

VNSG 1323-501CL Basic Nursing Skills Lecture and Lab Spring 2023 Wednesdays - Lecture 0800-1100 and Lab 1115-1215, 1315-1615 Location: Steam building Room 237 - Lecture Steam Building Room 238 - Lab

Instructor Information:

Lauren McElyea, MSN, RN Email: lmcelyea@com.edu Office number: 409-933-8458

Student hours and location:

Office hours will be as follows:

Mondays: Virtual appointments only Tuesdays and Thursdays: 1300-1600

Location: You must have an appointment with me prior to coming to my office, Check in with the Nursing office and they will call my office to come out to get you. My office number is 225-37.

Required Textbook/Materials:

- 1. Williams, P. (2022) deWit's Fundamental Concepts and Skills for Nursing (6th ed.). Elsevier Health Sciences (US).
- 2. Spring 2023 Elsevier 360 Bundle

3. **Skills lab bag - required to be purchased by the second week of school

- 4. Codes for each resource in Evolve:
 - a. Evolve Resources for Fundamental Concepts and Skills for Nursing, 6th Edition

By Patricia A. Williams ISBN: 9780323776721

Course ID: 163528 lmcelyea3 1001

Instructor: Lauren McElyea

b. Evolve Resources for Saunders Q & A Review for the NCLEX-PN $\mbox{\ensuremath{\mathbb{R}}}$ Examination, 6th Edition

By Linda Anne Silvestri ISBN: 9780323828819

Course ID: 164621 Imcelyea3 1001

Instructor: Lauren McElyea

c. Spring 2023 Admits Clinical Skills: Skills for Nursing Collection, 1st Edition

By Elsevier

ISBN: 9780323396271

Course ID: 155081 com4 1001

Instructor: C OM

d. Spring 2023 Admits Elsevier Adaptive Quizzing for the NCLEX-PN Exam 4th Edition

By Elsevier

ISBN: 9780323882361

Course ID: 166276 com4 1001

Instructor: C OM

e. VNSG 1323 Spring 2023 Book-Organized: Sherpath for Williams Fundamental

Concepts and Skills for Nursing, 6th Edition

By Elsevier

ISBN: 9780323873642

Course ID: 165499 com4 1002

Instructor: C OM

f. VNSG 1323 Spring 2023 Elsevier Assessment Builder - ECOMM, 1st Edition

By Elsevier

ISBN: 9780443115042

Course ID: 168259 com4 1002

Instructor: C OM

Recommended Textbook/Materials:

- 1. Williams, P. A. (2022). Study guide for fundamental concepts and skills for nursing. Elsevier.
- 2. HESI. (2021). Hesi comprehensive review for the NCLEX-PN examination 6th edition.

Elsevier.

Course Description: This course provides mastery of entry level nursing skills and competencies for a variety of healthcare settings. Utilization of the nursing process as the foundation for all nursing interventions.

Course requirements: Prerequisite: <u>BIOL 2401</u> with a grade of "C" or better. (Lecture 1, Lab 6, Credit 3. Prerequisite or Corequisite: <u>BIOL 2402</u>, <u>VNSG 1122</u>, <u>VNSG 1227</u>, <u>VNSG 1260</u> with grade "C" or better.

Determination of Course Grade/Detailed Grading Formula: Grading Scale

A 00 100.00

A = 90 - 100.00

B = 80 - 89.99

C = 75 - 79.99*

D = 60 - 74.99

F = <60 *A minimum final grade of "C" is required to pass this course.

Grade Calculation

All assignments, including pass/fail, must be submitted to pass the course.

The exam average must be at least 75% before non-examination assignment grades are calculated into the final course grade.

Late assignments will be accepted, however, are subject to points deduction per day, and as outlined in the Nursing Student Handbook.

See Grade Determination & Calculation in the Nursing Student Handbook.

Grade Appeal Process:

Concerns about the accuracy of grades should first be discussed with the instructor. A request for a change of grade is a formal request and must be made within six months of the grade assignment. Directions for filing an appeal can be found in the student handbook.https://build.com.edu/uploads/sitecontent/files/student-

<u>services/Student_Handbook_2021-2022v6.pdf</u>. An appeal will not be considered because of general dissatisfaction with a grade, penalty, or outcome of a course. Disagreement with the instructor's professional judgment of the quality of the student's work and performance is also not an admissible basis for a grade appeal.

https://build.com.edu/uploads/sitecontent/files/student-services/Student_Handbook_2021-2022v6.pdf

Assignment	%
EAQ Quizzes ****	10%
Head to Toe Validation**	15%
Skills Competency Validation *** (Pass/Fail)30	Pass/Fail
Skills Practice "On Your Own" *** (10 Sessions)	5%
Vital sign sheet (50 vital signs) **	5%
Group Project	10%
Participation Grade **	5%

Pre-lecture activities**	5%
Exam 1*	10%
Exam 2*	10%
Exam 3*	10%
Comprehensive Final Exam*	15%
Average Exam Total	
Total	100%
* > 75% exam average required to pass the course **Weighted assignments calculated only after 75% exam average met ***Must pass all skills for course progression ***All skills competencies require practice with validation ****EAQ quizzes will be assigned, and the 6 highest grades will be taken for the percentage above.	

Late Work, Make-Up, and Extra-Credit Policy:

2.22 Late Assignments - All course assignments are expected to be completed and submitted to the assigned faculty on the specified due date and time stated by the instructor. Absence is not an acceptable excuse for a late assignment.

Make-Up Exams: Students will be allowed to make up a missed scheduled examination but will not be allowed to make-up missed quizzes. The exam make-up day will be set by the course facilitator. The makeup exam for unit exams will be an essay exam covering unit topics. If math problems are required on tests in the course, five math problems also will be on the make-up exam. The student in a course with a standardized final exam must take a make-up standardized final exam. If a student is unable to take the make-up exam on the date set by the course facilitator, a grade of zero will be recorded for the exam.

Attendance Policy:

2.6.1 Theory/Lab Course Attendance Students are expected to attend every scheduled session for all classes. Instructors will keep an accurate record of class attendance. An absence is defined as missing half or more of a class period. Excessive absence is defined by nursing faculty as being absent for greater than three classes in nursing theory courses. A student will be given a warning for excessive absences. An instructor-initiated withdrawal may occur if a student continues to be absent after the warning is given.

2.6.2 Punctuality in Theory/Lab Courses Students arriving after the designated class start time will sit quietly at the back of the class until after the break. Students who are repetitively tardy will be given a warning by faculty. Repetitive tardiness is defined by nursing faculty as greater than six tardies in a single nursing course. Arriving late to class after a specified break also is defined as a tardy and counts toward the six

Communicating with your instructor: ALL electronic communication with the instructor must be through your COM email. Due to FERPA restrictions, faculty cannot share any information about performance in the class through other electronic means. (Faculty may add additional statement requiring monitoring and communication expectations via Blackboard or other LMS)

Stu	udent Learner Outcome	Maps to Core Objective	Assessed via this Assignment
1.	Basic medical terminology,	Lecture	Paper quiz
	vocabulary, and	Skills Practice	EAQ
	abbreviations used in		Exam
	healthcare.		Skills Demonstration
2.	Identify the steps of the	Lecture	Paper quiz
	nursing process during	Skills Practice	EAQ
	interactions in the simulated		Exam
	laboratory setting.		Skills Demonstration
3.	Demonstrate therapeutic	Lecture	Paper quiz
	communication techniques	Skills Practice	EAQ
	and data collection during		Exam
	basic physical assessment in		Skills Demonstration
	a laboratory setting		
4.	Demonstrate correct usage		
	of basic principles of		
	medical and surgical asepsis		
	in simulated laboratory		
	setting.		
5.			

Academic Dishonesty: (Describe your academic dishonesty policy and state consequences if it is violated)

Student Concerns: If you have any questions or concerns about any aspect of this course, please contact me using the contact information previously provided. If, after discussing your concern with me, you continue to have questions, please contact [insert name and title of direct supervisor] at [phone number/email address].

Course outline:

Institutional Policies and Guidelines

Grade Appeal Process: Concerns about the accuracy of grades should first be discussed with the instructor. A request for a change of grade is a formal request and must be made within six months of the grade assignment. Directions for filing an appeal can be found in the student handbook. https://build.com.edu/uploads/sitecontent/files/student-services/Student Handbook 2019-2020v5.pdf.

An appeal will not be considered because of general dissatisfaction with a grade, penalty, or outcome of a course. Disagreement with the instructor's professional judgment of the quality of the student's work and performance is also not an admissible basis for a grade appeal. https://build.com.edu/uploads/sitecontent/files/student-services/Student Handbook 2019-2020v5.pdf

Academic Success & Support Services: College of the Mainland is committed to providing students the necessary support and tools for success in their college careers. Support is offered through our Tutoring Services, Library, Counseling, and through Student Services. Please discuss any concerns with your faculty or an advisor.

ADA Statement: Any student with a documented disability needing academic accommodations is requested to contact Kimberly Lachney at 409-933-8919 or klachney@com.edu. The Office of Services for Students with Disabilities is located in the Student Success Center.

Counseling Statement: Any student needing counseling services is requested to please contact Holly Bankston in the student success center at 409-933-8520 or hbankston@com.edu. Counseling services are available on campus in the student center for free and students can also email counseling@com.edu to set up their appointment. Appointments are strongly encouraged; however, some concerns may be addressed on a walk-in basis.

Textbook Purchasing Statement: A student attending College of the Mainland is not under any obligation to purchase a textbook from the college-affiliated bookstore. The same textbook may also be available from an independent retailer, including an online retailer.

Withdrawal Policy: Students may withdraw from this course for any reason prior to the last eligible day for a "W" grade. Before withdrawing students should speak with the instructor and consult an advisor. Students are permitted to withdraw only six times during their college career by state law. The last date to withdraw from the 1st 8-week session is October 5. The last date to withdraw from the 16-week session is November 18. The last date to withdraw for the 2nd 8-week session is December 1.

F_N **Grading:** The F_N grade is issued in cases of *failure due to a lack of attendance*, as determined by the instructor. The F_N grade may be issued for cases in which the student ceases or fails to attend class, submit assignments, or participate in required capacities, and for which the student has failed to withdraw. The issuing of the F_N grade is at the discretion of the instructor. The last date of attendance should be documented for submission of an F_N grade.

Early Alert Program: The Student Success Center at College of the Mainland has implemented an Early Alert Program because student success and retention are very important to us. I have been asked to refer students to the program throughout the semester if they are having difficulty completing assignments or have poor attendance. If you are referred to the Early Alert Program you will be contacted by someone in the Student Success Center who will schedule a meeting with you to see what assistance they can offer in order for you to meet your academic goals.

Resources to Help with Stress:

If you are experiencing stress or anxiety about your daily living needs including food, housing or just feel you could benefit from free resources to help you through a difficult time, please click here https://www.com.edu/community-resource-center/. College of the Mainland has partnered with free community resources to help you stay on track with your schoolwork, by addressing life issues that get in the way of doing your best in school. All services are private and confidential. You may also contact the Dean of Students office at deanofstudents@com.edu or communityresources@com.edu.

Learning Modules

Unit 1: Infection Prevention and Control: Protective Mechanisms and Asepsis

Concepts: Infection, Evidence, Development, and Health Promotion

Chapters to review: Chapter 16

Student Learner Objectives

After completing this unit, the student should be able to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles as Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. List the types of microorganisms that can cause infection in humans.
- 2. Discuss the links in the infection process and give an example of each.
- 3. Discuss factors that make older adults more susceptible to infection.
- 4. Explain how the body's protective mechanisms work to prevent infection.
- 5. Explain how the inflammatory and immune responses protect the body.
- 6. Identify means for removal or destruction of microorganisms on animate and inanimate objects.
- 7. Compare and contrast medical asepsis and surgical asepsis.

- 8. Describe accepted methods of disinfection and sterilization.
- 9. Describe the four stages of infection.
- 10. List two common health care—associated infections (HAIs) and describe three ways to decrease the occurrence of each.
- 11. Explain how Transmission-Based Precautions are used with Standard Precautions.
- 12. Compare and contrast Airborne Precautions with Droplet Precautions.
- 13. Discuss the special requirements for Airborne Precautions when the patient has pulmonary tuberculosis.
- 14. Compare infection prevention and control procedures appropriate for the hospital with those used in the home.
- 15. List techniques for handling specimens; disposing of soiled linen, trash, and sharps; and cleaning equipment in the isolation setting.
- 16. Give three examples of how the nurse can provide psychosocial care of a patient in isolation.

Clinical Practice

- 1. Discuss the surveillance, prevention, and control of infections in hospitalized patients.
- 2. Demonstrate proper hand hygiene techniques.
- 3. Consistently demonstrate the application of the US Centers for Disease Control and Prevention (CDC) Standard and Transmission-Based Precautions while caring for patients.
- 4. Prepare to teach a home care patient with a wound infection how to prevent the spread of infection to family members.
- 5. Use Standard Precautions when caring for patients.
- 6. Use Transmission-Based Precautions when caring for patients.
- 7. Properly bag and remove soiled linens and trash from an isolation room.
- 8. Teach a patient or family member how to properly dispose of soiled items at home.
- 9. Teach a patient or family member proper hand hygiene techniques.

Learning Content

Infectious Agent

- Bacteria
- Prions
- Protozoa
- Viruses
- Rickettsia
- Fungi
- Helminths
- Other Infectious Agents

Process (Chain) of Infection

- Causative Agent (Link One)
- Reservoir

- Mode of Transfer
- Portal of Entry
- Susceptible Host

Body Defenses Against Infection

- Inflammatory Response
- Immune Response

Asepsis and Control of Microorganisms

- Medical Asepsis and Surgical Asepsis
- Hand Hygiene
- Standard Precautions
- Cleaning and Disinfection

Sepsis in the Home Environment Infection Control Surveillance Infection

- Stages of Infection
- Health Care-Associated Infections (HAIs)

Infection Prevention and Control

- Standard Precautions
- Airborne Precautions
- Droplet Precautions
- Contact Precautions
- Airborne Precautions
- Modified Precautions
- COVID Precautions

Personal Protective Equipment (PPE)

• Needle Stick Injuries

Psychological Implications

- Promoting Social Interaction
- Combating Sensory Deprivation

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Older Adult Considerations

• Infection Control in the Older Adult

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process Case study reviews.
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Hand washing
- Use of Personal Protective Equipment

Unit 2: Measuring Vital Signs

Concepts: Thermoregulation, Patient Teaching, Safety, Technical and Informatics, Evidence, Gas Exchange, Development, and Perfusion

Chapter to review: Chapter 21

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. List the anatomic structures involved in the regulation of the vital signs and describe their functions.
- 2. Identify the physiologic mechanisms that regulate temperature, heart rate, blood pressure, and respiration.
- 3. List the factors that affect body temperature.
- 4. Discuss normal and abnormal characteristics of the pulse.
- 5. Describe the respiratory patterns considered to be normal and abnormal.
- 6. Explain the relationship of Korotkoff sounds to systolic and diastolic blood pressure.
- 7. State why pain is considered the fifth vital sign.

Clinical Practice

- 1. Demonstrate measuring and recording the body temperature of an adult and a child at the oral, rectal, axillary, and tympanic (eardrum) sites using electronic or tympanic thermometer.
- 2. Demonstrate measuring and recording an apical pulse and a radial pulse.
- 3. Demonstrate counting and recording respirations.
- 4. Demonstrate measuring and recording blood pressure.
- 5. Demonstrate using an automatic vital signs machine to monitor pulse and blood pressure.
- 6. Recognize deviations from normal vital sign patterns.
- 7. Determine factors that might be adversely affecting the patient's temperature, pulse, respiration, or blood pressure.

Learning Content

Overview of Structure and Function Related to the Regulation of Vital Signs

- How is Body Heat Produced
- What Factors Affect Body Heat Production
- Regulators of Body Temperature
- How Does Fever Occur? Physiologic Effects
- Physiologic Mechanisms Controlling Pulse
- What is? Respirations
- Organs of Respirations
- How is Respiration Controlled
- What is Blood Pressure
- Physiologic Factors Affecting Blood Pressure
- Vital Sign Changes with Aging

Measuring Body Temperature

- Factors Influencing Temperature Readings
- Problems of Temperature Regulation
- Measuring Body Temperature
- Glass Thermometers
- Electronic Thermometers
- Disposable Thermometers

Measuring the Pulse

- Common Pulse Points
- Pulse Rate
- Pulse Characteristics

Measuring Respirations

- Respiratory Patterns
- Measuring Oxygen Saturation

Measuring the Blood Pressure

• Equipment to Measure BP

- Korotkoff Sounds
- Hypertension
- Hypotension

Pain, the Fifth Vital Sign

Automated Vital Sign Monitoring

Documenting Vital Signs

- Recording Temperature Measurements
- Recording Pulse Measurements
- Recording BP Measurements
- Evaluating Vital Signs

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Older Adult Considerations

• Unique Aspects of Physiological Assessments in Older Adults

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews.
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Measuring Temperatures
- Measuring Pulses
- Measuring Respirations
- Measuring Blood Pressures Manual and Automatic

Unit 3: Assessing Health Status/Physical Assessment

Concepts: Caregiving, Cognition, Communication, Culture, Development, Evidence, Gas Exchange, Health Promotion,

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Discuss the types of assessment used in various situations.
- 2. Demonstrate the techniques used during physical examination.
- 3. Describe how to gather information for a comprehensive database for a patient.

Clinical Practice

- 1. Assess the patient's psychosocial and physical functioning by gathering information in an organized way.
- 2. Perform a basic physical examination on a patient.
- 3. Perform a visual acuity test on a patient.
- 4. Carry out focused physical assessments of the cardiovascular, respiratory, gastrointestinal, and neurologic systems.
- 5. Teach patients the assessment techniques for the early detection of cancer.
- 6. Educate patients about the recommendations for periodic diagnostic testing.
- 7. Assist with a medical examination by positioning and draping the patient and organizing the equipment.

Learning Content Data Collection and Assessment

☐ Assessment

Data Collection
Psychosocial Assess
Cultural Assessment
Physical Assessment
Techniques PA
Percussion
Olfaction
Height & Weight
Basic PA
Vital Sign Measure

Body System Review

Head/Neck

Chest/Heart

Lungs

Skin

Extremities

Abdomen

- Assisting w Physical Exam
- Special Focus Examinations

Eyes

Ears

Hearing

Comprehension

Application of the Nursing Process

- Assessment
- Nursing Diagnosis ☐ Planning
- Implementation

Gerontology Considerations

- Physiological Assessment (Dahlkemper, 2020, Chapter 15)
- Common Clinical Problems (Dahlkemper, 2020, Chapter 16)
- Psychological Assessment (Dahlkemper, 2020, Chapter 17)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Performing a Physical Exam
- Narrative Documentation of an Assessment
- Documentation of Assessment

Head-To-Toe-Assessment: Level:Week:Student's Name:	Date:
Advance Directives: Resuscitate DN Other Medical/Surgical DX:	
Pt's Initials:DOA:Age:Se	
Date:Time	
V/S: TPRBP	
Neuron	nuscular
Glasgow Coma Scale (GSC)	Level of Consciousness:
(Circle best score in each category)	LethargicConfusedAlert
Eye Opening	Seizures Last seizure on
4 Spontaneously	(date)
3 In response to speech	Orientated: TimePlacePerson
2 To painful stimulus	
1 No eye opening to any stimulus	Grips: Equal/Unequal Strong
<u>Verbal Response</u>	Weak
5 Oriented to person, place, & time	ROM of Extremities: Full Partial
4 Engages in conversation, but content	
confused	Weakness Numbness
3 Inappropriate words	
2 Incomprehensible sounds	Speech: ClearSlurred
1 No verbal response	Eyes: Left Right
Motor Response	(PERRL_
6 Obeys commands appropriately	Sclera:
5 Attempts to purposely remove painful stimuli	Vision: Blurred Double
4 Withdrawn	
3 Abnormal flexion in response to painful	Safety: Bed rails Double
stimuli	
2 Abnormal extension in response to painful stimuli	Fall Precaution:
1 No movement to painful stimuli	Call Light Within Patient Reach:
Total GCS Score	

15 points = Normal function	Activity Level:Patient Tolerance:
7 points or less = Comatose status	
3 points = Possible brain death	Pain Level: (Scale of 1-10)
	Quality:
	Duration:
	Location:
	Location:
	Intensity:
	How Pain is Relieved:
	Comments:
	Cooperative
	Uncooperative
	Agitated Calm
	Withdrawn
	History of Depression:Depressed
	Now
	Mood Swings
	Emotional Level:
	ratory
Breath Sounds:	SOB without exertion with
Clear RightClear Left	exertion
Crackles RightLeft	Requires O2 at HomeI/minute
Rales Right Left	Requires O2 at HospitalI/minute
	Nailbeds Cap Refills < / > 3seconds
Whoozing Pight Loft	Mucous Membranes:
Wheezing Right Left Congested_	ivideous iviembranes.
Cough ProductiveNon-Productive	Respirations: Labored / non-labored
	Comments:
	Special Precautions:

	Number of pillows:	
	Cardiovascular	
Any stated problems:	Chest Pain:with or without exertion	
Rhythm: Regular Irregular	Location:	
Pulse Rate & Rhythm: Apical Ra	adial Dizziness:	
,	Cyanosis: Phlebitis: Homan's	
Palpitations:	Comments:	
Comments:		
Gastrointestinal		
Diet at Home:	Nausea/Vomiting:	
Diet Ordered:NPO:		
	Constipation:	
Appetite:	Diarrhea:	
	Abdomen: Soft Firm	
Snacks:	DistendedNon-distended	
	Tender: Location	
Current Weight:Kg	Bowel Sounds:	
Weight Changes: From Kg to	Last BM:(date)	
Kg	Drains: Tubes	
Over what period of time	Stoma Rectum:	
Special Precautions:	Hemorrhoids:	
NGT Patent Suction	on	
Teeth: Gums: Lig	os:	
Genitourinary		

Female	Male	
Genitalia:LMP	Genitalia:	
Menstrual Problems		
	Prostate Problems	
DischargeLast PAP Smear		
	Discharge	
Urination: Burning		
Retention	IncontinenceHematuria	
UrgencyColor		
	KetonesGlucose	
Foley Urostomy		
Intake	Comments:	
Output		
Skin		
Any stated problems:	Drainage	
·	Drace Cores	
Color: PaleCyanoticDusky	Pressure Sores: #1 Stage#2 Stage	
Flushed	#1 Stage#2 Stage	
Temperature: Cool Hot Warm	#2 Stage #4 Stage	
Dry Diaphoretic Turgor	#3 Stage #4 Stage	
LesionsIntact	Packings:	
LESIONSINTACT	rackings.	
Scrapes Burns Incisions	Hygiene: SelfAssistTotal	
ociapes builisincisions	Care	
Scars: Tattoos:	Sutures:	
Restraints:	Sutures.	
nestraints.	Traction:	
Pressure Sore		
Deep Tissue Injury: Localized area of purple or	Stage III: Full thickness skin loss, extending to	
maroon discoloration on intact skin d/t shear	the sc fat but not fascia, "crater" appearance,	
or pressure. Considered un-stageable, may	no visible bone, tendon or muscle.	
progress quickly to stage III or IV.	Stage IV: Full thickness skin loss with exposed	
Stage I: Area is pink, red, or mottled, skin	bone, muscle and structures. Tunneling, eschar.	
unbroken, blanches to touch, lasting up to 15	Un-stageable: Base covered by slough or	
minutes after pressure is released	eschar, cannot evaluate depth. Must be	
Stage II: Skin appears cracked, blistered, and/or	debrided to evaluate staging and treatment.	
broken.	5 5	

Surrounding area is reddened.		
IV S	Site	
Site:Type:Gauge:	IV Solution:	
Condition:	Rate:Pump in Use:	
Date/Time:	Tubing Labeled:	
Social History		
Smoking: Amount/Day: Years:	Language:	
Alcohol: Amount/Day: Years:	Education Level:	
Drugs:Amount/Day:Years:	Marital Status: Single MarriedWidowed Divorced	
Glasses: Contacts: Reading:	Religious Preference:	
Blind: Legally Blind:	Physical Impairment/ADL: AmbulatoryW/C	
Dentures: Full Partial	WalkerCaneBedridden	
Prosthetic Devices: Deformities	Contractures Amputations	

Unit 4: Safely Lifting, Moving & Positioning Patients (Chapter 18)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Describe the anatomy and function of the musculoskeletal system.
- 2. Explain the importance of proper body mechanics, alignment, and position change for both patient and nurse.
- 3. Discuss the principles of safe body movement and positioning, giving an appropriate example for each principle.
- 4. Identify ways to maintain the patient's correct body alignment in bed or in a chair.
- 5. Describe the proper method for transferring a patient between a wheelchair and a bed.

Clinical Practice

- 1. Correctly position a patient in the following positions: supine, prone, Fowler, and Sims.
- 2. Assist patients to sit up in bed.
- 3. Demonstrate complete passive range-of-motion (ROM) exercises for a patient.
- 4. Correctly transfer a patient from a wheelchair to a bed.
- 5. Transfer a patient from a bed to a stretcher.
- 6. Demonstrate the correct techniques for ambulating a patient and for breaking a fall while ambulating.

Learning Content

Structures Involved in Positioning and Moving Patients

- Bones
- Joint
- Bursae
- Skeletal Muscles
- Tendons
- Ligaments □ Cartilage

Functions of Bones for Positioning and Moving Patients Functions of Muscles for Positioning and Moving Patients System Changes with Aging

Principles of Body Movement for Nurses

- Obtain Help Whenever Possible
- Use Leg Muscles
- Provide Stability for Movement
- Use Smooth Coordinated Movements
- Keep Loads Close to the Body
- Keep Loads Near the Center of Gravity
- Pull and Pivot

Principles of Body Movement for Patients

- Hazards of Improper Alignment and Positioning
- Pressure Injuries

Positioning

- Moving Patients Up in Bed
- Therapeutic Exercises
- Lifting and Transferring
- Transferring Devices

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Older Adult Considerations

- Promoting Wellness (Dahlkemper, 2020, Chapter 6)
- Safety (Dahlkemper, 2020, Chapter 7)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Positioning the Patient,
- Moving the Patient Up in Bed,
- Passive Range of Motion,
- Transfer to a Wheelchair and Stretcher,
- Ambulating the Patient

Unit 5: Hygiene/Personal Care/Skin Care and Pressure Injury Prevention (Chapter 19)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Describe the structure and function of the integumentary system.
- 2. Describe factors that influence personal hygiene practices.
- 3. List the skin areas most susceptible to pressure injuries.
- 4. Discuss risk factors for impaired skin integrity.
- 5. Discuss the purposes of bathing.
- 6. Describe how hygienic care for the younger and the older patient differs.

Clinical Practice

- 1. Describe how to prevent and stage a pressure injury.
- 2. Perform a complete bed bath and back rub.
- 3. Provide oral care for an unconscious patient.
- 4. Prepare to provide personal care for a patient, including nail care, mouth care, perineal care, and shaving.
- 5. Assist a patient with the care of contact lenses.
- 6. Instruct a patient in ways to prevent buildup of cerumen in the ears.

Learning Content

Overview of the Structure and Function of the Integumentary System

- Structure of the Skin
- Function of Skin and Structures

 Changes in System due to Aging

Factors Affecting Hygiene

- Skin and Pressure Injuries
- Bathing
- Therapeutic Baths
- Back Massage
- Perineal Care
- Mouth Care
- · Hair Care
- Shaving
- Nail Care
- Eye Care
- Ear Care

Application of the Nursing Process

- Assessment
- Nursing Diagnosis □ Planning
- Implementation

Older Adult Considerations

• Common Clinical Problems (Dahlkemper, 2016, Chapter 17)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

Hygiene Care

Unit 6: Patient Environment and Safety (Chapter 20)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Discuss nursing responsibilities for environmental management.
- 2. Identify common noises in health care facilities and ways to minimize their effects on patients.
- 3. Explain the importance of neatness and order in the patient's environment.
- 4. Describe methods to prevent mechanical and thermal accidents and injury in health care facilities and the home.
- 5. Discuss the various forms of bioterrorism, safety measures to be taken, signs and symptoms of agents used, and measures to treat or contain the threat.
- 6. Discuss the principles for using protective devices.
- 7. Demonstrate knowledge of the legal implications of using protective devices.

Clinical Practice

- 1. Discuss how the health care facility's environment affects your patient.
- 2. Using correct technique, make an unoccupied and an occupied bed.
- 3. Explain, according to your facility's procedures, how to clean up a biohazard spill.

- 4. Discuss your clinical facility's response plan to a bioterrorism threat.
- 5. Given an emergency scenario, practice triaging the victims.
- 6. Correctly apply an extremity immobilizer.

Learning Content

Factors Affecting the Environment

- Temperature
- Ventilation
- Humidity
- Lighting
- Odor
- Noise
- Interior Design
- Neatness ☐ Privacy

Patient Unit

- Patient Room Assembly
- Beds
- Bed Position
- Making

Safety

- Hazards
- Falls
- Burns
- Smoking
- Fire
- Hazardous Material
- Biohazards
- Bioterrorism
- Poison

Protective Devices

- Legal Implications
- Alternatives
- Principles of Protective Devices
- Documentation

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning

• Implementation

Gerontology Considerations

- Activity, Rest, and Sleep as Criteria for Health (Dahlkemper, 2020, Chapter
 9)
- Safety (Dahlkemper, 2020, Chapter 7)
- Unique Aspects of Physiological Assessments in Older Adults (Dahlkemper, 2020, Chapter 15)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills:

- Making an Unoccupied Bed,
- Making an Occupied Bed, and
- Applying Protective Devices

Unit 7: Lab Testing (Chapter 24)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Discuss appropriate psychosocial care and education for patients undergoing diagnostic tests or procedures.
- 2. Prepare to perform a capillary glucose test, a venipuncture, a throat culture, an electrocardiogram, a urine dipstick test, and a stool for occult blood test.
- 3. Describe each of the categories of tests that are commonly performed.

4. Explain factors to be considered when an older adult is to undergo diagnostic testing.

Clinical Practice

- 1. Provide pretest and posttest nursing care, including appropriate education, for patients undergoing diagnostic tests and procedures.
- 2. Attend to psychosocial concerns of patients undergoing various diagnostic testing.
- 3. Perform a random blood glucose test using capillary blood and a glucometer.
- 4. Correctly use Standard Precautions whenever obtaining or handling specimens for diagnostic tests.
- 5. Correctly fill out laboratory and test requisition forms.

Learning Content

Overview of Structure and Function Related to the collection of diagnostic testing

- Assessment of area of which specimen will be collected
- Structures of anatomy that specimens can be collected

Patient unit

- Supplies needed
- Patient positioning
- How specimen should be sent to the lab

Safety

- Needle sticks
- Environment
- Patient education

Application of the nursing process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Gerontology Considerations

- Due to normal aging process, lab values may differ from younger adults
- Older adults who are repeatedly kept NPO for various diagnostic testing are susceptible to dehydration and electrolyte imbalances.
- Older adults with a cardiac history must be monitored carefully for signs of vasovagal response.

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process

- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills:

- Phlebotomy and obtaining blood samples with a vacutainer system
- Performing a capillary blood test: blood glucose
- Performing a urine dipstick test
- Obtaining a stool specimen for occult blood culture, or ova and parasites
- Obtaining culture specimens: throat and wound

Unit 8: Medication Administration: Oral, Topical, Inhalant, Parenteral (Chapter 34)

Unit 9: Intravenous Medications, Intradermal, Subcutaneous, Intramuscular (Chapter 35)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Describe the legal and professional responsibilities of the licensed practical nurse/licensed vocational nurse (LPN/LVN) related to medication administration.
- 2. Identify all of the parts of a complete medication order.
- 3. Compare and contrast the hard copy medication administration record (MAR) and the electronic medication administration record (eMAR).
- 4. Discuss the types of technology used in hospitals and their effect on medication errors.
- 5. Identify the advantages and disadvantages of the unit-dose system and the prescription system.
- 6. Summarize four principles to be followed when giving a medication through a feeding tube.
- 7. Analyze special considerations when administering oral and topical medications to an older adult.
- 8. Evaluate your responsibilities in the event of a medication error.
- 9. Identify the principles for safe and effective administration of intradermal, subcutaneous, and intramuscular injections.

- 10. List the routes used for administering parenteral medications and the advantages and disadvantages of each route for pediatric, adult, and older adults.
- 11. Summarize the signs and symptoms of anaphylactic shock.

Clinical Practice

- 1. Recognize the different types of medication orders (e.g., scheduled or routine, PRN, stat, and one time).
- 2. According to the facilities policy, identify the times used for scheduled medications (i.e., daily, BID, TID, and QID).
- 3. Demonstrate the accounting for doses of controlled medications that must be withdrawn from the locked narcotics cabinet or dispensed from an automatic dispensing unit.
- 4. Prepare and apply topical medications such as eye ointments, eardrops, nasal medications, transdermal patches, and topical ointments.
- 5. Write a care plan for a patient who is receiving medication that includes patient-specific data, an identified nursing diagnosis, and interventions that you would use.
- 6. Give oral and topical medications using the Six Rights of Medication Administration.
- 7. Teach a patient to use a metered-dose inhaler.
- 8. Instill a vaginal and a rectal suppository safely and effectively.
- 9. Document medication administration and your patient's response to the therapy.
- 10. Using clinical judgment, choose the appropriate syringe and needle for the type of injection ordered.
- 11. Follow Standard Precautions when administering injections and disposing of used equipment.
- 12. Aseptically and accurately withdraw and measure the ordered dose of a medication from a vial or an ampule.
- 13. Demonstrate reconstitution of a medication from a powder.
- 14. Demonstrate the correct method for drawing up two types of medications, including insulin, in one syringe.
- 15. Use the Six Rights of medication administration, including checking for patient drug allergies.
- 16. Prepare and administer an intradermal injection, using the Six Rights and aseptic technique.
- 17. Correctly prepare and administer a subcutaneous injection with 100% accuracy.
- 18. Correctly prepare and administer an intramuscular injection with 100% accuracy.
- 19. Locate the appropriate site on a patient to give an intradermal, subcutaneous, or intramuscular injection by identifying correct anatomic landmarks.
- 20. Evaluate your documentation of injections after administration.

Learning Content

Nursing Responsibilities Medication Administration

• Promotion of Safety - Six Rights

Medication Orders

- Types of Orders
- Regularly Schedules / Routine Medication Orders

- Dosage of Medications
- Routes of Oral and Topical Medication Administration
- Medication Administration and Technology

 Medication Administration Record

Medication Administration Systems

- Unit Dose System
- Prescription System
- Preparation Controlled Substances from Dispenser

Topical Drugs

• Ointments

Suppositories

Oral Medication

• Tablets, capsules, powders

Eye and Ear Medications

- Ophthalmic drops, ointments
- Positioning

Nasal

Medication

Positioning

Inhalation Medication

- Metered
- Use of Spacer
- Vaginal Medication

Rectal Medications

Principles of Parenteral Injections

Routes for Parenteral Medications

- Intradermal Route
- Subcutaneous Route
- Intramuscular Route

Injection Equipment

- Types of Syringes
- Measurement Scales
- Needle Gauge and Length
- Preventing Needle Sticks
- Syringes and Needle Selection Preparing the Syringe for Use

Parenteral Solutions

- Using a Medication Ampule
- Using a Medication Vial
- Reconstitution of a Drug
- Compatibility of Medications
- Injection of Medications

Anaphylactic Shock

Medication Errors

- Reporting
- Near Miss Reporting

Gerontology Considerations

- Physiological Assessments in Older Adults (Dahlkemper, 2020, Chapter 15)
- Pharmacology in Older Adults (Dahlkemper, 2020, Chapter 20)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Administering Oral Medications
- Instilling Eye Medications
- Instilling Otic Medication
- Inserting Rectal Suppositories
- Administering Intradermal Injection
- Administering Subcutaneous Injection
- Administering Intramuscular Injection
- Preparing a Syringe for Use
- Withdrawing Medication from a Vial
- Combining Insulins
- Giving a Z-Track Injections

Unit 10: Nutrition Therapy, Assisted Feeding (Chapter 26,27)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient

Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Identify the nurse's role related to nutritional therapy and special dietary needs.
- 2. Compare and contrast a full liquid diet with a clear liquid diet.
- 3. Explain the different dietary modification levels: pureed, mechanically altered, advanced, and regular.
- 4. Describe health issues related to nutrition.
- 5. List disease processes that may benefit from nutritional therapy.
- 6. Verbalize the rationale for assisted feedings and tube feedings.
- 7. List the steps for the procedure to insert, irrigate, and remove a nasogastric tube.
- 8. Discuss the procedure for tube feeding.
- 9. Identify the medical rationale and nursing care for a patient receiving peripheral parenteral nutrition (PPN) and total parenteral nutrition (TPN).
- 10. Understand the possible complications associated with modified diets, tube feedings, PPN, and TPN.

Clinical Practice

- 1. Using therapeutic communication, assist a patient who requires a special diet.
- 2. Develop a patient education plan for nutritional therapy.
- 3. Demonstrate insertion, irrigation, and removal of a nasogastric tube.
- 4. Demonstrate feeding a patient through a nasogastric tube or percutaneous endoscopic gastrostomy (PEG) tube.
- 5. Know your facility's policies, procedures, and protocols for nutrition-related problems and complications with tube feedings.

Learning Content Goals of Nutritional Therapy The Postoperative Patient **Health Issues Related to Nutrition**

- - Feeding and Eating Disorders Anorexia Nervosa
 - Obesity
 - Pregnancy
 - Substance-Related and Addictive Disorders

Disease Processes that Benefit from Nutritional Therapy

- Cardiovascular Disease
- **Diabetes Mellitus**
- HIV/AIDS

Assisted Feeding

- Nasogastric and Enteral Tubes
- Percutaneous Endoscopic Gastrostomy or Jejunostomy Tubes
- Feeding Tubes and Pumps

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Older Adult Considerations

• Nutrition (Dahlkemper, 2020, Chapter 8)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Assisting a Patient with Feeding
- Nasogastric Tube/J-Tube/G-Tube Feeding
- Nasogastric Tube Irrigation
- Nasogastric Tube Removal
- Insertion NGT
- Using a Feeding Pump
- Administrating Medications via feeding tube

Unit 11:

End-Of-Life/Resuscitation (Chapter 15)
Admitting, Transferring, and Discharging Patients (Chapter 23)
Complementary and Alternative Therapies (Chapter 32)

A. End-Of-Life/Resuscitation (Chapter 15)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Correlate the stages of grief and of dying with their associated behaviors and feelings.
- 2. Discuss the concept of hospice care.
- 3. Identify three common fears a patient is likely to experience when dying.
- 4. Describe common symptoms related to physiologic changes at end-of-life stages.
- 5. List the common signs of impending death.
- 6. Illustrate the difference between the patient's right to refuse treatment and assisted suicide.
- 7. Understand ethical guidelines in the *Code of Ethics for Nurses* regarding the patient's right to refuse treatment, euthanasia, and assisted suicide.

Clinical Practice

- 1. Identify ways in which you can support or instill hope in the terminally ill patient and his family.
- 2. Demonstrate compassionate therapeutic communication techniques with a terminally ill patient and/or his family.
- 3. Describe one nursing intervention for comfort care that can be implemented in a hospital or a nursing home for a dying patient for each of the following problems: pain, nausea, dyspnea, anxiety, constipation, incontinence, thirst, and anorexia.
- 4. Explain the reason for completing an advance directive to a terminally ill patient, as well as what "health care proxy" and "DNR/DNI".
- 5. Prepare to provide information regarding organ or tissue donation in response to family questions.
- 6. Assist with postmortem care for a deceased patient.

Learning Content

Nurses Attitudes Toward End-of-Life Care

• Change, Loss, and Grief

Death and Dying

- End-of-Life Care within Health Care System
- Hospice and Palliative Care □ The Dying Process

Nurses and the Dying Process

Common Problems of the Dying Patients and Nursing Management

Signs of Impending Death

- Physical Signs
- Psychosocial and Spiritual Aspects of Dying

Legal and Ethical Aspects of Life-and-Death Issues

- Advanced Directives
- Euthanasia
- Adequate Pain Control

 Organ and Tissue Donation

Postmortem (After Death) Care

Autopsy

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Older Adult Considerations

• End-of-Life Issues (Dahlkemper, 2020, Chapter 10)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Post-Mortem Care
- Documentation

B. Admitting, Transferring, and Discharging Patients (Chapter 23)

Student Learner Objectives

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles of Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Differentiate between routine and emergency admissions.
- 2. Describe the role of the admitting department.
- 3. Identify the elements included in a patient's orientation to the nursing unit.
- 4. Discuss five types of information that must be included in the discharge form sent with a patient going to another facility.
- 5. Delineate the necessary information to include on a patient's discharge instructions when the patient is going directly home.
- 6. Explain the procedure for pronouncing and recording a patient's death.

Clinical Practice

- 1. Orient a patient to the patient unit and the hospital.
- 2. Assist with the performance of an admission assessment.
- 3. Assist with the transfer of a patient to another unit.
- 4. Use correct communication techniques to ensure safe handoff of a patient to another nurse, department, or facility.
- 5. Interact with the social worker regarding the discharge needs of an assigned patient.
- 6. Demonstrate appropriate interaction with the family of a patient who has died.

Learning Content

Types of Admissions

• Routine Admissions

Emergency Admissions

Admission Process

- Preadmission Procedures/Requirements
- Authorization for Admission
- Admitting Department Function
- Orientation to Nursing Unit
- Initial Nursing Assessment
- Initiating the Medical Record
- Patient Reaction to Admission

Patient Transfer to Another Hospital

Discharging Patient

Extended Care/Rehab Discharge

Discharge to Home

Discharge w Home Health □ Discharge Against Medical Advice

Death of a Patient

- Autopsies
- Organ Donation

- Providing Support
- Pronouncement of Death

Gerontology Considerations

- Environments of Care (Dahlkemper, 2020, Chapter 11)
- Rehabilitative and Restorative Care (Dahlkemper, 2020, Chapter 19)
- Psychosocial Assessment (Dahlkemper, 2020, Chapter 17)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process
- Case study reviews
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

- Admitting
- Transferring
- Discharging Patients

C. Complementary and Alternative Therapies (Chapter 32)

Student Learner Objectives

After completing this unit, the student should be able to utilize beginning critical thinking/clinical reasoning skills in implementing the nursing roles as Provider of Patient Centered Care, Member of the Healthcare Team, Patient Safety Advocate, and Member of the Profession.

Theory

- 1. Discuss the use of complementary health approaches (CHAs) in integrative medicine.
- 2. Consider each therapy that is considered a part of CHAs.
- 3. Examine five commonly used complementary health approaches.
- 4. Contrast four mind and body interventions.
- 5. Direct patients to information needed to make a decision on whether to use an herbal remedy.
- 6. Describe the desired outcome of spinal manipulation during chiropractic treatment.

Clinical Practice

- 1. Assist patients in using relaxation and imagery.
- 2. Assess the use of complementary health approaches by assigned patients.
- 3. Direct patients to information about complementary health approaches.

Learning Content

- Complementary health approaches are used along with or instead of conventional medical treatments.
- NCCIH is researching the efficacy of various therapies.
- There are two main categories of complementary health approaches: mind and body interventions and natural products.
- Homeopathic medicine, naturopathic medicine, traditional Chinese medicine, traditional healers, and Ayurveda are examples of complementary health approaches that are not part of mind and body interventions or natural products.
- Herbs and other supplements may interact with prescription medications.
- Many herbs may be taken safely.
- Be prepared to direct patients to information about complementary health approaches.
- Encourage the patient to check the qualifications and certification of a CHA practitioner.

Application of the Nursing Process

- Assessment
- Nursing Diagnosis
- Planning
- Implementation

Older Adult Considerations

• Rehabilitation and Restorative Care in the Older Adult (Dahlkemper, 2020, Chapter 19)

Learning Activities

- Readings from required and recommended texts
- Related topics and open skills labs to review system and the nursing process Case study reviews.
- Critical thinking activities
- Lecture/Discussion
- Clinical Reasoning Questions
- Study Questions
- Workbook exercises
- NCLEX-Style chapter review question assignment

Skills

Communication Pharmacology

Unit 1 – 11: Medical Terminology

This will be the pre-lecture activities assigned in Blackboard, all instruction and learning activities will be found there.

Student Learning Outcomes

Upon completion of this unit, the student will be expected to utilize beginning critical thinking/clinical reasoning skills in understanding the use of basic medical terminology and abbreviations.

- 1. Recognize prefixes, suffixes, word roots, and combining forms.
- 2. Demonstrate understanding of the rules for combining word parts to write medical terms correctly.
- 3. Identify and distinguish abbreviations.
- 4. Demonstrate understanding of the primary accent used in pronunciation.
- 5. Match medical specialists with the areas in which they specialize.
- 6. Identify selected medical conditions associated with each specialty.
- 7. Identify the prefixes, combining forms and suffixes for colors, procedures, symptoms, and diagnoses, diagnostic studies, directional terms, anatomical terms.
- 8. Build and analyze medical terms with combining forms and suffixes.
- 9. Identify and write correct term when presented with its definition or match terms with their definitions.
- 10. Identify and write terms for selected structures, pathologies, and interventions of each body system.
- 11. Spell medical terms correctly