



RNSG 2101 Care of Children & Their Families (PT)

Fall 2021, 16 weeks

Mon 1300-1500 – Steam # 238

Course Facilitator: René Lovett, MSN, RN, CPNP

rlovett@com.edu

Office Hours: Mon 1100-1300, Tues 1100-1430 and Wed 0800-1000 (virtual)

Co-Faculty: Karen Bell, MSN, RN, CPNP

kbell22@com.edu

Office Hours:

Tues 1200-1600 and Wed 0900-1230

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.

Required Textbook:

Hockenberry, M. J., & Wilson, D. (2017). *Wong's essentials of pediatric nursing* (10h ed.). St. Louis, MO: Mosby/Elsevier.

Elsevier (2019). Sherpath for Pharmacology (Lilley version), 9th edition. St. Louis: Elsevier, Inc.*

Elsevier Adaptive Quizzing for Hockenberry Wong's Essentials of Pediatric Nursing (eCommerce Version), 10th Edition:

COURSE ID 157777_kbell689_1001

INSTRUCTOR Karen Bell

Elsevier Adaptive Quizzing for the NCLEX-RN Exam (36-Month) - Classic Version, 2nd Edition

COURSE ID 160224_amccreight2_1003

INSTRUCTOR Amanda Ordonez

Recommended textbooks:

All previously recommended textbooks and those on reserve in the college library.

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.

All students will need **HESI Next Generation Student Access**.

Enrollment Video link: https://elsevier.zoom.us/recording/share/cYf1xINqkcKYrJ-ZoI240QLKsQNRJ_VLbXPOsxx45WwlumekTziMw
COURSE ID 159640_amccreight2_3001

All new students in Level 1 will need to enroll. Any student who is a readmission student may need to enroll. Students who enrolled Fall 2018 will have access throughout the curriculum.

Remediation Video Instruction link:

<https://evolve.elsevier.com/studentlife/video/student-view-of-hesi-next-generation-remediation.html>

Levels 1-3 will be required to complete the Essential Packets in HESI Next Generation for any total score less than 850. Level 4 students will be required to complete the Essential Packets for a score less than 900

Alternative Online Classroom requirements (due to classroom restrictions due to the COVID-19 pandemic precautions enacted by the Governor of the State of Texas and College of the Mainland administration):

- A desktop or laptop computer with the following specifications (PC or Mac):
 - o 2 GB Free HDD space
 - o 4 GB RAM Required, 8 GB recommended
 - o CPU equivalent to Intel i3 2+GHz
 - o Operating System:
 - MAC OS 10.13, 10.14, or 10.15 ONLY, or
 - Windows 10 (version 1809 or 1903) ONLY
 - Webcam Required
 - Microphone required (cannot be a headset)

Because of the restrictions of our testing applications, these requirements cannot be substituted with tablets or smartphones.

WECM End-of-Course Outcomes

Explain the roles of the professional nurse in caring for maternal/child patients with a variety of health needs; use therapeutic communication; utilizes critical thinking skills and a systematic problem-solving process for providing care to maternal/child patients experiencing a variety of health needs.

Course Objectives/Student Learning Outcomes

Upon completion of this course, the student will:

1. Apply knowledge in the humanities, psychosocial, natural, biological, and nursing sciences as a framework for promoting homeostasis in the pediatric patient and family experiencing common health alterations/disruptions.
2. Apply the nursing process by delivering and documenting safe and effective therapeutic patient centered nursing care based on principles utilizing evidence based practice with informatics, technology and procedures in primary, secondary, and tertiary settings to promote health by assisting the pediatric patient and family with common health alterations/disruptive factors/disequilibria/stressors to achieve, improve, or maintain an optimal level of wellness.
3. Examine the roles of the associate degree nurse as Member of a Profession, Provider of Patient Centered Nursing Care, Patient Safety Advocate, and Member of a Health Care Team which are utilized in caring for the pediatric patient and family in health and illness.
4. Apply national patient safety goals and effective therapeutic nursing care, based on principles and procedures from the humanities, psychological, biological, and nursing sciences, nutrition, and pharmacology to pediatric patients and their families experiencing common health alterations/disruptions.
5. Analyze basic principles and techniques of interpersonal communication in patient centered caring therapeutic interactions with culturally diverse pediatric patients and families at various stages of the lifespan, experiencing common health alterations/disruptions along the wellness- illness continuum in a variety of settings.
6. Identify fundamental principles of patient care management when coordinating and collaborating with members of the health care team while providing therapeutic patient centered nursing care for culturally diverse pediatric patients and their families with common health alterations/disruptions.
7. Develop and implement teaching-learning plans for culturally diverse pediatric patients and their families with common health alterations/disruptions, utilizing evidenced based practice literature concerning health promotion, maintenance, and restoration.
8. Utilize clinical data and evidence-based literature as a basis for decision making in nursing practice when providing therapeutic nursing interventions to the pediatric patient and family experiencing common health alterations/disruptions.
9. Demonstrate professional nursing responsibility for personal/professional development by seeking out self-directed learning experiences to meet identified strengths and weaknesses as a member of the profession.
10. Apply the practice of nursing according to Legal and Ethical Standards of Practice within the parameters of the law, Differentiated Essential Competencies (DEC), and while maintaining safe practice.
11. Demonstrate knowledge of accurate calculations, as well as knowledge of actions, indications, side effects, and nursing implications of specific drugs for pediatric patients with common health alterations/disruptions with a focus on safety factors and safe practice
12. Identify health care and economic resources available to assist pediatric patients and their families experiencing common health alterations/disruptions.
13. Recognize a pediatric patient's spirituality and spiritual factors as it relates to the pediatric patient and family experiencing health alterations and help facilitate the pediatric patient and family to utilize his/her personal spirituality in reaching homeostasis.

14. Correlate manifestation of cellular dysfunction with human responses to pathophysiological changes in the pediatric patient experiencing health alterations.

Course Policies

Attendance:

See the Attendance Policy in the Nursing Student Handbook.

Tardiness:

See the Attendance Policy in the Nursing Student Handbook.

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 Holly Bankston at 409-933-8520 or hbankston@com.edu. The Office of Services for Students with Disabilities is in the Student Success Center in the student center.

Counseling Statement: 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.

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 6. The last date to withdraw from the 16-week session is November 19. The last date to withdraw for the 2nd 8-week session is December 2.

FN Grading: The FN grade is issued in cases of failure due to a lack of attendance, as determined by the instructor. The FN 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 FN grade is at the discretion of the instructor. The last date of attendance should be documented for submission of an FN 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.

Classroom Conduct Policy/Student Conduct:

Classroom Conduct Policy: College of the Mainland requires that students enrolled at COM be familiar with the Standards of Student Conduct, which can be found in the on-line Student Handbook. <http://www.com.edu/student-services/studenthandbook.php>. Students should always act in a professional manner. Disruptive students will be held accountable according to college policy. Any violations of the Code of Conduct will result in a referral to the Office for Student Conduct and may result in dismissal from this class.

In addition to the Standards of Student Conduct found in the online COM Student Handbook <http://www.com.edu/student-services/student-handbook.php>, nursing students are expected to demonstrate good professional character as defined in in BON Rule 213.27 (http://bon.texas.gov/rr_current/213-27.asp). See Behavior/Conduct in the Nursing Student Handbook.

Academic Dishonesty

Any incidence of academic dishonesty will be dealt with in accordance with college policy and the Student Handbook. Academic dishonesty, such as cheating on exams, is an extremely serious offense. See Behavior/Conduct policy in the Nursing Student Handbook.

Plagiarism

Plagiarism is using someone else’s words or ideas and claiming them as your own. Plagiarism is a very serious offense. Plagiarism includes paraphrasing someone else’s words without giving proper citation, copying directly from a website, and pasting it into your paper, using someone else’s words without quotation marks. An assignment containing any plagiarized

material will receive a **grade of zero** and the student will be referred to the Office of Student Conduct for the appropriate discipline action. See Behavior/Conduct policy in the Nursing Student Handbook.

Avoiding Plagiarism: [Http://www.plagiarism.org](http://www.plagiarism.org)

COVID-19 Statement:

All students, faculty, and staff are expected to familiarize themselves with materials and information contained on the College of the Mainland's Coronavirus Information site at www.com.edu/coronavirus. In compliance with Governor Abbott's May 18 Executive Order, face coverings/masks will no longer be required on COM campus. Protocols and college signage are being updated. We will no longer enforce any COM protocol that requires face coverings. We continue to encourage all members of the COM community to distance, when possible, use hygiene measures, and get vaccinated to protect against COVID-19. Please visit [com.edu/coronavirus](http://www.com.edu/coronavirus) for future updates.

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).

Course Assignments/Requirements:

1. Quizzes (4) - Elsevier Adaptive Quiz (EAQ): Assesses knowledge and application of content integrated within the course. Students will complete quizzes as assigned, The quizzes are multiple choice, multiple answer, and alternative-style questions. The student will have one attempt to complete each EAQ quiz, which will be averaged for the EAQ average grade.
2. Unit Exams (4) - Assess knowledge and understanding of incremental and overall course content. Exams will use multiple choice, multiple answer, and alternative style questions as indicated to follow NCLEX-RN testing format. If a student receives below a 75% on any exam, he/she should schedule a counseling appointment with the instructor.
3. Comprehensive final exam (1) – Assesses overall knowledge and understanding of complete course content. Exam will use multiple choice, multiple answer, and alternative style questions as indicated to follow NCLEX-RN testing format.
4. Sherpath Pharmacology Lessons: Assesses knowledge and application of selected pharmacologic content. Students must complete each required lesson by the due date. You will have **one attempt** for each Pharmacology Lesson. Failure to submit a lesson will result in a grade of zero for that lesson. The scores for **all required lessons** will be averaged for your Pharmacology Lesson grade.
6. Remediation: All students scoring < 75% on Unit Exams and < than an 850 on the HESI will be required to remediate. The steps and link are provided below:

<https://evolve.elsevier.com/studentlife/video/student-view-of-hesi-next-generation-remediation.html>

	%
Unit Exams 1*	15
Unit Exam 2*	15
Unit Exam 3*	15
Unit Exam 4*	15
HESI Final Exam*	15
Exam Total	75
Sherpath Lessons**	10
EAQ**	15
TOTAL	100
* $\geq 75\%$ exam average required to pass the course	
**Weighted assignments calculated only after 75% exam average met	

Grading Scale

A= 90-100.00

B=80-9.99

C=75-9.99

D=60-74.99

F= < 60

*A minimum final grade of “C” is required to pass this course. All course All assignments are expected to be completed and submitted on the specified due date. See Late Assignments policy in the Nursing Student Handbook.

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. See Grade Determination & Calculation in the Nursing Student Handbook.

Concerns/Questions

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 the Course Facilitator. If, after discussing your concerns with the Course Facilitator, you still have questions, please contact Director of Nursing Amanda Ordonez at (409) 933-8425 or mordonez@com.edu.

See the Student Concerns Policy in the Nursing Student Handbook.

Success Tips for Students

1. Schedule time to study based on the difficulty of the content. Use this table as a guide:

Course Difficulty	Study Hours Per Week Per Hour in Class
High Difficulty Course	3 hours
Medium Difficulty Course	2 hours
Low Difficulty Course	1 hour

http://www.usu.edu/arc/StudySmart/pdf/estimating_study_hours.pdf

2. Read assignments before class or clinical. Here are some strategies for getting the most out of your college textbooks:

- 4 Steps to Reading a Textbook:
<http://www.studyright.net/blog/4-steps-to-reading-a-textbook-quickly-and-effectively/>
- Active Reading Strategies:
<http://www.princeton.edu/mcgraw/library/for-students/remember-reading/>
- The Reading Cycle: Plan-Do-Review
<http://www2.swccd.edu/~asc/lrnglinks/txtrdg.html>
- How to Read Your Textbooks More Efficiently College Info Geek (video) <https://www.youtube.com/watch?v=tgVjmFSx7rg>
- 5 Active Reading Strategies for Textbook Assignments College Info Geek (video) [5 Active Reading Strategies for Textbook Assignments - College Info Geek](#)

ANA Scope and Standards of Practice

Students are expected to adhere to established ANA Scope and Standards of Practice (2015). (See Student Handbook and Clinical Evaluation Tool for detailed explanation of standards.)

Student Handbooks

Students are expected to adhere to all policies outlined in the College and Nursing Program student handbooks.

Syllabus Revisions

Faculty reserves the right to make changes to the syllabus as deemed necessary.

The Speaking, Reading, and Writing Center:

The Tutoring Center provides free tutoring services to students, staff and faculty seeking assistance for writing, reading and oral presentations for academic and non-academic assignments/projects. Located in the Technical Vocational Building, Room 1306, the center provides face-to-face and online tutoring sessions in a welcoming environment. Appointments can be made in person, or on the center scheduler at com.mywconline.com, or by clicking “The Tutoring Center” icon on the COM website.

Statement of Eligibility for an Occupational Licensure:

Effective September 1, 2017, HB 1508 amends the Texas Occupations Code Section 53 that

requires education providers to notify potential or enrolled students that a criminal history may make them ineligible for an occupational license upon program completion. The following website provides links to information about the licensing process and requirements:
https://www.bon.texas.gov/licensure_eligibility.asp.

Should you wish to request a review of the impact of criminal history on your potential Vocational Nurse License prior to or during your quest for a degree, you can visit this link and request a “Criminal History Evaluation”: https://www.bon.texas.gov/licensure_endorsement.asp This information is being provided to all persons who apply or enroll in the program, with notice of the requirements as described above, regardless of whether or not the person has been convicted of a criminal offense. Additionally, HB 1508 authorizes licensing agencies to require reimbursements when a student fails to receive the required notice.

Course Content

Unit 1: Overview of Pediatric Nursing

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Describe five broad functions of the pediatric nurse in promoting the health of children.
2. Analyze the role of the pediatric nurse in collaborating with the patient, family, community, and the interdisciplinary health care team to promote health/wellness and manage acute and chronic health problems, illness, and disabilities.
3. Utilize major developmental theories affecting the teaching/learning process and national patient safety goals when planning teaching plans for the pediatric patient and family.
4. Describe major trends in growth and development.
5. Explain the alterations in the major body systems that take place during the process of growth and development.
6. Discuss the development and relationships of personality, cognition, language, morality, spirituality, and self-concept.
7. Prepare a child for a physical examination based on his or her developmental needs.
8. Perform a comprehensive physical examination in a sequence appropriate to the child's age.
9. Recognize expected normal findings for children at various ages.
10. Compare and contrast different family structures, parenting styles, and cultural backgrounds and their impact on child development.
11. Identify different family structures found in the United States.
12. Discuss the effect of family size and configuration on personality development.
13. Explain various parenting behaviors such as parenting styles, disciplinary patterns, and communication skills.
14. Describe the subcultural influences on child development in the areas of socioeconomic class, poverty, religion, and schools.

Learning Content

- I. Pediatric Nursing
 - A. Philosophy of Care
 - B. Role of the Pediatric Nurse
 - C. Overview of Major Developmental theories
 - D. Health and Developmental Assessment
- II. Normal growth and developmental milestones
 - A. Infants
 - B. Toddlers
 - C. Preschoolers
 - D. School-aged children
 - E. Adolescents
- III. Anticipatory guidance for each of the above age groups
- IV. Influences on Child Development

- A. Family structure
- B. Parenting style
 - i. Cultural background

Required Learning Activities

Required reading: Wong, 10th ed., Ch 1 & 3

Unit 2: The Hospitalized Child/Functions of Play

Unit Student Learner Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Identify communication strategies for communicating with children of different age groups.
2. Describe four communication techniques that are useful with children.
3. Utilize age appropriate communication strategies including written, verbal, and nonverbal communication and information technologies when providing care to the hospitalized child.
4. Demonstrate age appropriate interview techniques when caring for the hospitalized child.
5. Explain common reactions to hospitalization based on the child's age and anticipatory guidance for parents of hospitalized children.
4. Analyze the functions and types of play.
5. Outline methods to incorporate play into hospital procedures for each of the following age groups: infant, toddler, preschooler, school-aged child, and adolescent.

Learning Content

- I. Communication strategies
 - A. Infant
 - B. Toddler
 - C. Preschooler
 - D. School-aged child
 - E. Adolescent
- II. Interview techniques
 - A. Infant
 - B. Toddler
 - C. Preschooler
 - D. School-aged child
 - E. Adolescent
- III. Reactions to hospitalization and anticipatory guidance
 - A. Infant
 - B. Toddler
 - C. Preschooler
 - D. School-aged child
 - E. Adolescent
- IV. Play
 - A. Types
 - B. Function
 - C. Strategies to incorporate into play.

V. Medication Administration for different ages

- A. Oral
- B. IM
- C. IV

Required Learning Activities

Required reading: Wong, 10th ed., Ch 3 & pages 602-619

Unit 3: Health Promotion/Common Health Problems**Unit Student Learner Outcomes**

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Explain health promotion/wellness factors appropriate for each of the following age groups: infant, toddler, preschooler, school-aged child, and adolescent.
2. Apply knowledge of common health alterations/disruptions/illness/disequilibria associated with each of the following age groups: infant, toddler, preschooler, school-aged child, and adolescent to promote health and manage acute and chronic health problems/diseases and disabilities.
3. Identify the leading causes of death in each of the above age groups and associated prevention strategies.
4. As a provider of patient centered care, collaborate with the patient, family, and other health care professionals providing leadership in formulating goals and a plan of care for a child with common health alterations/disruptions/diseases/stressors.

Learning Content

- I. Health promotion
 - A. Infant
 - B. Toddler
 - C. Preschooler
 - D. School-aged child
 - E. Adolescent
- II. Common health problems
 - A. Communicable diseases
 1. Infant
 2. Toddler
 3. Preschooler
 4. School-aged child
 5. Adolescent
 - B. Immunizations
- III. Leading causes of death and preventive strategies
 - A. Infant
 - B. Toddler
 - C. Preschooler
 - D. School-aged child
 - E. Adolescent

Required Learning Activities

Required reading: Wong, 10th ed., Chapters 9-16

Unit 4: Special Needs

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal, spiritual and social issues impacting pediatric patients and families experiencing special needs.
2. Identify teaching/learning needs for pediatric patients and families with special needs based on gender, developmental age, and culture in health promotion, maintenance, and risk factor reduction.
3. Utilize current evidence based research to provide patient centered care to pediatric patients and families experiencing special needs.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing special needs.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal, and informatics, and technology) utilized with pediatric patients and families experiencing special needs.
6. Demonstrate clinical reasoning in the application of the nursing process to pediatric patients and families experiencing special needs in achieving, improving, or maintaining an optimal level of wellness.
7. Explore the effects of collaborating with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession - for pediatric patients and families experiencing special needs.
8. Examine the leadership role of the nurse as a member of the profession in assisting pediatric patients and families experiencing special needs to reach a state of homeostasis.
9. Correlate manifestation of cellular dysfunction with pediatric responses to pathophysiological changes occurring in chronic illness, death, cognitive impairment and Downs Syndrome.

Learning Content

- I. Impact on child and family
 - A. Chronic Illness
 - B. Disability
- II. Cognitive impairment
 - A. General concepts
 - B. Nursing care
- III. Down syndrome
 - A. Pathology
 - B. Diagnosis
 - C. Therapeutic management
 - D. Community support
- IV. Sensory impairment
 - A. Hearing
 - B. Visual
 - C. Deaf and blind

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 18

Unit 5: Integumentary Dysfunctions

Student Learner Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal, spiritual and social issues impacting pediatric patients and families experiencing various skin lesions.
2. Identify teaching/learning needs for pediatric patients and families with skin disorders on gender, developmental age, and culture in health promotion, maintenance, and risk factor reduction.
3. Utilize current evidence based research to provide patient centered care to pediatric patients and families experiencing integumentary dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing skin disorders.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal, and informatics, and technology) utilized with pediatric patients and families experiencing skin disorders.
6. Demonstrate clinical reasoning in the application of the nursing process to pediatric patients and families experiencing integumentary dysfunctions in achieving, improving, or maintaining an optimal level of wellness.
7. Explore the effects of collaborating with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession - for pediatric patients and families experiencing skin disorders.
8. Examine the leadership role of the nurse as a member of the profession in assisting pediatric patients and families experiencing integumentary dysfunctions to reach a state of homeostasis.
9. Correlate manifestation of cellular dysfunction with pediatric responses to pathophysiological changes occurring in integumentary dysfunctions.

Learning Content

- I. Integumentary Dysfunctions
 - A. Skin lesions
 - B. Skin of younger children
 - C. Pathophysiology of dermatitis
 - D. Diagnostic evaluation
- II. Infections of the skin (Review)
 - A. Bacterial infections
 - B. Viral infections
 - C. Dermatophytoses (fungal infections)
 - D. Contact dermatitis
 1. Scabies
 2. Pediculosis capitis
 - E. Other dermatological conditions
 1. Diaper dermatitis
 2. Atopic dermatitis (eczema)
 3. Seborrheic dermatitis
 4. Acne
- III. Burns
 - A. Characteristics of burn injury
 1. Extent of injury

2. Depth of injury
3. Severity of injury
- B. Other factors
 1. Pathophysiology
 2. Therapeutic management
- C. General principles
 1. Minor burns
 2. Major burns
- D. Fluid replacement therapy
- E. Care of burn wounds
 1. Medication
 2. Surgical intervention
- F. Sunburn

Required Learning Activities

Required reading: Wong, 10th ed., Pages 398-409.

Unit 6: Neuromuscular Dysfunctions

Unit Student Learning Outcomes

Upon completion of this unit the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing neuromuscular dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing neuromuscular dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing neuromuscular dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing neuromuscular dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing neuromuscular dysfunctions.
6. Demonstrate clinical reasoning in the application of the nursing process to pediatric patients and families experiencing neuromuscular dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member
8. of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing neuromuscular dysfunctions.
9. Examine the role of the nurse in assisting pediatric patients and families experiencing neuromuscular dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Cerebral malformations
 - A. Cranial deformities (microcephaly, craniosynostosis)
 - B. Hydrocephalus
 1. Pathophysiology
 2. Diagnostic evaluation
 3. Therapeutic management

4. Nursing considerations
- C. Cognitive and Sensory impairment
- II. Neuromuscular or muscular dysfunction
 - A. Cerebral Palsy
 1. Pathophysiology
 2. Diagnostic evaluation
 3. Therapeutic management
 4. Nursing considerations
 - B. Spina Bifida (Myelomeningocele)
 1. Pathophysiology
 2. Diagnostic evaluation
 3. Therapeutic management
 4. Nursing considerations

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 30

Unit 7: Endocrine Dysfunctions

Unit Student Learning Outcomes

Upon completion of this unit the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing endocrine dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing endocrine dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing endocrine dysfunctions.
 4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing endocrine dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing endocrine dysfunctions.
6. Demonstrate clinical reasoning in the application of the nursing process to pediatric patients and families experiencing endocrine dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing endocrine dysfunctions.
8. Examine the role of the nurse in assisting pediatric patients and families experiencing endocrine dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Disorders of the Thyroid Gland
 - A. Pathophysiology
 - B. Juvenile Hypothyroidism
 - C. Hyperthyroidism

II. Diabetes Mellitus Type I

III. Pituitary Dysfunction

A. Hyperfunction of Anterior Pituitary

1. Precocious Puberty
2. Acromegaly

B. Hypopituitarism

1. Constitutional Growth Delay

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 28

Unit 8: Musculoskeletal Dysfunctions**Unit Student Learning Outcomes**

Upon completion of this unit the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing musculoskeletal dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing musculoskeletal dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing musculoskeletal dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing musculoskeletal dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing musculoskeletal dysfunctions.
6. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing musculoskeletal dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of nursing – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing musculoskeletal dysfunctions.
8. Examine the role of the nurse in assisting pediatric clients and families experiencing musculoskeletal dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. The Immobilized Child – Pathophysiology & Nursing Care
 - A. Physiologic effects of immobilization
 - B. Psychologic effects of immobilization
 - C. Nursing care of a child in a cast
 - D. Nursing care of a child in Buck and Bryant traction
- II. Congenital Defects – Pathophysiology & Nursing Care
 - A. Developmental dysplasia of the hip
 - B. Congenital clubfoot
 - C. Metatarsus adductus (varus)
- III. Skeletal limb deficiency

- A. Osteogenesis imperfecta
- IV. Acquired Defects
 - A. Kyphosis
 - B. Lordosis
 - C. Scoliosis
- V. Juvenile Rheumatoid Arthritis – Pathophysiology & Nursing Care
 - A. Definition
 - B. Pathophysiology
 - C. Diagnostic evaluation
 - D. Therapeutic management
 - E. Nursing considerations

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 30

Unit 9: Cerebral Dysfunctions

Unit Student Learning Outcomes

Upon completion of this unit the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing cerebral dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing cerebral dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing cerebral dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing cerebral dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing cerebral dysfunctions.
6. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing cerebral dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing cerebral dysfunctions.
8. Examine the role of the nurse in assisting pediatric clients and families experiencing cerebral dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Intracranial Infections
 - A. Bacterial meningitis - Pathophysiology
 - B. Nonbacterial (aseptic) meningitis - Pathophysiology
 - C. Diagnostic evaluation
 - D. Therapeutic management
 - E. Nursing considerations.
- II. Seizure Disorders

- A. Etiology & Pathophysiology
- B. Diagnostic evaluation
- C. Seizure classification
- D. Therapeutic management
- E. Nursing considerations

III. Hyperthermia

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 27

Unit 10: Gastrointestinal Dysfunctions

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing gastrointestinal dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing gastrointestinal dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing gastrointestinal dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing gastrointestinal dysfunctions.
 5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing gastrointestinal dysfunctions.
7. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing gastrointestinal dysfunctions.
8. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing gastrointestinal dysfunctions.
9. Examine the role of the nurse in assisting pediatric clients and families experiencing gastrointestinal dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Dehydration
 - A. Water balance in infants.
 - B. Surface area
 - C. Metabolic rate
 - D. Kidney function
 - E. Fluid requirements
 - F. Types of dehydration
 1. Isotonic dehydration
 2. Hypotonic dehydration
 3. Hypertonic dehydration
- II. Acute and Chronic Diarrhea

- III. Vomiting
- IV. Constipation
- V. Hirschsprung Disease
- VI. Cleft Lip and Cleft Palate
- VII. Pyloric Stenosis
- VIII. Necrotizing Enterocolitis
- IX. Short Bowel Syndrome
- X. Intussusception
- XI. Failure to Thrive

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 22

Unit 11: Genitourinary Dysfunctions

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing genitourinary dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing genitourinary dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing genitourinary dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing genitourinary dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing genitourinary dysfunctions.
6. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing genitourinary dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing genitourinary dysfunctions.
8. Examine the role of the nurse in assisting pediatric clients and families experiencing genitourinary dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Glomerular Disease
 - A. Pathophysiology
 - B. Nephrotic syndrome
 - C. Glomerulonephritis
 - 1. Acute
 - 2. Chronic
- II. Urinary Dysfunction
 - A. Enuresis
 - B. Ureteral Reflux

- C. Epispadias, Hypospadias
- D. Varicocele/ Hydrocele
- E. Undescended testes

III. Inguinal Hernia

IV. Nursing Care

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 26

Unit 12: Respiratory Dysfunctions

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing respiratory dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing respiratory dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing respiratory dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing respiratory dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing respiratory dysfunctions.
6. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing respiratory dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing respiratory dysfunctions.
8. Examine the role of the nurse in assisting pediatric clients and families experiencing respiratory dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Acute Upper Respiratory Tract Infections - Pathophysiology & Nursing Care
 - A. Nasopharyngitis
 - B. Pharyngitis
 - C. Tonsillitis
 - D. Influenza
 - E. Otitis media
 - F. Acute epiglottitis
 - G. Acute laryngitis
 - H. Acute laryngotracheobronchitis
 - I. Acute spasmodic laryngitis (croup)
 - J. Bacterial tracheitis
- II. Infections of the Lower Airway – Pathophysiology & Nursing Care
 - A. Bronchitis

- B. Respiratory syncytial virus (RSV) bronchiolitis
- C. Pertussis

III. Asthma

- A. Pathophysiology
- B. Nursing Care

IV. Cystic Fibrosis

- A. Pathophysiology
- B. Nursing Care

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 21

Unit 13: Cardiovascular Dysfunction

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing cardiovascular dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing cardiovascular dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing cardiovascular dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing cardiovascular dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing cardiovascular dysfunctions.
6. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing cardiovascular dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing cardiovascular dysfunctions.
8. Examine the role of the nurse in assisting pediatric clients and families experiencing cardiovascular dysfunctions to reach a state of homeostasis. Include an explanation of pathophysiology.

Learning Content

- I. Cardiovascular Dysfunction
 - A. Assessment of cardiac function
 - B. Cardiac catheterization
- II. Congenital Heart Disease
 - A. Circulatory changes at birth
 1. Altered hemodynamics
 2. Acyanotic
 3. Hemodynamic characteristics
 - B. Defects with increased pulmonary blood flow
 1. Atrial septal defect
 2. Ventricular septal defect

3. Patent ductus arteriosus
 - C. Obstructive defects
 1. Coarctation of the aorta
 2. Aortic stenosis
 3. Pulmonic stenosis
 - D. Defects with decreased pulmonary blood flow
 1. Tetralogy of Fallot
 - E. Mixed defects
 1. Transposition of the great vessels
 - F. Clinical Consequences of Congenital Heart Disease
 - G. Congestive heart failure
 - H. Hypoxemia
- III. Acquired Cardiovascular Disorders
- A. Rheumatic Fever
 - B. Vascular Dysfunction
 - C. Systemic hypertension
 - D. Kawasaki disease
- III. Nursing Care of the Child and Family with Congenital and Acquired Heart Defect

Required Learning Activities

Required reading: Wong, 10th ed., Chapter 23

Unit 14: Hematologic Dysfunctions

Unit Student Learning Outcomes

Upon completion of this course the student will be expected to utilize beginning clinical reasoning skills to:

1. Assess personal values and potential influence on selected ethical, legal and social issues impacting pediatric patients and families experiencing hematologic dysfunctions.
2. Identify teaching/learning needs based on gender, developmental age, and culture of pediatric patients and families experiencing hematologic dysfunctions in health promotion, maintenance, and risk reduction.
3. Utilize current nursing literature and evidence based research to provide care to pediatric patients and families experiencing hematologic dysfunctions.
4. Identify psychosocial and spiritual responses of pediatric patients and families experiencing hematologic dysfunctions.
5. Examine basic communication techniques (i.e. written, verbal, non-verbal and informational technologies) utilized with pediatric patients and families experiencing hematologic dysfunctions.
 6. Demonstrate clinical reasoning skills in the application of the nursing process to pediatric patients and families experiencing hematologic dysfunctions.
7. Explore effects of collaboration with patients, families, and other health care team members in the implementation of the four roles of a nurse – Provider of Patient Centered Care, Member of Health Care Team, Patient Safety Advocate, and Member of a Profession on pediatric patients and families experiencing hematologic dysfunctions.
8. Examine the role of the nurse in assisting pediatric clients and families experiencing hematologic dysfunctions to reach a state of homeostasis. Include explanation on pathophysiology.

Learning Content

- I. Red Blood Cell disorders
 - A. Iron deficiency anemia
 - B. Sickle cell anemia
 - C. B-Thalassemia (Cooley anemia)
- II. Defects in Hemostasis - Hemophilia
 - A. Factor VII (Hemophilia A/classic) I
 - B. Factor IX (Hemophilia B/Christmas Disease)
- III. Malignant Tumors
 - A. Neuroblastoma
 - B. Osteogenic Sarcoma
 - C. Ewing Sarcoma
 - D. Rhabdomyosarcoma
- IV. Leukemia
 - A. Classification
 - B. Nursing Care of Child and Family with Leukemia
- V. Lymphomas
 - A. Hodgkin disease
 - B. Non-Hodgkin Lymphoma

Required Learning Activities

Required reading: Wong, 10 th ed., Chapters 24 & 25

