

DEVELOPMENTAL DISABILITIES /NURSPT 030

Curriculum Content Week 1

Orientation to Developmental Disabilities

Goal Statement

The goal of this module is to provide the learner with three key factors: 1) an introduction to the theoretical expectations of the course, 2) the clinical expectations of the course and 3) provide an overview of the history, changing perspectives and trends and issues in the care and treatment for individuals with intellectual and developmental disabilities.

Module Description

The Orientation to Developmental Disabilities module covers the requirements of both the theory and clinical expectations of the course. It also covers the historical and contemporary views in the field of intellectual and developmental disabilities. This module requires one full orientation per clinical setting, a full day (7 hours) in the classroom covering theory expectations, and an introductory lecture on intellectual and developmental disabilities.

Objectives

Upon completion of this module, the learner will be able to:

1. Describe the requirements needed to participate in the theoretical portion and each assigned clinical setting of the course.
2. Describe key events in the history of developmental disabilities.
3. Describe the changing perspectives on developmental disabilities.
4. Describe trends and issues in intellectual and developmental disabilities.

Client/Patient Rights

Goal Statement

The goal of this module is to provide the learner with the ability to help individuals with disabilities fully reach their potential and fulfill their dreams in an effective, safe and legally correct manner. Understanding the many laws and regulations both on a national and local level will affect the way the psychiatric technician carries out responsibilities and ensures the planning and implementation of individualized treatment plans. The goal for each individual is for him or her to be empowered to make choices and live in the least restrictive and most appropriate environment.

Module Description

Provides an overview of the historical perspectives of the rights of the person with developmental disabilities and contrasts them with the current rights and laws that govern

them. Responsibilities of psychiatric technicians in the care of persons with developmental disabilities are also described.

Objectives

At the completion of this module, the learner will be able to:

1. Identify the rights of the person with developmental disabilities, the laws that govern these rights, and the responsibilities of the health care worker to ensure the implementation of these rights.
2. Discuss the historical perspectives of the rights of the person with developmental disabilities.
3. Identify and discuss the laws that affect the way psychiatric technicians carry out responsibilities.
4. Describe the care of the person with developmental disabilities.

Psychiatric Technician Program Curriculum Content

Instructional Plan: Term _____ Week 1

Unit Title: NURSPT 030 DEVELOPMENTAL DISABILITIES I

Theory Hours this week: 9

Skills Lab / Clinical Hours this week: 26

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Orientation to Developmental Disabilities (DD-5.0) (CULT-0.5) (ETH-1.5)	Objective 1 Describe the requirements needed to participate in the theoretical portion and each assigned clinical setting of the course.	A. Examine the student handbook B. Examine the clinical syllabus C. Examine the clinical calendar for clinical related deadlines D. Examine the California Code of Regulations, Division 25 Chapter 2. Psychiatric Technicians E. Examine the theory syllabus for requirements F. Examine the theory calendar theory related deadlines G. Mandated reporting	(Applies to Theory Objectives 1-4) Lecture Discussion Reading Study guide Audiovisual aids Methods of Evaluation Testing Case Studies Class Discussion Group Activity	(Applies to Theory Objectives 1-4) Required Reading <ul style="list-style-type: none"> • Student Handbook • Clinical Syllabus • Clinical Calendar • Theory syllabus • Theory calendar • Clinical facility assigned handouts In required textbook(s), read chapters on topics listed in Column I Suggested Reading <ul style="list-style-type: none"> • <u>A Comprehensive Guide to Intellectual and Developmental Disabilities.</u> Brown, I. and Percy, M. (2007). Baltimore: Paul H. Brookes Publishing Co. <ul style="list-style-type: none"> ▪ Chapt. 3 – Changing Perspectives on Developmental 	(Applies to Theory Objectives 1-4) 22 hours in clinical, 4 hours in skills lab per week.	Objectives: Outline the needed skills to participate effectively and safely in a clinical setting Upon completion of this unit the student will be able to: Participate in an orientation at each clinical assignment. Include the facility's organizational culture and infrastructure. Included, but not limited to: <ul style="list-style-type: none"> • Mandated reporting and ombudsman responsibility • Managing assault behavior • CPR and first aid • Clients' rights • Documentation of expectation of student • Managing locked

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Orientation to Developmental Disabilities	<p>Objective 2 Describe key events in the history of developmental disabilities.</p>	<p>A. Disability in antiquity B. Disability in the medieval era C. The expansion of disability as difference D. Inclusion in communities</p>	<p>Teacher Guide 1.1</p> <ul style="list-style-type: none"> Historical Perspective – Quiz 	<p>Disabilities</p> <ul style="list-style-type: none"> Chapt. 4 – Trends and Issues in Intellectual and Developmental Disabilities <p>Internet Resources</p> <ul style="list-style-type: none"> California Association of Psychiatric Technicians (CAPT) http://psychtechs.net/pages/home.cgi Board of Vocational Nursing and Psychiatric Technicians (BVNPT), Psychiatric Technicians, California Code of Regulations, Division 25 Chapter 2. http://www.bvnpt.ca.gov/pdf/ptregs.pdf (This can be downloaded and handed out if desired.) <p><u>Study Guide 1.1</u></p> <ul style="list-style-type: none"> Wolfensberger's eight historical roles <p><u>Study Guide 1.2</u></p>		<p>environments</p> <ul style="list-style-type: none"> Personal safety

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Orientation to Developmental Disabilities	<p>Objective 3 Describe the changing perspectives on developmental disabilities.</p>	<p>A. Disability in antiquity B. Disability in the medieval era C. The expansion of disability as difference D. Inclusion in communities</p>		<ul style="list-style-type: none"> Discussion on issues of disability (see Chapt. 3 in Brown & Percy) <u>Study Guide 1.3</u> Discussion on issues of disability Discussion on issues of disability (see Chapt. 4 in Brown & Percy) 		
Orientation to Developmental Disabilities	<p>Objective 4 Describe trends and issues in intellectual and developmental disabilities.</p>	<p>A. International socio-political trends B. International trends in disability C. Challenges for the field</p>				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Client / Patient Rights	<p>Objective 1 Identify the rights of the person with developmental disabilities, the laws that govern these rights, and the responsibilities of the health care worker to ensure the implementation of these rights.</p>	<p>Review Study Guide 2.2 in class and discuss.</p> <p>Comment on the following statements and identify how we as psychiatric technicians can introduce more valuable learning experiences.</p> <ul style="list-style-type: none"> • He can put pegs in a board but not coins in a vending machine. • She enjoys music, but was never taught how to use a CD or MP3 player. • He can string beads to a pattern, but can't tie his shoes. • He can name all the letters, but can't identify the "men's room." • She can identify pictures by pointing, but can't order a hamburger from a menu. • She can place different sized cubes in a box, but can't find the trash bin at McDonald's. 	<p>(Applies to Theory Objectives 1-4)</p> <p>Lecture Discussion Reading Study guide Audiovisual aids Classroom Discussion</p> <p>Lecture/Discussion</p> <ul style="list-style-type: none"> • PowerPoint lecture <p>Video Resources</p> <ul style="list-style-type: none"> • The Marian Rose White Story(video) <p>Internet Resources:</p> <ul style="list-style-type: none"> • http://www.dds.ca.gov/Statutes/Statutes_Home.cfmLanterman Act and Related Laws <p>Methods of Evaluation Testing Case Studies Class Discussion Group Activity</p>	<p>(Applies to Theory Objectives 1-4)</p> <p>Required Reading</p> <ul style="list-style-type: none"> • In selected text, read chapters on topics listed in Column 1 <p>Recommended Reading:</p> <ul style="list-style-type: none"> • Blatt, B. & Kaplan, F. <i>Christmas in Purgatory, a Photographic Essay on Mental Retardation</i>(1974) <p>Debate the Following Issues</p> <ul style="list-style-type: none"> • Right to life regardless of disability • Community vs. developmental center placement • Inclusion in the classrooms <p>Study Guide 2.1 Scenario Group Work</p> <p>Study Guide 2.2 Rights for the Developmentally Disabled</p> <p>Study Guide 2.1</p>	<p>(Applies to Theory Objectives 1-4)</p> <p>22 hours in clinical, 4 hours in skills lab per week.</p> <p>4</p>	<p>Objectives:</p> <ul style="list-style-type: none"> • Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas • Demonstrate an understanding of the Lanterman Act (Lanterman Developmental Disabilities Services Act) • Understand the negative implications of labeling individuals by their inappropriate behaviors • Help individuals exercise choice and enhance their ability to communicate their preferences <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Knock on doors leading to client living areas; use privacy screens when necessary; implement the use of

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Client / Patient Rights	<p>Objective 2 Discuss the historical perspectives of the rights of the person with developmental disabilities.</p>	<p>A. Define the principles of the Lanterman Act B. Define the principles of the Americans with Disabilities Act (ADA) C. Define the principles of the IDEA Improvement Act</p>	<p>Lecture Discussion Reading Study guide Audiovisual aids Classroom Discussion Methods of Evaluation Testing Case Studies Class Discussion Group Activity</p>	<p>(See above.)</p>		<p>individualized grooming boxes, clothing, training objectives, and dining plans</p> <ul style="list-style-type: none"> Participate in specialized care and treatment needs of the developmentally disabled infants Participate in discussions regarding care and treatment of developmentally disabled individuals Participate in Clinical Conference Attend an annual conference (IPP – Individualized Program Plan) Attend a unit drug review meeting (DRT)

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Client / Patient Rights	Objective 3 Identify and discuss the laws that affect the way psychiatric technicians carry out responsibilities.	A. Identify the characteristics of informed consent B. Identify the importance of confidentiality C. Describe the California Child Abuse and Criminal Neglect Laws	Lecture Discussion Reading Study guide Audiovisual aids Classroom Discussion Methods of Evaluation Testing Case Studies Class Discussion Group Activity	(See above.)		
Client / Patient Rights	Objective 4 Describe the care of the person with developmental disabilities.	A. How the person with developmental disabilities gets into the treatment system. B. Specific rights during that period C. What constitutes violation of rights and how they are handled D. The responsibility of the health care worker to the individual E. The means by which the health care worker can maintain integrity and dignity	Lecture Discussion Reading Study guide Audiovisual aids Classroom Discussion Methods of Evaluation Testing Case Studies Class Discussion Group Activity	(See above.)		

Key:

For All Programs:	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
A/P Anatomy and Physiology	PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing
CDIS Communicable Diseases	PHARM	Pharmacology	For VN Programs only:			For PT Programs only:
COM Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NU/T Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

Care and Treatment for Individuals with Developmental Disabilities
Study Guide 1.1
Wolfensberger's Eight Historical Roles

Discuss or write a paper on the historical roles imposed on people with Developmental Disabilities.
The eight ways of seeing a person with a disability are:

- 1) a subhuman organism,
- 2) a menace
- 3) an object of dread
- 4) an object of pity
- 5) a holy innocent
- 6) a diseased organism
- 7) an object of ridicule
- 8) an eternal child.

Food for thought: Can you explain these roles in the following contexts:

1. of history
2. society
3. culture
4. how disability is conceptualized
5. why these roles for individuals with disabilities were established (for what reason, purpose, by whom)?

Adapted from: Wolfensberger's eight historical roles

Care and Treatment for Individuals with Developmental Disabilities
Study Guide 1.2
Discussion on Issues of Disability

1. What arguments would you use to encourage a potential employer who would like to hire a person with a disability but who is concerned about the functional and behavioral assessments provided by a vocational counselor?

2. Children have a right to education. Yet, some are excluded from attending their neighborhood school because they do not have the communication capacities or the needed augmentative communication systems are considered too expensive or cumbersome in the classroom. Should education be a matter of right or of capacity? Can functional and/or biomedical assessments be used to help a child and a school to more fully exercise the right to education? In what ways might they undermine the possibility of full inclusion?

From: Bach, M. Changing Perspectives on Developmental Disabilities. In I. Brown & M. Percy (Eds.) *A Comprehensive Guide to Intellectual & Developmental Disabilities* (2007). Baltimore, MD: Paul H. Brooks Publishing Co.

Care and Treatment for Individuals with Developmental Disabilities
Study Guide 1.3
Discussion on Issues of Disability

1. Debate the pros and cons of taking a person-centered approach. Illustrate your points by referring to people with intellectual and developmental disabilities or their families

From: Brown, I., Parmenter, T. & Percy, M. Trends and Issues. In I. Brown & M. Percy (Eds.) *A Comprehensive Guide to Intellectual & Developmental Disabilities* (2007). Baltimore, MD: Paul H. Brooks Publishing Co.

Orientation to Developmental Disabilities
Teacher Guide 1.1
Historical Perspective - Quiz

Directions: For each question, answer true or false by placing a T or F next to each statement.

- ___ 1. Intellectual disability is a type of mental illness.
- ___ 2. Intellectual disability is a contagious disease.
- ___ 3. Intellectual disability can generally be diagnosed on sight.
- ___ 4. Intellectual disability is a stable, unchanging condition.
- ___ 5. Intellectual disability is incurable and unalterable.
- ___ 6. The majority of cases of intellectual disability are caused by genetics.
- ___ 7. Individuals with intellectual disability are a homogeneous group.
- ___ 8. A retarded adult or adolescent is a menace to society; a frequent criminal repeater.
- ___ 9. The term "intellectual disability" is merely a more pleasing substitute for previous terms such as idiot, imbecile, feebleminded, and moron.
- ___ 10. Persons with intellectual disability come exclusively from poor families.
- ___ 11. Individuals with severe retardation cannot learn.
- ___ 12. The retarded are agents of the devil.
- ___ 13. It is a relatively easy procedure to place a retarded child into a syndrome grouping.
- ___ 14. The mentally retarded are physically impaired as well.
- ___ 15. Developmental Disability and intellectual disability is the same syndrome.
- ___ 16. Intellectual disability is a condition that exists from birth.

Note: Student should answer all questions with False (F)

Module 2 – Patients Rights
Study Guide 2.1
Scenario Group Work

1. Often times we may question the value of what clients are being taught. What they learn should be functional and appropriate to daily living. Comment on the following statements and identify how we as psychiatric technicians can introduce more valuable learning experiences.
 - He can put pegs in a board but not coins in a vending machine.
 - She enjoys music, but was never taught how to use a CD or MP3 player.
 - He can string beads to a pattern, but can't tie his shoes.
 - He can name all the letters, but can't identify the "men's room."
 - She can identify pictures by pointing, but can't order a hamburger from a menu.
 - She can place different sized cubes in a box, but can't find the trash bin at McDonald's.
2. Down syndrome is a chromosomal disorder that can be detected prenatally. Prospective parents have the option of terminating or aborting the pregnancy. How would you, as a parent, address the dilemma of the prospective birth of a child who can be expected to have significant disabilities? Discuss both sides of the dilemma.
3. In 1975, the Education for All Handicapped Children Act was passed. This has been updated in 2004 as the IDEA Improvement Act. "The student is no longer required to fit the school; rather, the school is expected to fit the student." Children with disabilities are now included in regular classrooms with their typical peers. What problems and benefits would surface in such classroom settings?
4. Many of the behaviors we see at SDC are communication issues or the lack of options and choices for the residents. Brainstorm ways we can help non-verbal clients communicate their needs and express their preferences, and provide opportunities to make choices.

Frank is a 28-year-old man who has lived in institutions and in highly restrictive settings most of his adult life. Due to violent outbursts of aggression he has been unable to remain in the family home. His aggression consists of striking others with an open hand, and doing so apparently without warning. This behavior has limited all aspects of his life including where he lives, his work, friendships, and education. How would you begin an assessment for Frank? Note any strategies for habilitation. Include specific areas for improvement, specific objectives, and goals with timelines.

DEVELOPMENTAL DISABILITIES / NURSPT 030
Curriculum Content Week 2

Assessment and Intervention in the Nursing Process

Goal Statement

The goal of this module is to provide the learner with concepts on how to support the individual who has a developmental disability and, at the same time, encourage growth to the highest level of independence, regardless of the setting.

Module Description

The module will demonstrate how to utilize the nursing process to design a plan of care for an individual who has a developmental disability.

Objectives:

At the completion of this module, the learner will be able to:

1. List the components that make up an assessment.
2. Discuss criteria for each area of the assessment process.
3. Identify the criteria which compose the intervention process.
4. Explain the use of the nursing process.
5. Identify the components of the nursing process.
6. List factors to be considered when setting priorities in working with an individual who has a developmental disability.

**Psychiatric Technician Program
Curriculum Content**

Instructional Plan: Term _____ Week 2 _____

Unit Title: NURSPT 030 DEVELOPMENTAL DISABILITIES I

Theory Hours this week: 9

Skills Lab / Clinical Hours this week: 26

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Assessment and Intervention in the Nursing Process (NP-	Objective 1 List the components that make up an assessment.	A. Physiological - bodily function, injury, and infection B. Physical - mobility C. Neurological - acuity of the senses D. Cognitive - learning E. Behavioral - moods, social skills F. Emotional -	Lecture Discussion Reading Study guide Audiovisual aids Methods of Evaluation Testing Case Studies Class discussion Discussion questions	Required Reading <ul style="list-style-type: none"> In selected text, read chapters on topics listed in Column I <u>Lecture/Discussion</u> <ul style="list-style-type: none"> PowerPoint lecture Assessment and Intervention Chapter 6 (The Nursing Process) PowerPoint from Mosby Analyze case studies 	There are 22 hours in the clinical setting and 4 hours in skills lab per week. 4	Clinical Objectives: <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. Apply the principles of assessment and intervention to the clinical area Practice interventions in a series of small steps Be able to identify strengths and areas of growth for clients in the clinical area Upon completion of this unit the student will be able to: <ul style="list-style-type: none"> Participate in care and treatment of developmentally disabled individuals Develop an Intensive Learning Project: implement a plan to help an individual increase
					22	

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Assessment and Intervention in the Nursing Process	<p>Objective 2 Discuss criteria for each area of the assessment process.</p>	<p>A. Physiological</p> <ol style="list-style-type: none"> 1. nutrition 2. rest and exercise 3. elimination 4. ventilation 5. injury/infection 6. vital signs <p>B. Physical</p> <ol style="list-style-type: none"> 1. bone structure (micro, hydro, flat feet, lordosis, kyphosis) 2. mobility (wt. bearing, hemiplegia, paraplegia, quadriplegia) 3. neurologic acuity <p>C. Cognitive</p> <ol style="list-style-type: none"> 1. Receptive vs. expressive 2. Self-help skills <p>D. Behavioral</p> <ol style="list-style-type: none"> 1. Social skills 2. Moods 3. Developmental age 				<p>or decrease a skill or behavior</p> <ul style="list-style-type: none"> • Complete a baseline addressing a skill to be taught to an individual • Log progress of short and long term goals for chosen person; assess whether your plan of intervention is working • Record monthly summaries • Participate in Clinical Conference
						<p>Objective:</p> <ul style="list-style-type: none"> • Implement the process of assessment, intervention, documentation, and evaluation when completing individual care plans <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Assess and observe client(s) at clinical site for: <ul style="list-style-type: none"> ▪ Nutrition ▪ Rest and exercise ▪ Elimination ▪ Ventilation ▪ Mobility and

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>4. Educational potential</p> <p>E. Emotional</p> <ol style="list-style-type: none"> 1. Self-concept 2. Role function 3. Interdependence 				<p>neurologic acuity</p> <ul style="list-style-type: none"> ▪ Cognitive ▪ Behavioral ▪ Emotional
Assessment and Intervention in the Nursing Process	Objective 3 Identify the criteria which compose the intervention process.	<p>A. Individualized program planning</p> <p>B. Performance monitoring</p> <p>Program evaluation</p>				
Assessment and Intervention in the Nursing Process	Objective 4 Explain the use of the nursing process.	<p>A. Achieve desired outcomes/goal setting</p> <p>B. Be proactive: prevent/reduce problem areas</p> <p>C. Engage in person-centered planning</p>				<p>Objective:</p> <ul style="list-style-type: none"> • Implement the process of assessment, intervention, documentation, and evaluation when completing individual care plans <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Based on prior assessments, plan outcomes and set goals. • Engage in person-centered planning.
Assessment and Intervention in the Nursing Process	Objective 5 Identify the components of nursing process.	<p>A. Assessment</p> <ol style="list-style-type: none"> 1. Gather information, data <p>B. Nursing diagnosis</p> <ol style="list-style-type: none"> 1. establish cause <p>C. Outcome identification</p> <ol style="list-style-type: none"> 1. set reasonable goals <p>D. Planning</p>				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<ol style="list-style-type: none"> 1. Develop plan, task analysis 2. break down into small steps <p>E. Implementation</p> <ol style="list-style-type: none"> 1. Implement plan 2. use least restrictive approach (prompts) <p>F. Evaluation</p> <p>Evaluate results</p>				
Assessment and Intervention in the Nursing Process	Objective 6 List factors to be considered when setting priorities in working with an individual who has a developmental disability.	<ol style="list-style-type: none"> A. Difference between child and adult services B. Different service delivery models C. Curricular models D. Four-component support needs assessment and planning process 				

Key:

For All Programs:	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
A/P Anatomy and Physiology	PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing
CDJS Communicable Diseases	PHARM	Pharmacology	For VN Programs only:			For PT Programs only:
COM Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NUT Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

DEVELOPMENTAL DISABILITIES /NURSPT 030
Curriculum Content Week 3

Behavioral Analysis

Goal Statement

The goal of this module is to describe challenging behaviors that are caused by biological, psychological, and social influences. Understanding the reason for a behavior is achieved by a functional analysis of the behavior. By positively recognizing people who are behaving well, establishing an environment for success, and creating opportunities for individuals to express self-determination, individuals will exhibit less challenging behaviors and feel a greater sense of self-esteem, utilize acceptable coping strategies, and experience less frustration.

Module Description

This module provides an overview of behavior modification, sometimes referred to as applied behavior analysis, as a systematic, observable, and measurable approach for reducing inappropriate behavior and establishing more acceptable replacement behaviors.

Objectives

At the completion of this module, the learner will be able to:

1. Define behavior modification.
2. Discuss the principles of behavior modification approaches and practices.
3. List four basic steps in the behavior modification process.
4. Identify the influence of learning and motivation.
5. List the purpose and steps of behavior assessment.
6. Understand the principles of "respondent conditioning" and "classical conditioning".
7. Describe the importance of antecedent-behavior-consequence in changing a behavior.
8. Define modeling and its effects on behavior.
9. Recognize the importance of "shaping" when developing care plans.
10. Describe the importance of positive approaches and strategies when decreasing an inappropriate behavior.
11. State the role of medications for individuals who exhibit challenging behaviors.

Psychiatric Technician Program Curriculum Content

Instructional Plan: Term _____ Week 3

Unit Title: NURSPT 030 DEVELOPMENTAL DISABILITIES I

Theory Hours this week: 9

Skills Lab / Clinical Hours this week: 26

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Behavioral Analysis (PSY-2.0) (G/D-1.0) (NP-2.0) (DD-4.0)	Objective 1 Define behavior modification	A. Definition of behavior modification	(Applies to Objectives 1-11) Lecture Discussion Reading Internet research Study guide Audiovisual aids	(Applies to Objectives 1-11) Required Reading <ul style="list-style-type: none"> In selected text, read chapters on topics listed in Column I 	(Applies to Objectives 1-11) There are 22 hours in the clinical setting and 4 hours in skills lab per week.	Skills Lab Objectives: (Applies to Objectives 1-11) Clinical Discussions: <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas.
Behavioral Analysis	Objective 2 Discuss the principles of behavior modification approaches and practices.	A. Challenging behavior prevents adequate functioning B. Continually evolving and improving C. Behaviors may be maintained because of anxiety	A/V Resources <ul style="list-style-type: none"> Autism and Applied Behavioral Analysis. <i>Films for the Humanities & Sciences</i> (video). HARRY: Behavioral Treatment of Self-Abuse. Foxx, Richard. <i>Research Press</i> (video). Methods of Evaluation Testing Case Studies Class discussion Discussion questions	<ul style="list-style-type: none"> <u>Comprehensive Guide to Intellectual and Developmental Disabilities.</u> Brown, I. and Percy, M. (2007). Baltimore: Paul H. Brookes Publishing Co. <ul style="list-style-type: none"> Chapters 7, 10, 23, 41, . 	4	<ul style="list-style-type: none"> Apply positive reinforcement principles to teaching objectives Demonstrate appropriate modeling techniques in the clinical area Implement schedules of reinforcement as per unit plan Develop a teaching/care plan broken down into small attainable steps using the principles of shaping Consistency and routine increases the rate of learning
Behavioral Analysis	Objective 3 List four basic steps in the behavior modification process.	A. Assessment B. Baseline data C. Program development D. Evaluation		~		
Behavioral Analysis	Objective 4 Identify the influence of learning and motivation.	A. Seek pleasure B. Avoid pain C. Learn from our mistakes		~		
Behavioral Analysis	Objective 5 List the purpose and steps of behavior assessment.	A. Select target behavior in measurable terms B. Objectives follow small progressive steps C. Long-term goal		~		
				Internet Resources		Upon completion of

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Behavioral Analysis	Objective 6 Understand the principles of "respondent conditioning" and "classical conditioning".	A. Unconditioned stimulus and response B. Conditioned stimulus and response		<ul style="list-style-type: none"> http://www.ehow.com/behavior-modification/About Behavior Modification 	22	<p>this unit the student will be able to: (Applies to Objectives 1-11)</p> <ul style="list-style-type: none"> Participate in care and treatment of developmentally disabled individuals Participate in Clinical Conference Make log entries with 15 examples of antecedent-behavior-consequence Positively reinforce clients for appropriate behavior Know and follow all behavioral plans on the unit as written Use least restrictive interventions in all behavioral incidents Practice active treatment principles: "Every moment is a teaching moment" Select a target behavior for your learning project Apply restraints, if necessary, to maintain safety of
Behavioral Analysis	Objective 7 Describe the importance of antecedent-behavior-consequence in changing a behavior.	A. Positive reinforcement B. Intermittent reinforcement C. How the environment affects behavior				
Behavioral Analysis	Objective 8 Define modeling and its effects on behavior.	A. Encourage imitation of appropriate behavior B. Can be a positive or negative effect				
Behavioral Analysis	Objective 9 Recognize the importance of "shaping" when developing care plans.	A. Reinforce each step B. Take what you can get, closest to what you want (approximations)				
Behavioral Analysis	Objective 10 Describe the importance of positive approaches and strategies.	A. Functional analysis: reason for a behavior occurring. 1. Least restrictive 2. Restraints 3. Time out 4. Soothing strategies B. School setting C. Respect				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Behavioral Analysis	<p>Objective 11 State the role of medications for individuals who exhibit challenging behaviors.</p>	<p>A. Autism B. Bipolar C. Antipsychotic medication: habilitation vs. side effects D. Psychotropic drugs: “chemical straitjackets” E. Self-injurious behavior F. Obsessive-compulsive disorder</p>				<p>client and others, if least restrictive means are unsuccessful and use of restraints are authorized in behavior plan</p>

Key:

For All Programs:									
A/P	Anatomy and Physiology	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing		
		PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing		
CDIS	Communicable Diseases	PHARM	Pharmacology		For VN Programs only:		For PT Programs only:		
COM	Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals		
NUT	Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders		
PSY	Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities		
G/D	Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing				

DEVELOPMENTAL DISABILITIES /NURSPT 030
Curriculum Content Week 5

Etiologies Overview

Goal Statement

The goal of this module is to provide the learner with an overview of the etiology of intellectual and developmental disabilities. The learner should be able to recognize the importance of understanding factors that can cause or contribute to intellectual and developmental disabilities, and be able to identify and discuss these factors.

Module Description

The Etiologies Overview Module covers the etiology (causes) of intellectual and developmental disabilities.

Objectives

At the completion of this module, the learner will be able to:

1. Discuss the importance of understanding factors that cause or contribute to intellectual and developmental disabilities.
2. Identify reasons for the importance of education about causes of intellectual and developmental disabilities.
3. Classify and explain factors causing or contributing to intellectual and developmental disabilities
4. Contrast disability diagnosis and etiological diagnosis (Batshaw).

Genetics

Goal Statement

The goal of this module is to provide the learner with information about the Human GenomeProject, the complexities of embryogenesis, the effects of genetic variations on human health and the classifications of genetic disorders.

Module Description

The genetics module covers the basic concepts of human genetics, chromosomes and heredity. The classifications of genetic disorders are described, focusing on abnormalities that can occur in human development.

Objectives

Upon completion of this module, the learner will be able to:

1. Summarize the importance of the Human Genome Project.
2. List and describe the classifications of genetic disorders.

3. Contrast mitosis and meiosis, and explain some of the errors that can occur with each process.
4. Identify and compare the differences and similarities among the Mendelian traits.
5. Describe the revised concepts to the Mendelian genetics in terms of genomic imprinting, anticipation, and mitochondrial inheritance.
6. Discuss the ways in which environment and heredity contribute to the development of multifactorial disorders.

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Etiologies Overview	<p>Objective 3 Classify and explain factors causing or contributing to intellectual and developmental disabilities.</p>	<p>A. The Concept of Etiology (Brown & Percy) B. Etiology and Prenatal Vulnerability (Brown & Percy) C. General Classification System of Etiological Factors (Brown & Percy) D. Importance of Genetic and Environmental Etiological Factors (Brown & Percy)</p>		<ul style="list-style-type: none"> Nehring W.M., (2005) <p><u>Study Guide 1.1</u></p>		<p>etiologies:</p> <ul style="list-style-type: none"> Outline the etiology of assigned client(s) disorder Examine, historically, the family involvement based on informed planning Discuss whether or not client(s)' disability could have been prevented and how Discuss client(s)' quality of life issues. Is it at its peak? Is there room for improvement? What would his or her best outcome look like? Participate in Clinical Conference
Etiologies Overview	<p>Objective 4 Contrast Disability Diagnosis and Etiological Diagnosis (Batschaw).</p>	<p>A. A disability diagnosis is made without reference to a specific medical cause B. An etiological diagnosis defines the exact cause of an illness or disorder C. In contrast to a disability diagnosis, pursuit of an etiological diagnosis often involves specialized medical testing (e.g., genetic tests, brain imaging, studies) D. The relationship between etiological diagnosis and disability diagnosis is complex</p>				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Genetics	<p>Objective 1 Summarize the importance of the Human Genome Project.</p>	<p>A. What is the Genome Project?</p> <p>B. Purpose of Genome Project Why is the Genome Project important?</p> <p>C. What is the significance of genetics to the study and care of the developmentally disabled?</p>	<p>(Applies to Objectives 1-6)</p> <p>Lecture Discussion Reading Transparencies Study guide Audiovisual aids</p> <p>Internet Resources:</p> <ul style="list-style-type: none"> http://www.ornl.gov/sci/techresources/Human_Genome/home.shtml http://www.genome.gov/ http://ghr.nlm.nih.gov/handbook/inheritan ce <p>A/V Resources</p> <ul style="list-style-type: none"> Understanding the Basic Concepts of Genetics. Item#: BVL10621. www.films.com. <p>Lecture/Discussion</p> <ul style="list-style-type: none"> Have students break into four groups and assign each group to identify disorders and 	<p>(Applies to theory objectives 1-6)</p> <p>Required Reading</p> <ul style="list-style-type: none"> In selected text, read chapters on topics listed in Column I <p>Supplemental Reading</p> <ul style="list-style-type: none"> Brown & Percy (2007) Nehring W.M., (2005) <p>Study Guide 6.1</p> <ul style="list-style-type: none"> Autosomal Recessive <p>Study Guide 6.2</p> <ul style="list-style-type: none"> Autosomal Dominant <p>Study Guide 6.3</p> <ul style="list-style-type: none"> X-Linked Recessive <p>Study Guide 6.4</p> <ul style="list-style-type: none"> X-Linked Dominant <p>Study Guide 6.5 Environmental and Genetic Interactions – Complex Patterns of Inheritance</p>	<p>(Applies to Objectives 1-6)</p> <p>There are 22 hours in the clinical setting and 4 hours in skills lab per week.</p> <p>4</p>	<p>Clinical Objectives: (Applies to Theory Objectives 1-6)</p> <p>Skills Lab Discussion:</p> <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas Review the current clinical records of assigned client(s) to determine if they have a genetic disorder. Review the current clinical records of assigned client(s) to determine if they have a genetic disorder. For clients with a genetic anomaly, investigate the care plans used to improve quality of life For clients with a genetic anomaly, investigate the history to determine if the condition could have been prevented.
Genetics	<p>Objective 2 List and describe the classifications of genetic disorders.</p>	<p>E. Chromosomal (cytogenic) - alterations in the number or structure of the chromosomes</p> <p>F. Single-gene mutation</p> <ol style="list-style-type: none"> Point mutation Insertions and deletions 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>iii. Triplet repeat expansion and polygenic - associated with the effects of multiple genes in combination with lifestyle and environmental factors.</p> <p>G. Multifactorial, heterogeneous and polygenic - associated with the effects of multiple genes in combination with lifestyle and environmental factors.</p>	<p>their distinguishing features classified by Mendel's model of inheritance:</p> <ul style="list-style-type: none"> ~ Autosomal recessive disorders ~ Autosomal dominant disorders ~ X-linked Recessive disorders ~ X-linked Dominant disorders <p>Internet Search</p> <p>http://ghr.nlm.nih.gov/handbook/inheritance</p>		22	<p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Participate in discussions regarding care and treatment of developmentally disabled individuals • Write a short case study outlining the genetic history of your client(s), including: <ul style="list-style-type: none"> ➢ Diagnosis ➢ Historical issues of the condition: prenatal, perinatal and postnatal ➢ Current care plans in place ➢ Effectiveness of current plans ➢ Quality of life issues • Participate in Clinical Conference
Genetics	<p>Objective 3 Contrast mitosis and meiosis and explain some of the errors that can occur with each process.</p>	<p>A. Mitosis B. Meiosis C. Non-disjunction D. Mosaicism E. Translocation Deletions</p>	<p><u>Methods of Evaluation</u> Testing Case Studies Class discussion Discussion questions</p>	<p>Review: Study Guides 6.1-6.4</p>		
Genetics	<p>Objective 4 Identify and compare the differences and similarities among the Mendelian traits.</p>	<p>E. Autosomal recessive disorders –</p> <ol style="list-style-type: none"> i. Two mutated copies of the gene are present in each cell when a person has an autosomal recessive disorder. ii. Two unaffected people who each carry one copy of the mutated gene have a 25% chance with each pregnancy of having a child affected by the disorder. <p>F. Autosomal dominant disorders -</p> <ol style="list-style-type: none"> i. Only one mutated copy of the gene will be necessary for a person to be affected. ii. There is a 50% chance that a child will inherit the mutated gene. <p>G. X-linked Recessive disorders</p> <ol style="list-style-type: none"> i. Recessive X-linked disorders are rarely seen in females and usually only 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Genetics	<p>Objective 5 Describe the revised concepts to the Mendelian genetics in terms of genomic imprinting, anticipation, and mitochondrial inheritance.</p>	<p>affect males because males inherit their X chromosome from the maternal side.</p> <p>H. X-linked Dominant disorders</p> <ol style="list-style-type: none"> i. X-linked dominant disorders affect females more frequently than males. ii. Fathers cannot pass any X-linked traits to their sons (no male-to-male transmission). <p>A. Genomic imprinting</p> <ol style="list-style-type: none"> 1. Differential expression of a gene or genes as a function of whether they were inherited from the male or the female parent <ol style="list-style-type: none"> a. A deletion on chromosome 15 that causes Prader-Willi syndrome if inherited from the father causes instead Angelman's syndrome if inherited from the mother. <p>B. Anticipation</p> <ol style="list-style-type: none"> 1. Signs and symptoms of some genetic conditions can become more severe and appear at an earlier age as the disorder is passed from one generation to the next. <p>C. Mitochondrial inheritance</p> <ol style="list-style-type: none"> 1. Mitochondria (organelles that produce the energy source ATP for most chemical reactions in the body) contain their own distinct genome. 2. Mutations in mitochondrial genes are responsible for several recognized 	<p>Read and Discuss:</p> <ul style="list-style-type: none"> • Study Guide 6.5 - Environmental and Genetic Interactions – Complex Patterns of Inheritance 			

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Genetics	<p>Objective 6 Discuss the ways in which environment and heredity contribute to the development of multifactorial disorders.</p>	<p>syndromes.</p> <p>a. These are always maternally inherited since only ova contain mitochondria.</p> <p>A. Multifactorial disorders – disorders associated with the effects of multiple genes in combination with lifestyle and environmental factors.</p> <ol style="list-style-type: none"> do not have a clear-cut pattern of inheritance. difficult to study and treat because the specific factors that cause most of these disorders have not yet been identified. <p>B. Genotype – the genetic constitution of an organism or cell or an individual's collection of genes.</p> <p>C. Phenotype - the expression of an individual's genotype (the observable physical and/or biochemical characteristics of the expression of a gene)</p> <p>Interaction of genetics with pre- and postnatal environments</p>				

Key:

For All Programs:	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
A/P Anatomy and Physiology	PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing
CDIS Communicable Diseases	PHARM	Pharmacology	For VN Programs only:			For PT Programs only:
COM Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NUT Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

Etiologies Overview
Study Guide 1.1
Etiology Study Questions

Critical Thinking:

1. Give the definition of etiology and give its derivation.
2. A child's development is discovered to be delayed. In terms of etiology, what following questions should be asked about the delay?
3. Why is it important, in some cases, to discover the specific cause of a disorder? Use metabolic conditions for your example.
4. How does etiology help parents with informed family planning?
5. What can be done to target and educate prospective mothers about the dangers of folic acid deficiency, drinking, and smoking during pregnancy, and other preventable causes of Developmental Disabilities?
6. In general, how does etiology benefit an individual with a Developmental Disability, in the absence of a preventive measure, so as to minimize the impact on quality of life of a disorder?
7. Give at least two examples in which the lack of education on the part of a family physician about intellectual and Developmental Disabilities could be detrimental to the newborn and to the family.
8. Discuss the complexities associated with intellectual and Developmental Disabilities in terms of legal, ethical, and social implications.
9. Discuss the pros and cons of closing institutions for persons with Developmental Disabilities in terms of etiology.
10. How can etiology affect proper assessment of an individual with an intellectual or Developmental Disability?

Genetics

Study Guide 6.1

Mendelian Autosomal Recessive Inheritance

(Male = Aa & Female = AA)

Use the Mendelian grid on the left to show the outcome in the inheritance of an autosomal recessive disorder where one person is a carrier of the abnormal gene and the other is a non-carrier for the disorder.

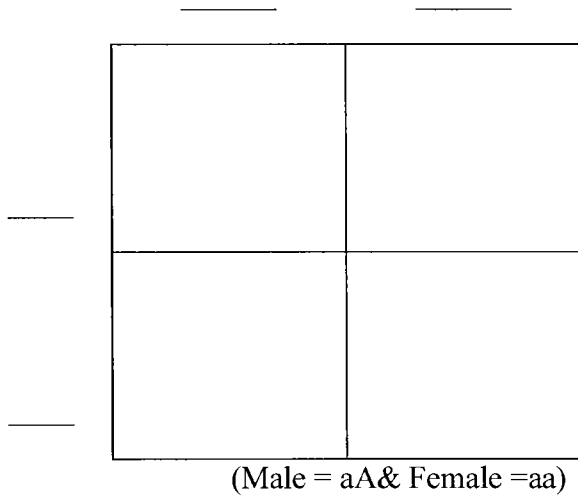
(Male = Aa and the Female = Aa)

Use the Mendelian grid on the left to show the outcome in the inheritance of an autosomal recessive disorder for two persons who are carriers of the abnormal gene.

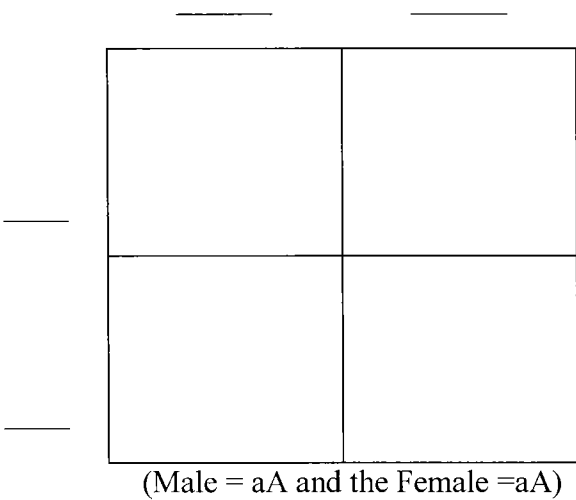
Genetics

Study Guide 6.2

Mendelian Dominant Inheritance Autosomal



Use the Mendelian grid on the left to show the outcome in the inheritance of an autosomal dominant disorder where one person is affected with the dominant abnormal gene and the other is normal.

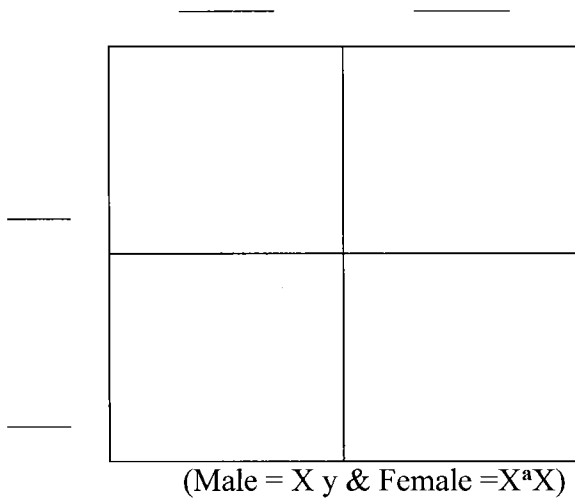


Use the Mendelian grid on the left to show the outcome in the inheritance of an autosomal dominant disorder where both persons are affected with the dominant abnormal gene.

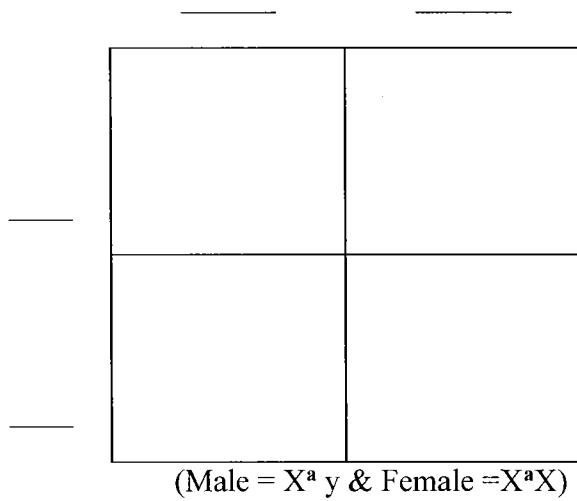
Genetics

Study Guide 6.3

Mendelian X-Linked Recessive Inheritance



Use the Mendelian grid on the left to show the outcome in the inheritance of an X-linked recessive disorder where a carrier woman has children with an unaffected male.

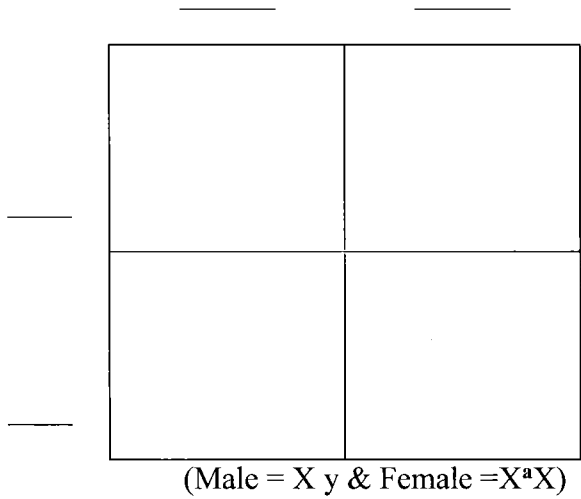


Use the Mendelian grid on the left to show the outcome in the inheritance of an X-linked recessive disorder where a carrier woman has children with an affected male.

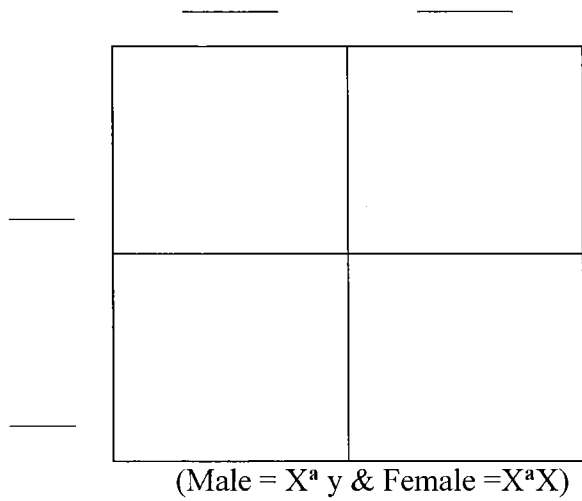
Genetics

Study Guide 6.4

Mendelian X-Linked Dominant Inheritance



Use the Mendelian grid on the left to show the outcome in the inheritance of an X-linked Dominant disorder where there is an affected father and a normal mother.



Use the Mendelian grid on the left to show the outcome in the inheritance of an X-linked dominant disorder where there is an affected mother and normal father.

DEVELOPMENTAL DISABILITIES /NURSPT 030
Curriculum Content Week 6

Ethical Dilemmas

Goal Statement

The goal of this module is to empower the learner for the daily practice of clinical ethics. The learner should recognize that ethical deliberation is not conducted in a vacuum or in a naïve state; rather, the learner should recognize that he or she is a member of a culture, religion, and gender which has immersed him or her into a world of ethics since childhood.

Module Description

The Ethical Dilemmas module covers ethical and legal issues surrounding individuals with intellectual and developmental disabilities. This module utilizes theories of ethics, combined with case samples, to give the learner relevance in applying ethical standards to daily clinical practice.

Objectives

Upon completion of this module, the learner will be able to:

1. Describe and discuss the medical ethical issues concerning children with intellectual and developmental disabilities.
2. Articulate ethical and legal issues using the appropriate terminology.
3. Identify legal issues in the care of individuals with intellectual and developmental disabilities.
4. Differentiate between various ethical theories and the criteria used to determine right from wrong or good from bad.
5. List six federal laws and discuss their impact on ethical issues concerning children with intellectual and developmental disabilities.

**Psychiatric Technician Program
Curriculum Content
Instructional Plan: Term _____ Week 6**

Unit Title: NURSPT 030 DEVELOPMENTAL DISABILITIES I

Theory Hours this week: 9

26

Skills Lab / Clinical Hours this week:

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Ethical Dilemmas (G/D-2.5) (DD-4.0) (ETH-2.5)	Objective 1 Describe and discuss the medical ethical issues concerning children with intellectual and Developmental Disabilities.	A. Informed consent and assent A. Medical rights of minors B. Forgoing treatment C. Advance directives D. Genetic testing and screening programs E. HIPAA and genetics F. Prenatal diagnosis G. Pre-implantation diagnosis H. Organ donation I. Reproductive rights J. Sterilization K. Ethics committees L. Research	(Applies to theory objectives 1-5) Lecture Discussion Reading Transparencies Study guide Audiovisual aids <u>Internet Resources</u> • http://www.dredf.org • http://www.msnbc.msn.com • http://www.disabilityrightswa.org	(Applies to theory objectives 1-5) <u>Required Reading</u> • In required textbook(s), read chapters on topics listed in Column I • <u>Comprehensive Guide to Intellectual and Developmental Disabilities</u> , Brown, I. and Percy, M. (2007). Baltimore: Paul H. Brookes Publishing Co. ▪ Chapters 40 • Foxx, R.M. <i>Increasing Behaviors of Persons with Severe Retardation and Autism</i> . (1982). Chapters 10, 11.	Applies to theory objectives 1-5) There are 22 hours in the clinical setting and 4 hours in skills lab per week. 4	Clinical Objectives: (Applies to Theory Objectives 1-5) Skills Lab Discussion • Outline the current treatment programs for your assigned client. • Examine the current treatment plans of your assigned client, and contrast with current laws and ethical principles. Upon completion of this unit the student will be able to: Write a clinical case study on an assigned client and incorporate the vocabulary of ethics, for example: • Informed consent and assent • Medical rights of minors • Forgoing treatment & advance directives • Genetic screening • HIPAA

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
				<p>A Guide to Disability Rights Laws</p> <p>Supplemental Reading</p> <ul style="list-style-type: none"> Brown & Percy (2007) Nehring W.M., (2005) <p>Study Guide 8.1</p> <ul style="list-style-type: none"> Duodenal Atresia case study <p>Study Guide 8.2</p> <ul style="list-style-type: none"> Trisomy 18 case study <p>Study Guide 8.3</p> <ul style="list-style-type: none"> Medical Ethics and Disability Case Study <p>Learning Activity</p> <ul style="list-style-type: none"> Review Study Guides 8.1-8.3 (and supplemental material) in class or assign as pre-class reading assignment. Students will answer critical thinking questions, either in small group discussions or as one large group. 		<ul style="list-style-type: none"> Prenatal diagnosis, organ donation, reproductive rights, & research Sterilization Issues of autonomy, beneficence, nonmaleficence, and justice Consequentialist ethics, hedonism, utilitarianism, deontological ethics, virtue ethics and urban ethics Ethics committees; Also include any federal laws that impact ethical decisions for the individual(s) you have been assigned <p>Objective:</p> <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> Participate in care and treatment of developmentally disabled individuals Participate in Clinical
Ethical Dilemmas	Objective 2 Articulate ethical and legal issues using the appropriate terminology.	<ul style="list-style-type: none"> A. Ethical principles B. Ethical theories C. Ethics and the law 				
Ethical Dilemmas	Objective 3 Identify legal issues in the care of individuals with intellectual and Developmental Disabilities	<ul style="list-style-type: none"> A. Issues of autonomy B. Issues of beneficence C. Issues of nonmaleficence D. Issues of justice E. Health Insurance Portability and Accountability (HIPPA) Act and genetics 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Ethical Dilemmas	Objective 4 Differentiate between competing ethical theories and the criteria used to determine right from wrong or good from bad.	A. Consequentialist ethics B. Hedonism C. Utilitarianism D. Deontological ethics E. Virtue ethics Urban ethics				Conference
Ethical Dilemmas	Objective 5 List six federal laws and discuss their impact on ethical issues concerning children with intellectual and Developmental Disabilities.	A. Americans with Disabilities Act of 1990 B. Olmstead decision C. Rehabilitation Act of 1973 D. Developmental Disabilities Assistant and Bill of Rights Act of 2000 E. Medical Home and Community-Based Waiver Program Federal Crime Bill of 1994				

Key:

For All Programs:	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
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COM Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NU/T Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

Ethical Dilemmas
Study Guide 8.1
Duodenal Atresia Case Study

A full term infant with Trisomy 21 is diagnosed with Duodenal Atresia. The neonatal intensive care unit and surgical attendees tell the parents that the Atresia can be completely corrected with a simple surgical procedure which has a greater than 1% mortality. The parents consult their OB physician, who recommends no surgery because of the Down's Syndrome. The parents refuse surgery, knowing that the infant will starve to death.

Critical Thinking:

1. Using terms of casuistry, evaluate possible decisions in this case; for example, the doctrine of double effect or ordinary versus extraordinary means.
2. Discuss, from a legal perspective, who has the right to make decisions to withhold or give treatment?
3. Discuss the issues concerning forgoing treatment in terms of parental rights.
4. Discuss the pros and cons of life sustaining treatment.
5. Apply any federal laws pertaining to this case study.

Resource: <http://libraryinfo.bhs.org/deptlibraries/Pediatrics/oreilly/ethics2.ppt>

Ethical Dilemmas
Study Guide 8.2
Trisomy 18 Case Study

Sally is a full term infant with Trisomy 18 and multiple anomalies, including a total atrioventricular canal defect. She is weak, and requires nasogastric feedings. She remains in congestive heart failure despite aggressive medical therapy. She is chronically tachypneic and diaphoretic. The parents are informed that only 10% of infants with Trisomy 18 survive beyond 1 year, and those that do survive are usually profoundly retarded. Cardiac repair would only be palliative and not curative, and carries a mortality risk of 20-30%. The surgeons recommend against operating, but the parents insist.

Critical Thinking

1. Discuss if the interests of the parents should be the guiding factor in this case.
2. What about the infant? Should the “best interests standard” be a guide?
3. Discuss any laws that pertain to this case.

Reference: <http://www.miracosta.edu/home/lmoon/infantpersons.html>

Ethical Dilemmas
Study Guide 8.3
Medical Ethics and Disability Case Study

Controversy Erupts Over Medical Intervention to Keep a Child with Developmental Disabilities Small --
January, 2007

When she was six, Ashley's parents requested that their daughter be treated with large doses of estrogen to halt her physical growth, and with surgeries to remove her breasts and uterus. These interventions were undertaken at the Children's Hospital of the University of Washington, School of Medicine in Seattle, after consultations with the medical center's ethics committee. An article about the case appeared in the October 2006 issue of Archives of Pediatrics and Adolescent Medicine (160:1077-1078) and MSNBC first reported the story on November 1, 2006. Ashley is now nine years old, with an expected final height of 4'5" and a weight of 75 pounds. The physicians involved with Ashley's care have expressed the opinion that she will never achieve a cognitive level greater than that of a three-month old. Ashley's parents, who call her their "Pillow Angel," argue that they can care for her more easily if she remains permanently small, and that she as well as they will benefit from these medical interventions. The case was reported by the Los Angeles Times, the Associated Press, CNN, and many other media outlets on January 4, and it has since raised a firestorm of debate.

Critical Thinking

Students form into groups (Ethics Committees) and discuss the issues. Establish recommendations based on ethical principles and the law, for example: Parents rights, Ashley's rights, Developmental Disabilities Assistance and Bill of Rights Act, ordinary vs. extraordinary means, motive, intent, assistive technology, fundamental rights, conflicts of interest and power imbalance, quality of life issues, etc. Present your team's recommendations to the class.

Reference: <http://www.msnbc.msn.com/id/15517226/from/ET/>

DEVELOPMENTAL DISABILITIES /NURSPT 030
Curriculum Content Week 5

Classification of Developmental Disabilities and Diagnostic Features

Goal Statement

The goal of this module is to provide the learner with an understanding of some of the more common specific developmental disabilities, the important clinical features of each one and how they are classified. The learner will also learn about some global terms used to discuss intellectual and developmental disabilities.

Module Description

The Classification of Developmental Disabilities and Diagnostic Features module contains an overview of the classifications used for describing developmental disabilities and the diagnostic features of each. The module will also define terms used globally in the classification of intellectual and developmental disabilities and outline four categories of risk factors for intellectual and developmental disabilities.

Objectives

Upon completion of this module, the learner will be able to:

1. List and discuss the definitions, literal and social, for terminology used globally in area of developmental disabilities.
2. Explain the acceptable usage of the terms intellectual disability and developmental disability.
3. List and describe the four categories of risk factors for intellectual and developmental disabilities.
4. List various (at least eleven) developmental disorders and describe the diagnostic features associated with each one.
5. List those disorders usually first diagnosed in infancy, childhood, or adolescence according to the DSM-IV-TR, giving examples and diagnostic features of each.

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Classification of Developmental Disabilities and Diagnostic Features	Objective 2 Explain the acceptable usage of the terms intellectual disability and developmental disability.	A. Need for disability terms B. Dangers of using disability terms C. Current usage of terms D. Intellectual Disabilities E. Autism F. Cerebral Palsy G. Epilepsy	(AAIDD) (formerly the American Association on Mental Retardation - AAMR) <ul style="list-style-type: none"> http://www.who.int/en/World Health Organization http://family.irank.org/pages/379/Developmental-Disabilities.html How Do Different Countries Treat People With Developmental Disabilities? 			<ul style="list-style-type: none"> update on usage of current, more acceptable disability language: <ul style="list-style-type: none"> > Intellectual disability terms > Developmental disability terms > Reference to current laws Participate in Clinical Conference
Classification of Developmental Disabilities and Diagnostic Features	Objective 3 List and describe the four categories of risk factors for intellectual and developmental disabilities.	A. Biomedical a. Before birth – chromosomal disorders, single-gene disorders, metabolic disorders, maternal illnesses, parental age. b. At birth – premature birth,				Objective: Develop an understanding of the consequences of risk factors.

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Classification of Developmental Disabilities and Diagnostic Features	<p>Objective 4 List various (at least eleven) developmental disorder syndromes and describe the diagnostic features associated with each one.</p>	<p>birth injury, neonatal disorders.</p> <p>c. After birth – malnutrition, degenerative disorders, seizure disorders, meningoencephalitis, traumatic brain injury.</p> <p>B. Social</p> <p>a. Before birth – lack of availability or access to good prenatal care</p> <p>b. At birth – lack of birth care or access to good birth care.</p> <p>c. After birth – family poverty, institutionalization, inadequate or inappropriate caregiver(s), lack of appropriate or adequate stimulation for a child.</p> <p>C. Behavioral</p> <p>a. Before birth – parental substance abuse or other unsafe/risky behavior</p> <p>b. At birth – abandonment or neglect of child</p> <p>c. After birth – domestic and/or child abuse,</p> <p>D. Educational</p> <p>a. Before birth -</p> <p>b. At birth -</p> <p>c. After birth -</p> <p>A. Down syndrome</p> <p>B. Fragile-X syndrome</p> <p>C. Prader-Willi syndrome</p> <p>D. Angelman syndrome</p> <p>E. Williams syndrome</p> <p>F. Smith-Magenis syndrome</p> <p>G. Lesch-Nyhan syndrome</p> <p>H. Duchenne Muscular Dystrophy</p> <p>I. Rett Syndrome</p> <p>J. Neurofibromatosis</p> <p>K. Tuberosus Sclerosis</p>				<p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> Review client histories and identify risk factors contributing to current diagnosis.
						<ul style="list-style-type: none"> Review client histories and identify current diagnosis and treatment plan. Participate in discussions regarding care and treatment of developmentally

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Classification of Developmental Disabilities and Diagnostic Features	Objective 5 List those disorders usually first diagnosed in infancy, childhood, or adolescence according to the DSM-IV-TR, giving examples and diagnostic features of each.	<p>A. Mental Retardation – characterized by sub-average intellectual functioning (an IQ of approximately 70 or below).</p> <ol style="list-style-type: none"> 1. Onset before age 18 years. 2. Concurrent deficits or impairments in adaptive functioning. 3. May be Mild, Moderate, Severe, Profound or Severity Unspecified. <p>B. Learning Disorders - characterized by academic functioning that is significantly below that expected given the person's chronological age, measured intelligence, and age-appropriate education.</p> <p>Examples include:</p> <ol style="list-style-type: none"> 1. Reading Disorder 2. Mathematics Disorder 3. Disorder of Written Expression 4. Learning Disorder NOS <p>C. Motor Skills Disorders includes:</p> <ol style="list-style-type: none"> 1. Developmental Coordination Disorder - motor coordination that is substantially below that expected given the person's chronological age and measured intelligence. <p>D. Communication Disorders - characterized by difficulties in speech or language. Includes:</p> <ol style="list-style-type: none"> 1. Expressive Language Disorder 2. Mixed Receptive-Expressive Language Disorder 				disabled individuals. • Participate in Clinical Conference.

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<ul style="list-style-type: none"> 3. Phonological Disorder 4. Stuttering 5. Communication Disorder NOS <p>E. Pervasive Developmental Disorders - characterized by severe deficits and pervasive impairment in reciprocal social interaction, impairment in communication, and the presence of stereotyped behavior, interests, and activities. Includes:</p> <ul style="list-style-type: none"> 1. Autistic Disorder 2. Rett's Disorder 3. Childhood Disintegrative Disorder 4. Asperger's Disorder 5. Pervasive Developmental Disorder NOS <p>F. Attention-Deficit and Disruptive Disorders includes:</p> <ul style="list-style-type: none"> 1. Attention-Deficit Hyperactivity Disorder - characterized by prominent symptoms of inattention and/or hyperactivity-impulsivity. Subtypes provided for identifying the predominant symptoms. 2. Disruptive Behavior Disorders: <ul style="list-style-type: none"> a. Conduct Disorder - characterized by a pattern of behavior that violates the basic rights of others or major age-appropriate societal norms or rules b. Oppositional Defiant Disorder - characterized 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>by a pattern of negativistic, hostile, and defiant behavior.</p> <p>3. Feeding and Eating Disorders of Infancy or Early Childhood - characterized by persistent disturbances in feeding and eating. Includes:</p> <ol style="list-style-type: none"> a. Pica - persistent eating of nonnutritive substances that is inappropriate for the individual's developmental level. b. Rumination Disorder - repeated regurgitation and rechewing of food occurring after feeding that develops in an infant or child after a period of normal functioning (unrelated to any medical condition). c. Feeding Disorder of Infancy or Early Childhood <p>G. Tic Disorders - characterized by vocal and/or motor tics.</p> <ol style="list-style-type: none"> 1. Tourette's Disorder 2. Chronic Motor or Vocal Tic Disorder 3. Transient Tic Disorder <p>H. Elimination Disorders</p> <ol style="list-style-type: none"> 1. Encopresis - repeated passage of feces into inappropriate places. 2. Enuresis - repeated voiding of urine into inappropriate places 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>I. Other Disorders of Infancy, Childhood, or Adolescence:</p> <p>1. Separation Anxiety Disorder - characterized by excessive anxiety concerning separation from home or from those to whom the child is attached that is developmentally inappropriate.</p> <p>2. Selective Mutism - consistent failure to speak in specific social situations despite speaking in other situations.</p> <p>3. Reactive Attachment Disorder of Infancy or Early Childhood - characterized by extremely disturbed and developmentally inappropriate social relatedness occurring in most contexts which is associated with grossly pathogenic care.</p> <p>4. Stereotypic Movement Disorder - characterized by repetitive, driven, and nonfunctional motor behavior that interferes with normal activities and may result in bodily injury at times.</p>				

Key:

For All Programs:	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
A/P Anatomy and Physiology	PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing
CDIS Communicable Diseases	PHARM	Pharmacology	For VN Programs only:	For PT Programs only:	For PT Programs only:	
COM Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NUT Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

Classification of Developmental Disabilities and Diagnostic Features
Study Guide 7.1
Terminology for Developmental Disabilities

Acceptable use of intellectual disabilities, developmental disabilities, and related terms as of 2007. Below is a table containing three columns. For each term described in column one, add the information for columns two and three.

Term (applicable group)	Generally Acceptable use	Example
Intellectual disabilities (adults or children)		
Intellectual disability (adults or children)		
Developmental Disabilities (Adults or children)		
Developmental Disability (Adults or children)		
Developmental Delay (children only)		

Adapted from: Brown, I. and Percy, M., p13

Classification of Developmental Disabilities and Diagnostic Features Study Guide 7.2

Global Use of Terminology for Developmental Disabilities

Define the following terms and state in which countries they are most used.

1. Intellectual Disability
2. Mental Retardation
3. Developmental Disability
4. Learning Disability
5. Mental Handicap
6. Developmental Handicap

Classification of Developmental Disabilities and Diagnostic Features
Study Guide 7.3
Terminology by Specific Group, Organization, or Purpose

Discuss the literal and definitional understanding of intellectual disability and developmental disability by specific group, organization, or purpose.

1. The American Association on Intellectual and Developmental Disabilities (AAIDD) (formerly the American Association on Mental Retardation (AAMR))
2. American Psychiatric Association
3. World Health Organization

Classification of Developmental Disabilities and Diagnostic Features Study Guide 7.4

Literal and Definitional Understanding by Real-Life Situations

Discuss how the literal and definitional understanding of the terms intellectual disability and developmental disabilities change when used in real-life situations.

1. How does the term *ability* vary in usage?
2. What role does *tolerance* play in the use of terminology in society?
3. What are the growing expectations of *ability*?
4. What is the growing trend in *acceptance* of disability?

Classification of Developmental Disabilities and Diagnostic Features
Study Guide 7.5
Short Research

Write a three to five page paper on one common developmental disorder, discussing the associated clinical characteristics including:

1. The type of disorder and the cause, such as Prenatal, Perinatal, or Postnatal, environmental, genetic (autosomal or x-linked), chromosomal, teratogenic, etc.
2. Prevalence in the US.
3. Any risk factors (Biomedical, Social, Behavioral and Educational risk factors).
4. DSM-IV Classification.
5. Co-morbid conditions involved, such as mental disorder, intellectual disability, seizures, specific learning disabilities, etc.

DEVELOPMENTAL DISABILITIES / NURSPT 030
Curriculum Content Week 8

Ethical Dilemmas

Goal Statement

The goal of this module is to empower the learner for the daily practice of clinical ethics. The learner should recognize that ethical deliberation is not conducted in a vacuum or in a naïve state; rather, the learner should recognize that he or she is a member of a culture, religion, and gender which has immersed him or her into a world of ethics since childhood.

Module Description

The Ethical Dilemmas module covers ethical and legal issues surrounding individuals with intellectual and developmental disabilities. This module utilizes theories of ethics, combined with case samples, to give the learner relevance in applying ethical standards to daily clinical practice.

Objectives

Upon completion of this module, the learner will be able to:

1. Describe and discuss the medical ethical issues concerning children with intellectual and developmental disabilities.
2. Articulate ethical and legal issues using the appropriate terminology.
3. Identify legal issues in the care of individuals with intellectual and developmental disabilities.
4. Differentiate between various ethical theories and the criteria used to determine right from wrong or good from bad.
5. List six federal laws and discuss their impact on ethical issues concerning children with intellectual and developmental disabilities.

**Psychiatric Technician Program
Curriculum Content**

Instructional Plan: Term 2 Week 8

Unit Title: NURSPT 030 DEVELOPMENTAL DISABILITIES I

Theory Hours this week:

Skills Lab / Clinical Hours this week:

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Ethical Dilemmas	Objective 1 Describe and discuss the medical ethical issues concerning children with intellectual and Developmental Disabilities.	A. Informed consent and assent A. Medical rights of minors B. Forgoing treatment C. Advance directives D. Genetic testing and screening programs E. HIPAA and genetics F. Prenatal diagnosis G. Pre-implantation diagnosis H. Organ donation I. Reproductive rights J. Sterilization K. Ethics committees L. Research	Lecture Discussion Reading Transparencies Study guide Audiovisual aids Internet Resources • http://www.dredf.org • http://www.msnbc.msn.com • http://www.disabilityrights.wa.org	(Applies to theory objectives 1-5) Required Reading • In required textbook(s), read chapters on topics listed in Column I A Guide to Disability Rights Laws Supplemental Reading • Brown & Percy (2007) • Nehring W.M., (2005) Study Guide 8.1 • Duodenal Atresia case study Study Guide 8.2 • Trisomy 18 case study Study Guide 8.3 • Medical Ethics and Disability Case Study		Objectives: (Applies to Theory Objectives 1-5) • Outline the current treatment programs for your assigned client. • Examine the current treatment plans of your assigned client, and contrast with current laws and ethical principles. Upon completion of this unit the student will be able to: Write a clinical case study on an assigned client and incorporate the vocabulary of ethics, for example: • Informed consent and assent • Medical rights of minors • Forgoing treatment & advance directives • Genetic screening • HIPAA • Prenatal diagnosis, organ donation,

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Ethical Dilemmas	<p>Objective 2 Articulate ethical and legal issues using the appropriate terminology.</p>	<p>A. Ethical principles B. Ethical theories C. Ethics and the law</p>	<p>Learning Activity</p> <ul style="list-style-type: none"> Review Study Guides 8.1-8.3 (and supplemental material) in class or assign as pre-class reading assignment. Students will answer critical thinking questions, either in small group discussions or as one large group. 			reproductive rights, & research • Sterilization • Issues of autonomy, beneficence, nonmaleficence, and justice • Consequentialist ethics, hedonism, utilitarianism, deontological ethics, virtue ethics and urban ethics • Ethics committees; Also include any federal laws that impact ethical decisions for the individual(s) you have been assigned
Ethical Dilemmas	<p>Objective 3 Identify legal issues in the care of individuals with intellectual and Developmental Disabilities</p>	<p>A. Issues of autonomy B. Issues of beneficence C. Issues of nonmaleficence D. Issues of justice E. Health Insurance Portability and Accountability (HIPPA) Act and genetics</p>				<p>Objective:</p> <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> Participate in care and treatment of developmentally disabled individuals Participate in Clinical Conference

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Ethical Dilemmas	Objective 4 Differentiate between competing ethical theories and the criteria used to determine right from wrong or good from bad.	A. Consequentialist ethics B. Hedonism C. Utilitarianism D. Deontological ethics E. Virtue ethics Urban ethics				
Ethical Dilemmas	Objective 5 List six federal laws and discuss their impact on ethical issues concerning children with intellectual and Developmental Disabilities.	A. Americans with Disabilities Act of 1990 B. Olmstead decision C. Rehabilitation Act of 1973 D. Developmental Disabilities Assistant and Bill of Rights Act of 2000 E. Medical Home and Community-Based Wavvier Program Federal Crime Bill of 1994				

Key:

For All Programs:		NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
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CDIS	Communicable Diseases	PHARM	Pharmacology	For VN Programs only:		For PT Programs only:	
COM	Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NUIT	Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY	Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D	Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

Ethical Dilemmas
Study Guide 8.1
Duodenal Atresia Case Study

A full term infant with Trisomy 21 is diagnosed with Duodenal Atresia. The neonatal intensive care unit and surgical attendees tell the parents that the Atresia can be completely corrected with a simple surgical procedure which has a greater than 1% mortality. The parents consult their OB physician, who recommends no surgery because of the Down's Syndrome. The parents refuse surgery, knowing that the infant will starve to death.

Critical Thinking:

1. Using terms of casuistry, evaluate possible decisions in this case; for example, the doctrine of double effect or ordinary versus extraordinary means.
2. Discuss, from a legal perspective, who has the right to make decisions to withhold or give treatment?
3. Discuss the issues concerning forgoing treatment in terms of parental rights.
4. Discuss the pros and cons of life sustaining treatment.
5. Apply any federal laws pertaining to this case study.

Resource: <http://libraryinfo.bhs.org/deptlibraries/Pediatrics/oreilly/ethics2.ppt>

Ethical Dilemmas
Study Guide 8.2
Trisomy 18 Case Study

Sally is a full term infant with Trisomy 18 and multiple anomalies, including a total atrioventricular canal defect. She is weak, and requires nasogastric feedings. She remains in congestive heart failure despite aggressive medical therapy. She is chronically tachypneic and diaphoretic. The parents are informed that only 10% of infants with Trisomy 18 survive beyond 1 year, and those that do survive are usually profoundly retarded. Cardiac repair would only be palliative and not curative, and carries a mortality risk of 20-30%. The surgeons recommend against operating, but the parents insist.

Critical Thinking

1. Discuss if the interests of the parents should be the guiding factor in this case.
2. What about the infant? Should the “best interests standard” be a guide?
3. Discuss any laws that pertain to this case.

Reference: <http://www.miracosta.edu/home/lmoon/infantpersons.html>

Ethical Dilemmas
Study Guide 8.3
Medical Ethics and Disability Case Study

Controversy Erupts Over Medical Intervention to Keep a Child with Developmental Disabilities Small --
January, 2007

When she was six, Ashley's parents requested that their daughter be treated with large doses of estrogen to halt her physical growth, and with surgeries to remove her breasts and uterus. These interventions were undertaken at the Children's Hospital of the University of Washington, School of Medicine in Seattle, after consultations with the medical center's ethics committee. An article about the case appeared in the October 2006 issue of Archives of Pediatrics and Adolescent Medicine (160:1077-1078) and MSNBC first reported the story on November 1, 2006. Ashley is now nine years old, with an expected final height of 4'5" and a weight of 75 pounds. The physicians involved with Ashley's care have expressed the opinion that she will never achieve a cognitive level greater than that of a three-month old. Ashley's parents, who call her their "Pillow Angel," argue that they can care for her more easily if she remains permanently small, and that she as well as they will benefit from these medical interventions. The case was reported by the Los Angeles Times, the Associated Press, CNN, and many other media outlets on January 4, and it has since raised a firestorm of debate.

Critical Thinking

Students form into groups (Ethics Committees) and discuss the issues. Establish recommendations based on ethical principles and the law, for example: Parents rights, Ashley's rights, Developmental Disabilities Assistance and Bill of Rights Act, ordinary vs. extraordinary means, motive, intent, assistive technology, fundamental rights, conflicts of interest and power imbalance, quality of life issues, etc. Present your team's recommendations to the class.

Reference: <http://www.msnbc.msn.com/id/15517226/from/ET/>