



Kingsborough Community College
The City University of New York
Department of Nursing

NUR 2100 – Nursing the Ill Adult I
Hybrid Course Syllabus: Spring 2021

Professor Tamara Bellomo, MSN, RN Professor Course Coordinator Tamara.Bellomo@kbcc.cuny.edu	Professor Joan M. Zaloom, MSN, RN-CNE Assistant Professor Joan.Zaloom@kbcc.cuny.edu
Professor Mary Shannon, MSN, RN-BC Assistant Professor Mary.Shannon@kbcc.cuny.edu	
Credit – Hours: 9 credits, 16 hours	
Pre-requisites	NUR 1700, NUR 1800
Pre-or Co-requisite	BIO 5100 (Must be taken before or with NUR 2100. Students cannot continue in NUR 2100 if they withdraw from BIO 5100)

COURSE DESCRIPTION

Nursing the adult patient with common recurring health problems includes nursing interventions based on physiological and psychological needs of adult patients. This course introduces the students to the nursing care of the adult patient who has common recurring health problems. The physiological and psychological needs of the adult patient are addressed through Quality and Safety for Nurses (QSEN) Initiative incorporating the concepts of patient centered care, teamwork and collaboration, evidence-based practice, safety, quality improvement and informatics; the Nursing Process; and the Categories of Client Needs.

Due the COVID-19 safety restrictions, virtual lecture instruction is conducted synchronously. Laboratory is a combination of synchronous and asynchronous instruction. Clinical experiences are conducted at the clinical facilities. Learning is enhanced through synchronous and asynchronous assignments. Class work for typical week consists of five (5) hours of classroom instruction, three (3) hours of college laboratory/simulation, and eight (8) hours of health agency experiences. It is essential for students to engage in additional practice for further development of skills. Students are encouraged to review NUR 1800 skills using their ATI and CoursePoint resources prior to and during the semester.

STUDENT LEARNING OUTCOMES (SLOs)

Upon completion of NUR 2100, using the Nursing Process in a variety of health care settings to a diverse population of adult patients, the student will:

Course SLOs
1. Demonstrate safe nursing practices while providing care.
2. Implement priority nursing interventions that meet specific patient needs.

3. Use evidence-based practice while delivering nursing care.
4. Include critical thinking strategies to guide clinical decisions while providing nursing care.
5. Interact collaboratively with members of the healthcare team.
6. Explore effective leadership strategies.
7. Operate information and technological systems in the management of care.
8. Demonstrate an understanding of ethical and legal principles relevant to the practice of a registered nurse.

ASSESSMENT MEASURES for COURSE SLOs

Students will perform satisfactorily in the virtual classroom and laboratory and the clinical setting as evidenced by achieving 75% or greater on exams, completion/submission of various course specific written assignments, and demonstration of satisfactory performance on course specific clinical competency and evaluation tools.

ASSESSMENT TECHNOLOGY INSTITUTE (ATI) TESTING

Kingsborough's Nursing Department uses ATI Nursing Education tutorials, testing and remediation each semester. Active participation in ATI assignments and testing is a requirement of this course and will account for 2% of the course grade. Failure to take the proctored exam as scheduled will result in a grade of incomplete and will prevent progression in the program.

ATTENDANCE

Complete participation in class is possible only when students are able to focus attention on the class, therefore entering the virtual classroom after it has begun is disrespectful to Faculty and classmates. Talking out of turn or exhibiting other disruptive behaviors is not tolerated and students will be asked to leave the classroom or lab. Student must have video and audio capability turned on in order to participate in the virtual classroom setting.

All cell phones, smart devices or other multimedia devices that generate sound must be turned off when any member of the academic community enters the virtual classroom.

A student is deemed excessively absent in any course when he or she has been absent 15% of the number of contact hours a class meets during a semester. When a student is excessively absent, a grade of "WU" will be assigned as described in the college catalogue. Attendance at pre and post conference for laboratory experience is required. Absence from either pre or post conference constitutes an absence for the day's experience.

STUDENTS WITH DISABILITIES

Access-Ability Services (AAS) serves as a liaison and resource to the KCC community regarding disability issues, promotes equal access to all KCC programs and activities, and makes every reasonable effort to provide appropriate accommodations and assistance to students with disabilities. Your instructor will make the accommodations you need once you provide documentation from the Access-Ability office (D-205). Please contact AAS for assistance.

EXAM POLICY

All course exams are administered electronically via ExamSoft. Students will be monitored during the exam therefore it is imperative that the student use a computer with audio and video capabilities. The student testing environment should be in an area with adequate Wi-Fi and free from distractions and personal items. [The CUNY Policy on Academic Integrity](#) is strictly enforced throughout the exam. Any suspected violation of this policy may result in removal from the course. Examples of this behavior include, but are not limited to, talking, use of any reading material, hand gesturing, and presence of other individuals in the immediate area. No headphones (both wireless and non-wireless) or any other device that can receive sound is permitted during the exam. There will be no individual exam reviews with faculty members and there will be no group exam review at the end of the exam.

Please be advised that, pursuant to accreditation requirements, the nursing program requires the mandatory use of remote proctoring tools for exams for all students in all nursing courses, regardless of whether a course is given in person or remotely.

EVALUATION

Grades will be calculated according to college and departmental policy as follows:

A+ 97 – 100	B+ 87 – 89	C+ 78 – 79	D+ 66 – 69
A 93 – 96	B 83 – 86	C 75 – 77	D 60 – 65
A- 90 – 92	B- 80 – 82	C- 70 – 74	F < 60

W	Withdrew without penalty
WU	Unofficial withdrawal (counts as failure)
INC	Doing passing work, but missing an assignment or an examination; changes to a “FIN” if work is not made up by the 10th week of the next 12-week session
FIN	Failure as a result of an Incomplete

NUR 2100 grades will be calculated as follows:

Lecture examinations average (3 exams)	66%
Final examination	32%
ATI testing	2%
PrepU Mastery Level assignments	Satisfactory or Unsatisfactory
Written Assignments	Satisfactory or Unsatisfactory
Case Study	Satisfactory or Unsatisfactory
Clinical competency	Satisfactory or Unsatisfactory
Teaching Plan	Satisfactory or Unsatisfactory
Unfolding Nursing Care Plans	Satisfactory or Unsatisfactory
Reflection/Observation Papers	Satisfactory or Unsatisfactory
ATI Targeted exams	Satisfactory or Unsatisfactory

Students are expected to take all exams when scheduled. Exceptions to this rule will be for emergency situations and the faculty must know in advance. Students who do not take an exam on the scheduled date are required to take a makeup exam. All makeup exams may be given at the end of the semester. Students who fail to take the scheduled exams or makeup exams will receive a grade of zero for that test.

All written assignments must comply with college standards for written work. Written assignments are to be submitted on the date that they are due. All assignments must be submitted by the end of the course, to complete the requirements of the course. A late assignment will meet the requirements of the course but will not receive full credit. If written assignments are not submitted by the end of the course, the student will receive a grade of "INC" for the course. Students must submit all assignments prior to the beginning of the next semester in order to progress in the program.

Clinical agency performance will be evaluated as Satisfactory (S) or Unsatisfactory (U). Performance that has been designated as "U" at the end of the course will result in failure of the course. A minimum average grade of "75%" is required on all clinical assignments to achieve a satisfactory clinical grade.

A virtual conference with the clinical instructor is required at mid-semester, and at the end of the course, at which time the student's progress in the course will be discussed. In addition, students may initiate conferences with the instructor at other times.

RETENTION CRITERIA

Criteria for retention in the Nursing Program mandates that students will:

1. Earn a minimum of a "C" grade in every required Nursing and co-requisite course inclusive of BIO 1200, BIO 5100, ENG 2400, and PSY 3200.
2. **Students who achieve a "C-" grade in required clinical nursing course may apply to repeat the course one time only in the semester immediately following, subject to space availability. The minimum grade for clinical courses that are repeated is a "B."** The "Intent to Return to Nursing Course" form can be found on the KCC Website Nursing Department page under "Forms". This must be completed and include a plan of success that demonstrates significant changes in how they will approach the course when repeated. Only one required nursing course may be repeated. A grade of less than a "C" in a second nursing course will cause the student to be dismissed from the program.
3. Students must achieve a grade of "B" in order to pass NUR 1700. Students in NUR 1700 who achieve a failing grade of no less than "C" may repeat the course one time only after submitting an "Intent to Return Form."
4. Students who enter Nursing 1700 and Nursing 1800 **MUST** complete the Nursing Program within four years from the date of entry into this course. Any student who has not attended nursing courses for two or more consecutive semesters cannot be readmitted into the Nursing Program unless qualifying examinations have been passed in the required nursing courses previously successfully completed. Qualifying examinations may be repeated only once.
5. Students in the clinical component can only appeal the retention criteria one time.
6. Students in the clinical component can only withdraw once and must be passing to do so.

Teaching Strategies	
<ul style="list-style-type: none"> • Lecture/Discussion • Simulated Laboratory Experiences • Demonstration/Return Demonstration • Case Studies • Multimedia • Role Playing • Gaming 	<ul style="list-style-type: none"> • Computer Assisted Instruction/ATI • Course Point/Prep-U • Pre and Post Conferences • Health Agency Experiences • Unfolding Nursing Care Plan • Student Response System

REQUIRED ELECTRONIC TEXTBOOK (see Student letter):

Lippincott CoursePoint for Brunner & Suddarth's Textbook of Medical-Surgical Nursing

Retail Purchases (i.e., Bookstore): 9781975124465 or Direct/Microsite Purchase: 9781975124502

REQUIRED RESOURCES:

Assessment Technology Institute (ATI).

SUGGESTED REFERENCES:

Nursing Central by Unbound Medicine

- Davis Drug Guide
- Diseases and Disorders

- Taber's Medical Dictionary
- Davis Lab and Diagnostics Guide

RECOMMENDED TEXTBOOKS

- Dudek, Susan G. (2017). Nutrition Handbook for Nursing Practice, 8th Edition, Philadelphia, Pa.: J.B. Lippincott.
- Frandsen, G., Pennington, S., (2020). Abrams Clinical Drug Therapy, 12th Edition. Philadelphia, PA: Lippincott, Williams & Wilkins.
- LeFever-Kee, Joyce (2017). Laboratory and Diagnostic Tests with Nursing Implications, 10th Edition, Upper Saddle River, NJ: Pearson/Prentice Hall.
- Thomas, Clayton L., Editor. (2017). Taber's Cyclopedic Medical Directory, 23rd Edition. Philadelphia, Pa. F.A. Davis Company.

All students are expected to have read and to adhere to the policies pertaining to the following, as outlined in the department’s Nursing Student Handbook:	
<ul style="list-style-type: none"> • Attendance • Malpractice insurance, health clearance, and CPR training • Evaluation and grading • Clinical competencies • College laboratory practice requirements • Clinical Agency experience requirements • Integrity 	<ul style="list-style-type: none"> • Netiquette • Specific dress requirements for each clinical course • Drug calculation policy • Mandatory skills review • Criteria for retention in the nursing program • Civility (including appropriate dress)

TOPICAL OUTLINE:

***Student receive a weekly lecture schedule posted on Backboard that reflects topics, reading assignments and method of delivery.**

Each unit incorporates the Categories of Client Needs: Safe and Effective Care Environment (Management of Care, Safety, and Infection Control), Health Promotion and Maintenance, Psychosocial Integrity, Physiological Integrity (Basic Care and Comfort, Pharmacological and Parenteral Therapies, Reduction of Risk Potential, Physiological Adaptation).

- Unit 1 – Assessment & Management of the Patient who has a Fluid and Electrolyte Imbalance.
- Unit 2 – Assessment & Management of the Patient who has a Respiratory Disorder.
- Unit 3 – Assessment & Management of the Patient who has a Cardiovascular Disorder.
- Unit 4 – Assessment & Management of the Patient who has a Gastrointestinal Disorder.
- Unit 5 – Assessment & Management of the Patient who has an Endocrine Disorder.
- Unit 6 – Assessment & Management of the Perioperative Patient.
- Unit 7 – Assessment & Management of the Patient who has a Musculoskeletal Disorder.
- Unit 8 – Assessment & Management of the Patient who has an Immune Response Disorder.
- Unit 9 – Assessment & Management of the Patient who has a Genitourinary Disorder.

Unit 1 – Assessment & Management of the Patient who has a Fluid and Electrolyte Imbalance

Content/Lecture Discussion

- The structure and function of fluid and electrolyte imbalances
 - Dehydration
 - Shock
 - Burns
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with fluid and electrolyte imbalances
 - Health teaching related to preventing dehydration, electrolyte imbalances, and burns
- Strategies for identifying and managing care of the adult patient with fluid and electrolyte imbalances utilizing a team approach
 - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has fluid and electrolyte imbalances.
 - o Use of SBAR
 - Team functioning in a civil manner
 - on safety & quality of care when meeting the needs of the adult patient who has fluid & electrolyte deficits
- Strategies relevant to the outcomes of care for the adult patient with a need for fluid and electrolyte balance.
 - Provision of care with sensitivity and respect for the adult patient with fluid and electrolyte imbalances.
 - o Health promotion
 - o Fluid management, medications, electrolyte replacement
 - o Nutritional support, burn care
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with fluid and electrolyte imbalances
 - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with fluid and electrolyte imbalances
- Utilization of technology in the care of the adult patient with fluid and electrolyte imbalances
 - Communication & documentation of care rendered via electronic health record (EHR)
 - o Uses the EHR for medication reconciliation.

Related Learner Experiences

Review: NUR 18, PSY11 & 32, BIO 11 & 12, related to topic content

Required Reading Prior to 1st Day of Class

- *Hinkle & Cheever*: Ch. 13 pp. 251 – 295

Required Reading

- *Hinkle & Cheever*: Ch. 14 pp. 296 - 323; Ch. 62 pp. 1845 - 1873

Gaming

- Fluid/Electrolytes, Septic Shock

ATI Nursing Education

- ATI Student Orientation

Clinical Experiences

- Provide patient-centered care with sensitivity and respect preferences and expressed needs for patients with fluid /electrolyte imbalances.
- Communicate/document assessed findings to all members of the health team.

Laboratory/Simulation Experiences

- IV Lab
- Simulation on fluid and electrolyte imbalance
 - Case study
- Computer Assisted Instruction

Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:

- Chapter 13: Fluid and Electrolytes: Balance and Disturbance
 - o Fluid and Electrolyte Imbalance
- Chapter 62 Management of Patients with Burn Injury

•Burns
<i>Unit 2 – Assessment and Management of the Patient who has a Respiratory Disorder</i>
<i>Unit 2a – General Respiratory Disorders</i>
Content/Lecture Discussion
<ul style="list-style-type: none"> • The structure and function of respiratory system and the development of respiratory disorders and related complications <ul style="list-style-type: none"> – Pulmonary Embolus – Acute Respiratory Distress Syndrome (ARDS) – Respiratory Failure • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with respiratory disorders <ul style="list-style-type: none"> – Health teaching related to preventing pulmonary embolus, ARDS, and respiratory failure. • Strategies for identifying and managing care of the adult patient with respiratory disorders utilizing a team approach. <ul style="list-style-type: none"> – Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has pulmonary embolus, ARDS or respiratory failure <ul style="list-style-type: none"> ○ Use of SBAR – Team functioning on safety & quality of care when meeting the needs of the adult patient who has pulmonary embolus, ARDS or respiratory failure • Strategies relevant to the outcomes of care for the adult patient with respiratory disorders <ul style="list-style-type: none"> – Provision of care with sensitivity and respect for the adult patient with pulmonary embolus, ARDS or respiratory failure. <ul style="list-style-type: none"> ○ Health promotion & discharge planning ○ Oxygenation, mechanical ventilation (ABG's) ○ Medication • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with respiratory disorders <ul style="list-style-type: none"> – Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with pulmonary embolus, ARDS or respiratory failure • Utilization of technology in the care of the adult patient with respiratory disorders <ul style="list-style-type: none"> – Communication & documentation of care rendered via electronic health record (EHR) <ul style="list-style-type: none"> ○ Uses the EHR for medication reconciliation
Related Learner Experiences
<p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever</i>, Ch. 20 pp. 480-507; Ch. 21 pp. 510 – 523; 524-525, 526 – 536; Ch. 23 pp. 609-613, 614-619 <p>Gaming</p> <ul style="list-style-type: none"> • ABGs <p>Clinical Experiences</p> <ul style="list-style-type: none"> • Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with respiratory disorders • Communicate & document assessed findings to all members of the health team <p>Laboratory/Simulation Experiences</p> <ul style="list-style-type: none"> • Oxygenation lab • Computer Assisted Instruction <p>Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:</p> <ul style="list-style-type: none"> • Chapter 23: Management of Patients with Chest and Lower Tract Disorders <ul style="list-style-type: none"> • Acute Respiratory Distress Syndrome

Unit 2 – Assessment and Management of the Patient who has a Respiratory Disorder
Unit 2b – Infectious Respiratory Disorders
Content/Lecture Discussion
<ul style="list-style-type: none"> • The structure and function of respiratory system and the development of infectious respiratory disorders and related complications <ul style="list-style-type: none"> - Pneumonia - Pleural Effusion - Tuberculosis • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with infectious respiratory disorders <ul style="list-style-type: none"> - Health teaching related to preventing infectious respiratory disorders • Strategies for identifying and managing care of the adult patient with infectious respiratory disorders utilizing a team approach <ul style="list-style-type: none"> - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has infectious respiratory disorders. - Use of SBAR - Team functioning on safety & quality of care when meeting the needs of the adult patient who has infectious respiratory disorders • Strategies relevant to the outcomes of care for the adult patient with infectious respiratory disorders <ul style="list-style-type: none"> - Provision of care with sensitivity and respect for the adult patient with infectious respiratory disorders <ul style="list-style-type: none"> o Health promotion & discharge planning o Oxygenation o Isolation o Medications • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient infectious respiratory disorders <ul style="list-style-type: none"> - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with infectious respiratory disorders • Utilization of technology in the care of the adult patient with infectious respiratory disorders <ul style="list-style-type: none"> - Communication & documentation of care rendered via electronic health record (EHR). - Uses the EHR for medication reconciliation
Related Learner Experiences
<p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever: Ch. 23 pp. 586-609</i> • <p>Computer Assisted Instruction</p> <ul style="list-style-type: none"> • Physical assessment of the lungs, thorax, and heart sounds (CD) <p>Clinical Experiences</p> <ul style="list-style-type: none"> • Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with respiratory disorders • Communicate & document assessed findings to all members of the health team <p>Laboratory/Simulation Experiences</p> <ul style="list-style-type: none"> • Computer Assisted Instruction <p>Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing: Chapter 23: Management of Patients with Chest and Lower Tract Disorders</p> <ul style="list-style-type: none"> • Pneumonia

Unit 2 – Assessment and Management of the Patient who has a Respiratory Disorder

Unit 2c – Constrictive Respiratory Disorders

Content/Lecture Discussion

- The structure and function of respiratory system and the development of constrictive respiratory disorders and related complications
 - Asthma
 - Chronic Obstructive Pulmonary Disease (COPD)
 - o Chronic Bronchitis
 - o Emphysema
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with constrictive respiratory disorders
 - Health teaching related to preventing constrictive respiratory disorders
- Strategies for identifying and managing care of the adult patient with constrictive respiratory disorders utilizing a team approach
 - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has constrictive respiratory disorders.
 - o Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the adult patient who has constrictive respiratory disorders
- Strategies relevant to the outcomes of care for the adult patient with constrictive respiratory disorders.
 - Provision of care with sensitivity and respect for the adult patient with constrictive respiratory disorders
 - o Health promotion & discharge planning
 - o Oxygenation, ABG's, pulmonary function testing
 - o Medications
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with constrictive respiratory disorders
 - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with constrictive respiratory disorders
- Utilization of technology in the care of the adult patient with constrictive respiratory disorders
 - Communication & documentation of care rendered via electronic health record (EHR).
 - o Uses the EHR for medication reconciliation

Related Learner Experiences

Required Reading

- *Hinkle & Cheever*: Ch. 24 pp. 618-637, 637-648 Ch. 24 pp. 634-654, 655-665

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with respiratory disorders.
- Communicate & document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Computer Assisted Instruction
Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing: Chapter 24 Management of Patients with Chronic Pulmonary Disease
Chronic Obstructive Pulmonary Disease

<i>Unit 2 – Assessment and Management of the Patient who has a Respiratory Disorder</i>
<i>Unit 2d – Traumatic Respiratory Disorders</i>
Content/Lecture Discussion
<ul style="list-style-type: none"> • The structure and function of respiratory system and the development of traumatic respiratory disorders and related complications <ul style="list-style-type: none"> - Pulmonary Contusion - Fractured Rib - Pneumothorax/Hemothorax - Tension Pneumothorax - Flail Chest • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with traumatic respiratory disorders <ul style="list-style-type: none"> - Health teaching related to preventing traumatic respiratory disorders • Strategies for identifying and managing care of the adult patient with traumatic respiratory disorders utilizing a team approach. <ul style="list-style-type: none"> - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has traumatic respiratory disorders. <ul style="list-style-type: none"> o Use of SBAR - Team functioning on safety & quality of care when meeting the needs of the adult patient who has traumatic respiratory disorders • Strategies relevant to the outcomes of care for the adult patient with traumatic respiratory disorders. <ul style="list-style-type: none"> - Provision of care with sensitivity and respect for the adult patient with constrictive respiratory disorders <ul style="list-style-type: none"> o Health promotion & discharge planning o Oxygenation, mechanical ventilation, ABG's, chest tube therapy o Medication • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with traumatic respiratory disorders <ul style="list-style-type: none"> - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with traumatic respiratory disorders • Utilization of technology in the care of the adult patient with traumatic respiratory disorders <ul style="list-style-type: none"> - Communication & documentation of care rendered via electronic health record (EHR). <ul style="list-style-type: none"> o Uses the EHR for medication reconciliation
Related Learner Experiences
<p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever</i>: Ch. 21 pp. 540-542, Ch. 23 pp. 625-631 <p>Gaming</p> <ul style="list-style-type: none"> • Chest Tube <p>Clinical Experiences</p> <ul style="list-style-type: none"> • Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with respiratory disorders. • Communicate & document assessed findings to all members of the health team <p>Laboratory / Simulation Experience</p> <ul style="list-style-type: none"> • Simulation on chest tubes • Case study • Video: Closed Chest Drainage

<i>Unit 3 – Assessment and Management of the Patient who has a Cardiovascular Disorder</i>
<i>Unit 3a – Peripheral Vascular Disease</i>
Content/Lecture Discussion
<ul style="list-style-type: none"> • The structure and function of the peripheral vascular system & the development of peripheral vascular disease and related complications. <ul style="list-style-type: none"> - Peripheral Arterial Disease <ul style="list-style-type: none"> ○ Atherosclerosis/Arteriosclerosis ○ Acute Arterial Occlusion ○ Aneurysm ○ Raynaud's Disease - Peripheral Venous Disease <ul style="list-style-type: none"> ○ Venous Thrombosis ○ Venous Insufficiency/ Varicose Veins • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with peripheral vascular disease <ul style="list-style-type: none"> - Health teaching related to preventing peripheral vascular disease • Strategies for identifying and managing care of the adult patient with peripheral vascular disease utilizing a team approach. <ul style="list-style-type: none"> - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has peripheral vascular disease. <ul style="list-style-type: none"> ○ Use of SBAR - Team functioning on safety & quality of care when meeting the needs of the adult patient who has peripheral vascular disease • Strategies relevant to the outcomes of care for the adult patient with peripheral vascular disease. <ul style="list-style-type: none"> - Provision of care with sensitivity and respect for the adult patient with peripheral vascular disease. <ul style="list-style-type: none"> ○ Health promotion & discharge planning ○ Medications and or surgical interventions • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with peripheral vascular disease <ul style="list-style-type: none"> - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with peripheral vascular disease • Utilization of technology in the care of the adult patient with traumatic respiratory disorders <ul style="list-style-type: none"> - Communication & documentation of care rendered via electronic health record (EHR). <ul style="list-style-type: none"> ○ Uses the EHR for medication reconciliation
Related Learner Experiences
<p>Review: Bio 11/12 - Cardiovascular System</p> <p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever:</i> Ch. 25 pp. 673-710; Ch. 30 pp. 841-849, 850-878 <p>Gaming</p> <ul style="list-style-type: none"> • PVD <p>ATI Nursing Education</p> <ul style="list-style-type: none"> • ATI Targeted Medical-Surgical 2019: Cardiovascular <p>Clinical Experiences</p> <ul style="list-style-type: none"> • Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with cardiac disorders. • Communicate/document assessed findings to all members of the health team

<i>Unit 3 – Assessment and Management of the Patient who has a Cardiovascular Disorder/ Management of Patients With Nonmalignant Hematologic Disorders</i>
<i>Unit 3b – Hypertension Anemia</i>
Content/Lecture Discussion
<ul style="list-style-type: none"> • The structure and function of the arterial system and the development of hypertension and related complications. • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with hypertension <ul style="list-style-type: none"> - Health teaching related to preventing hypertension. • Strategies for identifying and managing care of the adult patient with hypertension utilizing a team approach. <ul style="list-style-type: none"> - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has hypertension. <ul style="list-style-type: none"> ○ Use of SBAR - Team functioning on safety & quality of care when meeting the needs of the hypertensive patient. • Strategies relevant to the outcomes of care for the adult patient with hypertension. <ul style="list-style-type: none"> - Provision of care with sensitivity and respect for the adult patient with hypertension. <ul style="list-style-type: none"> ○ Health promotion & discharge planning ○ Nutritional modifications ○ Medications • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with hypertension <ul style="list-style-type: none"> - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with hypertension • Utilization of technology in the care of the adult patient with hypertension <ul style="list-style-type: none"> - Communication & documentation of care rendered via electronic health record (EHR). <ul style="list-style-type: none"> ○ Uses the EHR for medication reconciliation • Differentiate between the hypoproliferative and the hemolytic anemias and compare and contrast the physiologic mechanisms, clinical manifestations, medical management, and nursing interventions for each. • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with anemia <ul style="list-style-type: none"> - Health teaching related for preventing anemia. • Strategies for identifying and managing care of the adult patient with anemia utilizing a team approach. <ul style="list-style-type: none"> - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has anemia. <ul style="list-style-type: none"> ○ Use of SBAR - Team functioning on safety & quality of care when meeting the needs of the anemic patient. • Strategies relevant to the outcomes of care for the adult patient with anemia. <ul style="list-style-type: none"> - Provision of care with sensitivity and respect for the adult patient with anemia. <ul style="list-style-type: none"> ○ Health promotion & discharge planning ○ Nutritional modifications ○ Medications • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with anemia <ul style="list-style-type: none"> - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with anemia • Utilization of technology in the care of the adult patient with anemia. <ul style="list-style-type: none"> - Communication & documentation of care rendered via electronic health record (EHR). <ul style="list-style-type: none"> ○ Uses the EHR for medication reconciliation
Related Learner Experiences
Review: Bio 11/12, related to topic content
Required Reading

- *Hinkle & Cheever: Ch. 31 pp. 884-898*
- *Hinkle & Cheever: Ch. 33 pp. 927-934*

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with cardiac disorders
- Communicate/document assessed findings to all members of the health team

Unit 3 – Assessment and Management of the Patient who has a Cardiovascular Disorder

Unit 3c – Coronary Artery Disease (CAD)

Content/Lecture Discussion

- The structure and function of the cardiovascular system and the development of coronary artery disease (CAD) and related complications
 - Stable Angina
 - Unstable Angina
 - Myocardial Infarction
 - Heart Failure
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with CAD
 - Health teaching related to preventing CAD
- Strategies for identifying and managing care of the adult patient with CAD utilizing a team approach.
 - Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has CAD
 - o Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the CAD
- Strategies relevant to the outcomes of care for the adult patient with CAD
 - Provision of care with sensitivity and respect for the adult patient with CAD
 - o Health promotion & discharge planning
 - o Oxygenation
 - o Medications
 - o Telemetry/EKG
 - o Surgical Interventions
 - PTCA
 - Stents
 - CABG
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with CAD
 - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with CAD
- Utilization of technology in the care of the adult patient with CAD
 - Communication & documentation of care rendered via electronic health record (EHR).
 - o Uses the EHR for medication reconciliation

Related Learner Experiences

Review: Bio 11/12, related to topic content

Required Reading

- *Hinkle & Cheever: Ch. 29 pp. 818-838; Ch. 27 pp. 750-788*

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with cardiac disorders.

- Communicate & document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Simulation on heart failure
- Case study

Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:

- Chapter 23: Management of Patients with Chest and LOWER Respiratory Disorders:
 - Pulmonary Edema
- Chapter 27: Management of Patients with Coronary Vascular Disorders:
 - Coronary Artery Disease
 - Angina
 - Myocardial Infarction
- Chapter 29: Management of Patients with Complications from Heart Disease
 - Heart Failure

Unit 3 – Assessment and Management of the Patient who has a Cardiovascular Disorder

Unit 3d – Cardiac Dysrhythmias

Content/Lecture Discussion

- The structure and function of the cardiac electrical system and the development of cardiac dysrhythmias and related complications
 - Atrial Dysrhythmias
 - Ventricular Dysrhythmias
 - Heart Blocks
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with cardiac dysrhythmias
 - Health teaching related to preventing cardiac dysrhythmias
- Strategies for identifying and managing care of the adult patient with cardiac dysrhythmias utilizing a team approach.
 - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has cardiac dysrhythmias.
 - Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has cardiac dysrhythmias
- Strategies relevant to the outcomes of care for the adult patient with cardiac dysrhythmias.
 - Provision of care with sensitivity and respect for the adult patient with cardiac dysrhythmias.
 - Health promotion & discharge planning
 - Dysrhythmia recognition
 - Oxygenation
 - Medications
 - Pacemaker/Implantable defibrillator
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with cardiac dysrhythmias
 - Use of the Nursing Process throughout the mutually designed plan of care for the adult patient with cardiac dysrhythmias
- Utilization of technology in the care of the adult patient with cardiac dysrhythmias
 - Communication & documentation of care rendered via electronic health record (EHR).
 - Uses the EHR for medication reconciliation

Related Learner Experiences

Review: Bio 11/12. Anatomy, physiology, and electro-physiology of the heart

Required Reading

- *Hinkle & Cheever*: Ch. 26 pp. 712-748

Gaming:

- Rhythm Strips

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with cardiac disorders.
- Communicate/document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- DVD
 - Arrhythmias-Pathophysiology for Nurses
- Computer Assisted Instruction
 - Chapter 26: Management of Patients with Dysrhythmias and Conduction Problems:
 - Dysrhythmia

*Unit 4 – Assessment and Management of the Patient who has a Gastrointestinal Disorder**Unit 4a – Gastric Disorders***Content/Lecture Discussion**

- The structure and function of gastrointestinal system and the development of gastric disorders and related complications
 - Hiatal Hernia
 - Gastro-esophageal Reflux Disease (GERD)
 - Peptic Ulcer Disease (PUD)
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with gastric disorders
 - Health teaching related care of patient who has gastric disorders
- Strategies for identifying and managing care of the adult patient with gastric disorders utilizing a team approach
 - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has gastric disorders.
 - Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has gastric disorders
- Strategies relevant to the outcomes of care for the adult patient with gastric disorders
 - Provision of care with sensitivity and respect for the adult patient who has gastric disorders.
 - Health promotion & discharge planning
 - Enteral tubes
 - TPN/PPN
 - Medications
 - Surgical interventions
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with gastric disorders
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with gastric disorders
- Utilization of technology in the care of the adult patient with gastric disorders
 - Communication & documentation of care rendered via electronic health record (EHR).
 - Uses the EHR for medication reconciliation

Related Learner Experiences

Required Reading

- *Hinkle & Cheever* Ch. 45 pp. 1280-1284; Ch. 46 pp. 1292-1303

ATI Nursing Education

- ATI Targeted Medical-Surgical 2019: Gastrointestinal

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with gastrointestinal disorders.
- Communicate & document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Computer Assisted Instruction
Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing
Chapter 46: Management of Patients with Gastric and Duodenal Disorders
 - Peptic Ulcer

*Unit 4 – Assessment and Management of the Patient who has a Gastrointestinal Disorder**Unit 4b – Intestinal Disorders***Content/Lecture Discussion**

- The structure and function of gastrointestinal system and the development of intestinal disorders & related complications
 - Irritable Bowel Disease
 - Intestinal Obstruction
 - Inflammatory Bowel Disease
 - Crohn's Disease/Ulcerative Colitis
 - Diverticulosis/Diverticulitis/Peritonitis
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with inflammatory intestinal disorders
 - Health teaching related care of patient who has inflammatory intestinal disorders
- Strategies for identifying and managing care of the adult patient with inflammatory intestinal disorders utilizing a team approach
 - Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has gastric disorders
 - Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has inflammatory intestinal disorders
- Strategies relevant to the outcomes of care for the adult patient with inflammatory intestinal disorders
 - Provision of care with sensitivity and respect for the adult patient who has inflammatory intestinal disorders.
 - Health promotion & discharge planning
 - Nutritional modification
 - Medications and/or surgical interventions
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with inflammatory intestinal disorders
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with inflammatory intestinal disorders
- Utilization of technology in the care of the adult patient with inflammatory intestinal disorders
 - Communication & documentation of care rendered via electronic health record (EHR).
 - Uses the EHR for medication reconciliation

Related Learner Experiences

Required Reading

- *Hinkle & Cheever*: Ch. 47 pp. 1317-1318, 1322-1323 & 1327-1336

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with gastrointestinal disorders.
- Communicate & document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Computer Assisted Instruction
Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:
 - Chapter 47: Management of Patients with Intestinal and Rectal Disorders
 - Inflammatory Bowel Disease

*Unit 4 – Assessment and Management of the Patient who has a Gastrointestinal Disorder**Unit 4c – Biliary Disorders***Content/Lecture Discussion**

- The structure and function of the biliary system and the development of biliary disorders and related complications
 - Cholecystitis
 - Hepatitis
 - Cirrhosis
 - Pancreatitis
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with biliary disorders
 - Health teaching related care of patient who has inflammatory intestinal disorders
- Strategies for identifying and managing care of the adult patient with biliary disorders utilizing a team approach
 - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has biliary disorders.
 - Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has biliary disorders
- Strategies relevant to the outcomes of care for the adult patient with biliary disorders
 - Provision of care with sensitivity and respect for the adult patient who has biliary disorders.
 - Health promotion & discharge planning
 - Medications
 - Nutritional modifications
 - Surgical interventions
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient biliary disorders
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with biliary disorders
- Utilization of technology in the care of the adult patient with biliary disorders
 - Communication & documentation of care rendered via electronic health record (EHR)
 - Uses the EMR for medication reconciliation

Required Reading

- *Hinkle & Cheever*. Ch. 49 pp.1377-1417; Ch. 50 pp. 1430 -1449

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with biliary disorders.
- Communicate/document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Simulation on esophageal varices
- Case study
- Computer Assisted Instruction
Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:
 - Chapter 49: Assessment and Management of Patients with Hepatic Disorders
 - Hepatic Cirrhosis
 - Chapter 50: Management of Patients with Hepatic Disorders
 - Acute Pancreatitis

*Unit 5 – Assessment and Management of the Patient who has an Endocrine Disorder**Unit 5a – Diabetes Mellitus***Content/Lecture Discussion**

- The structure and function of endocrine system and the development of diabetes mellitus and related complications
- Microvascular/Macrovascular changes
- Complications
 - Hypoglycemia
 - Hyperglycemia
 - DKA/HHS
 - Diabetic Neuropathy/Nephropathy/Retinopathy
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with diabetes mellitus.
 - Health teaching related care of patient who has diabetes mellitus
- Strategies for identifying and managing care of the adult patient with diabetes mellitus utilizing a team approach.
 - Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has diabetes mellitus
 - Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has diabetes mellitus
- Strategies relevant to the outcomes of care for the adult patient with diabetes mellitus
 - Provision of care with sensitivity and respect for the adult patient who is scheduled for has diabetes mellitus.
 - Health promotion & discharge planning
 - Nutritional modifications
 - Medication
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with diabetes mellitus
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with diabetes mellitus
- Utilization of technology in the care of the adult patient with diabetes mellitus

- Communication & documentation of care rendered via electronic health record (EHR).
 - o Uses the EHR for medication reconciliation

Required Reading

- *Hinkle & Cheever: Ch. 51 pp. 1456 -1500 & Ch. 42, pp. 1214 - 1220*

ATI Nursing Education

- ATI Targeted Medical-Surgical 2019: Endocrine

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with diabetes mellitus.
- Communicate/document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Simulation on DKA
- Case study
- Computer Assisted Instruction
 - □Video Hypoglycemia, Hyperglycemia and Monitoring (1299)

Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing

- Chapter 51: Assessment and Management of Patient with Diabetes
 - o Diabetes Mellitus

Unit 5 – Assessment and Management of the Patient who has an Endocrine Disorder

Unit 5b – Other Endocrine Disorders

Content/Lecture Discussion

- The structure and function of endocrine system and the development of endocrine disorders and related complications
 - Pituitary Disorders
 - Thyroid Disorders
 - Parathyroid Disorders
 - Adrenal Cortex Disorders
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with endocrine disorders
 - Health teaching related care of patient who has endocrine disorders
- Strategies for identifying and managing care of the adult patient with endocrine disorders utilizing a team approach.
 - Coordination of care, utilizing collaboration and priority setting in meeting the needs of the adult patient who has endocrine disorders. o Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has endocrine disorders
 - QSEN Safety and Teamwork and Collaboration Videos
- Strategies relevant to the outcomes of care for the adult patient with endocrine disorders
 - Provision of care with sensitivity and respect for the adult patient who has endocrine disorders.
 - o Health promotion & discharge planning
 - o Nutritional modifications
 - o Medication
 - o Radiation/Surgical interventions
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient who has diabetes mellitus.
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with endocrine disorders
- Utilization of technology in the care of the adult patient with endocrine disorders

- Communication & documentation of care rendered via electronic health record. (EHR)
 - o Uses the EHR for medication reconciliation
 - o

Related Learner Experiences

Review: Bio 11&12, related to topic content

Required Reading

- *Hinkle & Cheever: Ch. 52 pp. 1502–1525, 1527-1532 & 1534-1541*

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with endocrine disorders.
- Communicate/document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Computer Assisted Instruction

Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing

- o Chapter 52: Assessment and Management of Patients with Endocrine Disorders:
- o Hypothyroidism
- o Hyperthyroidism

Unit 6 – Assessment and Management of the Perioperative Patient

Content/ Discussion/Flipped Classroom

- The structure and function of the perioperative experience
 - Preoperative
 - Intraoperative
 - Postoperative
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient undergoing surgery
 - Health teaching related care of patient who is scheduled for surgery
- Strategies for identifying and managing care of the adult patient undergoing surgery utilizing a team approach
 - Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who is scheduled for surgery
 - o Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who is scheduled for surgery
 - o Use of side-site verification
- Strategies relevant to the outcomes of care for the adult patient undergoing surgery
 - Provision of care with sensitivity and respect for the adult patient who is scheduled for surgery.
 - o Health promotion & discharge planning
 - o Pre-op/post-op teaching
 - o Medications/anesthesia/conscious sedation
 - o Pain management
 - o Tubes/drains
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient undergoing surgery
 - Use of the Nursing process throughout the mutually designed plan of care for the patient undergoing surgery
- Utilization of technology in the care of the adult patient undergoing surgery
 - Communication & documentation of care rendered via electronic health record (EHR)
 - o Uses the EHR for medication reconciliation

Related Learner Experiences

Required Reading

- *Hinkle & Cheever*: Ch. 17 pp. 418-434; Ch. 18 pp. 436-454; Ch. 19, pp. 456-476.

Computer Assisted Instruction

- Pre and postoperative surgical care

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for perioperative patients.
- Communicate/document assessed findings to all members of the health team

Laboratory/Simulation Experiences

- Simulation on perioperative care
- Case Study

*Unit 7 – Assessment and Management of the Patient who has a Musculoskeletal Disorder***Content/Lecture Discussion**

- The structure and function of musculoskeletal system and the development of musculoskeletal disorders and related complications
 - Osteoporosis
 - Fractures
 - Compartment Syndrome
 - Fat Embolism
 - Infections
 - Venous Thrombosis/Pulmonary Embolism
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with musculoskeletal disorders
 - Health teaching related care of patient who has musculoskeletal disorders
- Strategies for identifying and managing care of the adult patient with musculoskeletal disorders utilizing a team approach.
 - Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has musculoskeletal disorders
 - Use of SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has musculoskeletal disorders ○ Implementation of fall prevention strategies
- Strategies relevant to the outcomes of care for the adult patient with musculoskeletal disorders.
 - Provision of care with sensitivity and respect for the adult patient who has musculoskeletal disorder
 - Health promotion & discharge planning
 - Medications/cast/traction
 - Surgical intervention/rehabilitation
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with musculoskeletal disorders
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with musculoskeletal disorders
- Utilization of technology in the care of the adult patient with musculoskeletal disorders
 - Communication & documentation of care rendered via electronic health record (EHR)
 - Uses the EHR for medication reconciliation

Related Learner Experiences

Review: Bio 11/12 Musculoskeletal system

Required Reading

- *Hinkle & Cheever*: Ch.41 pp.1169-1172 & 1176-1178 Ch. 40: pp. 1131-1144

Writing Assignment:

- Evidenced-based writing assignment based on clinical patient.

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with

<p>musculoskeletal disorders.</p> <ul style="list-style-type: none"> • Communicate/document assessed findings to all members of the health team <p>Laboratory/Simulation Experiences</p> <ul style="list-style-type: none"> • Simulation on Fractured Femur • Case study • Computer Assisted Instruction <p>Practice and Learn Interactive Case Studies: From Lippincott’s Interactive Studies in Medical- Surgical Nursing:</p> <ul style="list-style-type: none"> • Chapter 42: Management of Patients with Musculoskeletal Trauma: <ul style="list-style-type: none"> ○ Fracture ○ Amputation

<p><i>Unit 8 – Assessment and Management of the Patient who has an Immune Response Disorder</i></p>
<p>Content/Lecture Discussion</p> <ul style="list-style-type: none"> • The structure and function of the immune system and the development of HIV/AIDS and related complications <ul style="list-style-type: none"> – Opportunistic Infections/Cancers • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with HIV and/or AIDS <ul style="list-style-type: none"> – Health teaching related care of patient who has HIV/AIDS • Strategies for identifying and managing care of the adult patient with HIV and/or AIDS utilizing a team approach. <ul style="list-style-type: none"> – Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has HIV/AIDS <ul style="list-style-type: none"> ○ Use of SBAR – Team functioning on safety & quality of care when meeting the needs of the patient who has HIV/AIDS. • Strategies relevant to the outcomes of care for the adult patient with HIV and/or AIDS. <ul style="list-style-type: none"> – Provision of care with sensitivity and respect for the adult patient who has HIV/AIDS. <ul style="list-style-type: none"> ○ Health promotion & discharge planning ○ Nutritional modifications /TPN/TPN ○ Medications • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with HIV and/or AIDS <ul style="list-style-type: none"> – Use of the Nursing process throughout the mutually designed plan of care for the adult patient with HIV and/or AIDS • Utilization of technology in the care of the adult patient with HIV and/or AIDS. <ul style="list-style-type: none"> – Communication & documentation of care rendered via electronic health record (ERH). <ul style="list-style-type: none"> ○ Uses the EHR for medication reconciliation
<p>Related Learner Experiences</p>
<p>Review</p> <ul style="list-style-type: none"> • Bio 11&12 – Immune System <p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever</i>: Ch.35 pp. 1014-1020; Ch. 36 pp. 1025-1054; Ch.37., pp. 1078-1080 <p>Clinical Experiences</p> <ul style="list-style-type: none"> • Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with HIV/AIDS • Communicate/document assessed findings to all members of the health team

Unit 9 – Assessment and Management of the Patient who has a Genitourinary Disorder

Unit 9a – Genitourinary Disorders

Content/Lecture Discussion

- The structure and function of genitourinary system and the development of genitourinary disorders and related complications
 - Urinary Tract Infections
 - Renal Calculi
- Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with genitourinary disorders
 - Health teaching related care of patient who has genitourinary disorders
- Strategies for identifying and managing care of the adult patient with genitourinary disorders utilizing a team approach.
 - Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has genitourinary disorders
 - SBAR
 - Team functioning on safety & quality of care when meeting the needs of the patient who has genitourinary disorders.
 - Prevention of CAUTI
- Strategies relevant to the outcomes of care for the adult patient with genitourinary disorders
 - Provision of care with sensitivity and respect for the adult patient who has genitourinary disorders
 - Health promotion & discharge planning
 - Nutritional modification
 - Medications
 - Surgical interventions
- Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with genitourinary disorders
 - Use of the Nursing process throughout the mutually designed plan of care for the adult patient with genitourinary disorders
- Utilization of technology in the care of the adult patient with genitourinary disorders
 - Communication & documentation of care rendered via electronic health record (EHR).
 - Uses the EHR for medication reconciliation

Related Learner Experiences

Review: Bio 11&12 – Genitourinary System

Required Reading

- *Hinkle & Cheever*: CH. 53 pp. 1555– 1566; Ch. 55 pp. 1615 – 1622, 1632 - 1637

Clinical Experiences

- Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with genitourinary disorders
- Communicate/document assessed findings to all members of the health team

<i>Unit 9 – Assessment and Management of the Patient who has a Genitourinary Disorder</i>
<i>Unit 9b – Renal Disorders</i>
Content/Lecture Discussion
<ul style="list-style-type: none"> • The structure and function of the renal system and the development of renal failure or nephrotic syndrome and related complications <ul style="list-style-type: none"> – Acute Renal Failure – Chronic Renal Failure • Strategies to involve the adult patient and family in reaching successful outcomes for the adult patient with renal failure or nephrotic syndrome <ul style="list-style-type: none"> – Health teaching related care of patient who has renal failure and/or nephrotic syndrome • Strategies for identifying and managing care of the adult patient with renal failure or nephrotic syndrome utilizing a team approach <ul style="list-style-type: none"> – Coordination of care utilizing collaboration and priority setting in meeting the needs of the adult patient who has renal failure or nephrotic syndrome <ul style="list-style-type: none"> ○ SBAR – Team functioning on safety & quality of care when meeting the needs of the patient who has renal failure or nephrotic syndrome • Strategies relevant to the outcomes of care for the adult patient with renal failure or nephrotic syndrome <ul style="list-style-type: none"> – Provision of care with sensitivity and respect for the adult patient who has renal failure or nephrotic syndrome <ul style="list-style-type: none"> ○ Health promotions & discharge planning ○ Nutritional modification ○ Medication ○ Dialysis ○ Surgical intervention/Transplantation • Application of critical thinking processes when practicing safely in the delivery of care to the adult patient with renal failure or nephrotic syndrome <ul style="list-style-type: none"> – Use of the Nursing process throughout the mutually designed plan of care for the adult patient with renal failure or nephrotic syndrome • Utilization of technology in the care of the adult patient with renal failure or nephrotic syndrome <ul style="list-style-type: none"> – Communication & documentation of care rendered via electronic medical record <ul style="list-style-type: none"> ○ Uses the EMR for medication reconciliation
Related Learner Experiences
<p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever</i>. Ch. 54 pp. 1567-1602 <p>Clinical Experiences</p> <ul style="list-style-type: none"> • Provide patient centered care with sensitivity and respect preferences and expressed needs for patients with renal disorders. • Communicate/document assessed findings to all members of the health team <p>Laboratory/Simulation Experiences</p> <ul style="list-style-type: none"> • Simulation on renal failure • Case study • Computer Assisted Instruction <p>Practice and Learn Interactive Case Studies: From Lipincott's Interactive Studies in Medical- Surgical Nursing:</p> <ul style="list-style-type: none"> • Chapter 54: Management of Patients with Kidney Disorders <ul style="list-style-type: none"> ○ Acute Kidney Injury ○ Chronic Kidney Disease • Video <ul style="list-style-type: none"> – Acute & Chronic Renal Failure – Pathophysiology for Nurses (1178)