



State University of New York

Upstate Medical University

College of Nursing

Clinical Management in Primary Health Care: Family Nurse Practitioner

CLINICAL PERFORMANCE EVALUATION

Preceptor Evaluation

NP I _____

NP II _____

NP III _____

Student: _____

Preceptor: _____

Site: _____

Track: _____

Date: _____

Key: 1 = Unsatisfactory
2 = Performed with extensive guidance
3 = Performed with moderate guidance
4 = Performed with minimal guidance
NA/NO = Not applicable / Not Observed

CLINICAL OUTCOMES

NP I : The NP I student should be able to perform a complete History & Physical on a healthy patient and begins to perform a simple focused exam

NP II: The NP II student begins to manage more complex cases with moderate guidance

NP III: The NP III student demonstrates proficiency and independence while managing patients throughout the lifespan.

Please rate the student from 1 (unsatisfactory) to 4 (performs with minimal guidance) based on the student's level of learning and performance in the clinical setting:

- A. Reviews medical record to establish data base _____
- B. Conducts appropriate initial or interim history _____
- D. Performs age appropriate assessment and physical exam on age specific patients. _____
- E. Identifies history, PE, and recognizes abnormal findings in diagnostics as normal or abnormal (Apply diagnostic reasoning approach to clinical decision making to determine appropriate differential diagnoses) _____
- F. Confirms findings with preceptor _____
- G. Gives valid rationale for assessment measures _____

- H. Proposes and confirms diagnoses with preceptor and explains to patient. _____
- I. Demonstrates therapeutic communication with client/family using a family-centered and culturally-sensitive approach. _____
- J. Completes record accurately, and logically using appropriate medical terminology. Includes only/all relevant information in a timely manner _____
- K. Accepts responsibility for own actions and learning _____
- L. Determines plan for further tests and treatment. _____
 Determines plan to consult/refer/collaborate/ follow-up _____
- M. Demonstrates respectfulness, punctuality, timeliness, and Professional demeanor _____

VIII. Please comment on the student's overall clinical performance

Preceptor Signature _____ # Clinical Hours _____

Preceptor Name (Print) _____ Date _____

Student Signature _____ Date _____

Faculty Signature _____