

PRECEPTOR EVALUATION OF STUDENT

Preceptor: Autumn Norton Clinical Site: Riursido methodis Trauma Service	t 110	SPE	IHL		<u> </u>
Select the descriptor below that best describes your thoughts.	Superior	Above Average	Average	Below Average	Cannot
Data Base	A	В	C	D	E
Elicits a meaningful health history.		V			
2. Performs an accurate and methodical physical examination.		V			
3. Synthesizes objective and subjective data to arrive at differential diagnoses/hypotheses.		1			
4. Employs appropriate diagnostic/laboratory studies to complete the data base and/or confirm hypotheses.			V/		
5. Appropriately formulates/updates patient progress notes.		/			
6. Distinguishes and prioritizes patient care between immediate needs and less immediate needs.		1			
7. Establishes rapport with patients.	1/	-			
Therapeutic Regimens					
8. Selects appropriate management regimen.		<i>\</i>			
Selects appropriate medications.		1			
10. Appropriately interprets results of diagnostic tests.			./		
11. Distinguishes indications/contraindications for invasive procedures.					
	M	M	u	w	
13. Initiates appropriate health maintenance therapy (nutrition, skin care, OT, PT, etc.)		1			
14. Makes appropriate referrals/consultations.					
Initiates health teaching to promote, maintain or restore health					
L-aluation					
16. Interprets results of therapeutic efforts and continues and/or modifies therapeutic regimen as required.		_			<u> </u>
17. Uses the problem oriented medical record system to recording concise, relevant, complete data.		berrio .			
ACNP Role Aspects		,			
18. Effectively works as a member of the health care team.					<u> </u>
19. Assumes a collaborative role with preceptor.		3000			
20. Is accountable for own actions as an ACNP.		i de la constantina della cons			
21. Legally protects self and patients in the delivery of health care and in problem oriented medical record keeping.					
22. Maintains ethical standards.					
23. Assumes responsibility for defining NP role for patients, physicians, nurses and other health team members.		San			
24. Formulates and functions within an appropriate scope of practice.		1			
25. Appropriately utilizes preceptor consultation.		-			
26. Integrates research findings into plan of care and shares findings with other health team members.		1			
27. Practices self evaluation in order to identify areas for improvement.		12mm			
28. Wisely selects and seeks learning experiences in an effort to increase skills and improve areas of weakness.					***************************************
OVERALL: I would rate this student's performance:		/			
COMMENTS. Lindson is again to leave & seeks approximation to leave & aver-	.1			4	Abdenountement
COMMENTS: Lindsey is eager to learn & seeks opportunities to learn & expar		ner	-		*************
	. %			didantirina manadida di silantina	
base of knowledge. She works collaboratively & all members of the team					
communicates well & patients & family. Finally, she follows up appropriate					
communicates well & patients & family. Finally, she follows up appropriat	elý	n a			
Communicates well & patients & family. Finally, she follows up appropriate throughout the day & updates the team, patients & family. Lindsey has	elý	ł	w.		
communicates well & patients & family. Finally, she follows up appropriate throughout the day & updates the team, patients & family. Lindsey has pleasure to precept. I know that "her patients" are in good hands ye	elý beei - 1	ha			
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communicates well & patients & family. Finally, she follows up appropriate throughout the day & updates the team, patients & family. Lindsey has pleasure to precept. I know that "her patients" are in good hands ye	elý beei - 1	ha			
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Communicates well & patients & family. Finally, she follows up appropriate throughout the day & updates the team, patients & family. Lindsey has pleasure to precept. I know that "her patients" are in good hands ye every confidence that Lindsey knows her limits & will ask for his unsure of something. She is well on her way to success!	elý beel Jp	ha	ien_		
communicates well & patients & family. Finally, she follows up appropriate throughout the day & updates the team, patients & family. Lindsey has pleasure to precept. I know that "her patients" are in good hands ye every confidence that Lindsey knows her limits & will ask for her	elý beel Jp	ha	ien_		



CLINICAL FACULTY EVALUATION OF STUDENT

S	udent's Name: Lindsey Moetler Course #: 7201					
2.3	inical Faculty: Regn Crowher Clinical Site: Riversole Tr	ach	ma)		
	Select the descriptor below that best describes your thoughts.	Superior	Average	Average	Bolow	Cannot
Di	ata Base	A	В	C	D	E
1.	Elicits a meaningful health history.	T	V			
2.	Performs an accurate and methodical physical examination.		J			
3.	Synthesizes objective and subjective data to arrive at differential diagnoses/hypotheses.					
4.	Employs appropriate diagnostic/laboratory studies to complete the data base and/or confirm hypotheses.		V			
5.	Appropriately formulates/updates patient progress notes.		\sqrt{f}			
6.	Distinguishes and prioritizes patient care between immediate needs and less immediate needs.			/		<u></u>
7.	Establishes rapport with patients.		V			
T	ierapeutic Regimens					
8.	Selects appropriate management regimen.		V			
9.	Selects appropriate medications.					
10.	Appropriately interprets results of diagnostic tests.		V/			ļ
11.	Distinguishes indications/contraindications for invasive procedures.	<u> </u>	V			<u> </u>
	Competently performs invasive procedures.	<u> </u>	V	<i>/</i>		<u> </u>
	Initiates appropriate health maintenance therapy (nutrition, skin care, OT, PT, etc.)	↓	L.A	<u> </u>		
	Makes appropriate referrals/consultations.					
	Initiates health teaching to promote, maintain or restore health			V		
	aluation		1			
	Interprets results of therapeutic efforts and continues and/or modifies therapeutic regimen as required.	<u> </u>	A	V		
	Uses the problem oriented medical record system to recording concise, relevant, complete data.		1			
A(CNP Role Aspects		1			
18.	Effectively works as a member of the health care team.		$^{\vee}$ /			
19.	Assumes a collaborative role with preceptor.		1			
20.			4			ļ <u> </u>
21.	Legally protects self and patients in the delivery of health care and in problem oriented medical record keeping.	 	1			 -
22.		 	\vee \varLambda			
	Assumes responsibility for defining NP role for patients, physicians, nurses and other health team members.		1			
	Formulates and functions within an appropriate scope of practice.	ļ	1			
	Appropriately utilizes preceptor consultation.	 	\vee			
	Integrates research findings into plan of care and shares findings with other health team members.		1			
27.	Practices self evaluation in order to identify areas for improvement.		/	,		
28.	Wisely selects and seeks learning experiences in an effort to increase skills and improve areas of weakness.	12831			1977	Elim
Q	VERALL: I would rate this student's performance:	A1	12244		annes!	
COI	MMENTS: Ruick Learner - quickly able to synthesize feedback provider notes. Transitioned well to writing provider n	4	·na	PI	04	
\mathbb{N}	provenotes. Transitioned well to writing provincer 11	D-46 6	<u>)</u> ,			
a	promise an inity of Conflete & Thortingh Dlan	inc	900	DY	atry	20
al	obal needs of pt. Very motivated in beeking leavning	İ	į			J
to	obal needs of pt. Very motivated in beeking learning poortunities. Sought appropriate feedback. Very wes	Jo d	On	2_		
<u></u>	Harris Carron La					
Ť	MD BATTABATA					
()	completed reggived hours, logs, sorphotes + Hapa					
	V V					
<i>(</i> 3)	Deth Crowcher MS, ACRIP Date 7/28/1	3				
A. 1000	Valida No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_				



PRECEPTOR EVALUATION OF STUDENT

Student's Name: Lindsey Mocley	Course #: NUR 7202 ACNP Practicum								
Clinical Faculty: Beth Crowner CNP	Clinical Site: DSU BICLL	50	III STS	No. 2	3811				
Preceptor: Both Crowcher (NP	Course Faculty: KA Scordo, PhD,	RN,	ACN	P. F	AAI	NP			
Treation (2)		Willer T	110000	1000	100	_ 0			
Select the descriptor below that best de	scribes your thoughts.	Superior	Above	Average	Below	Cannol			
Data Base		A	B	C	D	E			
Elicits a meaningful health history.			V			ļ			
2. Performs an accurate and methodical physical examination.	1	V			<u> </u>				
3. Synthesizes objective and subjective data to arrive at differential di	agnoses / hypotheses.	V	,			ļ			
4. Employs appropriate diagnostic / laboratory studies to complete the	ļ <u>-</u>	V							
5. Appropriately formulates/updates patient progress notes.	1	V							
6. Distinguishes and prioritizes patient care between immediate need	s and less immediate needs.	/	7						
7. Establishes rapport with patients.			V						
Therapeutic Regimens						275			
8. Selects appropriate management regimen.			1						
Selects appropriate medications.									
10. Appropriately interprets results of diagnostic tests.									
11. Distinguishes indications/contraindications for invasive procedures			1						
12. Competently performs invasive procedures.			Y,						
13. Initiates appropriate health maintenance therapy (nutrition, skin care	e, OT, PT, etc.)		V /						
14. Makes appropriate referrals/consultations.			1			ļ			
15. Initiates health teaching to promote, maintain or restore health						<u> </u>			
Evaluation			189						
16. Interprets results of therapeutic efforts and continues and / or mod	ifies therapeutic regimen as required.		J						
17. Uses the problem oriented medical record system to record concis	e, relevant, complete data.		1						
ACNP Role Aspects									
18. Effectively works as a member of the health care team.		V	1						
19. Assumes a collaborative role with preceptor.		1	V						
20. Is accountable for own actions as an ACNP.		1	1						
21. Legally protects self and patients in the delivery of health care and	in problem oriented medical record keeping.		J						
22. Maintains ethical standards.			V						
23. Assumes responsibility for defining NP role for patients, physicians	s, nurses and other health team members.		v						
24. Formulates and functions within an appropriate scope of practice.			U						
25. Appropriately utilizes preceptor consultation.			VI			<u> </u>			
26. Integrates research findings into plan of care and shares findings w	vith other health team members.		V						
27. Practices self evaluation in order to identify areas for improvement			W,						
28. Wisely selects and seeks learning experiences in an effort to incre			V						
OVERALL: I would rate this student's performan	CO.		V						
COMMENTS: Lindsey was an excellent s	student, Very Selt motiva	10 60							
Sought out opportunities for leave	ing. Excellent community	ath	ric.	5 k	111:	5			
with patrents, families and in	comments: Lindsey was an exceitent student. Very Self motivated. Sought out opportunities for learning. Excellent communication Skills with patients, families and multidisciplinary tram. It ble to quickly synthesize information, evaluate pt & olevelop plan based on priority diagnoses. Lindsey you will succeed in whatever area you choose to practice.								
QUICKLY SYNTHY SIZE INFORMATION, EV	alvaic pt + olductop Dla	17	675	5d	OY	_			
ar overty diagnoses Lundson 40	LUMI SUCCESSIN What	-00	e r	ar	C.d.				
the second secon	2011 30 30 74 110 30 40								
you induse to practice.									
					····				
7)	10		······································					
Preceptor Signature BANCADUCKE CNI	Date 10	13	911	7					



Sti	ident:	Lindsey Moeller			Cour	se/Quarter/Year: NUR 795 Summer 201			
Clinical Site: Riverside Methodist-Trauma				Preceptor: Autumn Norton, ACNP/ANP					
	Wk 6	 Each week, complete this document For each date, make an entry for every There may be multiple entries for the same be listed again for each date. Under comments, list any procedures p 	ime	pati	ent, i	.e., a long-term patient in your caseload would			
I	Date	Diagnosis	F	М	yg v	Comments / Activities E/M Code			
1	1411	Bfacial avulsion Creat 1 KT		V	80				
2	6/11	Found down + ETOH. 258 + LOC Omax sinus fractive medilaflant walls Osinus roof Dant orbital floor		/	23				
3	6/11	B 7-11 vib fx To compression fx		V	91				
4	6/11	H/d dementia	V		86				
5	6/11	B5th-7th nbfx Dpulm cartusian type Zudontoid fx, Bavulus fx lat/m	X		81	intubated to scient			
6	6/11	Gorbital superior fx, Whasalfx O scapula fx		V	37	intubated			
7	6/11	found down in parking Trauma Levell for respiratory arrest, Mechanical fall Fall, Displaced 2-3 vib fx, hyponatremic		V	56				
8	6/11	Fall, Displaced 2-3 vib fx, hyponatremic Pulmonany edema	V		86	intubated			
6/	6/13	fall. DETOH BIPH 3.5mm facial Jehin elehymasis	V		(at)				
	6/13	Level 1- Zarge IPH, SDH Fall found down	V		86	intubated, presponse to Stimuli, DNRCC, waiting for family to withdraw			
11	6/13	Ocommunated distal radius fx + E70H.302		V	34				
12	6/13	LI chance fx, confusion of mesentene and retroperitoneal fat		/	60				
13	6/13	SIPfall dementia, ESRD Superficial Exchead lac mve ejected from car (Ppublic rames grade 4 spiear lac 13/14 endplate land for facial lac fall EECF (Palstal vodilus +X) Blemoral neck fx	V		52,				
	413	muc ejected from car (B) public ramus grade 4 spicen lac 13/14 endplate como fx facial lac	5	V	37				
15	4/13	Fall EECF Baistal vodius fx Ofemoral neck fx	V		90				



Sti	ident:	Lindsey Moeller		(our	se/Quarter/Year: NUR 795 Summer	r 2015
		ite: Riverside methodist Hapital	7	Į, l	rece	ptor: Autumn Norton, ACNP/A	NP
	Wk T	Each week, complete this documentFor each date, make an entry for every	pati nne	ent y pati	ou so ent, i	ee. .e., a long-term patient in your caseload wou	
I)ate	Diagnosis	F	M	Age	Comments / Activities	E/M Code
1	6/18	(B) distal radius fx (B) malleolar fx (B) great toe fx		/	54		
2	4/18	Cankle laceration Egreat toe fx	w/		90	Nom-home & walking boot	
3	6/18	Open (P) proximal finidalle finger fx Comminuted Odisplaced closed radius fx			66		
4	Iel18	Warm laceration à visible bicep			65		
5	6/18	Ofwortal temporal subgaleal hemati medial wall maxillary fx	V		3 _E		
6	6/18	grade II liver lac l nosal bone fx	V		21		
7	6/18	3DH and SAH Trzeompression fracture		V	84		
8	4/18	(Counadin)		V	88	Hx PE and DVT Hx CVA Factor V Leiden Oside residual	veakh
9	6/25	laceration of OFA, tendon exposed punched glass door		1	48		
10	6/25	mechanical fall Dand, 5-8th rib fx milddisplacement		V	62	HX-Blung transplant for pulmonery fibrosis	LUI JANA PRINA PARA PARA PARA PARA PARA PARA PARA PA
No.	6/25		tuni	un	53		
12	6/25	@ Jemoral DVT MVC	! /		23	SIP NC filter	TO DESCRIPTION OF THE PROPERTY
13	6/05	Subdural hematoma & 3mm Shift		,	63	•	
	6/25	SDH 15mm . physical assult scalp lateration		/	69		
15	4/25	SDH no shift Respiratory distress			86	intubated	



Stı	ident:	Lindsey Moeller			Cour	se / Quarter / Year: NUR 795 Spring	2007
Cli	nical S	ite: 8 Rhodes ICU / OSU		1	Prece	eptor: Beth Croucher	
	Wk 3	 Each week, complete this document For each date, make an entry for every possible. There may be multiple entries for the same be listed again for each date. Under comments, list any procedures per procedures. 	me	pati	ent, i	.e., a long-term patient in your caseload	l would
I	Date	Diagnosis	F	M	Age	Comments / Activities	E/M Code
1	10/2	Resp Failure R/T hypoxemia?GBS ESRD		V	59	intubated	
2	10/2	7GBS ESRD "Multiple Mycloma S/Pchemo	/	/	53	plasma pheresis HD	
3	10/2	Generalized dystonia Buelofen pump	V		46		
4	10/3	Lung Cont mets liver /bone flemopt Resp [Ailure R]Thypoxemia	YSis	V	59	extubated	
5	1. 1.	26BS			53	Intubated	
6	10/3	MM SIP chemo General ized dystonica Baclofen pump / Respiratory Fallur	/		46	intubated	
7	10/3	NASH Respiratory Failure	V		41		
8		· 0					
9							
10					111 111 1111 1111		
11					E		
12							
13					The state of the s		
14							
15	į			la l			

1)	In what ways did you feel confident about your abilities this week in clinicals?
	Communicating with multidiciplinary team
2)	In what areas did you feel weakest during this week of clinicals?
2)	Reading CKR's
	Formulating plan
3)	List one new skill or piece of knowledge that you learned this week.
	Baclofen pump use for dystonia Tx gastropareis for with enythompsin
	Tx gastropareus for with engironizer
4)	List clinical goals for next week.
7)	and to take. 2-3 pts, present on rounds, place
	orders and formulate plans



Stu	ident:	: Lindsey Moeller Course / Quarter / Year: NUR 795 Spring 2007										
Cli	Clinical Site: OSU 8 ICU Pulmenary Contral Careceptor: Beth Croucker, CNP											
	Wk 4	 Each week, complete this document For each date, make an entry for every patient you see. There may be multiple entries for the same patient, i.e., a long-term patient in your caseload would be listed again for each date. Under comments, list any procedures performed, or other pertinent information. 										
I	Date	Diagnosis	F	M	Age	Comments / Activities	E/M Code					
1	10/16	J	/	,	77							
2	10/16	Acute Respfailure ESLD, Esophagul Varices	~		53							
3	10/16	Metabolic Encephalopathy Stroke Thrombotic Microansiopathy		V	64							
4	10/16	myatheria Gravis Osteomyelitis Acute Relp Failure CHF/COPD	1	,	72		1					
5	10/10			V	60							
6	10/17	Acute Resp Failur, Plenal Effusion hemotharax, CAP	V		77							
7	10/17	weakness, DM, HCAP		/	51							
8	ioln	Acute Resp Failure Encephalopathy, Exophageal Varices			53							
9	10/17	metabolic Encephalopathy, Stroke Thrombotic Microcangepathy Myathenia Grans/osleomyelitis Acede Resp Faller/CHF		V	64							
10	10/17	Myathenia Grans/osteomyelitis Acete Resp Falure/CHF	1		72							
11	10/17	Acute Resp Failure ARDS, parainfluenza 4+		V	60							
12	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·			CALCUMATION MANAGEMENT							
13												
14												
15			10, 2004, 3004, 300									

In what ways did you feel confident about your abilities this week in clinicals? - formulating problem list - speaking with consulted services on plan of care/collaborating
In what areas did you feel weakest during this week of clinicals? - follow -up throughtut shift after rounds - prioritizing plan on complex patients
List one new skill or piece of knowledge that you learned this week. - Implementing / Following ARDS net - PH and we of Flolan
List clinical goals for next week. - Cont to take pts and formulate plans independently, - Cont to look at diagnostic CXR's and improve on reading as well as compairing. - Improve follow-up throughout shift