

PRECEPTOR EVALUATION OF STUDENT

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| Student's Name: <u>Lindsay Moeller</u> | Course #: <u>NUR 7203 ACNP Practicum</u> |
| Clinical Faculty: <u>Beth Croucher</u> | Clinical Site: <u>OSU - Hospitalist</u> |
| Preceptor: <u>Dr. Allison Heacock</u> | Course Faculty: <u>KA Scordo, PhD, RN, ACNP, FAANP</u> |

Select the descriptor below that best describes your thoughts.

| | Superior | Above Average | Average | Below Average | Cannot Evaluate |
|---|----------|---------------|---------|---------------|-----------------|
| Data Base | A | B | C | D | E |
| 1. Elicits a meaningful health history. | X | | | | |
| 2. Performs an accurate and methodical physical examination. | X | | | | |
| 3. Synthesizes objective and subjective data to arrive at differential diagnoses / hypotheses. | X | | | | |
| 4. Employs appropriate diagnostic / laboratory studies to complete the database and / or confirms hypotheses. | X | | | | |
| 5. Appropriately formulates/updates patient progress notes. | X | | | | |
| 6. Distinguishes and prioritizes patient care between immediate needs and less immediate needs. | X | | | | |
| 7. Establishes rapport with patients. | X | | | | |
| Therapeutic Regimens | | | | | |
| 8. Selects appropriate management regimen. | X | | | | |
| 9. Selects appropriate medications. | | X | | | |
| 10. Appropriately interprets results of diagnostic tests. | | X | | | |
| 11. Distinguishes indications/contraindications for invasive procedures. | X | | | | |
| 12. Competently performs invasive procedures. | | | | | X |
| 13. Initiates appropriate health maintenance therapy (nutrition, skin care, OT, PT, etc.) | X | | | | |
| 14. Makes appropriate referrals/consultations. | | X | | | |
| 15. Initiates health teaching to promote, maintain or restore health | X | | | | |
| Evaluation | | | | | |
| 16. Interprets results of therapeutic efforts and continues and / or modifies therapeutic regimen as required. | X | | | | |
| 17. Uses the problem oriented medical record system to record concise, relevant, complete data. | X | | | | |
| ACNP Role Aspects | | | | | |
| 18. Effectively works as a member of the health care team. | X | | | | |
| 19. Assumes a collaborative role with preceptor. | X | | | | |
| 20. Is accountable for own actions as an ACNP. | X | | | | |
| 21. Legally protects self and patients in the delivery of health care and in problem oriented medical record keeping. | X | | | | |
| 22. Maintains ethical standards. | X | | | | |
| 23. Assumes responsibility for defining NP role for patients, physicians, nurses and other health team members. | X | | | | |
| 24. Formulates and functions within an appropriate scope of practice. | X | | | | |
| 25. Appropriately utilizes preceptor consultation. | X | | | | |
| 26. Integrates research findings into plan of care and shares findings with other health team members. | | X | | | |
| 27. Practices self evaluation in order to identify areas for improvement. | X | | | | |
| 28. Wisely selects and seeks learning experiences in an effort to increase skills and improve areas of weakness. | X | | | | |
| OVERALL: I would rate this student's performance: | X | | | | |

COMMENTS: Lindsay is overall an exceptional NP student. She takes thorough H&Ps & daily assessments. Her physical exam is beyond complete everytime. She has excellent patient rapport & family report. She took initiative to explain her role to patients, families & staff & became the patients primary provider without prompting. Her clinical reasoning & ability to make a plan are above where I expected them to be & will only improve with time. →

Preceptor Signature Allison Heacock mo Date 4/8/14

Learning medical management, diagnostic testing & appropriate consultations to a superior level will only take Lindsey a short time during ~~the~~ on the job training as she is above avg/this area. Overall, Lindsey Lindsey's next step



Weekly ACNP Clinical Log

CLINICAL FACULTY: Beth Croucher, CNP

| Student: <u>Lindsey Moeller</u> | | Course / Quarter / Year: <u>Spring 2014</u> | | | | |
|---|---|---|---|-----|-----------------------|----------|
| Clinical Site: <u>OSU / Hospitalist</u> | | Preceptor: <u>Allison Heacock, MD</u> | | | | |
| Wk | <ul style="list-style-type: none"> • 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. | | | | | |
| Date | Diagnosis | F | M | Age | Comments / Activities | E/M Code |
| 1 | 1/24 Sickle Cell Crisis ACS | ✓ | | 23 | | |
| 2 | 1/24 Chronic abd pain gastroparesis, G/J tube | ✓ | | 28 | | |
| 3 | 1/29 MRSA PNA, bacteremia COPD | ✓ | | 46 | | |
| 4 | 1/29 GI Bleed Paraplegia s/p MVA 2011 | | ✓ | 23 | | |
| 5 | 1/29 Klebsiella PNA Resp Failure VRE + Pseudomonas UTI | | ✓ | 85 | | |
| 6 | 1/30 MRSA PNA COPD bacteremia | ✓ | | 46 | | |
| 7 | 1/30 GI Bleed Paraplegia s/p MVA 2011 | | ✓ | 23 | | |
| 8 | 1/30 Klebsiella PNA / VRE + Pseudomonas Resp Failure UTI | ✓ | | 85 | | |
| 9 | 1/30 FUO Hypotension, AKI | | ✓ | 71 | | |
| 10 | 1/31 MRSA PNA COPD | ✓ | | 46 | | |
| 11 | 1/31 GI Bleed Paraplegia MVA 2011 | | ✓ | 23 | | |
| 12 | 1/31 Klebsiella PNA / VRE / Pseudo Resp Failure UTI | | ✓ | 85 | | |
| 13 | 1/31 Hypotension, AKI, FUO | | ✓ | 71 | | |
| 14 | 1/31 Thrombus @ atria → @ ventricle Factor V Leiden, PE | ✓ | | 39 | thrombolytic therapy | |
| 15 | | | | | | |

Weekly ACNP Charting

CLINICAL FACULTY: Beth Croucher

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| Student: <u>Lindsey Moeller</u> | Course / Quarter / Year: <u>Spring 2014</u> |
| Clinical Site: <u>OSU Hospitalist</u> | Preceptor: <u>Dr. Allison Heacock</u> |

- WE**
2
- Each week, complete this document
 - For each patient, list the primary diagnosis 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.

| Date | Diagnosis | F | M | AP | Comments / Activities | E/M Code |
|--------|--|---|---|----|-----------------------|----------|
| 1 2/1 | Respiratory Failure Hx COPD 2/2 HCAP/UTI | ✓ | | 72 | | |
| 2 2/1 | MRSA bacteremia Septic Shock Encephalopathy, Acute | | ✓ | 72 | | |
| 3 2/1 | MRSA bacteremia COPD Lung Abscess bilateral | ✓ | | 46 | | |
| 4 2/1 | Respiratory Failure VRE bacteremia, UTI, HF, ileus | | ✓ | 85 | | |
| 5 2/2 | FUO, Hx HF, Behcet's | | ✓ | 71 | | |
| 6 2/2 | Respiratory Failure Hx COPD 2/2 HCAP/UTI | ✓ | | 72 | | |
| 7 2/2 | MRSA bacteremia Septic Shock, Encephalopathy Lung Abscess - CTx2 | | ✓ | 72 | | |
| 8 2/2 | MRSA bacteremia | ✓ | | 46 | | |
| 9 2/2 | Respiratory Failure VRE bacteremia, UTI, HF, ileus | | ✓ | 85 | | |
| 10 2/4 | FUO, Hx HF, Behcet's | | ✓ | 71 | | |
| 11 2/4 | Acute Encephalopathy RSV@ Exacerbation COPD | | ✓ | 68 | | |
| 12 2/4 | Resp Failure Hx COPD HCAP/UTI | | ✓ | 85 | | |
| 13 2/4 | MRSA Bacteremia Septic Shock, UTI INR 7.9 | | ✓ | 72 | | |
| 14 2/4 | Lung Abscess MRSA Bacteremic | ✓ | | 46 | | |
| 15 2/4 | Resp Failure VRE bacteremia, UTI, HF | ✓ | | 85 | | |

Weekly ACNP Clinical Log

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| Clinical Site: <u>OSU Hospitalist</u> | Preceptor: <u>Dr. Allison Heacock</u> |

| | |
|----------------|---|
| Wk <u>3</u> | <ul style="list-style-type: none"> • 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. |
|----------------|---|

| Date | Diagnosis | F | M | Age | Comments / Activities | E/M Code |
|---------|---|---|---|-----|-----------------------|----------|
| 1 2/10 | UTI, Suprapubic catheter Abd pain - Subacute | ✓ | | 69 | | |
| 2 2/10 | Ⓛ Adrenal hemorrhage Ⓛ Adrenal tumor, adrenal insufficiency | | | 50 | | |
| 3 2/10 | AV fistula clotted ESRD, hyperkalemia | | ✓ | 59 | | |
| 4 2/10 | Sickle Cell Crisis | ✓ | | 33 | | |
| 5 2/10 | Sickle Cell Crisis - Abd pain Seizure - Status - mental status Δ | | ✓ | 39 | | |
| 6 2/19 | hematochezia Colorectal Ca | ✓ | | 68 | | |
| 7 2/19 | COPD exacerbation HIV infection | | ✓ | 59 | | |
| 8 2/19 | ileus, narcotic induced Abd pain | ✓ | | 35 | | |
| 9 2/19 | Psychosis, Bipolar UTI | ✓ | | 71 | | |
| 10 2/19 | Migraine SSC | ✓ | | 53 | | |
| 11 2/20 | Migraine, SSC | ✓ | | 53 | | |
| 12 2/20 | ileus, narcotic induced | ✓ | | 35 | | |
| 13 2/20 | HIV, COPD Exacerbation | | ✓ | 59 | | |
| 14 2/20 | Cirrhosis, Ⓛ knee Ⓛ Hemolytic Strep and bacteremia | | ✓ | 62 | | |
| 15 2/20 | Acute Encephalopathy UTI pseudomonas | ✓ | | 78 | | |

Weekly ACNP Clinical Log

CLINICAL FACULTY: Beth Croucher

Student: Lindsey Moeller Course / Quarter / Year: Spring 2014
 Clinical Site: OSU Hospitalist / Internal Med Preceptor: Dr. Heacock

Wk
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- Each week, complete this document
- For each date, make an entry for every patient you see.
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| Date | Diagnosis | F | M | Age | Comments / Activities | E/M Code |
|---------|--|---|---|-----|-----------------------|----------|
| 1 2/24 | Crohn's exacerbation | | ✓ | 27 | | |
| 2 2/24 | UTI Acute encephalopathy | ✓ | | 78 | | |
| 3 2/24 | Alcoholic Intoxication | | ✓ | 21 | | |
| 4 2/24 | Panic/Anxiety Attack Suicide attempt | ✓ | | 49 | | |
| 5 2/24 | MRSA wound infection Sepsis, Chronic Pain Syndrome | ✓ | | 42 | | |
| 6 2/24 | Beta-hemolytic Strep Osteomyelitis, Respiratory Failure | ✓ | | 55 | | |
| 7 2/25 | Acute Pancreatitis on Chronic | | ✓ | 33 | | |
| 8 2/25 | Sepsis, Spinal Wound AKI | ✓ | | 42 | | |
| 9 2/25 | Suicide Attempt, Panic/Anxiety attack | ✓ | | 49 | | |
| 10 2/25 | Acute on Chronic Encephalopathy UTI, AKI | ✓ | | 78 | | |
| 11 2/25 | Diffuse Contact Dermatitis | ✓ | | 48 | | |
| 12 2/25 | Acute Blood Loss Anemia | | ✓ | 55 | | |
| 13 | | | | | | |
| 14 | | | | | | |
| 15 | | | | | | |