New Course Proposal Checklist

Submission Date: 10/29/2021

Department: Nursing

Course Title: NUR250 Pediatric Nursing

Prepared by: Carol Velas

Department Chair: Carol Velas

X if standards are met	Required Information	Questions/Comments
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	
N/A	Modified catalog requirements showing new course placement in each major track and minor (if appropriate)	
Х	Syllabus that follows the guidelines for syllabus preparation	
x	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	
Х	- other (specify) FALL AND SPRING	
	Resources application: Check the appropriate box:	
Х	 staffing requirements (adjunct) 	
х	- IT resources	
	 other resources such as equipment, space, lab resources 	
NA	Attached Letter /Email from Provost if resources are required	
NA	Library resources : Attached Letter/Email from the Library Director or Associate Library Director if resources are required	
NUR250	Requested Course number : Final determination by the Registrar upon consultation with the Department Chair	

Carvel Q. Yelas

10/29/2021

Department Chair (signature)

Date

WESTMONT



To: Academic Senate From: Department of Nursing-ABSN Program Subject: Proposal for new course Date: October 28, 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

NUR250 Pediatric Nursing is a 5-unit course with 3 units of theory and 2 unit of clinical (90hrs) placed in the second semester. This course builds upon prior knowledge of the nursing process, nurse practice act, and the theory of compassionate care.

We are proposing this course so students will have the knowledge and experience as they continue to refine the cognition for critical thinking and clinical judgement when caring for the pediatric population with a variety of childhood diseases and conditions as well as pediatric patients with chronic conditions. The clinical setting for this course will be at Santa Barbara Cottage Hospital in the pediatric and pediatric intensive care units as well as the Grotenhuis Pediatric Specialty Units.

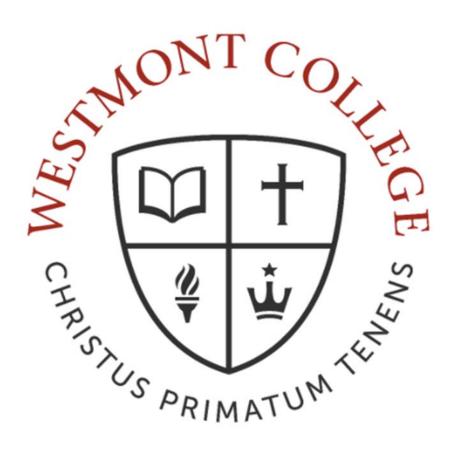
The attached syllabus enumerates the Course Learning Outcomes including mapping to the Program Learning Outcomes. Assessment Technology Institute, our supplemental instruction is integrated throughout the curriculum with notations for your understanding.

The course will be offered two times per year in varying semesters as the two cohorts of nursing students enroll. 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 sequence of this course in the curriculum is permanent in the second semester.

Westmont catalog course description

Wholistic care of the pediatric patient through the stages of growth and development and along the illness to wellness continuum is the focus of NUR250. The role of the parents during a child's hospitalization, the complex calculation of pediatric medications, play therapy, and common childhood conditions are topics that will be covered. Best practices in the care of children will be emphasized.



NUR250 Pediatric Nursing

2022

NUR250 Pediatric Nursing

Pediatric Nursing 5 units (Theory=3units, Clinical=2units) Pre-requisites: Acceptance into ABSN program Placement in curriculum: Prelicensure requirement

Time:TBD Room: TBD

Course Faculty: TBD 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 catalogue course description

Wholistic care of the pediatric patient through the stages of growth and development and along the illness to wellness continuum is the focus of NUR250. The role of the parents during a child's hospitalization, the complex calculation of pediatric medications, play therapy, and common childhood conditions are topics that will be covered. Best practices in the care of children will be emphasized.

Instructor's further description

Pediatric nursing, as you will find, is somewhat different that caring for an adult. Parents play a big part in the care of the hospitalized child including giving them their medications. This setting integrates family support from the beginning.

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)

 Exhibit Christian character and servant leadership while providing compassionate care for a diverse population in communities across state, national, and global settings.
 Evidence-based best practices, critical thinking, and clinical reasoning, inform clinical judgement for the provision of patient-centered, safe, guality 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. Identifies and discuss the stages of growth and development of the pediatric patient.

2. Practices safe, quality, compassionate care to pediatrics patients in all settings.

3. Examines the importance of the interprofessional team in the care of the pediatric patient.

4. Discusses the importance of play therapy during hospitalization.

5. Creates a teaching plan for the patient and family diagnosed with a new, chronic illness. Include valid internet and community resources and verify continued access to healthcare.

6. Defends the importance of advocating for healthcare for all children.

7. Designs a regimen of safe medication administration for the pediatric patient with accurate calculation and proper technique of administration.

8. Explains the role of the parent during the hospitalization of children.

9. Practices hourly rounding and demonstrates accurate documentation.

10.Uses critical thinking and clinical reasoning to inform judgement in updating and changing the plan of care.

PLO and CLO Alignment Table

Program Learning Outcomes	Course Learning Outcomes
1. Exhibit Christian character and servant leadership while providing compassionate care for a diverse population in communities across state, national, and global settings.	2. Practice safe, quality, compassionate care to pediatrics patients in all settings.
2. Evidence-based best practices, critical thinking, and clinical reasoning, inform	 Identify and discuss the stages of growth and development of the pediatric patient.

clinical judgement for the provision of patient-centered, safe, quality care.	 4. Design a regimen of safe medication administration for the pediatric patient with accurate calculation and proper technique of administration. 7. Designs a regimen of safe medication administration for the pediatric patient with accurate calculation and proper technique of administration. 10.Uses critical thinking and clinical reasoning to inform judgement in updating and changing the plan of care.
3. Create patient education plans that are culturally specific to the patient and that incorporate the family support system.	5. Create a teaching plan for the patient and family diagnosed with a new, chronic illness. Include valid internet and community resources and verify continue access to healthcare.
4. Communicate effectively with the interprofessional team to ensure a wholistic approach to patient-centered care.	3. Examine the importance of the interprofessional team in the care of the pediatric patient.
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.	6. Defends the importance of advocating for healthcare for all children.

Required Textbooks

Title	Author	Publisher	ISBN#
Essentials of	Wong	Elsevier	978-0323353168
Pediatric Nursing	-		
(10 th ed.)			
Nursing Diagnosis	textbook of your choic	e (can be a bundled a	oplication on smart
phone)			
Nursing Drug textbo	ook of your choice (car	n be a bundled applica	tion on smart phone)
Publication Manual	American	American	978-143383216
of the American	Psychological	Psychological	
Psychological	Association	Association	
Association (7 th ed.)			

Supplemental Resources

ATI Supreme Essentials provides the visual and auditory learners with skill vignettes, review modules, online tutorials, dosage calculation and safe medication practice, computer adaptive NextGen and current NCLEX test item types, civility tutorials, and ATI Pulse (analytics engine that predicts students probability of passing the NCLEX). ATI also provides a host of practice and proctored NCLEX style exams as well as a Predictor exam to prepare for the NCLEX. ATI tools will be fully integrated into each nursing course.

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). If student earns <85% on any course exam, student must build a 20-question quiz using ATI's Learning System quiz bank on missed content as remediation for course exam. This quiz will be due on next class day.

Course Learning Outcomes	Instructional activity	Assessment
 Identifies and discuss the stages of growth and development of the pediatric patient. Practices safe, quality, compassionate care to pediatrics patients in all settings. Examines the importance of the interprofessional team in the care of the pediatric patient. Discusses the importance of play therapy during hospitalization. Creates a teaching plan for the patient and family diagnosed with a new, chronic illness. Include valid internet and community resources and 	Lecture, class discussion, shared experiences, and scaffolding case studies	Assignments, quizzes, exams, individual and group presentations, and signature assignment

 verify continued access to healthcare. 6. Defends the importance of advocating for healthcare for all children. 8. Explains the role of the parent during the hospitalization of children. 9. Practices hourly rounding and demonstrates accurate documentation. 7. Designs a regimen of safe 	Skills lab, simulation	Assignments, quizzes,
medication administration for the pediatric patient with accurate calculation and proper technique of administration.		exams, individual and group presentations, and signature assignment

Class participation = P/NC Weekly quizzes 6 x 10pts each = 60pts Exams 4 x 100pts each = 400pts Final exam is comprehensive Pediatric Case Study 1 x 50pts = 50pts <u>Chronic Illness Paper 1 x 100pts = 100pts</u> Total = 610pts

*Student must have 75% in theory and "Pass" in clinical to progress

II. Course Policies

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+ 2.3 grade points C- 1.7 grade points D+ 1.3 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 offcampus 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:

1. 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 grade-reporting

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: <u>http://www.westmont.edu/_offices/disability</u>

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

Textbook:

1. Psychology for Nursing & Heathcare Professionals (Barker)

2. Wong (W)

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

Week	Content Objectives	Reading	Activities and	Outcome
week	Content Objectives	Reading		
			assignments	Measurement
1, 2, 3	Children, Families, the	Units 1 and 8	Discussion Topic:	
	Nurse and the hospitalized patient	Deropting styles	Discuss the most	
	1. Identify two ways that	Parenting styles	common causes of death and injury	
	knowledge of mortality and	Role learning	during childhood.	
	morbidity can improve child	Role learning	during crindriood.	
	health.	Adoption	Group discussion:	
	2. List three major causes		Discuss	
	of death during infancy,	Divorce	environmental	
	early childhood, later		factors in the hospital	
	childhood, and	Poverty	and clinic that can	
	adolescence.		affect the safety of	
	3. Demonstrate an	Cultural and	the pediatric patient.	
	understanding of special	religious beliefs		
	parenting situations, such	O L (Skills Lab: Review	
	as adoption, divorce, single	Stages of	the different types	
	parenting, parenting in	development	and sizes of feeding	
	reconstituted families, and dual-earner families.	Cognitive	tubes.	
	4. Identify the impact	development	ATI	
	socioeconomic influences	development	Students complete	
	have on health.	ATI	the Active Learning	
	5. Describe the role and	Review	Templates: Growth	
	functions of play in the	Modules/eBook:	and Development for	
	growth and development of	Nursing Care of	each developmental	
	children, focusing on	Children chapters	stage	
	content and social	4-7	(customize/highlight	
	character patterns.	_	Course Objectives	
	6. Demonstrate an	Dosage	on the ALT).	
	understanding of the role of	Calculation and		
	genetic factors that influence the physical and	Safe Medication Administration:	Video Case Studies: Growth	
	emotional development of	Module: Pediatric	and Development	
	children.	Medications		
	7. Identify the stressors of	Wedlouiono		
	illness and hospitalization for			
	children during each			
	developmental stage.			
	8. List essential priorities of			
	nursing care upon a child's			
	admission to the hospital.			
	9. Review nursing			
	interventions that prevent			
	or minimize the stress of			
	separation during hospitalization.			
	10. Formulate general			
	guidelines for preparing			
	children for procedures,			
	including surgery.			
	11. Implement play in			
	therapeutic procedures.			

4, 5	 12. List general strategies for enhancing compliance in children and families. 13. Outline general hygiene and care procedures for hospitalized children. 14. Describe safe methods of administering oral, parenteral, rectal, optic, otic, and nasal medications to children. 15. Practice best practices in the assessment, patient- centered, compassionate care, and documentation of hospitalized patients. 16. Analyze lab and other diagnostic results to ensure medications are safe to administer. 17. Practice critical thinking and clinical reasoning to inform clinical judgement in the compassionate care of hospitalized children. Assessment of the Child and Family Identify communication strategies for interviewing parents. Recognize communication strategies for communication strategies for communication strategies for communication strategies for communication strategies for communication strategies for children age groups. Perform a comprehensive physical examination in a sequence appropriate to the child's age. Evaluate expected normal findings for children at various ages. Discuss various types of p assessment tools for use witt children. Construct essential pain management strategies to reduce pain in children. Discuss the identification, medical and nursing care of communicable diseases in 	Unit 2 ATI Skills Module: Comprehensive Physical Assessment of a Child Heart murmurs Inguinal hernia Wong-Baker FACES Chronic illness	Class discussion: Discuss the occurrence of common birth injuries and their major characteristics. Small group activity: Ask students to list five prerequisites for establishing the interview setting and give evidence for how each prerequisite fosters communication. Be ready to ATI Dosage Calc Case Study: Pediatric Ear Infection/Dehydration	Quiz/Exam
	reduce pain in children.			
	identification, medical and nursing care of	·	Pediatric Éar	
	children of varying ages. 8. Analyze lab and other	Conjunctivitis		
	diagnostic results to ensure	Pinworms		

		Viral bootarial		
		Viral, bacterial,		
		and viral infections		
		Lice		
6, 7	Family-centered care of the		Class discussion:	Quiz/Exam
0, 1	infant and young child	Units 4 and 5	Pro's and cons of	Quiz/Exam
	1. Identify the major biologic,	ATI	immunizations	
	psychosocial, cognitive, and	eBooks: Review	Infinitions	
	social developments during t	Nursing Care of	Class discussion:	
	first year of life.	Children Chapters	Activity: Have	
	2. Identify the cognitive stage	3-4 <i>Health</i>	students design a	
	the child is at.	Promotion of	teaching plan for	
	3. Relate parent–child	Infants and Health	parents regarding	
	attachment, separation anxie		injury prevention	
	and stranger fear to	Toddlers;	during infancy.	
	developmental achievements		Assign students to	
	during infancy.	Nursing Chapter 7	make an injury-proof	
	4. Provide anticipatory	Nutrition Across	home for an infant.	
	guidance to parents regarding	the Lifespan		
	common parental concerns	,	ΑΤΙ	
	during infancy.	Fine and Gross	Have students add	
	5. Create feeding	motor	Immunizations to	
	recommendations for	development	Growth and	
	infants.	-	Development ALTs.	
	6. Discuss immunization	Attachment	Have students look	
	requirements during		for compelling data	
	infancy.	Separation	from professional	
	7. Analyze general	Anxiety	literature to share	
	contraindications,		with those parents	
	precautions, and	Weaning	who are against	
	administration routes for	o	vaccinations. (SLO	
	childhood immunizations.	Sudden infant	6)	
	8. Analyze the nutrition	death	Deserve	
	needs of infants through	Dianar darmatitia	Dosage	
	their first year of life.	Diaper dermatitis	Calculations and Safe Medication	
	9. Create a teaching plan for patients to ensure safe	Eczema	Administration	
	sleeping habits for the	Eczenia	Case Study:	
	infant.	Failure to Thrive	Pediatric	
	10. Practice safe, patient		Dehydration and Ear	
	and family-centered	Kwashiorkor	Infection—Have	
	compassionate care to		students complete	
	infants with conditions and	Marasmus	ALTs for Medications	
	illness specific to this age		in chart and discuss.	
	group.		Then have students	
	11. Discuss the major		develop teaching	
	biologic, psychosocial,		plan for mother when	
	cognitive, and social		giving these new	
	developments during the		medications. (SLO	
	toddler years.		18)	
	12. Teach parents how to			
	manage temper tantrums,		Skills Modules:	
	separation anxiety,		Comprehensive	
	recognizing readiness for		Physical Assessment	
	toilet training, and		of a Child> Activities:	

	nutritional		Practice Challenge 2	
	recommendations.		and 3	
	Discuss the most			
	common injuries in the			
	preschool age child			
	drowning, burns,			
	poisoning, aspiration,			
	choking).			
	14. Create a safe			
	environment for			
	hospitalized patients of			
	different ages and stages			
	of development.			
	•			
	15. Identify and discuss			
	medical and nursing			
	management of conditions			
	and illnesses experience in			
	young children.			
	16. Analyze lab and other			
	diagnostic results to ensure			
	medications are safe to			
	administer.			
	17. Practice critical thinking			
	and clinical reasoning to			
	inform clinical judgement in			
	the compassionate care of			
	infants and young children.			
	18. Discuss the			
	pharmacological			
	management of conditions			
	in newborns and infants			
	including the nurse's role of			
	patient/parent education for			
	drug action, side effects,			
	contraindications, and			
	adverse effects.			
8, 9,	Family-centered Care of	Units 6 and 7	Class activity:	Quiz/Exam
10	the school-age child,		Invite a school nurse	
	adolescent, and child	ATI: Review	to speak to the class	Week 9 Learning
	with special needs	eBook Nursing	regarding her/his role	System Standard
	1. Identify the stage of	Care of Children	in the school district,	Quiz: Nursing
	growth and development of	Chapter 6 <i>Health</i>	common conditions	Care of Children I
	the school-age child.	Promotion of	seen, suicide	
	2. Describe the physical,	School-Age	prevention, drug	Week 10 ATI
	cognitive, and moral	Children	use/abuse, and sex	CMS Nursing
	changes that take place	Grindron	education.	Care of Children
	during the middle childhood	Cognitive,		Practice A with
	years.	psychosocial,	Small group	Focused Review
	3. Discuss common injuries	moral, and	activity: Discuss	+ Post Study
		spiritual	characteristics of	Quiz
	in this age group.	development	bullies and their	QUIZ
	4. Practice safe, patient-	development		
	centered compassionate	Podyimage	victims and possible	
	care for conditions and illnesses children in this	Body image	strategies to prevent	
		Pullving	bullying behavior.	
	range experience.	Bullying	Share your	
			perspective in class.	

5. Describe the physical	Nutrition, rest,		
changes that occur at	activity	ATI Dosage	
puberty.		Calculations and	
6. Discuss the changing	Sexual maturation	Safe Medication	
nutrition needs of the		Administration Case	
adolescent child.	Depression,	Study: Pediatric	
7. Practice listening skills	suicide	Asthma. Have	
when interviewing patients.		students complete	
8. Identify the cognitive	Drugs, smoking	ALTs for Medications	
stage the patient is at.	2	and discuss.	
9. Demonstrate an	Encopresis		
understanding of common			
disorders of the male and	ADHD		
female reproductive systems			
10. Analyze the manifestation			
and nursing management of	schizophrenia		
selected emotional or			
behavioral problems.	Acne		
11. Create a trusting			
environment where safe,	Eating disorders		
quality, patient-centered,	U U		
compassionate care for	Obesity		
conditions and illnesses	C & C C L J		
experienced by adolescents.	Reproductive		
12. Discuss the	disorders		
	013010613		
pharmacological management of conditions in			
School-age children including			
the nurse's role in			
patient/parent education for			
drug action, side effects,			
contraindications, and advers			
effects.			
13. Analyze lab and other			
diagnostic results to ensure			
medications are safe to			
administer.			
14. Practice critical thinking			
and clinical reasoning to			
inform clinical judgement in			
the compassionate care of			
school-age, adolescent,			
and children with special			
needs.			
11,12 Respiratory,		Discussion Topic: Co	Quiz/Exam
Gastrointestinal, and	Units 9 and 10	and	
cardiovascular		contrast the major ana	Wook 11
dysfunction	ATI: eBook	and	Learning System
1. Discuss the main	Nursing Care of		Standard Quiz:
	•	physiologic differences	
priorities for an infant with	Children Unit 2		Nursing Care of
RSV.	Sections 2, 3 & 4.	between the adult	Children 2
2. Compare and contrast	:	and the young	
the various respiratory	D '''	child to help	Week 12 ATI
infections observed in	Biliary atresia	students	CMS Nursing
infants and children.		understand why respire	
	Celiac disease		Practice B with

<u>г</u>				Factor of Decider
	3. Examine current	Ohnenia d'autori	disorders manifest diffe	
	treatment for children with	Chronic diarrhea	in abildram	+ Post Study
	asthma.	Contrile subset	children.	Quiz
	4. Provide best practices	Gastric ulcer		
	and compassionate care		Class discussion:	
	for the pediatric patient with	GERD	Discuss the	
	cystic fibrosis.	lu flamme f	functions of the	
	5. Formulate a care plan for t	Inflammatory	immune system, correl	
	infant with acute diarrhea.	bowel disease	deficiencies in the	
	6. Compare and contrast the		system with	
	inflammatory diseases of the	Peritonitis	presenting signs	
	gastrointestinal tract.	Rectal atresia and	and symptoms.	
	7. Create a plan for teaching	stenosis		
	parents preoperative and		ATI	
	postoperative care of the chil	Rotavirus	Video Case	
	with a cleft lip or palate.		Studies: Pediatric	
	8. Analyze nutritional	Vermiform	Asthma	
	therapies for the child with	appendix		
	a malabsorption syndrome.		ATI Engage	
	9. Practice safe,	Anaphylaxis	Fundamentals:	
	compassionate care for		Clinical Judgment	
	children with cardiovascular	Kawasaki disease	Care Map Case	
	disease.		Studies to engage	
	10. Discuss the pharmacolog		students in the	
	management of systemic	children	case study:	
	inflammatory response		Infection (RSV	
	syndrome (SIRS) including	Sickle Cell	patient)	
	the nurse's role in	disease		
	patient/parent education for			
	drug action, side effects,	Immunodeficiency		
	contraindications, and advers	disorders		
	effects.	.		
	11. Provide a	Childhood cancers		
	comprehensive, patient-			
	centered, and			
	compassionate plan of care			
	for the pediatric patient			
	with sickle-cell anemia.			
	12. Create a discharge plan			
	for the patient with			
	hemophilia including			
	emergency treatment.			
	13. Analyze the risks for			
	childhood cancers.			
	14.Discuss different			
	treatment methods for			
	childhood cancer and the			
	various risks involved.			
	15. Analyze lab and other			
	diagnostic results to ensure			
	medications are safe to			
	administer.			
	16. Practice critical thinking			
	and clinical reasoning to			
	inform clinical judgement in			
	the compassionate care of			

	children with respiratory			
	and gastrointestinal			
	conditions and illnesses.			
13,14	Genitourinary, cerebral,	Units 11 and 12	Class discussion:	Quiz/Exam
10,14	endocrine,		Review the	
	musculoskeletal and	ATI eBook	regulatory centers of	Week 13
	neuromuscular	Nursing Care of	the brain, and the	Learning System
	dysfunction	Children Unit 2	changes that result	Standard Quiz
	1. Assess normal and	Sections 5, 6, 1	when cerebral	Nursing Care of
	abnormal elimination		dysfunction occurs,	Children Final
	patterns for the child.	Urinary tract	to help students	
	2. Practice safe, patient-	infections	understand the	Week 14 ATI
	centered, compassionate		clinical	Proctored
	care for children with	Acute and chronic	manifestations of	Assessment:
	urinary and kidney	kidney disease	increased	Nursing Care of
	conditions and illness.		intracranial pressure.	Children with
	3. Discuss the pharmacologi	Seizure disorders		remediation
	management of pyelonephrit		Group Activity:	
	including	Coma assessment	Activity: Divide	
	the nurse's role in		students into	
	patient/parent education for	Head injury	groups.	
	drug action, side effects,		Assign each group	
	contraindications, and adver	Measuring ICP	a project from the	
	effects.	Destaded	following	
	4. Differentiate among the	Bacterial	suggested topics,	
	stages of consciousness.	meningitis	to be presented in	
	Formulate a care plan for t unconscious child.	Encephalitis	class:	
	6. Distinguish among the	Encephanus	(1) Develop a	
	types of head injuries and	Adrenal	nursing care plan	
	the serious complications.	dysfunction	for a child with	
	7. Differentiate between the	ayoranotion	juvenile	
	various types of seizure	Pituitary disorders	hypothyroidism.	
	disorders.	,	(2) Develop a	
	8. Demonstrate an	Type I Diabetes	nursing care plan	
	understanding of the		for an infant with	
	manifestations of a seizure	Type II Diabetes	adrenocortical insuffici	
	disorder and the		(3) Develop a	
	management of a child with	Cushing syndrome	nursing care plan	
	such a disorder.		for a child who is	
	9. Distinguish between the	Traction	hospitalized with	
	manifestations of adrenal	O a mana mita l	ketoacidosis.	
	hypofunction and	Congenital	(4) Develop a	
	hyperfunction.	skeletal deformities	nursing care plan for	
	10. Differentiate among the various categories of	ueloinnilles	a child who is hospitalized with the	
	diabetes mellitus (DM).	Scoliosis	syndrome of	
	11. Evaluate the	000110313	inappropriate	
	management and nursing	Ewing sarcoma	antidiuretic hormone.	
	care of the child with DM in			
	the acute care setting.	Juvenile idiopathic	ATI Video Case	
	12. Distinguish between a	arthritis	Studies: Type I	
	hypoglycemic and a	-	Diabetes Mellitus	
	hyperglycemic reaction.	Lupus	and Pediatric	
		•	Dehydration	
			·	

15 Comprehensive Final Exam		 13. Create a teaching plan for instructing the parents of a child with DM. 14. Provide safe, patient- centered, compassionate care to children with fractures including pain control, and mobility. 15. Provide discharging plan for the family of a child with cerebral palsy including community resources. 16. Analyze prevention and treatment of tetanus. 17. Explain the causes of botulism in infants and childred 	Myelomeningocele Spinal cord injuries	Skills Modules: Activities> Practice Challenge 1— answer all questions.	
16 Course wrap-up, shared meal in Santa Barbara					

Clinical syllabus

Faculty: TBD Clinical Site: TBD Faculty: TBD Phone: TBD Email: TBD Office hours: TBD

Clinical objectives:

1. Combines knowledge of growth and development into compassionate care of children.

2. Demonstrates the understanding of parental support when caring and administering medication to the child.

3. Examines safety practices when calculating dosage of medications for children.

4. Schedules "play" time as a routine in the care plan for children.

5. Combine home routines, cultural needs and preferences, and spirituality into the care of child and family.

6. Practices safe, patient-centered, compassionate care to children in a variety of settings.

7. Uses critical thinking and clinical reasoning to inform clinical judgment in the care of children to update or change the plan of care.

Clinical weekly schedule

Teaching Plan: Choose a chronic condition for a teaching plan *Simulation/group work: schedule with clinical instructor

Week	Skill/Evaluation	Reading Assignment Bring Skills text to Skills Lab
3 Thurs 10:00am	Group B (12 students) Hospital/Unit Orientation Patient assignments Work full day with RN, assist her/him with all patient care, procedures, documentation	Bring Nurse Pack (Foley catheter and IVPB supplies)

3 Friday 6:45- 19:00	Skills Lab Day 8:00-9:00 Medication proficiency exam 9:15-11:15 Pediatric assessment 11:15-12:15 LUNCH 12:00-14:00 Play, family interaction, compassionate care,	Bring Nurse Pack (Foley catheter and IVPB supplies)
5 6:45- 19:00	Total patient care on pediatric floor or Peds ICU Out rotation to Grotenhuis Specialty Clinical according to rotation schedule	06:45 Preconference for assignment 13:00-14:00 Mid-day conference
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16 *6hr	Simulation Work on Teaching Plan	Clinical Evaluations

NUR250