

Clinical Performance Review for Child Health Enhanced Role Nurse Student/Rostered CHERRN

Student/CHERRN Name _____ Date _____

This evaluation form is designed for use while the RN is on site at the Child Health Training Program for the two weeks of directed study and during the supervised clinical practicum.; or as the recommended competency assessment of the rostered Child Health Enhanced Role Nurse by local agencies or during the DPH Onsite Clinical Assessment (OCA). This form is to be used by the Training Program Educator, designated Clinical Advisor, or Regional Child Health Nurse Consultant (RCHNC) to have a comprehensive understanding of physical appraisal expectations and competencies.

Please check the appropriate evaluation which best describes the student/CHERRN’s performance for each skill. If a skill cannot be scored, please indicate why.

S = Satisfactory N/I = Needs Improvement U = Unsatisfactory No= Not Observed/Not Applicable

History Taking					
Obtains a comprehensive initial or interval history, including: <i>completion of the history should follow local policy for hardcopy or electronic documentation and meet the HCPG requirements outlined in the DPH Well Child Audit Tool Instructions.</i>					
	S	N/I	U	NO	Comments
A. Chief Complaint					
B. History of Present Illness (LOCSTAAM: Location, Onset, Character, Severity, Timing, Associated symptoms, Aggravating/Alleviating factors, Meaning)					
C. Past Medical History					
D. Family History					
E. Social History					
F. Developmental History					
G. Patient Profile					
H. Descriptive Review of Systems					

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TECHNICAL SKILL	S	N/I	U	NO	Comments
A. Skin Inspection & palpation of entire body. Note turgor, temperature, color, lesions, scars, texture, tattoos, piercings, and nails.					
B. Head and Face					
1. Inspect & palpate cranium for symmetry, size, shape, fontanel (note sizes)					
2. Inspect scalp for lesions.					
3. Inspect & palpate hair for texture, quantity, and distribution.					
C. Eyes					
1. Inspect for:					
a. Position of globe in orbit					
b. Symmetry of size and set					
c. Lid lag or Ptosis					
d. Irritation/crusting/discharge of palpebral fissures					
e. Inferior conjunctival sacs: pink mucosa					
f. Sclerae – white					
g. Irises – symmetrical/round					
2. Pupils – PERRL					
3. Hirshberg and cover tests - negative for strabismus					
4. EOM'S intact – negative for Nystagmus					
5. Red reflexes – present and normal bilaterally					
6. Visual Screen					
a. <4 yrs. – note if follows light , regards face, etc.					
b. Visual Acuity					
a. \geq 4 yrs. – Titmus vision tester or acuity chart testing					
D. Ears					
1. Inspect & palpate external ear, note lesions, mobility, pain					
2. Otosopic Exam: note					
a. canal – color, excess wax, drainage					

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b. TM's – Assess color, long process, short process, umbo and light reflex. Perforations? Mobility?					
3. Hearing assessment					
a. 4 years > – audiometry					
E. Nose					
1. Inspect & palpate for symmetry of nares					
2. Inspect nares for septum: midline, mucosa: pink, discharge, turbinate: size, obstructions					
3. Palpates frontal and maxillary sinuses for tenderness in older children					
F. Mouth					
1. Inspects lips for symmetry and lesions					
2. Inspect Mouth:					
a. Gums: color, lesions, edema					
b. Teeth: count and note obvious caries					
c. Tongue: note lesions, papillae evenly distributed, movement smooth					
d. Buccal mucosa: color, lesions					
e. Posterior pharynx / Uvula: color, exudate					
f. Tonsils: note size (grades 0-4+), color, exudate					
3. Assess Gag reflex					
4. Assess Voice / Cry: hoarseness, appropriate for age					
5. In newborn, visualize oral cavity for intact soft & hard palate, masses					
G. Neck					
1. Inspect for symmetry, lesions, and extra folds anteriorly and posteriorly, webbing					
2. Inspect and palpate					
a. Trachea midline & mobile					
b. Palpate for cervical nodes. If enlarged note – name of node, length & width, texture (soft or firm), mobility (mobile or fixed) tender/non-tender					
c. Palpate thyroid tissue – isthmus & lobes for enlargement or nodules					

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d. Palpate clavicles for intactness and symmetry					
3. Assess for Full Range of Motion (FROM)					
H. Breasts					
1. Inspect for symmetry in size and contour, dimpling, lesions, “orange peel” skin.					
Perform highlighted exam only if positive finding on inspection:					
2. Check nipples for discharge, inversion					
3. Palpate systematically for masses (note same qualities as for nodes) or tenderness					
4. Palpate – deep in axillae for axillary nodes – subpectoral, subscapular, central, lateral. Note same qualities as for cervical nodes					
5. Tanner Stage for females					
I. Thorax: General					
Inspect and palpate chest anteriorly and posteriorly for symmetry of shape, movement with respiration, quality of respirations, abnormal pulsations, location of apical impulses and fremitus.					
J. Heart					
1. Apical pulse for 1 minute – rate, regularity; sinus arrhythmia?					
2. Auscultate systematically with diaphragm & bell, noting clear S ₁ and S ₂ at the following areas:					
• Aortic: 2 nd R ICS @ sternal border (SB)					
• pulmonic: 2 nd L ICS @ SB					
• Erb’s point: 3 rd L ICS @ SB					
• Tricuspid: 4 th or 5 th L ICS @ SB*					
• Mitral: 4 th or 5 th L ICS @ mid-clavicular line*					
* 4 th ICS if client < 6-7 y/o or 5 th ICS if > 6-7 y/o					
3. Note presence of murmur, extra heart sounds or split S ₂ on inspiration.					
4. Palpates brachial and femoral pulse simultaneously					
5. Palpates peripheral pulses					

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6. Blood pressure and BP Percentile \geq 3 years of age and older					
K. Lungs					
1. Count respiratory rate for 1 minute					
2. Auscultate with diaphragm anteriorly, posteriorly, and laterally. Note whether breath sounds clear & equal bilaterally; note any adventitious sounds.					
L. Abdomen & Inguinal Area					
1. Inspect for symmetry of movement with respiration, lesions, scars, contour					
2. Auscultate with diaphragm to ascertain the presence of normally active bowel sounds in all 4 quadrants.					
3. Palpate systematically lightly, then deeply for tenderness, palpable organs (liver, kidney, spleen) masses.					
4. Inspect and palpate for umbilical hernia – note size of opening and reducibility.					
5. Inspect inguinal area for bulges					
6. Palpate inguinal area for nodes					
7. Palpate femoral pulses – note symmetry					
M. Genitalia					
Male:					
1. Definitely male?					
2. Circumcised – without lesions or discharge OR Uncircumcised – foreskin retractable, - no lesions or discharge					
3. Meatus on tip & adequate					
4. Testes in scrotum – Assess if symmetrical in size, consistency & contour					
5. Tanner Stage					
6. Inspect anus without irritation, not gaping					
Female:					
1. Definitely female?					
2. No lesions, discharge or labial adhesions (Use traction method)					
3. Tanner Stage					

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4. Inspect anus without irritation, not gaping.					
N. Extremities					
Lower					
1. Note whether symmetrical in length, muscle mass, strength, tone.					
2. Note FROM					
3. Palpate peripheral pulses (2 upper and 2 lower) – note symmetry.					
4. Infants – Ortolani test					
Upper					
1. Note whether symmetrical in length, muscle mass, strength, tone.					
2. Note FROM					
O. Neurological					
1. Deep tendon reflexes: note symmetry and grade (0-4+)					
a. Triceps					
b. Biceps					
c. Brachioradialis					
d. Patellar					
e. Ankle					
2. Babinski or Plantar present					
3. Infants – note primitive reflexes observed:					
a. Rooting					
b. Suck					
c. Stepping					
d. Clonus					
e. Tonic Neck (ATNR)					
f. Palmar Grasp					
g. Plantar grasp					
h. Moro					
4. Cranial Nerve Tests (age •3 yrs)					
CN I: Smell (<i>may defer—hard to assess with children</i>)					
CN II: <i>See Visual Acuity screening</i>					
CN III, IV, and VI: Extra-ocular movements equal, no Nystagmus or ptosis. Observe consensual pupillary restriction to					

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light.					
CN V: Sensation: light and sharp touch on cheeks (corneal reflex optional) Motor: bilateral strong chewing response,					
CN VII: Smile, look at ceiling, frown, show teeth, squint, wrinkle forehead, puff out cheeks. Note strength and symmetry. <i>May assess taste, but could lose child's cooperation.</i>					
CN VIII: <i>(See Hearing Screening)</i>					
CN IX& X: Palate elevates when saying "aaah." Uvula midline. Gag reflex tested during exam of mouth					
CN IX: SCM & shoulder girdle strength -- Elevate shoulders against pressure, turn head to one side and resist examiner's attempts to turn it back.					
CN XII: Stick out tongue—note symmetry. Strength: Push tongue against inside of each cheek.					
5. Strength and Motor Tests Note gait (give large area to walk, run), grip, Romberg, stand & hop on each foot, walk on heels, tip-toe, tandem walk					
P. Spine					
1. Inspect spine and sacral area for extra growths of hair, sinus tracts					
2. Palpate spine for tenderness					
3. Examine for kyphosis, lordosis, and scoliosis from lateral position					
4. Note symmetry of buttocks and gluteal folds					
5. Check for costovertebral angle (CVA) tenderness					
Q. Developmental					
0-6 yrs: Standardized Developmental Screening Instrument Note delays or cautions. If Screening Instrument not used, note current age-appropriate social, language and fine & gross motor capabilities.					

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Screening Procedures Performs, records and/or interprets results of the following					
o Any Laboratory tests done					
o Anthropometrics/Measurements and Vital Signs					
General Technique of Student					
1. Orderly sequence of appraisal					
2. Correct use of instruments					
3. Efficient use of time with client					
4. Rapport with client					
5. Obtains information using open-ended questions					
Client Assessment					
1. Interprets database to formulate accurate problem list					
2. Records findings completely, clearly and concisely, using POHR format					
3. Formulates a plan of care consistent with positive findings					
4. Provides appropriate anticipatory guidance and counseling					
Specific Recommendations:					

Signature of Instructor / Preceptor / Reviewer: _____

Student/Rostered CHERRN Signature: _____