



# Nursing I (ADN-100)

## Fall 2017

### Course Information Basics

Semester Hours:	8 semester hours (lecture 75 hours/college lab 60 hours/clinical 45 hours)
Semester and Year:	Fall 2017
Location:	NIACC main campus Clinical agencies
Meeting days and times:	08/28/2017-12/14/2017
Lecture:	Monday, 01:10-04:50PM, MH104G
Lecture/Core Lab:	Wednesday, 01:10-04:50PM, MH104G
College Lab:	Thursday, 08:00AM-03:30PM, MH104H
Lecture:	Friday, 10:30AM-02:30PM, MH104G OR Clinical as noted on the clinical schedules.

### Time Commitment Expectations:

*A minimum of three hours of preparation is often recommended for each one hour of time in a college course. These are approximate hours and are subject to individual needs. Students complete clinical assignments requiring additional time beyond the scheduled clinical hours. Students are required to complete additional activities beyond scheduled clinical hours to meet agency requirements. Students are required to complete two hours of community service this semester outside of their current employment.*

### Instructor Contact Information:

Instructor:	L. DeGroot, RN, MSN	L. Eckhardt, RN, MSN
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Phone:	641-422-4322	641-422-4146
Office location:	MH109C	MH109B
Office hours:	Posted outside office door	Posted outside office door
Instructor:	A.Otto, RN, DNP	J. Kolker, RN, MSN
Email:	<a href="mailto:Amie.Otto@niacc.edu">Amie.Otto@niacc.edu</a>	<a href="mailto:Julie.Kolker@niacc.edu">Julie.Kolker@niacc.edu</a>
Phone:	641-422-4338	641-422-4219
Office location:	MH109M	MH109K
Office hours:	Posted outside office door	Posted outside office door
Instructor:	D. Stockberger	
Email:	<a href="mailto:Deb.Stockberger@niacc.edu">Deb.Stockberger@niacc.edu</a>	

**Clinical Instructor Contact Information:**

**Instructor:** part-time clinical instructors provide contact information and office hours with clinical orientation information.

**Preferred Method of Communication:**

NIACC Email

**Expected Response Time:**

Faculty office hours are posted outside their office door. Faculty will respond to NIACC email or phone calls to the office within 36 hours on weekdays.

**Course Information Specifics****Course Description:**


Prerequisites: BIO-186, Microbiology; ENG-105, Composition I

Corequisites: BIO-206, Anatomy and Physiology I; PSY-121, Developmental Psychology


**The students must maintain enrollment in co-requisite course(s) to be enrolled in the nursing course.** At least a C is required for support courses to progress in the ADN program.

Nursing I includes the philosophy and conceptual framework of the NIACC Associate Degree Nursing program. The course includes basic concepts related to legal and ethical aspects of nursing, nursing roles, and current trends in health care. The student is introduced to wellness-illness theory, the therapeutic nurse-patient relationship, and effective communication techniques. An introduction to caring concepts is also included. Nursing I utilizes the nursing process with emphasis on assessment and nursing diagnosis in meeting client needs resulting from impairments relating to safety and comfort throughout the life span. Pharmacological concepts, diet modification, psychosocial concepts, and health maintenance are integral considerations in the progressive development of the student's knowledge and skills. Clinical experiences include opportunities to apply nursing roles and the nursing process in long-term care, medical-surgical, and community settings.


**Learning Materials:****Required:**

Potter and Perry:  Fundamentals of Nursing, 9th edition, 2017 (Potter)


Ackley, Ladwig, and Makic:  Nursing Diagnosis Handbook, 11<sup>th</sup> edition, 2017 (Ackley)

Perry and Potter:  Nursing Interventions and Clinical Skills, 6<sup>th</sup> edition, 2016 (Perry)


Assessment Technologies Institute™, LLC, Version 8.0, (ATI): Materials will be provided in class

 Fundamentals for Nursing (ATI-Fund)

 Pharmacology Made Easy (ATI-Pharm)


 Dosage Calculations (ATI-Calc)


 Nurse's Touch (ATI)


 Additional online resources available and identified in course handouts


Skidmore-Roth:  [Mosby's Drug Reference](#), 31<sup>st</sup> edition, 2018

Pagana/Pagana:  [The Mosby's Manual of Diagnostics and Laboratory](#) (5<sup>th</sup> edition), 2014

 SimChart, Elsevier, 2013, web access purchased first day of class

 = E-textbook edition or print version available.

 = online

 = print copy only

### **Academic Resources:**

Additional web enhanced activities - Assessment Technologies Institute (ATI) Activities, SimChart, HealthStream, Canvas course activities, Evolve website, National League for Nursing (NLN) testing, NIACC Library (online services), Mercy Health Library, Career Coach, and textbook online resources.

### **Measurable Course Objectives:**

Course outcomes give a broad overview of the course and clinical outcomes state expectations relating to nursing roles at the end of the semester.

### **NURSING I COURSE OUTCOMES:**

Nursing I (ADN-100) introduces best practice standards with utilization of the nursing process with emphasis in nursing assessment performing within the roles of the nurse. The student will be able to:

1. Identify major conceptual framework components of the NIACC ADN program.
2. Discuss the role of the nurse historically and in current health care settings.
3. Apply the nursing process to assist the client to meet comfort and safety needs across the life span with an emphasis on assessment and nursing diagnosis.
4. Demonstrate an increasing self-awareness in relationship to the nurse's role in the therapeutic environment in acute, long-term care and community settings.
5. Recognize common patterns of human reactions to stress and illness.
6. Utilize principles of communication in exchanging information with clients.
7. Apply therapeutic nursing interventions to insure client comfort and safety utilizing acceptable ethical and legal standards of practice.
8. Identify basic pharmacological concepts, dietary modifications, and psychosocial/communication concepts utilized in therapeutic nursing interventions to meet comfort and safety needs.
9. Re-enforce basic health concepts in client and family to promote health and prevent illness.
10. Demonstrate behaviors consistent with caring.

**NURSING I CLINICAL OUTCOMES:**

At the completion of Nursing I, the student, in an acute and long-term care facility, will be able to assist one to two clients across the life span to meet the needs related to comfort and safety. The student will be introduced to best practice standards related to the pediatric, adult and gerontological client. To achieve clinical outcomes, the student will:

**Provider of Care**

1. Utilize the nursing process and critical thinking with an emphasis on assessment to meet the comfort and safety needs of client appropriate to psychosocial development throughout the life span.
2. Demonstrate a commitment to caring in all professional relationships respecting the dignity, worth and cultural identity of individuals.
3. Perform therapeutic nursing interventions according to best practice standards incorporating fundamental pharmacological concepts, dietary modifications, psychosocial concepts, and health maintenance to enhance client care while maintaining safe practices.
4. Demonstrate communication skills to exchange information within the proper lines of authority, complete accurate documentation, and interact effectively with others with an emphasis on listening, open inquiries, reflecting content, and reflecting feeling.

**Manager of Care**

5. Function within contemporary health care environments interacting with the interdisciplinary team to provide safe care and identifying appropriate resources for the client.
6. Manage the direct care of one to two clients utilizing clinical decision-making and recognizing appropriate delegation.

**Member within the Discipline**

7. Implement the fundamental roles of the nurse in relation to the legal and ethical framework of nursing.
8. Demonstrate professional behaviors, language, dress and attitude with clients, staff, peers and faculty in all student related activities.

**An “Unsatisfactory” rating in any of the listed clinical outcomes will result in an “Unsatisfactory” clinical evaluation for the given term.**

**Course Units:**

Client Needs Emphasized:

Comfort - The client need of comfort is central to the art of nursing. Each individual brings physiological, sociocultural, spiritual, psychological, and environmental characteristics that influence how comfort is interpreted and experienced. An understanding of comfort is essential in assessing clients and formulating nursing diagnoses.

Safety - The client need of safety is the freedom from psychological and physical energy. A client's well-being is dependent on health care provided in a safe manner and in a safe environment. Safety is a primary responsibility of a nurse and underlies all assessment and formulation of nursing diagnoses.

Course Outline:

- A. Client needs emphasized are:
  - 1. Safety
  - 2. Comfort
  
- B. Units of instruction include:
  - 1. Orientation to the Career of Nursing
  - 2. Assessment
  - 3. Legal, Ethical, and Professional Standards
  - 4. Wellness Concepts
  - 5. Communication
  - 6. Hygienic Needs
  - 7. Elimination Needs
  - 8. Needs Related to Personal and Environmental Safety
  - 9. Nutritional Needs
  - 10. Needs of the Gerontological Client
  - 11. Administration of Pharmacologic Agents
  - 12. Oxygenation Needs
  - 13. Needs of the Surgical Client
  - 14. Comfort Needs - Pain and Sleep
  - 15. Cultural and Psychosocial Needs

**Overview of Major Assignments:**

Nursing I is a lecture/lab course. The course combines large group classes, small group skill practice in a college laboratory setting, and clinical practice in clinical agencies. The course includes web enhanced activities and resources. Clinical practice includes simulation activities in the Health Simulation Center.

**Course Calendar:**

Clinical schedules, college lab schedules and a topical outline with classroom schedules are provided with the course orientation information.

**Grading:**

Nursing courses are composed of theory and clinical laboratory experience. Clinical laboratory experience is the application of theoretical knowledge in the direct care of clients.

The theory grade is based on a percentage of the total accumulated points of unit and final examinations and other scored assignments. The grading scale to the nearest percent is as follows:

90 -100 percent = A

82 - 89 percent = B

77 - 81 percent = C

69 - 76 percent = D

68 and below = F

Methods of Evaluation: Unit and Final Exams  
Quizzes, Presentation  
Written and Online Assignments (Classroom and clinical)  
Lab/Clinical Performance

Test scores and assignment points will be posted on Canvas and accessed with an individual password. Any questions regarding a grade earned must be discussed within appropriate instructor within one week after receiving the grade.

**NO EXTRA CREDIT POINTS WILL BE OFFERED.**

Points earned from clinical assignments will be added to a student's classroom points after completion of the clinical rotation of the semester. Refer to the Guidelines for Clinical Assignments and the Well Older Adult Project Guidelines for specific grading criteria. Points for clinical assignments may not be awarded if the student is absent during clinical or submits a late assignment.

The student must achieve 90% on the dosage calculation test or retake the test until achieving a 90% score. Points are awarded for the score on the first test only. The student has three attempts to retake the dosage calculation test or the student does not meet the course requirements and is given an unsatisfactory grade for the course.

Each student on a weekly basis will complete a progress worksheet. The student will evaluate and reflect on the three roles of the nurse. The clinical instructor will review the progress worksheet and add to the evaluation. Contributing to clinical evaluation are faculty anecdotal notes on student performance, faculty ratings on the progress worksheet, college lab performance, feedback from staff of agencies where students perform and observe, and clinical assignments. Clinical instructors will complete an end-of-rotation and end-of-semester

evaluations based on clinical outcomes. An “Unsatisfactory” rating in any of the clinical outcomes will result in an “Unsatisfactory” clinical evaluation for the semester. An unsatisfactory clinical experience for a given term will result in an “F” for the nursing course currently enrolled in, regardless of the grade earned in theory. Students will be placed on a performance plan for inconsistent/unsafe clinical performance and/or attendance. Refer to the ADN Student Handbook and Clinical Evaluation of Clinical Outcomes for additional clinical policies and requirements.

Due to concerns for client safety and the importance of application of theoretical knowledge to clinical practice, students must achieve a 73 percent theory grade by NIACC’s designated drop date. Students failing to achieve and maintain this percentage will not be allowed to practice clinically. Following this designated drop date, students must maintain a 73 percent theory grade at all times or will not be allowed in the clinical area.

Students must submit agency identification badges and a self-assessment prior to this conference. Failure to comply with these requirements will result in an “Incomplete” with final grades being withheld until such requirements are fully met. An “Incomplete” will be given to the student if required assignments are not completed by the end of the semester. An “Incomplete” will also be given to students who have not returned materials loaned to them during the nursing course. An “Incomplete” will be changed to an “F” according to faculty decision. This is consistent with overall college policy.

In order to satisfactorily complete a nursing course, the student must obtain a “C” or better grade. Students must attain a “C” grade in **all** nursing courses and **all** corequisites courses to continue sequential progression in the ADN program. Students unable to progress will have individual conferences with an instructor to discuss options for possible future re-entry. Please see the current ADN Student Handbook for policies regarding probation/performance plans, withdrawal, and readmission.

**Community Project:** Students are required to complete two hours of community service this semester. Community service is any non-compensated service to others in one’s community. Examples include immunization clinics, visiting elderly in care facilities, teaching Sunday School, taking blood pressures voluntarily, or any kind of community service performed. Service hours and a written synopsis of the experience should be completed by the end of the second week of the last clinical rotation. Completion of this activity must occur during the semester, not before or after. Failure to do community service will result in an “Incomplete”.

**Attendance and Tardiness Policy:**

Classroom and clinical attendance and tardiness will be recorded on the student’s end of semester clinical evaluation and end of program final evaluation which is made available to future employers.

**Class Attendance:** Attendance is highly recommended and is monitored. Students who are absent from any session must notify the instructor prior to the start of the session by email or calling the instructor's office. Do not leave a message at the NIACC switchboard.

**Students are responsible** for all classroom content, announcements and assignments. Choose a peer to pick up handouts and relay classroom announcements if absent. Instructors will not make extra copies of any handouts. Students should make their own copies from a peer. Students are responsible for all content presented and/or announcements given in class.

Students absent more than one day of any combination of clinical lab, core lab, or college lab will be placed on a performance plan. Students absent two days or more of any combination of clinical lab, core lab, or college lab may receive an unsatisfactory clinical rating and, thus, will not be able to proceed in the program.

Tardy arrivals to core lab, clinical lab or college lab equals one-third day of absence. Three clinical tardies equal one clinical absence and will place a student on a performance plan. Students arriving greater than 59 minutes late will be counted as absent. A student who is ill or unable to attend clinical practice shall personally notify the clinical area at least one-half hour prior to the scheduled clinical or college laboratory time. The procedure to notify the instructor for a clinical absence is provided in the clinical orientation information.

**Rationale:** A part of career preparation is learning skills and acquiring the knowledge necessary to competently perform on the job. Attendance and punctuality are essential in this preparation. Classroom and clinical attendance and tardiness will be recorded on the student's semester evaluation and end of program final evaluation which is made available to future employers.

A test review time for unit tests will be designated on the topical outline. Attendance is expected during these sessions for the opportunity to review the test. If the student attends the class period prior to test review and does not also attend the test review, the student may forfeit the opportunity to review the test. If the student is absent on the day of test review, the student must contact the instructor to schedule a test review time within one week of the scheduled test date. No test review will be held for final comprehensive tests at the end of each semester. Refer to the test review policy provided in the orientation information at the start of the semester.

Nursing I students may request one unit test for additional review in a supervised setting in the instructor's office or the Student Learning Center for 30 minutes. This additional review is to provide for discussion on test-taking strategies. This opportunity is only available for one of the first three unit tests and must be scheduled within one week following the specific test.



Individual student conferences with assigned clinical instructors are required at the completion of each semester. Students should not bring children to conferences with faculty.

**Late Work Policy:**

The student will be required to complete any missed test or hand in any required assignments prior to the start of the first scheduled class after an absence, unless previously arranged with the instructor. Once a test is handed in, a student will not be allowed to make additions or corrections to the test. Make up testing may be scheduled in the Student Learning Center (SLC) or in the Health Division office area as determined by the instructor. Students will be required to complete a make-up test when the instructor or SLC testing time is available. A picture ID is required prior to testing in the SLC. If unable to be present for a test, students must call the instructor prior to the start of class to arrange to take a make-up test. **Failure** to notify the instructor prior to start of class on test days may result in denial of the opportunity to take a test.

If a test is missed, a test with alternative test items may be given upon the discretion of the instructor. A student is allowed to complete two tests per semester after the scheduled testing time without penalty. A third late test and any subsequent late tests will result in a test with a higher percentage of alternative items.

Classroom quizzes and activities for points are awarded to those students in attendance. There will be an alternative assignment available for absent students. Students are responsible to contact the instructor for this make-up quiz or activity, if so desired. This assignment must be completed within the next day the student attends class after the missed quiz or activity.

Refer to the Guidelines for Clinical Assignments and the Well Older Adult Project Guidelines for specific grading criteria. Points for clinical assignments may not be awarded if the student is absent during clinical or submits a late assignment.

Required web-based activities related to lab content must be completed prior to skills testing. The student will be counted tardy if the assigned preparation is not completed prior to the lab.

Online HealthStream courses will be assigned throughout the semester. Students must have all courses completed by the assigned date or they will not be allowed in the clinical area.

**Submission Policy:**

Requirements for submission of clinical assignments are outlined in the clinical guidelines provided during orientation. Scheduled tests are identified on the topical outline provided during orientation. Classroom assignments will be announced in class.

**Classroom Policies:**

Personal conduct and professional behaviors are addressed in the ADN Student Handbook. If you have questions regarding issues like grade appeals, grievance policies, academic probation, nondiscrimination policies, and NIACC's ADA Disability Statement, refer to the NIACC Student Handbook, which can be accessed at [Student Life](http://www.niacc.edu/student-life/) (<http://www.niacc.edu/student-life/>).

**Class Recording and Social Media Policies:**

See the [ADN Student Handbook](#). In the event of an emergency, students are to leave the classroom to take the phone call. No texting is permitted during class time.

**Academic Integrity Policy:**

According to the Student Conduct Code, (see the NIACC Student Handbook, found at <http://www.niacc.edu/student-life/>) academic dishonesty, including but not limited to cheating, plagiarism, knowingly furnishing false information to the college, forgery, alteration or misuse of college documents or records shall be subject to disciplinary procedures.

**If cheating on any test or assignment is determined, the score for that test or assignment will be nullified. Refer to the policy for testing and test review provided in this syllabus.**

**Course Specific Safety Procedures:**

Safety information is provided to students at the start of the program and fall semester in these documents and the course website:

- NIACC Student Handbook
- Campus Emergency Procedures
- Blood Borne Pathogens Exposure Control Plan
- MMC-NI Nurse Epidemiologist Presentation at the beginning of Nursing I and fall semester

Safety information is provided in these documents prior to related experiences in the college lab, simulation center, or clinical agencies:

- College Lab Policies
- Simulation Center Orientation
- Agency specific orientation information

**Proctored Testing Procedures:**

The following procedures will be followed in all testing sessions in the nursing program.

1. Books, bags, purses, etc. will be placed in an area designated by the instructor before the start of the test.
2. No head coverings (hats, hoods, caps, etc.) or sunglasses may be worn during the testing session. Students are to keep hands “out of pockets” during the testing session.
3. Ear plugs may be used with instructor approval.
4. No student may bring food, drinks, gum, or candy to their seat.
5. No electronic devices or cell phones are allowed at the testing station or desk. This includes any electronic devices that have internet access or recording capabilities. Cell phones should be silenced and placed in the student’s purse or bag before starting the test.
6. Attendance will be recorded. Refer to “Late Work Policy” for make-up test information.
7. Students arriving after the designated start time will not be given additional time for testing.
8. Instructors may designate student seating arrangements.
9. Students should bring a #2 pencil for paper exams.
10. Only calculators issued by NIACC can be utilized during the exam.
11. A cover sheet will be given to students before paper testing. Students should not write on this sheet until after the exam starts.
12. Students should not open or start the exam until directed to do so by the instructor. Specific instructions for individual tests are identified on the cover page of a paper test or supplied verbally before computerized testing. Students are responsible to review these instructions before beginning the test.
13. If an unexpected need arises that a student has to leave the room before they are finished with the test, the student may not be allowed to return and finish the exam.
14. A student submitting an incomplete test will not be allowed to return to the testing room and complete the omitted question(s).
15. When the allocated time for testing has expired, the student will be required to turn in their tests to the instructor. No additional time will be allowed beyond the scheduled and documented testing session.
16. Students will be permitted to retrieve their books and bags as they quietly leave the room after completing their exam.
17. Students will not be allowed to return to their seats after submitting their exam until the end of the testing session.
18. Discussing the exam after leaving the room is discouraged. Students are asked to be considerate to the students still testing and not congregate outside the classroom.
19. Review of test questions will be limited to the official designated test review time.
20. On-Line testing will utilize a secured browser

**Official Test Review Policy:**

1. Only students present at the beginning of the test review will be given their answer sheets. Please be prompt.
2. Instructors may use the first few minutes of this time to discuss rationale for questions, which seemed to pose difficulty for a number of students (as identified by the item analysis).
3. Only written comments with rationale and a reference will be considered for additional points. Each student must write an individual rationale.
4. Only students submitting written rationale with a reference will receive an additional point if their rationale is correct as the why their answer was a better response than the answer identified on the test key.
5. **There will be no verbal discussion of the rationale for a correct answer with the instructor administering the test review or other students in the room.**
6. Test reviews will last no longer than one-half hour.
7. Student must place all personal belongings including electronic devices or cell phones in a designated place. This includes electronic devices that have internet access or recording capabilities. Students may review textbooks and handouts when preparing a written rationale in the view of the instructor supervising the test review.

**After Test Review:**

1. Faculty will review all written comments and make decisions regarding the validity of the written rationale.
2. If student's rationale is judged to be valid, the student will be notified and the additional point will be added to their test score.
3. If instructors judge a question to be lacking in validity and reliability, it is their prerogative to eliminate that question from the test, thus possibly reducing the total number of questions for that test.
4. If the student misses test review due to illness, the student may review the test within one week of the test review as arranged with instructor.
5. **No test review is offered for Final Semester Tests**

**Disclaimer Statement:**

The ADN faculty reserve the right to alter this course's syllabus, policies, grading scale, texts, and calendar as needed at any time during the semester. Faculty will alert you to any changes.

**Interim Health Division Chair Information:**

Division Chair: Laurie DeGroot  
Email: [Laurie.DeGroot@niacc.edu](mailto:Laurie.DeGroot@niacc.edu)  
Phone: 641-422-4322

**Tech Expectations and Support:**

Links to the web sites utilized by this course (ATI, Elsevier/Evolve, HealthStream and SimChart) including technical support are provided on the NIACC Canvas course in the folder labeled "Website Links and Technology Support". Specific web browsers are recommended for optimal function on these sites.

Microsoft Word and conversion to a pdf file is used for submission of clinical progress worksheets and other designated assignments.

**Technical Support:**

NIACC's Helpdesk can help with technical problems related to NIACC passwords, logging in to lab computers, MyNIACC, E-mail, Canvas (online course management system), NIACC wireless, WebAdvisor, lab computers, office computers for staff, software issues, and more. NIACC Technology Services does not repair nor support personal computers. For many problems you may get the fastest results if you call our toll-free number below (24 hours – seven days per week).

On campus: 641-422-4357      Toll free: 866-614-5020      helpdesk@niacc.edu

**Technology Support Access**

([www.niacc.edu/student-life/technology-services/help-desk/](http://www.niacc.edu/student-life/technology-services/help-desk/))

**College Policies:**

If you have questions regarding issues like grade appeals, grievance policies, and academic probation, refer to the NIACC Student Handbook, which can be accessed at Student Life <http://www.niacc.edu/student-life/>.

**NONDISCRIMINATION POLICY**

It is the policy of North Iowa Area Community College to not discriminate on the basis of race, color, national origin, sex (including pregnancy), disability, age, sexual orientation, gender identity, genetic information, creed, religion, actual or potential parental, family or marital status or veteran's status in its programs, activities or employment practices as required by the Iowa Code sections 216.6 and 216.9, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. § 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681 – 1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.).

Individuals having questions or complaints related to compliance with this policy should contact Shelly Schmit, EEO/AA Officer, 500 College Drive, Mason City, IA 50401 or via telephone at 641-422-4211. Inquiries may also be directed to the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 W. Madison, Suite 1475, Chicago, IL 60661, phone number 312/730-1560, fax 312/730-1576.

**DISABILITY SERVICES**

North Iowa Area Community College strives to provide an accessible environment for students, faculty, and staff. A student needing accommodations should register with NIACC Disability Services and speak to Lisa Vance, the Disability Services Counselor, in the Student Access Office, AB106. For additional information, contact us at 1-888-466-4222, Ext. 4413, and ask for a brochure regarding Disability Services or to request a meeting with the Disability Services Counselor. You may also contact Lisa Vance directly at 641-422-4296 or [vancelis@niacc.edu](mailto:vancelis@niacc.edu), or the [disabilities website](http://www.niacc.edu/student-life/disability-services/).  
([www.niacc.edu/student-life/disability-services/](http://www.niacc.edu/student-life/disability-services/))

If you have concerns regarding equal access to NIACC's services, programs, and activities you may contact NIACC Disability Services or learn more about filing a grievance at the [grievance-procedures website](http://www.niacc.edu/student-life/disability-services/policies-procedures/grievance-procedure/)

([www.niacc.edu/student-life/disability-services/policies-procedures/grievance-procedure/](http://www.niacc.edu/student-life/disability-services/policies-procedures/grievance-procedure/))

A Disability Services Student Handbook can be found on our website at [disability services student handbook](http://www.niacc.edu/student-life/disability-services/disability-services-student-handbook/) (full link below) or can be provided in hard copy (or an alternate format), upon request, and lists contact information for NIACC's ADA Coordinator and ADA Compliance Officer, along with other helpful information.

([www.niacc.edu/student-life/disability-services/disability-services-student-handbook/](http://www.niacc.edu/student-life/disability-services/disability-services-student-handbook/))

**INCLEMENT WEATHER:**

Here is the [inclement-weather information on the website](http://www.niacc.edu/about/campus-safety/niaccalerts/) (full link below). NIACCAlerts is a free service that alerts you immediately when a decision is made to close campus or delay classes due to weather conditions. This is your best and most accurate means of communication. Sign up here for [NIACC Alerts](http://www.niacc.edu/about/campus-safety/niaccalerts/).

(<http://www.niacc.edu/about/campus-safety/niaccalerts/>)

([www.niacc.edu/about/campus-safety/inclement-weather/](http://www.niacc.edu/about/campus-safety/inclement-weather/))

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
Upon completion of this unit, the student will be able to:				In the clinical area, with emphasis on assessment, the student will be able to:
<b><u>ORIENTATION TO THE CAREER OF NURSING/PROGRAM PHILOSOPHY/CONCEPTUAL FRAMEWORK</u></b>				
1. Discuss Student Handbook.	1. Program requirements	Student Handbook	Distribute and discuss	
2. Discuss philosophy and objectives of the NIACC Nursing program.	2. NIACC's ADN philosophy and objectives a. Philosophy b. Objectives			
3. Explain conceptual framework of NIACC's ADN program.	3. Conceptual framework a. Human Needs b. Life Span c. Psychosocial Development d. Nursing Roles e. Nursing Process f. Caring Concepts	Potter: Maslow's Hierarchy of Needs, pp. 43-44, 67; Erikson's Developmental Stages, pp. 132-133	Complete worksheet identifying historical figures in nursing.	
4. Discuss the role and functions of the nurse, historically and presently, as perceived by self and clients	4. Nursing roles and functions a. Current and historical roles 1) Provider of Care a) Policy and procedures b) Best Practice Standards/ Evidence Based Practice c) Patient Health and Safety Goals 2) Manager of Care 3) Member within the Discipline b. Functions 1) Dependent 2) Independent 3) Interdependent	Potter: Chapter 1 Potter: Chapter 4 and 5	Nursing History Assignment	
5. Discuss accountability and how it relates to the nursing roles.	5. Accountability in Nursing Roles			
6. Discuss societal and historical influences which impact the role of the nurse.	6. Trends a. History of the profession of nursing. b. Current trends c. Health promotion d. Health Care Reform e. Evidence-based Practice/Best Practices	Potter: Chapter 2		
7. Discuss the health care team and how it functions.	7. Health Care Team a. Health care occupations 1) Levels of nursing - differentiations of practice 2) Health care team roles		Activity identifying health care team roles.	

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>ASSESSMENT – PART I</u></b>				
1. Discuss the nursing process and critical thinking as a method to meet client needs.	1. Nursing Process steps a. Assessment b. Nursing diagnosis c. Planning d. Implementation e. Evaluation f. Critical Thinking	ATI-Fund: Chs. 7, 8, 26-27  Potter: Chs. 15, 16, 19, 20 (review briefly)  Ackley - Section 1  Perry: Ch. 1	Computer Lab: Nurse Logic	
2. Discuss the value of using critical thinking.	2. Value of using critical thinking a. Clinical decision making b. Best practice standards c. Evidenced based practice	Potter: Ch. 15	Case Studies and Concept Maps	Well Older Adult Projects
3. Describe purpose and usual format for collection of data by physical examination.	3. Purpose and format of data collection a. Communication and interview techniques b. Environmental preparation			
4. Classify data which is collected through general observation of a client's health status.	4. Classification a. Objective - head-to-toe assessment b. Subjective - Interaction		Demonstrate proper handwashing techniques in the lab	
5. Describe the common methods for measuring temperature across the life span considering evidenced-based practice.	5. Methodology and recording of temperature measurements a. Oral b. Rectal c. Axillary d. Tympanic e. Temporal artery f. Invasive	Potter: Ch. 30  Perry: Ch. 6	Obtain oral temperatures from several classmates; convert them from C. to F. or vice versa	Obtain vital signs for the pediatric, adult, and older adult during clinical simulations.



OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
6. Identify normal temperature ranges through the life span and the factors affecting body temperature.	6. Factors affecting body temperature a. Age b. Activity c. Illness d. Environment e. Stress	"Malignant Hyperthermia: Turn Down the Heat", <u>Nursing 2012</u> , November 2012, pp. 38-44	A.V.: "Temperature, Pulse, and Respirations"	
B				
7. Differentiate between medications and interventions commonly used for fever and thermoregulation.	7. Nursing interventions a. Antipyretics b. Nonpharmacological therapy	ATI-Pharm: Module 11 Aspirin, ibuprofen, acetaminophen	Computer Lab: Textbook resources	

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
8. Describe the physiology and regulation of the pulse.	8. Pulse physiology a. Blood volume b. Heart rate c. Cardiac output		In the laboratory on several students, count and record pulses from various pulse sites.	
9. Describe the common techniques for measuring and recording pulse.	9. Measurements of pulse a. Peripheral pulses b. Apical pulses			Demonstrate ability to measure and record various pulses, including radial, apical, carotid, popliteal, pedal on clients across the life span.
10. Identify normal pulse rates through the life span.	10. Pulse rate a. Normal ranges for children and adults b. Pulse rhythm c. Pulse volume d. Sites for palpation			
11. Identify sites for pulse palpation and related nursing interventions.	11. Pulse sites a. Assessment techniques b. CPR considerations	Pulse sites: a. Assessment technics b. CPR considerations		
12. Describe the common techniques for measuring and recording respirations.	12. Techniques of measurement and recording respirations and auscultating chest		On several classmates, count and record respirations and recognize sounds of air exchange.	Demonstrate the ability to count respiration and recognize air exchange on clients across the life span.
13. Identify normal respiratory ranges through the life span.	13. Normal ranges (infants \ adults)			
14. Recall the physiological basis of blood pressure.	14. Arterial blood pressure physiology a. Factors responsible for maintenance b. Significance of systolic and diastolic	Canvas Website Link: American Heart Association Recommendations for Blood Pressure	Obtain and record blood pressures on several classmates.  A.V.: "Blood Pressure"	Demonstrate ability to obtain arterial blood pressure on clients across the life span.
15. Describe the preferred technique for measurement and recording blood pressure.	15. Measurement of blood pressure a. Measurement b. Recording of blood pressure c. Common errors			
16. Identify normal blood pressure.	16. Normal blood pressure ranges for infants, children, and adults			

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>LEGAL, ETHICAL, AND PROFESSIONAL STANDARDS</u></b>				
1. Define the legal practice standards of nursing.	1. Legal Concepts a. Nurse Practice Act b. Legal Terms	Potter: Chapter 23		
2. Discuss the Code of Ethics for Nurses as stated by the American Nurses Association.	2. Ethical Considerations a. Code of Ethics b. Respect Dignity	Potter: Chapter 22  Online Reserve: "Towards Civility", <u>The American Nurse</u> , February 2014 Online Cover Story	Discussion of ANA Code for discussion and interpretation  AV: "Real Nurses"	
3. Define and discuss professionalism and its relevance to nursing.	3. Professionalism a. Accountability b. Traits of health care professionals c. Personal image d. Customer service	"Respecting Professional Boundaries", <u>Nursing 2012</u> , 42(9), pp. 40-47		
4. Analyze what is meant by boundaries and boundary blurring.	4. Boundary issues a. Professional behaviors b. Caring behaviors c. Boundary crossings		NCSBN website resources: Professional Boundaries: Social Media Guidelines, Substance Abuse Disorder in Nursing  Video and group discussion related to boundary issues	
5. Differentiate between caring and curing behaviors.	5. Characteristics related to: a. Caring b. Curing	Potter: Ch. 7		
6. Describe nursing behaviors inherent in demonstrated caring.	6. Caring behaviors	ATI: Nurse's Touch		
7. Discuss Jean Watson's carative factors as related to the role of the nurse.	7. Carative factors and the role of the nurse			

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>WELLNESS/ILLNESS NEEDS</u></b>				
1. Define health, illness, and wellness.	1. Definition of health and illness	Potter: Chapter 6		
2. Define health maintenance and personal health promotion and how these relate to wellness issues.	2. Definition of health maintenance a. Health promotion and illness prevention b. Restoration of health c. Coping with impaired function d. Life style patterns e. Environment f. Immunization g. Health screening	Ackley: pp. 443-446, Ineffective Health Management	AV: "Promoting Health Behavior" (Video on Demand)	
3. Define the nurse's role in community-based nursing.	3. Nurse's roles a. Caregiver b. Change Agent c. Patient Advocate d. Collaborator e. Counselor f. Educator g. Epidemiologist	Potter: Chapter 3		
4. Identify common health problems across the life span.	4. Common health problems	<a href="http://www.healthypeople.gov">www.healthypeople.gov</a> (Healthy People 2020)		
5. Discuss factors that influence people's perceptions of health and illness.	5. Factors that influence people's perceptions of health and illness a. Social-economic b. Cultural c. Educational d. Past experience			
6. Identify health improvement goals and objectives in the U.S. healthcare system.	6. Healthy People 2020 Goals a. Quality lives b. Health equity c. Health promoting environment d. Healthy behaviors		Discuss Blue Zone project and how it affects community health.	
7. Recognize the stages of health behavior change.	7. Stages of health behavior change a. Pre-contemplation b. Contemplation c. Preparation d. Action e. Maintenance stage			

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OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
8. Discuss illness and its effects on clients and families.	8. Ways in which clients and families are affected by illness of one its members			
9. Describe various types of community involvement in health promotion and illness prevention.	9. Community involvement a. Health fairs b. Health screenings c. Media information dissemination d. DARE programs e. Blue Zones			

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OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>ASSESSMENT – PART II</u></b>				
1. List and describe the methods used to collect data on the client's physical health status.	1. Methods a. Inspection b. Palpation c. Percussion d. Auscultation	Potter: Ch. 31  Perry: Ch. 7		
2. Identify anatomical areas and major assessments included in a physical assessment.	2. Areas included: a. Skin, hair, and nails b. Head and neck c. Thorax and lungs d. Chest, heart, breasts e. Abdomen f. Genitalia g. Extremities	Online Reserve: "Listening to Bowel Sounds: An Evidenced-Based Practice Project", <u>AJN</u> , December 2005, pp. 40-49	A.V.: "Physical Assessment" and "Physical Assessment of the Pediatric Client"  Heart and lung sound simulations	Perform shift assessments for pediatric, adult, and older adult during clinical simulations.
3. Differentiate between normal and abnormal assessment findings for clients through the life span.	3. Normal and abnormal assessment findings: a. Skin, hair, and nails b. Head and neck c. Thorax and lungs d. Chest, heart, breasts e. Abdomen f. Genitalia g. Extremities	ATI-Fund: Chs. 28-31	Practice shift assessment with Nursing IV students	
4. Utilize assessment tools for client safety and comfort needs.	4. Assessment Tools a. Pain assessment b. Risk for pressure ulcers c. Fall risk d. Mental/neurological status		Case Study for Braden Scale, Hartford Institute for Geriatric Resources: Try This Series	Braden and BradenQ Morse Fall Risk MiniMental State Exam Neurological Check
5. Discuss nursing responsibilities when assisting with a physical examination.	5. Nursing responsibilities a. Preparation of the client b. Preparation of equipment c. Assisting as needed d. Positions used for physical exams e. Height and weight			Assist examiner with physical examination across the life span.
6. Discuss the nurse's role in diagnostic and laboratory examination.	6. Diagnostic and laboratory examination a. Routine laboratory tests usually performed b. Nursing responsibility in collecting specimens c. Documentation d. Assisting with other diagnostic tests e. Use of procedure and policy manuals	Perry: Chs. 8-9 (read briefly)  Ackley: pp. 272-275	Simulation of specimen collection  Case studies on diagnostic testing and related nursing intervention	Demonstrate the ability to collect routine specimens according to agency policies and chart appropriately.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>COMMUNICATION</u></b>				
1. Define communication and describe types of communication.	1. Communication a. Definition b. Types-Intrapersonal, Interpersonal, Nonverbal	Potter: Chapter 24 ATI: Nurse's Touch	Self assessment of personality	
2. Discuss the role of self-analysis as related to effective communication.	2. Role of self in the communication process	Review Potter: pp. 213-218		
3. Identify what is not therapeutic communication.	3. Not therapeutic communication a. Failure to listen b. Conflicting verbal/nonverbal c. Judgmental attitude d. Misunderstanding of language e. False reassurance f. Giving advice g. Inability to receive information			
4. Identify common therapeutic communication techniques.	4. Therapeutic communication techniques a. Silence b. Active listening c. Open-ended questions d. Clarifying techniques e. Summarizing	ATI: Fundamentals for Nursing, Ed. 8, Ch. 32	"Boundaries" Video (9 minutes)	
5. The purpose of therapeutic communication	5. Client centered/goal directed			
6. Distinguish between social and therapeutic communication.	6. Differences inherent in social and therapeutic communication			
7. Discuss the therapeutic communication goals.	7. Expected outcomes of therapeutic communication			
8. Discuss non-verbal variables affecting communication.	8. Communication variables a. Posture b. Vocal Cues c. Physical Appearance d. Touch e. Facial expressions f. Eye contact g. Gestures h. Silence i. Space		ATI: "Professional Communication", "Cultural Factors That Affect Communication", "Communication Style", (1:33 minutes)	

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
9. Identify the phases of the Therapeutic Relationship.	9. Phases of the Therapeutic Relationship	Potter: Box 24-4, p. 322	"Helping Relationship" Video (19 minutes)	
10. Discuss basic therapeutic techniques of communication.	10. Common therapeutic techniques of communication a. Focusing and following b. Open/Closed inquiries c. Minimal encouragement d. Reflecting feeling e. Reflecting content	ATI: Nurse's Touch In class simulation	AV: "Blocks to Therapeutic Communication" (17 minutes)	
11. Identify appropriate communication techniques for clients with special needs.	11. Special needs clients a. Children b. Hearing impaired c. Visually impaired d. Elderly e. Language barrier		Protection: Privacy, Safety and Standards-Ethical Issues in Nursing Video (20 minutes)	
12. Identify and demonstrate methods of documentation among health practitioners.	12. Methods of <b>communication</b> among health practitioners a. Written record 1) Purposes served by the client's written record 2) Rules to follow when charting on a legal document 3) Nursing terminology used in charting 4) Formats for documentation 5) Information Security b. Nursing communication 1) Client care plan a) Definition of b) Components of c) Relationship to nursing process 2) Electronic Health Record 3) Communication with nursing staff and interdisciplinary team 4) Situation, Background, Assessment, Recommendation (SBAR) c. Approved abbreviations	Potter: Ch. 26 ATI-Fund: Ch. 5 Perry: Chs. 2 and 3	Handout: Review from summer Terminology. List of abbreviations, prefixes and suffixes  Analyze examples of nurse-client interactions for communication techniques  Analyze examples of documentation  Handout: Abbreviations  AV: "HIPAA for Healthcare Workers" (23 minutes)	Locate and review agency source for accepted abbreviations and terminology  Appropriately chart on selected clients  Analyze a chart in comparison to charting guidelines discussed in class  Report significant observations about the client to designated staff  Electronic Health Record  Report using SBAR
13. Discuss the ethical issue of confidentiality and how it relates to the Health Insurance Portability and Accountability Act.	13. Confidentiality, Social Media, and HIPAA	Review Potter: Chapter 22, pp. 293-294; Chapter 23: p. 306	AV: Confidentiality: Legal and Ethical Concerns in Health Care (24 minutes)	



OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>HYGIENIC NEEDS</u></b>				
1. Recognize general principles which guide nursing action in caring for skin and mucous membranes.	1. Principles of care of skin and mucous membranes	Potter: Ch. 40 ATI-Fund: Ch. 37	A.V.: "Bed Bath"	Make beds and perform hygienic activities related to client needs.
2. Define comfort and hygiene.	2. Comfort and hygiene	O'Lynn, C.; Kravtscheid, L.: "How Should I Touch You? A Qualitative Study of Intimate Touch in Nursing Care", AmJNurs. 2011; 111(3):24-31	<b>LAB - A.V.:</b> "Bedmaking"	
3. Assess cleanliness needs.	3. Cleanliness and comfort needs a. Personal variations in hygienic practice b. Assessment of skin 1) Color/temp/moisture 2) Turgor 3) Edema c. Relationship of the bath to head-to-toe assessment d. Environmental comfort factors	Ackley: pp. 689-693, 747-752		
4. Plan care to meet cleanliness and comfort needs.	4. Plan for hygiene care and comfort needs a. Nurse's personal hygiene and comfort b. Hospital routines for client hygiene and comfort c. Personal care	Perry: Ch. 10, pp. 243-267  "Beware! Gum Disease", <u>Nursing Made Incredibly Easy</u> , March/April 2012, pp. 9-12	Practice back rub on classmate	Demonstrate ability to do a complete bath on a client at any stage of the life cycle.  Demonstrate ability to assist with various types of baths - including partial, shower, sponge, sitz, tub and personal care on clients at various stages in the life cycle.
5. Relate hygiene and comfort measures to nursing outcomes of emotional well being.	5. Hygiene and comfort measures and the relationship to emotional well-being			

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>ELIMINATION NEEDS</u></b>				
1. Discuss general principles relating to urinary and intestinal elimination.	1. Principles of elimination	Review A & P of kidneys and intestines  Potter: Ch. 46		
2. Discuss assessment of urinary elimination.	2. Urinary elimination a. Normal urination patterns b. Characteristics of urine c. Deviations from normal d. Diagnostic tests e. Influencing factors		A.V.: "Urethral Catheterization" - <b>LAB</b>	
3. Plan interventions to meet urinary elimination needs across the life span.	3. Interventions a. Measures to assist client to void b. Maintaining fluids c. Bladder training d. Catheterization	Ackley: pp. 902-911		Perform bladder scanning on clients when available
4. Identify medications used for urinary tract problems and nursing implications related to their administration.	4. Urinary pharmacologic agents a. Antiseptics/Anti-infectives b. Antispasmodics c. Cholinergics-stimulents d. Anticholinergics e. Analgesics	ATI-Pharm: Module 8: Urinary Tract Drugs  Potter: Ch. 47		Catheterize selected clients.
5. Discuss assessment of intestinal elimination.	5. Intestinal elimination a. Normal defecation patterns b. Appearance of stool c. Deviations from normal d. Diagnostic tests e. Influencing factors			
6. Plan interventions to meet bowel elimination problems across the life span.	6. Interventions a. Diet/fluids b. Ambulation c. Cathartics d. Enemas/suppositories e. Colon tubes	ATI-Pharm: Module 7: Drug therapy for constipation and diarrhea  Ackley: pp. 251-267, 332-337  ATI-Fund: Chs. 43, 44	A.V.: "Cleansing Enemas" - <b>LAB</b>  Simulation of enema administration	Provide interventions to meet intestinal elimination problems across the life span.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>NEEDS RELATED TO PERSONAL AND ENVIRONMENTAL SAFETY</u></b>				
1. Discuss standard precautions and isolation techniques as related to personal safety.	1. Biological safety - Infection control <ol style="list-style-type: none"> <li>a. Terminology</li> <li>b. Disease process               <ol style="list-style-type: none"> <li>1) Incubation</li> <li>2) Prodromal</li> <li>3) Period of illness</li> <li>4) Convalescent</li> </ol> </li> <li>c. Chain of infection               <ol style="list-style-type: none"> <li>1) Causative agent</li> <li>2) Reservoir</li> <li>3) Portal of exit</li> <li>4) Mode of transmission</li> <li>5) Portal of entry</li> <li>6) Susceptible host</li> </ol> </li> <li>d. Implementation to break chain of infection               <ol style="list-style-type: none"> <li>1) Assessment</li> <li>2) Control or eliminate infectious agents</li> <li>3) Control or eliminate reservoirs</li> <li>4) Control portals of exit</li> <li>5) Control transmission - Standard Precautions</li> <li>6) Control portals of entry</li> <li>7) Protect the susceptible host</li> </ol> </li> <li>e. Standard precautions</li> <li>f. Isolation techniques</li> <li>g. Exposure followup protocol</li> </ol>	Potter: Ch. 29  ATI-Fund: Chs. 10-15  Online Reserve: "A Nurse's Battle with C. Diff", <u>RN</u> , Vol. 70, No. 3, pp. 39-43  Canvas Website Link: CDC Guidelines for hand hygiene and isolation  Online Reserve: "Evaluation of Hand Hygiene", <u>AJN</u> , 113(3), pp. 36-43  Perry: Ch. 5	Guest speaker (Nurse epidemiologist): Standard Precautions  Simulation of isolation precautions.  <a href="http://www.qsen.org">www.qsen.org</a> <a href="http://www.jointcommission.org">www.jointcommission.org</a> (click on Standards – "Hospital")	Demonstrate and apply standard precautions in the lab/ clinical setting.  Observe, identify, and implement infection control and isolation procedures.  Review and discuss NIACC's Bloodborne Pathogens Exposure Control Plan.
2. Recognize environmental areas to assess for potential safety hazards and plan specific interventions to promote environmental safety throughout the life span.	2. Health Protection <ol style="list-style-type: none"> <li>a. Best Practices               <ol style="list-style-type: none"> <li>1) National Patient Safety Goals – TJC                   <ol style="list-style-type: none"> <li>a) Sentinel events</li> <li>b) Safety goals</li> <li>c) Safe practices</li> </ol> </li> <li>2) Quality and Safety in Nursing Education (QSEN)                   <ol style="list-style-type: none"> <li>a) Patient-centered care</li> <li>b) Teamwork and collaboration</li> <li>c) Evidenced Based Practice</li> <li>d) Quality Improvement</li> <li>e) Risk Management</li> <li>f) Informatics</li> </ol> </li> <li>3) TeamSTEPPS- Agency for HealthCare Research and Quality</li> </ol> </li> </ol>	Potter: Ch. 27  Perry: Ch. 4  JC National Safety Goals and QSEN website on Canvas	Review  National Patient Safety Goals  Case Studies on sentinel events	Assess clinical and well elderly home environment and implement measures to promote safety.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<ul style="list-style-type: none"> <li>b. Fire safety               <ul style="list-style-type: none"> <li>1) Home</li> <li>2) Institutional</li> </ul> </li> <li>c. Handling hazardous materials in the workplace               <ul style="list-style-type: none"> <li>1) Hazard Communication Standard - SDS</li> <li>2) Components of the hazard communication program</li> <li>3) Training requirements</li> <li>4) Hazard information</li> <li>5) Hazard protection</li> </ul> </li> <li>d. Promoting safety at home               <ul style="list-style-type: none"> <li>1) Radon</li> <li>2) Carbon monoxide</li> <li>3) Lead</li> </ul> </li> <li>e. Fall Risk               <ul style="list-style-type: none"> <li>1) Risk assessment</li> <li>2) Planning</li> <li>3) Implementation</li> <li>4) Evaluation</li> </ul> </li> <li>f. Developmental or Age Specific</li> </ul>	<ul style="list-style-type: none"> <li>3. Immobility               <ul style="list-style-type: none"> <li>a. Nursing diagnosis, etiology, and defining characteristics</li> <li>b. Effects on body systems                   <ul style="list-style-type: none"> <li>1) Cardiovascular                       <ul style="list-style-type: none"> <li>a) Orthostatic hypotension</li> <li>b) Venous stasis, thrombus formation, and edema</li> <li>c) Cardiovascular deconditioning</li> </ul> </li> <li>2) Respiratory                       <ul style="list-style-type: none"> <li>a) Respiratory infections</li> <li>b) Pulmonary embolus</li> <li>c) Pneumonia</li> <li>d) Atelectasis</li> </ul> </li> <li>3) Musculoskeletal                       <ul style="list-style-type: none"> <li>a) Muscle atrophy</li> <li>b) Contractures</li> <li>c) Disuse osteoporosis</li> </ul> </li> <li>4) Integumentary                       <ul style="list-style-type: none"> <li>a) Ischemia</li> <li>b) Skin breakdown</li> <li>c) Infection</li> </ul> </li> <li>5) Elimination                       <ul style="list-style-type: none"> <li>a) Gastrointestinal</li> <li>b) Genitourinary</li> </ul> </li> </ul> </li> </ul> </li> </ul>	<p>Ackley: Review the Nursing Diagnosis: Risk for Fall and Risk for Injury, pp. 355-361, 534-539</p> <p>Online Reserve: "Preventing Falls, <a href="#">AJN</a>, March 2011</p> <p>Potter: Ch. 28</p> <p>Ackley: Review the Nursing Diagnosis: Impaired Physical Mobility, pp. 588-595, and Disuse Syndrome, pp. 338-342</p> <p>ATI-Fund: Ch. 40</p> <p>"Caring for adults with impaired physical mobility", <a href="#">Nursing 2016</a>, 46(12), pp. 35-41.</p>	<p>Fall Risk Case Studies</p> <p>A.V.: "Immobility"</p> <p>Critical thinking exercises on immobility.</p>	<p>Review and identify locations of Hazard Communication Standards (MSDS) in each clinical facility.</p> <p>Home Safety Assessment</p> <p>Review various fall risk forms and discuss and implement interventions which reduce fall risks.</p> <p>Identify clients at high risk for immobility related complications and implement appropriate interventions to reduce this risk.</p>

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
	<ul style="list-style-type: none"> <li>6) Psychosocial and developmental</li> <li>c. Focused assessment</li> <li>d. Nursing interventions related to               <ul style="list-style-type: none"> <li>1) Cardiovascular</li> <li>2) Respiratory</li> <li>3) Musculoskeletal                   <ul style="list-style-type: none"> <li>a) transfers/assistive devices</li> <li>b) positioning</li> <li>c) range of motion</li> </ul> </li> <li>4) Integumentary</li> <li>5) Elimination                   <ul style="list-style-type: none"> <li>a) GI</li> <li>b) GU</li> </ul> </li> <li>6) Psychosocial and developmental</li> </ul> </li> <li>e. Expected outcomes</li> </ul>			
4. Discuss concerns and high-risk groups in relation to latex allergies.	4. Latex allergy <ul style="list-style-type: none"> <li>a. Concerns</li> <li>b. Populations at risk</li> <li>c. Types of reactions and management</li> <li>d. Routes of exposure</li> <li>e. Ensuring a safe environment</li> </ul>	Potter: pp. 524, 534, 1283 Ackley pp. 561-568	Review latex allergy screening tools	Assess client's latex risk and implement strategies in the management of latex allergies in client with latex sensitivity.
5. Identify strategies for risk reduction for latex allergies.	5. Management of latex allergies for staff and clients			

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>NUTRITIONAL NEEDS</u></b>				
1. Describe the basic therapeutic diets and list foods which might be allowed on each.	1. Basic therapeutic diets: Indications and nursing considerations a. NPO b. Clear liquid c. Full liquid d. Pureed e. Bland f. Mechanical soft g. Soft/Low Residue h. General i. Dysphagia j. Low Sodium	Potter: Ch. 45		While passing trays, assess ordered diet in relationship to client's diagnosis.
2. Discuss the responsibilities of the nurse in promoting nutrition across the life span.	2. Promoting nutrition a. Dietary requirements b. Monitoring intake c. Safety measures		Case Studies	Assist with nutrition across the life cycle.
3. Assess clients for various factors affecting dietary intake.	3. Factors affecting intake a. Age b. Psychosocial factors c. Physical conditions d. Life style e. Economics f. Ethical considerations g. Dietary cultural considerations			
4. Describe the process of assessing a client's nutritional status.	4. Assessing nutritional status a. Nutritional history b. Physical exam c. Diagnostic and laboratory data			
5. Formulate appropriate nursing diagnoses for clients with nutritional alterations.	5. Nursing diagnoses a. Readiness for enhanced nutrition b. Imbalanced nutrition 1) Less than body requirements 2) More than body requirements 3) Risk for more than body requirements 4) Others	Ackley: pp. 609-625	Case Studies with dietary considerations.	Interpret subjective and objective data and formulate appropriate nutritional nursing diagnoses.
6. Utilize measures to assist clients to prevent or correct fluid imbalance.	6. Guidelines for increasing or decreasing fluid intake a. Measures to increase fluid intake b. Measures to decrease or restrict fluid intake	Potter: Ch. 42, p. 950		Assess and record intake and output and implement care to maintain proper oral fluid balance.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
7. Discuss anorexia, nausea, and vomiting and interventions to assist people who have these problems.	7. Care of clients with anorexia, nausea, and vomiting a. Anorexia (definition, possible causes, and interventions to correct) b. Nausea and vomiting 1) Definition of terms 2) Causes 3) Interventions 4) Safety and comfort requirements for the client who is vomiting 5) Antiemetics and nursing implications	ATI-Pharm: Module 7: Drug therapy for nausea  Ackley: pp. 604-608, Nausea  Online Reserve: "Preventing Nausea", <u>Nursing 2013</u> , 43(12), pp. 49-50		Assist with care of clients with anorexia, nausea, and vomiting.
8. Give examples of clinical situations where tube feeding of a client is advisable.	8. Indications and types of feeding tubes	Perry: Ch. 12	A.V.: "Mosby's Enteral Nutrition and Tube Feedings"	
9. Contrast intermittent and continuous feedings.	9. Methods of administration a. Bolus/Intermittent/Syringe b. Continuous c. Cyclical	ATI-Fund: Chs. 39, 52, 54		
10. Discuss the various types of formulas available for tube feedings.	10. Types of formulas a. General purpose b. Speciality c. Isotonic d. Hypertonic e. How to choose		Simulation of NG placement and tube feeding administration.	
11. Discuss procedure for initiating tube feedings.	11. Administering tube feedings a. Steps and general principles b. Precautions			Implement proper procedure for tube feeding for individual clients when opportunity arises.
12. Identify interventions for patients receiving tube feedings and NG suction	12. Nursing observations a. Dumping syndrome b. Intolerance c. Daily weight d. V.S. e. I & O f. Electrolytes, glucose, nitrogen balance g. Abdominal girth h. Meds i. Oral hygiene j. Tolerance	"Best Practices for Nutritional Therapy" Nursing 2015, August 2015, pp. 36-43.3		Assess clients receiving tube feedings for potential complications

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
13. Cite measures to prevent aspiration of stomach contents.	13. Aspiration during tube feedings a. Prevention b. Causes			
14. Discuss causes of diarrhea during tube feedings and common preventive measures.	14. Diarrhea a. Causes b. Preventative measures			
15. Discuss causes and preventive measures for clogging of the tube.	15. Tube clogging a. Causes b. Preventative measures			
16. Describe the pathophysiology related to aspiration.	16. Pathophysiology of aspiration	Review A & P of upper GI tract	Guest speaker on dysphagia and aspiration - view swallowing study videos	
17. Predict some common risk situations or disorders in which clients are in danger of aspiration.	17. Individuals prone to aspiration			
18. Assess clients for various stages of aspiration during oral feeding of a client.	18. Assessment in aspiration a. Immediate data b. Later data	"Managing Dysphagia Through Diet Modifications", <u>AJN</u> , Nov. 2010, pp. 26-35		
19. Plan nursing interventions to prevent aspiration during oral feeding of a client.	19. Interventions	Ackley: pp. 147-152, 870-875		Evaluate assigned client for return of gag reflex post-anesthesia.



OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>NEEDS OF THE GERONTOLOGICAL CLIENT</u></b>				
1. Discuss factors in the aging process that influence nursing care.	1. Factors in aging process that influence nursing care a. Demographic trends b. Erickson's stages c. Developmental tasks	Potter: Ch. 14 ATI-Fund: Ch. 25		Assess assigned clients and identify aging process factors which influence nursing care.
2. Evaluate the multiple physical changes associated with aging and the impact these may have on an older adult's ability to function and to perform activities of daily living.	2. Physiological changes a. Neurological changes b. Sensory and perceptual changes c. Cardiovascular changes d. Respiratory changes e. Genitourinary changes f. Endocrine changes g. Reproductive changes h. Musculoskeletal changes i. Integumentary changes j. Mental status changes	"Assessing Older Adults", <u>Nursing 2012</u> , 40(3), pp. 34-42		
3. List behaviors common to loneliness.	3. Common behaviors in loneliness a. Definition b. Behaviors seen c. Risk factors	Ackley: Review the Nursing Diagnosis: Loneliness, pp. 572-575		
4. Discuss nursing interventions to assist in increasing socialization of the lonely client.	4. Nursing management a. Goals b. Intervention		A.V.: "Reminiscence Program"	Implement nursing care to increase socialization.
5. Discuss functions of agencies and organizations for the elderly.	5. Functions of agencies and organizations a. Federal b. State	"Reminiscence Therapy", <u>Nursing 2013</u> , 43(4), pp. 36-38	Online Resources	Identify agencies, facilities, organizations that could be utilized for assigned clients.
6. Recognize services available to older clients within your communities.	6. Services a. Residential care b. Nursing facilities, skilled care c. Assisted living d. Home care e. Respite care			
7. Identify health promotion and maintenance interventions for the older adult.	7. Health promotion and maintenance a. Nutrition b. Activity c. Health screenings d. Fall prevention e. Caregiver considerations		Hartford Institute for Geriatric Nursing	Well Older Adult Project  Blood Pressure and Health Screening Clinics

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>ADMINISTRATION OF PHARMACOLOGIC AGENTS</u></b>				
1. Discuss drug terminology and nomenclature.	1. Terminology and nomenclature	ATI-Pharm: Module 1 Potter: Ch. 32	"Do No Use" abbreviation list – look alike/sound alike drug list	
2. Identify sources of drugs and the drug approval process.	2. Drug approval process a. Legislation b. Nurse Practice Act c. Drug resources		Perry: Skills: 17.1, 17.2, 17.3, 17.4, 17.5, 17.6, 18.1, 18.2, 18.3	
3. List major drug classification and actions.	3. Classifications a. Major drug classification systems b. Herbal preparations	ATI-Fund: Chs. 46-51	Computer Lab: Medication Matching	
4. Discuss major factors that influence drug action.	4. Factors that influence drug action a. Age b. Bioavailability c. Pharmacokinetics d. Pharmacodynamic phases e. Pharmacogenomics f. Peak/Trough levels	Online Reserve: "Pharmacogenomics", <u>Nursing 2013</u> , pp. 44-48		
5. Identify role and responsibilities of nurse in drug administration.	5. Role and responsibilities of nurse in drug administration a. "Ten Rights" for safe administration b. Significance of nursing knowledge of drug action c. Evaluation of drug effects d. Legal aspects of drug administration e. Teaching	Canvas Website Link: JC National Safety Goals and Resources "Simple steps to reduce medication error"; Nursing 2016, pp 63-65.	A.V.: "Drug Action - Interaction Series"  Simulation of medication administration  Sentinel Events	Administer oral medications to assigned clients according to agency policy.
6. Demonstrate dosage computation for medication administration.	6. Dosage computation a. Metric and apothecary systems b. Conversion between metric and apothecary systems c. Mathematical calculations	ATI-Calc: selected activities to be assigned in class	Competency Test Dosage Calculations	Correctly calculate dosage in given situations.  Pediatric dosage calculations

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
7. Discuss and demonstrate medication administration for clients through the life span.	7. Medication administration a. Methods and procedures b. Utilization of the nursing process in medication administration per enteral, percutaneous and parenteral routes c. Pediatric techniques d. Injection Safety	Perry: Chs. 21, 22, 23, (pp. 597-624)  Online Reserve: "To Aspirate or Not: A Review of Evidence", <u>Nursing 2012</u> , March, pp. 20-25  "Drug Administration by Enteral Feeding", <u>Nursing 2013</u> , 43(12), pp. 34-35	A.V.: "Intradermal, Intramuscular and Subcutaneous Administration"  AV: "Pediatric Medication Administration"	Observe pediatric medication administration
8. Discuss teaching aspects of medication administration.	8. Teaching aspects a. Techniques of self administration b. Client instruction on drug action		Practice site identification and injections with simulation.	Administer injections to assigned clients according to agency policy.
9. Define medication-related problems and related nursing responsibilities for the older client.	9. Geriatric Pharmacology a. Pharmacokinetics b. Pharmacodynamics and aging c. Polypharmacy d. Beers 2012 Criteria/STOPSTART e. Compliance	"Reducing the Use of Potentially Inappropriate Medications in Older Adults", <u>AJN</u> , January 2011, pp. 47-52	Video: "Medication Challenges in the Elderly"	
<b><u>IMMUNIZATION NEEDS</u></b>				
1. Identify practices for the management of communicable diseases through vaccination opportunities.	1. Immunization a. Communicable disease and development of immunity b. Resources for the latest recommended immunization schedules across the life span c. Communication techniques to help gather essential information regarding patients' immunization status and teach the importance of vaccinations	ATI-Pharm: Module 10: Drug therapy to prevent disease  Review Canvas online resources and practice test	Student presentation s of clinical situations with immunization administration	Review a client's immunization status and provide appropriate teaching for the Well Older Adult Project
2. Describe safe administration techniques when administering vaccinations.	2. CDC guidelines for immunization (Pink Book)	Canvas Website Link CDC Immunization Guidelines and Injection Safety		

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>OXYGENATION NEEDS</u></b>				
1. Review physiological mechanisms involved for adequate respiration.	1. Requirements for adequate respiration a. Anatomy and physiology review b. Terminology c. Four mechanisms of respiratory process 1) Ventilation 2) Diffusion 3) Transportation 4) Regulatory processes of breathing d. Factors affecting respiration 1) Lifestyle 2) Environmental 3) Developmental 4) Physiological	Potter: Ch. 41  Review A & P related to respiration  Review assessment criteria for respiratory and cardiac arrest.  Review ABC's of resuscitation procedures for CPR.  ATI-Fund: Ch. 53		Review policy and locate equipment utilized in CPR in clinical facilities.
2. Describe methods and criteria for respiratory assessment.	2. Respiratory assessment a. HPI b. Past med/surg history c. Family history d. Social/personal history e. Meds f. Physical exam g. Diagnostic studies			Identify and interpret diagnostic tests in client chart indicating assessment of respiratory status.  Assess adequacy of assigned client's respiration.
3. List three important nursing diagnoses related to oxygenation.	3. Nursing diagnoses	Ackley: See diagnoses listed under "Dyspnea", p. 50		
4. Plan nursing interventions to promote adequate ventilation.	4. Nursing interventions to promote adequate ventilation a. Independent intervention b. Dependent or collaborative interventions	Perry: Ch. 14	A.V.: "O <sub>2</sub> Administration"	Utilize and teach coughing and deep breathing techniques on client.  On selected clients, observe IPPB treatments and assist individuals with spirometry.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
5. Identify pharmacological agents utilized to promote adequate respiratory functioning.	5. Pharmacologic agents a. Bronchodilators b. Mucokinetics c. Corticosteroids d. Antitussives e. Antibiotics f. Vaccines g. Antihistamines h. Vasoconstrictors	ATI-Pharm: Module 4		
6. Compare advantages, disadvantages and pertinent nursing interventions related to the safe use of various methods of supplemental oxygen administration.	6. Supplemental oxygen administering a. Safety factors b. Nasal cannula c. Simple face mask d. Partial rebreather mask e. Non-rebreather mask f. High-flow g. Venturi mask h. Face tent and aerosol mask i. Tracheostomy collar j. O <sub>2</sub> tent k. Portable O <sub>2</sub>		View various types of oxygen administration equipment.	Identify safety measures utilized for a client receiving O <sub>2</sub> therapy.
7. List five positive outcomes achieved when adequate oxygenation is maintained.	7. Outcomes of adequate oxygenation			
8. Assess, plan, and evaluate nursing care related to select nursing diagnoses involving respiratory problems.	8. Specific respiratory problems a. Increased respiratory secretions b. Ineffective ventilation c. Respiratory distress d. Acute airway obstruction e. Respiratory arrest	"Listen Closely to Detect Healthcare-Associated Pneumonia" <u>Nursing</u> <u>2011</u> , July 2011, pp. 59-62	Critical Thinking Exercise	Assist with care of clients requiring O <sub>2</sub> therapy across the life span.  Assess for anxiety in clients receiving O <sub>2</sub> therapy and implement care to reduce apprehension.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>NEEDS OF THE SURGICAL CLIENT</u></b>				
1. Define perioperative care and the role of the nurse in perioperative nursing.	1. Perioperative nursing and roles of nurse a. Pre-operative b. Intra-operative c. Post-operative d. Perioperative	Potter: Ch. 50 Perry: Ch. 28		Prepare a client for surgery, completing the pre-op checklist, charting and giving any pre-op medication.
2. Discuss classifications of surgery and their definitions.	2. Classifications and definitions a. Urgency b. Seriousness c. Purpose d. Admission status			
3. Identify assessments related to pre-op care.	3. Pre-op assessments a. Preparing client for surgery b. Preadmission testing c. Nursing history 1) Medical history 2) Medications 3) Allergies and sensitivities 4) Age-related considerations 5) Social and cultural considerations 6) Spiritual considerations 7) Psychosocial status d. Physical assessment	"Guiding Your Patient Safely Through Surgery," <u>Nursing Made Incredibly Easy</u> , March/April 2012, pp. 5-8	Review sample pre-op checklists and nursing assessment flowsheets	
4. Describe various procedures and tests which are performed pre-operatively as a part of PAT (Pre-Admission Testing).	4. Pre-op procedures and tests and related nursing diagnoses a. UA and Culture b. CBC c. PT and PTT d. Chemistry profile e. ECG f. HIV g. Chest x-ray h. FBS i. Blood type and cross match j. Surgical consent form k. Preoperative checklist l. Safety precautions			
5. Identify components and benefits of pre-op teaching.	5. Pre-op teaching and benefits a. Coughing/Deep breathing b. Incentive spirometry c. Leg exercises d. Early ambulation			

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
6. Describe various physical preps performed preoperatively.	6. Physical preps a. Skin b. Nutritional c. GI d. Urinary			
7. Discuss the physical and emotional needs of the family during surgery.	7. Considerations for the operative client's family			Provide for the physical and emotional needs of the family.
8. Discuss medications most commonly used as pre-op medications.	8. Pre-op medications a. Hypnotics, sedatives, or antianxiety b. H2 antagonists (Tagamet) c. Antacids d. Analgesics e. Anticholinergic	ATI-Pharm: Module 2: Drug therapy for sleep disorders		
9. Identify types of anesthesia and related assessments.	9. Anesthesia and related assessments a. General b. Regional			
10. Discuss areas of assessment during the immediate post-op period through evaluation of the functioning of the body systems.	10. Post-op assessment a. Two phases b. Primary outcomes c. Physical assessment 1) Neurological 2) V.S. 3) Fluid and metabolic 4) Respiratory 5) Circulatory 6) Elimination and nutrition 7) Urinary elimination 8) Wound, dressing and drains 9) Rest and comfort 10) Safety and self concept		Review sample post-op nursing assessment flow sheets	Implement post-operative care for a client, accurately assessing and charting all essential factors and performing any necessary intervention.
11. Develop a care plan for common post-op problems including assessment factors and nursing intervention.	11. Post-op complications a. Nursing diagnoses	Ackley: See diagnoses listed under: • Surgery: Perioperative Care, Postoperative Care, Preoperative Care, Surgical Recovery Delayed, p. 112		Assess and implement care for the client with post-operative complication.
12. Discuss client expected outcomes as related to discharge teaching.	12. Discharge teaching a. Expected outcomes			Assist client's primary nurse with discharge planning.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>SKIN INTEGRITY AND WOUND CARE</u></b>				
1. Classify wounds according to onset, duration, etiology, and healing.	1. Wound Classification a. Onset and duration 1) Acute: Trauma, surgical 2) Chronic: Vascular b. Pressure Ulcers c. Health process 1) Primary 2) Secondary 3) Tertiary	Potter: Ch. 48  Refer to core lab schedule	Identify and describe various types of wounds  AV: "Wound Healing"	Accurately assess wounds and complete documentation.
2. Describe the normal processes of wound healing.	2. Wound repair phases a. Inflammatory b. Proliferative c. Remodeling			
3. Identify factors that impede or promote wound healing.	3. Factors influencing wound healing a. Nutrition b. Tissue perfusion c. Infection d. Age			
4. Complete an assessment of a client with impaired skin integrity.	4. Assessment a. Predictive measures: Braden b. Measurements and staging c. Wound appearance d. Wound drainage e. Wound culture f. Documentation		Wound care simulation	
5. Identify principles of wound management.	5. Wound Management a. Dressing types b. Changing dressings c. Packing a wound d. Securing dressings e. Removal of staples and sutures f. Drainage evaluation	Canvas Website Link Agency for Health Care Research and Quality (AHRQ) – Evidenced Based Skin Care Protocols and Wound Management	AV: "Sterile Dressing Changes"	



OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>COMFORT NEEDS - PAIN AND SLEEP</u></b>				
1. Define the concept of pain.	1. Pain a. Definitions - 5 <sup>th</sup> Vital Sign b. Barriers to pain control and current remedies c. Rights of client with pain	Potter: Ch. 44 Perry: Ch. 13	Assessment of personal assumptions about pain	
2. Describe classifications of pain.	2. Classifications of pain a. Acute b. Chronic c. Cancer d. Nociceptive e. Neuropathic f. Idiopathic g. Other pain descriptors	Ackley: See listed diagnoses and information under: • Pain: Acute • Pain: Chronic p. 86 ATI-Fund: Chs. 38, 41		
3. Assess the nature of pain as it relates to onset, intensity, and duration.	3. Assessment of pain a. Self report b. Trust c. Patient perception d. Patient response		Video: "McCaffery on Pain"  Evidenced based nursing protocols for pain management AHRQ – WHO's (World Health Organization) pain ladder	
4. Describe nonpharmacologic interventions in pain.	4. Nonpharmacologic interventions a. General pain management guidelines b. Cognitive - behavioral interventions c. Physical interventions 1) Exercise 2) Position change 3) Massage 4) Heat/cold 5) TENS 6) Acupuncture, accupressure			Utilize nursing process to care for clients in pain.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
5. Discuss the use of pharmacologic interventions in pain control.	5. Pharmacological interventions <ol style="list-style-type: none"> <li>a. Non-opioid               <ol style="list-style-type: none"> <li>1) NSAIDS</li> <li>2) Aceteminophin</li> </ol> </li> <li>b. Opioids</li> <li>c. Adjuvants</li> <li>d. Routes</li> <li>e. Dosing</li> <li>f. Side effects and adverse reactions</li> <li>g. General guidelines</li> <li>h. Complementary therapies</li> <li>i. Special populations</li> </ol>	ATI-Pharm: Module 11		Identify and assist with measures to relieve pain.
6. Discuss developmental differences in pain behavior and assessment strategies in determining pain levels in children.	6. Methods of assessing and managing pain in children		A.V.: "Assessing Pediatric Pain"	Utilize various pain assessment scales in assessment of pain in children.  Apply information learned to clinical setting.
7. Describe sleep and rest characteristics.	7. Sleep and rest characteristics <ol style="list-style-type: none"> <li>a. Terminology relating to rest and sleep</li> <li>b. Circadian rhythms</li> <li>c. Stages of sleep states</li> <li>d. General principles relating to sleep</li> </ol>	Potter: Ch. 43		
8. Recognize factors that alter sleep and rest patterns.	8. Alterations in sleep patterns <ol style="list-style-type: none"> <li>a. Primary</li> <li>b. Secondary</li> <li>c. Factors that alter sleep and rest               <ol style="list-style-type: none"> <li>1) Degree of comfort</li> <li>2) Anxiety</li> <li>3) Illness</li> <li>4) Drugs and other substances</li> <li>5) Environment</li> <li>6) Lifestyle</li> <li>7) Diet</li> <li>8) Cultural norms</li> <li>9) Life span considerations</li> </ol> </li> </ol>	"Sounding the Alarm for Patients with Obstructive Sleep Apnea", <u>Nursing</u> 2012, April 2012, pp. 34-41		Identify specific factors in client environment that may interfere with sleep patterns.
9. Discuss assessment of sleep deprivation and sleep disorders.	9. Assessment of sleep deprivations and disorders <ol style="list-style-type: none"> <li>a. Nursing history</li> <li>b. Physical exam</li> </ol>			

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
10. Plan independent nursing measures to promote rest and sleep.	10. Independent nursing measures that promote sleep and rest	Ackley: See listed diagnoses under: • Sleep, Sleep Apnea, Sleep Deprivation, Sleep Pattern Disturbed p. 109		Implement independent and dependent nursing measures to promote sleep and rest.
11. Discuss pharmacologic agents that promote sleep and rest and nursing implications related to these administrations.	11. Pharmacologic agents a. Hypnotics/Sedatives b. Antihistamines c. Melatonin d. Antidepressants	ATI-Pharm: Module 2		
12. Differentiate between the most common sleep alterations.	12. Common sleep alterations a. Insomnia b. Narcolepsy c. Hypersomnia d. Sleep apnea e. Sleep deprivation f. Parasomnia			
<b><u>CULTURAL AND PSYCHOSOCIAL NEEDS</u></b>				
1. Discuss psychosocial factors for determining the client's response to health care.	1. Psychosocial factors for determining clients' responses to health care a. Culture b. Sexuality c. Spiritual factors	Potter: Ch. 36 Ackley: pp. 833-841	Discuss and compare psychosocial backgrounds of various cultural/religious groups.	Assess assigned clients for psychosocial factors which could influence nursing care.
2. Explain ways of assessing an individual's spiritual needs.	2. Assessment of spiritual needs		A.V. "Spiritual Care in Nursing Practice: Spirituality in Nursing Practice" (27 minutes)	
3. Discuss nursing interventions that can be used to meet the spiritual needs of a client or family related to specific religions.	3. Nursing interventions relating to specific religious needs		Student Presenters	
4. Discuss role of nurse in assisting clients with psychosocial-spiritual needs at varying stages of the life span.	4. Role of nursing regarding psychosocial-spiritual needs between age groupings a. Assessment of psychosocial spiritual needs b. Planning and implementing to meet psychosocial-spiritual needs c. Resilience	p. 735, Box 36-5 under Spiritual Health		

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
5. Compare and contrast the concepts of religion and spirituality.	5. Compare and contrast a. Religion b. Spirituality			
6. Evaluate nursing interventions and client spirituality.	6 Evaluate whether the clients spiritual needs were met.	Potter: Ch. 9		
7. Describe steps nurses can take to become culturally competent.	7. Cultural Sensitivity. a. Gender b. Language barriers c. Literary	ATI-Fund: Ch. 35	A.V. "Developing Cultural Competence" 43 minutes (library)	
8. Identify health disparities and social determinants of health.	8. Factors affecting health of cultural groups.		Cultural Presentations (Student)	
9. Discuss nursing interventions relating to specific cultures.	9. Nursing interventions relating to specific cultural needs			Identify psychosocial resources available to the client.

OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
<b><u>CARE OF THE PEDIATRIC CLIENT IN ACUTE AND NON-ACUTE HEALTH CARE SETTINGS</u></b>				
1. Identify the differences between the ill child and well child relative to behavior, appearance, activity, and his/her response to illness and separation.	1. Stressors of illness and hospitalization for children during each developmental stage	Potter: Ch. 12  ATI: Calc: Selected activities as assigned in class	Simulation Lab: Pediatric assessment	Assess pediatric clients in relation to the effects of illness and separation.
2. Discuss the role of the nurse in the care of children and families in non-acute versus acute community child health care settings.	2. Resources available to children and families a. Acute care settings 1) Pediatric unit in hospital 2) Pediatric surgery b. Non-acute settings 1) School settings 2) Clinic settings	ATI-Fund: Chs. 18-22		
3. Observe and participate in the assessment of growth and development of children in various community health care settings.	3. Age-specific developmental tasks of children: a. Physical b. Psycho-social (Erikson) c. Cognitive (Piaget)		A.V.: "Pediatric Nursing"	Identify and assess the developmental tasks of children in acute and non-acute health care settings.
4. Formulate guidelines for preparing the pediatric client for procedures.	4. Guidelines for procedures a. Preparation b. Performing procedure c. Post procedure			
5. Prepare a pediatric client for a physical examination based on development needs.	5. Age-specific approaches to physical examination a. Physical Examination 1) Infant 2) Toddler 3) Preschool 4) School-age 5) Adolescent b. Growth Charts 1) Height 2) Weight 3) BMI			
6. Identify communication strategies for interviewing parents.	6. Communication with parents a. Encouragement b. Cultural considerations c. Anticipatory guidance d. Communication blocks			

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OBJECTIVES	CONTENT	STUDENT PREPARATION	IN-CLASS ACTIVITY	CLINICAL EXPERIENCES
7. Identify communication strategies for communication with children of different age groups.	7. Communicating with the pediatric client a. Attending behavior b. Thought process 1) Concrete thinking 2) Abstract thinking 3) Term selection			

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This workforce solution is funded by the IHUM Consortium which is 100% financed through a \$15,000,000 grant from the U.S. Department of Labor's Employment & Training Administration. The product was created by the grantee and does not necessarily reflect the official position of the U.S. Department of Labor. The Department of Labor makes no guarantees, warranties, or assurances of any kind, express or implied, with respect to such information, including any information on linked sites and including, but not limited to, accuracy of the information or its completeness, timeliness, usefulness, adequacy, continued availability, or ownership. This work is licensed under the Creative Commons Attribution 4.0 International License. To view a copy of this license, visit <http://creativecommons.org/licenses/by/4.0/>.

