# **New Course Proposal Checklist**

Submission Date:10/31/2021Department:NursingCourse Title:NUR270 Intermediate MSG NursingPrepared by:Carol VelasDepartment 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	
NA	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) Varying semesters over the 16 month program	
	Resources application: Check the appropriate box:	
х	<ul> <li>staffing requirements (adjunct)</li> </ul>	
Х	- IT resources	
	<ul> <li>other resources such as equipment, space, lab resources</li> </ul>	
NA	Attached Letter /Email from Provost if resources are required	
NA	Library resources : <b>Attached Letter/Email from the Library</b> Director or Associate Library Director if resources are required	
NUR270	<b>Requested Course number</b> : Final determination by the Registrar upon consultation with the Department Chair	

Dr. Carre Velas

10/31/2021

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

NUR270 Intermediate Medical/Surgical/Geriatric is a 6-unit course with 3 units of theory and 3 unit of clinical (135hrs) placed in the third semester. This is the third course in a four-part series of medical/surgical/geriatric 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 use the knowledge and experience they have refined to make critical judgements using evidence-based practice to care for patients with acute conditions involving the cardiac, genitourinary, gastrointestinal, hematological, and orthopedic injuries and conditions in the acute care setting. The clinical settings for this course will occur at Santa Barbara Cottage Hospital in the acute care and ambulatory settings.

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.

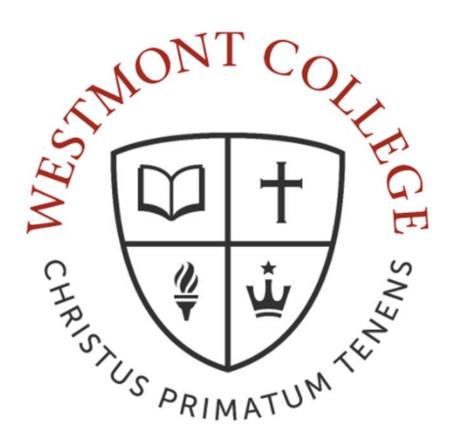
The course will be offered two times per year in varying semesters as the two cohorts of nursing students enroll. Because this is a new course and a new program it will require new staff and IT resources.

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 third semester.

#### Westmont catalog course description

Intermediate medical/surgical/geriatric nursing is the third in a four-part series of courses that concentrates on the medical/surgical and geriatric care for patients with

acute conditions involving the cardiac, genitourinary, gastrointestinal, hematological, and orthopedic injuries and conditions. Students will begin to manage patient care on the interprofessional healthcare team, refine their clinical judgement, and effectively communicate with the patient and their support system with discharge planning.



# NUR270 Intermediate Medical/Surgical Nursing

# 2022

## NUR270 Intermediate Medical/Surgical Nursing

6 units (Theory=3units, Clinical=3units) 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

Intermediate medical/surgical/geriatric nursing is the third in a four-part series of courses that concentrates on the medical/surgical and geriatric care for patients with acute conditions involving the cardiac, genitourinary, gastrointestinal, hematological, and orthopedic injuries and conditions. Students will begin to manage patient care on the interprofessional healthcare team, refine their clinical judgement, and effectively communicate with the patient and their support system with discharge planning.

#### Instructor's further description

Your knowledge, skills, and attitude will continue to grow and be refined as we continue in the series of Med/Surg/Geriatric courses. You will begin to understand your role as the "manager of care" especially working with the interprofessional team consisting of discharge nurses and care coordinators, respiratory, physical, occupational, recreational therapists, pharmacist, the patient and family and physicians of different specialties.

#### **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, 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. As the provider and manager of care, modifies plan of care using evidence-based best practices if assessment and diagnostic results change the acute condition of the patient.

2. Advocates for the patients biopsychosocial, cultural, and religious needs and preferences.

3. Effectively communicates with the interprofessional team when managing patientcentered compassionate care in the patient with acute conditions.

4. Continually evaluates the safety of the patient.

5. Examines the use of the electronic medical record (EMR) to track and trend data for clinical judgement and improvement of care.

6. Identifies quality improvement initiatives as important to the best outcomes of patientcentered, compassionate care across the continuum of care regionally, nationally, and globally.

7. Examines medication administration practice to ensure policy adherence and best practices for the safety of the patient.

8. Practices spiritual self-care to replenish energy and compassion for others.

#### **PLO and CLO Alignment Table**

Program Learning Outcomes	Course Learning Outcomes
1. Exhibit Christian character and servant	8. Practices spiritual self-care to replenish
leadership while providing compassionate care for a diverse population in	energy and compassion for others.
communities across state, national, and	
global settings.	
2. Evidence-based best practices, critical	1. As the provider and manager of care,
thinking, and clinical reasoning, inform	modifies plan of care using evidence-
	based best practices if assessment and

clinical judgement for the provision of patient-centered, safe, quality care.	<ul> <li>diagnostic results change the acute condition of the patient.</li> <li>4. Continually evaluates the safety of the patient.</li> <li>6. Identifies quality improvement initiatives as important to the best outcomes of patient care.</li> <li>7. Examines medication administration practice to ensure policy adherence and best practices for the safety of the patient.</li> </ul>
<ol> <li>Create patient education plans that are</li></ol>	<ul> <li>2. Advocates for the patients</li></ul>
culturally specific to the patient and that	biopsychosocial, cultural, and religious
incorporate the family support system. <li>Communicate effectively with the</li>	needs and preferences. <li>3. Effectively communicates with the</li>
interprofessional team to ensure a	interprofessional team when managing
wholistic approach to patient-centered	patient-centered compassionate care in
care.	the patient with acute conditions.
5. Continue inquisitive learning by using the Electronic Medical Record and Informatics to meet quality metrics in a variety of healthcare and geographic settings.	5. Examines the use of the electronic medical record (EMR) to track and trend data for clinical judgement and improvement of care.
6. Advocate for healthcare policies for the	6. Identifies quality improvement
underserved, vulnerable populations to	initiatives as important to the best
ensure equity with access to care for	outcomes of patient-centered,
prevention, remedial, supportive, and	compassionate care across the
rehabilitative nursing care regionally,	continuum of care regionally, nationally,
nationally, and globally.	and globally.

### **Required Textbooks**

Title	Author	Publisher	ISBN#
Psychology for	Barker	Sage	9-781473925069
Nursing &			
Healthcare			
Professional:			
Developing			
Compassionate			
Care			
Gerontologic	Meiner & Yeager	Elsevier	9-780323498111
Nursing (6 <sup>th</sup> ed.)			
Brunner &	Hinkle & Cheever	Lippincott Williams	9-781496355157
Suddarth's		&	
Textbook of		Wilkins	

Medical-Surgical			
Nursing (14 <sup>th</sup> ed.)			
Nursing Diagnosis	textbook of your choic	e (can be a bundled ap	oplication on smart
phone)			
Nursing Drug textbo	ook of your choice (car	n be a bundled applica	tion on smart phone)
Publication Manual	American Psychological	American Psychological	978-143383216
of the American	Association	Association	
Psychological			
Association (7 <sup>th</sup> 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
8. Practices spiritual self-care to replenish energy and compassion for others.	Lecture, class discussion, and shared experiences	Self-reflection
1. As the provider and manager of care, modifies plan of care using evidence- based best practices if assessment and diagnostic results change the acute condition of the patient.	Lecture, class discussion, shared experiences scaffolding case studies	Quizzes, exams, and through evaluation of clinical practice (Clinical evaluation tool)

2 Advantage for the patients	1
2. Advocates for the patients	
biopsychosocial, cultural, and	
religious needs and	
preferences.	
3. Effectively communicates	
with the interprofessional team	
when managing patient-	
centered compassionate care	
in the patient with acute	
conditions.	
4. Continually evaluates the	
safety of the patient.	
5. Examines the use of the	
electronic medical record	
(EMR) to track and trend data	
for clinical judgement and	
improvement of care.	
6. Identifies quality	
improvement initiatives as	
important to the best	
outcomes of patient-centered,	
compassionate care across	
the continuum of care	
regionally, nationally, and	
globally.	
7. Examines medication	
administration practice to	
ensure policy adherence and	
best practices for the safety of	
the patient.	

Class participation = P/NC Weekly quizzes 5 x 10pts each = 50pts Exams 4 x 100pts each = 400pts Final exam is comprehensive Comprehensive Final 100pts = 100pts Total = 550pts

### \*Student must pass theory with 75% and "Pass" clinical course 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 2.0 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 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

#### Textbooks:

- 1. Medical/Surgical Nursing- Hinkle & Cheever (H&C)
- 2. Psychology of Nursing- Barker (Barker)
- 3. Gerontologic Nursing- Meiner & Yeager (Meiner)
- 4. Assessment Technologies Institute (ATI)

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

Week	Content Objectives	Reading	Activities and	Outcome
		_	assignments	Measurement
1/2	-Orientation to class,			
	syllabi and clinical			
3	-Cardiovascular		Small group	
	management (PVD, PAD,	H & C: Ch. 30	activity:	
	arteriosclerosis,		Discuss the	
	atherosclerosis)	Meiner: CH.19,	modifiable and	
	1. Apply assessment	pgs. 353-360	nonmodifiable risk	
	parameters appropriate for determining the status of	ΑΤΙ	factors for atherosclerosis and	
	peripheral circulation.	Pharmacology	PAD.	
	2. Compare and contrast	Made Easy:	TAD.	
	PVD and PAD, their	Cardiovascular	-PAD, PVD	
	causes, pathophysiologic	System module	worksheet	
	changes, clinical			
	manifestations,			
	interprofessional			
	management, and			
	prevention (Table 30-1).			
	3. Evaluate strategies to			
	prevent and treat venous			
	insufficiency, leg ulcers,			
	and varicose veins (Chart			
	30-5).			
	4. Discuss the use of			
	Ankle-brachial index in the			
	compassionate care of			
	patients with PAD (Chart 30-1).			
	5. Document accurate ABI			
	values in the EMR.			
	6. Create a nursing			
	diagnosis for a patient with			
	PVD (Chart 30-3).			
	7. Discuss the treatment of			
	Raynaud Phenomenon			
	and Burgers Disease.			
	8. Discuss the			
	pharmacological			
	management of			
	cardiovascular disorders			
	including the role of the			
	nurse in educating the			
	patient/support system.			

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	9. Evaluate laboratory and			
	diagnostic test for the			
	patient with cardiovascular			
	conditions.			
4	-Cardio-vascular		-DVT case study	
	management (DVT, leg	H & C: Ch. 30	,	
	ulcers, MI)			
	1. Describe a DVT and its	Meiner: CH. 17	Small group	
	cause, pathophysiologic	pgs. 290-292	discussion:	
	changes, clinical	and 343	Complete the Critical	
	manifestations,		thinking exercise #2	
	interprofessional		at the end of the	
	management, and		chapter. Be prepared	
	prevention (Table 30-2).		to explain your	
	2. Compare DVT		answers.	
	medication management			
	while patient is in-patient		ATI Dosage	
	versus out-patient (Chart		Calculations and	
	30-10).		Safe Medication	
	3. Evaluate the PTT value		Administration	
	in the EMR prior to		Case Study: Acute	
	administering		MI	
1	anticoagulants.			
	4. Compare the			
	pathophysiology, clinical			
	manifestations, and			
	treatment of angina			
	pectoris (Chart 27-5)			
	versus myocardial			
	infarction (Chart 27-6, 27-			
	7, Chart 27-9).			
	5. Create an			
	interprofessional evidence-			
	based plan of care for the			
	patient with acute			
	myocardial infarction.			
	6. 9. Evaluate laboratory			
	and diagnostic test for the			
	patient with MI.			
	7. Manage the older adult			
	with MI according to their			
	specific needs.			
	8. Discuss the			
	pharmacological			
	management of myocardial			
	infarction including the role			
1	of the nurse in educating			
	the patient/support system.			
	9. Consider the importance			
	of cardiac rehabilitation.			
5	-Nutrition (oral and	Barker: Ch. 5	Class discussion:	Quiz-weeks 1 &
	parenteral feeding) and		Discuss the	2
	Liver disease	H & C: Ch. 44,	components of	
		49	"person-centered"	
L	1	1		1

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	1. Discuss what it is to be		care on pg. 102 in	
	"person-centered."	Meiner: Ch. 9,	Barker text.	
	2. Explore the significance	21 pgs.414-419		
	of person-centered		Small group	
	approaches in	ATI:	discussion:	
	contemporary society.		Ethical decision-	
	3.Differentitate between		making	
	the various factors that		Read and discuss the	
	influence nutritional risk in		Ethical Dilemma in	
	older adults.		Ch. 44 (Chart 44-4)	
	4.Describe the importance		Ch. 44 (Chart 44-4)	
	•		ATL Skills Medules	
	of the interprofessional		ATI Skills Modules	
	team in managing		Enteral Tube Feeding	
	nutritional support in the		Virtual Client:	
	older adult.		Nutrition	
	5. Discuss the purposes,			
	management of, and types			
	of enteral and parenteral			
	nutrition support (Table 44-			
	1).			
	<ol><li>Evaluate the patient-</li></ol>			
	centered nursing			
	interventions used to			
	prevent complications			
	(Chart 44-1, Table 44-3)			
	from enteral and parenteral			
	nutrition support.			
	7. Analyze safety			
	measures to decrease the			
	risk of aspiration from tube			
	feedings (Chart 44-2).			
	8. Create a patient-			
	centered safety plan when		Class discussion on	
	initiating and maintaining		the quality	
	parenteral nutrition. Ensure		measure: Prevention	
	accurate and relevant		of CVC related	
	documentation in the EMR.		bloodstream	
			infections.	
	9. Compare and contrast			
	the care, maintenance, and			
	complications of central			
	versus peripherally			
	inserted catheters for			
	parenteral nutrition use			
	(Table 44-5).			
	10. Compare the various			
	types of hepatitis and their			
	causes, prevention, clinical			
	manifestations, patient-			
	centered, compassionate			
	care, prognosis and home			
	health care needs.			
	11. Discuss the			
	pharmacologic			
	management of hepatitis			
	including the role of the			
			1	

	nurse in educating the			
	patient/support system.			
	12. 9. Evaluate laboratory			
	and diagnostic test for the			
	patient with liver disease.			
6	-Hematology (Anemia,		Class discussion:	Exam 1 (weeks
	SS	H & C: Ch. 33	Discuss the	1, 2 & 3)
	1. Differentiate between		psychological impact	
	the hypoproliferative and	Meiner: Ch. 19	of long-term	
	the hemolytic anemias and	pgs. 358-360	hospitalization and	
	compare and contrast the		care of young	
	physiologic mechanisms,	ATI:	patients with sickle-	
	clinical manifestations,		cell disease.	
	medical management, and			
	nursing interventions for		Complete ALT	
	each.		System Disorder for	
	2. Apply the nursing		Sickle Cell Disease	
	process as a framework for			
	patient-centered care of			
	patients with sickle cell anemia and sickle cell			
	crises.			
	3. Discuss the			
	pharmacological			
	management of sickle cell			
	disease including the role			
	of the nurse in educating			
	the patient/support system.			
	4. Discuss iron deficiency			
	anemia in the older adult.			
	5. Review trended RBC			
	data in the EMR to make			
	informed clinical decisions.			
7	-Hematology (blood		Small group	Quiz-week 3
	transfusion)	H & C: Ch. 32	discussion:	
	1. Discuss nursing	(blood	Discuss the	
	implications for the safe administration of blood	transfusion	consequence of	
	components.	information)	administering the wrong blood product	
	2. Construct own routine	ATI Skills	to a patient. Consider	
	for the safeguards of	Module Blood	how you will	
	patient blood products	Administration	safeguard this.	
	transfusion.			
			ATI Skills Module	
			Virtual Client: Blood	
			Transfusion	
8	-GU (cystitis, pylo, Acute		Class discussion:	Exam 2 (weeks
	renal failure)	H & C: Ch. 53,	CAUTI as a quality	4-5)
	1. Demonstrate	55	measure	
	understanding of the role			
	of the kidneys in regulating	Meiner: Ch. 22	ATI Skills Module	
	fluid and electrolyte		Urinary Elimination:	
	balance, acid-base	ATI Skills	Practice Challenges	
	balance, and related	Module Urinary		
	nursing implications.	Elimination		

			1	1
	2. Discriminate between			
	normal and abnormal			
	assessment findings of			
	upper and lower urinary			
	tract function.			
	3. Discuss how aging			
	affects normal bladder			
	function.			
	4. Evaluate laboratory and			
	diagnostic test for the			
	patient with GU			
	conditions/infection.			
	5. Construct a patient-			
	centered plan of care for			
	the male patient with			
	benign prostatic			
	hypertrophy.			
	6. Analyze factors			
	contributing to upper and			
	lower urinary tract			
	infections (Chart 55-2, 55-			
	3).			
	7. Apply the nursing			
	process as a framework for			
	the patient-centered,			
	compassionate care of the			
	patient with kidney stones.			
	8. Discuss the			
	pharmacological			
	management of urinary			
	tract infections including			
	the role of the nurse in			
	educating the			
	patient/support system.			
	(Table 55-1) and urinary			
	incontinence or retention.			
	9. Differentiate the patient-			
	centered, compassionate			
	care of the patient			
	presenting with upper UTI			
	versus lower UTI.			
	10. Evaluate the quality			
	core measure for catheter			
	assisted urinary tract			
	infections (CAUTI) in the			
	clinical setting. Use the			
	trended information in the			
	EMR to ensure best			
	practices.			
9	-GU (chronic renal		Class discussion:	Quiz-week 6
3	failure, dialysis	H & C: Ch. 54	What are the	QUIZ-WEER O
		1100.01.04	potential risks of	
	1. Explain the	Mainary Ch. 00		
	pathophysiology, clinical	Meiner: Ch. 22	urinary and kidney	
	manifestations, medical	A <b>T</b> 1	dysfunction for aging	
	management, and nursing	ATI:	patients?	
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	management for patients		What are your	
	with kidney disorders.		patient-centered	
	<ol><li>Differentiate between</li></ol>		considerations for the	
	the causes of chronic		aging patient with	
	kidney disease (CKD) and		dementia?	
	acute kidney injury (AKI).			
	3. Discuss the effects of			
	normal aging on renal			
	function.			
	4. Evaluate laboratory and			
	diagnostic test for the			
	patient with chronic kidney			
	disease.			
	5. Compare and contrast			
	the renal replacement			
	therapies, including			
	hemodialysis, peritoneal			
	dialysis, continuous renal			
	replacement therapies, and			
	kidney transplantation.			
	6. Demonstrate			
	understanding of the			
	patient-centered nursing			
	care of the patient on			
	dialysis as an inpatient.			
	7. Discuss the			
	pharmacological			
	management of chronic			
	kidney disease including			
	the role of the nurse in			
	educating the			
	patient/support system.			
	Track the BUN and			
	Creatinine levels in			
	decision making regarding			
	medication administration.			
	8. Apply the nursing			
	process as a framework for			
	care of the patient			
	undergoing urinary			
	diversion surgery.			
10	-GI (upper: oral cancer,		Class discussion:	Exam 3 (weeks
	esophagitis, GERD,	H & C: Ch. 43,	Compare and	6-7)
	ulcers, gallbladder, and	46	contrast the step up	
	gastric cancer)		versus step down	ATI CMS Adult
	1. Compare the etiology,	Meiner: Ch. 21	pharmacologic	Med Surg
	clinical manifestations, and		management of	Practice A with
	patient-centered care of	ATI:	GERD.	Focused Review
	acute gastritis, chronic			and post-study
	gastritis and peptic ulcer.			quiz
	2. Discuss the nursing			
	management of the patient			
	with appendicitis,			
	diverticular disease, and			
	intestinal obstruction.			

	<ol> <li>Review trended WBC in EMR to make informed clinical judgements.</li> <li>Discuss the patient- centered, compassionate</li> </ol>			
	care of patient with cancer of the oral cavity. 5. Discuss the			
	pharmacological management of disorders			
	of the upper GI system including the role of the nurse in educating the			
	patient/support system. 6. Identify various			
	disorders of the esophagus and their clinical manifestations and			
11	management.			
11	-GI (lower: IBS, Crohns, Ulcerative colitis, ABO,	H & C: Ch. 43,	Class activity: Work with the ostomy	
	colon cancer, ostomies)	47	cart in the skills lab.	
	1. Compare and contrast			
	the patient-centered,	Meiner: Ch. 21		
	compassionate care of	۸ <u>ـــ</u> ۱		
	patients with Crohn's	ATI:		
	disease and Ulcerative Colitis.			
	2. Evaluate the diagnostic			
	tests needed to rule out			
	acute bowel obstruction.			
	3. Create a discharge plan			
	for patient with a new			
	ostomy.			
	4. Discuss the			
	pharmacological management of lower GI			
	disorders including the role			
	of the nurse in educating			
	the patient/support system.			
	5. Apply the nursing			
	process to the patient-			
	centered care of the			
	patient with colorectal or anorectal cancer.			
	6. Identify members of the			
	interprofessional team you			
	would consult with to help			
	craft the most appropriate			
	patient-centered plan of			
40	care.	Barkor: Ch. 9	Small group	
12	-Ortho (soft tissue, fx, amputation)	Barker: Ch. 8 Emotional	Small group discussion:	Quiz-week 8 & 9
	1. Explore the social world	Intelligence	Read the case study	ATI CMS Adult
	in which emotional		of David and Tomo	Med Surg
			on pg. 183. Which of	Practice B with

	intelligence has become	H & C: Ch. 39	the two young men are exhibiting	Focused Review and post-study
	necessary. 2. Differentiate between	(review), 40, , 42	emotional	quiz
	contusions, strains,		intelligence? How do	4
	sprains, dislocations, and subluxations.	Meiner: Ch. 23	you recognize this?	
	3. Analyze the signs and	ATI Skills	Skills Lab:	
	symptoms of an acute	Module:	Practice teaching	
	fracture. 4. Use the nursing process	Mobility	crutch walking and other assistive	
	as a framework for patient-		devices.	
	centered, compassionate		Review the use of an	
	care of the older adult		abductor pillow and	
	patient with a fracture of		CPM machine.	
	the hip.			
	5. Examine the evidence of phantom pain in the patient		ATI Skills Module Mobility Practice	
	with amputation.		Challenges	
	6. Compare and contrast		Ĭ	
	the patient-centered care			
	regarding the management			
	of a cast, splint, or brace. 7. Discuss the emergent			
	care of compartment			
	syndrome.			
	8. Compare the patient-			
	centered needs of the			
	patient undergoing total hip arthroplasty with those of			
	the patient undergoing total			
	knee arthroplasty,			
	including the			
	interprofessional team.			
	9. Evaluate different diagnostic exams in the			
	EMR and which is more			
	accurate than the other.			
	10. Apply the nursing			
	process as a framework for			
	patients needing to use assistive devices for			
	ambulation including the			
	role of the interprofessional			
	team.			
	11. Discuss the			
	pharmacological management of soft tissue			
	disorders including the role			
	of the nurse in educating			
	the patient/support system.			
13	Ortho (rheumatoid		Class activity:	Exam 4 (weeks 8
	arthritis, systemic lupus erythematosus (SLE),	H & C: Ch. 38, 41	Unraveling case study of "Ann, the	& 9)
	Osteoarthritis,	<del>-</del>	skier"	
	osteoporosis,	Meiner: Ch. 23		
	osteomyelitis)			

Γ		·		
	1. Discuss the assessment	ATI:	Discuss the	
	and diagnostic findings		immunologic	
	seen in patient with		management of	
	rheumatoid arthritis.		DMARDS and	
	2. Consider the		immunosuppressives.	
			ininanosappressives.	
	pharmacologic			
	management of			
	rheumatoid arthritis.			
	Review kidney function lab			
	results in the EMR to make			
	informed clinical			
	judgements.			
	3. Examine the different of			
	osteoarthritis from			
	rheumatoid arthritis.			
	4. Compare and contrast			
	the patient-centered,			
	evidence-based,			
	compassionate nursing			
	care of patient with osteo			
	and rheumatoid arthritis.			
	<ol><li>Discuss the patient-</li></ol>			
	centered, compassionate,			
	interprofessional care of			
	the patient with SLE.			
	6. Discuss the			
	pathogenesis, prevention,			
	and patient-centered			
	compassionate care of			
	patients experiencing			
	osteoporosis.			
	7. Examine the causes and			
	related management of			
	patient with osteomalacia.			
14			Small around	Quiz-week 10 &
14	-Burns		Small groups:	
	1. Explain factors that	H & C: Ch. 62	Calculate the fluid	11
	affect the severity of burn		resuscitative needs of	ATI CMS Adult
	injuries.	Meiner: Pgs.	a 60yo. Female, 175#	Med Surg
	2. Describe the local and	188-189	with second-degree	Proctored
	systemic effects of a major		and partial third	Assessment
	burn injury.	ATI:	degree burns over	with Focused
	3. Compare priorities of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	45% of her body.	Review
				17941944
	care and potential			
	complications for each		Class discussion:	
	phase of burn recovery.		Read the Nursing	
	4. Evaluate laboratory and		Research Profile,	
	diagnostic test for the		Chart 62-7. Be	
	patient with varying		prepared to discuss	
	degree's of burns.		the findings and	
	5. Plan fluid replacement		nursing implications	
	requirements during the		in class.	
	emergent/resuscitative			
	phase of a burn injury.			
	6. Analyzes electrolyte			
	values in EMR to make			
		1	1	

	informed clinical			
	judgements.			
	-Burn management cont.			
	5. Examine the nurse's role			
	in burn wound			
	management during the			
	acute/intermediate phase			
	of burn care.			
	<ol><li>Appraise the care</li></ol>			
	involved in skin grafting.			
	7. Discuss the			
	pharmacological			
	management of burn			
	injuries at different phases			
	of recovery including the			
	role of the nurse in			
	educating the			
15	patient/support system.		Prior to class:	Ever E (weeke
15	-Compensation for abnormal ABGs and	H & C: Ch. 13	Find a residential	Exam 5 (weeks
		H & C: Ch. 13		10-13)
	Healthcare Transitions		care facility in your	
	1. Discuss the	Meiner: Ch. 26	city that provides	
	compensatory	· —·	different levels of	
	mechanisms (lungs,	ATI:	care. What is their	
	kidneys, and chemical		nursing model? How	
	buffers) for abnormal		many RNs are	
	ABGs.		employed each shift	
	2. Examine the process of		and what is their	
	aging on these		main responsibility?	
	compensatory measures.			
	<ol><li>Discuss the risks</li></ol>			
	associated with		How many homecare	
	hospitalization of older		agencies in your town	
	adults.		provide Hospice	
	4. Discuss the importance		care?	
	of the assessment of the			
	older adult's baseline		Engage	
	functional status.		Fundamentals End	
	5. Differentiate the		Of Life Care (EOL)	
	categories and types of		Clinical Judgment	
	home care organizations in		Concept Map Activity	
	existence.			
	6. Analyze the philosophy			
	of hospice care and how it			
	differs from traditional			
	home health care.			
16	Comprehensive Final Exan	a including ARGs	1	
10	Comprehensive Fillar EXall	I Including ADUS		

**Clinical Information** 

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

#### **Clinical objectives:**

1. Provides safe, quality, patient-centered compassionate care for 2-3 patients with acute conditions by midterm. 3-4 patients after midterm.

2. Demonstrates a safe routine when administering medications. Available to clinical faculty 15 min. prior to medication time for safety check and review.

3. Analyzes serial lab and diagnostic results for all patients in your care.

4. Evaluates a priority goal for each patient each day and works on reaching that goal during shift.

5. Summarizes the patient report using SBAR and reports off to RN prior to end of shift.

6. Refine critical thinking by asking why and reviewing labs and other diagnostic results comparing them to the patient condition.

#### Clinical schedule:

Week	Patient care focus     Preconference			
moon		Lunch		
		Post-conference		
1	Hospital Orientation, medication proficiency	Location TBD		
6:45-	exam.			
19:30				
2	Cardiac	Location TBD		
6:45-				
19:30	Post-conference: ECG strips			
3	Cardiac, Nutrition and Hematology	Location TBD		
6:45-				
19:30	Post-conference: ECG strips and parenteral			
	formulas			
4	Cardiac, Nutrition and Hematology	Location TBD		
6:45-	Dest conference, DDC and indians of 4 nations			
19:30 5	Post-conference: RBC and indices of 4 patients	Location TBD		
6:45-	Cardiac, Nutrition and Hematology			
19:30	Post-conference: Complications of tube			
13.50	feedings			
6	Cardiac, Nutrition, Hematology, and GU	Location TBD		
6:45-	Cardiac, Haimon, Homatology, and CO			
19:30	Post-conference: CAUTI policy/protocol			
7	Cardiac, Nutrition, Hematology, and GU	Location TBD		
6:45-				
19:30				
8	Cardiac, Nutrition, Hematology, GU, and GI	Location TBD		
6:45-				
19:30	Post-conference: Bowel rest			
9	Cardiac, Nutrition, Hematology, GU, and GI	Location TBD		
6:45-				
19:30	Post-conference: TPN policy/protocol			
10	Cardiac, Nutrition, Hematology, GU, and GI	Location TBD		
6:45- 19:30	Post-conference: Religious beliefs regarding			
19.50	blood transfusions			
11	Cardiac, Nutrition, Hematology, GU, GI, and	Location TBD		
6:45-	Ortho			
19:30	Post-conference: Physical therapy (speaker)			
12	Cardiac, Nutrition, Hematology, GU, GI, Ortho,	Location TBD		
6:45-	and Burns			
19:30				
	Post-conference: CPM machine			
13	Cardiac, Nutrition, Hematology, GU, GI, Ortho,	Location TBD		
6:45-	and Burns			
19:30				

	Post-conference: Hyperbaric chamber for burn		
	tissue healing		
14	Cardiac, Nutrition, Hematology, GU, GI, Ortho,	Location TBD	
6:45-	Burns, and ABGs		
19:30			
	Post-conference: radial artery use for ABG		
15	Cardiac, Nutrition, Hematology, GU, GI, Ortho,	Location TBD	
6:45-	Burns, and ABGs		
13:00			
13:00-			
15:00	Celebratory Lunch in Santa Barbara	Celebratory Lunch	
16	Course wrap-up and clinical evaluations		