CONNECTICUT COMMUNITY COLLEGES NURSING PROGRAMS

*Capital Community College, Gateway Community College, Norwalk Community College,*

*Naugatuck Valley Community College, Northwestern Community College,*

*Three Rivers Community College*

THREE RIVERS COMMUNITY COLLEGE

Division of Nursing

Nursing 101

Introduction to Nursing Practice

Syllabus and Course Materials

Fall 2018

Welcome to Nursing!

**CONNECTICUT COMMUNITY COLLEGE NURSING PROGRAM**

*Capital Community College, Gateway Community College, Norwalk Community College,*

*Naugatuck Valley Community College, Three Rivers Community College Community College*

**NUR\*101: INTRODUCTION TO NURSING PRACTICE**

**Fall 2018**

**Course Prerequisites**

BIO 211: Anatomy & Physiology I; BIO 212: Anatomy & Physiology II; ENG 101: English Composition

**Course Co-requisites**

BIO 235: Microbiology; PSY 111: General Psychology (or passed with required grades)

**Course Components**

Credits 8 credits

Hours Classroom: 60 hours

Clinical: 180 hours

**Course Description**

The student will focus on concepts basic to nursing practice. Emphasis is placed on application of the nursing process, communication, and skill acquisition. Clinical and laboratory experiences offer opportunities to integrate theoretical principles and demonstrate caring and competence in beginning professional role development.

**Course Objectives**

At the completion of this course, the student will be able to:

1. Identify principles of holism in providing basic nursing care to selected individuals.

(*as measured by exam questions, group case studies and critical thinking exercises, CLEW, formative and summative clinical evaluations*)

2. Utilize the nursing process in planning care for individuals with basic health care needs.

(*as measured by exam questions, group case studies and critical thinking exercises, simulation exercises, CLEW, formative and summative clinical evaluations*)

3. Demonstrate safe use of scientific and quantitative principles and technology in providing basic nursing care to individuals.

(*as measured by dosage calculation exam, technology use in lab/classroom, clinical, and simulation exercises*)

4. Use basic communication in nurse-client interactions.

(*as measured by exam questions, Process Recording, reflections, simulation exercises, formative and summative clinical evaluations*)

5. Identify learning needs for assigned individuals.

(*as measured by exam questions, CLEW, group case studies and critical thinking exercises, simulation, formative and summative clinical evaluations*)

6. Utilize therapeutic interventions that consider the unique rights of individuals.

(*as measured by exam questions, group case studies and critical thinking exercises, CLEW, simulation exercises, formative and summative clinical evaluations*)

7. Identify the roles of various members of the health care team.

(*as measured by exam questions, simulation exercises, formative and summative clinical evaluations*)

8. Demonstrate basic legal and ethical practice standards when providing care to selected individuals.

(*as measured by exam questions, debate exercise with debriefing, critical thinking paper, post-conference discussions, formative and summative clinical evaluations*)

9. Exhibit growth in personal and professional roles in nursing.

(*as measured by CLEW, reflections, formative and summative clinical evaluations)*

**Course Schedule**

Lecture: Monday 9:30-11:30AM and 1:30-3:30PM Room A216.

Classroom Laboratory: Tuesday and Thursday 8:30 AM-4:00 PM, Weeks 2–6, Room A218, A220, and as assigned

Clinical: Weeks 7–15 as assigned

**Nursing Faculty and Staff**

**Director of Nursing and Allied Health:**

Edith Ouellet, M.S.N, RN

Office: C245

Phone & Voicemail:  860 215-9460

E-mail: [eouellet@trcc.commnet.edu](mailto:eouellet@trcc.commnet.edu)

**Educational Assistant to the Director:**

Rhonda Charette: 860 215-9301, Office: C245

[RCharrette@trcc.commnet.edu](mailto:RCharrette@trcc.commnet.edu)

**Faculty:**

**Full-Time Team**

  Associate Professor Krista Prendergast, M.S.N., R.N., CNE- Course Leader

[kprendergast@trcc.commnet.edu](mailto:kprendergast@trcc.commnet.edu)

Office: C266

Phone & Voicemail: 860-215-9423

Professor Lillian Rafeldt, M.A., R.N., CNE

[lrafeldt@trcc.commnet.edu](mailto:lrafeldt@trcc.commnet.edu)

Office: C230

Phone & Voicemail: 860-215-9463

Assistant Professor Cheryl Gilot, M.S.N., R.N.

[cgilot@trcc.commnet.edu](mailto:hzakewicz@trcc.commnet.edu)

Office: C262

Phone & Voicemail: 860-215-9445

Assistant Professor Melissa Neill, M.S.N., R.N.

[mneill@trcc.commnet.edu](mailto:pcolonghi@trcc.commnet.edu)

Office C246

Phone & Voicemail: 860-215-9477

**Part-Time Faculty**

Jill Blain, M.S.N., R.N., adjunct clinical faculty

Karen Butterworth-Erban, M.S.N., R.N., adjunct clinical faculty

Teri Walsh, M.S.N., R.N., adjunct clinical faculty

Lee McLallen, M.S.N., R.N., adjunct clinical faculty

**Nursing Lab Staff:**

Karen Amor M.S.N., R.N., Nursing Lab Coordinator

Office: A210

[kamor@trcc.commnet.edu](mailto:sturner@trcc.commnet.edu)

**Methods of Instruction**

This course is team taught. Teaching and learning approaches include inquiry, reflection and integration through student preparation for class, lecture, discussion, case studies, demonstration, return demonstration, guest speakers, experiential exercises, small group activities, independent assignments, pre and post clinical conferences, clinical practice, and formative feedback. Electronic instruction, interactive video and simulations are also used.  Blackboard Learn is used as a learning management tool. An additional learning tool is ePortfolio. Students may keep their ePortfolio account after graduation.

All students are required to maintain an online learning portfolio in Digication that uses the college template. Students will submit assignments into their portfolio which will guide their learning. The General Assessment and Nursing Department also take random samples for review in curriculum development. This process supports accreditation. Nursing and College accreditation are required for financial aid, easy entry into BSN programs and growth of the department and college.

**Required Textbooks**: All textbooks are used in subsequent courses

Elsevier Bundle available through TRCC Bookstore:

Lewis S. et al. (2017). Medical Surgical Nursing: Assessment and Management of Clinical Problems (10th ed.). St. Louis, MO: Elsevier.

978-0-323-06581-8

Potter, P & Perry, A. (2017). Fundamentals of Nursing (9thed.) St. Louis MO: Elsevier.

978-0-323-32740-4

Perry, A. & Potter, P. (2018). Clinical Nursing Skills and Techniques (9th ed.). St. Louis, MO: Elsevier.

978-0-323-40069-5

Varcarolis, E.M., Carson, V.B., & Shoemaker, M.C. (2018). Foundations of Psychiatric Mental Health Nursing: A Clinical Approach (8th ed.). St. Louis, MO: Elsevier. 978-0323-41733-4

Davis Bundle available through TRCC Bookstore:

Nugent, P.M. & Vitale, B.A. (2015). Fundamentals Success A Q&A Review Applying Critical Thinking to Test Taking (4th ed.) Philadelphia, PA: FA Davis.

978-0-803-64414-4

Van Leeuwen, A. M. (2015). Davis’ Comprehensive Handbook of Laboratory and Diagnostic Tests with Nursing Implications (7th ed.). Philadelphia: FA Davis.

978-0-803-64405-2

Vallerand, A.H., & Sanoski, C.A. (2017). Davis's Drug Guide for Nurses (15th ed.). Philadelphia: FA Davis.

978-0-8036-5705-2

**Please note: ISBN number is for single copy text only, not for the bundle. Bundle saves money. Bundle has a separate ISBN number and is available through TRCC bookstore only.**

Ackley, B.J., & Ladwig, G.B. (2016). Nursing Diagnosis Handbook: An Evidence-Based Guide to Planning Care (11th ed.). St. Louis, MI: Saunders/Elsevier.

978-0-323-32224-9

Pickar, G.D., & Abernethy, A.B. (2013). Dosage Calculations (9th ed.). Clifton Park, NY: Thomson/Delmar.

978-1-133-70727-1

Nursing 101 Tote Bag. Contents are used throughout the 4 semesters on Lab Days. Purchase through the TRCC Bookstore.

In lieu of a textbook; you will be provided with online access to *ATI RN Pharmacology for Nurses* to work in conjunction the PME (Pharmacology Made Easy) online program. Access code supplied by nursing department.

ATI Testing and Resources are utilized during the semester. Access code supplied by nursing department.

**Optional Textbooks: No assignments will be given in these texts. They are for your information only.**

Purnell, L.D., & Paulanka, B.J. Guide to Culturally Competent Health Care (3rd ed.). Philadelphia, PA: F.A. Davis.

Sommers, M.S., & Johnson, S.A. Diseases and Disorders: A Nursing Therapeutics Manual (5th ed.). Philadelphia, PA: F.A. Davis.

Vallerand, A. Nurses Med Deck (15th ed.). Philadelphia, PA: F.A. Davis.

Other company Drug Cards for use in clinical setting

Dudek, Nutrition Essentials for Nursing Practice (8th ed.)

Dillon, Nursing Health Assessment Pocket Guide (3rd ed)

**Faculty / Staff Availability**

Students are encouraged to seek clarification with the course leader as needed. Students are also encouraged to seek advisement with faculty as needed.  Scheduled faculty office hours are posted outside faculty offices. Students may also meet with faculty by appointment. For course questions please contact course leader.

**Study Groups**

Students are encouraged to form study groups which can meet in the lab or at another mutually convenient location.  Tutors within the nursing lab are available during posted hours of the Nursing Laboratory. Be proactive in your learning and seek help independently. The Nursing Lab and Nursing Tutors are in place to promote success and retention.  Use these learning opportunities weekly.

Practice materials are available through supplements of your texts, in the course website on Blackboard, Evolve, and CDs / DVDs, material within the nursing laboratory and the Learning Resource Center (LRC).  Sample exam questions can be found within these materials. Students may use the following in the Nursing Laboratory to improve test taking skills.

**Nursing Program College Facilities**

Faculty offices are located within C wing.

The Nursing laboratory is located in A218.

Computer labs are located in the nursing lab A212 and throughout the campus (library and E wing).

The Learning Resource Center is located in the C wing, ground floor.

**Class Examinations**

Exam 1 Monday,  9/10/18 15%

Exam 2 Monday, 9/24/18 15%

Exam 3 Monday, 10/15/18 15%

Exam 4 Monday, 11/5/18 15%

Exam 5 Monday, 12/3/18 15%

Final Exam Monday, 12/10/18 25%

Dosage Calculation Competency Test: Thursday 9/20/18

Pass/Fail (Must achieve a 90% to pass)

**Grading Policies**

To pass Nursing 101 and progress in the nursing program a student must achieve **ALL** of the following:

* Earn at least a 74 average in the theoretical portion of the course. Exam items are drawn from ALL content of the course; theory, lab, clinical and math. Students who receive a score of 77.5 or below on a theory exam, will receive a nursing lab referral for quiz review with lab faculty. This referral is due one week after the exam date.
* Pass the clinical component of the course in a satisfactory manner.
* Pass Dosage Calculation Competency with 90% accuracy.  Students must use calculators provided by the college for all exams involving drug calculations. A student may not administer medications until s/he has successfully passed the dosage calculation examination.  A student will be given three (3) attempts to pass the dosage calculation examination.  A student who fails the dosage calculation examination must participate in remediation before taking the next examination. A student who fails the third (3rd) examination will be withdrawn from the nursing course and dismissed from the nursing program. See Nursing Student Handbook.
* Pass required clinical skills validations. Three (3) opportunities will be given to pass each clinical skills validation.  Students unable to meet validation criteria must attend mandatory remediation before repeat attempts to validate required clinical skills.  Students who are unable to satisfactorily meet validation criteria upon the third attempt will be dismissed from the nursing program as a clinical failure. See Nursing Student Handbook.
* **Evaluation activities:**
  + **Clinical:** A conference will be scheduled **by the learner** with his/her clinical instructor for discussion and evaluation **of the student's progress at the end of each clinical week**.  The Formative Clinical Evaluation Form will be completed by the instructor and reviewed and signed by the student at each weekly meeting.  Clinical performance is evaluated according to the objectives identified on the evaluation form. Students must successfully meet the clinical objectives in order to pass the course. Students are responsible for self-evaluation and documentation. A summative evaluation will be completed, reviewed, and signed at the end of the semester.
  + **Theory:** There will be five 50-minute exams (40-50 questions each) and one two-hour final examination (80 to 100 questions).  The exams will start at 9:30 AM or as assigned.  Class will resume at 10:30 a.m. on exam days.
  + **Weight:** Each exam is worth 15% of the theory grade for 75% of total grade.   Final examination = 25% of total grade. The five exams plus the final = the letter grade in the course.
  + **ATI Proctored Test:** Student may earn points on their final exam score based on scores received on the ATI Proctored Test given at the end of the semester. See the ATI performance requirements below to earn points on the final exam.
  + 80% and above= 3 points, 70-79.9%= 2 points, 65-69.9%= 1 point, 64.9 and below= 0 points
  + **In order to pass the course students are required to receive a satisfactory clinical evaluation, pass the math test as previously stated, and pass required clinical skills validations.**

**Grading Scale:**

          A 93-100 A- 90-92

          B+ 87-89 B 83-86 B- 80-82

         C+ 77-79 C 74-76 C- 70-73

          D+ 67-69 D 64-66

          F  63.4 or less.

**Nursing Program Policy Handbook**

Refer to the Nursing Program Policy Handbook for detailed information regarding:

* Missed Exams
* Clinical Evaluations
* College Labs
* Attendance
* Required Clinical Equipment
* Professional Appearance in the Clinical Sites
* Return if withdraw
* Inability to return under certain circumstances

**Please note: Changes may be made to the schedule if needed.**

**Attendance Policy**

Students are expected to attend each lecture, classroom laboratory and clinical experience.  It is the student's responsibility to notify the instructor if absence is necessary and to fulfill objectives of the experience.  All clinical absences are to be made up as per the Nursing Program Policy Handbook. Uniform is required for both college laboratory clinical experiences and clinical experiences at health care agencies. See Nursing Program Policy Handbook for uniform requirements.

**Clinical Absenteeism Policy**

The student who is absent for one clinical day will receive a PIP. A second clinical absence will result in the student being placed on clinical warning.  To be successful in the course, the student must earn removal from clinical warning status by having no further clinical absences the remainder of the semester.

If the student has more than 2 absences, the student will not be able to meet the clinical objectives resulting in a clinical failure, thereby, failing the course (please see the student nursing handbook). Extenuating circumstances will be reviewed by the nursing faculty and the director of nursing.

If there are greater than one absence in a specialty area, the student will be unable to meet the clinical and course objectives resulting in a clinical failure, thereby, failing the course.  Extenuating circumstances will be reviewed by the nursing faculty and the director of nursing.

**Test Make-Up Policy**

If you must be absent from a scheduled test due to **personal** illness or other emergency, contact the course leader, Krista Prendergast (860) 215-9423, by 8:30AM on the morning of the test.  Failure to do so may result in a failing grade for that test.  Any absent student taking a make-up examination will have 10 points subtracted from the examination grade unless **documentation** of extenuating circumstances has been provided and approved prior to the start of the make-up exam.

Students with an approved absence from scheduled tests will be given an alternate examination. The make-up will be cumulative and determined by the course leader and full-time faculty and administered at the end of the semester.

**Statement on Penalty for Academic Dishonesty or Plagiarism**

Plagiarism is the **unacknowledged** use of another person’s words or ideas in your writing.  Whether conscious or not, plagiarism is a serious offense.  Evidence that you did not write material that you submit under your name can result in failure for the entire course. Refer to College Catalog for policy. Students are expected to: “Demonstrate academic integrity by not engaging in conduct that has as its intent or effect the false representation of a student’s academic performance, including but not limited to: (a) cheating on an examination; (b) collaborating with others in work to be presented, contrary to the stated rules of the course; (c) plagiarizing, including the submission of others’ ideas or papers (whether purchased, borrowed or otherwise obtained) as one’s own; (d) stealing or having unauthorized access to examination or course materials; (e) falsifying records or laboratory or other data; (f) submitting, if contrary to the rules of a course, work previously presented in another course; and (g) knowingly assisting another student in any of the above, including an arrangement whereby any work, classroom performance, examination, or other activity is submitted or performed by a person other than the student under whose name the work is submitted or performed.” Consequences are delineated in the College Catalog.

**Additional Expected Activity Requirements**

Students are expected to engage in class discussions, role-play, material review and lab simulation and practice. Participation enhances the learning experience and allows students and instructors the opportunity to learn from each other. Students will be expected to submit work to ePortfolio and Digication as assigned. Netiquette and HIPAA policies are required to be used for all postings within the electronic tools.

**Digication Statement**

All students are required to maintain a learning portfolio in Digication that uses the Three Rivers College Template.

Students are reminded that classroom demeanor is a vital part of participation.  Practice common courtesy and recognize each person's right to learn in an atmosphere conducive to the learning experience. These same behavioral standards are required when using social networking or social media accounts. Students who violate the rules of courtesy and/or professional demeanor will be asked to leave. Students are required to attend all classes. Tardiness and early leaves as well as absences have a direct impact on student learning.

**WITHDRAWAL POLICY**:

Students may withdraw, **in writing**, at the Registrar's Office for any reason. Refer to the Nursing and College Student Handbooks and College Catalog for withdrawal and readmission policies.

**DISABILITIES STATEMENT**:

If you have a disability that may influence your progress in this course, please meet with a Disability Service Provider (DSP) as soon as possible. (Before the course starts is best.) Please note that accommodations cannot be provided until you provide written authorization from a DSP. Contact Advising and Counseling Services at (860) 215-9017 for further information. Table below provides contact information for College Disability Service Providers.

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| **College Disabilities Service Provider** | |  |
| Matt Liscum, Counselor  (860) 215-9265, Room A113 | Learning Disabilities  ADD/ADHD  Autism Spectrum  Mental Health Disabilities | |  |
| Elizabeth Willcox, Advisor  (860) 215-9289, Room A113 | Medical Disabilities  Mobility Disabilities  Sensory Disability | |

Please see the Three Rivers Community College Catalog for additional policies and information.

**BOARD OF REGENTS FOR HIGHTER EDUCATION AND CONNECTICUT STATE COLLEGES AND UNIVERSITIES POLICY REGARDING SEXUAL MISCONDUCT REPORTING, SUPPORT SERVICES AND PROCESSES POLICY**

**Statement of Policy for Public Act No. 14-11: An Act Concerning Sexual Assault, Stalking and Intimate Partner Violence on Campus:**

“The Board of Regents for Higher Education (BOR) in conjunction with the Connecticut State Colleges and Universities (CSCU) is committed to insuring that each member of every BOR governed college and university community has the opportunity to participate fully in the process of education free from acts of sexual misconduct, intimate partner violence and stalking. It is the intent of the BOR and each of its colleges or universities to provide safety, privacy and support to victims of sexual misconduct and intimate partner violence.”

**UNITED STATES DEPARTMENT OF EDUCATION AND OFFICE OF CIVIL RIGHTS TITLE IX STATEMENT OF POLICY:**

“Title IX of the Education Amendments of 1972 (Title IX) prohibits discrimination based on sex in education programs and activities in federally funded schools at all levels. If any part of a school district or college receives any Federal funds for any purpose, all of the operations of the district or college are covered by Title IX.

Title IX protects students, employees, applicants for admission and employment, and other persons from all forms of sex discrimination, including discrimination based on gender identity or failure to conform to stereotypical notions of masculinity or femininity. All students (as well as other persons) at recipient institutions are protected by Title IX – regardless of their sex, sexual orientation, gender identity, part-or full-time status, disability, race, or national origin-in all aspects of a recipient’s educational programs and activities.”

If any student experiences sexual misconduct or harassment, and/or racial or ethnic discrimination on Three Rivers Community College Campus, or fears for their safety from a threat while on campus, please contact Maria Krug, Title IX Coordinator:

Maria Krug

mkrug@trcc.commnet.edu

860-215-9208

**CLINICAL CANCELLATION DUE TO INCLEMENT WEATHER**:

When the college is closed for reasons of inclement weather, clinical experiences will also be cancelled.  When the college delays opening, clinical experiences will begin one hour later.  However, students should use discretion in traveling in poor weather conditions.  If you are unable to report to scheduled clinical experiences, be sure to notify your clinical instructor. Preplanning and communication with your clinical instructor and course leader are important.  The College Student Handbook and Catalog lists radio stations announcing cancellations.  There also will be a notice of delays or cancellation through the Early Alert Notification system.  Postings may also be seen on the Three Rivers Web Page: [www.trcc.commnet.edu](http://www.trcc.commnet.edu/)  or via Blackboard. You can sign up for the Early Alert Notification System through the Three Rivers Community College web page.

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Lillian Rafeldt** | **Unit: Contemporary Nursing Practice**  Discuss various definitions of nursing  Explain the use of critical thinking related to the nursing process.  Discuss historical leaders in nursing  Discuss educational preparation for professional nursing  Discuss the role that caring plays in building a nurse patient relationship  Discuss contemporary roles of the registered nurse  Describe the philosophy of the nursing program.  Identify the core values of the nursing program | 1. Caring: An Introduction to Nursing    1. Definition of nursing    2. Historical perspectives 2. Holism: Societal influences on nursing 3. Professionalism: The Role of the Nurse 4. Safe and Competent Practice    1. Nursing Education    2. Nursing Practice 5. Nurse Practice Acts 6. Practice Settings 7. ANA Code of Ethics 8. Critical Thinking: Trends in Nursing 9. Communication: Connecticut Community Colleges Nursing Program (CT-CCNP) Philosophy and Core Values | Watch the PowerPoint Show before coming to class and as a review. Some students learn through reading, some listening, and some visually. Learn who you are becoming…the nursing role.  Assigned Readings:  Potter & Perry, Fundamentals of Nursing 9th edition, chapter 1,2, 3,4  Lewis, Medical-Surgical Nursing, Assessment and Management of Clinical Problems 10th edition, chapter 1  Student Handbook   * 1. Core Values   2. Program Philosophy   Formulate own definition of nursing—we will put it into your ePortfolio  Website:  CT Nurse Practice Act  <https://www.cga.ct.gov/2017/pub/Chap_378.htm> | Exams and Final  Clinical performance evaluation  CLEW and reflections |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **3 hours**  **Lili Rafeldt** | **Unit: Health Protection & Safety**  Use the chain of infection to discuss patient risk factors  Describe assessment data with inflammatory response vs. infectious response  Discuss interventions to prevent the transmission of pathogens  Compare medical & surgical asepsis  Demonstrate use of personal protective equipment in contact, droplet, and airborne isolation  Discuss rationale for standard precautions  Demonstrate correct technique for hand hygiene  Demonstrate correct application and removal of clean gloves  Identify the role of the Center for Disease Control in infection management and environmental safety  Discuss the nurse’s role in early identification of data that might suggest epidemic or bioterrorism activity  Discuss risks to safety based on developmental stage, lifestyle, and pathophysiology  Discuss interventions to reduce physical hazards in the health care, home, and community environments | 1. Infection 2. Normal body defenses 3. Risk factors for infection 4. Chain of infection 5. Immunity    1. Active    2. passive 6. Use of the Nursing Process in infection control 7. Safety 8. Factors that affect safety    1. developmental / culture    2. individual / pathophysiology    3. environmental 9. Public safety and bioterrorism 10. chemical 11. biological 12. nuclear 13. Promoting safety in health care     1. JCAHO 2018 National Patient safety goals and sentinel events     2. QSEN (Quality & Safety Ed for   Nurses)   * 1. Creating a “just culture of safety”  1. Nursing Process and safety    1. Assessment: risk assessment tools    2. Diagnosing: risk for injury, risk for poisoning, deficient knowledge (accident prevention)    3. planning and implementation: call bells, falls, burns, fire safety, reduction of electrical hazards, bed, chair monitoring devices and restraints    4. evaluation: in clinical settings and the home | Assigned Readings:  Potter & Perry Text: Chapter 29 “Infection Prevention and Control” (stop at Surgical Asepsis) and Chapter 27 “Patient Safety”  Use the Center of Disease Control website to access guidelines for infection control.  Review the CT Hospital Association patient orientation packet and posttest (CHA Test will be due before or by 9/27)  Review the QSEN link about pre-licensure knowledge, skills and values of safe nursing practice. Note the similarities with our outcomes and core values.  <http://qsen.org/competencies/pre-licensure-ksas/>  Review JCAHO 2018 National Patient Safety Goals for hospitals and Nursing Care Centers.  <https://www.jointcommission.org/standards_information/npsgs.aspx>  Review sentinel event link.  <http://www.jointcommission.org/sentinel_event.aspx> | Exam  Nursing Skills Lab performance  Clinical performance evaluation  CLEW/ Reflections |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **3 hours**      **Lili Rafeldt** | **Unit: Therapeutic and Professional Communication**  Identify the elements of effective communication  Identify the different forms of communication  Explain the nursing focus in each of the four phases of communication      Describe the importance of effective communication in the delivery of nursing care  Identify behaviors and techniques that impact client/nurse communication    Demonstrate communication techniques for healthcare professionals that enhance and promote client/nurse relationships and the delivery of holistic care      Describe effective communication between healthcare professionals    Identify nursing outcomes of effective and therapeutic communication  Identify barriers to therapeutic communication    Discuss the application of therapeutic communication techniques in each phase of the nursing process      Apply the nursing process to clients with specific barriers to effective communication | A.    Elements of effective communication  1.     Sender  2.     Receiver  3.     Message  4.     Feedback   B.    Phases of Communication  1.     Pre-interaction  a.     Goals  b.     Focus  2.     Introductory  a.     Goals  b.     Focus  3.     Working  a.     Goals  b.     Focus  4.     Termination  a.     Goals  b.     Focus  C.    Characteristics of verbal communication  1.     Pace and Intonation  2.     Simplicity  3.     Clarity and brevity  4.     Timing and relevance  5.     Adaptability  6.     Credibility  7.     Humor   D.    Characteristics of nonverbal communication  1.     Reinforcement or contraction of verbal communication  2.     Personal Appearance  3.     Posture and Gait  4.     Facial Expression  5.     Gestures   E.    Factors influencing Communication  1.     Nature of relationship  1.     Social vs. professional  2.     Level of trust  3.     Power differentials  4.     Individual factors: Client  a.     Developmental/Lifespan                                          i.          Age/Stage  b.     Socio-cultural                                          i.          Language                                         ii.          Customs                                       iii.          Level of education                                       iv.          Attitudes, beliefs, values  c.     Mood and emotional/mental state  d.     Personality Characteristics  e.     Physical health factors  f.      Pain/Comfort  5.     Client perceptions  6.     Environmental factors  a.     Noise  b.     Privacy  c.     Distractions  F.     Communication techniques that demonstrate and accomplish therapeutic communication:  1.     Active listening  2.     Acceptance  3.     Respect  4.     Clarification  5.     Support and Comfort  6.     Delivery of information  7.     Diversion  8.     Assistance with problem solving  9.     Assertiveness   G.    Barriers to effective communication  1.     Specific client communication problems  a.     Aphasia                                          i.          Expressive                                         ii.          Receptive  b.     Language Differenced  c.     Alterations in mental status                                          i.          Confusion                                         ii.          Unresponsiveness  H.   Communication as part of the phases of the nursing process  1.     Assessment  2.     Analysis/Diagnosis  3.     Planning  4.     Implementation  5.      Evaluation  I.      Desired outcomes for communication between nurse and client/families  1.     Value of Process Recordings for growth in communication skills  J.      Process, Structure and Outcomes of communication among health care providers  1.     SBAR as a tool, will expand in documentation class  a.     Situation  b.     Background  c.     Assessment  d.     Recommendation | Assigned Readings:  A. Potter & Perry, Fundamentals of Nursing 9th edition, chapter 24  B. Perry & Potter, Clinical Nursing Skills & Techniques C. Foundations of Psychiatric Mental Health Nursing, A Clinical Approach  D. Nursing Diagnosis Handbook Ackley    Review readings, the Big Picture, and Communication Power Point Part One prior to class.  In class: Interact with Power Point Parts Two, Three and Four  Discuss how communication has changed in the 21st century  Apply HIPAA principles  Discuss impact of language barriers and possible interventions        Case Study: Communication with Patients, Staff, and Faculty      Reflective practice      Case Studies/Use of Process Recording Form      Develop a Process Recording of a nurse/client interaction      Use of SBAR, preconference preparation sheet      Practice questions    After class  Review Process Recording and content of unit.  Utilizing principle of reviewing within 24 hours to increase recall, application and learning      Are you using a system of organization to retrieve content for easier application of learning in the future?  Help is available in the nursing lab and through faculty too! | Exam  Nursing Skills Lab performance  Clinical performance evaluation  CLEW / Reflections  Clinical Process Recording |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Krista**  **Prendergast** | **Unit: Activity and Exercise**  Discuss the benefits of exercise on physiological and psychological functioning  Demonstrate the principles of body mechanics  Describe/demonstrate active and passive range of motion exercises  Describe/demonstrate safe practices when positioning,moving, lifting, and ambulating patients  Discuss the causes and hazards of immobility on body systems  List nursing interventions for an immobilized patient | 1. Normal Movement and Exercise   1. Health promotion in the 21st century   1. Range-of-Motion Exercises 2. Active ROM 3. Passive ROM 4. Factors Affecting Alignment and Activity 5. Growth and development 6. Nutrition 7. Personal values and attitudes 8. External factors 9. Prescribed limitation 10. Effects of Immobility 11. Musculoskeletal system 12. Cardiovascular system 13. Respiratory system 14. Metabolic system 15. Urinary system 16. Gastrointestinal system 17. Integumentary system 18. Psychoneurological system 19. Safety 20. Nursing Process and Activity 21. assessment data 22. alignment 23. gait 24. joint appearance and movement 25. limitations and capabilities for movement 26. muscle mass and strength 27. activity tolerance 28. implications for safety 29. risk for obesity and comorbidities 30. Diagnosis 31. Planning—safe clinical reasoning as a priority 32. Implementation 33. body mechanics 34. positioning patients 35. moving and turning patients 36. transferring patients 37. ambulating patients 38. Evaluating 39. Preventing Lift Injuries in Health Care Workers | Assigned Readings:  Potter & Perry Fundamentals 9th ed. chapters 28 & 39  Ackley Nursing Diagnosis 11th ed.-Impaired Mobility and Activity Intolerance  Evidence based practice article:  Wood, W. et al. (2014) A mobility program for an inpatient acute care medical unit. American Journal of Nursing, 114 (10), 34-42.    In class:  Application of safe movement and transfer algorithms    iClicker question activity    After class application:  Reinforce content in Transfer and Mobility with Body Mechanics lab stations  Participate in patient mobility activities in the clinical setting    Observe a patient working with a Physical and Occupational Therapist in the clinical setting | Exam  Clinical & Nursing Lab performance evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **3 hours**  **Krista**  **Prendergast** | **Unit: Vital signs**  Define vital signs  Discuss risk factors, incidence, prevalence and significance of hypertension of hypertension  Discuss the impact of hypertension on wellness  Discuss the importance of early recognition and treatment of hypertension to wellness/health maintenance  Discuss the basic goals of the treatment(s) for early stage hypertension  Describe factors that affect vital signs and accurate measurement of them  Identify peripheral pulse sites  Identify variations in vital signs according to age  Measure vital signs in an organized, accurate manner | 1. Critical Thinking    * 1. Definition of Vital Signs      2. Factors Affecting Vital Signs 2. Implementing Safe and Competent Care: Accurate Assessment of Vital Signs 3. Temperature 4. Pulse 5. Respiration 6. Blood Pressure 7. Oxygen Saturation 8. Nursing Process related to Hypertension 9. Risk Factors 10. Incidence 11. Prevalence 12. Significance/impact on health status/wellness 13. Importance of early recognition and treatment 14. Goals of Treatment (i.e. Drug Therapy, diet, life style modification): 15. Decreasing peripheral resistance 16. Decreasing blood volume 17. Altering the strength and/or rate of cardiac contraction | Assigned Readings:  Potter & Perry Fundamentals 9th ed.- Chapter 30  Lewis Med/Surg. 10th ed.- Chapters 31 and 32  Evidence based practice article: DeMeester et al. (2012) In-hospital mortality after serious adverse events on medical and surgical units: a mixed methods study. Journal of Clinical Nursing, 22, 2308-2317  In class:  Case study activity  iClicker question activity  After class application:  Practice vital signs skills in lab stations  Assess patient vital signs in the clinical setting and discuss implications of normal and abnormal signs with instructor | Exam  Nursing Skills Lab performance  Clinical performance evaluation  Vital signs validation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Cheryl Gilot** | **Unit: Oxygenation**  Describe normal assessment data related to oxygenation  Explain factors that alter respiratory and cardiac function  Describe assessment findings in patients with altered cardiopulmonary function  List appropriate nursing diagnoses for the patient with cardiopulmonary dysfunction  List nursing intervention that support respiratory and cardiac function  Evaluate outcomes that define patient progress in the promotion of cardiac and respiratory function | A. Factors that Affect Respiratory Function  1. Alterations in respiratory function  2. Developmental factors  3. Lifestyle factors  B. Assessment Data  1. Physical exam  2. Diagnostic data  C. Nursing diagnoses and altered respiratory Function  D. Planning outcomes for a patient with altered respiratory function  E. Implementing Nursing Interventions  F. Factors that Affect Cardiac Function  1. Alterations in cardiac function  2. Developmental factors  3. Lifestyle factors  G. Assessment Data  1. Physical exam  2. Diagnostic data  H. Nursing diagnoses and altered cardiac  Function  I. Planning outcomes for a patient with altered cardiac function  J. Implementing Nursing Interventions | **Assigned Readings:**  Potter & Perry Text: Chapter 41 pg. 880-906  Potter & Perry Skills:  Chapter 23, pg. 627-648  **Review:**  You tube video:  Congestive Heart Failure  Article Review:  *Obesity weighs heavily on lung function*  **Simulation in Lab:** Asthmatic patient | Exam  Nursing Skills Lab  Performance  Skill Validation  Clinical  performance  evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **4 hours**  **Krista**  **Prendergast** | **Unit: Safe and Competent Practice Medication Administration**  Define selected terms related to the administration of medications.  Describe the legal aspects of administering medications.  Describe various routes of medication administration.  Identify factors affecting medications actions.  Review systems of measure in medication administration.  State rights of medication administration.  Identify implications associated with drug therapy in the older adult.  Review various medication administration routes.  Describe sites used for subcutaneous and intramuscular injections.  Review documentation of medication administration  Identify parts of a medication order | 1. Providing safe, holistic, culturally competent nursing care 2. Pharmacology 3. Medications 4. Therapeutics 5. Classification of therapeutics 6. Prescription and over the counter (OTC) drugs 7. Drug regulations and standards 8. FDA stages of approval for therapeutic and biologic drugs 9. Critical thinking: classifications of drugs 10. Pharmacologic, therapeutic 11. Chemical 12. Generic 13. Trade name 14. Brand names vs. generic equivalents 15. Controlled substances and drug schedules 16. Critical thinking: pharmacokinetics 17. Passage of drugs through plasma membranes 18. Absorption 19. Distribution 20. Metabolism 21. Excretion 22. Plasma concentration of therapeutic response 23. Half-life and duration of drug action 24. Loading and maintenance doses 25. Critical thinking: pharmacodynamics 26. Inter-patient variability 27. Therapeutic index and drug safety 28. Graded dose response and therapeutic response 29. Potency and efficacy 30. Cellular receptors 31. Critical thinking: drug-drug interactions 32. Consequences 33. Basic mechanisms 34. Physical attributes 35. Pathophysiology 36. Renal, hepatic function 37. Acid-base balance 38. Electrolyte imbalance 39. Clinical significance of drug-food interactions 40. Drug tolerance 41. Placebo effect 42. Safe and Competent Practice: medication delivery 43. Nursing implications of medication administrations (e.g. checks and rights) 44. Parts of a medication order 45. Routes of administration 46. Documentation of medications administration 47. Verbal vs. telephone orders | Assigned Readings:  Potter and Perry Fundamentals 9th ed., Chapter 32  Pickar Dosage Calculations 9th ed., Chapters 6,7,8,9,11  Complete Pharmacology Made Easy- Module One: Introduction to Pharmacology  Drug Guide- How to Use the Drug Guide section  In class:  Group activity- teach class how to administer a certain drug route  iClicker question activity  After class application:  Practice safely administering medications during various lab stations  Administer medications in the clinical setting with instructor | Exam  Clinical performance evaluation  Nursing skill lab performance  Medication Administration Validation  Medication dosage calculation test |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **1 hour**  **Cheryl Gilot** | **Unit: Blood Glucose and Glycemic Control**  Differentiate between Type 1 and Type 2 diabetes  Discuss general physiologic changes that can occur in patients with diabetes (i.e. macrovascular and microvascular)  Identify the role of nutritional management in diabetes  Identify the role of insulin administration in diabetes management  Identify the role of oral agents in the  management of diabetes  Identify the diagnostic and clinical  significance of blood glucose monitoring  Discuss the symptoms of  hypoglycemia and hyperglycemia | A. Overview of Diabetes Mellitus  1. Type 1 diabetes  2. Type 2 diabetes  3. Generalized systemic effects  a. Macrovascular  b. Microvascular  B. Implementing Safe and Competent Care in Diabetes Management  1. Nutritional  2. Pharmacologic  a. Insulin  b. Oral Agents  3. Blood glucose monitoring  a. Sliding scale for insulin coverage  C. Critical Thinking in: Abnormal blood glucose levels  1. Hyperglycemia  2. Hypoglycemia | Assigned Readings:  Lewis Chapter 49  Perry & Potter pages 1085-1090  Skills Videos  Explore the following websites:  [www.diabetes.org](http://www.diabetes.org)  [www.eatright.org](http://www.eatright.org)  Use nursing drug handbook to compare the onset, peak, duration of different insulin products  See classroom lab activities | Exam  Clinical performance  Nursing skill lab performance |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **4 hours**  **Lili Rafeldt** | **Unit: Critical Thinking and the Nursing Process**  Discuss the use of critical thinking in clinical practice  Describe the relationship of critical thinking and problem solving to the nursing process  Describe the components of the nursing process  Identify the components of the assessment phase of the nursing process  Differentiate between subjective and objective data  Describe methods of data collection  Identify Erik Erickson’s stages of development as an approach to the psychosocial assessment of clients  Describe the purposes of physical assessment  Identify techniques used for physical assessment  Identify expected outcomes of physical assessment  Discuss variations in techniques and findings of physical assessment based on age  Compare frameworks for data organization  Discuss the process of data analysis and selection of a nursing diagnosis  Identify the components of a diagnostic statement  List advantages and disadvantages of a taxonomy of nursing diagnoses  Describe the use of defining characteristics and etiology in individualizing a nursing diagnosis  Differentiate between a nursing diagnosis and a medical diagnosis  Identify the activities that take place in the planning phase of the nursing process  Discuss the process of priority setting  Describe the guidelines for writing goals  Discuss the process of selecting nursing interventions  Compare a concept map to a nursing care plan  Discuss the skills necessary in implementing nursing interventions  Describe the evaluation phase of the nursing process | 1. Critical thinking 2. Problem-solving 3. Decision-making 4. Clinical reasoning 5. Skills and Attitudes 6. Nursing process overview 7. Assessment 8. Data collection—initial, ongoing, comprehensive, focused, special needs (safety, nutritional, pain, functional ability—ADL and IADL, cultural, spiritual health, psychosocial, wellness, family and community) 9. Communication—directive interviewing, closed ended questions, open ended questions 10. Types of data—observation, senses, health history, physical assessment, consults and health record data 11. Sources of data—patient, significant others, care givers, health providers and records 12. Methods of data collection—observation, interviews— (biographical, chief complaint or reason for seeking health care, history of present illness, client’s perception of health status and expectations for care, past health history, family and social health history, medication—herb—device use, review of body systems and associated functional abilities) 13. Validation of data—congruence of subjective and objective data, outside of the normal ranges 14. Organization of data—nursing and non-nursing models 15. Confidentiality / HIPAA 16. Diagnosis—Reasoning process to identify client problems and strengths 17. Analysis of data—nursing diagnoses, medical diagnoses and collaborative problems 18. Use of defining characteristics to recognize diagnoses; nursing—human response to disease, injury or stressor, medical—disease, illness or injury, collaborative problem—certain diseases, diagnostic tests or treatments that nurses monitor to detect onset or change in status which require physician who then prescribes primary interventions 19. Types of nursing diagnosis—actual, risk for, possible, syndrome, wellness 20. Diagnostic Reasoning—identify significant data, cluster cues, identify gaps or inconsistencies, draw conclusions, identify problem etiologies, verify problems with the patient 21. NANDA nursing diagnosis—formatting 22. Three-part diagnostic statement for actual diagnoses 23. Two-part diagnostic statement for risk for diagnoses 24. Collaborative Problems 25. Infection 26. Planning 27. Types of care plans     * 1. Collaborative care plans/Critical Pathways       2. Standardized care plans       3. Individualized care plans       4. Special discharge or teaching plans       5. Student care plans       6. Mind-mapping care plans       7. Electronic health record generated 28. Priority setting—safety first, Maslow, problem urgency, future consequences, patient preference 29. Writing over all goals and expected outcome statements 30. Short-term vs. long-term outcomes 31. Initial and ongoing planning 32. Discharge planning begins at assessment—with collaboration 33. NOC—Nursing Outcome Classifications 34. Types of nursing interventions—independent, dependent and collaborative, observation, prevention, treatment and health promotion, NIC—Nursing Intervention Classifications 35. Connection between diagnostic etiology, desired outcome, individual client preferences, available resources and choice of intervention 36. Evidence based practice—clinical practice guidelines and degree of evidence (strongest—meta-analysis of randomized clinical trials, weakest—expert opinion) 37. Working with the client—for success 38. Individualizing client interventions—for success in meeting the desired outcomes 39. Implementation 40. Critical thinking and skills needed for implementation 41. Safe and Competent Practice—first priority 42. Compliance with principles of HIPAA 43. Overlaps with all phases of the nursing process 44. Check and reinforce your knowledge and abilities 45. Organize your work—with realistic goals and outcomes, prepare supplies and equipment, establish feedback points 46. Cultural sensitivity—check your assumptions—be nonjudgmental but realize that some client attitudes may not change. Know the client’s main concerns 47. Individualized client care—assess the client’s readiness, explain what you will do and what the client will feel 48. Remember to provide privacy 49. Talk openly and regularly about the goals and outcomes 50. Documentation 51. Future behaviors and skills that you are developing in school—doing, coordination, collaboration, delegating (right task, right circumstance, right person, right communication, right supervision), recording 52. Evaluation 53. Collecting data—the client is the nurse’s first priority 54. Comparing data with expected cognitive, affective, psychomotor and changes in body systems and function goals and outcomes 55. Identifying if goal and outcomes are met, not met or partially met 56. Reflection and revision of care if client goal and outcomes are not met 57. Evaluating collaborative problems—and continuing to monitor 58. There is a difference between outcome and process evaluation 59. Evaluating the quality of nursing care     1. Quality Assurance (QA)     2. Quality Improvement (QI)     3. Nursing audit   8. Documentation and reporting  9. Reflecting on use of the nursing  process | Assigned Readings:  Fundamentals of Nursing 9th edition,  1.Critical Thinking in Nursing Practice, chapter 15  2. Nursing Assessment, chapter 16  3. Nursing Diagnosis, chapter 17  4. Planning Nursing Care, chapter 18  5. Implementing Nursing Care, chapter 19  6. Evaluation, chapter 20  Ackley, General Overview at the Beginning of the text.  Where do we begin, part one power point or PDF?  In class activities:  Content review of key points and questions from Part One power point  PowerPoint, case studies and simulations applications  Practice questions  Demonstrate Critical thinking using examples of:   1. Evidence Based Practice through Nursing Process 2. Holistic Nursing View with Functional Health Pattern Framework as a Sample 3. Holistic Nursing View with a Framework through a Systems’ Review 4. Clinical Reasoning Rubric 5. Application of Erickson (Developmental theorist)   Use classroom examples to identify subjective vs. objective data.  Use classroom examples to identify measurable goals.  Identify independent, dependent and interdependent nursing interventions.  Develop nursing care plans. Compare linear format with a concept map.  Compare Clinical Learning Experience Workbook (CLEW), the school data collection and nursing care plan paper, with clinical setting and standardized forms. | Exam  Nursing Skills Lab performance  Clinical performance evaluation  Reflections |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Krista**  **Prendergast** | **Unit: Skin Integrity and Wound Care**  Discuss the physiologic process of normal wound healing  Discuss complication of normal wound healing  Identify risk factors that contribute to pressure ulcer formation  Discuss staging criteria for pressure ulcers  Describe wound assessment criteria  List nursing diagnoses associated with impaired skin integrity  Discuss interventions for wound management including mechanism of action of wound care dressings  Describe evaluation criteria for a patient with impaired skin integrity | 1. Types of Wounds 2. Wound Healing 3. Primary 4. Secondary 5. Tertiary 6. Phases of Wound Healing 7. Inflammatory phase 8. Proliferative phase 9. Maturation phase 10. Wound Exudate 11. Complications of Wound Healing 12. Hemorrhage 13. Infection 14. Dehiscence/Evisceration 15. Pressure Ulcers 16. Etiology 17. Risk factors 18. Staging 19. Nursing Process 20. Assessment     1. Risk assessment     2. Wounds     3. Pressure ulcers     4. Lab data 21. Nursing diagnosis 22. Planning     1. Wound management 23. Implementation 24. Evaluation | Assigned Readings:  Potter and Perry Fundamentals 9th ed., chapter 48  Lewis Med/Surg.10th ed., Chapter 11  In class:  Group activity- use dressing formulary to plan care for various skin integrity conditions  iClicker question activity  After class application:  Practice patient positioning and mobility and dressing change skills in lab  Participate in skin care and dressing change procedures in the clinical setting | Exam  Dry sterile dressing validation in lab  Clinical performance evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Cheryl Gilot** | **Unit: Urinary Elimination**  List developmental, life-style, and  other factors that influence the care  of patients with urinary and intestinal  elimination dysfunction.  Describe and perform focused  assessment of urinary  Identify nursing diagnoses that  correctly define patient problems  related to urinary elimination.  Review common nursing and  collaborative interventions to  promote urinary elimination | A. Critical Thinking/Holistic Care  1. Review principles and factors affecting the functioning of urinary elimination  2. Elimination variations throughout the life cycle.  3. Assessment parameters:  a. Nursing history  b. Physical assessment  c. Diagnostic and laboratory studies  B. Nursing Process  1. Nursing diagnoses related to Elimination  a. altered urinary elimination  C. Implementing safe, competent care.  1. Promote and maintain normal voiding habits  a. privacy and timing  b. positioning, activity and exercise  c. fluid and nutritional intake  d. stimulating urination  e. assisting with toileting  f. hygiene and safety  g. indwelling catheters  D. Evaluation of Care | Assigned Readings:  Potter & Perry Text: Chapter 45  “Urinary Elimination”  Lewis: Chapter 45 “Urinary System”  Lab Book:  Serum creatinine, creatinine clearance, GFR including 24 hour urine collection,  blood urea nitrogen (BUN). | Exam  Clinical  performance  evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Cheryl Gilot** | **Unit: Bowel Elimination**  Describe factors which influence  bowel elimination.  Describe normal and abnormal  characteristics of feces.  Identify common causes and effects  of selected bowel elimination  problems.  Identify interventions which maintain  normal bowel elimination.  Develop nursing diagnosis and care  of the patient with altered bowel  elimination. | A. Critical Thinking/Holistic Care:  1. Review principles and factors affecting the functioning of bowel elimination.  2. Elimination variations throughout the life cycle.  3. Assessment parameters  a. Nursing history  b. Physical assessment  c. Diagnostic and laboratory studies  B. Nursing Process  1. Nursing diagnoses related to elimination  2. Altered bowel elimination  a. Constipation  b. Diarrhea  c. Hemorrhoids  d. Flatulence  e. Impaction  f. Incontinence  C. Implementing safe, competent care  1. Promoting and maintaining normal  bowel habits  a. privacy and timing  b. positioning, activity and exercise  c. fluid and nutritional intake  d. stimulating defecation  e. assisting with toileting  f. hygiene and safety  g. enemas and suppositories  h. rectal tubes  D. Evaluation of Care | Assigned Readings:  Potter & Perry Text: Chapter 46  “Bowel Elimination” (Please read the entire chapter. You will learn about Nasogastric tubes and Ostomies in later courses. Content related to these procedures will not be tested this semester, however, you may see  these in clinical.)  Lewis: Chapter 43 up to: “Acute Abdominal Pain” pg. 1015  Discuss normal and abnormal  characteristics of feces.  Discuss diagnostic test associated with bowel elimination problems and the nursing interventions related to  them. | Exam  Clinical  performance  evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **C. Gilot** | **Unit: Sensory Alteration**  Describe factors influencing sensory Function  Identify clinical symptoms of sensory overload or deprivation  Describe the components when  assessing a patient’s sensory function  Develop a nursing plan of care for  the patient with impaired sensory  function | A. Alteration in sensory perception  1. Deprivation  2. Overload  3. Deficits  4. Meaningful stimuli  B. Holistic Factors influencing  1. Developmental stages  2. Culture  3. Stress  4. Health  C. Nursing Process related to sensory alterations  1. Assessment  a. Persons at risk  b. Activities to assess: vision, hearing,  touch, smell, taste  2. Nursing Diagnosis and Collaborative  Problems  3. Planning  4. Implementation  a. Safety  b. Assistive devices  5. Evaluation | Assigned Readings:  A. Fundamentals of Nursing 9th edition,  chapter 49  B. Medical-Surgical Nursing,  Assessment and Management of  Clinical Problems 9th edition, pages  379-382, Chapter 22 review the sections on Cataracts, Age-related macular degeneration, Glaucoma, Hearing Loss  Review articles posted on BB  Vision Simulations  <https://www.youtube.com/watch?v=KVQvqmze5SU>  How Color Blind people see the world  <https://www.youtube.com/watch?v=tU1krrUM26Q>  In class:  Use gloves and other sensory  Impairment tools. Discuss impact to  support patient care for sensory  perception deficits and alterations  Review care plan of patient with  sensory alterations  After class/In clinical:  Assess the effects of hospitalization  on sensory perception  (overload/deprivation) on patients | Exam  Clinical Performance Evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **C. Gilot** | **Unit: Holism, Caring and Cultural Diversity in Nursing**  Discuss the relationships between  health, wellness, illness, and disease  Explain the concept of health  Promotion  Discuss the concept of holism as it  relates to nursing practice  Describe the variables influencing  health beliefs and health practices  Describe health promotion for the  individual and the community  Discuss the concept of caring  Describe patient’s perceptions of  caring behaviors in a nurse  Describe how nurses demonstrate  caring behaviors in practice  Discuss the nursing process and  critical thinking as they relate to  caring  Discuss demographic trends on  health and nursing  Discuss health disparities as they  relate to culture and ethnic diversity | A. Health and holism  1. Concepts of Health and well-being  2. Models of health and wellness  a. Samples  b. Agent Host Model  c. Health—Illness Continuum  3. Factors influencing health  a. Internal / External variables  b. Health Belief models  c. Illness behaviors  4. Holism and nursing practice  a. Needs theory—Maslow  b. Developmental theory—Erickson  c. Spirituality  d. Communities  e. Interdisciplinary team work –independent and collaborative application of nursing process  5. National trends in health and illness  a. Healthy People  b. QSEN-Patient Centered Care  6. The nurse’s role in health promotion  a. Model healthy lifestyle  b. Assess readiness for change  c. Promote patient involvement in goals  d. Teach self-care strategies to enhance fitness, nutrition, relationships, manage stress  e. Reinforce positive behaviors  f. Advocate for changes to promote a healthy environment  **B. Caring in nursing practice**  1. Theories on caring  a. Benner-primacy of caring, nursing’s caring helps the patient to cope as well as connect the nurse with others, receiving as well as giving help    b. Leininger-caring as cultural competence  c. Watson-nursing is an interpersonal, humanistic process helping the patient strive for the greatest health potential  d. Full Spectrum Caring-self-knowledge and ethical knowledge  2. Caring behaviors  a. Aware of your values, beliefs and biases-maintain non-judgmental attitude and actions  b. Respect human dignity  c. Show empathy-routinely use opportunities for conversation to communicate genuine interest in  who the patient is, what they are experiencing and provide meaningful nursing assistance  d. Be culturally sensitive and become competent  e. Understand your obligations: ethics of right and wrong  f. Advocate for patients  i. Communicates patients’ values, preferences and expressed needs to other members of health care team  ii. Seeks information from appropriate sources on behalf of patient, when necessary  3. Caring for self  a. Components of self-esteem-real self and ideal self-congruence  b. Self-Care Behaviors  4. Reflection and critical thinking as they  relate to caring for self as a developing  health professional as well as caring for  vulnerable populations  **C. Cultural Diversity**  1. Demographics and culture  2. Cultural health beliefs and practices  a. Time orientation / personal space  b. Family and social organization  c. Births / death / other life events  d. Foods  e. Pain  f. Magico-religious health beliefs  g. Scientific / biomedical health belief  h. Holistic health belief and use of the health care system  3. Components of a cultural assessment  a. how the person identifies himself and communicates with others  b. language preferences and tools  c. the degree of acculturation  d. role of religion  e. support systems and primary decision maker  f. relationship with health care  g. individual’s explanation of illness  h. Use of Purnell wheel of culture  4. Culturally competent nursing  interventions to meet the holistic needs of  the patient  a. Recognizes impact of personal attitudes, values and beliefs regarding delivery of care to diverse patients  b. Conveying cultural sensitivity  c. Preservation and maintenance  d. Accommodation and negotiation  e. Values opportunities to learn about all aspects of human diversity  5. Examples of culture assessments,  plans, interventions and evaluations in  health care | Assigned Readings:  A. Potter & Perry, Fundamentals of Nursing 9th edition, chapters 7 and 9  B. Medical-Surgical Nursing,  Assessment and Management of  Clinical Problems 8th edition, by  Lewis, et.al. pages 20-36  C. Review Healthy People 2020 and QSEN (Patient Centered Care  websites)  D. NLN Population Health Course- complete Module One Online: hhtp://clnonlineeducation.com  Prior to class review power points.  In class questionnaire:  Focus on Diversity and Culture- How culturally competent are you?  After class reflect on your classroom, lab and clinical experiences.  How will you care for yourself?  How will awareness of other’s  Cultures and your caring behaviors influence patient care?  Also reflect on the one single intervention you could use to promote cultural competence if you are busy-ask the question: “What matters most to them in their illness and treatment?” | Exam  Clinical  performance  evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **1 hour**  **Lili Rafeldt** | **Unit: Stress and Coping**  Discuss the concept of physiologic adaptation to stress  Discuss models of stress used to predict individual responses  Compare the effects of short-term stress vs. long-term stress  Describe the physiologic and psychological responses to stress | 1. Stress and physiologic adaptation 2. Mechanisms of adaptation 3. Limitations of physiologic adaptation 4. Types of Stress 5. Work 6. Family 7. Chronic and acute 8. Daily Hassles 9. Trauma 10. Crisis 11. Adaptation and response to stress 12. Physiologic responses 13. Psychologic responses 14. Responses based on developmental factors 15. Responses based on cognitive level 16. Responses based on emotional level 17. The Nursing Process Related to Stress and   Coping   1. Assessment—subjective and objective data, through the patient’s eyes 2. Diagnosis—anxiety, ineffective coping, ineffective denial 3. Planning goals and outcomes for coping, enhancement and crisis intervention 4. Implementing interventions to reduce levels of anxiety 5. Evaluating 6. Case Studies | Assigned Readings:  A. Potter & Perry, Fundamentals of Nursing 9th edition, chapter 38  B. Varcarolis, Foundations of Psychiatric Mental Health Nursing, A Clinical Approach, Stress and Coping  C. Lewis, Medical-Surgical Nursing, Assessment and Management of Clinical Problems 10th ed., chapter 6.  D. Ackley, Nursing diagnosis Handbook, An Evidence-Based Guide to Planning Care 10th edition, Nursing Diagnosis: Anxiety, Ineffective Coping  In Class:  Discuss sources of stress for the patient and the nursing student    Discuss strategies to decrease stress    After Class:  Review content, Test Taking Anxiety PowerPoint and Killing the ANTS (Automatic Negative Thought) Strategies)  Review care plans related to case studies | Exam    Clinical performance evaluation  CLEW and reflections |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Lili Rafeldt** | **Unit: Sleep, Comfort and Pain**  Describe variations in sleep patterns across the lifespan  Explain factors that affect sleep  Describe common sleep disorders  Discuss interventions to promote sleep  Describe developmental and cultural factors that affect the pain experience  Discuss guidelines for selecting and individualizing pain therapies  Discuss use of non-pharmacologic pain therapies  Discuss pharmacologic  interventions for pain  Compare and contrast barriers to pain relief as they relate to nurses and patients  Differentiate tolerance, dependence, and addiction | 1. Physiology and Functions of Sleep 2. Developmental Sleep Patterns 3. Physiology/Factors Affecting Sleep 4. Common Sleep Disorders 5. Nursing Process and Sleep Disorders 6. The Nature of Pain 7. Types of pain 8. Concepts associated with pain 9. Physiology of Pain 10. Factors Affecting the Pain Experience 11. Cultural 12. Developmental 13. Pain history 14. Applying the Nursing Process to Pain Control | Prior to class  Assigned Readings and activities:  Potter & Perry, Chapters 43, 44  Review Pharmacology Made Easy (PME) types of analgesics and the quick tips of pain management—World Health Organization three-step analgesic ladder  In Class—group work  Use Sleep and Comfort Handout, Patient Traditional Sleep Diary with Readiness for Enhanced Sleep Diagnosis from Ackley to develop interventions for a patient  Question and answers  Pain: Myth or Fact questions  Power point pain presentation and discussion.  Question and answers  After class—review material, note pages of PPT, research article and complete case study of patient with pain.  Miller, J., Dunion, A., Dunn, N., Fitzmaurice, C., Gamboa, M., Myers, S., Novak, P., Poole, J., Rice, K., Riely, C., Sandberg, R., Taylor, D., & Gilmore, L. (2015). Effect of a brief massage on pain, anxiety, and satisfaction with pain management in postoperative orthopaedic patients. *Orthopeadic Nursing, 34* (4), 227-234. | Exam  Clinical performance evaluation  CLEW |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **3 hours**  **C. Gilot** | **Unit: Fluid and Electrolyte Balance**  Identify factors that influence normal  body fluid and electrolyte balance.  Collect assessment data of fluid and  electrolyte balance.  Identify nursing diagnosis and  actions to care for the patient with  fluid and electrolyte imbalances.  Describe acid base balance and the  role of the buffer systems.  Identify nursing diagnosis and  actions to care for the patient with an  acid base imbalance | A. Critical thinking: Body Fluids  1. Composition  2. Regulation  a. Intake and Output  b. Homeostasis  c. Fluid volume deficit  d. Fluid excess  i. Third spacing  ii. Evaluation of edema  B. Safe and Competent Care: electrolytes  1. Distribution  2. Regulation  3. Imbalances: hyper, hypo  a. Potassium  b. Chloride  c. Sodium  d. Magnesium  e. Calcium  f. Phosphate  4. Acid-base Balance  a. Hydrogen  b. Carbon dioxide  c. Sodium bicarbonate | **Assigned Readings:**  Potter & Perry, Chapter 42 p. 934-956  **Handouts:**  Crawford, A. & Harris, H. Fluid & Electrolyte Series Balancing Act: Calcium & Phosphorus. Nursing 2012, January Vol 42 #1, p. 36-42  Crawford, A. & Harris, H. Fluid & Electrolyte Series Balancing Act: Sodium & Potassium. Nursing 2011, July Vol 41 #7, p. 44-50  Crawford, A. & Harris, H. Fluid & Electrolyte Series Balancing  Act: Hypomagnesemia &  Hypermagnesemia. Nursing  2011, October Vol 41 #10, p. 52-55  Crawford, A. & Harris, H. Fluid & Electrolyte Series Balancing  Act: I.V. Fluids: What nurses need to know, Nursing 2011, May Vol 41, p. 31-38  Online article:  Steps to ABG Analysis | Exam  Clinical Experience |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **1 hour**  **Krista**  **Prendergast** | **Unit: Discharge Planning**  Describe the process of assisting the patient in Discharge Planning.  Identify the nurse’s role in preparing the patient for discharge.  Describe the coordination between different agencies a patient may use after hospital discharge. | A. Critical Thinking: Nursing Process   * 1. Home Health Teaching   2. Continuity of Care   3. Coordination of Health Services  1. Communication with transfer agencies    1. Preparing the patient for discharge. 2. Teaching 3. Referrals 4. Resources | Assigned Readings:  Potter & Perry Fundamentals 9th ed., Chapter 3  Perry and Potter Skills 9th ed., Chapter 2  EBP article: Graham, J. et al. (2013) Nurses’ discharge planning and risk assessment: behaviors, understanding and barriers. Journal of Clinical Nursing, 22, 2338-2346.  In class:  Case study group activity  After class application:  Work with coassign nurse in the clinical setting in assisting with patient discharge process | Exam  Clinical performance |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Lili Rafeldt** | **Unit: Teaching and Learning**  Identify the role of the nurse in patient teaching.  Describe the domains of learning.  Identify basic learning principles.  Identify factors that affect learning  Identify the cultural aspects of learning  Identify ways to assess the learning needs of the patient.  Describe an environment that promotes learning.  Identify methods to evaluate learning.  Develop a nursing diagnosis and plan of care that reflect the learning needs of a patient.  Discuss teaching strategies to facilitate patient learning | 1. Communication and Holistic care of the patient and family through education 2. Learning Theories 3. Factors affecting learning 4. Assessing readiness 5. Barriers to learning 6. Nursing Process related to teaching and learning | Assigned Readings:  Potter & Perry Text: Chapter 25 “Patient Education”  Simulated Teaching and Learning in Class Activity with Power Point Interaction  Checklist—what do you have in your institution?  After Class: review content and answer the unit objectives. Reflect on the teaching and learning activities you have completed in clinical with your patients. | Exam  Clinical performance evaluation  CLEW / Reflections |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Krista**  **Prendergast** | **Unit: Documentation and Reporting**  Discuss the purpose of a health care record  Compare and contrast different documentation methods  Discuss documentation needs of various health care settings  Discuss legal aspects of documentation  Relate the nursing process to documentation on the patient record  Describe the guidelines for effective reporting | 1. Safe and Competent Practice: Purpose of a   Patient Record   1. Documentation Systems    * + 1. Source-oriented record        2. Problem-oriented record        3. PIE        4. Focus charting        5. Charting by exception        6. Computerized documentation        7. Case management 2. Professionalism: Legal Aspects of   Documentation   1. Nursing Documentation 2. Acute care 3. Long-term care 4. Home care 5. Safe and Competent Practice: Guidelines for Documentation 6. Communication: Reporting 7. SBAR 8. Change of shift report 9. Care plan conference 10. Nursing rounds 11. Telephone reports 12. Telephone orders 13. Transfer reports 14. Incident reports | Assigned Reading:  Potter & Perry Fundamentals 9th ed., Chapter 26  Perry & Potter Skills 9th ed Chapter 4  In class:  Case study group activity using various written and verbal documentation and reporting methods.  iClicker questions  After class application:  Reinforcement of SBAR communication during lab simulation experiences.  In clinical setting, practice documentation and reporting methods learned through communication with instructor, peers and nursing staff. | Exam  Clinical performance evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **3 hours**  **C. Gilot** | **Unit: Nutrition**  Describe the role of the diet in promoting health  Identify the components of the  recommended dietary allowances (RDA),  basic four food groups and exchange lists  Describe the functions of proteins in health and in illness  Describe risks associated to Lipids  Discuss energy balance  Discuss alternative therapies as they relate to nutrition  Discuss ways in which information on food labels may help in food selection  Discuss body weight and body mass  Standards  Discuss essential components and purposes of nutritional assessment  Identify risk factors for and clinical signs  of malnutrition  Identify factors influencing nutrition  Describe nursing interventions to promote optimal nutrition  Discuss nursing interventions to treat  patients with nutritional problems | **A. Critical Thinking and Nutrition**  1. Food safety and labeling  2. Standards and regulations  3. Safe food handling  4. Balance of nutritional intake and activity expenditure  **B. Providing safe, holistic care**  1. Introduction to Nutrition Standards and Tools for Nutrition Planning  2. Dietary Guidelines for Americans  a. Definitions  b. *My Choices*  c. Basic Five Food  d. *My Plate*  e. Recommended Dietary Intake  (RDI)  f. *Health People Guidelines*  g. Specialized-*DASH-Dietary Approaches to Stop Hypertension*  h. Nutrition across the lifespan  **C. Basic Metabolic Requirements**  1. Body Weight Standards  2. Body mass standards  **D. Factors Affecting Nutrition**  1. Developmental stage  2. Activity level  3. Gender  4. Culture and ethnicity  5. Food beliefs  6. Personal preferences  7. Religious beliefs  8. Lifestyle  9. Economics  10. Health/illness  11. Advertising  12. Psychological factors  **E. Alterations in Nutrition**  1. Malnutrition  2. Over nutrition  3. Under nutrition  4. Protein-calorie malnutrition  5. Patient examples  **F. Nursing Process and Nutrition**  1. Assessment  a. Nutritional Screening  i. History  ii. Physical Examination  iii. Diet History  iv. Anthropometric measurement  v. Lab data  2. Nursing Diagnosis  3. Planning  4. Implementation  a. Special Diets  b. Diet modifications r/t disease  c. Assisting with meals  d. Assistive devices  e. Meal planning  f. Food assistance programs  g. Enteral/Parenteral nutrition  5. Evaluation  **G. Identify the value of nutrition in 21st century health care**  **H. Connect teaching and learning needs of patients, disorders and diets**  **I. Identify nutrition as a thread to learn throughout the curriculum** | Assigned Readings & activities:  **A.** Fundamentals of Nursing 9th edition, chapter 45 p. 1053-1082  **B.** Nursing diagnosis Handbook, An Evidence-Based Guide to Planning Care Nursing Diagnosis – Imbalance and Nutrition and Feeding Self-Care Patient  **Bring Diagnosis book to class**  **C.** EBP article, to be assigned  ***Before coming to class:***  1. Review Power Points  2. Bring in a canned food item for  review of food labels and donation to the food bank.  Identify factors influencing nutrition (e.g. ethnicity, culture, socioeconomic, medications) | Exam  Clinical Performance evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **1 hour**  **Lili Rafeldt** | **Unit: Spirituality**  Define concepts of spirituality as it relates to nursing care.  Identify characteristics of spiritual health. Identify factors associated with spiritual distress and manifestations.  Describe spiritual development across the lifespan.  Assess the spiritual needs of the patient and plan care.  Review interventions to support the patients’ spiritual beliefs.  Identify desired outcomes for evaluating the patients’ spiritual health. | 1. Define spirituality 2. Health-need for meaning and purpose, need for love and belonging, need for forgiveness 3. Distress 4. Holistic religious practices affecting nursing care. 5. Holy Days 6. Diet 7. Dress 8. Beliefs 9. Nursing Process related to the spiritual care of patients    * 1. Assessment—beliefs, practices, relationship between beliefs and everyday life, deficits or distress, needs, sudden behavioral changes      2. HOPE—sources of hope, meaning, comfort, strength, peace, love and connection, organized religion, personal spirituality and practice, effects on medical care and end of life issues      3. Diagnoses      4. Implementation      5. Evaluation-identify some spiritual belief that gives meaning and purpose to everyday life, move toward a healthy acceptance of current situation (illness, pain, suffering, impending death), develop mutually caring relationships, reconcile interpersonal differences that cause anguish, express peaceful acceptance of limitations and failures, express an ability to forgive others and live in the present, verbalize satisfaction with relationship with God / Higher being (if important to patient) | Assigned Readings:  A. Potter & Perry, Fundamentals of Nursing 9th edition, chapter 36  B. Lewis, Medical-Surgical Nursing, Assessment and Management of Clinical Problems-see spirituality in index  C. Ackley, Nursing diagnosis Handbook, An Evidence-Based Guide to Planning Care, Nursing Diagnosis: Spiritual Distress  Students share religious practices with the class. Discuss the role of the nurse in supporting patients in meeting spiritual needs.  In clinical:  Pre or post conference with Chaplin or spiritual liaison in the facility. | Exam  Clinical performance evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **1 hour**  **Krista**  **Prendergast** | **Unit: Sexuality**  Define sexual health.  Identify specific measures that promote sexual health.  Identify personal biases and beliefs related to sexuality.  Discuss the role of the nurse in sexual health promotion and health screening.  Utilize the nursing process in caring for patients with reproductive and sexuality issues | 1. Characteristics of Sexual Health 2. Age-related 3. Sexual self-concept 4. Body image 5. Gender identity 6. Gender-role behavior 7. Androgyny 8. Holistic Factors that Influence Sexuality    1. Family    2. Culture    3. Religion    4. Personal ethics 9. Assessment 10. Sexual history 11. Physical exam 12. Identifying patients at risk 13. Nursing Process related to sexuality | Assigned Readings:  Potter and Perry Fundamentals 9th ed., Chapter 35    Evidence based practice article: Wallace, M. (2008) Assessment of sexual health in older adults: Using the PLISSIT model to talk about sex. American Journal of Nursing, 108 (7), 52-60.  In class:  iClicker question activity  Sexual Attitudes and Beliefs Survey | Exam  Clinical Performance |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Krista**  **Prendergast** | **Unit: Legal and Ethical Principles**  Compare the concepts of ethics, moral and values.  Identify ethical principles.  Discuss various legal regulations that influence nursing practice.  Describe the legal considerations regarding: confidentiality, documentation, medical records.  Describe the legal controls governing the practice of nursing. | 1. Professionalism: Ethics in nursing 2. Professional values 3. Ethical terms 4. American Nurses Association 5. Code of Ethics 6. Nursing Standards 7. Ethical decision making 8. Selected ethical issues in nursing 9. Professionalism: Legal aspects in nursing 10. Legal aspects 11. SN and the law 12. Laws and nursing 13. Nurse practice act 14. Credentials 15. Liability 16. Selected legal issues 17. Malpractice 18. Elements of malpractice 19. Avoiding malpractice 20. Good Samaritan act 21. Liability insurance | Assigned Readings:  Readings: Potter and Perry Fundamentals 9th ed. Ch. 22&23  Listen to audio file of Legal and Ethical Principles power point on Blackboard  Read CT Nurse Practice Act- Definitions. Scope of practice  http://www.ctnurses.org/Main-Menu-Category/Nursing-Practice/Nurse-Practice-Act  Review Case Study and How to Conduct a Debate documents on Blackboard  In class:  Debate Activity  After class application:  Written Reflection Assignment submitted to Digication System | Exam  Clinical performance evaluation |

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| **HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **2 hours**  **Melissa Neill** | **Unit: Introduction to Mental Health and Illness**  Describe the holistic approach to sustaining health and well-being considering cultural, ethical and legal implications for patients dealing with mental illness.  Identify the psychosocial needs of all patients.  Define the Mental Wellness/Illness continuum according to the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV- TR).  Describe the elements of a mental status examination.  Discuss the application of Erikson’s theory of psychosocial development to the delivery of nursing care that is developmentally appropriate.  Explain the concepts of anxiety, posttraumatic stress disorder, depression, loss and grief.  Assess the impact of a patient with mental illness on family functioning  Determine the role of the nurse in the care and support of patients and families with mental health problems. | Holism: Define Emotional Health and emotional distress   1. Overview of implications related to caring for the patient with mental illness 2. Developmental 3. Cultural 4. Ethical 5. Legal 6. Factors that influence and impact patients with emotional disorders 7. Family functioning 8. Stress 9. Assessment of Mental Health and Illness 10. Mental Health and Illness on a continuum as per the DSM-IV-TR 11. Psychosocial Assessment 12. Physical Assessment 13. Elements of the Mental Status Examination     1. Appearance     2. Behavior     3. Speech     4. Mood     5. Disorders of Form of Thought     6. Perceptual Disturbances     7. Cognition     8. Ideas of Harming Self or Others 14. Integration of Erikson’s theory of psychosocial development 15. Nursing Implications in caring for common emotional disorders 16. Post-traumatic stress disorder 17. Depression 18. Loss and grief 19. Substance abuse | Assigned Readings:  Varcarolis-8th ed. Chapters 1,7  Potter & Perry – 8th edition, Self-Concept chapter 33  Varcarolis- Psych Mental Health Needs of the Medical-Surgical Patient- ON RESERVE IN LRC  Perform a psychosocial assessment on a patient  Case study | Exam  Clinical performance evaluation |

**CONNECTICUT COMMUNITY COLLEGE NURSING PROGRAM (CT-CCNP)**

*Capital Community College, Gateway Community College, Norwalk Community College,*

*Naugatuck Valley Community College, Three Rivers Community College*

**NUR\*101: INTRODUCTION TO NURSING PRACTICE**

**On Campus Clinical Laboratories**

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| **Library Services and Information/Technology Literacy Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:** |
| **Library Services:**   1. List nursing 2 major nursing databases and process of obtaining these databases on-line, hardcopy.   2. Discuss evidence-based nursing and sources to research for  current trends.  3. Demonstrate information literacy by completing an abstract  on nursing topic. | TRCC Librarian visit class to review healthcare databases and Nursing Library Gateway resources and their use in finding evidence-based practice literature.  Students utilize databases to find reference for Critical Thinking written assignment.  American Psychological Association (APA) format resource links and link to Writing Center provided.  Digication system overview. Demonstration on uploading a document. Students open account using Chromebook.  Blackboard use and myCommnet resources review. Students use Chromebook to navigate sites.  Assessment Technologies Institute (ATI) and Pharmacology Made Easy (PME) sign on and access review. Students open account using Chromebook. Learning resources navigated by students. |
| **Information/Technology Literacy:**   1. Define information literacy, technological literacy and evidence-based practice (EBP). 2. Identify differences between information and technological literacy. 3. Demonstrate use of technologic resources. 4. Identify 5 elements to evaluate web sites.   4. Discuss how Information Literacy and Technological  Literacy support EBP. |

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| **Introduction CT-CCNP Core Values Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Identify course content, core values, (Critical Thinking, Safe and Competent Practice, Holism, Caring, Communication, Professionalism) and course outcomes. | Review Syllabus, Formative Evaluation, and Multiple-Choice Questions lab station |
| 1. Discuss professional role of the registered nurse. 2. Identify value of self-assessment and reflection: Observing, Interpreting, Judging, Planning 3. State the importance of organization, holism, caring and lifelong learning as they relate to nursing. | In lab:  Review NUR\*101 Syllabus and Formative Evaluation. Discuss how Core Values are used to guide course objectives and evaluation process in course and clinical setting.  Multiple choice exam question activity. Apply nursing process in answering practice multiple choice questions as part of evaluation process in meeting course objectives. |

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| **Nursing Care of Clients Requiring Respiratory Support Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss the principles of oxygen therapy. | Respiratory Support/Oxygenation lab station  Asthma Simulation lab station  In lab:  Discuss safe use of equipment used to assess and support effective oxygenation  Demonstrate correct application and use of various oxygen delivery systems in case study-respiratory support gallery  Practice patient positioning, application of oxygen device, and collaboration with respiratory therapy to improve patient oxygenation during asthma simulation |
| 1. Distinguish between different types of oxygen delivery systems. |
| 1. Discuss the principles of incentive spirometry. |
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| **Medical Asepsis and Precautions Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Demonstrate principles of basic medical asepsis: 2. Hand washing with water and Hand hygiene with waterless antiseptic agents 3. Donning and removing clean gloves. 4. Identify clinical settings where basic medical asepsis would be applied. 5. Discuss the importance of standard and transmission-based precautions. 6. Identify clinical situations when personal protective equipment (PPE) is used: 7. Gloves 8. Masks 9. Eye Protection 10. Gowns 11. Exposure 12. Demonstrate competence related to OSHA standards | Medical Asepsis/Standard Precautions lab station  Personal Protective Equipment lab station  In lab:  Discuss chain of infection and use of standard precautions with all patients  Review patient cases where transmission-based precautions are utilized  Demonstrate appropriate use of alcohol-based hand sanitizer  Practice effective hand washing with soap and water in Glo-Germ activity  Participate in case study activities where appropriate personal protective equipment is chosen and safely donned and doffed  Personal Protective Equipment Validation |

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| **Safe and Competent Medication Administration Lab** |  |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab stations |
| 1. Discuss the principles of medication administration    1. Legal aspects    2. Ten “rights” of medication administration | Dosage Calculation Math Practice lab station  Medication Administration-PO-Oral lab station  Medication Administration-Other Routes lab station  Medication Administration-Injections lab station  In lab:  Calculate correct dose of medication using provider order and supply  Demonstrate safe administration of oral medication in simulation using 6 rights and 3 checks  Practice safe injection techniques for various injection routes  Discuss preparation and administration of medications having routes other than parenteral or oral  Medication Administration Validation |
| 1. Discuss different medication dispensing systems    1. Unit dose    2. Medication cart    3. Computerized dispensing systems |
| 1. Discuss principles of administering oral/sublingual medications    1. Ascertaining correct dosing    2. Inspecting & opening unit dose packaging    3. Pouring liquid medication |
| 1. Discuss principles of injectable medication administration    1. Identify parts of the syringe    2. Discuss needle gauges    3. Safety aspects related to sharps materials    4. Pre-filled unit dose syringe systems |
| 1. Prepare & administer parenteral medications    1. Draw medications from vial & ampules    2. Discuss principles of reconstituting a powdered medication    3. Demonstrate reconstituting a powdered medication    4. Discuss the principles of combining medications in one    5. syringe |
| 1. Discuss principles of selecting sites for injectable medications    1. Identify locations for SQ & ID injections    2. Identify locations for administration of IM injections    3. Identify bony landmarks for IM injections |
| 1. Discuss nursing considerations when administering anti-coagulants & insulin SQ |
| 1. Discuss other routes of medication administration    1. Inhalation    2. Transdermal    3. Skin – Ointments/creams/lotions    4. Eye, ear, nose    5. Rectal, vaginal |
| 1. Discuss aspects of charting medications    1. Legal aspects    2. Written record    3. Computerized record    4. Bar code |

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| **Vital Signs Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss and implement principles of measuring a client’s vital signs. | Vital Signs-BP lab station  Vital Signs-Temperature, Heart Rate, Respiratory Rate, Oxygen Saturation lab station  In lab:  Demonstrate proper technique in assessing vital signs on simulation mannequins  Practice vital signs assessment on classmates  Discuss normal and abnormal vital sign data and implications for safe patient care  Apply knowledge of safe use of equipment: stethoscope, sphygmomanometer, blood pressure cuff, thermometer, pulse oximeter, watch with second hand  Vital Signs Validation |
| 1. Demonstrate recording vital signs. |
| 1. Accurately obtain a temperature    * 1. Identify locations for measuring temperature on a client      2. Demonstrate measuring body temperature. |
| 1. Accurately obtain a pulse 2. Discuss locations for measuring pulses on a client 3. Describe apical and pulse points 4. Demonstrate measuring an apical pulse on a classmate |
| 1. Accurately obtain a respiratory rate. 2. Demonstrate measuring a respiratory rate on a classmate |
| 1. Accurately obtain a blood pressure 2. Discuss systolic and diastolic readings 3. Discuss cuffs and appropriate application of cuff 4. Demonstrate measuring a blood pressure |

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| **Hygiene Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Demonstrate clinical application to maintain the patient’s personal hygiene:    1. provision of privacy    2. bathing    3. mouth, foot and hair care    4. bony prominences    5. use of compression devices to prevent venous stasis and emboli formation 2. Apply principles of bed making:    1. Occupied    2. Unoccupied    3. Orthopedic bed 3. Differentiate when to make an occupied or unoccupied bed 4. Demonstrate safe and competent practice when applying principles of body mechanics during bed making | Hygiene lab station  In lab:  Reflect on how the core values and nursing assessment / implementation connects to hygiene practices  Simulation hygiene practice interacting with Power Point Key Principles |

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| **Head to Toe Assessment Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss the purposes of physical assessment. | Head to Toe Assessment Power Point and Video lab station  Physical Assessment Simulation lab station  Head to Toe Simulation lab station  In lab:  Demonstrate proper physical assessment techniques for various body systems  Differentiate between normal and abnormal physical assessment findings during physical assessment simulation  Apply physical assessment skills in simulation using standardized patients  Head to Toe Assessment Validation |
| 1. Interview client to obtain health history applying principles of therapeutic communication |
| 1. Discuss the four examination techniques used during physical assessment. |
| 1. Assist in positioning the client for each phase of the physical examination. |
| 1. Use proper equipment to perform the physical assessment. |
| 1. Begin assessment with general survey of the client to include:    1. Overall appearance and body position    2. Pain/distress level (if any)    3. Mood/behavior |
| 1. Perform a basic Neurological assessment to include:    1. Facial symmetry    2. Level of consciousness (A&Ox3)    3. Ability to follow commands |
| 1. Perform a basic Cardiovascular assessment to include:    1. Vital signs (including apical pulse)    2. Skin color, temperature, and moisture    3. Capillary refill    4. Peripheral edema, pedal pulses, and Homan’s sign |
| 1. Perform a basic Respiratory assessment to include:    1. Chest shape and symmetry    2. Respiratory rate and effort    3. Use of oxygen therapy (type and amount)    4. Lung auscultation (anterior and posterior)    5. Oxygenation saturation measurement |  |
| 1. Perform a basic Gastrointestinal assessment to include:    1. Type and tolerance of diet, presence/absence of nausea, vomiting, belching, bloating, diarrhea, or constipation    2. Date of last BM, passing flatus    3. Abdominal assessment (inspection, auscultation, palpation)    4. Presence of feeding tube |  |
| 1. Perform a basic Urological/fluid balance assessment to include:    1. Oral mucous membranes/tongue    2. Skin turgor    3. Presence of intravenous fluid    4. Elimination pattern (frequency, volume, symptoms of dysuria, presence of indwelling catheter/tube)    5. Intake and output for past 24 hours    6. Daily weights (if indicated) |  |
| 1. Perform a basic Integumentary assessment to include:    1. Skin color, temperature, moisture    2. Presence/absence of redness, edema, or lesions over pressure areas (sacrum, hips, elbows, heels, ankles)    3. Presence/absence of rashes or excoriations especially in skin folds (under breasts, abdominal and groin folds)    4. Presence of wounds or dressings |  |
| 1. Perform a basic Musculoskeletal/Safety assessment to include:    1. Upper extremity sensation & mobility (ability to perform hygiene and feeding)    2. Lower extremity sensation & mobility (ability to reposition in bed, transfer OOB, and ambulate with or without assistive devices)    3. Use of artificial sensory devices (eyeglasses, hearing aids, dentures)    4. Client safety protocols (fall risk, aspiration risk, bed in low position, bed wheels locked, side rails up, call light in reach, clean & uncluttered environment) |  |
| 1. Document assessment findings. |  |
| 1. Communicate abnormal findings to appropriate member of health care team. |

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| **Body Mechanics Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Utilize principles of safe body mechanics while:    1. Ambulating a client    2. Turning and positioning a client    3. Transferring a client    4. Lifting a client | Transfer with Body Mechanics lab station  Mobility with Body Mechanics/Restraints/Turns/Bed Alarms lab station  In lab:  Use various assistive devices and lifts to practice safe patient mobility and transfer  Apply safe turning and positioning techniques with classmates  Practice safe restraint application and use. Discuss legal implications of restraints  Demonstrate use of bed and chair alarms  Perform range of motion exercises with classmate |
| 1. Demonstrate safe technique while    1. Ambulating a client    2. Turning and positioning a client    3. Transferring a client    4. Lifting a client |
| 1. Discuss principles of active and passive range of motion.    1. Demonstrate active and passive range of motion exercises |
| 1. Discuss principles of using restraints    1. Reasons    2. Safety    3. Demonstrate applying restraints    4. Discuss client alarm systems |

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| **Nursing Care of Clients with Diabetes; Blood Glucose Monitoring and Control Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss the difference between Type 1 and Type 2 Diabetes | Insulin Drawing Up and Mixing and Blood Glucose Monitoring lab station  Hyper/Hypoglycemia Simulation lab station  In lab:  Use the nursing process to plan care for the patient with diabetes in the acute care and outpatient settings  Demonstrate safe technique in assessing capillary blood glucose and the interpretation of results using glucometer.  Differentiate between different insulin types and practice drawing up and mixing insulin in syringe as appropriate  Apply skills in the care of a patient with hyper and hypoglycemia during the Hyper/Hypoglycemia simulation |
| 1. Compare and contrast the signs and symptoms of hyperglycemia and hypoglycemia. |
| 1. Discuss the normal parameters for blood glucose |
| 1. Discuss the diagnostic and clinical significance of blood glucose monitoring |
| 1. Discuss appropriate equipment for blood glucose monitoring |
| 1. Discuss the accurate use of the Blood Glucose Monitor (Glucometer). |
| 1. Discuss the use of the sliding scale. |
| 1. Compare and contrast the different types of insulin. |
| 1. Compare and contrast approaches to insulin administration (i.e. basal rate and bolus). |

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| **The Nursing Process Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss the use of critical thinking in clinical practice. | Nursing Process lab station  Case Study-CLEW lab station  Lab Value Review lab station  In labs:  Use you Diagnostic Text by Ackley and Potter and Perry Text to assess, diagnosis, and plan nursing care of assigned case studies.  Peer review each other’s care plan.  Discuss efficient ways to complete nursing care plans. |
| 1. Describe the components of the nursing process. |
| 1. Review assigned case study to collect data needed to complete Clinical Learning Experience Workbook Component (CLEW): Nursing Assessment. |
| 1. Use assigned case study to collect data needed to complete CLEW: Laboratory and Diagnostic Studies, Medication Therapy, Pathophysiology Map. |
| 1. Use appropriate references/resources to complete lab rationales for abnormal values, medication information, and pathophysiology map on CLEW form. |
| 1. Complete CLEW: data analysis page. |
| 1. Complete CLEW: nursing care plan page. |
| 1. Verbalize understanding of how to complete CLEW: reflection on the clinical learning experience page. |

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| **Nutrition and Feeding Lab** |  |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss concepts related to client feeding:   * 1. Types of diets   2. Principles of feeding   3. Aspiration Precautions   2. Measure height and weight accurately | Nutrition and Feeding and Intake and Output lab station  In lab:  Discuss nutritional screening and body mass index assessments  Select and explain progressive and therapeutic diets for a variety of patient conditions  Demonstrate safe feeding and swallowing techniques with classmate using aspiration precaution procedures |

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| **Intake and Output Lab** |  |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Implement principles of intake and output accurately:   * 1. Metric system conversion   2. Measuring intake   3. Calculate intake   4. Document intake   5. Measuring output   6. Calculate output   7. Document output | Nutrition and Feeding and Intake and Output lab station  In lab:  Calculate and document the intake and output of a patient case study over a 24-hour period, using various measurement devices. |

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| **Principles of Surgical Asepsis and Wound Care Lab** |  |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss principles of surgical asepsis. 2. Compare and contrast differences between medical and surgical asepsis. | Surgical Asepsis/Wound Care/Dry Sterile Dressing lab station |
| 1. Review types of dressings and associated procedures:    1. wet to dry dressings    2. dry sterile dressing    3. vacuum dressings    4. other types    5. associated procedures:       1. wound irrigation and packing       2. wound culture       3. Montgomery straps 2. Identify appropriate use of types of dressings in the clinical setting. 3. Utilize evidence from literature to support practice. 4. Demonstrate critical thinking when choosing a type of dressing in various client scenarios. | In lab:  Discuss surgical asepsis  Practice dry sterile dressing change technique  Use wound formulary to choose appropriate dressing type for various wounds and skin conditions  Examine various wound drainage devices and their therapeutic effects on wound healing  Dry Sterile Dressing Validation |
| 1. Differentiate between various wound drainage devices    1. Penrose    2. Hemovac    3. Jackson Pratt    4. Wound VAC 2. Identify clinical rationales for drainage of wounds. |  |
| 1. Demonstrate sterile technique    1. Don and remove sterile gloves using surgical aseptic technique    2. Open sterile gauze packages using surgical aseptic technique    3. Apply sterile dressing. |  |
| 1. Discuss legal aspects of client documentation related to wound care. |  |
| 1. Document for a client needing wound care utilizing the nursing process. |  |
| 1. Differentiate care of a pressure ulcer in comparison to a surgical wound. 2. Identify assessment, diagnosis, planning, implementation and evaluation strategies which are the same and those that are different. 3. Identify risk factors for development of pressure wounds and plans to deter development of the same |  |

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| **Principles of Intravenous Therapy Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss principles of IV therapy    1. Types of solutions       1. Hypertonic       2. Hypotonic       3. Isotonic    2. Types of tubing 2. Compare and contrast clinical scenarios where different solutions   would be administered in a safe and competent manner. | I.V. Set Up System, Drip Rates, Discontinuing I.V. Catheters lab station  In lab:  Discuss different I.V. solutions used to manage various patient conditions  Describe normal and abnormal I.V. site assessment findings  Practice aseptic technique in setting up an I.V. system  Calculate accurate I.V. drip rates as ordered  Demonstrate skill of discontinuing I.V. infusion and removing I.V. catheter  Review electronic infusion pumps and setting infusion rate as ordered  Administration of I.V. Therapy Validation |
| 1. Calculate IV drip rates using various drip factors. |
| 1. Demonstrate hanging an IV   a.       Maintenance of asepsis  b.      Spike and prime IV tubing  c.       Complete IV bag and tubing labels  d.      Regulate the IV drip rate |
| 1. Discuss principles of electronic infusion devices (i.e. IV pumps). 2. Compare and contrast safe use of gravity IVs and electronic   Infusion devices.   1. Demonstrate use:   a.       Electronic or Gravity infusion  b.      Setting up system |

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| **Nursing Care of Clients in Support of Urinary and Bowel Elimination Lab** | |
| **Learning Objectives**  Upon completion of the Learning Laboratory the student will be able to: | **Suggested Learning Activities:**  See Blackboard for pre-reading and activities to be completed before lab |
| 1. Discuss principles of maintaining optimal urinary and bowel function. | Urinary Elimination lab station  Bowel Elimination lab station  In lab:  Demonstrate safe technique in use of various urinary and bowel elimination assistive devices  Practice bowel and urinary specimen collection procedures using sample equipment  Discuss case studies of the patients with urinary and bowel elimination problems and therapeutic interventions  Use proper body mechanics in assisting a classmate on and off of a bedpan |
| 1. Discuss care of the client with complications related to urinary and bowel elimination. |
| 1. Discuss devices used to assist client with urinary and bowel elimination. |
| 1. Discuss nursing care for a client with an external condom catheter. |
| 1. Discuss nursing care for a client with an indwelling urinary catheter. |
| 1. Demonstrate placing and removing a bedpan. |
| 1. Discuss procedure for administering an enema. |
| 1. Discuss procedure for collecting urine and fecal specimens. |
| 1. Test selected urine and fecal specimens: occult blood; urine dipstick. |