New Course Proposal Checklist

Submission Date: 10-29-21 Department: Nursing

Course Title: NUR200-Health Assessment

Prepared by: Carol Velas

Department Chair: Carol Velas

X if standards	Required Information	Questions/Comments
are met		
Х	Cover page that includes the department's endorsement	
Х	A brief rationale for proposing a new course	
Х	Course description for the catalogue	
Х	Prerequisites	
Х	Course Credit Units	
×	Modified catalog requirements showing new course placement in each major track and minor (if appropriate)	
Х	Syllabus that follows the guidelines for syllabus preparation	
Х	Course Learning Outcomes (CLOs) aligned with the departmental PLOs and listed in a syllabus	
	Frequency of offering: Check the appropriate box:	
	- every semester	
	- once a year (F or S)	
	- once every other year	
	- Mayterm only	
X	- other (specify) Each Fall and Spring Semester	
	Resources application: Check the appropriate box:	
Х	- staffing requirements (adjunct)	
Х	- IT resources	
	 other resources such as equipment, space, lab resources 	
	Attached Letter /Email from Provost if resources are required	
	Library resources : Attached Letter/Email from the Library Director or Associate Library Director if resources are required	
NUR200	Requested Course number: Final determination by the Registrar upon consultation with the Department Chair	

Department Chair (signature)	Date
Carol a. Jelan	10/26/21



WESTMONT

To: Academic Senate

From: Department of Nursing-ABSN Program

Subject: Proposal for new course

Date: October 25, 2021

The Accelerated Bachelor of Science in Nursing program is a new program at Westmont College. This is a second bachelor degree program with an accelerated prelicensure nursing curriculum. The program is 4 semesters of 16 weeks each. Nursing courses include concurrent theory and clinical courses.

New course

NUR200- Health Assessment is a 3-unit course with 2 units of theory and 1 unit of lab placed in the first semester. This is a course in a series of prelicensure nursing courses to prepare the nursing student for the safe, patient-centered and family-supported, compassionate care in a variety of healthcare settings.

We are proposing this course so students will have the knowledge and experience of the health history and head to toe assessment as they continue through the nursing courses. The course will begin with the importance of building trust with the patient and the privilege nurses have to protect their patient's privacy. Students will learn and practice therapeutic communication and be introduced to the theory of compassionate care. The course will continue through the assessment of systems and the practice of a systematic head to toe assessment.

The attached syllabus enumerates the Course Learning Outcomes including mapping to the Program Learning Outcomes.

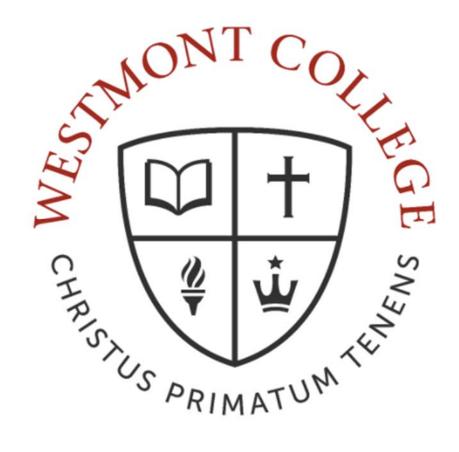
The course will be offered two times per year in the Fall and Spring. Because this is a new course and a new program it will require new staff and IT resources.

This course is part of the required curriculum for the Bachelor of Science in Nursing Program. The placement of this course in the curriculum is permanent in the first semester.

Westmont catalog course description

The Health Assessment course prepares the learner with the interviewing techniques and skills for a comprehensive biopsychosocial, cultural, religious, and physical

assessment. Using palpation, auscultation, percussion, and inspection, a wholistic approach is taken to assess the whole patient.



NUR200 Health Assessment 2022

NUR200 Health Assessment

3 units (Theory=2units, clinical=1unit)

Pre-requisites: Acceptance into ABSN program **Placement in curriculum:** Prelicensure requirement

Time: Wednesdays 9:00-12:00

Room: Classroom 1

Course Faculty: Lesley Gardia, MSN, rn

Faculty office: TBD Faculty email: TBD Faculty phone: TBD

Faculty office hours: TBD

I. Important Information

This is a course in a series of prelicensure nursing courses to prepare the nursing student for the safe, patient-centered and family-supported, compassionate care in a variety of healthcare settings. The best way to be prepared for your lecture and clinical experience is to maintain a healthy mental, physical, and spiritual life. Come to class after a good night's sleep, eat nutritious food, and stay current with reading assignments. For your clinical experience, come with excitement and understand you will continue to learn in the clinical setting and apply the concepts and skills you are learning in class. To help with your success in this course and program, it is not suggested you work more than 20 hours per week if you have to work.

Westmont catalog course description

The Health Assessment course prepares the learner with the interviewing techniques and skills for a comprehensive biopsychosocial, cultural, religious, and physical assessment. Using palpation, auscultation, percussion, and inspection, a wholistic approach is taken to assess the whole patient.

Instructor's further description

In a very short period of time, you will build trust between yourself and your patient. Your patient will share privileged information about their medical history that others may not know. It is imperative that nurses maintain strict confidentiality to protect your patients privacy. Be sure you understand compliance of Health Insurance Portability and Accountability Act (HIPAA).

ABSN Program Mission

Prepares faithful servant leaders to provide patient-centered and family supported safe, compassionate care for diverse populations and communities across the lifespan and in all health care settings.

AACN Baccalaureate Essentials (2018)

The Commission on Collegiate Nursing Education (CCNE) is an autonomous accrediting agency, contributing to the improvement of the public's health. A specialized/professional accrediting agency, CCNE strives to promote the quality and integrity of baccalaureate and graduate nursing programs. Following are the nine baccalaureate essentials used as the framework for the current curriculum. In 2021 the Essentials were revised and will be integrated into the curriculum over the next three years.

- I Liberal Education for Baccalaureate Generalist Nursing Practice
- II Basic Organizational and Systems Leadership for Quality Care and Patient Safety
- III Scholarship for Evidence-Based Practice
- IV Information Management and Application of Patient Care Technology
- V Healthcare Policy, Finance, and Regulatory Environments
- VI Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
- VII Clinical Prevention and Population Health
- VIII Professionalism and Professional Values
- IX Baccalaureate Generalist Nursing Practice

AACN Essentials (revised 2021)

The Essentials: Core Competencies for Professional Nursing Education provides a framework for preparing individuals as members of the discipline of nursing, reflecting expectations across the trajectory of nursing education and applied experience. The *Essentials* introduce 10 domains that represent the essence of professional nursing practice and the expected competencies for each domain. The competencies accompanying each domain are designed to be applicable across four spheres of care (disease prevention/promotion of health and wellbeing, chronic disease care, regenerative or restorative care, and hospice/palliative/supportive care), across the lifespan, and with diverse patient populations.

Domains for Nursing

Domains are broad distinguishable areas of competence that, when considered in the aggregate, constitute a descriptive framework for the practice of nursing.

The Ten Domains:

Domain 1-Knowledge for Nursing Practice

Domain 2-Person-centered Care

Domain 3-Population Health

Domain 4-Scholarship for Nursing Practice

Domain 5-Quality and Safety

Domain 6-Interprofessional Partnerships

Domain 7-Systems-based Practice

Domain 8-Information and Healthcare Technology

Domain 9-Professionalism

Domain 10-Personal, Professionals, Leadership Development (The Essentials: Core Competencies for Professional Nursing Education, 2021)

Program Learning Outcomes (PLO)

- 1. Exhibit Christian character and servant leadership while providing compassionate care for a diverse population in communities across state, national, and global settings.
- 2. Evidence-based best practices, critical thinking, and clinical reasoning, inform clinical judgement for the provision of patient-centered, safe, quality care.
- 3. Create patient education plans that are culturally specific to the patient and that incorporate the family support system.
- 4. Communicate effectively with the interprofessional team to ensure a wholistic approach to patient-centered care.
- 5. Continue inquisitive learning by using the Electronic Medical Record and Informatics to meet quality metrics in a variety of healthcare and geographic settings.
- 6. Advocate for healthcare policies for the underserved, vulnerable populations to ensure equity with access to care for prevention, remedial, supportive, and rehabilitative nursing care regionally, nationally, and globally.

Course Learning Outcomes (CLO)

- 1. Describe the importance of building a trusting relationship with your patient.
- 2. Discuss the organized, systematic head to toe assessment using best practices of inspection, auscultation, percussion, and palpation.
- 3. Apply therapeutic communication skills and compassionate care during the patient's biopsychosocial, cultural, and religious interview.
- 4. Demonstrate a comprehensive head to toe assessment within 10 minutes.
- 5. Differentiate a normal from abnormal physical assessment.

PLO and CLO Alignment Table

Program Learning Outcomes	Course Learning Outcomes
1. Exhibit Christian character and servant	Describe the importance of building a
leadership while providing compassionate	trusting relationship with your patient.
care for a diverse population in	3. Apply therapeutic communication skills
communities across state, national, and	and compassionate care during the
global settings.	patient's biopsychosocial, cultural, and
	religious interview.
2. Evidence-based best practices, critical	2. Discuss the organized, systematic
thinking, and clinical reasoning, inform	head to toe assessment using best
clinical judgement for the provision of	practices of inspection, auscultation,
patient-centered, safe, quality care.	percussion, and palpation.
	4. Demonstrate a comprehensive head to
	toe assessment within 10 minutes.
	5. Differentiate a normal from abnormal
	physical assessment.

3. Create patient education plans that are culturally specific to the patient and that incorporate the family support system.	N/A
4. Communicate effectively with the interprofessional team to ensure a wholistic approach to patient-centered care.	N/A
5. Continue inquisitive learning by using the Electronic Medical Record and Informatics to meet quality metrics in a variety of healthcare and geographic settings.	N/A
6. Advocate for healthcare policies for the underserved, vulnerable populations to ensure equity with access to care for prevention, remedial, supportive, and rehabilitative nursing care regionally, nationally, and globally.	N/A

Required Textbooks

Title	Author	Publisher	ISBN#
Essential Health	Janice Thompson	F. A. Davis	9-780803627888
Assessment		2018	
Fundamentals of	Patricia A. Potter &	Elsevier	9-780323677721
Nursing, (10 th ed.)	Anne G. Perry		
Gerontologic	Sue E. Meiner &	Elsevier	9-780323498111
Nursing (6 th ed.)	Jennifer J. Yeager		
Clinical Nursing	Perry & Potter	Elsevier	9-780323400695
Skills & Techniques			
Clinical Nursing	Perry & Potter	Elsevier	9-780323182387
Skills & Techniques			
(Skills Checklists)			
Nursing Diagnosis t	textbook of your choice	e (can be a bundled ap	pplication on smart
phone)			
Nursing Drug textbo	ook of your choice (can	be a bundled applicat	tion on smart phone)
Publication Manual	American	American	978-143383216
of the American	Psychological	Psychological	
Psychological	Association	Association	
Association (7 th ed.)			

Suggested Resources

- 1. Articles
- 2. Position Papers

- **3.** Healthcare Policies
- **4.** Westmont College Library and online databases (EBSCO, ProQuest, ERIC, CINALH)

Assessment of CLOs (Assignments, quizzes, exams)

The assessments used in this course to measure your learning and meeting the content objectives and course learning outcomes will include class participation, quizzes, exams using NCLEX style questions, and a signature assessment (comprehensive assessment or exam).

Course Learning Outcomes	Instructional activity	Assessment
1. Describe the importance of	Lecture, class	Quiz, comprehensive
building a trusting relationship	discussion, shared	exam, individual and group
with your patient.	experiences, simulation	presentations
2. Discuss the organized,	Lecture, class	Competency evaluation in
systematic head to toe	discussion, skills lab	skills or simulation lab
assessment using best	and simulation	
practices of inspection,		
auscultation, percussion, and		
palpation.		
3. Apply therapeutic	Lecture, class	Quiz, comprehensive
communication skills and	discussion, shared	exam, competency evaluation in skills or
compassionate care during the	experiences,	simulation lab.
patient's biopsychosocial, cultural, and religious	scaffolding case studies, simulation	Simulation lab.
interview.	Studies, simulation	
4. Demonstrate a	Practice in the skills lab	Competency evaluation in
comprehensive head to toe	on lab partner	skills or simulation lab.
assessment within 10 minutes.	on lab partilei	Skills of Sillidiation lab.
5. Differentiate a normal from	Lecture, class	Written assignment
abnormal physical	discussion, shared	
assessment.	experiences,	
	scaffolding case	
	studies, simulation	

Class participation = P/NC
Weekly quizzes 8 x 10pts each = 80pts
Exams 2 x 100pts each = 200pts
Cultural Diversity paper = 100pts
Comprehensive Final Exam = 100pts

Total = 480pts

II. Course Policies

^{*}Student must have 75% in course and lab to progress

Grading

Grade points per unit of credit are assigned on the following scale:

A 4 grade points

A- 3.7 grade points

B+ 3.3 grade points

B 3.0 grade points

B- 2.7 grade points

C+ 2.3 grade points

C 2.0 grade points

C- 1.7 grade points

D+ 1.3 grade points

D 1.0 grade points

D- 0.7 grade points

P (At least D-) No grade points assigned. Not computed in the grade point average.

F 0 grade points

NC (F) No grade points assigned. Not computed in the grade point average. W No grade points assigned. Not computed in grade point average.

WF No grade points assigned. Not computed in grade point average.

WP No grade points assigned. Not computed in grade point average.

WX No grade points assigned. Not computed in grade point average.

Westmont does not compute the units and grades students earned at other colleges in its grade average. (Exception: Courses and grades taken as part of a Westmont off-campus program are posted on the Westmont transcript and will be calculated in the Westmont GPA.)

Apart from the exceptions identified below, all courses at Westmont are graded using a letter scale (A, B, C, D, F).

Instructor Initiated Exceptions:

- For pedagogical reasons, an instructor may elect to use P/NC grade reporting in any class not approved for GE credit. It is assumed that the same gradereporting
 - system will be applied to the entire class.
- 2. With the approval of the General Education Committee, P/NC grade reporting may be used in appropriate, GE-approved courses.
- 3. When P/NC grade reporting is used, the syllabus must reflect this fact. In addition, departments are encouraged to include a notice in the catalog that the course may use P/NC grading.

Office of Disability Services

Students who have been diagnosed with a disability are strongly encouraged to contact the Office of Disability Services as early as possible to discuss appropriate accommodations for this course. Formal accommodations will only be granted for students whose disabilities have been verified by the Office of Disability Services. These accommodations may be necessary to ensure your equal access to this course.

Please contact Sheri Noble, Director of Disability Services. (310A Voskuyl Library, 565-6186, snoble@westmont.edu) or visit the website for more information: http://www.westmont.edu/offices/disability

Dress Code

Comfortable, non-binding clothing

Academic Integrity

When students join our college community, they are expected, as apprentice scholars, to search for truth with integrity and accuracy. This quest requires humility about our abilities, respect for the ideas of others, and originality in our thinking. Since Westmont is a Christian community, the integrity of our scholarship is rooted in the integrity of our faith. We seek to be followers of Christ in the classroom, in the library, and at the privacy of our computers. Violations of academic integrity are a serious breach of trust within the Westmont community because they violate the regard for truth essential to genuine learning and Christian consistency. Such deception also hurts those students who do their work with integrity. Violations of Academic Integrity may consist of cheating (the use of unauthorized sources of information on an examination or other assignment), falsification (misrepresentation of facts in any academic project or obligation) or plagiarism (the use of someone else's words or ideas without giving proper credit). Faculty and students should operate in an environment of mutual trust and respect. Faculty will expect students to act in ways consistent with academic integrity. However, for both scholarly and spiritual reasons, cheating, falsification, plagiarism and all other violations of academic integrity will not be tolerated in the Westmont community. Please familiarize yourself with the entire Westmont College Academic Integrity Policy. This document defines different violations of academic integrity and their consequences. It also contains very helpful information on strategies to recognize violations of academic integrity before they occur. Dishonesty in the clinical setting, will not be tolerated and students will be removed followed by program suspension or termination.

Technology in the Classroom

Laptops, tablets, and smart phones can be used in the classroom with the permission of the faculty. The use of smart phones in the clinical setting will depend on each clinical setting's rules. Smart phones in the clinical setting can be used for clinical related resources (drug book, Tabers, calculation, etc). Recording lectures is also at the discretion of the faulty and permission must be granted.

Emergencies

In the event that an emergency occurs during instruction, it is important to be familiar with the practices in place for the classroom. Please review the document at https://integready.app.box.com/AnticipatingInClass and direct any questions or concerns to the Office of Institutional Resilience.

III. Weekly course schedule

1. Essentials of Health Assessment (Thompson)

- 2. Fundamentals of Nursing Practice (P&P)
- 3. Gerontologic Nursing (Meiner)4. Clinical Nursing Skills & Techniques (Potter)

*Subject to change at any time, you will be notified of any changes

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Week	Content	Reading	Activities and assignments	Outcome	
	Objectives			Measurement	
1	Orientation to class/lab	Thompson Ch. 1-3	Lecture, class discussion	N/A	
	Understanding the Health Assessment,	P&P: Ch. 16 & 30	Online activity: Have students visit www.healthypeople.gov, explore the website. Click on "How Healthy People 2030 has changed" Why do		
	Interviewing, and taking health history	Meiner: Ch. 1	you think this change was important to make?		
	1. Discuss healthcare reform in		Discussion Topic: What are the two steps in nursing assessment?		
	the U.S. today. 2. Explore the US Dept. of Health and Human Services		Group activity: Pair with a partner and practice phase one of the interview process.		
	Healthy People 2020 initiative. 3. Identify the five steps of the Nursing Process.		Activity: Provide students with a list of mixed subjective and objective data and have students sort them into columns by type. Discuss their answers as a group.		
	4. Describe the components and barriers of therapeutic communication. 5. Discuss the purpose of a physical		Lab: Small Group Activity: Divide students into small groups to practice communication and observational skills on each other. Discuss any techniques the students had problems performing.		
	assessment. 6. Discuss how cultural diversity influences a nurse's approach to and				
	findings from a health assessment. 7. List techniques for preparing a patient physically and				
	psychologically before and during an examination. 8. Identify the unique needs of patients				

	who are bearing			
	who are hearing, and visually impaired			
	or aphasiac.			
	Practice phase			
	one of the interview			
	process with a			
	partner.			
	10. Differentiate			
	between subjective			
	and objective data.			
	11. Discuss the			
	components of the			
	health assessment			
	by describing three			
	types of nursing			
	assessment.			
	12. Identify the			
	importance of the			
	biopsychosocial,			
	religious, and			
	cultural history. 13. Explain how to			
	maintain			
	professionalism			
	during history taking.			
2	Assessing	Thompson:	Discussion Topic: How do	Quiz 1 on
_	nutrition,	Ch. 4 and	decreasing calorie needs in older	Week 1
	anthropometric	24	adults make getting nutrients more	content
	measurements,		difficult? What impact does culture	
	and assessing the	Potter: Ch.	have on food intake?	
	older adult	31		
	Define nutrition		Large Group Activity: As a class,	
	including		order take-out or delivered food for a	
	overnutrition and		meal from an establishment that has	
	malnutrition.		published nutrient values available—	
	2. Explore the		•	
			without looking at the values and	
	diagnostics used to		without fooking at the values and without telling the students the plan.	
	identify nutritional		without telling the students the plan. As you and the students are eating,	
	identify nutritional status.		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they	
	identify nutritional status. 3. Discuss cultural		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly	
	identify nutritional status. 3. Discuss cultural considerations for a		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment.		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and body mass index of		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the nutrient values so all can see what	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and body mass index of an elderly patient to		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and body mass index of an elderly patient to assess nutritional		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the nutrient values so all can see what	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and body mass index of an elderly patient to assess nutritional status. 5. Evaluate the social and		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the nutrient values so all can see what	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and body mass index of an elderly patient to assess nutritional status. 5. Evaluate the		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the nutrient values so all can see what	
	identify nutritional status. 3. Discuss cultural considerations for a nutritional assessment. 4. Compute the height, weight, and body mass index of an elderly patient to assess nutritional status. 5. Evaluate the social and		without telling the students the plan. As you and the students are eating, discuss the amounts of nutrients they think they are ingesting (possibly focusing on macronutrients or on one vitamin or mineral, such as calcium or iron) and have them make notes about what foods they ate and what nutrients they think the foods contained. After the meal, access the nutrient values so all can see what	

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3	Assessment	Thompson:	Discussion Topic: What are the	Quiz 2 on
	techniques and	Ch. 5, 6 &	pros and cons of different sites to	Week 2
	vital signs	7	measure body temperature?	content
		P&P: Ch.		
	1. Discuss the rights	29 & 30	Online Activity: Have students	
	of the patient to have		research the physiologic mechanisms	
	informed consent for	Potter: Ch.	of fever to answer the following	
	treatment including	6	questions: What is the most common	
	assessment.	Skill 6.1	cause? How is it best prevented in a	
	2. Identify the steps		healthcare environment? When is a	
	of proper hand		fever dangerous and why?	
	hygiene and use of			
	Personal Protective		10 minute Small Group Activity:	
	Equipment (PPE).		Have students answer these	
	3. Explain the		questions: Why is pain considered to	
	principles and		be a vital sign? What effect does pain	
	mechanisms of		have on other vital signs?	
	thermoregulation.			
	4. Describe factors		Discussion Topic: What are four	
	that cause variations		characteristics of the pulse, and what	
	in body temperature,		do they signify? (Discuss, rate,	
	pulse, oxygen		rhythm, strength, and equality.)	
	saturation,			
	respirations,		Small group activity: Divide	
	capnography, and	Thompson:	students into groups with diverse	
	blood pressure	Ch. 2 pg.	students. Ask each student to share	
	measurement.	15-16	their values and traditions and how	
	5. Accurately record		they would like to include these in	
	and report vital sign		their care if hospitalized.	
	measurements.		Loh	
	6. Discuss how		Lab:	
	cultural diversity influences a nurse's		Small Group Activity : Divide students into small groups to practice	
	approach to and		maintaining a quiet, formal demeanor	
	findings from a		intended to make patients more	
	health assessment.		comfortable. Students should	
	7. List techniques		introduce themselves and explain the	
	for preparing a		examination process for your	
	patient physically and psychologically		preferred scenario while maintaining appropriate body language, eye	
	before and during an		contact, tone of voice, and	
	examination.		professional demeanor. Students	
	8. Identify data to		who are not participating should	
	collect from the		critique those who are.	
	nursing history		4 ·····e eve.	
	before an			
	examination.			
	9. Discuss how			
	cultural diversity			
	influences a nurse's			
	approach to and			
	findings from a			
	health assessment.			
	10. Discuss			
	developmental			
	considerations.			
L	111014014101101			

	Review			
	communication			
	techniques for			
	different age groups.			
4	Assessing the	Thompson:	Discussion Topic:	Cultural
-	head, neck, and	Ch. 8, 9,	Have students list places where	Diversity Paper
	Integumentary	10, 11	nurses gather assessment data.	
	System	,	(Discuss acute and restorative	
	1. Identify the	Potter: Ch.	locations, health fairs, etc.)	
	purpose of the	6 Skill 6.2	,	
	physical		Activity: Demonstrate how to	
	examination.		perform inspection, palpation,	
	2. List techniques for		percussion and auscultation.	
	preparing a patient		'	
	physically and		Discussion Topics: What	
	psychologically		information can be gained by	
	before and during an		inspection? What information can be	
	examination.		gained by olfaction? Why is	
	3. Demonstrate the		palpation usually performed by	
	techniques used with		advanced practice nurses rather	
	each physical		than by nurses in daily practice at	
	assessment skill.		the bedside?	
	4. Identify normal			
	physical findings in a		Lab: Demonstration of skill, practice,	
	young, middle-age,		return demonstration.	
	and older adult.			
	5. Identify self and			
	preventive			
	screenings and the			
	appropriate age(s)			
	for each screening to			
	occur.			
5	Assessing the	Thompson:	Discussion Topic: What change in	Exam 1 (weeks
	Respiratory	Ch. 12	physiology for each body system	1-4)
	System		occur with aging that affect normal	
	1. Define the	Potter:	physical findings?	
	purpose of the	Ch.6		
	physical	Skill 6.3	Activity: Play a recording of normal	
	examination.		breath sounds and abnormal breath	
	2. Explain		sounds to give students a basis of	
	techniques for		comparison for when they listen.	
	preparing a patient		Describe the origin of each sound.	
	physically and		Online Astinitus Herry strategic 12	
	psychologically		Online Activity: Have students visit	
	before and during an		the American Cancer Society	
	examination.		website (www.cancer.org), review	
	3. Demonstrate the		information about prevention of skin	
	techniques used with		cancer, and report at least five ways to reduce risk.	
	each physical		to reduce risk.	
	assessment skill.		Lab. Domonatration of abill practice	
	4. Discuss normal		Lab: Demonstration of skill, practice, return demonstration.	
	physical findings in a		return demonstration.	
	young, middle-age,			
	and older adult. 5. Discuss self and			
	preventive			

_	T			T
	screenings and the			
	appropriate age(s)			
	for each screening to			
	occur.			
6	Assessing the Cardiovascular	Thompson Ch. 13 &	Discussion Topic: Why is it important to be culturally aware and	Quiz 3 on Weeks 4 & 5
	System and the peripheral vascular and lymphatic system 1. Complete the physical examination including all prior assessments. 2. Practice techniques for preparing a patient physically and psychologically before and during an examination. 3. Demonstrate the techniques used with each physical assessment skill. 4. Interpret normal	Potter: Ch. 6 Skill 6.4	avoid stereotyping when performing an examination? Activity: Play a recording of normal heart sounds and abnormal heart sounds to give students a basis of comparison for when they listen. Describe the origin of each sound. Lab: Demonstration of skill, practice, return demonstration.	content
	physical findings in a young, middle-age, and older adult. 5. Explain self and preventive screenings and the appropriate age(s) for each screening to occur.			
7	Assessing the Abdomen, Anus, and Rectum 1. Analyze the need for the physical examination. 2. Categorize techniques for preparing a patient physically and psychologically for an examination to practice time management. 3. Demonstrate the techniques used with each physical assessment skill. 4. Analyze normal physical findings in a	Thompson Ch. 14, 20 Potter: Ch. 6 Skill 6.5, Skill 6.6	Discussion Topic: What are some ways to make the patient less embarrassed and apprehensive about an examination? What should you do if a patient seems uncomfortable or tired during an examination? Discuss the importance of understanding the bowel pattern of each patient and how age, diet, and disease influence them. Lab: Demonstration of skill, practice, return demonstration.	Quiz 4 on Week 6 content

	1	T		<u> </u>
	young, middle-age, and older adult.			
	5. Question self and			
	preventive			
	screenings and the			
	appropriate age(s)			
	for each screening to			
	occur.			
8	Assessing the	Thompson	Discussion Topic: What systems	Quiz 5 on
	Musculoskeletal	Ch. 16	that can be observed during routine	Week 7
	System		nursing care?	content
	1. Create a	Potter:		
	systematic physical	Ch.6	Online Activity: Have students	
	assessment of all	Skill 6.7	calculate body mass index on the	
	systems learned		NIH scale and then try various	
	thus far.		heights and weights and report their	
	2. Compose		findings:	
	techniques for a examination to		http://www.nhlbi.nih.gov/health/educational/lose wt/BMI/bmicalc.htm.	
	ensure a systematic		educational/lose_wt/bivii/binicalc.ntm.	
	and timely exam.		Lab: Demonstration of skill, practice,	
	3. Demonstrate the		return demonstration.	
	techniques used with		Totalli dollioliolioliolioli	
	each physical			
	assessment skill.			
	4. Evaluate normal			
	physical findings in a			
	young, middle-age,			
	and older adult.			
	5. Evaluate self and			
	preventive			
	screenings and the			
	appropriate age(s) for each screening to			
	occur.			
9	Assessing the	Thompson	Discussion Topic : How does a	Exam 2 (weeks
	Neurological	Ch. 17, 21	family history of cancer change the	5-8)
	System and the	, , , , , ,	screening schedule?	3 3/
	newborn	Potter: Ch.	3	
	1. Compare the	6	Lab: Demonstration of skill, practice,	
	neurological physical	Skill 6.7	return demonstration.	
	assessment of an			
	adult to the newborn.			
	2. Appraise the			
	assessment of the			
	neurological system			
	in the adult and the			
	presence of reflexes in the newborn.			
	3. Demonstrate the			
	techniques used with			
	each physical			
	assessment skill.			
	4. Evaluate normal			
	physical findings in a			
	newborn, young,			

middle-age, and older adult. 5. Evaluate self and	
5. Evaluate self and	
preventive	
screenings and the	
appropriate age(s)	
for each screening to	
occur.	
10 Assessing the Thompson Health Promotion Discussion: Quiz	z 6 on
	ek 8 & 9
breasts and 23 Society's recommendations for cont	
reproductive breast cancer screening? Have	
systems and the students explore the cancer.org	
pregnant women website to learn more about the	
1. Introduce the important of mammograms for men	
importance of patient and women.	
education into the	
physical Lab: Demonstration of skill, practice,	
assessment. return demonstration.	
2. Design techniques	
before and during a	
physical and	
psychological exam	
to ensure patient	
privacy and comfort.	
3. Demonstrate the	
techniques used with	
each physical	
assessment skill.	
4. Evaluate normal	
physical findings in a	
young, middle-age,	
and older adult.	
5. Evaluate self and	
preventive	
screenings and the	
appropriate age(s)	
for each screening to	
occur.	
	z 7 on
	ek 10
adolescent recommended immunizations for	CN IU
physical assessment purpose of each test, how often it	
to the growth and should be performed and who to	
development of the contact to schedule it.	
child and	
adolescent. Lab: Demonstration of skill, practice,	
2. Differentiate return demonstration.	
techniques for	
preparing a patient	
physically and	
psychologically	
exam for different	
age groups.	

	3. Demonstrate the techniques used with each physical assessment skill. 4. Evaluate normal physical findings in a young, middle-age, and older adult. 5. Evaluate self and preventive screenings and the appropriate age(s) for each screening to occur.			
12	Systems review	Lab: Refine 10 minutes head to toe exam for final competency check-off.	Quiz 8 on Week 11	
13	Physical assessment evaluation	,,,,,		
14	Physical assessment evaluation			
15	Comprehensive Final Exam Weeks 1-15			
16	Course Wrap Up			

Grading Rubric Cultural Diversity (100pts)

Choose three different cultures (one can be your own). Compare and contrast each cultures values and traditions. How would you apply evidence-based, patient-centered, compassionate care to each person from the diverse cultures you have chosen?

	Levels of achievement				
Criteria	25 points	20 points	15 points	0 points	Assigned
					points
Identifies three	Comprehensive	Well written	Basic	Identifies one	/25
different ethnic	discussion	discussion of	discussion of	to three	
cultures comparing and	comparing and contrasting	three different cultures, omits	one to three cultures, omits	different cultures,	
contrasting	three different	some of the	relevant	omits values	
their values	cultures.	values and	information	and traditions.	
and traditions.		traditions when	about values		
		comparing and	and traditions.		
		contrasting			
		them.			
Defines	Provides	Describes the	Provides a	Mentions EBP	/25
evidence-	comprehensive	basics of EBP,	brief definition	but omits	
based practice	discussion of	and mentions	of EBP,	definition,	
(EBP) and how	EPB and uses	some of the	however omits	best practices	
it is used to	examples of	best practices	examples of	or connection	
meet the	EBP best	in meeting the	best practices	to the	
needs and	practices in	needs and	in meeting the	patient's	
preferences of	meeting the	preferences of	needs and	needs and	
patients of	needs and	patients of	preferences of	preferences.	

different cultures.	preferences of patients of different cultures.	different cultures.	patients of different cultures.		
Discusses the role of the registered nurse in adjusting patient-centered, compassionate care to patients from different cultures.	Provides a comprehensive discussion on the role of the registered nurse in adjusting patient-centered, compassionate care to patients from different cultures.	Discusses the role of the registered nurse, however briefly explains how the nurse would adjust patient-centered, compassionate care to patients from different cultures.	Identifies the role of the registered nurse in providing patient-centered, compassionate care but omits adjusting care.	Not enough information written to ascertain knowledge and understanding of this element.	/25
APA format (Introduction, body, conclusion, correct running head and cover page, uses headers for organization, proper grammar and spelling). Resources used: within 5 years, scholarly peer reviewed journals	APA correctly used throughout paper. Citations and references are formatted correctly, resources are within 5 years, and from peer reviewed journals.	Generally acceptable but some minor mistakes. 50% citations and references are formatted correctly, resources are within 5 years and from peer reviewed journals.	Multiple mistakes in APA format. 50% citations and references are formatted correctly, resources, however not within 5 years or from peer reviewed journals.	APA format is not used correctly or at all. Citations and references are formatted incorrectly, many resources are outdated and not from peer reviewed journals.	/25

Clinical Syllabus 45 hours

Clinical time will be spent in the Skills Lab. Please bring your Nursing Skills Bag and textbooks to each class. Please dress in clinical attire (scrubs, white shoes, hair off collar, name badge, see clinical dress code).

We will be using the skills checklists from the Potter & Perry Clinical Nursing Skills & Techniques Skills Checklist textbook.

Week	Demonstration of Skill and practice	Reading Assignment Bring Potter Skills Checklist text and Nursing Bag to Skills Lab
1 and 2	Introduction to course	
3	Demonstrate the General Survey Practice Skill 6.1 General Survey	Pg. 40-42
4	Demonstrate Skill 6.2 Head and Neck Assessment Practice Skill 6.2	Pg. 43-45
5	Demonstrate Skill 6.3 Thorax and Lung Assessment Practice Skill 6.3	Pg. 46-48
6	Demonstrate Skill 6.4 Cardiovascular Assessment Practice Skill 6.4	Pg. 49-53
7	Demonstration of Skills 6.1, 6.2, 6.3, and 6.4 as continuous assessment Practice Skills 6.1, 6.2, 6.3 and 6.4 as one assessment	Pg. 40-53

8	Demonstration of Skill 6.5 Abdominal Assessment Practice Skill 6.5	Pg. 54-56
9	Demonstrate Skills 6.1, 6.2, 6.3, 6.4 and 6.5 as a continuous assessment Practice Skills 6.3, 6.4, and 6.5 as one assessment	Pg. 40-56
10	Demonstrate Skill 6.6 Genitalia and Rectum Assessment Practice Skill 6.6	Pg. 57-59
11	Demonstrate Skill 6.7 Musculoskeletal Assessment Practice Skill 6.7	Pg. 60-63
12	Demonstrate Skill 6.7 Neurological Assessment Practice Skill 6.7	Pg. 60-63
13	Demonstrate Skills 6.6, 6.7, and 6.8 as a continuous assessment Practice Skills 6.6, 6.7, and 6.8 as one assessment	Pg. 57-63
14	Competency exam on full head to toe assessment	Sign-up for exam appointment
15	Competency exam on full head to toe assessment	Sign-up for exam appointment
16	Course wrap-up	