizes available technology to collect data necessary to provide appropriate care. 			

3. **Program Objective:** Provide individual patient care in a safe physical and psychological environment.

Evaluation Period	Week 3		Week 5
Clinical Competency: Adheres to principles of patient safety and infection control.			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to): <ol style="list-style-type: none"> 1. Comes to clinical mentally and physically prepared to provide safe and effective care to assigned patients. 2. Protects assigned patients from injury, infection, and harm. 3. Protects self and others from injury, infection, and harm. 4. Maintains a safe, effective care environment. 5. Uses available technology in accordance with agency policies and procedures. 6. Requests assistance when needed. 			

4. **Program Objective:** Provide individual patient care in a safe physical and psychological environment. (Medication Administration)

Evaluation Period	Week 3		Week 5
Clinical Competency: Administers medications safely			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to): <ol style="list-style-type: none"> 1. Recalls patient medication information including classification, indication, action, dosage, side effects, interactions, and nursing implications. 2. Calculates medication dosages and IV rates correctly. 3. Checks “seven” rights prior to medication administration (right drug, right patient-using two identifiers, right dose, right time, right route, right reason, and right documentation). 4. Performs appropriate assessments prior to, during, and after medication administration. 5. Follows correct procedures in preparing and administering medications. 6. Utilizes critical thinking and clinical judgment when administering medications to assigned patients. 7. Administers medications within the agency-allotted timeframe. 8. Evaluates the effects of medications administered while identifying if appropriate clinical outcomes have been achieved. 9. Incorporates assessment data in decision-making related to medication administration. 10. Relates patients’ medications to their health status. 11. Documents medication administration correctly according to agency policy. 			

5. **Program Objective:** Analyze, synthesize and evaluate patient-related data to develop and implement individualized patient care and teaching plans.

Evaluation Period	Week 3		Week 5
Clinical Competency: Provide individualized care based on relevant patient data			
Determines Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to): <ol style="list-style-type: none"> 1. Determines and supports assigned patients’ preferences. 2. Prepares assigned patients for interventions 3. Performs nursing skills competently to assigned patients. 4. Demonstrates caring behaviors towards patients and families. 5. Responds to patients in distress in order of priority. 6. Ensures patients’ ADLs are completed for the respective time of day. 7. Considers patients’ family and community when developing and implementing the plan of care. 8. Independently implements nursing care plan in an organized fashion. 9. Utilizes priority patient needs to determine order of care provided to assigned patients. 10. Modifies interventions in a flexible manner to assigned patients based on changing health needs. 11. Independently manages time constructively when providing care to assigned patients. 12. Assesses assigned patients’ learning needs. 13. Provides patient teaching as a part of plan of care. 14. Applies knowledge about development and pathophysiology of complex health problems in a variety of patient settings. 			

6. **Program objective:** Evaluate the achievement of patient outcomes.

Evaluation Period	Week 3		Week 5
Clinical Competency: Evaluation of patient outcomes using clinical reasoning.			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to): <ol style="list-style-type: none"> 1. Gathers adequate, relevant information for decision-making. 2. Reports abnormal data and changes in patient condition to the instructor and appropriate health care professionals within appropriate timeframe. 3. Responds appropriately to information from team members and/or other sources. 4. Uses clinical data and evidence-based practice to support decisions in providing care to assigned patients. 5. Validate nursing decisions with instructor or health care professional prior to implementing plan of care or changes in the plan. 6. Anticipates patient/family care needs for assigned patients. 7. Cluster data to identify patient/nursing problems for assigned patients. 8. Identify priority problems for assigned patients. 9. Plan individualized nursing care with appropriate outcomes for assigned patients. 10. Use critical thinking strategies in decision-making and care planning for assigned patients. 11. Modify patient care based on evaluation for assigned patients. 			

7. **Program objective:** Incorporate within nursing practice advocacy for patient’s rights taking into consideration cultural diversity, socioeconomic and political forces.

Evaluation Period	Week 3		Week 5
Clinical Competency: Act as a patient advocate			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to): <ol style="list-style-type: none"> 1. Promotes access to health care for assigned patients. 2. Protects patients’ right to make independent choices. 3. Prevents harm. 4. Protects self and others from injury, infection, and harm. 5. Eliminates potential sources of injury from assigned patients. 6. Monitors the quality of patient care provided to assigned patients. 7. Identifies and provides names and numbers of supportive organizations appropriate to medical diagnosis to assigned patients. 			

8. Program objective: Collaborate with others to respond to the needs of individuals, families, and groups across the health-illness continuum.

Evaluation Period	Week 3		Week 5
Clinical Competency: Ensure collaborative care.			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to):			
<ol style="list-style-type: none"> 1. Uses appropriate channels of communication. 2. Reports complete, accurate, pertinent information to instructor and staff. 3. Maintains effective communication with peers, staff, and instructor. 4. Conveys mutual respect, trust, support, and appreciation to student peers and other health care members. 5. Contributes to projects, discussions, and pre and post-conferences. 6. Confers with other health care and student team members regarding patient care needs. 7. Reviews collaborative behaviors when working with colleague student and health team members leading to achievement of patient outcomes. 8. Applies conflict resolution and problem solving skills as appropriate. 9. Facilitates continuity of care within and across health care settings (e.g. transfer reports, referrals). 10. Volunteers to assist student colleagues and health care members. 			

9A. Program objective: Use effective verbal and written communication skills, incorporating lifespan considerations.

Evaluation Period	Week 3		Week 5
Clinical Competency: Communicate effectively with patients, families, healthcare staff and groups			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to):			
<ol style="list-style-type: none"> 1. Provides accurate information to patient and families. 2. Uses appropriate and respectful words and tone in verbal communications. 3. Demonstrates appropriate non-verbal communication strategies. 4. Uses communication techniques to assist patients/families in coping with stressful events and changes in health status. 5. Adapts communication strategies based on patients' age, developmental level, disability, and/or culture. 6. Evaluates the effectiveness of therapeutic interactions. 			

9B. Program objective: Use effective verbal and written communication skills, incorporating lifespan considerations.

Evaluation Period	Week 3		Week 5
Clinical Competency: Document effectively.			
Clinical Performance Criteria for assignments of 1-2 patients with complex medical-surgical problems (includes, but not limited to):			
<ol style="list-style-type: none"> 1. Documents, completes, accurate, pertinent information in a timely manner. 2. Completes documentation according to agency guidelines (format, timing, abbreviations, etc.) 3. Uses appropriate terminology, spelling and grammar in written communications. 			

Week 3 - Faculty Comments – Areas of strength and areas requiring improvement:

Faculty Signature

Date

Student Comments regarding Clinical Goals

Student Signature

Date

Remediation Plan Instituted (date) _____ **(attach copy)**

Clinical Evaluation Grading Criteria:

Met Performance criteria met, performing as expected for this level
None Met Performance criteria not met, areas needing improvement require remediation plan.
Unsafe Demonstrates unsafe practice

Scoring:

An evaluation criterion is assigned for each program objective and competency twice during the clinical evaluation period.

A designation of “Not Met” requires a written remediation plan.

A designation of “Unsafe” in any of the competencies will result in a clinical failure for the course.

Faculty reserve the right to document an evaluation at any time during the clinical rotation.

Week 5 - Faculty Comments – Areas of strength and areas requiring improvement:

Faculty Signature

Date

Student Comments regarding Clinical Goals

Student Signature

Date

Remediation Plan Instituted (date) _____ (attach copy)

Clinical Evaluation Grading Criteria:

Met Performance criteria met, performing as expected for this level

Not Met Performance criteria not met, areas needing improvement require remediation plan.

Unsafe Demonstrates unsafe practice

Scoring:

An evaluation criterion is assigned for each program objective and competency twice during the clinical evaluation period.

A designation of "Not Met" requires a written remediation plan.

A designation of "Unsafe" in any of the competencies will result in a clinical failure for the course.

Faculty reserve the right to document an evaluation at any time during the clinical rotation.

Mercer County Community College
 Division of Science & Health Professions
 Nursing Program
 Clinical Laboratory Performance Evaluation
 NRS 120 – Alterations in Health I

Course: Medical-Surgical Nursing - 5 week Clinical Experience

Student: _____ **MCCC ID #** _____

Semester: _____ **Clinical Facility:** _____

- 1. Program objective:** Functions within the provisions of the Nurse practice Act while maintaining professional standards, the Code of Ethics and accepting responsibility for self growth and life-long learning

Evaluation Period	Week 3		Week 5
Clinical Competency: Demonstrate professional and ethical behaviors			

- 2. Program Objective:** Assess the patient’s health status in a comprehensive and holistic manner.

Evaluation Period	Week 3		Week 5
Clinical Competency: Collects and analyzes comprehensive patient assessment data			

- 3. Program Objective:** Provide individual patient care in a safe physical and psychological environment.

Evaluation Period	Week 3		Week 5
Clinical Competency: Adheres to principles of patient safety and infection control.			

- 4. Program Objective:** Provide individual patient care in a safe physical and psychological environment.
 (Medication Administration)

Evaluation Period	Week 3		Week 5
Clinical Competency: Administers medications safely			

5. Program Objective: Analyze, synthesize and evaluate patient-related data to develop and implement individualized patient care and teaching plans.

Evaluation Period	Week 3		Week 5
Clinical Competency: Provide individualized care based on relevant patient data			

6. Program objective: Evaluate the achievement of patient outcomes.

Evaluation Period	Week 3		Week 5
Clinical Competency: Evaluation of patient outcomes using clinical reasoning.			

7. Program objective: Incorporate within nursing practice advocacy for patient's rights taking into consideration cultural diversity, socioeconomic and political forces.

Evaluation Period	Week 3		Week 5
Clinical Competency: Act as a patient advocate			

8. Program objective: Collaborate with others to respond to the needs of individuals, families, and groups across the health-illness continuum.

Evaluation Period	Week 3		Week 5
Clinical Competency: Ensure collaborative care.			

- 9A. Program objective: Use effective verbal and written communication skills, incorporating lifespan considerations.

Evaluation Period	Week 3		Week 5
Clinical Competency: Communicate effectively with patients, families, healthcare staff and groups			

9B. Program objective: Use effective verbal and written communication skills, incorporating lifespan considerations.

Evaluation Period	Week 3		Week 5
Clinical Competency: Document effectively.			

Week 3 - Faculty Comments – Areas of strength and areas requiring improvement:

Faculty Signature

Date

Student Comments regarding Clinical Goals

Student Signature

Date

Remediation Plan Instituted (date) _____ (attach copy)

Clinical Evaluation Grading Criteria:

- Met** Performance criteria met, performing as expected for this level
- Not Met** Performance criteria not met, areas needing improvement require remediation plan.
- Unsafe** Demonstrates unsafe practice

Scoring:

An evaluation criterion is assigned for each program objective and competency twice during the clinical evaluation period. A designation of “Not Met” requires a written remediation plan. A designation of “Unsafe” in any of the competencies will result in a clinical failure for the course.

Faculty reserve the right to document an evaluation at any time during the clinical rotation.

Week 5 - Faculty Comments – Areas of strength and areas requiring improvement:

Faculty Signature

Date

Student Comments regarding Clinical Goals

Student Signature

Date

Remediation Plan Instituted (date) _____ (attach copy)

Clinical Evaluation Grading Criteria:

Met Performance criteria met, performing as expected for this level

Not Met Performance criteria not met, areas needing improvement require remediation plan.

Unsafe Demonstrates unsafe practice

Scoring:

An evaluation criterion is assigned for each program objective and competency twice during the clinical evaluation period.

A designation of “Not Met” requires a written remediation plan.

A designation of “Unsafe” in any of the competencies will result in a clinical failure for the course.

Faculty reserve the right to document an evaluation at any time during the clinical rotation.