CONNECTICUT COMMUNITY COLLEGES NURSING PROGRAM

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

*Naugatuck Valley Community College, Three Rivers Community College*

# THREE RIVERS COMMUNITY COLLEGE

Nursing 203

**NURSING CARE OF INDIVIDUALS AND FAMILIES II**

Syllabus and Course Materials

Fall 2019

**The Light at the end of the Tunnel…**

## CONNECTICUT COMMUNITY COLLEGE NURSING PROGRAM

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

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

## NUR\*203: NURSING CARE OF INDIVIDUALS AND FAMILIES II

### Course Prerequisites

NUR\*201: Nursing Care of Individuals and Families I

NUR\*202 Pharmacology for Individuals and Families with Intermediate Health Care Needs

### Course Co requisites

NUR\*204: Pharmacology for Individuals and Families and Groups with Complex Health Care Needs

NUR\*205 Nursing Management and Trends

Humanities or Fine Arts Elective

### Course Components

Credits 8 credits

Hours- Classroom: 45 hours

Clinical: 225 hours

### Course Schedule

Lecture: Thursdays 8:30- 10:30, 12-1:30 in Room A216

Labs: Thursday 8:30- 4:00 Nursing Lab; Clinical and Emergency lab and Mass Casualty

### Course Description

The student will focus on the holistic care of individuals, families, and groups with complex health care needs. The student will incorporate critical thinking, caring behaviors, professionalism, and communication skills when providing nursing care in a variety of acute, long-term and/or community settings. The student will have an opportunity to manage a multi-client assignment with an emphasis on safe and competent practice. An observational experience in a community setting will be provided.

### Course Objectives

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

1. Integrate the principles of holism and nursing theory in providing care to individuals, families and groups with complex health needs. (*As measured by exam questions, group case studies, CLEW, formative and summative clinical evaluations).*
2. Integrate nursing interventions by utilizing the nursing process in providing care to groups of clients with complex health problems across the life-span.(*Measured by exam questions, group case studies, lab exercises, simulation exercise, CLEW, formative and summative Evaluation)*
3. Provide safe and competent care to groups of clients with complex health problems using evidence- based practice, quantitative reasoning and technology. (Measured *by dosage calculation math exam, technology use in lab and clinical, Simulation exercise, clinical oversight, formative and summative evaluation*).
4. Evaluate the therapeutic communication techniques used in nurse-client interactions. (*Measured by exam question, reflective journal, CLEW, clinical oversight, post conference, formative and summative evaluation).*
5. Evaluate the effectiveness of teaching-learning activities that meet the needs of individuals, families and groups experiencing complex health problems. (*Measured by exam questions, CLEW, post conference,* *case studies, formative and summative evaluation).*
6. Collaborate with members of the health care team to establish a culturally competent environment that promotes caring behavior. (*Measured by exam questions, CLEW, simulation, clinical evaluation, formative and summative evaluation).*
7. Collaborate with members of the health care team in a variety of settings. *(Measured by clinical observations, simulation exercises, CLEW, formative and summative evaluation*).
8. Implement strategies to provide accountable and responsible care within the legal-ethical standards of the nursing profession. (*Measured by exam questions, post conference discussions, formative and summative evaluation).*
9. Support the advancement of nursing practice through life-long learning and political awareness. (*Post conference discussion, reflective journal, formative and summative evaluation.*)

## UNIT OBJECTIVES

Please refer to class outline for unit objectives.

### Faculty / Staff Availability

Students are encouraged to seek clarification with the course leader as needed. Students are also encouraged to seek advisement with faculty as needed. Scheduled faculty office hours are posted outside faculty offices. Students may also meet with faculty by appointment. All faculty and staff look forward to your success and practice as a registered nurse. Please utilize your time and ours to develop your abilities to the fullest!

**Director of Nursing and Allied Health**

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**Full Time Faculty**

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Kate Mackenzie, APRN, MS

**Nursing Lab Faculty:**

Denise Cortegiano, MSN, RN

Phone: 860-215-

Email: dcortegiano@trcc.commnet.edu

### Nursing Program College Facilities

Facilities available to the students are: Faculty offices, the library, nursing classrooms and the nursing lab, tutoring center, writing center, counselling center (Student Services). These are located on campus. Computer labs are located within the nursing lab and throughout the E Wing.

### Nursing 203 Clinical / Lab Experiences

**Clinical Facilities** include the following: WW Backus Hospital (part of Hartford Health Care),

Lawrence and Memorial Hospital (part of Yale New Haven System), and the Visiting Nurse

Association of Southeastern CT (part of the Yale New Haven System)

**Psych/Behavioral Health Facilities** include WW Backus Hospital and Natchaug Hospital **Orientation**: All groups will attend orientation sessions for the psych and medical-surgical experiences. Times will be announced as per facility availability.

**Clinical Observational Learning Activity**: All students in good clinical standing will participate in observational activities with selected units/agencies assigned by your clinical faculty. Dates of observation will be assigned as specified on your clinical rotation schedule. Students must attend assigned observations as scheduled. Observational experiences are part of the required clinical hours and must be successfully completed to receive satisfactory passing clinical grade. Required paperwork will be forwarded to medical-surgical faculty person

**Student nurse uniforms and college ID badges** are required. Please review the Student Handbook on Black Board for dress code. Uniforms and nametags are required for all on campus labs.

Attendance is mandatory and counts as clinical time.

**Certified Background Check:** All students are responsible for remaining current throughout the semester in order to attend clinical. Students that have not met the requirements or have expired information will not be allowed to attend clinical until requirements are made current (Please see clinical attendance policy and clinical requirements in Nursing Student Handbook).

### Clinical Equipment and Uniforms

Stethoscope, watch with second hand, bandage scissors, black pen, note paper, assigned text, uniform, ID Badge are required. Hand sanitizer and clean gloves are required for VNA experience. Student nurse uniform per Student Nurse Handbook and identification, i.e. College nametag and/or hospital ID badge, are required for all clinical experiences including psych clinical.

### Grading Policies

To pass Nursing 203 and progress in the nursing program, a student must do **ALL** of the following:

* Achieve at least a 74 average in the theoretical portion of the course. Test items are drawn for ALL content of the course; theory, assigned readings, lecture, lab, clinical and math content. Math content is included on quizzes and the final. The final is worth 25% of the total grade in the theoretical portion of the course.
* Pass Dosage Calculation Competency with 90% accuracy. This is given prior to start of clinical. (Please see the Nursing Student Handbook for the remediation process of failed math exams).
* Pass the clinical component of the course in a satisfactory manner.
* Complete required standardized testing as scheduled for the course.
* ATI practice exams will be assigned with designated points according to rubric The grading schedule is as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Score** | **Grade** |  | **Score** | **Grade** |
| 93-100 | A |  | 74-76 | C |
| 90-92 | A- |  | 70-73 | C- |
| 87-89 | B+ |  | 67-69 | D+ |
| 83-86 | B |  | 64-66 | D |
| 80-82 | B- |  | 60-63 | D- |
| 77-79 | C+ |  | <60 | F |

### Evaluation Activities Reviewed: Examinations: There are five class exams each worth 15% of the final grade spread out throughout the semester. See calendar. Each exam will be 90 minutes with 40 questions. Additional points may be added to the 2nd exam from presentations on cancers in accordance with the rubric. ATI standardized testing and remediation points (potential for 4 points for completion of test and remediation of both exams) will be added to the 5th exam. The additional 25% of the grade is based on the three hour final examination which is a cumulative exam containing 80 questions.

**The expectation is that all students will be present and punctual for exams. No extra time** will be allowed for late arrivals **(See Testing Procedures below**). In the event that the student is absent for personal illness, the student must notify the course coordinator **prior to 7:30 a.m. on the morning of the exam via email**. Failure to do so may result in a failing grade for that particular exam. Planned absences for vacations are **not** valid reasons for missing an exam. If warranted, a cumulative makeup exam will be offered at the end of the semester**.** Any student taking a make-up examination may have **10 points** subtracted from the make-up examination grade unless documentation of extenuating circumstances has been provided to and approved by the Nursing Director.

**Testing Procedures:** 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 7:45, and bubble sheets will be available. Exams will start promptly at 8:00. Students must be in the testing room and ready to start their exam at that time. Any student arriving after 8:00 will be admitted at 8:15. Students arriving after 8:15 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.

Students are required to complete the answer sheet as directed, which includes **accurate** Banner ID number. The final exam will begin at the same time and will be completed by 11:00.

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. Only wrist watches with dial faces will be allowed. Eating and/or drinking are not permitted during exams. Students may not wear hats during exams. Calculators will be provided by the school and no cell phone use is allowed. No electronic devises including watches are permitted during the exam. Wooden #2 pencils are to be used and will be provided by the school at the time of the exam. 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 an exam grade of 0. Exam scores will be posted on Blackboard no later than 48 hours after exam completion.

Students are required to pass a dosage calculation exam with a grade of **90% or above**.

Calculators, pencils and paper are provided. The students have three attempts to pass the exam. For each unsuccessful attempt, the student will need to go to the lab for remediation prior to rescheduling the next attempt with the course leader. Remediation must be scheduled within a week of the exam and the next exam scheduled no later than 2 weeks from the most recent unsuccessful attempt. If the student is not successful on the third attempt, the student will be given the opportunity to withdraw from the course. If the student chooses not to withdraw, a failing grade will be given for the course. The student will be given the opportunity to apply for readmission.

Med calculation rounding rules:

* V, IM and Infusion rates (any medication from a vial), should be rounded to the 10th (for example: 22.3, 27.6, 35.1)
* Infants: should be rounded to the 100th place - **Do not round UNTIL** your final product/answer.
* Drops should be rounded to the nearest drop

**Exam Review:** Students may review concepts from the most recent exam with the lab staff. Students receiving a grade less than 75 must make an appointment with the course leader and consider making an appointment with the theory content instructor to discuss possible remediation to improve test-taking skills.

**Clinical Evaluation Activities:**

Clinical performance is based on how well the learner meets the objectives and achievements identified on the NUR 203 formative clinical evaluation form. Students must successfully meet the clinical objectives in order to pass the course. Students are responsible for self-evaluation and clinical assignments (ie. CLEW, journals). Students will arrange due dates and modes of submissions with their Clinical Instructor.

Clinical Instructors will complete **a weekly written formative evaluation** of the students’ clinical performance and progress, and will **meet weekly** with students to review student progress. The student is responsible for assuring that they review, discuss the evaluation with the clinical instructor and **initial their formative evaluation weekly.**

*C*linical and college lab time including observational learning activities must be completed to successfully meet objectives. Students who do not complete clinical and clinical laboratory hour requirements may receive a grade of **Incomplete**. All absences must be made up, including both clinical, lab, and observational experiences.

Students are strongly encouraged to avoid clinical/lab absences for personal reasons other than student’s **own** illness. Clinical make up days may be added to the end of the clinical rotation **at the discretion** of the faculty. ALL clinical days must be made up for successful completion of the course. **See student handbook.**

**Nursing Lab Resources:** The Nursing lab is available for all students. They offer a wide variety of services to help students succeed. Students may be referred to the lab for tutoring, math skills, clinical skills, organization and time management, study strategies and test taking strategies. Students are encouraged to utilize the lab. However, students do not need to be referred to get the benefit of all services the lab has to offer. Students who frequently use the lab find it to be a powerful tool for success.

A **summative evaluation** will be completed and reviewed at the end of the semester. Students will be assessed on their clinical performance in accordance with their ability to meet the behaviors identified on the NUR 203 Clinical Summative Evaluation Form. **See CT-CCNP Student Handbook for information regarding the clinical evaluation process.**

#### Clinical Absenteeism Policy

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

If the student has more than 2 absences, the student will not be able to meet the clinical objectives resulting in a clinical failure, thereby, failing the course (**please see the student nursing handbook).**

Extenuating circumstances will be reviewed by the nursing faculty and the director of nursing.

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

**Assignments:**

* All students are required to maintain a learning portfolio in Digication that uses the (Three Rivers) College Template.
* APA format is to be used on written assignments.
* ATI practice assessment exams and remediation are considered course assignments. Submit the process recording under the Nursing 203 digication assignment related to *Written and Oral Communications in English Committee.*

#### Course Communication

Communication in NUR 203 is done through Blackboard messaging or through the school email. It is important to get into the habit of checking Blackboard for email and Announcements **at least daily**, as you will be responsible for communications sent to you.

### Student Success in NUR 203

**Organization:** It is important to develop a system that will keep you on track with assignments and tests. This is essential to your success in this course and as you move forward in the profession of nursing. Using calendars, to do lists, alarms that alert you are all strategies to keep you on track and often will decrease your stress.

**Study Groups** aid in your success in NUR 203. It is recommended that students participate in study groups. It has been shown to promote student success. When you decide to join a study group, choose a group with students that are doing well and want to work hard. You can learn from each other through review of information, discussion and explaining concepts to others in the group. This may/may not be your immediate group of friends. For tips on making the most of study groups see the Blackboard posting on Tools for Success. The nursing lab has some space available to meet, as does the library. Staff within the nursing lab are available during posted hours to assist students with tutoring, skills, study/test taking skills or other learning needs. Students are encouraged to be proactive in their learning and seek help independently. It is important to access help early. Learning resources can be found on the NUR 203 Course Shell on Blackboard, Textbook Web Sites and CD’s/DVD’s, materials within the nursing laboratory and library and the ATI website. Students are encouraged to use these independent opportunities consistently.

### Methods of Instruction

Teaching modalities include readings, lecture, PowerPoint, case studies, group activities, polling devises, games, presentations, and simulation.. Computerized programmed instruction and interactive learning tools may be used as well. Blackboard and Digication are NUR 203’s learning management tools. Students are encourage to participate in all activities offered to enhance the learning experience. Student are expected to come to class prepared to participate in class discussions, class activities, role –play, exam review, lab practice and simulations. Participation enhances the learning experience and allows student and instructors the opportunity to learn from each other. Students are strongly encouraged to attend all classes. Tardiness, early departure and absences have a direct impact on student learning and success.

### Nursing Lab Resources

The nursing lab is available for all nursing students. See above.

**Professionalism:** The TRCC nursing handbook states “Professionalism is acquired through a complex process by which the nursing student internalizes values inherent to the practice of nursing. These values include integrity, legal-ethical standards, confidentiality, political awareness, and collegiality.” Professionalism is more than clinical excellence. It is leadership. It is demonstrating nursing ethics and values in one’s words and behaviors. Student will be held accountable to professional standards of behavior in the classroom, clinical and nursing lab and social media.

Classroom and clinical demeanor is a vital part of professionalism. Student should behave respectfully at all times, recognizing each person’s right to learn in an atmosphere conducive to the learning experience.

**DO:**

* **Be honest**
* **Have a positive attitude**
* **Be prompt and be prepared**
* **Strive to be a positive, active member in class group work as well as in clinical as part of the health care team**
* **Avoid side bar conversations**
* **Listen when others are speaking**
* **Avoid negative body language such as eye rolling, loud sighs, smirking**
* **Keep cell phones turned off unless using them for class**
* **Speak respectfully to peers, instructors, patients, family and health team members**
* **Refrain from gossip/complaining regarding peers, instructors, facilities ,staff and patients (HIPPA)**
* **Refrain from social networking/media regarding peers, instructors, facilities, staff and patients (See social networking policy).**

Students who violate the guidelines of courtesy and or professional behavior/demeanor will be asked to leave the setting and will need to complete a performance improvement plan with remediation.

**Required Textbooks: (textbooks are used in prior/subsequent courses)**

1. Potter, P., & Perry, A. (2013). *Fundamentals of nursing, Enhanced multimedia edition* (8th ed.). St. Louis, MI: Mosby/Elsevier. ISBN 978-0-323-08867-1
2. Potter, P., & Perry, A. (2013). *Clinical nursing skills and techniques* (7th ed.). St. Louis, MI: Mosby/Elsevier. ISBN 9780323079334
3. Ackley, B.J, & Ladwig. (2010). *Nursing diagnosis handbook* (9th ed.). Philadelphia, PA: Saunders
4. Lewis, S.L., Dirksen, S.R., McLean Heitkemper, M., Bucher, L., & Camera, I.M. (2011). *Medical-surgical nursing. Assessment and management of clinical problems* (9th/10th ed.). St. Louis, MI: Elsevier Mosby. ISBN 978-0-323-06581-8
5. Wilson. (2013). *Pearson nurse’s drug guide* (2nd ed.). Upper Saddle River, NJ: Pearson. ISBN 9780132964890
6. Pickar, G.D. & Abernathy, A.B. (2013). *Dosage calculations, with CD* (9th ed.). Clifton Park, NY: Delmar Publications. ISBN 9781133707271
7. Lehne, R.A. (2012). *Pharmacology for nursing care, with CD* (9th ed.). St. Louis, MI: Elsevier. ISBN 978-1-4160-6249-3
8. VanLeeuwen, A.M. & Poellhuis-Leth, D.J. (2011). *Davis’s comprehensive handbook of laboratory and diagnostic tests with nursing implications.* Philadelphia, PA: F.A. Davis.
9. Hockenberry, M.J., & Wilson, D. (2013). *Wong’s essentials of pediatric nursing* (8th/9th ed.) St. Louis, MI: Mosby Elsevier.
10. Varcarolis, E.M., Carson, V.B, & Shoemaker, M.C. (2018). *Foundations of psychiatric-mental health nursing* (8th ed.). Philadelphia, PA: W.B. Saunders.
11. Sole M.L., Lamborn and Hartshorn. (2012). *Introduction to critical care nursing* (6th/7th ed.).

 **Optional:**

1. Dillon, P. *Nursing health assessment: Clinical pocket guide.* Philadelphia, PA: F.A. Davis.
2. Pernell & Paulanka. (2009). *Guide to culturally competent health care.* Philadelphia, PA: F.A. Davis.
3. Lehne, R.A. (2012). *Pharmacology for nursing care, with CD* (8th ed.). St. Louis, MO: Elsevier.
4. Sommers M.S. & Johnson, S.A. (2011). *Diseases and disorders: A nursing therapeutics manual.* (4th ed.). Philadelphia, PA: FA Davis.

### Additional Information

**DIGICATION:**

All students are required to maintain a learning portfolio in Digication that uses the TRCC college template. Please upload your N203 **Process Recording** as a General Education artifact. Due Date: **TBA**

#### Nursing Student Handbook

The Connecticut Community College Nursing Program (CT-CCNP) Nursing Student

Handbook contains the program specific policies and procedures in effect for academic year

17/18. It is the student’s responsibility to be familiar with the content in the Nursing Student

Handbook. The student will be held accountable for meeting the expectations outlined in the Nursing Student Handbook, College Catalog, and College Student Handbook. The CT-CCNP reserves the right to modify any information contained in the Nursing Student Handbook. Officially, approved changes will be made known to students through a Nursing Student Handbook Addendum.

Refer to the Nursing Student Handbook for detailed information regarding:

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

#### Three Rivers Community College Student Handbook

Refer to the TRCC Student Handbook regarding Disabilities, Course Refunds, Withdrawal Dates, Financial Aide and other college specific policies and resources.

**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. This course does not offer midterm theoretical warning grades. Students with concerns about their course average are encouraged to contact the course leader.

**DISABILITIES STATEMENT**:

If you have a hidden or visible disability, which may require classroom or test-taking modifications, please see the Disability coordinator as soon as possible. Please be sure to register with the counseling department if you have a learning disability, ADD or ADHD, or Student Services for other physical disabilities. Please see the Three Rivers Community College Catalog for additional policies and information.

## COUNSELING

Student counselling is available at no charge to the student. If you are having trouble, please notify your course leader and/or visit the counselors in the student services area. You can call the counseling cent directly at 860-215-9017. They can help with career counseling, personal counseling, transfer issues, financial issues, community service needs etc.

**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 begin when the college opens. 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. Your clinical instructor will guide you to the most appropriate way to communicate with him/her. Preplanning and communication with your clinical instructor and course coordinator is important. (The College Student Handbook and Catalog lists tv/radio stations announcing cancellations). This information may also be found at: [www.trcc.commnet.edu](http://www.trcc.commnet.edu/) or via Blackboard.

In addition, myCommNet Alert is a system that sends text messages and emails to anyone signed up in the event of a campus emergency. TRCC also sends messages when the college is delayed or closed due to weather. You can sign up for my CommNet Alert on your myCommnet portal.

**INDIVIDUALIZED LEARNING NEEDS:** The student has the option of choosing which method of studying or combination of methods is most suitable for his/her learning needs. Faculty may request completion of additional learning activities as indicated by student needs. Extra practice sessions can be planned in the laboratory upon request. Study groups can be formed. Additional reading materials can be suggested. Audio and visual tapes and computerized materials on several patient situations are available. At the discretion of the faculty team, individual student clinical rotations maybe re-sequenced to facilitate student learning.

**ACADEMIC INTEGRITY:**

“Academic integrity is essential to a useful education. Failure to act with academic integrity severely limits a person’s ability to succeed in the classroom and beyond. Furthermore, academic dishonesty erodes the legitimacy of every degree awarded by the College. In this class and in the course of your academic career, present only your own best work; clearly document the sources of the material you used from others; and act at all times with honor.” See TRCC Student Handbook. A student's written work is expected to be **original** and done independently unless otherwise indicated. This includes work in the classroom and online environments. Footnotes and references must be used to acknowledge the source to avoid plagiarism.

Selected portions of the nursing curriculum are taught, reinforced, or reviewed through the use of educational software/instructional media: e.g., videotapes, computer programs, audio cassettes, filmstrips, online learning activities, etc. Students must sign an Ethics Statement regarding the use of these materials and agree to follow the policies outlined in the Statement.

The signed Ethics Statement is retained in each student's record.

Violations of academic integrity will be referred to the Academic Dean and dealt with in accordance with the college policy on Academic Integrity. See Nursing Student Handbook.

**STATEMENT ON PENALTY FOR ACADEMIC DISHONESTY OR PLAGIARISM:**

Plagiarism is the unacknowledged use of another person’s words or ideas in your writing. Whether conscious or not, plagiarism is a serious offense. Evidence that you did not write material that you submit under your name ***can result in failure for the entire course.*** Refer to College Catalog for the policy. Students are expected to:

Demonstrate academic integrity by not engaging in conduct that has as its intent or effect he 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 specified in the Nursing Student Handbook.

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

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

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

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

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

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

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

**Maria Krug**, Title IX Coordinator and Diversity Officer, Office C131

574 New London Turnpike, Norwich, CT 06360

860-215-9280

OR

Student Services and Admissions Welcome Center, Office A113

574 New London Turnpike, Norwich CT 06360

860-215-9280

**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 203: NURSING CARE OF INDIVIDUALS AND FAMILIES II**

**Outline**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **1**  | **On Campus** **Clinical** **Lab #1** **7.5 hours**  | **Nursing Care of Clients with Alterations in Mental Health Part B (3.75 hours)****Nursing Care of Clients with Alterations in Mental Health Part C: Psychiatric Nursing Clinical Orientation (3.75 hours)****See attached Laboratory learning experience outline** |
| **1**  | **1.5 hours**  | **Unit I: Nursing** **Care of Clients** **Experiencing Behavioral Issues and Personality** **Disorders** **Crisis Intervention** **Theory** Differentiate among the three types of crisis  Compare and contrast the four phases of crisis  Analyze the components of the holistic assessment of clients in crisis  Formulate appropriate nursing diagnoses for clients experiencing crisis  Design measurable outcomes for the clients experiencing crisis  | 1. Critical Thinking: Nursing process applied to clients with behavioral issues
2. Provision of safe, holistic, culturally competent care to clients in crisis

Crisis Theory: Types of Crisis * 1. Etiology
		1. Maturational
		2. Situational
		3. Adventitious
	2. Pathophysiology: Phases of Crisis
	3. Clinical manifestations
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidenced- based theory and principles
	7. Collaborative management Treatment modalities:
		1. Client’s perception
		2. Situational supports
		3. Coping skills
		4. Self-assessment
		5. Client safety
		6. Anxiety reduction
		7. Counseling Strategies
		8. Critical Incident
		9. Stress
		10. Pharmacology
		11. Nutritional
	8. Health Promotion/ Maintenance Restoration and/or Prevention
 | Assigned Readings: **Varcarolis** Chapters 26 & 27; Also pp 131-143, 147-166  Assigned readings for *lab*: **Lewis** Chapter 1 **Sole** pp 8-9 **Varcarolis** Chapters 24, 25, 26  Lecture  Discussions  Case studies: Crisis  Role play a client in crisis  Provide nursing care to a client experiencing a crisis Poster presentation per clinical groups assigned by instructor  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **Week** | **WEEK****HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Examine nursing interventions used in caring for clients experiencing crisis  Evaluate client responses to crisis and nursing interventions  Discuss evidence based practice related to crisis  | 1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 |  |  |
| **1**  | **1.5 hours**  | **Behavioral Issues:** **Anger and** **Aggression** Differentiate appropriate nursing responses in caring for clients with behavioral issues. Evaluate the role of the nurse in determining effective interventions when caring for clients with behavioral issues.  Discuss evidence based practice related to behavioral issues.  | 1. Critical Thinking: Nursing process applied to clients experiencing behavioral issues

1. Provision of safe, holistic, culturally competent care to clients with behavioral issues

Behavioral issues: Types: Manipulative behavior, Anger, Aggressive behavior, Impulsive behavior * 1. Etiology
	2. Pathophysiology
	3. Clinical Manifestations & complications
	4. Diagnostic Evaluation
	5. Cultural considerations
	6. Evidenced- based theory and principles
	7. Collaborative management Treatment modalities:
		1. Pharmacological
		2. Interventions for specific behaviors:
	8. Manipulative Behavior
	9. Anger
	10. Aggressive Behavior
	11. Impulsive Behavior
	12. Health maintenance and/or Prevention
1. Communication
	1. Client and family education
	2. Community resources
 | Assigned Readings:  **Varcarolis** Chapters 26 & 27 Also pp 131-143, 147-166  Assigned readings for *lab*: **Lewis** Chapter 1 **Sole** pp 8-9 **Varcarolis** Chapters 24, 25, 26    Lecture Discussion  Case studies: Behavioral issues  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  |  | 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Provide nursing care to a client experiencing a behavioral issue |  |
| **2**  | **1 hour**  | **Unit III: Nursing** **Care of Clients** **Experiencing** **Cancer** **Overview of** **Cancer/****Pathophysiology:**Discuss age related changes and their effect on clients withcancerSummarize the agents identified to be carcinogensExamine the role of health education andpreventive care in decreasing the incidence of cancer   | 1. Critical Thinking: Nursing process applied to clients with cancer
2. Provision of safe, holistic, culturally competent care to clients with cancer
	1. General aspects of cancer
	2. Age related changes
	3. Risk Factors
	4. Etiology: Developmental factors
	5. Incidence
	6. Pathophysiology
3. Benign vs. Malignant Tumors
4. Classification of malignant neoplasm
5. Characteristics of cells
6. Metastases
7. Staging & Grading of malignancies

7. Clinical manifestations and complications  1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development

  | Assigned Readings: **Lewis** (Ed. 9) Chapter 16 **Lewis** (Ed. 10) Chapter 15  Article: Chemo Man http://tmedweb.tulane.edu/ph armwiki/doku.php/chemo\_ma n\_visual\_mnemonic  Recommended Movie (not mandatory): Wit (2001) [https://www.youtube.com/wa tch?v=u0PPvYlGqL8](https://www.youtube.com/watch?v=u0PPvYlGqL8)  Lecture Discussion  Case Study: Oncology  Provide nursing care to a client with cancer  Web Site: [www.acs.org](http://www.acs.org/) www.nci,nih.gov [www.mayoclinic.org](http://www.mayoclinic.org/) [www.mdanderson.org](http://www.mdanderson.org/) [www.mskk.org](http://www.mskk.org/) [www.cancer.org](http://www.cancer.org/) [www.cancer.med.upenn.edu](http://www.cancer.med.upenn.edu/) [www.cancernews.com](http://www.cancernews.com/)   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |

|  |  |  |  |  |  |
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| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **2**  | **1 ½ hours**  | **Diagnostic** **Evaluation and** **Common Cancer** **Treatment** **Modalities** Differentiate among the purposes of surgical procedures used in cancer diagnosis  Differentiate among the purposes of surgical procedures used in cancer treatment, diagnosis, prophylaxis, palliation and reconstruction  | 1. Nursing process applied to clients with cancer

 1. Provision of safe, holistic, culturally competent care to clients with cancer
	1. Diagnostic evaluation
	2. Cultural considerations
	3. Evidence-based theory and principles
	4. Detection & prevention of cancer
	5. Health Promotion/Maintenance
	6. Restoration and/or Prevention
	7. Collaborative management

 a. Common Treatment Modalities 1. Surgery
2. Radiation
3. Chemotherapy
4. Immunotherapy
	1. Surgical management
		1. Curative
		2. Palliative
		3. Prophylactic
		4. Reconstructive

1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 |   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT****OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **2**  | **1.5 hours**  | **Common Cancer** **Treatment** **Modalities** Compare and contrast surgery, radiation, chemotherapy, and immunotherapy in the treatment of cancer Discuss the common side effects of chemotherapy and appropriate nursing interventions  Examine the role of the nurse in managing the client undergoing radiation therapy   | 1. Critical Thinking: Nursing process applied to clients receiving treatment for cancer
2. Provision of safe, holistic, culturally competent care to clients receiving treatment for Cancer
	1. Chemotherapy
		1. Routes of administration
		2. Managing common side effects
3. Infection
4. Alopecia
5. Stomatitis
6. N&V
7. Anorexia
8. Fatigue
	* 1. Nutritional concerns
	1. Radiation therapy: Types of radiation
		1. High voltage
		2. Low voltage
		3. Intraoperative
		4. Intracavitary implants
	2. Immunotherapy
9. Communication
	1. Client and family education
	2. Community resources
10. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Assigned Readings  Lecture  Discussion  NCLEX style questions   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **3**  | **Exam 1****1 hour**  |  | **Exam 1** |   |   |
| **3**  | **1.5 hour**  | Summarize the role of the nurse in assessment and collaborative management of the client with an oncologic emergency       | 1. Critical Thinking: Nursing process applied to clients with an oncologic emergency
2. Provision of safe, holistic, culturally competent care to clients with an oncologic emergency
	1. Sepsis/Septic Shock
	2. Other Oncologic Emergencies
		1. Superior vena cava syndrome
		2. Hypercalcemia
		3. Spinal cord compression
		4. Pleural effusion and Tamponade
		5. Syndrome of inappropriate secretion of antidiuretic hormone (SIADH)
 | Review:**Lewis** (Ed. 9) pp 291-301 (Fluid & electrolyte Imbalances)**Lewis** (Ed. 10) pp 278-292 **Lewis** (Ed. 9) Chapter 16 **Lewis** (Ed. 10) Chapter 15 Oncologic Emergencies **Lewis** (Ed. 9) pp 657-664 **Lewis** (Ed. 10) pp 262-264 Key overview p 263 **Sole** (Ed. 6) pp 486-487 **Sole** (Ed. 7) pp 465-8  NCLEX style questions  Compare/contrast assessments, symptoms and interventions, evaluation and teaching for oncologic emergencies, discovering common concepts  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **3**  | **1.5 hr**  | Discuss the concept of death and dying for clients with cancer  Evaluate the concept of hospice care in caring for the client with advanced cancer Discuss the ethical legal issues associated with the Right-To-Die  | 1. Critical Thinking: Nursing process applied to clients with cancer
2. Provision of safe, holistic, culturally competent care to clients with cancer
 | **Lewis** (Ed. 9) Chapter 10 **Lewis** (Ed. 10) Chapter 9 Pain/symp mgmt. end of life **Lewis** (Ed. 9) pp 124-125 **Lewis** (Ed. 10) pp 140-141Article: Clinically Differentiating Palliative Care and Hospice Article: http://www.oncologynurseadvisor.com/the-totalpatient/hospice-versuspalliative-careunderstanding-the-distinction/article/168852/  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Formulate a holistic, comprehensive care plan for clients across the lifespan with cancer  Discuss evidence based practice when caring for the client with cancer. |  | Palliative Care discussion Guest Speaker: Hospice |  |
| **4**  | **2 hours**  | **Overview of care of clients with cancer of the reproductive system**  Examine the incidence, etiology and pathophysiology in the care of the client with reproductive cancer Differentiate among the common diagnostic tests and procedures used to evaluate the client with reproductive cancers  Compare the therapeutic usefulness of surgery, chemotherapy radiation and hormone therapy in treating reproductive cancers  Compare and contrast Ovarian and Prostate cancer  Examine the physical, psychosocial and rehabilitative needs of the client with reproductive cancers  Summarize the common interdisciplinary resources available to the client with reproductive cancer | 1. Critical Thinking: Nursing process applied to clients with reproductive cancers: cervical ovarian, prostate.
2. Provision of safe, holistic, culturally competent care to clients with reproductive cancer.
	1. Age related changes of the reproductive system
	2. Etiology
	3. Pathophysiology
	4. Clinical manifestations and complications
	5. Diagnostic evaluation
	6. Cultural considerations
	7. Evidence-based theory and principles
	8. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
		3. Pharmacological
		4. Nutritional
	1. Health Promotion/Maintenance
	2. Restoration and/or Prevention
	3. Nursing management of clients with ovarian cancer
	4. Incidence/Risk factors
	5. Clinical manifestations
	6. Assessment and diagnostic findings
	7. Medical Management
1. Surgical management
2. Pharmacologic therapy
	1. Nursing Care
	2. Nursing management of clients with prostate cancer
3. Incidence/Risk factors
4. Clinical manifestations
5. Assessment and diagnostic findings
6. Medical Management
7. Surgical management
8. Radiation Therapy
9. Hormonal Therapy
10. Other Therapies
11. Nursing Care

 1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Assigned Readings **Lewis** (Ed. 9): Chapter 52 (Breast) **Lewis** (Ed, 10) Chapter 51 Reproductive Cancers **Lewis** (Ed. 9) pp 1291-1296 (Cervical/Ovarian) **Lewis** (Ed. 10) pp 1256-9 **Lewis** (Ed. 9) pp 1314 -1320 (Prostate) **Lewis** (Ed. 10) pp 1275-1280 Lecture  Discussion  Develop a teaching plan for a client with breast cancer Web Site: [www.reachtorecovery.org](http://www.reachtorecovery.org/) [www.brestcancer.net](http://www.brestcancer.net/)  Provide nursing care & teaching plan to a client with breast cancer   Group activity: Provide Nursing teaching plan related to Ovarian, cervical, prostate cancers    | Exam Case study teaching presentations on different cancers  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **4**  | **1.5 hours**  | Differentiate among the common diagnostic tests and procedures used to evaluate the client with breast cancer  Discuss evidence based practice when caring for the client with breast cancer  Compare the therapeutic usefulness of surgery, chemotherapy, radiation and hormone therapy in treating breast cancer.  Examine the physical, psychosocial and rehabilitative needs of the client with breast cancer  Summarize the common interdisciplinary resources available to the client with breast cancer | 1. Critical Thinking: Nursing process applied to clients with breast cancer
2. Provision of safe, holistic, culturally competent care to clients with breast cancer
	1. Age related changes of the Breast
	2. Etiology
	3. Pathophysiology
	4. Clinical manifestations and complications
	5. Diagnostic evaluation
	6. Cultural considerations
	7. Evidence-based theory and principles
	8. Collaborative management: Treatment Modalities
		1. Surgery
			1. Lumpectomy
			2. Simple mastectomy
			3. Modified radical mastectomy
			4. Radical mastectomy
			5. Breast reconstruction
		2. Chemotherapy
		3. Radiation
		4. Hormones
		5. Nutrition
	9. Health Promotion/Maintenance Restoration and/or Prevention
3. Communication
	1. Client and family education
	2. Community resources
4. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Group Activity: Teaching plan presentation related to a patient with breast cancer Lecture Case study  | Exam Case study Teaching plan presentation  Clinical Experience Workbook (CLEW)  Clinical performance evaluation |
| **4**  | **1 hour**  | **Lymphoma/** **Leukemia** Discuss the incidence, etiology, pathophysiology in the care of the client with lymphoma  Compare and contrast Hodgkin’s disease and NonHodgkin’s Lymphoma  Summarize the collaborative management and nursing care of the client with lymphoma. | 1. Critical Thinking Hematologic Cancers:
2. Nursing process applied to clients lymphoma
3. Provision of safe, holistic, culturally competent care to clients with lymphoma
	1. Age related changes of the immune system
	2. Etiology
	3. Pathophysiology: Classification:
		1. Hodgkin’s Disease
		2. Non-Hodgkin’s lymphoma
	4. Clinical manifestations and complications
	5. Diagnostic evaluation
	6. Cultural considerations
	7. Evidence-based theory and principles
	8. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
		3. Pharmacological therapy
		4. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention 1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Assigned Readings: Hematologic Cancers Review **Lewis** (Ed. 9) pp 657-664 Review **Lewis** (Ed. 10) pp 622-626; 629-635**Lewis** (Ed. 9) pp 664-675 **Lewis** (Ed. 10) pp 635-652 Lymphoma, Leukemia, Myeloma **Sole** pp 487-490 **Wong** pp 888-894 Review **Lewis** (Ed. 9) p 200, Review **Lewis** (Ed. 10) p 188 Stem Cell Transplant **Lewis** (Ed. 9) pp 274-276 **Lewis** (Ed. 10) pp 187-8; 2601; 587 **Sole** p 474  Lecture  Discussion  Handouts Group Activity:Develop a teaching plan for a client with Hematologic cancers  Provide nursing care to a client with lymphoma Teaching plan presentation  | Exam Case study Presentation Nursing teaching plan  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **4**  | **1.5 hours**  | **Cancer in Children** Summarize the commonalities and specific differences in the care of common childhood cancers  Discuss evidence based practice related to childhood cancers.  Compare and contrast the common childhood cancers  Examine the collaborative management of the adult or child who is dying    | 1. Critical Thinking: Nursing process applied to childhood cancer: Leukemia, Brain Tumor, Neuroblastoma, Ewing’s, Sarcoma, Wilms Tumor
2. Provision of safe, holistic, culturally competent care to children with cancer:
	1. Age related changes
	2. Etiology
	3. Pathophysiology
	4. Clinical manifestations and complications
	5. Diagnostic evaluation
	6. Cultural considerations
	7. Evidence-based theory and principles
	8. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
		3. Pharmacological therapy
		4. Nutritional
		5. Rehabilitative
	1. Health Promotion/Maintenance Restoration and/or Prevention
1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Assigned Readings: **Wong:** (Ed. 9) pp 888-894; 1081-1084 **Lewis** (Ed. 9) pp1542-4**Lewis** (Ed. 10) pp 1500-1 Lecture  Discussion Teaching plan presentation  Handouts  Case Study: Child with Cancer   | Exam  Nursing teaching plan presentation  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **5**  | **3.0 hours**  | **Personality** **Disorders and** **Client Behavior of** **Manipulation** Analyze the interaction of biological determinants and psychodynamic factors in the etiology of personality disorders. Differentiate personality traits and styles from personality disorders.  Examine predominant behavioral cluster categorization for personality disorders.  Identify the predominant defense mechanisms utilized by clients diagnosed with personality disorders.Apply the nursing process for clients identified as having personality disorders.   | 1. Critical Thinking: Nursing process applied to clients experiencing personality disorders
2. Provision of safe, holistic, culturally competent care to clients with personality disorders

Personality Disorders * 1. Etiology
	2. Pathophysiology
		1. Prevalence and Comorbidity
		2. Biological determinants
		3. Psychosocial Factors
	3. Clinical manifestations: Common characteristics of personality disorders
		1. Cluster A
			1. Paranoid
			2. Schizoid
			3. Schizotypal
		2. Cluster B
			1. Antisocial
			2. Borderline
			3. Histrionic
			4. Narcissistic
			5. Manipulative Behavior
		3. Cluster C
			1. Avoidant
			2. Dependent
			3. Obsessive-Compulsive
	4. Diagnostic Evaluation: DSM- IV-TR Criteria
	5. Cultural considerations
	6. Evidence based theory and Practice
	7. Collaborative management of clients with selected personality disorders: paranoid, antisocial, borderline, obsessive compulsive
		1. Treatment modalities
			1. Milieu therapy
			2. Psychobiological interventions
			3. Case management
			4. Communication
 | Assigned Readings:  Assigned Readings: **Varcarolis** Chapters 26 & 27 Also p 131-143, 147-166  Assigned readings: **Lewis** Chapter 1 **Sole** .8-9 **Varcarolis** Chapters 24, 25, 26  Lecture  Discussion  Role Play:- Restraints  Psychiatric Patient’s Bill of Rights  Gaming  Provide nursing care to a client experiencing a personality disorder   |  Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation    |
| **Week** | **WEEK HOURS** | **UNIT****OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Discuss evidence based practice related to personality disorders. | * + - 1. Pharmacological therapy
			2. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention 1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 |  |  |
| **6**  | **Exam 2** **1 hour** |   | **Exam 2** |   |   |
| **6**  | **2 hours**  | **Unit II: Nursing** **Care of Clients** **Experiencing** **Alteration in Renal** **Function** Discuss age related changes associated with renal failure  Compare and contrast the nursing management of acute and chronic renal failure  Differentiate among the common diagnostic tests used to evaluate renal failure  | 1. Critical Thinking: Nursing process applied to clients experiencing a disturbance in renal function.
2. Provision of safe, holistic, culturally competent care to clients with acute and chronic renal failure.
	1. Age related changes of the renal system
	2. Etiology
	3. Pathophysiology
	4. Clinical manifestations and complications
	5. Diagnostic evaluation
	6. Cultural considerations
	7. Evidence-based theory and principles
	8. Collaborative management

Treatment Modalities * + 1. Hemodialysis
		2. Peritoneal dialysis
		3. CAPD
		4. Transplantation
		5. Pharmacological therapy
		6. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention | Assigned Readings:  **Lewis** (Ed. 9) Chapter 47 **Lewis** (Ed. 10) Chapter 46 **Sole** (Ed. 6) Chapters 15 & 21 **Sole** (Ed. 7) Chapters 11 & 16  Lecture  Discussion  Case Study: Renal  Observation in Hemodialysis in hospital setting   |  Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation Exam    |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Formulate a holistic, comprehensive plan of care for clients with altered renal function  Provide safe and competent care through collaboration with members of the interdisciplinary team  Discuss evidence based practice when discussing clients with renal failure | 1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Web Site: [www.auanet.org](http://www.auanet.org/) [www.kidney.org](http://www.kidney.org/) [www.aakp.org](http://www.aakp.org/) [www.renalnet.org](http://www.renalnet.org/) [www.mayoclinic.org](http://www.mayoclinic.org/) [www.urologichealth.org](http://www.urologichealth.org/)  Provide nursing care to a client with alternation in renal function  |  |
|  | **1 hour**  | Summarize the care of a client with a renal transplant  | Organ Transplantation Prototype: Renal 1. Critical Thinking: Nursing process applied to clients with a renal transplant.
2. Provision of safe, holistic, culturally competent care to clients with a renal transplant.
	1. Sources of donation
		1. Living, deceased, living non-related
		2. Organ donor awareness
	2. Donor and recipient workup management
		1. Preoperative management/workup
		2. Postoperative management
	3. Nursing
		1. Assessing the client for transplant rejection
			1. Immunosuppression
	4. Preventing infection
	5. Monitoring urinary function
	6. Addressing psychological concerns
	7. Monitoring and managing potential complications
	8. Promoting home and community based care
	9. Continuing care
 | Assigned Readings  Lecture  Discussion  Guest Speaker: Renal Transplant Coordinator     | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  |  | 1. Communication
	1. Patient and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 |  |  |
| **7**  | **On Campus** **Clinical** **Emergency** **Lab #2** **7.5 hours**  | **Response to a Cardiopulmonary Resuscitative Event:****The role of the Nurse in Rescue and Resuscitation Neuro Assessment Lab****See attached Laboratory learning experience outline** |
| **8**  | **3 hours**  | **Unit IV: Nursing** **Care of Clients** **Experiencing** **Neurological** **Disorders** Compare and contrast the normal neurological assessment across the life span  Determine factors that contribute to increased intracranial pressure (↑ ICP).  Examine the clinical manifestations of a client experiencing ↑ ICP. Analyze supportive nursing interventionsfor a client with ↑ICP. | 1. Critical Thinking: Nursing process applied to clients experiencing a disturbance in neurological function

 1. Provision of safe, holistic, culturally competent care to clients with disturbance in neurological function: Increased Intracranial Pressure (↑ ICP),

 Age related changes of the neurological system * 1. Neurological assessment
		1. Adult assessment
		2. Pediatric assessment
	2. Etiology and Risk Factors
	3. Pathophysiology
	4. Clinical manifestations and complications
	5. Diagnostic evaluation
		1. Electroencephalography
		2. Computerized Tomography Scanning
		3. Magnetic Resonance Imaging
		4. Cerebral Angiogram
	6. Cultural considerations
	7. Evidence-based theory and principles
	8. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
 | Assigned Readings **Lewis** (Ed. 9) Chapters 56 & 57 up to p 1368 **Lewis** (Ed. 10) Chapters 55 & 56  **Sole** (Ed. 6) Chapter 13 pp 345-64 **Sole** (Ed. 7) Chapter 14  Lecture  Discussion  Case Study: ↑ ICP  Direct instruction with Power Point and Gaming  Provide nursing care to a client with a disturbance in neurological function   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  |  Explain collaborative treatment modalities that support reduction of ↑ICP.  Analyze supportive nursing interventions for a client with ↑ICPDiscuss evidence-based practice when caring for a client with ↑ICP.  Compare and contrast pre and postoperative nursing care of clients who undergo intracranial surgical procedures: ventriculostomy, supratentorial craniotomy, nfratentorial craniotomy, transsphenoidal resection.  Explore the nurse’s role in supporting families who experience ethical and legal challenges associated with intracranial surgery. | * + - 1. ventriculostomy
			2. Craniotomy (supratentorial, infratentorial, transphenoidal)
		1. Rehabilitative
		2. Pharmacological
		3. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention  1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
		1. end-of-life decisions
		2. surrogate consent
	2. Role development
 |  |  |
| **Week**  | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
| **8**  | **1 hour**  | Distinguish between common degenerative and autoimmune neurological disorders.  Compare the major nursing interventions to support client independence.  Examine the etiology, pathophysiology, clinical manifestations and collaborative management of the client with multiple sclerosis and myasthenia gravis. Formulate a comprehensive, holistic plan of care for the client with multiple sclerosis and myasthenia gravis.  | 1. Critical Thinking: Nursing process applied to clients experiencing an autoimmune disorder: Multiple Sclerosis, Myasthenia Gravis

 1. Provision of safe, holistic, culturally competent care to clients with an autoimmune disorder
	1. Etiology
	2. Pathophysiology
	3. Clinical manifestations and complications
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidence-based theory and principles
	7. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
		3. Rehabilitative
		4. Pharmacological
		5. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention  1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Assigned Readings **Lewis** (Ed. 9) Chapters 58, 59 pp 1428-42 ; Chapter 61 pp 1467-87 **Lewis** (Ed. 10) Chapters 57,58 & 60 **Sole** pp 389-98  Lecture  Discussion  Embedded Multimedia  Case Study: Multiple Sclerosis or Myasthenia Gravis, Gillian Barre and ALS  Provide nursing care to a client with an degenerative or autoimmune disorder Web Site: [www.nmss.org](http://www.nmss.org/)   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **8**  |  | Examine the etiology, pathophysiology, clinical manifestations and collaborative management of the client with Parkinson’s disease. | 1. Critical Thinking: Nursing process applied to clients experiencing a degenerative disorder: Parkinson’s disease

 1. Provision of safe, holistic, culturally competent care to clients with a degenerative disorder
	1. Etiology
 | Assigned Readings  Lecture  Discussion  Embedded Multimedia  | Exam  Clinical Experience Workbook (CLEW)   |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Week**  | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
|  |  | Formulate a comprehensive, holistic plan of care for the client with Parkinson’s disease.  Discuss evidence based practice as it relates to Parkinson’s disease.   | 1. Pathophysiology
2. Clinical manifestations and complications
3. Diagnostic evaluation
4. Cultural considerations
5. Evidence-based theory and Principles
6. Collaborative management

Treatment Modalities * 1. Medical
	2. Surgical
	3. Rehabilitative
	4. Pharmacological therapy
	5. Nutritional
1. Health Promotion/Maintenance

Restoration and/or Prevention  1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Provide nursing care to a client with a degenerative or autoimmune disorder  Web Site: [www.parkinson.org](http://www.parkinson.org/)   | Clinical performance evaluation   |
| **9**  | **Exam 3** **1 hr**  |   | **Exam 3**  |   |   |
| **9**  | **2 hours**  | **Care of the Client/Patient experiencing a Cerebrovascular** **disorder**  Correlate stroke pathophysiology with its major clinical manifestations and complications.   | 1. Critical Thinking: Nursing process applied to clients experiencing a Cerebrovascular Disorder ( CVA, Stroke, Brain Attack)

 1. Provision of safe, holistic, culturally competent care to clients with Cerebrovascular Disorders.
2. Age related changes of the neurological system
3. Etiology and Risk Factors
4. Pathophysiology
	1. Ischemic
	2. Hemorrhagic
5. Clinical manifestations and complications
 | Assigned Readings **Lewis** (Ed. 9) Chapter 57 pp 1368 to end; Chapters 58 and 60 **Lewis** (Ed. 10) Chapters 56, 57, 58 & 59 **Sole** pp 365-76 and pp 377-85  Lecture  Discussion  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |

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| **Week**  | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
|  |  | Discuss the common risk factors for stroke.  Formulate a holistic, comprehensive care plan for clients across the life-span with a stroke.  Differentiate among the common diagnostic tests and procedures used to evaluate the client with a stroke.  Compare and contrast the differences of care utilized in clients experiencing ischemic or hemorrhagic stroke.  Discuss evidence based practice when caring for the client with a stroke.  Describe the role of the multidisciplinary team in providing care for the client with a stroke and his/her family.   | 1. Diagnostic evaluation
2. Cultural considerations
3. Evidence-based theory and principles
4. Collaborative management

Treatment Modalities 1. Medical
2. Surgical
3. Rehabilitative
4. Pharmacological
5. Nutritional
6. Health Promotion/Maintenance

 Restoration and/or Prevention  1. Communication
2. Client and family education
3. Community resources

 1. Professionalism
2. Legal-ethical issues
3. Role development
 | NCLEX Style Questions with interactive polling  Case Study: Stroke  Observational experience in a Rehabilitation Center  Attend a multidisciplinary team meeting during clinical  Provide nursing care to a client with a stroke  Web Site: [www.stroke.org](http://www.stroke.org/)    |          |

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| **Week**  | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
|  |  | Determine the role of the family in the client’s acute and rehabilitative phases of care.   |  |  |  |
| **10**  | **2 hours**  | Differentiate among manifestations of paralyzing disorders. Examine the etiology, pathophysiology, clinical manifestations and collaborative management of the client with a paralyzing disorder.  Compare and contrast nursing care needs for clients experiencing chronic versus resolving paralysis. Formulate a comprehensive, holistic plan of care for the client during the acute, intermediate, and rehabilitative phases of spinal cord injury.  Prioritize educational needs of the client with a paralyzing disorder.  | 1. Critical Thinking: Nursing process applied to clients experiencing a disorder that results in paralysis: spinal cord injury, Guillian Barre’ Syndrome, Amyotrophic Lateral Sclerosis (ALS)

 1. Provision of safe, holistic, culturally competent care to clients with a paralyzing disorder.
2. Etiology
3. Pathophysiology
4. Clinical manifestations and complications
5. orthostatic hypotension
6. respiratory insufficiency (ventilator dependency for high cord)
7. autonomic dysreflexia
8. skin and decubitus ulcers
9. DVT and PE
10. heterotopic ossification
11. neurogenic bladder/bowel
12. sexual dysfunction
13. psychological maladaptation
14. Neurogenic Shock
15. Diagnostic evaluation
16. Cultural considerations
17. Evidence-based theory and principles
18. Collaborative management

Treatment Modalities 1. Medical
2. Surgical
3. Rehabilitative
4. Pharmacological
5. Nutritional
 | Assigned Readings **Lewis** (Ed. 9) Chapter 59 pp 1428-42; Chapter 61 pp 1467-87 **Lewis** (Ed. 10) Chapters 58 & 60  **Sole** pp 389-98  Lecture  Discussion  Case Study: Spinal Cord Injury  Direct instruction with Power Point and Gaming   Provide nursing care to a client with a spinal cord injury Web Site: [http://healthlinks.washington. edu](http://healthlinks.washington.edu/) www.nim.nih.gov/medlineplu[s](http://www.nim.nih.gov/medlineplus) [www.alsa.org](http://www.alsa.org/)  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation                  |
| **Week**  | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
|  |  | Discuss strategies that will assist clients with paralyzing disorders, and their families to develop psychosocial coping skills.  | 8. Health Promotion/Maintenance Restoration and/or Prevention 1. Communication
2. Client and family education
3. Community resources

 1. Professionalism
2. Legal-ethical issues
3. Role development
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| **10**  | **2 hours**  | **Categorize the mechanisms of traumatic injury and trauma clients across the lifespan**.  Compare and contrast the nature and prevalence of traumatic injuries across the lifespan.  Summarize the initial assessment of the trauma client using the primary and secondary survey systems.  Analyze the role of the nurse in pre hospital care, emergency care and resuscitation of the trauma client.   | 1. Critical Thinking: Nursing process applied to care of clients with traumatic injury across the lifespan

 1. Provision of safe, holistic, culturally competent care to clients with traumatic injury across the lifespan

 Trauma 1. Age related changes and trauma care
2. Etiology
3. Pathophysiology: Mechanisms of Injury
4. Penetrating trauma
5. Blunt trauma
6. Clinical manifestations and complications
7. Airway clearance
8. Ineffective breathing patterns, impaired gas exchange
9. Decreased cardiac output/hypovolemia
10. Massive fluid resuscitation
11. Diagnostic evaluation
12. Systems approach to trauma care: The trauma system:
13. Levels of care
14. Trauma team
15. Cultural considerations
16. Evidence-based theory and principles
17. Collaborative management

Treatment Modalities | Assigned Readings **Lewis** **(Ed. 9)** CH 69 **Lewis (Ed. 10**) CH 68  **Sole (Ed. 6)** CH 19 **Sole (Ed. 7)** CH 20  Lecture  Discussion  Guest Speaker: Lifestar RN  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week**  | **WEEK HOURS**  | **UNIT****OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
|  |  | Summarize the collaborative nursing care of clients with trauma.  Formulate a holistic, comprehensive plan of care for clients with major trauma across the lifespan using the nursing process  Relate the nursing diagnoses, outcomes, and interventions for the trauma client.  Discuss evidence based practice related to trauma care across the lifespan.   | * + 1. Pre hospital
		2. Initial assessment
		3. Primary Survey
		4. Resuscitation
		5. Secondary Survey
		6. Assessment & care of trauma client
			1. Airway/oxygenation
				1. Hypovolemia
				2. Specific organ injuries
				3. Nutritional needs
				4. Multiple organ failure
			2. Psychosociospiritual support
1. Health Promotion/Maintenance Restoration and/or Prevention

 1. Communication
2. Client and family education
3. Community resources

 1. Professionalism
2. Legal-ethical issues
3. Role development

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| **11**  | **2 hours**  | **Unit VI: Nursing** **Care of Clients in** **Bioterrorism/Mass** **Casualty Incidents** Analyze resources for management of mass casualty events.  Compare and contrast disaster triage and emergency triage.   | 1. Critical Thinking: Nursing Process applied to bioterrorism/mass casualty incidents
	1. Emergency Preparedness
		1. Federal
		2. State
		3. Local
	2. Hospital Emergency Preparedness Plans
	3. Components of Emergency Operations Plans

 1. Provision of safe, holistic, culturally competent care in bioterrorism/mass casualty incidents
	1. Initiating Emergency Operations Plan
		1. Identifying clients
		2. Triage
		3. Managing internal problems
 | Assigned Readings **Lewis** (Ed. 9) Chapter 69 **Lewis** (Ed. 10)Chapter 68**Sole** (Ed. 6) Chapter 19 **Sole** (Ed. 7) Chapter 20  Lecture  Discussion   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **Week** | **WEEK HOURS**  | **UNIT****OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Prioritize client needs in a mass casualty event. Evaluate the role of the nurse in disaster response plans.  Discuss evidence based practice related to disaster/terrorism.  | * + 1. Communications
		2. Caring for Families
	1. Pandemic
	2. Critical Incident Stress Management
1. Communication
	1. Legal-ethical issues
		1. Ethical conflicts
		2. Behavioral Issues
	2. Role development
		1. Traditional role of the nurse
		2. Atypical roles
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Participate in hospital, regional disaster drill as applicable  Mass Casualty Lab  Review a hospital/town Emergency Preparedness Plan  Determine personnel/family Emergency Preparedness Plan  Web Site: [www.bt.cdc.gov](http://www.bt.cdc.gov/)  |  |
| **12**  | **Exam 4** **1 hr**  |   | **Exam 4** |  |  |
| **12**  | **2 hours**  | **Unit V: Nursing** **Care of Clients Experiencing Multisystem Organ** **Dysfunction** Examine the incidence, etiology, and factors influencing recovery of the client experiencing a burn injury. Differentiate among the common diagnostic nc tests used to evaluate the burn client. | 1. Critical Thinking: Nursing process applied to clients experiencing multisystem organ dysfunction
2. Provision of safe, holistic, culturally competent care to clients with multisystem organ dysfunction

Burn Injuries * 1. Age related changes of the integumentary system
	2. Etiology
	3. Pathophysiology
		1. Burn Phases
			1. pre hospital
			2. emergent/resuscitative
			3. acute/intermediate
			4. rehabilitation
		2. Classification of burns
			1. depth
			2. percentage
 | Assigned Readings; **Lewis** (Ed. 9) Chapters 25 & 67  **Sole** Chapters 11 & 20  Lecture  Discussion  Case Study: Burns  Visit Connecticut Burn Unit   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Summarize evidence based practice related to burns.Compare and contrast the pathophysiological changes and the priorities of care for each of the burn phases.Analyze the classification of burns in relation to client care.Formulate goals of burn wound care.Summarize the nurse’s role in the following areas: pain management, nutrition, promotion of mobility and psychological support of client and family.Verify ways to collaborate with members of the health care team to meet the client’s physio psychosocial needs.  | * + 1. Fluid & electrolyte imbalances
		2. Infection
		3. Impact on other body systems
	1. Clinical manifestations and complications
		1. Diagnostic evaluation
		2. Cultural considerations
	2. Evidence-based theory and principles
	3. Collaborative management/Treatment Modalities
		1. Burn Wound Care: Dressing
		2. Debridement and Grafting
		3. Pain management
		4. Pharmacological
		5. Nutritional
		6. Splints and assistive devices
		7. Elastic pressure devices
	4. Health Promotion/Maintenance

Restoration and/or Prevention1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 | Provide nursing care to a client with multisystem organ dysfunction |  |

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| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **14**  | **2.5 hours**  | **Care of pediatric client with neurological problems.** Describe the pathophysiology, clinical manifestations and collaborative management of client with cerebral palsy.  Formulate a comprehensive, holistic plan of care for a client with cerebral palsy.  Discuss evidence based practice as it relates to care of the client with cerebral palsy.  Discuss the developmental needs of a child with cerebral palsy.  Develop a teaching plan for client’s family. Discuss the role of the school nurse in facilitation of school attendance. | 1. Critical Thinking: Nursing process applied to clients with Cerebral Palsy

 1. Provision of safe, holistic, culturally competent care to clients with Cerebral Palsy
	1. Etiology
	2. Pathophysiology
		1. spastic
		2. dyskinetic
		3. ataxic
		4. mixed type
	3. Clinical manifestations and complications
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidence-based theory and principles
	7. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
		3. Rehabilitative
		4. Pharmacological
		5. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention  1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development
 | **Wong** (Ed. 9) Chapter 28 & 32  **Lewis** (Ed. 9) Chapter 57 pp 1381 to end; Chapter 59 pp 1419-1427 **Lewis** (Ed. 10) Chapters 56 & 58  **Sole** (Ed. 6) Chapter 13 pp 385-9 **Sole** (Ed. 7) Chapter 14  Case Study: CP  NCLEX Style Questions   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **14**  |  | Describe the pathophysiology, clinical manifestations and collaborative management of the client with neural tube defect.  Formulate a comprehensive, holistic plan of care for client with neural tube defect.  Discuss evidence based practice as it relates to care of client with neural tube defect  Discuss the developmental needs of a child with a neural tube defect.  Develop a teaching plan for the family of child with neural tube defect.Discuss the role of the school nurse in facilitation of school attendance. | 1. Critical Thinking: Nursing Process applied to clients with Neural Tube Defects
2. Provision of safe, holistic, culturally competent care to clients With Neural Tube Defects.
	1. Etiology
	2. Pathophysiology
		1. Spina Bifida Occulta
		2. Spina Bifida Cystica
	3. Clinical Manifestations and complications
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidence-based theory and principles
	7. Collaborative management Treatment modalities a. Medical
		1. Surgical
		2. Rehabilitative
		3. Pharmacological
		4. Nutritional
	8. Health Promotion/Maintenance

Restoration and/or Prevention 1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development
 |   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week**  | **WEEK HOURS**  | **UNIT OBJECTIVES**  | **CONTENT**  | **SUGGESTED LEARNING EXPERIENCES**  | **EVALUATION**  |
| **14**  |  | Describe the pathophysiology, clinical manifestations and collaborative management of client with hydrocephalus.  Formulate a comprehensive, holistic plan of care for the client with hydrocephalus.  Discuss evidence based practice as it applies to the client with hydrocephalus.  Discuss the developmental needs of the client with hydrocephalus.Develop a teaching plan for the family of a child with hydrocephalus.  Discuss the role of the school nurse in facilitating school attendance for the client who has hydrocephalus. | 1. Critical Thinking: Nursing process applied to clients experiencing hydrocephalus
2. Provision of safe, holistic, culturally competent care to clients with hydrocephalus
	1. Etiology
	2. Pathophysiology
		1. obstructive
			1. Arnold-Chiari malformation
			2. Dandy-Walker syndrome
		2. nonobstructive
	3. Clinical manifestation and complications
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidence-based theory and principles
	7. Collaborative management

Treatment modalities* + 1. Surgical
		2. Rehabilitative
		3. Pharmacological
		4. Nutritional
	1. Health Promotion/Maintenance

Restorative and/or Prevention 1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development

   |   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **14**  |  | Describe the pathophysiology, clinical manifestations and collaborative management of client with muscular dystrophy.  Formulate a comprehensive, holistic plan of care for the client with muscular dystrophy.  Discuss evidence based practice as it relates to care of client with muscular dystrophy.  Discuss the developmental needs of a child with muscular dystrophy.  Develop a teaching plan for the family of a child with muscular dystrophy. Discuss the role of the school nurse in facilitation of school attendance. | 1. Critical Thinking: Nursing process applied to clients experiencing Muscular Dystrophy
2. Provision of safe, holistic, culturally competent care to clients with Muscular Dystrophy
	1. Etiology
	2. Pathophysiology
	3. Clinical manifestations and complications
		1. Duchenne
		2. Facioscapulphumeral
		3. Limb-girdle
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidence-based theory and principles
	7. Collaborative management

Treatment modalities* + 1. Medical
		2. Surgical
		3. Rehabilitative
		4. Pharmacological
		5. Nutritional
	1. Health Promotion/Maintenance

Restorative and/or Prevention 1. Communication
	1. Client and family education
	2. Community resources
2. Professionalism
	1. Legal-ethical issues
	2. Role development

  |   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **14**  | **1/2 hour**  | **Examine neurological disorders interfering with developmental progress.**  Examine the etiology, pathophysiology, clinical manifestations and collaborative management of the client with meningitis.  Differentiate between bacterial and viral meningitis.  Describe primary and tertiary prevention of meningitis for the pediatric client.  Develop a teaching plan for the family of a child who has meningitis.  Formulate a comprehensive, holistic plan of care to maximize optimal functioning across the life span. Discuss evidence based practice as it relates to meningitis. | 1. Critical Thinking: Nursing process applied to clients experiencing Meningitis

 1. Provision of safe, holistic, culturally competent care to

clients with Meningitis  * 1. Etiology
	2. Pathophysiology
	3. Clinical manifestations and complications
	4. Diagnostic evaluation
	5. Cultural considerations
	6. Evidence-based theory and principles
	7. Collaborative management

Treatment Modalities * + 1. Medical
		2. Surgical
		3. Rehabilitative
		4. Pharmacological
		5. Nutritional
	1. Health Promotion/Maintenance

Restoration and/or Prevention  1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role development

  | Assigned Readings  Lecture  Discussion  Case Study: Meningitis  Provide nursing care to a client experiencing a seizure disorder   | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation   |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
| **14**  | **2 hours**  | Examine the incidence, etiology, and pathophysiology of HIV/AIDS.  Differentiate common diagnostic tests used in the care of the client with HIV/AIDS.  Analyze the clinical manifestations of HIV/AIDS related infections.  Compare and contrast HIV and AIDS.  Summarize the collaborative nursing care of clients with HIV/AIDS.  Relate the nursing diagnoses, outcomes, and interventions for the client with HIV/AIDS. Examine evidence based practice related to HIV/AIDS.  | 1. Critical Thinking: Nursing process applied to care of clients with HIV/AIDS

 1. Provision of safe, holistic, culturally competent care to clients with HIV/AIDS

Human Immunodeficiency Virus (HIV) Acquired Immunodeficiency Syndrome (AIDS) * 1. Incidence: Epidemiology/ transmission
	2. Etiology: Prevention of HIV infection
	3. Pathophysiology
	4. Clinical manifestations and complications
		1. Respiratory
		2. GI
		3. Oncologic
		4. Neurologic
		5. Depressive
		6. Integumentary
		7. Endocrine
		8. Gynecologic
		9. Gerontological
	5. Classification
		1. Primary Infection
		2. CDC Category A, B, C
	6. Diagnostic evaluation
	7. Cultural considerations
	8. Evidence-based theory and principles
	9. Collaborative management Treatment Modalities
		1. Drug Resistance
		2. Structured Intermittent Therapy
		3. Immuno-modular Therapy
		4. Nutritional

10. Health Promotion/Maintenance Restoration and/or Prevention  | Assigned Readings **Lewis** (Ed. 9) Chapter 15 **Lewis** (Ed. 10) Chapter 14 **Sole** (Ed. 6) pp 490-492 **Sole** (Ed. 7) pp 469-470 **Wong** (Ed. 9) pp 894-897 Recommended Miniseries: *Angels in America 2003* (not mandatory)  Recommended movie “*And the Band Played On*” Not mandatory  Lecture  Discussion  Case Study: HIV/AIDS  Compare/contrast concept of HIV as communicable disease  | Exam  Clinical Experience Workbook (CLEW)  Clinical performance evaluation  |
| **Week** | **WEEK HOURS** | **UNIT OBJECTIVES** | **CONTENT** | **SUGGESTED LEARNING EXPERIENCES** | **EVALUATION** |
|  |  | Formulate a holistic, comprehensive plan of care for clients with HIV/AIDS. | 1. Communication
	1. Client and family education
	2. Community resources

 1. Professionalism
	1. Legal-ethical issues
	2. Role Development
 |  |  |
| **15**  | **Exam 5****1 hour** |  | **Exam 5**   |   |   |
| **16**  | **Final Exam** **Week** **2 hours**  |    |  Cumulative Final Examination  |   |   |
| **17**  | **3 days; 21 hours**  | **ATI Review**  | NCLEX Prep  |  |  |

**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\*203 Nursing Care of Individuals and Families II**

**On Campus Clinical Laboratory 1**

**Nursing Care of Clients with alterations in Mental Health Part B (3.75 hours)**

**Nursing Care of Clients with alterations in Mental Health Part C:**

**Psychiatric Nursing Clinical Orientation (3.75 hours)**

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

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| **Nursing Care of Clients with alterations in Mental Health Part B (3.75 hours)**  |
| **Learning Objectives** Upon completion of the Learning Laboratory the student will be able to: | **Suggested learning activities**  |
| 1. Discuss the elements of the psychiatric clinical experience.
 | Clinical Foci and Post Conference topics for journaling: Substance Abuse Group Therapy Pediatric and Family Therapy  |
| 1. Identify factors that create a therapeutic milieu for pediatric psychiatric disorders.
2. Discuss the elements of a holistic assessment of a child with a psychiatric disorder (i.e. mood or behavioral).
3. Identify family dynamics and nursing roles that impact response of pediatric clients to treatment.
 | Video that provides experience for students that do not a have the opportunity to work with kids in psych |
| 1. Identify appropriate nursing interventions to de-escalate a client who is exhibiting agitated, hostile, angry and aggressive behavior.
 | 1. Small group work:

Develop a concept map, nursing care plan and/or a narrative nurse’s note based on a case study for a client with one or more of the following: * a mood disorder
* at risk for suicide or survivor of a suicide attempt
* schizophrenia
* a child or adolescent with a behavioral or mood disorder
 |
|  | 1. Write an example of and a response to a:
	1. delusional statement:
		* grandiose
		* paranoid
	2. hallucination:
		* auditory
		* visual
2. Role play: Interacting with the client who is hallucinating

 Discuss the students’ examples and responses  |
| 1. Formulate a nursing care plan for a client in CRISIS who:
* Has a mood disorder (NUR\*102)
* Is at risk for suicide appropriate
* Has schizophrenia (NUR\*201)
 | Utilize case study approach: students to work in small groups to develop/formulate and present to larger group  |
| 1. Discuss assessment of suicide potential in a client using the SAD PERSONS Scale.
2. Identify key nursing assessments for the care of a client who is at risk for suicide or has attempted suicide.
3. List environmental suicide prevention precautions: in the institutional setting and the community setting.
 | Overview of SAD PERSONS Scale, application to a case study    |
| 1. Identify interventions for a client who is hallucinating, delusional or exhibiting looseness of association.
 | Utilize case study approach: students to work in small groups to develop/formulate and present to larger group  |

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| **Nursing Care of Clients with alterations in Mental Health Part C: Psychiatric Nursing Clinical Orientation (3.75 hours)**  |
| **Learning Objectives** Upon completion of the learning laboratory the student will be able to: | **Suggested learning activities**  |
| Begin six day psychiatric nursing clinical experience at clinical site assigned following clinical orientation  | Site/Unit Orientation to Psychiatric Clinical Nursing Rotation  3.75 hours/onsite with faculty at clinical facility, day and time at the discretion of college and clinical affiliate personnel  |

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|  **Response to a Cardiopulmonary Resuscitative Event: The role of the Nurse in Rescue and** **Resuscitation**  |
| **Upon completion of the Learning Laboratory the student will be able to:**  | **Suggested Learning Activities**  |
| 1. Define the role of the nurse in a rescue/rapid response/resuscitative event
 | Human Patient Simulator (Sim Man) Micro Sim Case Study Self-learning module Discuss the definitive Roles for the nurse: e.g. Recorder/Scribe, CPR, Medication Administration Communication among the team: The SBAR (Situation-Background-Assessment-Recommendation) technique Role and Care of the family (psychosocial) SBAR Reference: [http://www.ihi.org/IHI/Topics/PatientSa fety/SafetyGeneral/Tools/SBARTechniq ueforCommunicationASituationalBriefi ngModel.htm](http://www.ihi.org/IHI/Topics/PatientSafety/SafetyGeneral/Tools/SBARTechniqueforCommunicationASituationalBriefingModel.htm)   |
| 1. Describe the initiation of a rescue/rapid response/resuscitative event
 |   |
| 1. Participate in a mock rescue/rapid response/resuscitative event
 |   |
| 1. Apply the principles of pharmacotherapeutics to a rescue/rapid response/resuscitative event
 |   |
| 1. Describe the role of rescue/rapid response/resuscitative event teams
 | Reference Rapid Response Teams: [http://www.ihi.org/IHI/Topics/CriticalC are/IntensiveCare/ImprovementStories/ RapidResponseTeamsTheCaseforEarlyI](http://www.ihi.org/IHI/Topics/CriticalCare/IntensiveCare/ImprovementStories/RapidResponseTeamsTheCaseforEarlyIntervention.htm)[ntervention.htm](http://www.ihi.org/IHI/Topics/CriticalCare/IntensiveCare/ImprovementStories/RapidResponseTeamsTheCaseforEarlyIntervention.htm)   |
|  | Discussion of appropriate use of resources (teams/personnel) available in healthcare facilities Discussion of progression from a rapid response to a resuscitative event |
| 1. Perform neurological assessment including cranial nerve assessment
 | Assigned Readings Case Study Lecture  |