# CONNECTICUT COMMUNITY COLLEGE NURSING PROGRAM (CT-CCNP)

Capital Community College, Gateway Community College, Naugatuck Valley Community College, Northwestern Connecticut Community College, Norwalk Community College, Three Rivers Community College

# **NUR 102: FAMILY HEALTH NURSING**

# **Course Prerequisite**

NUR 101: Introduction to Nursing Practice; PSY 111: General Psychology; BIO\*235: Microbiology

#### **Course Corequisite**

NUR 103: Pharmacology for Families Across the Life Span; PSY 201: Life span Development; SOC 101 Principles of Sociology

# **Course Components**

Credits: 8 credits Hours: Classroom: 60 hours + Clinical: 180 hours

#### **Course Description**

The student will focus on issues affecting the family, including childbearing, childrearing, geriatric care and intermediate health care needs of limited duration. The medical surgical health problems include care for the client in the perioperative period and the client experiencing orthopedic and simple genitourinary conditions. The course addresses several psychiatric disorders: anxiety and cognitive disorders, common child and adolescent psychiatric disorders. The student will have clinical rotations that provide experience caring for the childbearing family as well as caring for medical-surgical clients across the lifespan.

#### **Course Objectives (Student Learning Outcomes)**

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

1. Apply principles of holism in providing nursing care for individuals and/or families from diverse cultures across the lifespan. (as measured by exam questions, Simulation exercise, reflective journals, CLEW, formative and summative clinical evaluations)

7/30/2019

- 2. Demonstrate application of the nursing process when providing nursing care to individuals and/or families across the lifespan. (as measured by exam questions, Simulation exercise, case studies, reflective journals, CLEW, formative and summative clinical evaluations)
- 3. Administer safe and competent care to individuals and/or families using evidence-based practice, quantitative reasoning, and technological competence. (as measured by exam questions, case studies, reflective journals, Simulation exercise, CLEW, formative and summative clinical evaluations)
- 4. Demonstrate effective communication when interacting with individuals, families, and members of the health care team. (as measured by exam questions, case studies, Simulation exercise, CLEW, formative and summative clinical evaluations)
- 5. Implement a basic teaching plan for individuals and/or families with a learning need across the life span. (as measured by exam questions, CLEW, formative and summative clinical evaluations)
- 6. Foster a caring environment by demonstrating respect for individuals and/or families across the life span. (as measured by exam questions, case studies, reflective journals, Simulation exercise, CLEW, formative and summative clinical evaluations)
- 7. Demonstrate a basic ability to function as a member of the health care team. (as measured by exam questions, case studies, Simulation exercise, CLEW, formative and summative clinical evaluations)
- 8. Exhibit accountability and responsibility when providing nursing care to the individual and families across the lifespan. (as measured by exam questions, case studies, Simulation exercise, reflective journals, CLEW, formative and summative clinical evaluations)
- 9. Assume responsibility for personal growth and professional role development. (as measured by exam questions, reflective journals, CLEW, formative and summative clinical evaluations)

Unit Objectives: refer to class outline

#### **Course Schedule**

Lecture: Wednesdays 8:30-10:30 or 11AM and 12:30-2:30PM College Laboratory: 8:00 or 8:30 AM to 2:30 or 3 PM four days as noted on calendar. Two Day Clinical experience as assigned. Please see course calendar and Blackboard for specifics of classroom and clinical experiences.

#### **Methods of Instruction**

This course is team-taught. Teaching modalities include lecture, discussion, simulations, case studies, demonstration, return demonstration, guest speakers, experiential exercises, small group activities, and clinical practice. Computerized programmed instruction and video and are also used. Blackboard Learn and Digication are used as learning management tools. It is advised to direct questions on course content to the professor responsible for that content.

#### Required Textbooks: (All textbooks are used in subsequent courses)

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

Durham, R, & Chapman, L, Maternal-newborn nursing the critical components of nursing care 3rd ed. Philadelphia: F.A. Davis Company, 20103. 9780803637047

Hockenberry, M. J., & Wilson, D. (2016) Wong's essentials of pediatric nursing. 10<sup>th</sup> ed. St. Louis: Sauders/Elselvier 9780323353168

Lewis S. et al. (2017). Medical Surgical Nursing: Assessment and Management of Clinical Problems (10<sup>th</sup> ed.). St. Louis, MO: Elsevier. 978-0-323-06581-8

Pickar, G.D., & Abernethy, A.B. (2013). Dosage Calculations (9th ed.). Clifton Park, NY: Thomson/Delmar. 9781133707271

Perry, A. & Potter, P. (2018). Clinical Nursing Skills and Techniques (9<sup>th</sup> ed.). St. Louis, MO: Elsevier. 978-0-323-40069-5

Potter, P & Perry, A. (2017). Fundamentals of Nursing (9<sup>th</sup>ed.) St. Louis MI: Mosby/Elsevier. 978-0-323-32740-4

Van Leeuwen, A. M. (2015). Davis' Comprehensive Handbook of Laboratory and Diagnostic Tests with Nursing Implications (6<sup>th</sup> ed.). Philadelphia: FA Davis. 978-0-803-64405-2

Vacarolis, E.M., Carson, V.B., & Shoemaker, M.C. (2013). Foundations of Psychiatric Mental Health Nursing: A Clinical Approach (7<sup>th</sup> ed.). St. Louis, MO: Elsevier. 978-1-415-575358-1

Optional Textbooks: No assigned readings are from these texts. They are for your information only.

Dillon (2015) Nursing Health Assessment (3rd ed.) Philadelphia, PA: F.A. Davis. 9780803644007

Buchum, J., & Rosenthal, L. (2016). Lehne's Pharmacology for Nursing Care (9th ed.). St. Louis, MI: Mosby/Elsevier. 9780323321907

Purnell, L.D., & Paulanka, B.J. (2014). Guide to Culturally Competent Health Care (3rd ed.). Philadelphia, PA: F.A. Davis. 9780803639621

Dudek, (2011). Nutrition Essentials for Nursing Practice (8<sup>th</sup> ed.) 978149635109

Sommers, M.S., & Fannin, E. (2015). Diseases and Disorders: A Nursing Therapeutics Manual (5th ed.). Philadelphia, PA: F.A. Davis. 9780803638556

Wilkinson, J.M. (20011. Nursing Process and Critical Thinking (4th ed.). Upper Saddle, New Jersey: Pearson/Prentice Hall. 9780132181624

A medical dictionary is helpful-2 good ones are:

Mosby's Dictionary of Medicine, Nursing, and Health Professions, 10th ed, 2017) St. Louis, MO: Elsevier. 9780323414258

or Taber Cyclopedic Medical Dictionary (2017) (23rd ed.). Philadelphia, PA: F.A. Davis. 9780803659049

# **Director of Nursing and Allied Health:**

Edith Ouellet, M.S.N., RN, Associate Professor. Office: C 245

Phone & Voicemail: (860) 215-9460 E-mail: eouellet@trcc.commnet.edu

Rhonda Charette, Assistant to the Director Office: C 245 Phone & Voicemail: (860)

215-9301 E-mail: rcharette@trcc.commnet.edu

# **Course Coordinator**

Anne Lamondy, M.S.N., WHNP- BC., Professor <u>alamondy@trcc.commnet.edu</u> Office: C212 Faculty Offices Phone & Voicemail: 860-215-9447

#### **Full – Time Faculty**

Cynthia Arpin, M.S.N., R.N., Assistant Professor, <u>carpin@trcc.commnet.edu</u> Office: C220 Faculty Offices Phone & Voicemail: (860) 215-9465

Melissa Neill, M.S.N., R.N. Assistant Professor mneill@trcc.commnet.edu Office: C 246 Faculty Offices Phone & Voicemail: (860) 215-9477

Suzanne Turner, M.S.N., R.N., Assistant Professor, <u>sturner@trcc.commnet.edu</u> Office: C240 Faculty Offices Phone & Voicemail: (860) 215-9482.

#### **Part-Time Faculty:**

Bernadette Marshall, M.S.N., R.N.; Kelsey Panosky, M.S.N., R.N.; Kathleen Gauthier, C.N.M.; Martha Healy, M.S., R.N.; Cory Herrick, M.S.N., R.N.; Leanne Larose, M.S.N., R.N., Sandra Basley, M. S. N., R.N.

#### **Nursing Lab Tutors:**

Denise Cartegnia, M.S.N., R.N. Nursing Lab Coord. dcartegnia@trcc.commnet.edu or BB Learn

# Faculty / Staff Availability

Students are encouraged to seek clarification with the course coordinator 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. All faculty, staff and peers look forward to your success and practice as a registered nurse. Please utilize your time and ours to develop your abilities to the fullest.

#### **Nursing Program College Facilities**

Faculty offices are located within C wing second floor. The College lab is located in the A wing second floor. Computer labs are located within the nursing lab and throughout the campus (library and E wing). The Library is located in the C wing first floor.

# **Nursing Program Clinical Facilities**

William W. Backus Hospital, Norwich CT, Lawrence and Memorial Hospital, New London CT, Manchester Community Hospital, Manchester, CT, Day Kimball Hospital, Putnam, CT, Norwich, Sayles & Plainfield Public Schools, Construction Surgical Center

Please see Nursing Handbook for clinical dress code.

# **Exam Policy**

<u>Testing Procedures</u>: The standard time allotment for each exam in the CTCCNP is 60 minutes. Students with learning differences requiring accommodations for extra time are usually allowed 90 minutes. The nursing faculty has agreed to grant the extra 30 minutes to all students. Doors will open at 8:15 AM, and bubble sheets will be available. Exams will start promptly at 8:30. Students must be in the testing room and ready to start their exam at that time. Any student arriving after 8:45 will not be admitted and will need to take the make-up exam at the end of the semester. No questions will be answered by the proctors during the exam. Note: The extra time allowance does not include validation math test. All students are allowed one hour to complete the math test.

- Students are required to complete the answer sheet as directed, which includes student name, **accurate Banner ID number** and correct alternate test designation.
- Students will have maximum one and a half hour to complete exams and 3 hours to complete the final exam
- Students may not leave the exam room for any reason and return to the exam
- All books, coats, backpacks, bags, etc. must be left in your car or placed in the front of the exam room.
- Cells phones turned *off*.
- Eating and/or drinking are not permitted during exams
- Students may not wear hats during exams
- Students may not wear "smart watches" during the exam
- For mathematical calculations, the school will provide calculators.
- Wooden #2 lead pencils are to be used, no mechanical pencils
- Anyone who looks at another student's exam or who is seen talking either to himself or herself or to someone else during the exam may receive a zero grade.
- Exam scores will be posted on Bb within 48 hours of taking the exam
- Tardy or absence
  - o It is expected that all students will be present and punctual for exams.
  - O In the event that the student will be absent for personal illness or extenuating circumstances, the student must notify the course coordinator prior to 8 AM. on the morning of the exam. Failure to do so may result in a grade of zero for that exam. Any 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.
  - o Planned absences for vacations are not valid reasons for missing an exam.
  - o If warranted, one makeup exam will be offered at the end of the semester.

Exams	Date	Weight
Exam 1	9/11/19	15%
Exam 2	10/2/19	15%
Exam 3	10/23/19	15%
Exam 4	11/13/19	15%

Exam 5	12/4/19	15%
Final *	12/11/19	25%

\*In order to take the final exam, you must bring documentation with your signature that you have completed the on-line course evaluations for N102 & 103 to the final exam.

		Friday 9/6/19
Med Calculation Exam	A 216 &220	Passing ≥ 90%
		1 assing 2 70 /0

**Examination Schedule: All Are Taken in the Multipurpose Room (MPR)** 

# **Grading Policies**

To pass Nursing 102 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. Test items are drawn from ALL content of the course; theory, lab, clinical and math.
- Pass the clinical component of the course in a satisfactory manner.
- Pass Dosage Calculation Competency with 90% accuracy. Students may 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 the clinical skills validation. If a student fails one of the two validations assigned to him/her on validation day- he/she must now also pass the third validation skill as well. 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 second attempt will be required to test on all three skills with fulltime faculty. If a student fails any one of the three skills during this testing he/she will be dismissed from the nursing program as a clinical failure. See Nursing Student Handbook.
- ATI Exam- Prior to the end of the semester all students will take two standardized ATI exams- one covers M/S content and one covering OB content. Depending on student's level of achievement up to three points can be earned. The points earned will be added to the grade earned on the final exam.

#### **Evaluations:**

Clinical: A conference will be scheduled by the learner with his/her clinical instructor

week. A formative clinical evaluation form will be completed by the instructor and reviewed by the student at these times. Clinical performance is evaluated on the basis of how well the learner meets the objectives and achievements 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. Students will submit their Assessment Collection Tool and Nursing Care Plan as assigned. A summative evaluation will be completed and reviewed at the end of the semester.
□ <b>Theory:</b> There will be five <i>90 minute exams</i> (with 40 questions on each exam) and one 3 hour cumulative final examination (with 100 questions) in Nursing 102. The exams will start at 8:30AM. Class will resume promptly at 10 AM.
□ <b>Weight:</b> 5 exams, each worth 15% = 75% of total grade. Final examination = 25% of total grade. The five exams plus the final = the letter grade in the course.
☐ The final course grade also requires a satisfactory evaluation for clinical performance and successful completion of the Med Math test and Clinical Validations.
The grading criteria are:
A 93-100, A- 90-92,
B+ 87-89, B 83-86, B- 80-82
C+ 77-79, C 74-76
D+ 67-69, D 64-66, F 0-63
<b>EVALUATIONS:</b> The student must complete evaluations for the course, faculty, and clinical instructor/s before grades will be released.
Nursing Program Policy Handbook: The student is responsible for content in the
TRCC and Nursing Program Handbooks.
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
☐ Professional conduct in classroom, lab and clinical
☐ Return if withdraw
☐ Inability to return under certain circumstances
□ 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.
□ Clinical Absenteeism Policy: The student who is absent for one clinical day will receive a PIP. A second 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 <b>2 absences</b> (M/S), 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 <b>greater than one absence in a specialty area</b> (ex. OB, Psych), 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.
□ <b>Test Make-Up Policy:</b> If you must be absent from a scheduled test due to illness or other emergency, contact the course coordinator by 8:00AM. on the morning of the test 860-215-9447. <i>Failure to do so may result in a grade of zero for that exam. Any 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. Students with an approved absence from scheduled tests will be given an alternate form of the examination at a time and date toward the later part of the semester.</i>
☐ 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 the current 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. Visit https://help.blackboard.com/Moodlerooms/Student/Create or Modify Content/A ssignments/SafeAssign

□ Additional Expected Activity Requirements: Students are expected to participate in class discussions, role-play, group presentations, simulations, material review and lab 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; Select CLEW(s), Reflection(s), Process Recording, and Geriatric nursing Assignment to Digication.

# ☐ Study Groups

Students are encouraged to form study groups which can meet in the lab or at the groups' mutual location choice. Tutors within the nursing lab are available also during posted hours of the Nursing Laboratory. Students are encouraged to be proactive in their learning and seek help independently. Referrals may be made by faculty for lab and theory improvement. The Nursing Lab and Nursing Tutors are in place to promote success and retention. Students are encouraged to utilize these independent opportunities weekly. Practice materials are within your N102 Course Shell on Blackboard Learn, Text book Web Sites and CDs / DVDs, material within the nursing laboratory and library. Sample exam questions can be found within these materials. Some students have recommended the following book for practice with first semester Nursing Exam Questions. It is available to use in our nursing laboratory.

 Nugent, P. A., & Vitale, B. A. (2018). Test Success, Test-Taking Techniques for Beginning Nursing Students (8th ed.). Philadelphia: F.A. Davis. ISBN: 978-0-8036-6909-3

#### Classroom Behavior

Demeanor is a vital part of participation. Students should behave appropriately at all times and are asked to practice common courtesy, recognizing each person's right to learn in an atmosphere conducive to the learning experience. Students who violate the rules of courtesy and/or professional demeanor will be asked to leave. Students are required to attend all class meetings. 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. Students who receive an *overall* unsatisfactory clinical grade at any time in the rotation will fail this course and receive a grade of F. Students who receive a clinical grade of Fail should consult the Student Handbook for CT-CCNP policies. This course does not offer midterm theoretical warning grades. Students with concerns about their course average are encouraged to contact the course coordinator.

# **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.

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

7/30/2019

"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 Marie Krug, Title IX Coordinator: Office C131 MKrug@trcc.commnet.edu

#### CLINICAL CANCELLATION DUE TO INCLEMENT WEATHER: When the

college is closed for reasons of inclement weather, clinical experiences will also be canceled. When the college delays opening, clinical experiences will also have a later start time. 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 and the appropriate nursing unit. Preplanning and communication with your clinical instructor and course leader is important. (The College Student Handbook and Catalog lists radio stations announcing cancellations.) There also will be a notice of delays or cancellation on a recording at 860-215-9000, posted on the Three Rivers Web Page: www.trcc.commnet.edu, Blackboard Learn. *It is strongly encouraged you sign up for Early Alert (notification via email or text)*.

#### **GERIATRIC NURSING PRESENTATIONS:**

Each clinical group will deliver a presentation that covers a portion of the geriatric nursing care content, using real case scenarios from your medical/surgical nursing experiences. Each clinical group will receive a topic (TBD), and each presentation will be a maximum of 20-30 minutes. The presentations will take place during class time. Each student will have the opportunity to earn up to 2 points on the exam that includes the geriatric content.

Please refer to the syllabus and curriculum objectives. We will focus on topics such as ageism, functional assessments/ability, normal physiologic changes in aging, theories of

aging (continuity, disengagement, and activity theory), psychosocial changes, polypharmacy, caregiver role-strain, and cognitive changes in aging. During weekly clinical assignments you apply this knowledge each time you provide nursing care to the older adult and their family.

#### **LEARNING ACTIVITIES:**

Many of the classes require learning activities to be completed prior to attending class. It is expected that the required work be completed so students can fully participate in each class.

# **DIGICATION:**

All students are required to maintain a learning portfolio in Digication that uses the school template.

1.) **During your last week of clinical**, prepare a summative reflection (using the same reflective tool you use each week). Address each core value in regards to the entire semester experience. Reflect on the entire clinical semester. Once you have completed this work send your clinical instructor an invitation to your Digication account.

Last revised date: 7/30/2019

7/30/2019

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS 4 hours	Unit I: Nursing care of the childbearing family  Antepartum Nursing Define and describe the terms that relate to pregnancy and its signs and symptoms  Identify the physiological changes and the common discomforts that occur during pregnancy  Identify the pertinent data needed for adequate health supervision of pregnancy  Describe the care and management of gestational problems in pregnancy  Apply the care and management of preexisting conditions to the context of pregnancy  Identify nursing diagnoses appropriate for clients experiencing health deviations during pregnancy.  Apply legal and ethical principles to the holistic care of antepartum clients	A. Critical Thinking: Nursing process applied to clients and families during the antepartum period.  B. Provision of safe, holistic, culturally competent care to client and family during the antepartum period  1. Terminology related to pregnancy  2. Calculation of pregnancy estimated date of confinement  3. Signs and symptoms of pregnancy  a. Presumptive  b. Probable  c. Positive  d. Diagnostic Aids  1) Pregnancy Tests  2) Ultrasound  4. Physiological Changes of Pregnancy  a. Anatomic and Metabolic  1) Uterine/cervical  2) Abdominal wall  3) Breast  4) Weight Changes  b. Hormonal  1) Estrogen  2) Progesterone  3) Human Chorionic gonadotropin  4) Placental Hormones  c. Systemic  1) Cardiovascular  2) Respiratory  3) Gastro-intestinal  4) Urinary	Assigned Readings Durham & Chapman (D&C) Ch 4, 5, 6, & 7 Lecture Discussion Dosage Calculation Testing Nursing Skills Lab- Fundal assessment  1st OB Office Visit-Role Play Commercial for Healthy Pregnancy	Examination Clinical performance evaluation Clinical Learning Concept mapping Skills Validation: IVPB, catheterization, enteral tubes

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		5) Muscular-skeletal 6) Integumentary  5. Interdisciplinary and Nursing Health Supervision During Pregnancy a. Assessment b. Screening/Fetal Wellbeing Tests c. Minor Discomforts d. Warning Signs e. Nutritional Counseling f. Childbirth Education g. Teratogens of Pregnancy h. Genetic Counseling  6. Psychological Adaptation of Pregnancy a. Developmental Tasks b. Psychosocial Changes  7. Complications of Pregnancy: Abortion, Cardiac Disease, HIV/AIDS, Diabetes in Pregnancy, Hypertensive Disorders, Hyperemesis Gravidarum, Incompetent Cervix, Ectopic Pregnancy, Gestational Trophoblastic Disease, Infectious Diseases, Placenta Previa, Rh Incompatibility a. Etiology b. Pathophysiology c. Clinical manifestations & complications d. Diagnostic tests e. Cultural considerations f. Evidence based theory and principles	Gallery Walk -Bleeding Disorders of Pregnancy	
		g. Collaborative management:		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOCKS		Treatment Modalities  1) Medical 2) Surgical 3) Nutrition 4) Pharmacological (NUR*103) h. Health Promotion/Maintenance Restoration and/or Prevention  C. Communication 1. Client and family education 2. Community resources  D. Professionalism 1. Legal-ethical issues 2. Role development		
4 hours	Intrapartum Nursing  Examine maternal adaptation to the physiological and psychosocial stress of labor.  Discuss nursing care for the laboring woman through each stage of labor.  Compare various birthing options.  Discuss the role of the nurse when caring for laboring women during birth related procedures  Apply legal and ethical principles to the holistic care of laboring women	A. Critical Thinking Nursing process applied to Intrapartum clients and families  B. Provision of safe, holistic, culturally competent care to intrapartum client and family  1. Philosophy of Labor and delivery 2. The P's of Labor 3. Labor and delivery management:  a. Basic Electronic Fetal/Uterine Monitoring b. Normal, spontaneous Vaginal Delivery (NSVD) c. Forceps/Vacuum Extraction d. Cesarean Section  4. Nursing Care of the Client requiring OB Anesthesia/Analgesia a. Pharmacological (NUR*103) b. Non-pharmacological	Assigned Readings D&C-Ch 8 & 9 Lecture Discussion Handouts Videos Normal L&D  Observational experience in clinical	Examinations Demonstration- Leopold's Maneuvers Group Discussion Clinical performance evaluation Clinical Learning Experience Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		c. Local Anesthesia (NUR*103) d. Regional Anesthesia (NUR*103) e. General Anesthesia (NUR*103)  C. Communication 1. Client and family education 2. Community resources  D. Professionalism 1. Legal-ethical issues 2. Role development		
1 hour	Refer to exam	Exam 1		
	blueprint	MPR		
2 hours	Intrapartum Nursing: Complications of Labor  Differentiate between the signs and symptoms, medical management and nursing care of the woman experiencing uterine problems during labor and delivery.  Evaluate the signs and symptoms, medical management and nursing care of the woman experiencing fetal problems during labor and delivery.  Discuss the signs and symptoms, medical management and nursing care of the woman experiencing amniotic fluid problems during labor and delivery.	A. Provision of safe, holistic and culturally competent care to intrapartum client and family experiencing complications of labor  1. Premature Labor 2. Premature Rupture of Membranes 3. Dysfunctional Labor 4. Precipitous Labor 5. Umbilical Cord Abnormalities 6. Persistent Posterior Position 7. Breech Presentations 8. Cephalo-Pelvic Disproportion 9. Multiple Gestation 10. Post-Date Pregnancies 11. Amniotic Fluid Embolus 12. Amniotic Fluid Variations 13. Placenta Abruptio 14. Uterine Rupture 15. Shoulder Dystocia	Assigned Readings D&C – 10 & 11 Lecture  Discussion  Nursing Care Plan: Patient/Family Teaching  Video-Operative Deliveries.	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOURS	Apply legal and ethical principles to the holistic care of laboring women experiencing complications	B. Communication 1. Client and family education 2. Community Resources  C. Professionalism 1. Legal-ethical issues 2. Role development	DAN DANS. (CDS	
3 hours	Postpartum Nursing NI & Complications  Discuss physiological changes, nursing assessments and nursing care during the post-partum period.  Identify the psychosocial changes, nursing assessments and nursing care as women adapt to the stress of the post-partum period.  Discuss care for the family experiencing situational psychosocial crisis during the postpartum period  Apply legal and ethical principles to the holistic care of postpartum women and families	A. Critical Thinking: Nursing process applied to clients and families experiencing both normal and complications during the postpartum phase.  B. Provision of safe, holistic, culturally competent care to client and family in the postpartum phase of child bearing.  Normal Postpartum  1. Physical Postpartum Changes 2. Nursing Care of the Postpartum Patient  a. Normal, spontaneous Vaginal Delivery (NSVD)  b. Post op Cesarean Section  3. Psychological Postpartum Adjustments  a. Maternal/Family Role Adaptation  4. Postpartum Blues/Depression  a. Etiology and Management  b. Pathophysiology  c. Clinical manifestations & complications  d. Cultural considerations  e. Evidence based theory and principles	Assigned Readings D&C Ch – 11, 12, Lecture  Discussion  Postpartum Assessment  Maternal Bereavement lecture  Breastfeeding: Guest speaker, Kathy Mason, BS, RNC, IBCLC  Postpartum Care of Families from different cultures  Audio: Postpartum Depression  Provide nursing care to a postpartum patient	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		f. Collaborative management:		
	Compare complications the post- partum woman may experience related to a situational crisis involving her circulatory status.	Postpartum Complications: Postpartum Hemorrhage  1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:	Build a care plan for an assigned PP Complication	Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		Treatment Modalities  a. Surgery  b. Medical  c. Nutrition  d. Pharmacological  8. Health Promotion/Maintenance Restoration and/or Prevention		
	Differentiate between complications the postpartum woman may experience when experiencing a situational crisis related to clotting mechanism or status.	Postpartum Hypercoagulation: Thrombophlebitis, Pulmonary Embolism  1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management: Treatment modalities a. Surgery b. Medical c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention		Clinical performance evaluation  Clinical Learning Experience  Concept mapping
	Apply complications the post-partum woman may experience during a situational crisis involving her	Hematoma/Lacerations: Cervical, Vaginal, Perineal		Clinical performance evaluation
	comfort-rest status to the need for alterations in care	<ol> <li>Etiology</li> <li>Pathophysiology</li> <li>Clinical manifestations &amp; complications</li> <li>Diagnostic tests</li> <li>Cultural considerations</li> <li>Evidence based theory and principles</li> </ol>		Clinical Learning Experience Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		7. Collaborative management: Treatment Modalities a. Surgery b. Medical c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention		
	Examine complications the postpartum woman may experience	Postpartum Infections: Pelvic, Breast	Assigned Readings	Clinical performance evaluation
	related to a situational crisis involving her immune status	<ol> <li>Etiology</li> <li>Pathophysiology</li> </ol>	Lecture	Clinical Learning
	involving her minune status	3. Clinical manifestations &	Discussion	Clinical Learning Experience
		complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Surgery     b. Medical     c. Nutrition     d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention	Discussion	Concept mapping
3 hours	Neonatal Nursing			
	Identify characteristics of the normal full-term newborn.  Describe the nursing care of the normal full-term newborn	<ul> <li>A. Critical Thinking: Nursing process applied to clients and families who have given birth to a well or a special needs newborn</li> <li>B. Provision of safe, holistic, culturally competent care to client and family with a</li> </ul>	Assigned Readings: D&C Ch. 15 (normal newborn), Ch. 16 (discharge planning/teaching), Ch. 17 (high-risk newborn) Hockenberry; Ch 7 & 8, Review content listed in syllabus for specific	Examination  Clinical performance evaluation  Clinical Learning
	Identify characteristics of newborns with complications and special needs.	newborn infant  Normal Full-Term Newborn  Characteristics of the Newborn	areas of focus  Lecture	Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOURS	Describe the nursing care of newborns with complications and nursing care.  Apply legal and ethical principles to the holistic care of the neonate	Physiological Jaundice  1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Nutrition     c. Pharmacological 8. Health Promotion/Maintenance     Restoration and/or Prevention  Newborn with complications/special     needs: Respiratory Distress Syndrome     (RDS), cardiac conditions, alteration in     Thermoregulation, Preterm Infant, Post- term Infant, Infant of a Diabetic Mother,     Cleft lip/Palate, Genetic concerns:     Down's Syndrome, Substance Abuse,     Transient Tachypnea of Neonate (TTN),     Necrotizing Enterocolitis (NEC)  Nursing Management of the Newborn     with complications/special needs:     1. Etiology     2. Pathophysiology     3. Clinical manifestations &         complications 4. Diagnostic tests     a. Genetic Concerns     1) Genetic Counseling     2) Genetic Testing	Discussion Video: YouTube-newborn assessment  Nursing Skills Lab: Newborn Assessment  Provide nursing care to a newborn	
		5. Cultural considerations		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOCKS		6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Nutrition     c. Pharmacological (NUR*103) 8. Health Promotion/Maintenance     Restoration and/or Prevention  C. Communication     a. Client and family education     b. Community resources  D. Professionalism     1. Legal-ethical issues     2. Role development		
1 hours	Unit II: Nursing care of the perioperative client  Preoperative Nursing	A. Critical Thinking: Nursing process applied to the preoperative client	Assigned Readings; Lewis Chapter 17 Potter's fundamentals Chapter 50	Examination Clinical performance
	Describe the typical content of		Potter Clinical Nsg Skills Ch 37	evaluation
	preoperative patient education programs	B. Provision of safe, holistic, culturally competent care to the preoperative client	AORN Posted/Printed Articles & Quizzes	Clinical Learning Experience
	Describe age specific, cultural and literacy sensitive approaches to preoperative patient education	Preoperative Nursing	Lecture	Concept mapping
	State the effects of stress on the surgical patient	Patient perception of the surgical experience     a. Fear	Case Study Discussion	
	Discuss the various ways that surgery can be classified	<ul> <li>b. Readiness to learn/need to know</li> <li>c. Importance of the presence of the nurse</li> <li>2. Need for Diagnostic testing and physical preparation</li> </ul>	Observational Experience	

HOURS  Describe factors affecting surgical outcome  Discuss the nursing responsibilities in  Describe factors affecting surgical outcome  3. Provision of client/family preoperative teaching, categories of information: a. Health care relevant information		
the pre-operative period  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative patient  Develop a plan of care for the pre- operative periof, relaxation exercises)  C. Psychosocial support (specific concerns of client, foster problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of care for the pre- operative problem-solving skill  Develop a plan of care for the pre- operative problem-solving skill  Develop a plan of care for the pre- operative problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of care for the pre- operative problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of care for the pre- operative problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of care for skill teaching (Cough/deep breathing, surgery specific, relaxation exercises)  C. Psychosocial support (specific concerns of client, foster problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of skill teaching (Cough/deep breathing, surgery specific, relaxation exercises)  C. Psychosocial support (specific concerns of client, foster problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of the pre- problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of the pre- problem-solving skills, importance of information seeking, need for post discharge support)  Develop a plan of the pre- problem-solving	EXPERIENCES	

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		interventions that may influence interventions		
		D. Professionalism 1. Legal-ethical issues 2. Role development		
2 hours	Intraoperative Nursing			
	Discuss the various members of the surgical team and their roles during surgery.  Describe the surgical environment and the role of the nurse within that environment.  Differentiate between the various types of anesthesia used during surgery.  Describe surgical wound classification according to the Centers for Disease Control (CDC) Describe selected intraoperative risks and complications	A. Critical Thinking: Nursing process applied to the intraoperative client  B. Provision of safe, holistic, culturally competent care to the intraoperative client  Intraoperative Nursing  1. Surgical Team  2. Surgical Environment:  3. Anesthesia  a. General Anesthesia  b. Regional Anesthesia  c. Conscious Sedation  d. Local Anesthesia  4. Risk of postoperative infection as measured by Surgical Wound Classification:  a. Class I/ Clean wounds	Assigned Readings; Lewis Chapter 18 Potter's Fundamentals Chapter 50 Posted/Printed Articles Lecture Case Study Discussion  Video Observational Experience	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping
		<ul> <li>b. Class II/Clean-contaminated wounds</li> <li>c. Class III/Contaminated wounds</li> <li>d. Class IV/Dirty or infected wounds</li> </ul>		
		5. Other Intraoperative Risks/ Complications a. Risk of Injury from (1) transport (2) surgical positioning		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		(3) hazardous substances and equipment (laser, cautery, radiation, chemicals)  b. Alteration in body temperature (1) Hypothermia (2) Hyperthermia and Malignant Hyperthermia c. Risk for Alteration in fluid balance (1) Autologous blood donation (2) Bloodless surgery  C. Communication: apply the principles of therapeutic communication during the preoperative period  D. Professionalism 1. Legal-ethical issues 2. Role development		
1 hour	Refer to the exam	Exam 2		
	blueprint	MPR		
3 hours	Postoperative Nursing  Describe the responsibilities of the PACU nurse in the prevention and recognition of complications.  Identify common postoperative complications	<ul> <li>A. Critical Thinking: Nursing process applied to the postoperative client</li> <li>B. Provision of safe, holistic, culturally competent care to the intraoperative client</li> </ul>	Lewis Chapter 19 Shock p. 1587-1592, p. 1594-1604 (focus on hypovolemic and anaphylactic)	Examination  Clinical performance evaluation  Clinical Learning
	Discuss the management of common postoperative complications  Use the nursing process in caring for clients in the postoperative period.	Postoperative Nursing  1. Post anesthesia (PACU) Assessment (ABC) a. Airway: (A & B) 1. Obstruction 2. Hypoxia	Simulation-Hypovolemic Shock	Experience Concept mapping

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOURS	Describe key nursing assessment and care parameters common for all postoperative patients  Describe the gerontological considerations related to the postoperative management of clients	3. Aspiration b. Alteration in body temperature(C) c. Nausea and Vomiting d. Fluid balance (C) e. Pain assessment 2. Postoperative nursing care principles a. Pain management b. Early mobility c. Circulatory function d. Pulmonary toilet e. Urinary Function f. Gastrointestinal Function 3. Management of postoperative complications a. Hemorrhage 1. Hypovolemic Shock i. Prevention Identify Early. ii. Clinical Manifestations 2. Collaborative Management i. Medical/Pharmacologic (NUR*103) ii. Surgical iii. Nursing Management b. Anaphylaxis 1. Anaphylaxis 1. Anaphylactic Shock i. Prevention Identify Early. ii. Clinical Manifestations 2. Collaborative Management c. Ileus d. Atelectasis e. Deep Vein Thrombosis (DVT) f. Complications of wound healing 1. dehiscence 2. evisceration	EXPERIENCES	

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		3. infection 4. Gerontologic Considerations a. Mental Status b. Pain		
		C. Communication: apply the principles of therapeutic communication during the preoperative period		
		D. Professionalism 1. Legal-ethical issues 2. Role development		
1 hour	Anemia Compare and contrast pathophysiology and clinical manifestations of anemia.  Summarize the nursing care of the client experiencing anemia	<ul> <li>A. Critical Thinking: Nursing process applied to clients with anemia</li> <li>B. Provision of safe, holistic, culturally competent care to clients with anemia.</li> <li>Anemia: <ol> <li>Anemia due to blood loss</li> <li>Anemia due to impaired blood production</li> <li>Anemia due to destruction of RBC</li> <li>Etiology</li> <li>Pathophysiology</li> <li>Clinical manifestations &amp; complications</li> <li>Diagnostic tests and procedures:</li> <li>Evidence based theory and principles</li> <li>Collaborative management: <ol> <li>Treatment modalities:</li> <li>Nutrition</li> <li>Pharmacological</li> <li>Health Promotion/Maintenance</li> </ol> </li> </ol></li></ul>	Assigned readings:  Lewis Chapter 30 p. 606-611, p. 612-614, p. 614 (acute blood loss)-619 Review anatomy and physiology of RBCs Lewis Ch 19  Case Study: come to class prepared to answer questions on anemia  Posted/Printed Articles  Provide nursing care to a client with anemia	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

Care of significant descriptions of the care of the ca			SUGGESTED LEARNING EXPERIENCES	EVALUATION
Care of significant descriptions of the care of the ca		Restoration and/or Prevention  C. Communication     1. Client and family education     2. Community resources  D. Professionalism     1. Legal-ethical issues     2. Role development		
surgio morbi Utiliza a holi:	re of clients with medically nificant obesity scribe health implications for the rbidly obese client.  Impare and contrast the Bariatrics gical techniques utilized for the rbidly obese individual.  Ilize the nursing process to develop olistic plan of care for clients owing Bariatric surgery.	<ul> <li>A. Critical Thinking: Nursing process applied to clients with morbid obesity.</li> <li>B. Provision of safe, holistic, culturally competent care to clients with morbid obesity.</li> <li>Bariatrics  1. Etiology 2. Pathophysiology 3. Clinical manifestations &amp; complications 4. Diagnostic tests and procedures 5. Cultural considerations 6. Evidence based theory and Principles 7. Collaborative management: Treatment modalities: a. Surgery b. Medical c. Rehabilitative d. Nutrition e. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention</li> <li>C. Communication</li> </ul>	Assigned readings; Lewis pp. 885-889  - Posted/Printed Articles  Provide nursing care to a client with a disturbance in gastrointestinal function	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		Client and family education     Community resources  D. Professionalism     Legal-ethical issues     Role development		
4 hours	Unit V: Pediatric Nursing	A. Critical Thinking: Nursing process	Assigned Readings:	
	Principles of Pediatric Nursing	applied to the care of the pediatric client and family	Fundamentals text: Ch 12 139-156 Hockenberry;	Examination
	Describe the philosophy and goals of pediatric nursing	Trends in pediatric care Health     promotion and the pediatric client     Family characteristics	Ch1 pp1-13, Ch 2 pp15-22; Ch 3 pp 38-48; Ch 4 pp 57-98; Ch 5 pp114- 141; Ch 6; Ch 10-15 Review basic	Clinical performance evaluation
	Discuss the significance of family in the care of pediatric clients	<ul><li>3. Cultural influences on the pediatric client and family</li><li>4. Parenting styles</li></ul>	development- focus on tables and charts, Ch 19 pp554-569; Ch 20 pp 575-584, 602-609; Ch 12 pp 378-	Clinical Learning Experience
	Identify health- promotional activities essential for normal growth and development in the pediatric population	<ul> <li>a. Child-rearing philosophies</li> <li>b. Discipline</li> <li>5. Principles of growth and development</li> <li>a. Cephalocaudal</li> <li>b. Proximodistal</li> </ul>	406, Ch 13 pp 407-421, Ch 15 pp 457-475, Ch 16 pp 476-497, Ch 21 pp 621-634, Ch 22 pp 639, 665-672(med admin) Common conditions	Concept mapping
	List the major components of a pediatric history and physical exam	<ul><li>c. Simple to complex</li><li>d. General to specific</li><li>6. Application of theories of growth and</li></ul>	Tonsillitis and Adenoiditis pp 642-644 AOM/OME	
	Explain how children differ from adults in their response to illness and hospitalization	development  a. Cognitive: Piaget  b. Psychosocial: Erikson  c. Moral: Kohlberg	pp 645-647 Gastroenteritis/Dehydration pp 689-701 Appendicitis pp 709-712	
	Discuss pediatric illness as a family stressor	<ul><li>d. Psychosexual: Freud</li><li>7. Physical Assessment</li><li>a. History</li></ul>	Pyloric Stenosis 728-729  Lecture	
	Discuss the principles and techniques for administering medications and IV fluids to children	<ul><li>b. Vital signs</li><li>c. Anthropometric measurement</li><li>d. Growth charts</li></ul>	Discussion	
	Describe communication strategies that assist nurses in working effectively with children	e. Nutrition  8. Developmental Assessment  a. Denver Developmental  Screening Test II (DDST-II)	Video-Youtube  School health center observation	

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
	Describe legal issues unique to children and families  Discuss care of children with common pediatric illnesses	b. Play as an indicator  9. The Hospitalized child a. Preparation for elective hospitalization b. Emergency hospitalization c. Stressors associated with illness and hospitalization  10. Preparing children for procedures a. Physical preparation b. Verbal preparation c. Coping with pain d. Use of play as a coping mechanism  11. Administering medication to children a. Administering oral medication b. Administering injections c. Principles of IV fluid administration  B. Communication with the pediatric client and family 1. Communication strategies a. Developmental principles a. Cultural considerations 2. Parental education a. Safety b. Anticipatory guidance  C. Professionalism 1. Consent for care 2. The nurse as a child advocate 12. Mandatory reporting laws		
1 hour	Refer to the exam	Exam 3		
	blueprint	MPR		
5 hours	Unit IV Nursing care of the client with select orthopedic conditions			

WEEK HOURS	UNIT OBJECTIVES	CONTENT SUGGESTED LEARNING EVDEDIENCES	EVALUATION
HOURS	Identify nursing care delivery for the	A. Critical Thinking: Nursing process applied	
	pediatric client with orthopedic	to a client with an orthopedic condition We will start with fractures first.	Examination
	problems	Review Anatomy & Physiology	Examination
	problems	B. Provision of safe, holistic, culturally (A&P)	Clinical performance
	Describe the nursing care for the	competent care to a client with an	evaluation
	client with a fracture.	orthopedic condition Readings:	evaluation
	chefit with a fracture.	Lewis Ch 61& 62 also pp. 1496-	Clinical Learning
	Discuss medical management and	Common Pediatric orthopedic conditions: 1499, 1504-1507, 1510-1515, 1517-	Experience
	nursing care for the client with a	Congenital Hip dysplasia, scoliosis, club 1535	Experience
	fractured hip.	foot	Concept mapping
	nactured mp.	Posted/Printed Articles	Concept mapping
	Discuss nursing care delivery for the	1. Etiology	
	client with arthritis.	2. Pathophysiology Readings:	
	chem with artificial.	3. Clinical manifestations & Hochenberry pp. 959-963	
	Compare and contrast the	complications	
	management of osteoarthritis and	4. Diagnostic tests Lecture	
	rheumatoid arthritis	5. Cultural considerations	
		6. Evidence based theory and principles Discussion	
	Describe the nursing care for the	7. Collaborative management:	
	client with reconstructive joint	Treatment Modalities Case Studies	
	replacement	a. Medical	
	· ·	b. Surgical Provide nursing care to a client with	
	Discuss nursing care delivery for the	c. Nutrition an orthopedic condition	
	client with osteomyelitis	d. Pharmacological	
		8. Health Promotion/Maintenance	
	Discuss nursing care delivery for the	Restoration and/or Prevention	
	client with amputation.		
	-	<u>Fracture</u>	
	Address nursing care for the client	1. Etiology	
	with complications of orthopedic	2. Pathophysiology	
	procedures	3. Clinical manifestations &	
		complications	
		a. Fat embolism	
		b. Compartment syndrome	
		c. Volkman's contracture	
		4. Diagnostic tests	
		5. Cultural considerations	
		6. Evidence based theory and principles	

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		<ul> <li>7. Collaborative management:     Treatment Modalities     a. Medical     b. Surgical     c. Nutrition     d. Pharmacological</li> <li>8. Health Promotion/Maintenance     Restoration and/or Prevention</li> </ul>		
		Osteoarthritis and Rheumatoid Arthritis  1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Surgical		
		Gout, Osteoporosis, Lyme Disease, osteomyelitis		
		<ol> <li>Etiology</li> <li>Pathophysiology</li> <li>Clinical manifestations &amp; complications</li> <li>Diagnostic tests</li> </ol>		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOURS		5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Nutrition     c. Pharmacological     d. Surgical/amputation 8. Health Promotion/Maintenance and     Restoration and or Prevention  C. Communication     1. Client and family education     2. Community Resources  D. Professionalism     1. Legal-Ethical issues     2. Role Development	EAFERIENCES	
6 hours	Unit III: Principles of Geriatric Nursing & Cognitive Disorders  Differentiate between the clinical presentations of delirium and dementia.  Discuss the nursing care of the client with delirium  Discuss the nursing care of the client with dementia.  Describe the characteristic behaviors and stages of Alzheimer's Disease.  Discuss diagnosis, medical treatment and nursing care of the client with Alzheimer's disease.	A. Critical Thinking: Nursing process applied to a geriatric and cognitively impaired client  B. Provision of safe, holistic, culturally competent care to a cognitively impaired client     Delirium	Assigned Readings: Lewis; Ch. 5 & 59 Potter & Perry; Ch 10, pg 124 (Box 10-3) & pg 127 (Box 10-6) Ch. 14, pp. 173-193 Perry & Potter; pp. 1102-1103, 1096-1101. (teaching medication self-administration)  Lecture  Class Presentation/Discussion  Mini Mental Status  Simulation  Electronic resources: <a href="http://consultgerirn.org/">http://consultgerirn.org/</a>	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		b. Medical 8. Health Promotion/Maintenance Restoration and/or Prevention a. Nutrition b. Pharmacological		
		Dementia: Alzheimer's  1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Nutrition     c. Pharmacological 8. Health Promotion/Maintenance     Restoration and/or Prevention  C. Communication     1. Client and family education     2. Community resources  D. Professionalism     1. Legal-ethical issues     2. Role Development		
1 hour	Refer to the exam blueprint	Exam 4 MPR		
1 hour	Unit VIII: Nursing care of the client with a Sexually Transmitted Illness	A. Critical Thinking: Nursing process applied to the care of clients with sexually transmitted illnesses	Assigned Readings Lewis Ch 52	Examination

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
	Identify risk factors, signs and symptoms and learning needs related to vaginal infections and sexually transmitted diseases	B. Provision of safe, holistic, culturally competent care to with sexually transmitted illnesses  Sexually Transmitted Illnesses: Gonorrhea, Syphilis, Chlamydia, Herpes Genitalis, Trichomoniasis, Condylomata Acuminata, Human papilloma virus (HPV)  1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management: Treatment Modalities a. Medical b. Surgical c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention  C. Communication 1. Client and family education 2. Community resources  D. Professionalism 1. Legal-ethical issues 2. Role development	Lecture Discussion Case Study: Nursing Care for the client with sexually transmitted illness STD Prevention Activity Posted Articles	Clinical performance evaluation Clinical Learning Experience Concept mapping
2 hours	Unit IX: Nursing care of the gynecology client	A. Critical Thinking: Nursing process applied to the care of clients with gynecological disorders	Assigned Readings: Lewis review Chapter 53 D&C Ch 1 & 2 p.28-34 Lecture; case study. Complete assignment prior to coming to class	Examination

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS	Address life souls showers of	D. Dussiaise of sefe helistic sultanella	EXPERIENCES	Cliniant manfammana
	Address life cycle changes of women.	B. Provision of safe, holistic, culturally competent care to with gynecological	Discussion	Clinical performance evaluation
		disorders	Discussion	
	Describe common health screening	Menstrual Cycle		Clinical Learning
	tests for women.	<ul><li>a. Normal</li><li>b. Deviations of Normal</li></ul>	Assigned Readings	Experience
	Identify factors that can influence the	<ol><li>Taking a gynecological history</li></ol>	Lewis Ch 50 p. 1204-1208, Ch 51-	Concept mapping
	health of the female reproductive	<ul> <li>a. Demographic Data</li> </ul>	up to Breast cancer & Ch 54.	
	system.	b. Personal & Family History		
		c. GYN History	Lecture	
	Describe the components associated	d. STD History		
	with the physical assessment,	e. Diet	Discussion	
	including routine health screening	f. Stressors		
	test of the female reproductive	g. Support System	Demonstration: Self Breast	
	system	3. Physical Assessment	Examination	
		a. Breast Exam		
	Identify tests that a commonly used	b. Abdominal Exam	Case Study: Menopause	
	to diagnose dysfunctions of the	<ul><li>c. External Genitalia</li></ul>		
	reproductive system.	d. Pelvic Exam		
		e. Bimanual Exam		
	List nursing diagnoses appropriate to women with gynecologic disorders.	f. Rectovaginal Exam		
		4. Diagnostic Assessment		
	Discuss the role of the nurse and the	<ul> <li>a. Laboratory tests</li> </ul>		
	use of the nursing process when	<ul> <li>b. Radiographic studies</li> </ul>		
	caring for clients with common	c. Endoscopic studies		
	gynecological disorders.	d. Biopsy		
		e. Other diagnostic studies		
		Disorders affecting women's health: Pre-		
		Menstrual Syndrome, Menstrual		
		Irregularities, Menopause, Benign Breast		
		Disorders, Endométrioses, Vaginitis,		
		Uterine Prolapse, Cystocele or Rectocele,		
		Toxic Shock Syndrome		
		1. Etiology		
		2. Pathophysiology		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOCKS		3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Surgical     c. Nutrition     d. Pharmacological 8. Health Promotion/Maintenance     Restoration and/or Prevention  C. Communication 1. Client and family education 2. Community resources  D. Professionalism 1. Legal-ethical issues 2. Role development		
2 hours	Unit VII: Nursing care of the client with select genitourinary conditions  Use the nursing process as a framework when caring for patients with commonly occurring urinary system problems.  Use the nursing process as a framework when caring for patients with commonly occurring urinary system problems.	<ul> <li>A. Critical Thinking: Nursing process applied to the clients experiencing genitourinary conditions</li> <li>B. Provision of safe, holistic, culturally competent care to clients experiencing genitor-urinary conditions <ul> <li>Urinary Tract Infections, Urolithiasis,</li> <li>Kidney Surgery, Benign Prostatic</li> <li>Hypertrophy</li> <li>1. Etiology</li> <li>2. Pathophysiology</li> <li>3. Clinical manifestations &amp; complications</li> <li>4. Diagnostic tests</li> </ul> </li> </ul>	Assigned Readings: Lewis review pp. 1033-1040, 1045- 1050, 1063-1066, 1268-1275  Lecture; case study. Complete assignment prior to coming to class  Discussion  Provide nursing care to a client experiencing a genitor-urinary condition	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
	Identify common laboratory and diagnostic tests used to determine urinary system dysfunction.	5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:     Treatment Modalities     a. Medical     b. Surgical     c. Nutrition     d. Pharmacological  C. Health Promotion/Maintenance     Restoration and/or Prevention     Communication     1. Client and family education     2. Community resources  D. Professionalism     1. Legal-ethical issues     2. Role development		
2 hours	Unit X: Nursing care of the family experiencing violence  Discuss the differences between physical violence, sexual violence, emotional violence and neglect  Describe common characteristics of the abused and abusers  Identify stressors and predictors of family violence.  Discuss safety plans for victims of family violence  Describe phases of rape-trauma syndrome and common reactions during each phase.	<ul> <li>A. Critical Thinking: Nursing process applied to the care of clients/families experiencing violence and neglect</li> <li>B. Provision of safe, holistic, culturally competent care to clients/families experiencing violence and neglect</li> <li>Violence: Spousal Abuse, Elder Abuse, Child Abuse, Sexual Assault</li> <li>1. Etiology</li> <li>2. Pathophysiology</li> <li>3. Clinical manifestations &amp; complications</li> <li>4. Diagnostic tests</li> <li>5. Cultural considerations</li> <li>6. Evidence based theory and principles</li> <li>7. Collaborative management: Treatment Modalities</li> <li>a. Medical</li> </ul>	Assigned Readings: Varcarolis Chapter 28 & 29 (in both 7th & 8th editions)  Discussion Video PowerPoint	Examination  Clinical performance evaluation  Clinical Learning Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
	Discuss the role of the nurse when caring for the abused client  Describe the role of the nurse as an advocate in incidences of family violence  Describe how the role of the nurse varies in the care of clients that are victims of different types of violence, abuse and neglect	b. Surgical c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention  C. Communication 1. Client and family education 2. Community resources  D. Professionalism 1. Legal-ethical issues 2. Role development		
2 hours	Unit XI: Nursing care of the client and family experiencing death  Identify the stages of grieving.  Identify clinical symptoms of grief and factors affecting a grief response  Identify measures that facilitate the grieving process  List clinical signs of impending and actual death  Identify the nurse's legal responsibilities regarding client death  Discuss the role of the nursing when caring for the dying client.	A. Critical Thinking: Nursing process applied to a dying client  B. Provision of safe, holistic, culturally competent care to a dying client  1. Palliative Care  2. Clinical manifestations & complications  3. Cultural considerations  4. Evidence based theory and principles  5. Grief and Bereavement  C. Communication  1. Client and family education  2. Community resources  D. Professionalism  1. Legal-ethical issues  2. Role development	Assigned Readings: Lewis Ch 9 Potter & Perry; pp 708-730 Perry & Potter; Ch. 16 pp. 403-419 AV; Frontline documentary: "Facing Death" Lecture Nursing Skills Lab: Simulation Discuss providing nursing care to a terminally ill client	Examination  Clinical performance evaluation  Clinical Learning  Experience  Concept mapping

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
1 hour			EAI ERIENCES	
1 Hour	Refer to the exam	Exam 5		
	blueprint	MPR		
3 Hours	Adult Psychiatric Conditions: Mood Disorders  Compare and contrast the symptoms of the different forms of mood disorders and thought disorders across the lifespan.  Correlate recommended treatment modalities with the major types of mood disorders.  Describe appropriate nursing interventions for behaviors associated with mood disorders.	A. Critical Thinking: Nursing process applied to clients experiencing mood disorders  B. Provision of safe, holistic, culturally competent care to clients with mood disorders  Mood Disorders, Depression, Postpartum Depression with Psychotic Features, Bipolar Disorder, Suicide  1. Etiology 2. Pathophysiology 3. Clinical manifestations and complications 4. Diagnostic evaluation DSM IV 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management Treatment modalities a. Surgical b. Medical c. Rehabilitative d. Nutrition e. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention  C. Communication 1. Client and family education 2. Community resources  D. Professionalism 1. Legal-ethical issues 2. Role development	Assigned readings; Varcarolis Chapter 13, 14  Nurse-Client Communication Skills: a. Mood Disorders  Provide nursing care to a patient experiencing mood disorders during Behavioral Health clinical rotation  Role play Communication skills with the Behavioral Health Patients  Tape: Hearing Voices (Lab NUR*201)  Suicide Assessment  Process recording workshop in preparation for Behavioral Health nursing clinical experience  Concept mapping	Examination Concept mapping

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS 2 hours	Unit XII: Nursing Care of The	Describe the DSM-IV-TR evaluation system	EXPERIENCES Assigned Readings:	
2 nours	Patient with a Psychiatric/Mental Health Disorder Adult Psychiatric	for classification of mental disorders.	Varcarolis: Ch 15,16 pgs 310-321 and Ch 17	
	Conditions: Anxiety, Somatoform, Factitious and Dissociative Disorders	Identify adaptive and maladaptive coping through identification and	Lecture	
		A. Critical Thinking: Nursing process applied to a client with a psychiatric/mental health disorder		
		1.Introduction to the DSM-IV-TR and its use in psychiatric/mental health nursing	Video	
		a. Axis	Discussion	
		b. Global Function Index	2.1504.051.01	
		2. The role of defense mechanisms in client coping		
		a. Adaptive		
		b. Maladaptive understanding of defense mechanisms.		
		Identify theories of anxiety disorders.		
		Identify basic characteristics of medical anxiety disorders		
		Discuss assessment when providing care to people with anxiety and anxiety disorders		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
HOURS		Identify nursing diagnoses and outcomes for people with anxiety disorders	EM EMENCES	
		Describe manifestation of the somatoform, factitious and dissociative disorders		
		B.Provision of safe, holistic, culturally competent care to a client with a psychiatric disorder		
		1. Anxiety Disorders		
		a.Etiology		
		b. Pathophysiology		
		c. Clinical manifestations & complications		
		d. Diagnostic tests		
		e. Cultural considerations		
		f. Evidence based theory and principles of management		
		Generalized Anxiety Disorder, Panic		
		Disorders, Phobias, Social Anxiety		
		Disorders, OCD, PTSD		
		2. Somatoform Disorders/Somatization		
		a. symptoms of unmet needs		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		b. Importance of secondary gain		
		c. Impact on healthcare system		
		g. Evidence based theory and principles of management		
		3. Factitious Disorders		
		a. Prototype: Munchausen		
		Syndrome and Munchausen		
		Syndrome by Proxy		
		b. Evidence based theory and		
		principles		
		of management		
		4. Dissociative Disorders		
		a. Define Dissociation		
		b. Prototypes: Dissociative Fugue		
		and Dissociative Identity Disorder		
		c. Evidence based theory and principles of management		
		C. Communication		

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
		1. Client and family education		
		2. Community resources		
		D. Professionalism		
		1. Legal -ethical issues		
		2. Role development		
Final				
Exam		Final Exam		
2		MPR		
hours				

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

Capital Community College, Gateway Community College, Naugatuck Valley Community College, Northwestern Connecticut Community College, Norwalk Community College, Three Rivers Community College

#### NUR\* 102: Family Health Nursing Laboratory Topics Schedule

#### **Obstetrical/Pediatric Nursing Topics**

Lab Topic		Time
Breastfeeding (1-hour theory)		1 hour
Newborn Assessment and Care		2.5 hours
Postpartum Assessment/Care		1.5 hour
Maternal Bereavement		1 hour
	TOTAL	6

# **Combined Nursing Topics**

Lab Topic	Time
Urinary Catheterization Content (includes CBI)	1.5 hour
Urinary Catheterization Practice	1.5 hours
IVPB Content	2 hours
IVPB Practice	1 hour
Medication Calculation Testing or Support	1 hour
VALIDATIONS IVPB & CATHETERIZATION	2
TOTAL	9.0

### **Medical/Surgical Topics**

Lab Topic	Time
Blood Transfusion	1.5 hours
Surgical Assessment	1.5 hour
Decompression Tubes Content	2.0 hours
Indications, placement, patency,	
Enteral Tube Medication Administration and Practice	
PCA/Epidural pumps	1 hour
Ortho Lab/Disorders of the Musculoskeletal System	1 hour
VALIDATION: ENTERAL MED	1 hour
ADMINISTRATION	
TOTAL	8.0
Floating Hour to be applied at faculty team discretion	1.0
NURSING 102 TOTAL LAB	24
HOURS	

<sup>\*</sup>Times serve as a guideline for faculty planning

#### NUR\*102: Family Health Nursing

On Campus Clinical Laboratory: Care of Breastfeeding Clients (1 hour)

\*Note to students: assigned readings to be completed prior to laboratory attendance

Νι	Nursing Care of Breastfeeding Clients		
Uŗ	earning Objectives on completion of the Learning Laboratory e student will be able to:	Suggested Learning Activities	
1.	Discuss breastfeeding readiness and indications of infant hunger	Review handouts/readings/videos related to breastfeeding	
2.	Describe signs that baby is getting enough milk	Guest speaker  Demonstration of various breastfeeding	
3.	Identify steps to ensure correct breastfeeding latch	techniques	
4.	Discuss and demonstrate various infant holding positions to promote comfort, support and ease of breastfeeding		
5.	Apply the nursing process to breastfeeding issues		
6.	Identify benefits for both mother and baby related to breastfeeding.		

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On Campus Clinical Laboratory: Nursing Care and Assessment of Newborns (2.5 hours)

\*Note to students: assigned readings to be completed prior to laboratory attendance

Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities
1. 2.	Identify normal newborn reflexes  Review the correct techniques for administration of newborn medications including routes, sites and equipment needed	Review handouts/readings/videos related to newborn assessment and care  Demonstration and practice with return demonstration of newborn assessment using newborn manikins/Sim Baby
4.	Describe the components of a complete newborn exam including normal variants vs. abnormal findings  Describe care of the newborn following circumcision  Review the components of a baby bath	Critical Thinking scenario and small group discussion: newborn care  Infant HR occultation simulator  Infant care scenarios
	Discuss the variety of formulas and nipples used for bottle fed babies.  Discuss ways to keep newborns safe from abduction and SIDs prevention	

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On Campus Clinical Laboratory: Maternal Bereavement

\*Note to students: assigned readings to be completed prior to laboratory attendance

Suggested Learning Activities
Guest Speaker
Readings: D&C p. 478 Loss & Grief

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On Campus Clinical Laboratory: Nursing Care and Assessment of the Postpartum Client (1.5 hours)

\*Note to students: assigned readings to be completed prior to laboratory attendance

Nursing Assessment and Care of the Postpartum Client		
Learning Objectives	<b>Suggested Learning Activities</b>	
Upon completion of the Learning Laboratory		
the student will be able to:		
3. Describe a systematic "Bubble-He" assessment of a postpartum client	Review handouts/readings	
<ul><li>a. Breast</li><li>b. Uterus/fundus</li></ul>	Videos on postpartum assessment and care	
c. Bladder	Student practice a return demonstration of a	
d. Bowel	postpartum assessment	
e. Lochia		
f. Episiotomy	Critical Thinking scenario	
g. Homan's		
h. Emotional	Demonstration of PP patient care equipment	
<ol> <li>Describe routine care of the mother who has delivered her infant vaginally &amp; cesarean section</li> </ol>	Readings: D&C Ch 12, Ch 11 pp.305, Ch 13	

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On Campus Clinical Laboratory: Care of Clients Requiring Urinary Catheterization (1.5 hours)

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Part A: Nursing Care of Clients Requiring Urinary Catheterization		
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:	Suggested Learning Activities	
<ol> <li>Describe the indications for urinary catheterization, such as:         <ul> <li>a. measuring residual urine volume</li> <li>b. urinary retention</li> </ul> </li> <li>Describe the procedure for assessing post void residual urine using straight catheterization</li> <li>State the advantages of using a bladder scanner to assess urine volume.         <ul> <li>a. Relate the steps for assessing bladder urine volume using a bladder scanner.</li> </ul> </li> <li>Describe the nursing assessments that should be done prior to catheterizing a client</li> <li>Describe nursing considerations related to catheterization of a female vs. a male client</li> <li>Describe the procedural differences between straight and indwelling catheterization</li> <li>Identify the equipment needed to perform urinary catheterization</li> <li>Compare and contrast the different types of urinary catheters</li> <li>State expected outcomes following completion of the procedure</li> <li>Discuss key principles related to urinary catheterization</li> </ol>	Review handouts/readings/videos related to urinary catheterization.  Review handouts/readings/videos related to bladder scanning  Faculty demonstration of urinary catheterization and removal of indwelling catheter.  Student practice on SimMan®: insertion of indwelling catheter, removal of catheter.  Review of validation performance checklist for urinary catheterization.  Critical thinking exercise and small group discussion: urinary catheterization	

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17. Demonstrate aseptic technique during catheterization and related procedures using laboratory simulation models.

18. Discuss the risks and potential complications associated with catheterization, and the nursing interventions to prevent them

19. Discuss client teaching related to urinary catheterization

20. Demonstrate collection of a urine specimen from a continuous bladder drainage system.

21. Review/Discuss routine catheter care and the procedure for removal of an indwelling catheter (NUR\*101)

Last revised date: 8/2019

\*Times serve as a guideline for faculty planning

Part B: Nursing Care of Clients Requiring Continuous Bladder Irrigation (CBI) and Open Intermittent Catheter Irrigation			
	arning Objectives	<b>Suggested Learning Activities</b>	
-	oon completion of the Learning Laboratory		
the	e student will be able to:		
1.	Discuss the indications and purposes of urinary bladder and catheter irrigation.	Review readings/handouts/videos related to CBI and open intermittent catheter irrigation.	
2.	Describe the indications for closed continuous (CBI) vs. open catheter (Intermittent) irrigation	Demonstration and practice setting up a CBI and performing open intermittent catheter irrigation.	
3.	List the equipment needed to perform closed continuous and open intermittent irrigation.	Critical thinking exercise and small group discussion: bladder irrigation.	
4.	Describe the nursing assessments related to catheter irrigation.		
5.	State the expected outcomes following completion of the procedure		
6.	List the steps required for performing closed continuous bladder irrigation.		
7.	List the steps required for performing open intermittent catheter irrigation.		
8.	Describe nursing considerations related to the prevention of infection when performing catheter irrigation.		

<sup>\*</sup>Times serve as a guideline for faculty planning

Student: \_\_\_\_\_\_Date: \_\_\_\_\_

#### **Competency Assessment/Validation: Insertion of an Indwelling Urinary Catheter**

#### **Competency Assessment/Validation:** Insertion of an Indwelling Urinary Catheter for a Female Client

Psychomotor Skill (Note: specific skills may vary slightly in accordance with equipment or facility protocol)	S/U
Part I: Preparation for Catheterization	
1. Check M.D. order	
2. Gather equipment for catheterization	
a. Correct catheterization kit (Straight or Foley) and correct catheter size	
b. Extra pair of sterile gloves, extra sterile catheter or kit of correct size and type	
c. Bath blanket and linen protector	
3. Identify patient and explain procedure	
4. Wash hands	
5. Provide privacy	
6. Raise height of bed	
7. Position patient in dorsal recumbent position with knees flexed	
8. Drape patient with bath blanket	
9. Cleanse perineum prn and identify anatomical landmarks	
Part II: Getting the Field Ready	
1. Open catheter kit	
2. Place outer plastic wrap at end of bed for waste disposal	
3. Place catheter set on bed between patient's legs	
4. Open outer wrap using principles of sterile technique	
5. Using sterile technique place sterile drape, plastic side down, under buttocks	
6. Don sterile gloves	
7. Place fenestrated drape over perineum maintaining sterility	
8. Organize equipment in order of use	
a. Place cotton balls/swabs, antiseptic solution, and lubricant closest to patient	
<ul><li>b. Pour antiseptic over cotton balls or open packet with swabs</li><li>c. Attach syringe to lumen for inflation after catheter placement</li></ul>	
d. Squirt lubricant onto tray	
e. Lubricate tip of catheter 2 inches	
c. Eudificate up of eatherer 2 menes	
Part III: Inserting Catheter	
Separate the labia minora with your non-dominant hand to expose urethral meatus	
2. Cleanse meatus, using downward strokes (front to back)	
a. Far labial fold first	
b. Near labial fold next	
c. Over center of meatus last	
3. Pick up catheter (3in. from tip) with dominant hand	
4. Ask patient to bear down gently as if to void	
5. Insert catheter 2-3 in. or until urine flows: when urine is seen, advance 1-2 in.	
*Times serve as a guideline for faculty planning Last revised date: 8/2019	

<sup>\*</sup>Times serve as a guideline for faculty planning

Medical/Surgio	cal Topics	
6. Release labia and hold catheter in place with non-d	lominant hand	
7. Inflate balloon with recommended amount of steril	le water and tug gently	
8. Allow bladder to empty		
9. Attach end of catheter to end of tubing on urinary of	drainage device if not pre-attached	
10. Remove gloves and wash hands		
11. Follow hospital protocol regarding securing cathete	er to leg (use clean gloves)	
Part IV: Patient Assessment and Documentation		
1. Assess color, clarity, odor, and amount of urine ob	tained	
2. Cleanse patient's perineum (insure that patient is c	elean and dry)	
3. Remove drapes		
4. Perform Documentation per facility protocol		
Lab Referral Comments:		
Dates Remediated/Comments:		
Validating Instructor	Date:	

<sup>\*</sup>Times serve as a guideline for faculty planning

On Campus Clinical Laboratory: Intravenous Piggy Back Administration (IVPB) (2 hours)

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Nursing Care of Clients requiring Intravenous Administration Medication  Learning Objectives Upon completion of the Learning Laboratory the student will be able to:  Suggested Learning Activities		s Administration Medication
		Suggested Learning Activities
2. D	Discuss the indications and methods of dministration for IV piggy back (VPB) medications.  Demonstrate safe and competent ractice during IV piggyback nedication administration  a. Assessment of client allergies b. Calculation of correct dose c. Verification of medication compatibility d. Maintenance of aseptic technique during preparation and administration of IV medications e. Accurate reconstitution of IVPB medication	Review of handouts/readings/videos related to IV piggyback medication administration.  Demonstration and practice of preparing IV medication for administration via piggyback and saline lock/intermittent infusion device.  Small group work-return demonstration (calculate dose, mix medication in mini bag, calculate infusion rate, back prime secondary line) utilizing laboratory equipment  Practice IV medication reconstitution and calculation of piggyback drip rates.  Critical Thinking Exercise with small group discussion
	<ul><li>f. Regulation of infusion at prescribed rate</li><li>g. Assessment of client response to IVPB medication</li></ul>	Case study: client scenarios  Review IVPB Validation Performance checklist
as	elate potential complications ssociated with IVPB medication dministration.	
S	Demonstrate correct technique for aline lock med/intermittent infusion evice administration (i.e. S-A-S)	
5. D ac m	discuss principles related to the dministration of Intravenous nedication/additives via a primary plution (i.e. Potassium, multivitamins)	Demonstration and practice of adding medication to primary IV solution.
ac	Demonstrate the procedure for dministering IV medication utilizing in infusion pump	Small group work-return demonstration utilizing laboratory equipment

<sup>\*</sup>Times serve as a guideline for faculty planning

#### Competency Assessment/Validation: Administration of Piggyback Medication via Secondary Line (IVPB)

1.	ychomotor Skill (Note: specific skills may vary in accordance with equipment or facility protocol)  Washes hands	S/U
2.	Obtains ordered medication and does three checks against M.D. order on MAR	
3.	Verbalizes checking compatibility of medication with primary solution/additives	
4.	Gathers appropriate equipment  a. Inspects solution for clarity, color, expiration date.  b. Selects appropriate tubing and dates tubing per facility protocol	
5.	Clamps secondary tubing and spikes IVPB bag	
6.	Calculates drip rate precisely	
7.	Properly identifies client and explains procedure	
8.	Washes hands and gathers gloves	
9.	Dons gloves and assesses IV site for:	
	a. changes in temperature	
	b. edema	
	c. leakage	
	d. color (pallor, redness)	
10	e. pain or tenderness	
	. Cleanses upper Y-port on primary tubing with alcohol wipe and attaches secondary set	
11	. Purges air from secondary tubing by back priming (i.e. lowers IVPB below level of Primary bag)	
12	. Closes roller clamp on secondary tubing and hangs IVPB bag on pole	
13	. Lowers primary bag on hanger	
14	. Opens secondary tubing clamp completely	
15	. Sets rate using primary line clamp, adjusted to within 5 gtts/min of correct rate	
16	. Rechecks site to verify no infiltration, pain, leakage	
17	. Verbalizes need to recheck site and rate again in 5-10 min	
18	. Maintains principles of asepsis throughout procedure	
	. Documents per facility policy	

Validating Instructor \_\_\_\_\_\_ Date: \_\_\_\_\_

<sup>\*</sup>Times serve as a guideline for faculty planning

#### **NUR\*102: Family Health Nursing**

On Campus Clinical Laboratory: Administration of Blood/Blood Product Transfusions (1.5 hours)

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Learning Objectives Upon completion of the Learning Laboratory the student will be able to:	Suggested Learning Activities
<ol> <li>Relate the indications and therapeutic purposes for transfusion therapy.</li> <li>Discuss the advantages of autologous transfusions.</li> <li>Describe blood typing systems and their use in determining compatibility of blood components.</li> <li>Describe the principles of safe transfusion administration.</li> <li>Demonstrate safe and competent practice when monitoring transfusions:         <ol> <li>Client assessment pretransfusion</li> <li>Pre-administration protocol</li> <li>Client identification</li> <li>Client monitoring</li> <li>Documentation</li> </ol> </li> <li>Compare and contrast the different types of transfusion reactions.</li> <li>Discuss the prevention and nursing management of transfusion reactions.</li> </ol>	Lecture/Discussion Review of handouts/readings/videos related to blood transfusion. Review of equipment related to blood transfusion. Faculty demonstration of preparing PRBC's for administration. Practice calculating drip rates to ensure timely administration of transfusion. Practice monitoring of blood transfusion. Critical Thinking Exercise/Case Studies/ small group discussion related to the key factors in blood/blood products administration

<sup>\*</sup>Times serve as a guideline for faculty planning

NUR\*102: Family Health Nursing
On Campus Clinical Laboratory: Surgical Assessment (1.5 hours)

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities	
	Describe the <i>initial</i> nursing assessment of the client received from the Post Anesthesia Care Unit (PACU) such as:  a. Airway assessment and positioning for maximal air exchange.  b. Circulatory Assessment (vital signs, physical assessment)  c. Level of Consciousness/ sedation  d. Assessment of Comfort/ Pain Management  Identify the components of a generalized post-op client nursing	Review of readings/handouts/videos related to post-operative nursing assessment and care.  Return demonstration of securing airway  Practice utilizing devices for incentive spirometry and oxygen saturation.  Role play instructing a client in post-op exercises.  Case study/ critical thinking exercise with small group discussion.  Develop a care plan for a post-op client.	
3.	Demonstrate preparation of the bedside unit for the client returning from surgery.	Case study-Small group discussion of post op day #2, development of atelectasis and decreasing oxygen saturation	
4.	Discuss the rationale and teaching considerations for post-operative clients such as:  a. Incentive Spirometry (IS)  b. Leg Exercises/Intermittent		
5.	Describe special considerations for the surgical dressing change		
6.	Discuss nursing interventions that promote resumption of client's baseline function and prevent post-op complications.		

<sup>\*</sup>Times serve as a guideline for faculty planning

#### **On Campus Clinical Laboratory:**

**Nursing Care of Clients with Decompression Tubes; Enteral Tube Medication Administration (2 hours)** 

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Pa	Part A: Nursing Care of Clients with Decompression Tubes				
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities			
1.	Differentiate between the various types of enteral tubes (i.e. PEG, NGT, jejunal, gastrostomy)	Review readings/handouts/videos on NG tube for decompression.  Student practice: setting up for NGT insertion.			
2.	Describe the different types of tubes used for gastric decompression.	Faculty demonstration and student practice:  1. verifying tube placement			
3.	State the purposes of a Nasogastric (NG) tube.	<ul><li>2. anchoring tube</li><li>3. irrigating tube</li><li>4. attaching tube to suction</li></ul>			
4.	Discuss the procedure for insertion of an NG tube.	5. measuring tube output  Critical thinking exercise/case study: client			
5.	Discuss expected outcomes following completion of the procedure.	with an NG tube (NGT)			
6.	Describe the evidence based procedure for verifying placement of an NG tube				
7.	Describe nursing management of the client with an NG tube to include  a. the use of suction,  b. NG Tube irrigation,  c. evaluating NG tube output  d. NG tube removal				

<sup>\*</sup>Times serve as a guideline for faculty planning

Part	Part B: Enteral Tube Medication Administration				
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities			
1. D m 2. D p m 3. L ac en 4. D ac tu	Describe nursing assessments related to medication administration via enteral tubes. Demonstrate techniques for assessing placement of enteral tubes prior to medication administration.  List the steps of the procedure for dministration of medications via an interal tube. Discuss nursing considerations related to dministration of medications via enteral abes such as:  a. Medications contraindicated for enteral administration  b. Contraindications to crushing of certain medications  c. Implications for medication incompatibilities such as:  i. Clamping between medications  Pliscuss measures to prevent complications when administering medications via an interal tube such as:  a. Dislodging of tube  b. Clogging of tube  State expected client outcomes following ompletion of medication administration in an enteral tube	Review of readings/handouts/videos for medication administration via enteral tubes  Faculty demonstration and student practice of procedure.  Critical thinking exercise/ case study with small group discussion.  Review of validation performance checklist for medication administration via enteral tubes.			

<sup>\*</sup>Times serve as a guideline for faculty planning

# Medical/Surgical Topics Competency Assessment/Validation: Medication Administration via an Enteral Tube

Student: Date:	Date:	
Psychomotor Skill (Note: specific skills may vary in accordance with equipment or facility protocol)	S/U	
1. Gathers supplies (60 mL catheter tip syringe)		
2. Prepares medication per procedure using MAR, 6 Rights, Checks 2 forms of identity		
3. Obtains liquid form or crushes meds		
a. Verbalizes verification that medication is crushable		
b. Verbalize to dilute crushed medication with 30 mL water		
4. Assess that tube is securely taped or fastened		
5. Places towel under work area		
6. Places patient in high fowler's position		
7. Dons clean gloves		
8. Disconnects tube from feeding or suction or removes plug		
a. Holds tube up above level of stomach		
b. Pinches tube or uses Lopez valve to prevent backflow and leaking		
9. Confirms tube placement: checks markings, checks aspirate color and pH		
<b>a.</b> Draw back on syringe slowly-obtaining 5-10 mL of gastric aspirate ( <b>if pt is receiving</b>		
feedings you would pull back to measure residual as in step 10)		
b. Gently mix aspirate in syringe		
c. Measure pH-dipping the pH strip into fluid or by applying few drops of fluid to the strip- comparing with the color on the chart provided by manufacturer		
i. Gastric contents < 4, tube feeding pH usually 5 or greater, ph of pleural fluid from the tracheobronchial tree is generally > 6		
10. Verbalizes how to aspirate for residual if feeding		
a. Return aspirated contents unless excessive amount (usually > 100cc)		
11. Flushes with 30 mL of warm water		
12. Removes plunger of syringe		
a. Utilizes Lopez valve appropriately		
b. Places end of syringe into gastric tube		
13. Administers meds by gravity, pours each med separately, flushes with 10 mL H <sub>2</sub> O between		
each med		
14. After last medication flushes with 30-60 mL H <sub>2</sub> O		
15. Removes syringe and inserts clamp/utilizes Lopez valve or connects to tube feeding.  Do not reconnect to suction for 60 minutes		
16. Positions client with HOB elevated 30-45 degrees for 1 hour		
17. Records total amount of fluid given		
18. Verbalizes how to irrigate a nasogastric tube to suction using 30 mL normal saline		
Lab Referral Comments:		
Dates Remediated/Comments:		
Validating Instructor Date:		

<sup>\*</sup>Times serve as a guideline for faculty planning

**On Campus Clinical Laboratory:** 

Pain Management: Nursing Care of Clients with Epidural or Patient Controlled Analgesia (PCA) (1 hour)

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Nu	Nursing Care of Clients with Epidural or Patient Controlled Analgesia (PCA)				
Up	e student will be able to:	Suggested Learning Activities			
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>6.</li> <li>7.</li> </ol>	Describe patient controlled analgesia and the different modalities used to provide it.  Discuss the evidence to support the advantages of PCA and epidural analgesia (evidenced based practice)  Identify clients who would be candidates for PCA/epidural pain management.  State the agents (i.e. opioids) commonly used for PCA and epidural pain management.  Discuss concerns / safety issues related to PCA / epidural use.  Discuss principles and safety features of PCA / epidural pump operation.  Describe the process for client activation of PCA devices  Describe safe and competent nursing care of the client receiving PCA/ epidural analgesia  a. Design a nursing care plan for the client receiving PCA/ epidural analgesia to include but not be limited to:  i. nursing assessments to monitor client response to PCA/epidural analgesia	Review of readings/handouts/videos related to care of the client receiving PCA/epidural pain management.  Review of readings/handouts/videos related to epidural catheter management  Review of equipment used in providing PCA and epidural pain management.  Discuss nursing implications related to client teaching and safety with PCA and epidural.  Case study/ critical thinking exercise and small group discussion related to the care of clients receiving PCA/epidural pain management.			
	<ul><li>ii. nursing assessments to monitor the safety of the client receiving PCA/ epidural analgesia</li></ul>				

<sup>\*</sup>Times serve as a guideline for faculty planning

NUR\*102: Family Health Nursing
Orthopedics Lab: Nursing Care of Clients with Disorders of the Musculoskeletal System (1 hour)

\*Note to students: assigned readings and videos to be completed prior to laboratory attendance

Nursing Care of Clients with Disorders of the Musculoskeletal System				
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:	Suggested Learning Activities			
<ol> <li>Discuss nursing considerations related to mobilizing clients with joint replacements and hip fractures.</li> <li>Relate the principles and rationale of hip precautions and their importance in preventing postoperative dislocation.</li> <li>Describe quad and glut setting exercises.</li> <li>Compare and contrast the different weight bearing status orders commonly seen with post-operative orthopedic clients.</li> <li>Discuss the fitting and use of ambulatory devices appropriate for a client's weight bearing status.</li> <li>Describe functional assist levels and their implications for safely mobilizing the post-op orthopedic client.</li> <li>Review the equipment used in the care of clients with fractured hip and major joint replacements.</li> <li>Relate the purposes, types, complications, and nursing care of the patient in a cast.</li> <li>Plan and implement care for the patient in a cast.</li> </ol>	Power point presentation by guest expert physical therapist.  Demonstration of mobilization techniques and hip precautions by physical therapist.  Discussion and question and answer session with physical therapist.  Student practice of mobilization techniques on peers.			