

**DINSHA PATEL COLLEGE OF NURSING, NADIAD**

**YEAR:** \_\_\_\_\_

**SUBJECT:** \_\_\_\_\_

**Evaluation Tool- Assignment**

**Name:**

**Date/Time:**

**Roll No:**

**Marks:**

**Topic:**

<b>SR. NO</b>	<b>Criteria</b>	<b>Marks allotted</b>	<b>Marks obtained</b>
<b>1</b>	Submission on Time	05	
<b>2</b>	Content	10	
<b>3</b>	Organization	10	
<b>4</b>	Creativity	10	
<b>5</b>	Presentation (Neatness)	05	
<b>6</b>	Conclusion	05	
<b>7</b>	Bibliography	05	
	<b>TOTAL MARKS</b>	<b>50</b>	

**Remark:** \_\_\_\_\_

**Sign of Evaluator**

**DINSHA PATEL COLLEGE OF NURSING, NADIAD**

**YEAR:** \_\_\_\_\_

**SUBJECT:** \_\_\_\_\_

**Evaluation Tool- Nursing Process**

**Name:**

**Date/Time:**

**Roll No:**

**Marks:**

<b>SR. NO</b>	<b>Criteria</b>	<b>Marks allotted</b>	<b>Marks obtained</b>
<b>1</b>	Identification data	2	
<b>2</b>	Chief complaints	2	
<b>3</b>	History of present illness	2	
<b>4</b>	Past history	2	
<b>5</b>	Family history & Genogram	4	
<b>6</b>	Physical examination /diagnostic test	5	
<b>7</b>	Priority needs & problems	2	
<b>8</b>	<b>Nursing care plan</b>		
<b>a</b>	Assessment – subjective/ objective data	2	
<b>b</b>	Nursing diagnosis	5	
<b>c</b>	Expected outcomes	2	
<b>d</b>	Planning Intervention	5	
<b>e</b>	Implementation	5	
<b>f</b>	Rationale	5	
<b>g</b>	Evaluation	2	
<b>9</b>	Health education	2	
<b>10</b>	Bibliography	3	
	<b>TOTAL MARKS</b>	<b>50</b>	

**Remark:** \_\_\_\_\_

**Sign of Evaluator**

**DINSHA PATEL COLLEGE OF NURSING, NADIAD**

**YEAR:** \_\_\_\_\_

**SUBJECT:** \_\_\_\_\_

**Evaluation Tool- Case Study**

**Name:**

**Date/Time:**

**Roll No:**

**Marks:**

<b>SR. No.</b>	<b>Criteria</b>	<b>Marks allotted</b>	<b>Marks obtained</b>
<b>1</b>	Identification data	4	
<b>2</b>	Chief complaints	4	
<b>3</b>	History of present illness	5	
<b>4</b>	Past history	5	
<b>5</b>	Family history & Genogram	5	
<b>6</b>	Physical examination	5	
<b>7</b>	Diagnostic test	7	
<b>8</b>	Disease condition	15	
<b>9</b>	<b>Case comparison</b>	5	
<b>10</b>	Drug study	7	
<b>11</b>	Priority needs & problems	3	
<b>12</b>	Nursing care plan	25	
<b>13</b>	Health education	5	
<b>14</b>	Bibliography	5	
	<b>TOTAL MARKS</b>	<b>100</b>	

**Remark:** \_\_\_\_\_

**Sign of Evaluator**

**DINSHA PATEL COLLEGE OF NURSING, NADIAD**

**YEAR:** \_\_\_\_\_

**SUBJECT:** \_\_\_\_\_

**Evaluation Tool - Case Presentation**

**Name:**

**Date/Time:**

**Roll No:**

**Marks:**

<b>SR. No.</b>	<b>Criteria</b>	<b>Marks allotted</b>	<b>Marks obtained</b>
<b>CONTENT</b>			
<b>1</b>	Identification data	2	
<b>2</b>	Chief complaints	2	
<b>3</b>	History of present illness	2	
<b>4</b>	Past history	2	
<b>5</b>	Family history & Genogram	3	
<b>6</b>	Personal history	2	
<b>7</b>	Physical examination	5	
<b>8</b>	Disease condition	8	
<b>9</b>	<b>Case comparison</b>	6	
<b>10</b>	Drug study	4	
<b>11</b>	Priority needs & problems	3	
<b>12</b>	Nursing care plan	7	
<b>13</b>	Health education	2	
<b>14</b>	Bibliography	2	
<b>PRESENTATION</b>			
<b>15</b>	Appearance	2	
<b>16</b>	Classroom arrangement	3	
<b>17</b>	Presentation style	5	
<b>18</b>	Explanation	6	
<b>19</b>	Mastery of content	5	
<b>20</b>	Use of A. V. aids	8	
<b>21</b>	Voice modulation	5	
<b>22</b>	Group involvement	5	
<b>23</b>	Eye contact	5	
<b>24</b>	Topic clearance	4	
<b>25</b>	Summarization / conclusion	2	
	<b>Total marks</b>	<b>100</b>	

**Remark:** \_\_\_\_\_

**Sign of Evaluator**

**DINSHA PATEL COLLEGE OF NURSING, NADIAD**

**YEAR:** \_\_\_\_\_

**SUBJECT:** \_\_\_\_\_

**Evaluation Tool for Health Education**

**Name:**

**Date/Time:**

**Group:**

**Marks:**

**Number of group member:**

<b>Sr. No.</b>	<b>Criteria</b>	<b>Alloted marks</b>	<b>Marks Obtained</b>
<b>CONTENT OF HEALTH TALK</b>			
1	Relevancy	3	
2	Appropriateness	3	
3	Adequacy	3	
4	Neatness	3	
5	Creativeness	3	
<b>PLANNING AND PREPARATION</b>			
6	Audience	4	
7	Sitting arrangement	3	
8	Group co – operation	4	
<b>CONDUCTION OF HEALTH TALK</b>			
9	Voice	3	
10	Explanation	3	
11	Group participation	3	
12	Summary and Questioning	3	
<b>A.V. AIDS</b>			
13	Appropriateness & creativity	3	
14	Adequate use	3	
15	Effectiveness	3	
16	Bibliography	3	
<b>GRAND TOTAL</b>		<b>50</b>	

**Remark:** \_\_\_\_\_

**Sign of Evaluator**

**DINSHA PATEL COLLEGE OF NURSING, NADIAD**

**YEAR:** \_\_\_\_\_

**SUBJECT:** \_\_\_\_\_

**EVALUATION TOOL FOR DRUG BOOK**

**NAME OF STUDENT:**

**ROLL NO:**

**NAME OF SUBJECT:**

**DATE:**

<b>Sr. No.</b>	<b>Criteria</b>	<b>Alloted marks</b>	<b>Marks Obtained</b>
<b>1.</b>	Introduction & Definition	2	
<b>2.</b>	Classification	2	
<b>3.</b>	Pharmacological Name/ Trade Name	2	
<b>4.</b>	Mechanism of Action	2	
<b>5.</b>	Dose & route	2	
<b>6.</b>	Indication	2	
<b>7.</b>	Contraindication	2	
<b>8.</b>	Adverse/ side effect	2	
<b>9.</b>	Nursing responsibility	2	
<b>10.</b>	<b>Bibliography and References</b>	2	
	<b>TOTAL MARKS</b>	<b>30</b>	

**REMARKS:**

**SIGN OF EVALUATOR:**