



An assessment of the case presentation of UB's student nurses

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Abstract

Case studies depict real-life situations where problems are solved and student nurses make meaningful contribution to the body of literature by examining clinical care. This descriptive study determined the student nurses' level of performance on case presentations. Level of performance was determined according to the area of exposure and cases handled. Participants included 14 clinical instructors teaching the 2nd to 4th year student nurses who are required to do case presentations. Data collection was done through an evaluation tool prepared by the author. Openness to suggestions was the criterion that students scored the most. It shows the students' positive attitude and willingness to improve. Conversely, mastery of the report had the lowest scores. While the students were competent with the fundamental concepts, they could not provide better and more recent evidence. The *F*-values for all the performance criteria were higher compared to the table values at the 0.05 level of significance. The *F*-values translate to significant differences in the performance of student nurses, along with the different criteria for each ward. The differences are caused by individual capacities, capabilities, and learning. Group presentations showed a more even performance, along with the criteria for each ward. The medical ward presented students the greatest opportunity to perform across all the criteria,



both in areas of exposure and cases handled. Case presentation is a clinical learning tool that identifies the student nurses' and nursing instructors' points of excellence and weaknesses that need to be improved.

Keywords: case presentation, case studies, student nurses

Introduction

Case studies are essential to healthcare literature. Various nursing practices are evaluated through case studies as nurses perform in the line of duty. Through years of experience in clinical nursing, the author observed that most student nurses fail to grasp the significance of case studies in their holistic learning and practice. The majority of student nurses considers case studies as a paper needed to pass the course. There have been instances where graduating students plagiarize earlier case studies by changing a few lines of text and submitting it as their own.

The University of Baguio School of Nursing requires student nurses to present a case of their choice after every rotation in the clinical area. This process involves picking out a patient for study, performing an in-depth medical history and lifestyle check, writing up a paper based on the care provided, and finally presenting the findings to an instructor or panel. The various case studies in the library have not undergone assessment as observed by the author.

Dutra (2013) stated that case studies serve as a vessel in which focus is transferred from clinical instructor to student, making it learner-centered, resulting in increased levels of cognition. The participants of the study reported that systematically analyzing complex situations in a safe envi-



ronment allowed them to integrate their knowledge with actual practice as nurses with greater ease.

A case study does not only describe but, more importantly, it enables student nurses to impart what they have learned in their explanation of an aspect of care rendered. A strong point of the case study presentation is that it defines the clinical decision-making that evolved during the care and not just presents singular elements (Aitken, Marshall, 2007). According to the College of Registered Nurses of British Columbia in 2018, some of their best-case study ideas came from nurses' experiences of their real-world examples of clinical care. The examples of clinical care relates to the present study in terms of student nurses having the opportunity to work closely with patients during their rotations in the clinical area.

In an article published on the Flinders University website in June 2018, the need for a checklist of highly specific interventions and support services arose when an aboriginal patient was admitted to a city hospital. They encountered problems with general responsive capabilities and services to provide for the patient. A checklist helped the student nurses to provide competent and ethical care to their clients. This inspired the author to come up with parameters to serve as guidelines for case presentations.

In case presentations, confidence is the key. During the oral presentation, student nurses should face their clinical instructors with as much confidence that they can muster. When presenting, the students must talk at a moderate speed. They must smile and avoid stuttering to lessen questions regarding the case. These behaviors may help in earning a good grade (Nursing Guide, 2015). Competent clinical instructors can encourage the student nurses to express how they arrived at their plans of care. In this way, student nurses can recognize their learning processes (Dutra, 2013). The Case presentations of student nurses can be done on paper or using other media.

Meanwhile, clinical instructors can assess the students' interaction with



members of their group by asking open-ended questions and observing teamwork and sharing of resources during discussions. An assessment of their concept and more profound understanding and cognitive skills can also be tackled through case study presentations (Katharina, 2010).

Case studies and their presentation are useful across all professions and courses. They “bridge the gap between theory and practice and between the academy and the workplace” (Barkley, Cross, & Major, 2005). Barkley, Cross, and Major (2005) emphasized the importance of a case study presentation as a meeting point for learning and application. These are included in the parameters of the case study presentation included in the present study.

Conceptual framework

Marzano (2001) developed the conceptual framework that guided this study. It is comprised of metacognition, critical, and creative thinking. According to this concept, the final level of cognitive processes is knowledge utilization. The processes of using knowledge are crucial for case-based learning since they allow students to accomplish a specific task where decision-making is employed to determine the most appropriate course of action.

Significance of the study

There is a need for student nurses to demonstrate a higher standard of case study presentation in the assumption that:

1. Good learning relationships play an essential role for clinical instructors to conduct excellent case presentations among their students that result in positive academic outcomes;
2. Case presentations also require paying attention to and obtaining relevant information to improve diagnosis and patient management;
3. Case study presentations are tangible descriptions or pieces of evidences of clinical decision-making that progressed throughout



- care;
4. When student nurses can appreciate the importance of case studies, they will be encouraged to undertake and present case studies which are worth their time and effort;
 5. Ethical considerations in the process of gathering information, reporting, and preparing are essential pointers that most often are forgotten or not practiced.

Objectives of the study

The purpose of this study was to look into the level of performance of student nurses during case presentations. It specifically sought to:

1. Determine the level of performance of student nurses during case presentations;
2. Compare the level of performance when the student nurses are grouped according to the area of exposure and cases handled.

Methodology

The current study made use of the descriptive method. The study involved 80 student nurses of the 2nd to 4th year level who were evaluated by 14 clinical instructors during the duration of the study. An evaluation tool was developed by the author and was used in data collection. The tool is based on the original grading sheet used by the School of Nursing, which have seven criteria: Mastery of Reports (20 points), Articulation (15 points), Organization (10 points), Grammar (10 points), Medium of Presentation (10 points), Creativity (10 points), and Openness to Suggestions (10 points) with no items under each criterion. The second-year BSN students took their cases from the Obstetrics, Gynecology, and Pediatric Wards. The third-year students' cases covered those in the Medical, Surgical, Orthopedic, and EENT Wards and still included those covered by the second year. Finally, the senior students' cases came from all hospital wards and included the



Medical, Surgical, Orthopedic, and EENT Wards. The author elaborated the items under each criteria as an evaluation-checklist for the study.

The criteria for the evaluation of the case presentations were:

1. **Mastery of Reports.** The Mastery of Reports incorporates the depth of the content, proper support to the current case that is presented, and clear explanation during the presentation of the case study.
2. **Articulation.** The Articulation covers proper posture, gestures, eye contact, use of voice, pronunciation, enunciation, and the proper use of fillers when the need arises during the presentation.
3. **Organization.** The Organization consists of focus, coherence, the progression of ideas, and chronological pattern; a problem-solution pattern, an analysis-of-parts pattern, that makes the content of the case presentation more comfortable to follow and more likely to accomplish its purpose.
4. **Grammar.** The Grammar involves punctuation, spelling, paragraphing, format, word choice, and sentence variety.
5. **Medium of Presentation.** The Medium of Presentation gives importance to the ideas, examples, reasons and the pieces of evidence related to the case, technology, and multimedia used in presentation.
6. **Creativity.** It encompasses flexibility, originality, fluency, elaboration, and ability of the student to confidently communicate ideas.
7. **Openness to suggestions.** This criterion takes into account if the student nurse acknowledged the suggestions given, listened when the clinical instructor gave feedback, and made appropriate actions and responses.



Data Gathering Procedure

The author secured an endorsement letter from the Dean of the School of Nursing of the University of Baguio as well as a recommending approval from the Office of the Vice President for Academic Affairs. These were attached to the letter of request to the Research and Development Center of the University of Baguio for the approval of this study to be conducted in the School of Nursing in the University. Upon approval of the request, the author floated the questionnaires on the approved dates at the School of Nursing Faculty Room. The author personally distributed and collected the data-gathering tool.

Treatment of Data

The following tools were utilized during the treatment of the data gathered: Weighted Mean and Analysis of Variance (ANOVA). Weighted Mean was used to determine the performance of student nurses during case presentations, while ANOVA was employed to compare the significant differences according to exposure and cases handled.

The following values and corresponding interpretations were used for the weighted mean:

Weight	Scale	Qualitative Interpretation		Description
1	1.00 - 1.75	Very Low	VL	Needs improvement, lacks presentation, no relevant ideas presented, poor communication
2	1.76 - 2.50	Low	L	Presentation lacked most of the important aspects needed to be included
3	2.51 - 3.25	High	H	Some issues were not identified and irrelevant
4	3.26 - 4.00	Very High	VH	Main issues were identified and relevant



Ethical Considerations

The respondents of the study were asked of their own free will to participate in the study through written/signed consent. They were not coerced or forced if they chose not to participate. At the same time, they were asked not to spend or use their resources as participants for the completion of the study. The identity of each respondent was kept confidential. The responses of the participants were treated with the utmost professionalism and confidentiality. If the respondents will request it, the results of the Study can be discussed or shared with them. The completion of the questionnaire was considered as informed consent to participate in the study.

Results and Discussion

Table 1 shows the student nurses' level of performance during their case presentation as evaluated by the clinical instructors. Table 1 shows the assessment of 14 clinical instructors on the performance of the student nurses based on the seven criteria for case presentation.

Openness to suggestions had the highest mean of 3.01, interpreted as high. During the case presentation, the student nurses acknowledged all of the suggestions given, and they listened when the clinical instructor gave feedback after the case presentation. They also responded correctly, demonstrating a positive attitude.

The weighted mean showed that the respondents (clinical instructors) scored their students during the case presentation as high in all the other criteria as well. Medium of Presentation got the second-highest mean of 2.70 in this group, showing that although the use of multimedia is not as varied and not well connected to case presentation, most of the information was presented in a logical sequence. On the other hand, some visual aids were distracting and there were a few confusing points. Overall, it was admirable because one can sense the effort exerted by the students. With access to modern gadgets and applications, the student nurses were able to use them although they can still improve their mastery of these tools.

**Table 1**

The nursing students' level of performance during case presentation (N=80)

	Performance Criteria	Mean	Std Dev	Interpretation
A.	Mastery of the Report encompasses the depth of the content, relevant support to the current case being presented, and clear explanation during the presentation of the case study.	2.51	.630	H
B.	Articulation includes proper posture, gestures, eye contact, use of the voice, pronunciation, enunciation, and the proper use of fillers during case presentation when the need arises.	2.52	.560	H
C.	Organization covers focus, coherence, the progression of ideas, chronological pattern, a problem-solution pattern, an analysis-of-parts pattern, that makes the content of the case presentation easier to follow and more likely to accomplish its purpose.	2.58	.691	H
D.	Grammar includes grammar, punctuation, spelling, paragraphing, format, word choice, and sentence variety, as well as time management during case presentation.	2.59	.685	H
E.	Medium of Presentation gives importance to the ideas, examples, reasons, and pieces of evidence related to the case, technology, and multimedia used in the presentation.	2.70	.683	H
E.	Creativity comprises flexibility, originality, fluency, elaboration, ability to communicate ideas of the student nurse with self- confidence.	2.52	.597	H
F.	Openness to suggestions is a criterion that takes into account if the student nurse acknowledged the suggestions given and listened when the clinical instructor gave feedback and made appropriate actions and responses.	3.01	.849	H

Notes. 3.26-4.00 is Very High or VH, 2.51-3.25 is High or H, 1.76-2.50 is Low or L, and 1.00-1.75 is Very Low or VL

Mastery of report had the lowest mean score at 2.51. Although interpreted as high, this shows that the student nurses need to increase their mastery over their case subjects. During the case presentation, the student nurses demonstrated critical thinking, a grasp of the key concepts and the



development of a competent point of view. However, they fell short when asked to provide more details and additional evidence from more recent sources. This shows that they need to improve their research and data gathering capabilities.

The above findings are parallel to the results of a study by Aitken and Marshall (2007) who pointed out that case studies go beyond just describing what transpired during the period covered. The case study presentation supports the explanation of an aspect of care rendered. Case presentations serve as an avenue for clinical instructors and the audience to understand the clinical decision-making that evolved during the care.

During and after case presentations, clinical instructors gauge the students' interaction with members of their group by asking open-ended questions, observing teamwork, and sharing of resources during discussions (Katharina, 2010). How suggestions and feedback are accepted or not can also serve as an assessment of their Openness, in-depth understanding, and the cognitive skills they apply during their case study presentation.

Students' Performance

Table 2 shows the case presentation of the student nurses in the different areas of exposure such as Obstetrics (OB), Gynecology (GYNE), Pediatrics (PEDIA), Medical (MED), Orthopedic (ORTHO), Surgical (SURG), Eyes, Ears, Nose, Throat (EENT) wards, and the Pay ward (PW).

**Table 2**

Level of performance of student nurses in case presentation in terms of the area of exposure, N=80

Performance Criteria	Ward	Mean	Interpretation
A. Mastery of the Report encompasses the depth of the content, relevant support to the current case being presented, and clear explanation during the presentation of the case study.	OB	2.25	L
	Gyne	2.31	L
	Pedia	2.06	L
	Medical	3.00	H
	Orthopedic	2.67	H
	Surgical	2.70	H
	EENT	2.83	H
	Pay ward	2.43	L
<i>F</i> -value=3.849 <i>df</i> =7, 72		<i>p</i> -value =.003	Sig. at .05
B. Articulation includes proper posture, gestures, eye contact, use of the voice, pronunciation, enunciation, and the proper use of fillers during case presentation when the need arises.	OB	2.10	L
	Gyne	2.33	L
	Pedia	2.31	L
	Medical	2.88	H
	Orthopedic	2.56	H
	Surgical	2.67	H
	EENT	2.90	H
	Pay ward	2.52	H
<i>F</i> -value=3.347 <i>df</i> =7, 72		<i>p</i> -value =.004	Sig at .05
C. Organization covers focus, coherence, the progression of ideas, chronological pattern, a problem-solution pattern, an analysis-of-parts pattern, etc., that makes the content of the case presentation easier to follow and more likely to accomplish its purpose.	OB	2.15	L
	Gyne	2.39	L
	Pedia	2.19	L
	Medical	3.09	H
	Orthopedic	2.75	H
	Surgical	2.72	H
	EENT	2.95	H
	Pay ward	2.64	H
<i>F</i> -value=3.377 <i>df</i> =7, 72		<i>p</i> -value =.004	Sig at .05

**Table 3**

Level of performance of student nurses in case presentation in terms of the area of exposure, N=80

Performance Criteria	Ward	Mean	Interpretation
D. Grammar includes grammar, punctuation, spelling, paragraphing, format, word choice, and sentence variety, as well as time management during case presentation.	OB	2.13	L
	Gyne	2.30	L
	Pedia	2.21	L
	Medical	3.06	H
	Orthopedic	2.83	H
	Surgical	2.81	H
	EENT	3.00	H
	Pay ward	2.67	H
<i>F</i> -value=4.092 <i>df</i> =7, 72		<i>p</i> -value =.001	Sig at .05
E. Medium of Presentation gives importance to the ideas, examples, reasons, and pieces of evidence related to the case, technology, and multimedia used in the presentation.	OB	2.23	L
	Gyne	2.47	L
	Pedia	2.23	L
	Medical	2.82	H
	Orthopedic	2.67	H
	Surgical	2.71	H
	EENT	3.20	VH
	Pay ward	2.79	H
<i>F</i> -value=3.360 <i>df</i> =7, 72		<i>p</i> -value =.004	Sig at .05
F. Creativity comprises flexibility, originality, fluency, elaboration, ability to communicate ideas of the student nurse with self- confidence.	OB	2.23	L
	Gyne	2.33	L
	Pedia	2.19	L
	Medical	2.82	H
	Orthopedic	2.67	H
	Surgical	2.73	H
	EENT	2.80	H
	Pay ward	2.57	H
<i>F</i> -value=2.312 <i>df</i> =7, 72		<i>p</i> -value =.035	Sig at .05
G. Openness to suggestions into account if the student nurse acknowledged the suggestions, given and listened when the clinical instructor gave feedback and made appropriate actions and responses.	OB	2.92	H
	Gyne	2.56	H
	Pedia	2.81	H
	Medical	3.27	VH
	Orthopedic	3.00	H
	Surgical	3.07	H
	EENT	3.35	VH
	Pay ward	3.00	H
<i>F</i> -value=1.010 <i>df</i> =7, 72		<i>p</i> -value =.432	Not Sig at .05

Notes. 3.26 - 4.00 is Very High or VH, 2.51 - 3.25 is High or H, 1.76 -2 .50 is Low or L, and 1.00 - 1.75

is Very Low or VL



In mastery of report, based on the area of exposure, the student nurses got high mean values from the Medical, Orthopedic, Surgical, and EENT wards. The Medical ward was scored with the highest mean of 3.00. This could be because there are a variety of cases in the ward, thus providing the student nurses with a broader range of opportunities for learning.

Most of the patients stayed for longer periods in the said wards, allowing the students to gather more data and to interact with the family of the patients. On the other hand, case presentations by student nurses from the OB, Gyne, Pedia, and Pay ward all got the low mean values with the Pedia ward receiving the lowest mean value of 2.06. This could be traced to the lesser number of days the patients were confined in these wards. The findings reveal that the student nurses who were exposed in the Medical ward were able to present their cases with sufficient data clearly and to support their presentations with relevant information.

In terms of articulation, student nurses who were presenting cases from the Medical, Orthopedic, Surgical, EENT, and Pay ward were given high mean values with EENT ward garnering the highest mean of 2.90. The presenters of cases from OB, Gyne, and Pedia wards had low mean values. OB ward had the lowest mean of 2.10. Case presenters for EENT ward articulately delivered compared to the others. Most of the cases from this ward are simple and easier for the student nurses to present. The students demonstrated good pronunciation, enunciation, posture and eye contact.

When it comes to Organization, the areas of exposure with the high mean values were at the Medical, Orthopedic, Surgical, EENT, and Pay ward with Medical Ward with the highest mean of 3.09. Meanwhile, OB, Gyne, and Pedia had low mean values with OB getting the lowest mean of 2.15. Having previous exposures in the Medical, Orthopedic, Surgical, EENT, and Pay ward may have contributed to a better case presentation. Student nurses were able to have a more focused, coherent progression of ideas that made their case presentation easier to follow compared to the other wards.



This did not hold with the other wards. There could have been issues they were not able to reconcile in terms of problem-solution organization or they were not able to present their case in the chronological pattern for easier understanding and did not accomplish the purpose of the case presentation. Grammar is also an important component of case presentations. It can be seen that exposures in the Medical, Orthopedic, Surgical, EENT, Pay ward produced high mean values with Medical at the forefront with 3.02. OB, Gyne, and Pedia got low means with OB getting the lowest mean of 2.13. For some reason, the student nurses face hurdles in punctuation, spelling, paragraphing, word choices and time management when presenting their cases from the OB, Gyne, and Pedia wards.

In terms of the medium of presentation, exposure in the EENT ward got the highest mean value of 3.20. The lowest mean values were OB and Pedia Wards with 2.23. These findings showed that the student nurses were more effective in their EENT case presentation compared to the OB and Pedia case presentations. This can also mean that they were well-versed and prepared in the EENT case compared to the other two.

In terms of creativity, the student nurses were more elaborate, original, able to get their message across accurately, and were more confident in their Medical, Orthopedic, Surgical, EENT, and Pay ward case presentation compared to the students studying other wards. Students presenting case studies from the medical ward had the highest mean score of 2.82.

When it comes to the area of exposure, the highest mean of 3.35 (Very High) was openness to suggestions. Being neophytes and still in the learning process, the student nurses are open to new learning when their clinical instructors gave feedbacks or suggestions. This showed an open-minded group of student nurses who are willing to learn more and explore beyond what they already know.

Articulation had the lowest mean of 2.67. Although still considered high,



articulation is an area where the student nurses can improve by practicing proper posture, gestures, eye contact, modulation of the voice, pronunciation, enunciation, smooth articulation, and the lack of fillers during case presentations.

Like any profession, it is important to develop one's self holistically, including practicing appropriate ways of communicating one's self not only to the patient but also to the other members of the health team, the family of the patient, fellow student nurses, and others. This is because expressing one's self appropriately can foster nurse-client relationships, caring activities, development and growth as a person, and learning not only in the classroom but in the wards where they are regular participants. This criteria is important during case presentation because whatever happens during the case presentation is a result of how the case was communicated to the audience.

It can also be gleaned from the abovementioned data that the ward that stood out where they were able to create effective case presentations was in the EENT ward. The result may be due to the less complicated cases in the said ward which makes it easier for the student nurses to prepare their case and easily present it compared to the more complicated cases in the other wards.

Some of the case presentations from the Medical and Surgical wards were highly appreciated by the clinical instructors. Because these wards hold a multiple of cases and patients, the ability of the student nurses to present their case acceptably is commendable.

The student presenters of cases from the medical ward shone in their articulation and mastery of report. A high mean value showed that during the case presentation, the student nurses were able to discuss the content, give appropriate support to the current case presented, and clearly explain the case. In terms of grammar, the student nurses presented their cases in a well-patterned way in terms of grammar, punctuations, although with



some areas for improvement. During the case presentation, they executed proper posture, gestures, eye contact, and use of the voice, pronunciation, enunciation, and smooth articulation. On the other hand, the surgical ward similar to the medical ward comprise of a conglomeration of cases and caring demands. It showed that the student nurses were able to present a grammatically appropriate case despite of the challenges that they might have encountered. Overall, it is essential for clinical instructors to consequently give due attention to the decision-making that was involved during the care because this becomes the mirror for student nurses to impart what they have learned by their explanation of an aspect of care rendered (Aitken,Marshall, 2007).

Except for the criteria for openness to suggestions, the analysis of variance showed that there was a significant difference in the performance of the student nurses based on the different criteria for each ward. This result may be due to individual differences, capacities, capabilities, and learning. Grouped as teams, the students were able to harness their strengths and help out one another with their weaknesses.

Case study presentations “bridge the gap between theory and practice and between the academy and the workplace” (Barkley, Cross, & Major, 2005). A nonsignificant result for openness to suggestions may indicate that student nurses have different perceptions of the feedback or suggestions given to them. The clinical instructors’ manner of communication should also be considered. Robinson (2014) said that a culture of openness and transparency encourages people to speak out, give propositions for better-quality service, and come up with ingenious ideas for better case study presentations. Table 3 shows the level of performance on case presentation of the student nurses in the different cases handled from the OB, Gyne, Pedia, Medical, Orthopedic, Surgical, and EENT wards.

**Table 3**

Student nurses' level of performance in their presentation of cases handled, N=80

Criteria	Cases Handled	<i>M</i>	Interpretation
A. Mastery of the Report encompasses the depth of the content, relevant support to the current case being presented, and clear explanation during the presentation of the case study.	Obstetrics	2.25	L
	Gynecology	2.31	L
	Pediatrics	2.05	L
	Medical	2.87	H
	Orthopedic	2.67	H
	Surgical	2.63	H
	EENT	2.82	H
<i>F</i> -value=3.474 <i>df</i> =7, 72	<i>p</i> -value=.004	Significant	.05

Notes. 3.26-4.00 is Very High or VH, 2.51-3.25 is High or H, 1.76-2.50 is Low or L, and 1.00-1.75 is Very Low or VL

Table 4

Student nurses' level of performance in case presentation, N=80

Criteria	Cases Handled	Mean	Interpretation
B. Articulation includes proper posture, gestures, eye contact, use of the voice, pronunciation, enunciation, and the proper use of fillers during case presentation or when the need arises.	Obstetrics	2.10	L
	Gynecology	2.33	L
	Pediatrics	2.31	L
	Medical	2.78	H
	Orthopedic	2.56	H
	Surgical	2.64	H
	EENT	2.90	H
<i>F</i> -value=3.595 <i>df</i> =7, 72	<i>p</i> -value=.004	Significant	.05
C. Organization covers focus, coherence, the progression of ideas, chronological pattern, a problem-solution pattern, an analysis-of-parts pattern, etc., that makes the content of the case presentation easier to follow and more likely to accomplish its purpose.	Obstetrics	2.15	L
	Gynecology	2.39	H
	Pediatrics	2.19	H
	Medical	3.09	H
	Orthopedic	2.75	H
	Surgical	2.73	H
	EENT	2.95	H
<i>F</i> -value=3.519 <i>df</i> =7, 72	<i>p</i> -value=.004	Significant	.05



D. Grammar includes grammar, punctuation, spelling, paragraphing, format, word choice, and sentence variety, as well as time management during case presentation	Obstetrics	2.13	L
	Gynecology	2.30	L
	Pediatrics	2.21	L
	Medical	3.06	H
	Orthopedic	2.83	H
	Surgical	2.82	H
	EENT	3.00	H
<i>F</i> -value=4.419 <i>df</i> =7, 72		<i>p</i> -value=.001	Significant .05
E. Medium of Presentation gives importance to the ideas, examples, reasons, and pieces of evidence related to the case, technology, and multimedia used in the presentation.	Obstetrics	2.23	L
	Gynecology	2.47	L
	Pediatrics	2.23	L
	Medical	2.82	H
	Orthopedic	2.67	H
	Surgical	2.71	H
	EENT	3.20	VH
<i>F</i> -value=3.662 <i>df</i> =7, 72		<i>p</i> -value=.003	Significant .05
F. Creativity comprises of flexibility, originality, fluency, elaboration, ability to communicate ideas of the student nurse with self- confidence.	Obstetrics	2.23	L
	Gynecology	2.33	L
	Pediatrics	2.19	L
	Medical	2.82	H
	Orthopedic	2.67	H
	Surgical	2.73	H
	EENT	2.80	H
<i>F</i> -value=2.570 <i>df</i> =7, 72		<i>p</i> -value=.026	Significant .05
G. Openness to suggestions takes into account if the student nurse acknowledged the suggestions given, and listened when the clinical instructor gave feedback and made appropriate actions and responses.	Obstetrics	2.92	H
	Gynecology	2.56	H
	Pediatrics	2.81	H
	Medical	3.27	VH
	Orthopedic	3.00	H
	Surgical	3.07	H
	EENT	3.35	VH
<i>F</i> -value=1.090 <i>df</i> =7, 72		<i>p</i> -value=.376	Not Significant .05
Notes. 3.26-4.00 Very High VH			
2.51-3.25 High H			
1.76-2.50 Low L			
1.00-1.75 Very Low VL			

In both Tables 2 and 3, the mean values are the same except for the addendum of Pay ward in the areas of exposure (Table 2). This implies that the criteria where the student nurses scored high and low in area of exposure and cases handled showed that the strengths and weaknesses of the student nurses



during case presentations were more connected to the cases and less on the area of exposure, a manifestation that they are case-centered. Most of the student nurses wanted to present cases that they have genuinely worked on. The aforementioned data show that case study presentation is a venue that enables student nurses to impart lessons through their explanation of an aspect of care (Aitken, Marshall, 2007). Their clinical instructors can also challenge student nurses during the case presentation with questions and clarifications. It was found that confidence is the key when presenting cases.. In the academic community, it is essential to be aware of and control the suggestions communicated to the students, which relates to response expectancies or how the clinical instructors and student nurses anticipate reactions in numerous situations. These expectancies set up automatic responses that actively influence how individuals get to the outcomes expected.

Conclusions and Recommendations

Case presentations are beneficial to help student nurses cope with their weaknesses and bring to the fore their capabilities. The essence of case presentations is not just the learning, but its effects on the progress of the student nurses through the years. Case presentations can represent the culmination of learning a student nurse has accomplished, classroom instruction, and experience in the clinical area.

Case presentation is an educational and clinical learning tool that student nurses and nursing instructors should appreciate. It is essential to harness where the students excel yet give due attention and follow up where they need to develop. There is still more to learn about the underlying relationship between suggestion and response. There should be a focus on outcomes rather than processes. The school and the department can identify areas for improvement, including an action, when it needs to be completed and who is responsible. When presenting, clinical instructors can encourage student nurses to set everything in order, with no interruptions or repetitions



of the explanations. It has to be smooth and fast but with substance. At the same time, student nurses should feel valued and supported. Individual and group case presentations made by students should be acknowledged and recognized for their suggestions and responded to. The author advises nursing students to attend other case presentations by other presenters to learn from their presentation skills and get some context. Based on the study's findings, the author suggests the University to encourage and reward innovation and risk-taking.



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