CONNECTICUT COMMUNITY COLLEGE NURSING PROGRAM

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

NUR*102: FAMILY HEALTH NURSING

COURSE OVERVIEW

Summer Semester 2016

Course TitleFamily Health Nursing

Number and Section NUR*102

CRN 2009

Course Type Lecture, Lab, Clinical

Faculty

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Phone: (860) 738-6337 Office: Founders Annex #315

Office Hours: Tuesday, 12 pm – 3 pm, FX 315

Thursday, 12 pm - 3 pm, ASB 117 Office Hours also available by appt

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Office Hours: Monday, 8 am- 12 pm, FX 315

Wednesday, 7:30 am - 8:30am, ASB 117 Thursday 11 am – 12 pm, ASB 117 Office hours also available by appt

Clinical/Lab Faculty

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Lab Faculty
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Course Prerequisites

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

Course Corequisites

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

Course Components

Credits: 8 credits Classroom: 60 hours Lab/Clinical: 180 hours

Course Schedule

Class

Founders Hall RM # 101 Tuesday and Wednesday 4:00 – 6:30pm

Lab

ASB 117/118
Wednesday and Thursday
8:30am – 5:00pm
(see Blackboard for your assigned lab groups)

Clinical

Charlotte Hungerford Hospital

6:45am – 2:45pm 1:30pm – 9:30pm

Waterbury Hospital

6:45am – 2:45pm 1:30pm – 9:30pm (see Blackboard for your assigned clinical group)

Clinical Sites

Charlotte Hungerford Hospital

540 Litchfield Street Torrington, CT 06790 (860) 496-6666 www.charlottesweb.hungerford.org

Waterbury Hospital

34 Robbins Street Waterbury, CT 06706 (203) 573-6000 www.waterburyhospital.org/

Text/Course Materials

- Ackley, B.J. & Ladwig, G.B. (2013). Nursing Diagnosis Handbook: A Guide to Planning Care (10th Edition). St. Louis: Mosby. **ISBN: 978-0-323-08549-6**
- Curren, A.M. (2009). Math for Meds: Dosages and Solutions (packaged with 3-2-1 Calc! Comprehensive Dosage Calculations Online with Academic Individual 2-Year Access Code for students only!) (11th ed.). San Diego: W.I. Publications. **ISBN: 978-1285-995-854** (This is a bundle package.)
- Jarvis, C. (2016). Pocket Companion for Physical Examination and Health Assessment (7th ed.). St. Louis, MO: Elsevier. **ISBN: 978-0323265379**
- Lewis, S. L., Dirken, S. R., Heitkemper, M., Bucher, L. & Camera, I. (2010). Medical-Surgical Nursing: Assessment and Management of Clinical Practice (9th ed.). St. Louis, MO: Mosby. **ISBN:** 978-0-323-10089-2
- Lippincott CoursePointe+ for Maternity and Pediatric Nursing. One year subscription at Bookstore **ISBN: 978-1-469-89486-7** or Direct Purchase through https://lippincottdirect.lww.com/NorthwesternConnecticutCommunityCollege-OPE1SA200007?et_cid=A6UJ9A00OSJM **ISBN: 978-1-496-30183-3**
- Lippincott CoursePointe+ for Brunner & Suddarth's Texbook of Medical-Surgical Nursing. Two year subscription at Bookstore **ISBN:** 978-1-469-88663-3 or Direct Purchase through https://lippincottdirect.lww.com/NorthwesternConnecticutCommunityCollege-OPE1SA200007?et cid=A6UJ9A00OSJM **ISBN:** 978-1-469-88712-8
- Lippincott Docucare Online Software 1 year subscription at Bookstore **ISBN: 978-1-4511-7669-8** or Direct Purchase through https://lippincottdirect.lww.com/NorthwesternConnecticutCommunityCollege-OPE1SA200007?et_cid=A6UJ9A00OSJM **ISBN: 978-1-4511-8719-9**
- Perry, A. G. & Potter, P. A. (2013). Clinical Nursing Skills & Techniques (8th ed.). St. Louis, MO: Mosby. ISBN: 978-0-323083836
- Potter, P. A. & Perry, A. G. (2013). Fundamentals of Nursing (8th ed.). St. Louis, MO: Mosby. ISBN: 978-0-323-07933-4
- Varcarolis, E. & Halter, M. (2014). Foundations of Psychiatric Mental Health Nursing: A clinical approach (7th ed.). St Louis, MO: W.B. Saunders. ISBN: 978-1-455-75358-1

Course Description

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

Course Objectives

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

- 1. Apply principles of holism in providing nursing care for individuals and/or families from diverse cultures across the lifespan.
- 2. Demonstrate application of the nursing process when providing nursing care to individuals and/or families across the lifespan.
- 3. Administer safe and competent care to individuals and/or families using evidence- based practice, quantitative reasoning, and technological competence.
- 4. Demonstrate effective communication when interacting with individuals, families, and members of the health care team.
- 5. Implement a basic teaching plan for individuals and/or families with a learning need across the life span.
- 6. Foster a caring environment by demonstrating respect for individuals and/or families across the life span.
- 7. Demonstrate a basic ability to function as a member of the health care team.
- **8.** Exhibit accountability and responsibility when providing nursing care to the individuals and families across the lifespan.
- **9.** Assume responsibility for personal growth and professional role development.

Associate Degree Program Philosophy

The Associate Degree Nursing Program supports the mission of the Connecticut Community College System and is committed to the educational preparation of safe, competent, entry-level practitioners of nursing. This is accomplished through a dynamic educational experience involving active and diverse learning processes. Program graduates are prepared to assume the multi-faceted role of the professional nurse which includes planning and provision of care, client advocacy, communication, teaching, and managing human, physical, financial and technological resources. Graduates must possess the ability to recognize and respond to current trends and issues while upholding standards of care through life-long learning.

The faculty believes nursing is a dynamic profession that incorporates evidenced-based theory and skills required for safe practice. Nursing practice integrates the art and science of nursing with theoretical principles from the natural, social, behavioral, biological, and physical sciences.

The faculty has identified **six core values** that provide the framework for organizing the curriculum. The core values are:

Critical Thinking: Critical thinking skills are essential in today's rapidly changing health care environment. Critical thinking is a complex process that is purposeful, goal-directed and based on factual evidence. Critical thinking requires the skills of collecting, identifying, examining, interpreting and evaluating data. Critical thinking in nursing utilizes the nursing process to identify problems, determine goals and interventions, and evaluate outcomes in client care situations. Critical thinking skills encourage nursing students to think for themselves and initiate appropriate interventions after defining the health care needs.

Safe and Competent Practice: Safe and competent practice embraces standards of professional nursing. These standards are implemented through clinical, cultural, and technological proficiency in a variety of health care settings. Nurses continuously strive to provide high level nursing care and to improve client outcomes based upon scientifically supported evidence.

Caring: Caring is fundamental to nursing practice. Caring encompasses comfort, empathy, compassion, concern and advocacy within a culturally diverse client population. Caring nurses enhance the dignity and integrity of individuals, families, and groups within the health care delivery system.

Professionalism: 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. Professional role development includes the acquisition of knowledge and skills through life-long learning.

Communication: Communication is essential to the practice of professional nursing and includes both verbal and non-verbal skills, and information technologies to enhance client care. The nursing student develops skills in presentation, documentation, teaching, conflict resolution, assertiveness, negotiation, and therapeutic communications with individuals, families, groups, health care team, and community agencies.

Holistic Care

Nursing utilizes a multidisciplinary approach to managing care that recognizes the uniqueness of the individual. Holistic nursing has as its goal the enhancement of illness prevention, health promotion, wellness maintenance, and health restoration across the life span. Holistic care involves the identification of the bio-psycho-social and cultural dimensions of the client across the life span on the wellness-illness continuum. Clients, families, and groups are respected according to their physical, emotional, social, economic, cultural, and spiritual needs.

Refer to the Nursing Student Handbook for policies regarding:

Performance Grading Process
Clinical Grade Assignment
College Laboratory Requirements
Clinical Preparation and Performance
Clinical Performance Improvement Plan
Clinical Warning
Student Appeal Process
Dress Code
Health and Safety Policies

Methods of Evaluation

Unit exams and final cumulative exam
Quizzes
ATI Testing
Laboratory skill performance
Select Nursing Skills Validations
Formative and Summative Clinical Evaluation
Dosage Calculation Competency exam
Connecticut Hospital Association Health & Safety Training Course posttest
E-Portfolio submissions

Grading Policy

Semester grade will be determined as follows: There will be five (5) unit exams. Each exam has an equal weight. The five unit exams collectively account for 75% of the grade for the course.

The final exam will be cumulative and accounts for 25% of the course grade.

Exam dates: JUNE 13th, JUNE 27th, JULY 11th, AUGUST 1st, and AUGUST 16th

Final Exam: See course calendar

Prep-U Quizzes: Throughout the semester there will be 10 assigned quizzes through Prep-U. You will be required to achieve the mastery level (3) to receive credit for each quiz taken. Each quiz that you successfully complete will add 0.1 points to your final exam score. You have the potential to add a total of 1 point to your final exam score.

Standardized Curricular Testing (ATI): See course calendar

The ATI exam positively affects your grade on your final exam. If you score an 80% or above on the ATI, 3 points are added to your final exam grade. A score of 70-79% adds 2 points to the final exam grade and a score of 65-69.9% adds 1 point to your final exam.

**** Attendance for all clinical and laboratory hours is mandatory****

Skills validations: All skill validations must be completed prior to entering the clinical setting and performing that skill.

Students must pass all skills validations and the dosage calculation competency exam. Students must also complete all assignments in a satisfactory manner and receive a satisfactory clinical performance evaluation. In addition to Reflection and CLEW submissions, there is a Process Recording and a Pain Assessment Assignment as well as a Case Presentation assignment to be presented in lab. Please see Blackboard for those assignment Rubrics. Please see calendar for due dates. Additionally, students must pass the Connecticut Hospital Association Health and Safety Training course and post-test with a grade of 90%.

A final average grade of 74 or higher is required for successful completion of the course. The grading scale is as follows:

A = 93-100

A = 90-92

B+ = 87-89

B = 83-86

B- = 80-82

C+ = 77-79

C = 74-76

C = 70-73

D+ = 67-69

D = 64-66

F = Below 64

Rounding of Grades

Grades on each exam will be computed to the second decimal point, and at the end of course will be rounded once to a whole number for the final course grade. A grade at or above .50 will be rounded up to the next whole number; any grade at or below .49 will be rounded down to the whole number. Example:

Final Grade = 73.49 = 73 = C- The student fails the course.

Final Grade = 73.50 = 74 = C The student passes the course.

Dosage Calculation Competency Requirements

Students are required to take a dosage calculation competency exam. In addition to the dosage calculation exam, course examinations will also include drug calculation questions. A student is required to pass the dosage calculation examination with a grade of 90% or higher. See course calendar for Math Calculation Exam scheduling. Students may use calculators provided by the college for all exams involving drug calculations.

A student may not administer medications until s/he has successfully passed the dosage calculation examination each semester.

- 1. A student who fails the dosage calculation examination must participate in remediation before taking the next examination.
- 2. A student who fails the 2^{nd} attempt must again participate in remediation before taking the exam for the 3^{rd} and final time.
- 3. A student who fails the third (3rd) examination will be withdrawn from the nursing course and dismissed from the nursing program.
- 4. Students who are dismissed from the program because they do not meet the dosage calculation competency requirement are eligible to apply for readmission.

Attendance

It is expected that you attend all classes. If you must miss a class it is expected that you notify Jaclyn and Michelle via Blackboard message.

College Policies

Plagiarism: Plagiarism and Academic Dishonesty are not tolerated at Northwestern Connecticut Community College. Violators of this policy will be subject to sanctions ranging from failure of the assignment (receiving a zero), failing the course, being removed/expelled from the program and/or the College. Please refer to your "Student Handbook" under "Policy on Student Rights," the Section entitled "Student Discipline," or the College catalog for additional information.

Americans with Disabilities Act (ADA): The College will make reasonable accommodations for persons with documented learning, physical, or psychiatric disabilities. Students should notify Dr. Christine Woodcock, the Counselor for Students with Disabilities. She is located at Green Woods Hall, in the Center for Student Development. Her phone number is 860-738-6318 and her email is cwoodcock@nwcc.edu.

School Cancellations: If snowy or icy driving conditions cause the postponement or cancellation of classes, announcements will be made on local radio and television stations and posted on the College's website at www.nwcc.edu. Students may also call the College directly at (860) 738-6464 to hear a recorded message concerning any inclement weather closings. Students are urged to exercise their own judgment if road conditions in their localities are hazardous.

Use of Electronic Devices: Some course content as presented in Blackboard Learn is not fully supported on mobile devices at this time. While mobile devices provide convenient access to check in and read information about your courses, they should not be used to perform work such as taking tests, quizzes, completing assignments, or submitting substantive discussion posts.

Sexual Assault and Intimate Partner Violence Resource Team:

NCCC is committed to creating a community that is safe and supportive of people of all gender and sexual identities. This pertains to the entire campus community, whether on ground or virtual, students, faculty, or staff.

Sexual assault and intimate partner violence is an affront to our national conscience, and one we cannot ignore. It is our hope that no one within our campus community will become a victim of these crimes. However, if it occurs, NCCC has created the SART Team - Sexual Assault and Intimate Partner Violence Resource Team - to meet the victim's needs.

SART is a campus and community based team that is fully trained to provide trauma-informed compassionate service and referrals for comprehensive care. The team works in partnership with The Susan B. Anthony Project to extend services 24 hours a day, 7 days a week throughout the year.

The NCCC team members are:

Ruth Gonzalez, Ph.D.	860-738-6315	Green Woods Hall Room 207
Susan Berg	860-738-6342	Green Woods Hall Room 223
Kathleen Chapman	860-738-6344	Green Woods Hall Room 110
Michael Emanuel	860-738-6389	Founders Annex Room 308
Robin Orlomoski	860-738-6416	Business Office Room 201
Seth Kershner	860-738-6481	Library
Jane O'Grady	860-738-6393	Founders Hall Annex Room 212
Patricia Bouffard, Ex-Officio	860-738-6319	Founders Hall Room 103
Savannah Schmitt		Student Representative

At NCCC we care about our students, staff and faculty and their well-being. It is our intention to facilitate the resources needed to help achieve both physical and emotional health.

Units of Study (the content of these units is shared between the classroom and lab)

1	Nursing care of the childbearing family
2	Nursing care of the perioperative client
3	Principles of geriatric nursing
4	Nursing care of the client with select orthopedic conditions
5.	Pediatric nursing
6.	Bariatrics
7.	Nursing care of the client with select genitourinary conditions
8.	Nursing care of the client with a sexually transmitted illness
9	Nursing care of the gynecology client
10.	Nursing care of the family experiencing violence
11.	Nursing care of the client and family experiencing death
12.	Nursing care of the client with a psychiatric/mental health disorder

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
4 hours	Unit 1: Nursing care of the			
	childbearing family			
May				
23rd	Antepartal Nursing			
	Define and describe the terms that	A. Critical Thinking: Nursing process	Assigned Readings:	Clinical performance
	relate to pregnancy and its signs and	applied to clients and families during		evaluation
	symptoms	the antepartum period.	Ricci	
			Chapters 11 & 12	Clinical Learning
	Identify the physiological changes	B. Provision of safe, holistic, culturally	Ricci	Experience Workbook
	and the common discomforts that	competent care to client and family during	Chapter 10 pgs. 326-331	(CLEW)
	occur during pregnancy	the antepartum period	Ricci	
	T1	1 7 1 1 1 1	Chapter 19 pgs. 625-660	Concept mapping
	Identify the pertinent data needed	Terminology related to pregnancy	Ricci	Г
	for adequate health supervision of		Chapter 20 pgs. 671-689 &	Exam
	pregnancy	2. Calculation of pregnancy estimated	pgs. 698-709	
	Describe the same and many account	date of confinement	Lastrona	
	Describe the care and management of gestational problems in	3. Signs and symptoms of pregnancy	Lecture	
	•	3. Signs and symptoms of pregnancy a. Presumptive	Discussion	
	pregnancy	b. Probable	Discussion	
	Apply the care and management of	c. Positive	Dosage Calculation Testing	
	pre-existing conditions to the	d. Diagnostic Aids	Dosage Calculation Testing	
	context of pregnancy	Diagnostic Aids Pregnancy Tests	Nursing Skills Lab	
	context of pregnancy	2) Ultrasound	Nulsing Skins Lab	
	Identify nursing diagnoses	2) Oldasound		
	appropriate for clients experiencing	4. Physiological Changes of Pregnancy		
	health deviations during pregnancy.	a. Anatomic and Metabolic		
	neurin deviations during pregnancy.	1) Uterine/cervical		
	Apply legal and ethical principles to	2) Abdominal wall		
	the holistic care of antepartal clients	3) Breast		
	F	4) Weight Changes		
		b. Hormonal		
		1) Estrogen		
		2) Progesterone		
		, ,		

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
	UNIT OBJECTIVES	3) Human Chorionic gonadotropin 4) Placental Hormones c. Systemic 1) Cardiovascular 2) Respiratory 3) Gastro-intestinal 4) Urinary 5) Muscular-skeletal 6) Integumentary 5. Interdisciplinary and Nursing Health Supervision During Pregnancy a. Assessment b. Screening/Fetal Wellbeing Tests c. Minor Discomforts d. Warning Signs e. Nutritional Counseling f. Childbirth Education g. Teratogens of Pregnancy h. Genetic Counseling 6. Psychological Adaptation of Pregnancy a. Developmental Tasks b. Psychosocial Changes		EVALUATION
		7. Complications of Pregnancy: Abortion, Ectopic Pregnancy, Gestational Trophoblastic Disease, Incompetent Cervix, Placenta Previa, Hyperemesis Gravidarum, Hypertensive Disorders, Rh Incompatibility Diabetes in Pregnancy, Cardiac		

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
		Disease, Infectious Diseases,		
		HIV/AIDS		
		a. Etiology		
		b. Pathophysiology		
		c. Clinical manifestations &		
		complications		
		d. Diagnostic tests		
		e. Cultural considerations		
		f. Evidence based theory and		
		principles		
		g. Collaborative management:		
		Treatment Modalities		
		1) Medical		
		2) Surgical		
		3) Nutrition		
		4) Pharmacological (NUR*103)		
		h. Health Promotion/Maintenance		
		Restoration and/or Prevention		
		C. Communication		
		1. Client and family education		
		2. Community resources		
		2. Community resources		
		D. Professionalism		
		1. Legal-ethical issues		
		2. Role development		
4 hours	Intrapartal Nursing	-		
		A. Critical Thinking Nursing process applied	Assigned Readings:	Computer Program
May	Examine maternal adaptation to the	to Intrapartum clients and families		Return Demonstration
24th	physiological and psychosocial		Ricci	Group Discussion
	stress of labor.	B. Provision of safe, holistic, culturally	Chapters 13 & 14	Maneuvers
		competent care to intrapartum client and	Ricci	Fetal Monitoring
	Discuss nursing care for the	family	Chapter 21 pgs. 762-765	
	laboring woman through each stage	4 70.00		Clinical performance
	of labor.	1. Philosophy of Labor and delivery	Lecture	evaluation

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
	Compare various birthing options.	 2. The P's of Labor 3. Labor and delivery management: a. Basic Electronic Fetal/Uterine Monitoring 	Discussion Handouts	Clinical Learning Experience Workbook (CLEW)
	Discuss the role of the nurse when caring for laboring women during birth related procedures	b. Normal, spontaneousVaginal Delivery (NSVD)c. Forceps/Vacuum Extraction	Videos	Concept mapping
	Apply legal and ethical principles to the holistic care of laboring women	d. Cesarean Section 4. Nursing Care of the Client requiring OB Anesthesia/Analgesia a. Pharmacological (NUR*103)	Nursing Skills Lab: Intrapartal/ Fetal Well-Being Observational experience in clinical	Exam
		 b. Non-pharmacological c. Local Anesthesia (NUR*103) d. Regional Anesthesia (NUR*103) e. General Anesthesia (NUR*103) 		
		C. Communication 1. Client and family education 2. Community resources		
		D. Professionalism1. Legal-ethical issues2. Role development		
2 hours	Intrapartal Nursing: Complications of Labor			
June 6th	Differentiate between the signs and symptoms, medical management and nursing care of the woman	A. Provision of safe, holistic and culturally competent care to intrapartum client and family experiencing complications of labor	Assigned Readings:	Clinical performance evaluation
	experiencing uterine problems during labor and delivery.	 Placenta Abruptio Amniotic Fluid Variations Multiple Gestation 	Chapter 19 pgs. 642-646 & pgs. 660-666 Ricci Chapter 21 pgs. 729-762	Clinical Learning Experience Workbook (CLEW)

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
	Evaluate the signs and symptoms,	4. Premature Rupture of Membranes		Concept mapping
	medical management and nursing	Dysfunctional Labor	Lecture	
	care of the woman experiencing	Precipitous Labor		Exam
	fetal problems during labor and	7. Persistent Posterior Position	Discussion	
	delivery.	8. Breech Presentations		
		9. Shoulder Dystocia	Nursing Skills Lab	
	Discuss the signs and symptoms,	10. Cephalo-Pelvic Disproportion		
	medical management and nursing	11. Premature Labor		
	care of the woman experiencing	12. Post-Date Pregnancies		
	amniotic fluid problems during	13. Umbilical Cord Abnormalities		
	labor and delivery.	14. Uterine Rupture		
		15. Amniotic Fluid Embolus		
	Apply legal and ethical principles to			
	the holistic care of laboring women	B. Communication		
	experiencing complications	1. Client and family education		
		2. Community Resources		
		C. Professionalism		
		1. Legal-ethical issues		
2.1	B () 1	2. Role development		
3 hours	Postpartum Nursing			
June 7th	Discuss physiological changes,	A. Critical Thinking: Nursing process applied	Assigned Readings:	Clinical performance
June /th	nursing assessments and nursing	to clients and families experiencing both	Assigned Readings.	evaluation
	care during the post-partum period.	normal and complications during the	Ricci	evaruation
	care during the post partain period.	postpartum phase.	Chapters 15 & 16	Exam
	Identify the psychosocial changes,	posipurum priuse.	Ricci	
	nursing assessments and nursing	B. Provision of safe, holistic, culturally	pgs. 787-793	
	care as women adapt to the stress	competent care to client and family in the		
	of the post-partum period.	postpartum phase of child bearing.	Lecture	
	Discuss care for the family	Normal Postpartum	Discussion	
	experiencing situational	 Physical Postpartum Changes 		
	psychosocial crisis during the	2. Nursing Care of the Postpartum Patient	Nursing Skills Lab	
	postpartum period			

HOURS Apply legal and ethical principles to the holistic care of postpartum women and families Apply legal and families Apply legal and ethical principles to the holistic care of postpartum women and families Apply legal and ethical principles to the holistic care of postpartum Delivery (NSVD) Provide nursing care to a postpartum client Apply legal and ethical principles to the holistic care of postpartum Delivery (NSVD) Provide nursing care to a postpartum client Apply legal and ethical principles to the holistic care of postpartum Delivery (NSVD) Provide nursing care to a postpartum Adjustments Apply legal and ethical principles to the holistic care of postpartum Delivery (NSVD) Provide nursing care to a postpartum Adjustments Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Adjustments Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Apply legal and ethical principles Delivery (NSVD) Provide nursing care to a postpartum Delivery (NSVD) Provide nu	
Apply legal and ethical principles to the holistic care of postpartum women and families Delivery (NSVD) b. Post op Cesarean Section Provide nursing care to a postpartum client 3. Psychological Postpartum Adjustments a. Maternal/Family Role	
to the holistic care of postpartum women and families b. Post op Cesarean Section Provide nursing care to a postpartum client 3. Psychological Postpartum Adjustments a. Maternal/Family Role	
women and families 3. Psychological Postpartum Adjustments a. Maternal/Family Role	
3. Psychological Postpartum Adjustments a. Maternal/Family Role	n
a. Maternal/Family Role	
Adaptation	
4. Postpartum Blues/Depression	
a. Etiology and Management	
b. Pathophysiology	
c. Clinical manifestations &	
complications	
d. Cultural considerations	
e. Evidence based theory and	
principles	
f. Collaborative management:	
Treatment Modalities	
i. Medical	
ii. Nutrition	
g. Promotion/Maintenance	
Restoration and/or Prevention	
i. Likelihood of	
reoccurrence during	
subsequent pregnancy	
C. Communication	
C. Communication 1. Client and family education	
2. Role development	
a. Postpartum Teaching	
i. Breast care	
ii. Perineal /	
Episiotomy care	
iii. Contraception	
(NUR*103)	

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
		iv. Discharge		
		instructions		
		3. Community resources		
		D. Professionalism		
		Legal-ethical issues		
	Compare complications the post-	Postpartum Complications:	Assigned Readings:	Clinical performance
	partum woman may experience	Postpartum Hemorrhage		evaluation
	related to a situational crisis	1. Etiology	Ricci	
	involving her circulatory status.	2. Pathophysiology	Pgs. 769-778	Exam
		3. Clinical manifestations &		
		complications	Lecture	
		4. Diagnostic tests		
		5. Cultural considerations	Discussion	
		6. Evidence based theory and principles		
		7. Collaborative management:	Nursing Skills Lab	
		Treatment Modalities		
		a. Surgery		
		b. Medical		
		c. Nutrition		
		d. Pharmacological		
		8. Health Promotion/Maintenance		
		Restoration and/or Prevention		
	Differentiate between	Postpartum Hypercoagulation:	Assigned Readings:	Clinical performance
	complications the postpartum	Thrombophlebitis, Pulmonary Embolism		evaluation
	woman may experience when		Ricci	
	experiencing a situational crisis	1. Etiology	pgs. 778-780	Exam
	related to clotting mechanism or	2. Pathophysiology		
	status.	3. Clinical manifestations &	Lecture	
		complications		
		4. Diagnostic tests	Discussion	
		5. Cultural considerations		
		6. Evidence based theory and principles	Nursing Skills Lab	

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS		7. C. 11.1	EXPERIENCES	
		7. Collaborative management: Treatment		
		modalities		
		a. Surgery		
		b. Medical		
		c. Nutrition		
		d. Pharmacological 8. Health Promotion/Maintenance		
	Anni anni l'antina dia mat	Restoration and/or Prevention	And and Deathern	Clinian
	Apply complications the post-	Hematoma/Lacerations: Cervical,	Assigned Readings:	Clinical performance
	partum woman may experience	Vaginal, Perineal	D: ·	evaluation
	during a situational crisis involving	1 Fd 1	Ricci	
	her comfort-rest status to the need	1. Etiology	pgs. 769-778	Exam
	for alterations in care	2. Pathophysiology	Tarakan	
		3. Clinical manifestations &	Lecture	
		complications	D'acceste a	
		4. Diagnostic tests5. Cultural considerations	Discussion	
			Name of Chille Lab	
		6. Evidence based theory and principles7. Collaborative management:	Nursing Skills Lab	
		Treatment Modalities		
		a. Surgery b. Medical		
		c. Nutrition		
		d. Pharmacological		
		8. Health Promotion/Maintenance		
		Restoration and/or Prevention		
	Examine complications the	Postpartum Infections: Pelvic, Breast	Assigned Readings:	Clinical performance
	postpartum woman may experience	1 ostputtum infections. 1 civic, breast	ribbightu Readings.	evaluation
	related to a situational crisis	1. Etiology	Ricci	- andution
	involving her immune status	2. Pathophysiology	pgs. 781-787	Exam
	m. o. mg ner miniane status	3. Clinical manifestations &	P801 102 101	
		complications	Lecture	
		4. Diagnostic tests		
		5. Cultural considerations	Discussion	
		6. Evidence based theory and principles		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
ПОСКО		7. Collaborative management: Treatment Modalities a. Surgery b. Medical c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention	Nursing Skills Lab	
3 hours	Neonatal Nursing	Testoration and of Trevention		
June 7th	Identify characteristics of the normal full term newborn. Describe the nursing care of the normal full term newborn Identify characteristics of newborns with complications and special needs. Describe the nursing care of newborns with complications and nursing care. Apply legal and ethical principles to the holistic care of the neonate	 A. Critical Thinking: Nursing process applied to clients and families who have given birth to a well or a special needs newborn B. Provision of safe, holistic, culturally competent care to client and family with a newborn infant Normal Full Term Newborn Characteristics of the Newborn Physiological Jaundice Etiology Pathophysiology Clinical manifestations & complications Diagnostic tests Cultural considerations Evidence based theory and principles Collaborative management: Treatment Modalities Medical Nutrition Pharmacological Health Promotion/Maintenance 	Ricci Chapters 17 & 18 Ricci pgs. 809-829 (Preterm/Post-term) pgs. 837 (TTN) pgs. 837-841 (RDS) pgs. 844-846 (NEC) pgs. 846-851 (Diabetic Mother) pgs. 854-863 (Substance Abuse) pgs. 863-868 (Jaundice) pgs. 1447-1482 (Cardiac) pgs. 1509-1512 (Cleft Lip/Palate) pgs. 1857-1873 (Down Syndrome) Lecture Discussion Simulation	Clinical performance evaluation Exam

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
		Restoration and/or Prevention	Nursing Skills Lab: Newborn	
			Assessment	
		Newborn with complications/special		
		needs: Respiratory Distress Syndrome	Provide nursing care to a newborn	
		(RDS), cardiac conditions, alteration in		
		Thermoregulation, Preterm Infant, Post-		
		term Infant, Infant of a Diabetic Mother,		
		Cleft lip/Palate, Genetic concerns: Down's		
		Syndrome, Substance Abuse, Transient		
		Tachypnea of Neonate (TTN), Necrotizing		
		Enterocolitis (NEC)		
		Y Y Y Y		
		Nursing Management of the Newborn with		
		complications/special needs:		
		1. Etiology		
		2. Pathophysiology		
		3. Clinical manifestations &		
		complications 4. Diagnostic tests		
		a. Genetic Concerns		
		1) Genetic Counseling		
		2) Genetic Testing		
		5. Cultural considerations		
		6. Evidence based theory and principles		
		7. Collaborative management:		
		Treatment Modalities		
		a. Medical		
		b. Nutrition		
		c. Pharmacological (NUR*103)		
		8. Health Promotion/Maintenance		
		Restoration and/or Prevention		
		C. Communication		
		a. Client and family education		
		b. Community resources		
		o. Community resources		

WEEK HOURS	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING EXPERIENCES	EVALUATION
		D. Professionalism 1. Legal-ethical issues 2. Role development		
2 Hours	Unit 9: Nursing care of the	2. Note development		
	gynecology client			
June				
13th	Address life cycle changes of	A. Critical Thinking: Nursing process applied	Assigned Readings:	Exam
	women.	to the care of clients with gynecological		
		disorders	Brunner	Clinical performance
	Describe common health screening		Chapter 56, pgs. 1611-1627	evaluation
	tests for women.	B. Provision of safe, holistic, culturally	(Introduction/Assessment to GYN)	
		competent care to with gynecological		Clinical Learning
	Identify factors that can influence	disorders	Chapter 56, pgs. 1627-1629 (PMS,	Experience
	the health of the female	Menstrual Cycle	Menstrual Irregularities)	Workbook (CLEW)
	reproductive system.	a. Normal		
		b. Deviations of Normal	Chapter 56, pgs. 1641-1645	Concept mapping
	Describe the components	Taking a gynecological history	(Menopause)	
	associated with the physical	 a. Demographic Data 		
	assessment, including routine	b. Personal & Family History	Chapter 57, pgs. 1658-1662	
	health screening test of the female	c. GYN History	(Prolapse)	
	reproductive system	d. STD History		
		e. Diet	Chapter 57, pgs. 1665-1666	
	Identify tests that a commonly used	f. Stressors	(Endometriosis)	
	to diagnose dysfunctions of the	g. Support System		
	reproductive system.	3. Physical Assessment	Chapter 57, pgs. 1674-1676	
		a. Breast Exam	(Hysterectomy)	
	List nursing diagnoses appropriate	b. Abdominal Exam	Chapter 58, pgs. 1681-1689 (Breast	
	to women with gynecologic	c. External Genitalia	Assessment)	
	disorders.	d. Pelvic Exam		
		e. Bimanual Exam	Chapter 58, pgs. 1690-1691	
	Discuss the role of the nurse and	f. Rectovaginal Exam	(Benign Breast Conditions)	
	the use of the nursing process			
	when caring for clients with	4. Diagnostic Assessment	Lewis	
	common gynecological disorders.	a. Laboratory tests	p. 1282 (Toxic Shock Syndrome)	

WEEK	UNIT OBJECTIVES	CONTENT	SUGGESTED LEARNING	EVALUATION
HOURS			EXPERIENCES	
		b. Radiographic studies		
		c. Endoscopic studies		
		d. Biopsy	Lecture	
		e. Other diagnostic studies		
			Discussion	
		Disorders affecting women's health: Pre-		
		Menstrual Syndrome, Menstrual	Provide nursing care to a	
		Irregularities, Menopause, Benign Breast	gynecology client	
		Disorders, Endometriosis, Vaginitis,		
		<u>Uterine Prolapse</u> , <u>Cystocele or Rectocele</u> ,		
		Toxic Shock Syndrome		
		1 Edialogu		
		1. Etiology		
		 Pathophysiology Clinical manifestations & 		
		complications		
		4. Diagnostic tests		
		5. Cultural considerations		
		6. Evidence based theory and principles		
		7. Collaborative management: Treatment		
		Modalities		
		a. Medical		
		b. Surgical		
		c. Nutrition		
		d. Pharmacological		
		8. Health Promotion/Maintenance		
		Restoration and/or Prevention		
		C. Communication		
		1. Client and family education		
		2. Community resources		
		D. Professionalism		
		Legal-ethical issues		
		2. Role development		

1 hour	Unit 8: Nursing care of the			
1 11041	client with a Sexually			
June	Transmitted Illness			
14th	Transmitted Imiess			
	Identify risk factors, signs and symptoms and learning needs	A. Critical Thinking: Nursing process applied to the care of clients with sexually	Assigned Readings:	Exam
	related to vaginal infections and	transmitted illnesses	Brunner	Clinical performance
	sexually transmitted diseases	transmitted innesses	Chapter 71, pgs. 2106-2110	evaluation
	sexually transmitted diseases	B. Provision of safe, holistic, culturally	Chapter 71, pgs. 2100-2110	evaluation
		competent care to with sexually transmitted	Brunner	Clinical Learning
		illnesses	Chapter 57, pgs. 1650-1652	Experience
		imesses	Chapter 57, pgs. 1050-1052	Workbook (CLEW)
		Sexually Transmitted Illnesses:	Lewis	WOIKDOOK (CLEW)
		Gonorrhea, Syphillis, Chlamydia,		Concept manning
		Herpes Genitalis, Trichomoniasis,	Chapter 53	Concept mapping
		Condylomata Acuminata,		
		Humanpapilloma virus (HPV)	Lecture	
		1. Etiology	Lecture	
		2. Pathophysiology	Discussion	
		3. Clinical manifestations &	Discussion	
		complications	Case Study: Nursing Care for the	
		4. Diagnostic tests	client with sexually transmitted	
		5. Cultural considerations	illness	
			imiess	
		6. Evidence based theory and principles7. Collaborative management: Treatment		
		Modalities		
		a. Medical		
		b. Surgical c. Nutrition		
		d. Pharmacological 8. Health Promotion/Maintenance		
		Restoration and/or Prevention		
		C. Communication		,
		1. Client and family education		
		2. Community resources		

		D. Professionalism 1. Legal-ethical issues 2. Role development		
2 hours	Unit 7: Nursing care of the			
June 14th	client with select genitourinary conditions			
	Use the nursing process as a framework when caring for	A. Critical Thinking: Nursing process applied to the clients experiencing genitourinary	Assigned Readings:	Clinical performance evaluation
	patients with commonly occurring urinary system problems.	conditions	Lewis Chapter 45	Clinical Learning
	urmary system problems.	B. Provision of safe, holistic, culturally	Chapter 43	Experience
	Use the nursing process as a	competent care to clients experiencing	Lewis	Workbook (CLEW)
	framework when caring for patients with commonly occurring urinary system problems.	genitor-urinary conditions <u>Urinary Tract Infections, Urolithiasis,</u> Kidney Surgery, Benign Prostatic	Chapter 46, pgs. 1065-1071, stop at chronic pyelonephritis	Concept mapping
		<u>Hypertrophy</u>	Lewis	Exam
	Identify common laboratory and diagnostic tests used to determine	Etiology Pathophysiology	pgs. 1076-1081, stop at strictures	
	urinary system dysfunction.	3. Clinical manifestations &	Lewis	
		complications	Chapter 55, pgs. 1307-1314, stop at	
		Diagnostic tests Cultural considerations	prostate cancer	
		6. Evidence based theory and principles 7. Collaborative management: Treatment	Lecture	
		Modalities a. Medical	Discussion	
		b. Surgical c. Nutrition	Case Study: Benign Prostatic Hypertrophy	
		d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention	Provide nursing care to a client experiencing a genitor-urinary	
		restoration and of Trevention	condition	
		C. Communication 1. Client and family education 2. Community resources		

		D.	Professionalism		
			Legal-ethical issues		
			2. Role development		
5 hours	Unit 4: Nursing care of the		1		
	client with select orthopedic				
June	conditions				
20 th &					
21st	Identify nursing care delivery for		Critical Thinking: Nursing process applied	Lecture	Clinical performance
	the pediatric client with orthopedic		to a client with an orthopedic condition		evaluation
	problems			Discussion	
			Provision of safe, holistic, culturally		Clinical Learning
	Describe the nursing care for the		competent care to a client with an	Provide nursing care to a client with	Experience
	client with a fracture.		orthopedic condition	an orthopedic condition	Workbook (CLEW)
	Discuss medical management and		Common Pediatric orthopedic conditions:	Case Study: Total Hip Replacement	Concept mapping
	nursing care for the client with a		Congenital Hip dysplasia, scoliosis, club		
	fractured hip.		<u>foot</u>	Case Study: Care of a client with a	
				cast	
	Discuss nursing care delivery for		1. Etiology		
	the client with arthritis.		 Pathophysiology Clinical manifestations & 	Case Study: Lyme Disease and CDC recommendations	
	Common and continue the			recommendations	
	Compare and contrast the management of osteoarthritis and		complications 4. Diagnostic tests	Assigned Readings:	
	rheumatoid arthritis		5. Cultural considerations	Assigned Readings:	
	ineumatoid arumus	1	5. Cultural considerations6. Evidence based theory and principles	Lewis	
	Describe the nursing care for the		7. Collaborative management:	Chapters 63, 64, & 65 end on pg.	
	client with reconstructive joint		Treatment Modalities	1579.	
	replacement		a. Medical	1377.	
	Терисентен		b. Surgical	Brunner	
	Discuss nursing care delivery for		c. Nutrition	Chapter 41 and Chapter 43 pg.	
	the client with osteomyelitis		d. Pharmacological	1170, Chart 43-3 Volkman	
			B. Health Promotion/Maintenance	Contracture, & pgs. 1172 – 1173	
	Discuss nursing care delivery for		Restoration and/or Prevention	Pelvis fx.	
	the client with amputation.				
	•		Fracture	Perry and Potter	
			1. Etiology	Chapter 11	
			2. Pathophysiology		

Address nursing care for the client with complications of orthopedic procedures	3. Clinical manifestations & complications a. Fat embolism b. Compartment syndrome c. Volkman's contracture 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management: Treatment Modalities a. Medical b. Surgical c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention Osteoarthritis and Rheumatoid Arthritis 1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management: Treatment Modalities a. Medical b. Surgical (1) Joint Replacement Surgery c. Nutrition d. Pharmacological 8. Health Promotion/Maintenance	dysplagia),
	c. Nutrition d. Pharmacological	

		Gout, Osteoporosis, Lyme Disease,		
		<u>osteomyelitis</u>		
		 Etiology Pathophysiology Clinical manifestations & complications Diagnostic tests Cultural considerations Evidence based theory and principles Collaborative management: Treatment Modalities Medical Nutrition Pharmacological Surgical/amputation Health Promotion/Maintenance and Restoration and or Prevention Communication Client and family education Community Resources 		
		D. Professionalism 1. Legal-Ethical issues		
		2. Role Development		
1 hour June	Unit 2: Nursing care of the perioperative client			
27th	Preoperative Nursing	A. Critical Thinking: Nursing process applied to the preoperative client	Assigned Readings:	Clinical performance evaluation
	Describe the typical content of preoperative patient education programs	B. Provision of safe, holistic, culturally competent care to the preoperative client	Lewis Chapter 18	Clinical Learning Experience
	F2	Preoperative Nursing	Brunner Chapter 17	Workbook (CLEW)
				Concept mapping

			1 -	1
Describe age specific, cultural and		atient perception of the surgical	Lecture	
literacy sensitive approaches to		sperience		Exam
preoperative patient education	a.	Fear	Discussion	
	b.			
State the effects of stress on the	c.	Importance of the presence of the	Simulation	
surgical patient		nurse		
	2. N	eed for Diagnostic testing and	Observational Experience	
Discuss the various ways that	pl	nysical preparation		
surgery can be classified	3. P	rovision of client/family preoperative		
	te	aching, categories of information:		
Describe factors affecting surgical	a.	Health care relevant information		
outcome		(healthcare team members,		
		expected events and their timing,		
Discuss the nursing responsibilities		pain management)		
in the pre-operative period	h	Exercises to perform, or skill		
1 1 1	0.	teaching (Cough/deep breathing,		
Develop a plan of care for the pre-		surgery specific, relaxation		
operative patient		exercises)		
· · · · · · · · · · · · · · · · · · ·	C	Psychosocial support (specific		
	C.	concerns of client, foster problem		
		solving skills, importance of		
		information seeking, need for post		
		discharge support)		
	ı			
	a.	Community resources (need for		
		support and ability to access)		
		nunication: apply the principles of		
		eutic communication during the		
	preope	erative period		
	1. M	ethods of delivery of pre-op		
	ed	ucation		
	a.			
	b.			
	c.	booklets and other audio visual		
		materials		

1 hour	Intraoperative Nursing	Culturally determined values, beliefs, customs, and health-seeking behaviors can influence: a. Interpersonal communication b. Increased use of alternative medicine or other non-traditional interventions that may influence interventions D. Professionalism 1. Legal-ethical issues 2. Role development		
June 27th	Discuss the various members of the surgical team and their roles during surgery. Describe the surgical environment and the role of the nurse within that environment. Differentiate between the various types of anesthesia used during surgery. Describe surgical wound classification according to the Centers for Disease Control (CDC) Describe selected intraoperative risks and complications	b. Provision of safe, holistic, culturally competent care to the intraoperative client Intraoperative Nursing Surgical Team Surgical Environment: Anesthesia a. General Anesthesia b. Regional Anesthesia c. Conscious Sedation d. Local Anesthesia 4. Risk of postoperative infection as measured by Surgical Wound Classification:	Assigned Readings: Lewis Chapter 19 Brunner Chapter 18 Brunner pg. 457, Table 19-5 Lecture Discussion Simulation Observational Experience	Clinical performance evaluation Clinical Learning Experience Workbook (CLEW) Concept mapping Exam

		5. Other Intraoperative Risks/		
		Complications		
		a. Risk of Injury from		
		(1) transport		
		(2) surgical positioning		
		(3) hazardous substances and		
		equipment (laser, cautery,		
		radiation, chemicals)		
		b. Alteration in body temperature		
		(1) Hypothermia		
		(2) Hyperthermia and		
		Malignant Hyperthermia		
		c. Risk for Alteration in fluid		
		balance		
		(1) Autologous blood donation(2) Bloodless surgery		
		(2) Bloodless surgery		
		C. Communication: apply the principles of		
		therapeutic communication during the		
		preoperative period		
		D. Professionalism		
		 Legal-ethical issues 		
		2. Role development		
4 hours	Postoperative Nursing			
June	Describe the responsibilities of the	A. Critical Thinking: Nursing process applied	Assigned Readings:	Clinical performance
28th	PACU nurse in the prevention and	to the postoperative client	Lewis	evaluation
	recognition of complications.		Chapter 20	
		B. Provision of safe, holistic, culturally	•	Clinical Learning
	Identify common postoperative	competent care to the intraoperative client	Brunner	Experience Workbook
	complications		Chapter 19	(CLEW)
		Postoperative Nursing		
	Discuss the management of		Lewis (Shock)	Concept mapping
	common postoperative	1. Postanesthesia (PACU) Assessment	Chapter 67, pgs. 1631-1649 (read	Exam
	complications	(ABC)	sections only on	
		a. Airway: (A & B)	anaphylactic/hypovolemic shock)	

Use the nursing process in caring	1. Obstruction	
for clients in the postoperative	2. Hypoxia Lecture	
period.	3. Aspiration	
	b. Alteration in body temperature(C) Discussion	
Describe key nursing assessment	c. Nausea and Vomiting	
and care parameters common for	d. Fluid balance (C) Simulation	
all postoperative patients	e. Pain assessment	
	2. Postoperative nursing care principles Observational Experience	
Describe the gerontological	a. Pain management	
considerations related to the post-	b. Early mobility Provide nursing care to a	
operative management of clients	c. Circulatory function postoperative client	
	d. Pulmonary toilet	
	e. Urinary Function	
	f. Gastrointestinal Function	
	3. Management of postoperative	
	complications	
	a. Hemorrhage	
	1. Hypovolemic Shock	
	i. Prevention Early	
	Identification.	
	ii. Clinical Manifestations	
	2. Collaborative Management	
	i. Medical/Pharmacologic	
	(NUR*103)	
	ii. Surgical	
	iii. Nursing Management	
	b. Anaphylaxis	
	1. Anaphylactic Shock	
	i. Prevention Early	
	Identification.	
	ii. Clinical Manifestations	
	2. Collaborative Management	
	i. Medical/Pharmacologic	
	(NUR*103)	
	ii. Nursing Management	
	c. Ileus	
	d. Atelectasis	

		e. Deep Vein Thrombosis (DVT) f. Complications of wound healing 1. dehiscence 2. evisceration 3. infection 4. Gerontologic Considerations a. Mental Status b. Pain C. Communication: apply the principles of therapeutic communication during the preoperative period D. Professionalism 1. Legal-ethical issues 2. Role development		
1 hour	Anemia	A. Critical Thinking: Nursing process applied	Assigned readings:	Clinical performance
July 5th	Compare and contrast pathophysiology and clinical manifestations of anemia. Summarize the nursing care of the client experiencing anemia	to clients with anemia B. Provision of safe, holistic, culturally competent care to clients with anemia. Anemia: I. Anemia due to blood loss II. Anemia due to impaired blood production III. Anemia due to destruction of RBC 1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests and procedures: 5. Evidence based theory and principles 6. Collaborative management:	Lewis Chapter 31, stop at page 647 Provide nursing care to a client with anemia	evaluation Clinical Learning Experience Workbook (CLEW) Concept mapping Exam

		Treatment modalities: a. Nutrition b. Pharmacological 7. Health Promotion/Maintenance Restoration and/or Prevention C. Communication 1. Client and family education		
		Community resources D. Professionalism		
		Legal-ethical issues Role development		
2 hours	Unit 6: Bariatrics:	A. Critical Thinking: Nursing process applied	Handouts	Clinical performance
	Care of clients with medically	to clients with morbid obesity.		evaluation
July	significant obesity		Guest Panel: Dietitian, Client	
11th		B. Provision of safe, holistic, culturally	5	Clinical Learning
	Describe health implications for the morbidly obese client.	competent care to clients with morbid obesity.	Provide nursing care to a client with a disturbance in	Experience Workbook (CLEW)
	morbidiy obese chem.	obesity.	gastrointestinal function	(CLEW)
	Compare and contrast the Bariatrics	Bariatrics	gustromestma ranetron	Concept mapping
	surgical techniques utilized for the	1. Etiology	Assigned readings:	
	morbidly obese individual.	2. Pathophysiology		Exam
	*****	3. Clinical manifestations &	Lewis	
	Utilize the nursing process to develop a holistic plan of care for	complications 4. Diagnostic tests and	Chapter 41	
	clients following Bariatric surgery.	procedures	Brunner	
	chems following Darraute surgery.	5. Cultural considerations	Chapter 33 pgs. 907-909 (Vit B12	
		6. Evidence based theory and	Deficiency)	
		Principles	Chapter 47 pgs. 1272-1278	
		7. Collaborative management:	(Obesity)	
		Treatment modalities:		
		a. Surgery		
		b. Medical c. Rehabilitative		
		d. Nutrition		
		e. Pharmacological		

		8. Health Promotion/Maintenance Restoration and/or Prevention C. Communication 1. Client and family education 2. Community resources D. Professionalism 1. Legal-ethical issues 2. Role development		
2 hours July 12th	Unit 11: Nursing care of the client and family experiencing death			
1201	Identify the stages of grieving. Identify clinical symptoms of grief and factors affecting a grief response Identify measures that facilitate the grieving process List clinical signs of impending and actual death Identify the nurse's legal responsibilities regarding client death Discuss the role of the nursing when caring for the dying client.	 A. Critical Thinking: Nursing process applied to a dying client B. Provision of safe, holistic, culturally competent care to a dying client Palliative Care Clinical manifestations & complications Cultural considerations Evidence based theory and principles Grief and Bereavement C. Communication Client and family education Community resources D. Professionalism Legal-ethical issues Role development 	Lecture Discussion Nursing Skills Lab: Post Mortem Care Film: Wit Provide nursing care to a terminally ill client Case Study: Hospice Assigned Readings: Lewis Chapter 10 Brunner Chapter 16	Clinical performance evaluation Clinical Learning Experience Workbook (CLEW) Concept mapping Exam

3 hours	Unit 12: Nursing Care of The Client with a Psychiatric/Mental			
July	Health Disorder			
18th	Adult Psychiatric Conditions: Anxiety, Somatoform, Factitious	A. Critical Thinking: Nursing process applied to a client with a psychiatric/mental health	Lecture	Exam
	and Dissociative Disorders	disorder	Varcarolis Crossword Puzzle	
	Describe the DSM-IV-TR evaluation system for classification	 Introduction to the DSM-IV-TR and its use in psychiatric/mental health 	Discussion	
	of mental disorders.	nursing a. Axis	Case Study: Application of the DSM-IV-TR	
	Identify adaptive and maladaptive coping through identification and understanding of defense	b. Global Function Index 2. The role of defense mechanisms in	Films: The Note Book, Up in the Air, Tenderness	
	mechanisms.	client coping a. Adaptive	Concept mapping	
	Identify theories of anxiety disorders	b. Maladaptive	Assigned Readings:	
	Identify basic characteristics of medical anxiety disorders	B. Provision of safe, holistic, culturally competent care to a client with a psychiatric disorder	Varcarolis Chapters 15, 16, & 17	
	Discuss assessment when providing care to people with anxiety and anxiety disorders	 Anxiety Disorders a. Etiology b. Pathophysiology c. Clinical manifestations & 		
	Identify nursing diagnoses and outcomes for people with anxiety disorders	complications d. Diagnostic tests e. Cultural considerations		
	Describe manifestation of the somatoform, factitious and	f. Evidence based theory and principles of management		
	dissociative disorders	Generalized Anxiety Disorder, Panic Disorders, Phobias, Social Anxiety Disorders, OCD, PTSD		

3 hours	Adult Psychiatric Conditions:	 Somatoform Disorders/Somatization symptoms of unmet needs Importance of secondary gains Impact on healthcare system Evidence based theory and principles of management Factitious Disorders Prototype: Munchausen Syndrome and Munchausen Syndrome by Proxy Evidence based theory and principles of management Dissociative Disorders Define Dissociation Prototypes: Dissociative Fugue and Dissociative Identity Disorder Evidence based theory and principles of management Communication Client and family education Community resources Professionalism Legal-ethical issues Role development 		
July 19th	Mood Disorders Compare and contrast the symptoms of the different forms of mood disorders and thought disorders across the lifespan.	A. Critical Thinking: Nursing process applied to clients experiencing mood disorders	Handouts Nurse-Client Communication Skills: a. Mood Disorders	Exam

Correlate recommended treatment modalities with the major types of mood disorders.

Describe appropriate nursing interventions for behaviors associated with mood disorders.

B. Provision of safe, holistic, culturally competent care to clients with mood disorders

Mood Disorders, Depression, Postpartum Depression with Psychotic Features, Bipolar Disorder, Suicide

- 1. Etiology
- 2. Pathophysiology
- 3. Clinical manifestations and complications
- 4. Diagnostic evaluation DSM IV
- 5. Cultural considerations
- 6. Evidence based theory and principles
- 7. Collaborative management Treatment modalities
 - a. Surgical
 - b. Medical
 - c. Rehabilitative
 - d. Nutrition
 - e. Pharmacological
- 8. Health Promotion/Maintenance Restoration and/or Prevention
- C. Communication
 - 1. Client and family education
 - 2. Community resources
- D. Professionalism
 - 1. Legal-ethical issues
 - 2. Role development

Selected A/V and computer materials: "Hearing Voices" CD and exercises

Provide nursing care to a client experiencing mood disorders NUR*203

Role play Communication skills with the psychiatric clients

Tape: Hearing Voices (Lab NUR*201)

Suicide Assessment

Process recording workshop in preparation for psychiatric nursing clinical experience in NUR 203

Concept mapping

Assigned Readings:

Varcarolis Chapters 13, 14, & 25

Ricci Chapter 15 pgs. 501- 506 (Psychological Adaptation) Chapter 16 pg. 536 (Postpatum Blues) Chapter 23 pgs. 787-793 (Postpartum Affective D/O)

2 hours	Unit 10: Nursing care of the			
	family experiencing violence			
August				
1st	Discuss the differences between	A. Critical Thinking: Nursing process applied	Lecture	Clinical performance
	physical violence, sexual violence,	to the care of clients/families experiencing		evaluation
	emotional violence and neglect	violence and neglect	Discussion	
		B. Provision of safe, holistic, culturally		Clinical Learning
	Describe common characteristics of	competent care to clients/families	Guest Speaker: Emergency Care of	Experience Workbook
	the abused and abusers	experiencing violence and neglect	the Abused Client	(CLEW)
	Identify stressors and predictors of	Violence: Spousal Abuse, Elder Abuse,	Assigned Readings:	Concept mapping
	family violence.	Child Abuse, Sexual Assault		1 11 6
			Varcarolis	Exam
	Discuss safety plans for victims of	1. Etiology	Chapters 27, 28, 29	
	family violence	2. Pathophysiology		
		3. Clinical manifestations &	Ricci	
	Describe phases of rape-trauma	complications	Chapter 11 pgs. 1908-1910	
	syndrome and common reactions	4. Diagnostic tests	(Abuse and Violence)	
	during each phase.	5. Cultural considerations		
		6. Evidence based theory and principles		
	Discuss the role of the nurse when	7. Collaborative management:		
	caring for the abused client	Treatment Modalities		
	Describe the role of the nurse as an	a. Medical		
	advocate in incidences of family	b. Surgicalc. Nutrition		
	violence	d. Pharmacological		
	Violence	8. Health Promotion/Maintenance		
	Describe how the role of the nurse	Restoration and/or Prevention		
	varies in the care of clients that are			
	victims of different types of	C. Communication		
	violence, abuse and neglect	Client and family education		
		2. Community resources		
		D. Professionalism		
		Legal-ethical issues		
		2. Role development		

4 hours	Unit 3: Principles of Geriatric		
	Nursing: Nursing Care of the		
August	Geriatric Client		
2nd	Discuss adult aging theories in relation to wellness and illness.	A. Critical Thinking: Nursing process applied to a geriatric client Discuss	evaluation
	Outline common changes and adaptations occurring in the older adult.	B. Provision of safe, holistic, culturally competent care to a geriatric client Mini M	Clinical Learning Experience Workbook (CLEW)
	Identify myths and stereotypes that alter perceptions about aging	a. Activity Theory b. Disengagement Theory Extended	e care for residents of an ed Care Facility Concept mapping
	persons in our society. Describe health care needs of the	and/or	e in an Adult Day Care Exam Sr. Citizen Centers
	aging population in a variety of healthcare settings	a. Primary Agingb. Secondary Aging Assigned	ed Readings:
	Discuss the impact of illness, hospitalization and institutionaliz-	c. Functional Assessment of Older Adult Lewis Chapte	r 5
	ation on the independent functioning of the older adult.	3. Common concerns a. Physiological changes of aging Chapte	
		b. Psychosocial changes of aging c. Disengagement theory Varcar	
		d. Activity Theory e. Continuity Theory	r 30
		4. Physiological changes affecting pharmacokinetics; issue of polypharmacy in geriatric population	
		 5. Settings for the delivery of care a. Community settings (daycare, senior centers) b. Assisted Living c. Long term 	

		d. Subacute/Rehab	
		e. Acute	
2 hours	Principles of Geriatric Nursing: Cognitive Disorders	0. 000.00	
August 8th	Differentiate between the clinical presentations of delirium and dementia.	A. Critical Thinking: Nursing process applied to a geriatric and cognitively impaired client	Assigned Readings: Varcarolis Chapter 23
	Discuss the nursing care of the client with delirium	B. Provision of safe, holistic, culturally competent care to a cognitively impaired client	Lewis Chapter 60
	Discuss the nursing care of the client with dementia.	Delirium	
	Describe the characteristic behaviors and stages of Alzheimer's Disease.	 Etiology Pathophysiology Clinical manifestations & complications 	
	Discuss diagnosis, medical treatment and nursing care of the client with Alzheimer's disease.	 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management:	
		Dementia: Alzheimer's 1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests	

2 hours	Unit 5: Pediatric Nursing Principles of Pediatric Nursing	5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management: Treatment Modalities a. Medical b. Nutrition c. Pharmacological 8. Health Promotion/Maintenance Restoration and/or Prevention C. Communication 1. Client and family education 2. Community resources D. Professionalism 1. Legal-ethical issues 2. Role Development		
August				
9th	Describe the philosophy and goals of pediatric nursing Discuss the significance of family in the care of pediatric clients Identify health- promotional activities essential for normal growth and development in the pediatric population List the major components of a pediatric history and physical exam Explain how children differ from adults in their response to illness and hospitalization	 A. Critical Thinking: Nursing process applied to the care of the pediatric client and family 1. Trends in pediatric care 2. Health promotion and the pediatric client 3. Family characteristics 4. Cultural influences on the pediatric client and family 5. Parenting styles a. Child-rearing philosophies b. Discipline 6. Principles of growth and development a. Cephalocaudal b. Proximo-distal c. Simple to complex 	Ricci Chapter 1, end at pg. 45 Chapters 30-33, 35 Chapter 36, pgs. 1220-1235 Chapters 25-29 (Scan) Lecture Discussion	Clinical performance evaluation Clinical Learning Experience Workbook (CLEW) Concept mapping Exam

	d. General to specific
Discuss pediatric illness as a	7. Application of theories of growth and
family stressor	development
	a. Cognitive: Piaget
Discuss the principles and	b. Psychosocial: Erikson
techniques for administering	c. Moral: Kohlberg
medications and IV fluids to	d. Psychosexual: Freud
children	8. Physical Assessment
	a. History
Describe communication strategies	b. Vital signs
that assist nurses in working	c. Anthropometric measurement
effectively with children	d. Growth charts
	e. Nutrition
Describe legal issues unique to	9. Developmental Assessment
children and families	a. Denver Developmental
	Screening Test II (DDST-II)
Discuss care of children with	b. Play as an indicator
common pediatric illnesses	10. The Hospitalized child
	a. Preparation for elective
	hospitalization
	b. Emergency hospitalization
	c. Stressors associated with illness
	and hospitalization
	11. Preparing children for procedures
	a. Physical preparation
	b. Verbal preparation
	c. Coping with pain
	d. Use of play as a coping
	mechanism
	12. Administering medication to children
	a. Administering oral medication
	b. Administering injections
	c. Principles of IV fluid
	administration
	B. Communication with the pediatric client
	and family

		Communication strategies a. Developmental principles a. Cultural considerations Parental education a. Safety b. Anticipatory guidance C. Professionalism 1. Consent for care 2. The nurse as a child advocate 3. Mandatory reporting laws		
3 hours August 15th	Common Pediatric Conditions Describe nursing care and management when caring for the child with common pediatric conditions.	A. Critical Thinking: Nursing process applied to the care of the pediatric client and family with Common Pediatric Conditions: Gastroenteritis, Appendecitis, Otitis Media, conditions affecting the tonsils and adenoids, Pyloric Stenosis, Care of the Child with Developmental Needs	Assigned Readings: Ricci pgs. 1408-1411 (pharyngitis/tonsillitis/mono/epiglo ttitis) pg. 1522 (pyloric stenosis)	Clinical performance evaluation Clinical Learning Experience Workbook (CLEW) Concept mapping
		 B. Provision of safe, holistic, culturally competent care to the pediatric client and family with Common Pediatric Conditions 1. Etiology 2. Pathophysiology 3. Clinical manifestations & complications 4. Diagnostic tests 5. Cultural considerations 6. Evidence based theory and principles 7. Collaborative management: Treatment Modalities a. Medical b. Surgical c. Nutrition d. Pharmacological 	pgs. 1525-1526 (appendicitis) pg. 1526 (GER) pg 1530 (constipation) Lecture Discussion	Exam

		8. Health Promotion/Maintenance Restoration and/or Prevention	
		C. Communication 1. Client and family education 2. Community resources	
		D. Professionalism1. Legal-ethical issues2. Role development	
2 hours	Final Exam Week	Final Exam	

NUR 102 Lab

Attendance & Preparation

It is expected that you attend all labs as scheduled. If you need to miss a lab you need to ensure you notify one or all of your lab instructors. You will also be responsible for making up any lab time missed. It is also expected that you are appropriately dressed in your clinical uniform for each lab (please see nursing handbook for more information).

It is also expected that all reading that is required of you be completed prior to your scheduled lab day.

Skills Validation

Students are required to successfully demonstrate multiple nursing skills in the Nursing Labs. Sheets outlining the expectations for passing the skill validations can be found at the end of the syllabus. Students are required to come prepared with any equipment required to perform the skill. Students who are unsatisfactory in a skill validation are required to remediate with the Laboratory Instructor and retest on the skill. Skills validation must be satisfactory prior to performing the skill at the clinical site. Students are given two opportunities to re-test on any one skill and demonstrate safe practice. A written plan to have the student practice and remediate with the Lab Teacher is made. If the student is unable to demonstrate safe practice on the third attempt, the student receives an unsatisfactory in the clinical portion of the course, and is not permitted to proceed to the clinical setting based on concerns for patient safety. Unsatisfactory in clinical results in removal from the course and inability to apply for re-admission to the Connecticut Community College Nursing Program. Students who are unsatisfactory in performing the skill three times will be removed from the course.

Skills to be validated on this semester include: Insertion of an Indwelling Urinary Catheter for a Female Client, Administration of a Piggyback Medication via Secondary Line (IVPB), Medication administration via an Enteral Tube and Initial Set-Up of Primary IV Solution

Miscellaneous

- *Personal effects should not be brought to the lab. Lab books, notebooks and nurse packs only may be brought to the lab.
- *Food and drink are not allowed in the lab.
- * All lab skills are from Perry & Potter Clinical Nursing Skills and Techniques.

Clinical

You are required to attend clinical each week in your uniform (please see student nurse handbook for more information). If you are unable to attend clinical, it is your responsibility to notify your clinical instructor prior to the start of clinical that day. You are also required to make up that clinical time missed.

You will have clinical assignments due throughout this semester to include: weekly reflection, process recording and CLEW. Further information on each of these clinical assignments can be found under the clinical tab on Blackboard and will be discussed in detail by both your lab and clinical faculty. You will be evaluated on a weekly basis by your clinical faculty with a formative evaluation being completed. At the end of the semester, you will also have a summative evaluation completed.

NUR* 102: Family Health Nursing Laboratory Topics Schedule

Obstetrical/Pediatric Nursing Topics to be Covered

Lab Topic Time

Breastfeeding (1 hour	theory)		1 hour
Newborn Assessment and Care		2.5 hours	
Post Partum Assessme	ent/Care		1.5 hour
Child Birth Education	(i.e. Lamaze)		1 hour
		TOTAL	6

Combined Nursing Topics to be Covered

Lab Topic Time

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

Medical/Surgical Topics to be Covered

Lab Topic Time

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

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

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

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

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

Learning Objectives	Suggested Learning Activities
Upon completion of the Learning Laboratory	
the student will be able to:	
Describe a systematic "Bubble" assessment of a postpartum client a. Breast	Review handouts/readings/videos related to postpartum assessment and care
b. Uterus/fundusc. Bladderd. Bowel	Student practice a return demonstration of a post partum assessment
e. Lochia f. Episiotomy, Emotional	Critical Thinking scenario and small group discussion
Describe routine care of the mother who has delivered her infant vaginally vs. cesarean section	Case Study

On Campus Clinical Laboratory: Child Birth Education (1 hour)

Child Birth Education		
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities
	Discuss different methods of prepared childbirth Review client variables and how they factor into educational development Discuss the role of the registered nurse and coach related to childbirth	Review handouts/readings/videos related to childbirth education Critical Thinking scenario and small group discussion Case Study Guest speaker

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

Pa	Part A: Nursing Care of Clients Requiring Urinary Catheterization		
Up	arning Objectives on completion of the Learning Laboratory e student will be able to:	Suggested Learning Activities	
1.	Describe the indications for urinary catheterization, such as:. a. measuring residual urine volume b. urinary retention	Review handouts/readings/videos related to urinary catheterization. Review handouts/readings/videos related to bladder scanning	
2.	Describe the procedure for assessing post void residual urine using straight catheterization	Faculty demonstration of urinary catheterization and removal of indwelling catheter.	
3.	State the advantages of using a bladder scanner to assess urine volume. a. Relate the steps for assessing bladder urine volume using a bladder scanner.	Student practice on SimMan®: insertion of indwelling catheter, removal of catheter. Review of validation performance checklist for	
4.	Describe the nursing assessments that should be done prior to catheterizing a client	urinary catheterization. Critical thinking exercise and small group discussion: urinary catheterization	
5.	Describe nursing considerations related to catheterization of a female vs. a male client	discussion. dimary cadioterization	
6.	Describe the procedural differences between straight and indwelling catheterization		
7.	Identify the equipment needed to perform urinary catheterization		
8.	Compare and contrast the different types of urinary catheters		
9.	State expected outcomes following completion of the procedure		
10	Discuss key principles related to urinary catheterization		
11	Demonstrate aseptic technique during catheterization and related procedures using laboratory simulation models.		

- 12. Discuss the risks and potential complications associated with catheterization, and the nursing interventions to prevent them
- 13. Discuss client teaching related to urinary catheterization
- 14. Demonstrate collection of a urine specimen from a continuous bladder drainage system.
- 15. Review/Discuss routine catheter care and the procedure for removal of an indwelling catheter (NUR*101)

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

Competency Assessment/Validation: Insertion of an Indwelling Urinary Catheter

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

Student: _	Date:

Psychomotor Skill (Note: specific skills may vary slightly in accordance with equipment or facility protocol)	S/U
Part I: Preparation for Catheterization	
1. Check M.D. order	
2. Gather equipment for catheterization	
a. Correct catheterization kit (Straight or Foley) and correct catheter size	
b. Extra pair of sterile gloves, extra sterile catheter or kit of correct size and type	
c. Bath blanket and linen protector	
3. Identify patient and explain procedure	
4. Wash hands	
5. Provide privacy	
6. Raise height of bed	
7. Position patient in dorsal recumbent position with knees flexed	
8. Drape patient with bath blanket	
9. Cleanse perineum prn and identify anatomical landmarks	
Part II: Getting the Field Ready	
1. Open catheter kit	
2. Place outer plastic wrap at end of bed for waste disposal	
3. Place catheter set on bed between patient's legs	
4. Open outer wrap using principles of sterile technique	
5. Using sterile technique place sterile drape, plastic side down, under buttocks	
6. Don sterile gloves	
7. Place fenestrated drape over perineum maintaining sterility	
8. Organize equipment in order of use	
a. Place cotton balls/swabs, antiseptic solution, and lubricant closest to patient	
b. Pour antiseptic over cotton balls or open packet with swabs	
c. Test catheter balloon for leaks (unless manufacturer does not recommend)	
d. Pull back fluid to deflate balloon but leave syringe attached to lumen	
e. Squirt lubricant onto tray	
f. Lubricate tip of catheter 2 inches	
Part III: Inserting Catheter	
Separate the labia minora with your non-dominant hand to expose urethral meatus	
2. Cleanse meatus, using downward strokes (front to back)	
a. Far labial fold first	
b. Near labial fold next	
c. Over center of meatus last	
3. Pick up catheter (3in. from tip) with dominant hand	
4. Ask patient to bear down gently as if to void	
5. Insert catheter 2-3 in. or until urine flows: when urine is seen, advance 1-2 in.	
6. Release labia and hold catheter in place with non-dominant hand	
7. Inflate balloon with recommended amount of sterile water and tug gently	
8. Allow bladder to empty	

9. Attach end of catheter to end of tubing on urinary drainage device if not pre-attached	
10. Remove gloves and wash hands	
11. Follow hospital protocol regarding securing catheter to leg (use clean gloves)	
Part IV: Patient Assessment and Documentation	
1. Assess color, clarity, odor, and amount of urine obtained	
2. Cleanse patient's perineum (insure that patient is clean and dry)	
3. Remove drapes	
4. Perform Documentation per facility protocol	
Lab Referral Comments:	
Dates Remediated/Comments:	

Validating Instructor ______Date:_____

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

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

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

Student: ______Date: _____

Psychomotor Skill (Note: specific skills may vary in accordance with equipment or facility	S/U	
<i>protocol</i>)1. Washes hands		
Obtains ordered medication and does three checks against M.D. order on MAR		
<u> </u>		
3. Verbalizes checking compatibility of medication with primary solution/additives		
4. Gathers appropriate equipment		
a. Verbalizes selection of correct IVPB solution / volume.		
b. Inspects solution for clarity, color, expiration date.		
c. Selects appropriate tubing and dates tubing per facility protocol		
d. Selects appropriate diluent for the medication		
5. Reconstitutes medication and draws up accurate dose		
6. Injects medication into IV solution, using aseptic technique		
7. Clamps secondary tubing and spikes IVPB bag		
8. Labels bag per facility protocol (i.e. name of medication, dose, client name, room#,		
date, time, signature)		
9. Calculates drip rate precisely		
10. Properly identifies client and explains procedure		
11. Washes hands and gathers gloves		
12. Dons gloves and assesses IV site for:		
a. changes in temperature		
b. edema		
c. leakage		
d. color (pallor, redness)		
e. pain or tenderness		
13. Cleanses upper Y-port on primary tubing with alcohol wipe and attaches secondary		
set		
14. Purges air from secondary tubing by back priming (i.e. lowers IVPB below level of Primary bag)		
15. Closes roller clamp on secondary tubing and hangs IVPB bag on pole		
16. Lowers primary bag on hanger		
17. Opens secondary tubing clamp completely		
18. Sets rate using primary line clamp, adjusted to within 5 gtts of correct rate		
10. Backagita ita ta vanifu na infiltration, nain laglaga		
20. Verbalizes need to recheck site and rate again in 5-10 min		
21. Maintains principles of asepsis throughout procedure 22. Documents per facility policy		
Lab Referral Comments:		
Dates Remediated/Comments:		
Validating Instructor Date:		

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

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

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

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

On Campus Clinical Laboratory:

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

Pa	Part A: Nursing Care of Clients with Decompression Tubes				
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities			
1.	Differentiate between the various types of enteral tubes (i.e. PEG, NGT, jejunal, gastrostomy)	Review readings/handouts/videos on NG tube for decompression. Student practice: setting up for NGT insertion.			
2.	Describe the different types of tubes used for gastric decompression.	Faculty demonstration and student practice: 1. verifying tube placement			
3.	State the purposes of a Nasogastric (NG) tube.	2. anchoring tube3. irrigating tube4. attaching tube to suction			
4.	Discuss the procedure for insertion of an NG tube.	5. measuring tube outputCritical thinking exercise/case study: client			
5.	Discuss expected outcomes following completion of the procedure.	with an NG tube (NGT)			
6.	Describe the evidence based procedure for verifying placement of an NG tube				
7.	Describe nursing management of the client with an NG tube to include a. the use of suction, b. NG Tube irrigation, c. evaluating NG tube output d. NG tube removal				

Learning Objectives Upon completion of the Learning Laboratory the student will be able to:		Suggested Learning Activities
1.	Describe nursing assessments related to medication administration via enteral tubes	Review of readings/handouts/videos for medication administration via enteral tubes
	Demonstrate techniques for assessing placement of enteral tubes prior to medication administration List the steps of the procedure for administration of medications via an enteral tube. Discuss nursing considerations related to administration of medications via enteral tubes such as: a. Medications contraindicated for enteral administration b. Contraindications to crushing of certain medications c. Implications for medication incompatibilities such as: i. Clamping between medications	Faculty demonstration and student practice of procedure. Critical thinking exercise/ case study with small group discussion. Review of validation performance checklist for medication administration via enteral tubes.
5.	Discuss measures to prevent complications when administering medications via an enteral tube such as: a. Dislodging of tube b. Clogging of tube	
6.	State expected client outcomes following completion of medication administration via an enteral tube	

Competency Assessment/Validation: Medication Administration via an Enteral Tube

Student:	Date:
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ychomotor Skill (Note: specific skills may vary in accordance with equipment or facility	S/U
1. Gathers supplies (60 ml catheter tip syringe)	
2. Prepares medication per procedure using MAR, 6 Rights, Checks 2 forms of identity	
3. Obtains liquid form or crushes meds	
a. Verbalizes verification that medication is crushable	
4. Dilutes crushed medication with 30 ml water	
5. Assess that tube is securely taped or fastened	
6. Places towel under work area	
7. Places patient in high fowler's position	
8. Dons clean gloves	
9. Disconnects tube from feeding or suction or removes plug	
a. Holds tube up above level of stomach	
b. Pinches tube to prevent backflow and leaking	
10. Confirms tube placement: checks markings, checks aspirate color and pH	
a. Draw up 30 ml of air into 60 ml syringe	
b. Attach to end of feeding tube	
c. Flush tube with 30 ml of air before attempts to aspirate fluid	
d. Draw back on syringe slowly-obtaining 5-10 ml of gastric aspirate	
e. Gently mix aspirate in syringe	
f. Measure pH-dipping the pH strip into fluid or by applying few drops of fluid to	
the strip-comparing with the color on the chart provided by manufacturer	
i. Gastric contents < 4, tube feeding pH usually 5 or greater, ph of	
pleural fluid from the tracheabronchial tree is generally > 6	
11. Verbalizes how to aspirate for residual if feeding	
a. Return aspirated contents unless excessive amount (usually > 100cc)	
12. Flushes with 30 ml of warm water	
13. Removes plunger of syringe	
a. Pinches/kinks gastric tube	
b. Places end of syringe into gastric tube	
14 Administers meds by gravity, pours each med separately, flushes with 10 ml H ₂ O	
between each med	
15 After last medication flushes with 30-60 ml H ₂ O	
16. Pinches gastric tube, removes syringe and inserts clamp or connects to tube feeding.	
Do not reconnect to suction for 60 minutes	

NUR*102: Family Health Nursing On Campus Clinical Laboratory:

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

Nursing Care of Clients with Epidural or Patient Controlled Analgesia (PCA)				
Learning Objectives Upon completion of the Learning Laboratory the student will be able to:	Suggested Learning Activities			
 Describe patient controlled analgesia and the different modalities used to provide it. Discuss the evidence to support the advantages of PCA and epidural analgesia (evidenced based practice) 	Review of readings/handouts/videos related to care of the client receiving PCA/epidural pain management. Review of readings/handouts/videos related to epidural catheter management			
3. Identify clients who would be candidates for PCA/epidural pain management.	Review of equipment used in providing PCA and epidural pain management.			
4. State the agents (i.e. opiods) commonly used for PCA and epidural pain management.	Discuss nursing implications related to client teaching and safety with PCA and epidural.			
5. Discuss concerns / safety issues related to PCA / epidural use.	Case study/ critical thinking exercise and small group discussion related to the care of clients receiving PCA/epidural pain management.			
6. Discuss principles and safety features of PCA / epidural pump operation.				

- 7. Describe the process for client activation of PCA devices
- 8. Describe safe and competent nursing care of the client receiving PCA/ epidural analgesia
 - a. Design a nursing care plan for the client receiving PCA/ epidural analgesia to include but not be limited to:
 - nursing assessments to monitor client response to PCA/epidural analgesia
 - ii. nursing assessments to monitor the safety of the client receiving PCA/ epidural analgesia
 - iii. nursing interventions for the client receiving PCA/ epidural analgesia