



SCIENCE & HEALTH PROFESSIONS

NURSING PROGRAM

NUR 202

COURSE OUTLINE

FALL 2008



COURSE OUTLINE

<u>NUR202</u>	<u>Nursing IV</u>
Course Number	Course Title
<u>8</u>	<u>3/2/12</u>
Credits	Hours: lecture/laboratory/other (specify)

Catalog description:

A continuation of Nursing III with emphasis on the client who requires more permanent modification of life style in order to achieve or maintain optimal health. Students will also continue to develop some basic organization skills to enable them to function as a beginning level practitioner.

Prerequisites:

Completion of NUR201 with a grade of "C" or better.

Required texts/other materials:

Textbooks:

Ball, J. and Bindler, R. (2003). **Pediatric Nursing: Caring for Children**. (3rd ed.). Norwalk: Appleton and Lange.

Ignatavicius, Donna and Workman, Linda. (2006)l **Medical Surgical Nursing Critical Thinking for Collaborative Care**. (5th edition). St. Louis: Mosby.

Lilley, L L., Aucker, R. S. and Albanese, J.A. (2005). **Pharmacology and the Nursing Process**. (4th ed.). St. Louis: C. V. Mosby.

Pickar, G. (2004). **Dosage Calculations**. (7th ed.). Albany: Delmar Publishers

Phillips, L. D. (2005). **Manual of I.V. Therapeutics**. (4th ed.). Philadelphia: F. A. Davis Company.

Townsend, Mary C., (2006) **Psychiatric Mental Health Nursing Concepts of Care**, (5th ed.), Philadelphia: FA Davis

Suggested:

Silvestri, L.A. (2002). **Comprehensive Review for NCLEX-RN**. (2nd ed.). Philadelphia: W.B. Saunders Co.

Bucher, L. and Melander, S. (1999). **Critical Care Nursing**. (1st ed.) Philadelphia:: W.B. Saunders Co.

Nursing Drug Handbook, Springhouse: Springhouse Publishers. (*any current book*)

Smith, S. and Duell, D. (2001). **Clinical Nursing Skills**. (6th ed.). Appleton Century Crafts.

Plus all other textbooks utilized in Nursing I, Nursing II, and Nursing III.

Revised:

July 2008

Course Coordinator: Sue Minkel, RN, MA in Nursing Education
Assistant Professor of Nursing
Office: MS155
Work Phone: (609) 570-3837 (will pick up messages daily)
Email: (send to both) minkels@mccc.edu
sueminkel@comcast.net

Course goals:

Nursing Practice at Level IV is concerned with those at different age levels who require nursing approaches which support the client through periods of crisis, disability and death based on an integration of nursing knowledge, intervention skills, rehabilitative techniques and understanding of the human needs.

At Level IV, these approaches are:

Hygiene and Comfort Needs

Concerned with those at different age levels who have multi-systems alterations which bring about overwhelming interferences in self care and require comprehensive nursing intervention to meet the hygienic and comfort needs of daily living.

Safety Needs

Concerned with those at different age levels who meet with hazards from crisis situations or diminished senses or perceptions, and require constant protection for a protracted period of time.

Human Sexuality

Concerned with those at different age levels who have irreversible and permanent alteration of sexual patterns due to traumatic or pathological interferences.

Psychosocial Needs

Concerned with those at different age levels who have chronic or irreversible pathological or psychological interferences which require protracted or permanent alteration of life activities.

Activity and Rest

Concerned with those at different age levels who have irreversible traumatic or pathological interferences which require intensive and permanent alteration of life activities.

Oxygen Needs

Concerned with those at different age levels who have continuous interference of the delivery of oxygen to body cells due to acute or chronic multi-systems pathological conditions which require constant management, re-establishment of air exchanges or surgical correction.

Nutritional Needs

Concerned with those at different age levels who require the use of diet as a chief therapeutic measure due to acute or chronic multisystem pathologic and metabolic conditions which affect normal utilization of food, water and minerals.

Elimination Needs

Concerned with those at different age levels who have permanently altered elimination needs due to extensive acute or chronic multisystem pathological interference and require prosthesis, appliances, retraining processes or mechanical assistance.

Course-specific General Education goals and objectives.

In this nursing course, emphasis will be placed on developing knowledge of pathophysiological and psychological interferences to fulfill basic human needs. The effects of these interferences are irreversible, may involve permanent disabilities, multi-systems failure or lead to death. The student will develop nursing approaches utilized in meeting the basic human needs during periods of interference or impairment directed toward maintenance of optimal body function, prevention of potential problems and restoration of health through therapeutic nursing intervention and rehabilitative techniques. **At the conclusion of NUR 202**, the student should be able to implement these objectives with individuals of different age levels and their family constellation.*

The student will:

1. Develop awareness of responsibility for professional development, ongoing learning, and increasing competence through continuing education and participation in professional organizations.
2. Provide safe physical and psychological nursing care along with client advocacy to multiple clients with multi-system problems within the parameters of the Nurse Practice Act, the Nursing Code of Ethics and nursing standards in all nursing care situations.
3. Identify interferences to client's basic needs presented by complex multi-systems, pathophysiological problems or complex, chronic or acute individual or family psychological problems.
4. Consider current legal, socioeconomic and political forces on health care and client/community needs when providing care to multiple clients in a variety of healthcare settings.
5. Assess data from multiple clients in a systematic way in a variety of healthcare settings to determine multi-system problems establishing priorities among these problems in order to meet client outcomes.
6. Perform a developmental and sociocultural economic assessment of healthy clients, acute and chronically ill assigned clients in multiple healthcare settings utilizing concepts based on Maslow, Erikson, Freud and Piaget.
7. Correlate pathophysiologic concepts with nursing actions and client data to develop an individualized nursing plan of care specific for groups of clients, revising that plan based on the client's response to care and achievement of client outcomes.
8. Utilize principles of effective therapeutic communication when providing care to groups of clients from different sociocultural backgrounds with multisystem physiologic problems and complex, chronic or acute individual or family psychological problems.
9. Provide needed information or instruction to clients or groups of clients in a variety of healthcare settings, utilizing a developmental approach based on identified health care needs.
10. Develop organizational skills to implement nursing care plans independently according to established priorities for multiple clients in a coordinated manner within an appropriate timeframe.
11. Create caring activities which assist the client/significant others in dealing with the stress of multisystems failure and end of life issues in various health care settings.

12. Be able to work cooperatively and collaboratively with health team members, including the student team, to effectively implement client care in a cost effective manner.
13. Be able to use clinical judgment when delegating nursing care to assistive personnel.
14. Utilize critical thinking skills in a variety of clinical settings when providing care to multiple clients.

*Family Constellation refers to ethnic, religious, cultural and socioeconomic aspects of the client and his/her significant others.

Classroom Lecture:

Lectures are based on learning objectives from the course syllabus. **Students are expected to have completed assigned readings prior to lecture.** Lectures will be interactive with application of learning as the major focus. A variety of methods will be used: small group work, case studies, lecture and discussion, use of test questions, games.

Clinical Laboratory:

Each student will have clinical experience in 3 areas:

1. Medical Surgical Unit with a focus on leadership development and management of multiple client assignments caring for clients who have multi-system involvement.
2. Pediatrics with emphasis on children with handicaps or complex problems
3. Psychiatry with focus on care of client in a private psychiatric hospital setting.

Preparation for clinical laboratory will focus upon clinical objectives.

Oral presentations in Clinical Laboratory:

1. **An Oral Case Study** will be presented during the six week Medical Surgical rotation (see Nursing 202 Case Study Guide). This is a pass/fail grade. Done in college laboratory.
2. **An Oral Nursing Care plan** is expected in Psychiatry (see Nursing 202 Psychiatric Nursing Care Plan Guide).
3. **An Oral Teaching Plan** is expected in Pediatrics. This is a pass/fail grade, (see Nursing 202 Pediatric Teaching Plan Guide). Done in pediatric clinical experience.

College Laboratory:

Students are expected to attend all scheduled college laboratories.

GRADING POLICY

A variety of means will be used to assess learning throughout the course.

1. **WEEKLY QUIZZES - 5% OF YOUR FINAL GRADE:** A five question quiz will be given at the beginning of each class covering the assigned readings for the lecture of that day. The questions will come directly from all three textbooks. Review of the quiz will occur immediately after its completion.
2. **CLASSROOM TESTS – 45% OF YOUR FINAL GRADE:** There are five classroom tests, one every three weeks. These tests may be comprehensive including previously tested material throughout the course.
3. **FINAL EXAM – 50% OF YOUR FINAL GRADE:** This test averaging 120-125 questions is given during final exam week. It will be comprehensive including all course materials.
4. **THE FINAL GRADE: 5% weekly quizzes; 45% Classroom Tests; 50% Final Exam.**
5. **ATI RN COMPREHENSIVE PREDICTOR EXAM:**

- All students must take this exam during the last week of the course.
- If the student earns a 76% or better on this exam the student can **choose** to be exempt from taking the N202 course Final Exam.
- Also, the student must have a **classroom test average of 75% or higher** in order to qualify for EXEMPTION FROM FINAL EXAM
- If the student **chooses to be exempt from taking the Final Exam** the grade calculation would be as follows:

- Test 1
- Test 2
- Test 3
- Test 4
- Test 5

} These five tests are averaged together.

This average becomes 45% of the grade plus the 5% weekly quiz average

This **average is also** taken as your **final exam grade**. Together they form your final grade for the course.

EXAMPLE OF CALCULATIONS OF GRADE IF STUDENT IS EXEMPT FROM FINAL EXAM:

- Test 1 80%
- Test 2 90%
- Test 3 75%
- Test 4 80%
- Test 5 82%

} These five tests are averaged together

The average is 81.4% = 45% of grade

$$81.4\% \times .45 = 36.63 \text{ points}$$

Weekly quiz average is 75% = 5% of the grade = $75 \times .05 = 3.75$ points

Now add the test points and quiz points to come up with the final test grade: $36.63 + 3.75 = 80.76\%$

- THIS GRADE IS THEN USED AS THE FINAL EXAM GRADE: 80.76% = the other 50% OF THE GRADE
- FINAL GRADE = 80.76%

6. **ATI TESTING:** ATI non proctored tests are available for the student to take to practice for the three proctored tests – mental health nursing, nurse care of the child and the RN comprehensive predictor. It is recommended that the student make a commitment to working extensively on the non proctored tests. This will not only lead to the possibility of earning a 76% on the RN comprehensive predictor with exemption of the final exam, but will also make it easier for the student to be successful on the NCLEX exam.

If the non proctored exams are completed 24 hours prior to the proctored exams, the student will earn one bonus point for each non proctored test completed. This will be added to the final grade AFTER THE STUDENT ACHIEVES 75% ON THE FINAL GRADE.

The mental health nursing ATI will be taken in lab during week 5, after completion of the mental health lecture materials.

The nursing care of children ATI will be taken in the last lab of the semester during week 14 of the course.

The RN comprehensive predictor will be taken by all students in class on December 10th in the computer lab. The score earned on this test determines the student's eligibility to be exempt from the final exam.

7. CLINICAL LABORATORY PERFORMANCE EVALUATION: The objectives are graded every three weeks. The student must earn a final passing summative grade on all objectives in order to pass the clinical component of the course.
8. Failure to complete all the above criteria results in a failure of Nursing 202.
9. An additional 3 points can be earned to be added after final computation of the students' grade, by completing the non proctored ATI examinations in advance of taking the ATI mental health exam, ATI care of the child exam and the ATI RN comprehensive predictor exam. It is critical that each student utilize all components of the ATI modules to prepare effectively for the RN comprehensive predictor and for the NCLEX. Success is what we hope for for you!!!
10. Any student in this class who has special needs because of disability is entitled to receive accommodations. Eligible students at Mercer County Community College are assured services under the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973. If you believe you are eligible for services, please contact Arlene Stinson, the Director of Academic Support Services. Ms. Stinson's office FA129 and she can be reached at (609) 570-3525. Special arrangements for testing are made by appointment through this office. At the beginning of the semester the student needs to make arrangements in advance for the 5 tests and the final exam. This information must then be passed on to the Coordinator and Nursing Program Specialist, Stephanie Hernandez.

Written: 8/23/07

Reviewed: 12/07

Revised: 7/08

STUDENT WORKSHEET
TO CALCULATE GRADES:

TEST #1 _____

QUIZ WK 1 _____

QUIZ WK 6 _____

TEST #2 _____

QUIZ WK 2 _____

QUIZ WK 7 _____

TEST #3 _____

QUIZ WK 3 _____

QUIZ WK 8 _____

TEST #4 _____

QUIZ WK 4 _____

QUIZ WK 9 _____

TEST #5 _____

QUIZ WK 5 _____

QUIZ WK 10 _____

AVERAGE OF
FIVE TESTS: _____ X 45% = _____ points

AVERAGE OF
TEN QUIZZES: _____ X 5% = _____ points

SUMMARY OF POINTS OF UNIT TESTS & QUIZZES = _____

FINAL EXAM
GRADE: _____ X 50% = _____ points

ADD THE TOTAL OF THE
POINTS FROM THE
CALCULATIONS ABOVE: _____ FINAL GRADE POINTS

TESTING

1. There will be a **50 question test given every three weeks.**
2. Each test will cover content presented during the **previous 3 weeks** of lecture and lab and all textbooks.
3. Each test **will** include **previously** tested content at the discretion of the instructor.
4. A **post test review** will occur immediately after the test to go over test taking skills and reinforce content. Attendance is required. **An individual test review** may be requested by the instructor and is **expected** for any **failing grade before going on to the next test.** **These students are required to see the instructor before taking the next test.**
5. The final exam *will not be reviewed* immediately after it has been taken by the student. Students may bring a self-addressed stamped envelope to the exam to have the grade mailed to the student. A class review will be held after grades are turned in.

Guidelines For Tests

All tests may be reviewed by student, but must be returned to the instructor.

During Tests:

1. Students will be seated by instructor.
2. A #2 pencil, eraser and calculator are allowed at the seat. All other belongings go in front of the room (including coats, backpacks, etc.).
1. Please go to the restroom before coming to test.
2. ALL CELL PHONES MUST BE TURNED OFF AND PLACED IN BACKPACKS OR PURSES. NO RECORDING OR VISUAL RECORDING DEVICES ARE PERMITTED IN ROOM.
5. No questions will be answered during the test unless there is a structural problem with the test.
6. When test is completed, bring to the front of room and leave quietly.
7. Return for test review.

During Test Review:

1. Students will be seated by instructor.
2. Students may not leave seat/room until test booklets have been collected and counted.
3. Nothing but test booklet and pen/pencil may be at desk during review.

Plagiarism

See MCCC Nursing Program Information Packet. If a quote is taken from a text, journal, article, etc. it is expected that the student will provide an explanation in his/her own words as well.

Attendance

Mercer County Community College does not have a cut system. Students are expected to attend all lecture, college laboratory and clinical laboratory sessions. Records will be maintained for attendance at all lectures, college and hospital labs. Clinical Laboratory absences prevent an instructor from having an adequate opportunity to evaluate a student and prevent the student from achieving clinical objectives.

Clinical Absences:

The clinical instructor may assign a written assignment for missed clinical time. This assignment does not erase the absence.

Revised: 7/08

NUR 202 MEDICAL SURGICAL CASE STUDY GUIDELINES
(This will be done in the clinical laboratory)

Objectives:

The student will:

1. Collect data about a complex med-surg client with multisystem problems.
2. Research all medical diagnosis, laboratory tests and diagnostic tests and medications showing relationships.
3. Apply the nursing process.
4. Present findings, sharing the responsibility with other students

Procedure:

1. Review chief complaint and treatment on admission (ER, Critical Care Unit, etc.). Include in this section a physical assessment upon admission and a brief medical history, including medications that the client was taking prior to hospitalization and during hospitalization.
2. Describe the pathophysiology of the disease process, incorporating lab tests, and procedures performed.
3. Briefly review the client's hospitalization...any problems encountered, progression of treatment.
4. Relate your physical assessment on the day(s) of care comparing it to the assessment done on admission by the MD. Was the client getting better? Worse? How was this determined? Identify medications the client was taking during the hospitalization and why.
5. What other members of the health care team were involved with this client's care? What recommendations were made by them? Why were they involved?
6. What discharge planning took place for this client? What considerations had to be factored in prior to releasing this client from the hospital?
7. Identify three (3) nursing diagnoses with the highest priority for this client and four (4) other nursing diagnoses. Have the group chose them. Have the group set goals and identify nursing actions appropriate to the nursing diagnoses.
8. Would you have done anything different in caring for this client than what was done during his/her hospitalization?

DIRECTIONS

1. This is not a written presentation. The student is expected to choose a client that is of interest because of the client's multisystem involvement.
2. Each case study should take no more than 15-20 minutes. No more than 3 and no less than 2 students per case study presentation. Presentations will be made orally. No written papers need be handed in.
3. Approval needed by clinical instructor.

4. All medical diagnoses are to be researched and presented in your own words.
5. Significant laboratory tests and diagnostic tests are to be explained, showing relationships to diagnoses.
6. Client medications before and during hospitalization are to be explained in relationship to diagnoses.

Revised: 12/03, 12/06, 7/07, 7/08

Reviewed 6/04, 12/04, 6/05, 12/05, 6/06, 1/08

NUR 202 NURSING PROCESS AND TEACHING PEDIATRIC TEACHING PLAN

Teaching is a common practice of the nursing process. Instruction can be formal or informal, and often require a teaching plan in order to meet the client's learning needs. This handout provides a brief overview of the development and implementation of a teaching plan.

Objectives:

The student will:

1. Utilize concepts of teaching and learning when implementing a pediatric teaching plan.
2. Utilize the nursing process to collect data, set goals for the teaching plan, implement the plan and evaluate the results.
3. Research information to teach a pediatric client.
4. Present a teaching plan in a developmentally appropriate manner.

Assessment Phase:

1. The first step of the teaching plan is the assessment of the client, the teacher and the teaching situation.
2. Collect data about the client. Assessment of client includes the client's age and developmental level, education, cultural background, economic background, physiological readiness to learn, psychological readiness to learn, willingness to learn, personal priorities and their level of understanding.
3. Identify your own learning needs, capabilities and readiness to teach.

Planning Phase: (Review with instructor)

1. Develop 2–3 measurable and reasonable client oriented objectives.
2. Research topic that you plan to teach.
3. Develop a specific teaching plan that will facilitate accomplishment of the objectives.

Implementation Phase:

1. Implement the teaching plan to preschool children.
2. If you use handouts, clear these with your instructor first. No balloons or stickers are allowed.

Evaluation Phase:

Discuss effectiveness and teaching and if your goals were met in post conference.

Grading:

Satisfactory / Unsatisfactory – grade included on performance evaluation

Topic Selection:

Student needs approval from instructor for topic selection.

Revised: 7/01, 12/03, 7/07, 1/08

Reviewed: 6/04, 12/04, 6/05, 12/05, 6/06, 12/06, 7/08

**NUR 202 NURSING PROCESS AND TEACHING
PSYCHIATRIC NURSING CARE PLAN**

Objectives:

The student will use the nursing process to interview, assess, plan and implement care for a client who has maladaptive coping behavior.

The student will use the provided form to complete the care plan.

This care plan will be presented during a post conference during The Psychiatric Clinical experience.

Reviewed: 12/03, 6/04, 12/04, 6/05, 12/05, 6/06, 12/06, 7/07, 1/08, 7/08

Units of study in detail.

**UNIT I
THERAPEUTIC APPROACHES FOR INTERFERENCES OF PSYCHOLOGICAL FUNCTIONS**

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITES
At the conclusion of this learning sequence the student will be able to:	I. <u>Therapeutic Approaches to Psychiatric Nursing Care</u>	<u>Readings:</u> Review Chaps. 7-9 Read Chaps. 10-17, 19, 20, 22, 23, 24
Understand therapeutic approaches in psychiatric nursing care.	A. Therapeutic Groups	
	B. Family	
Be able to define the therapeutic functions of each approach specific to psychiatric alterations.	C. Mileu Therapy	Townsend, Mary C. (2006) <u>Psychiatric Mental Health Nursing Concepts of Care.</u> (5 th ed.) Philadelphia: F.A. Davis
Discuss the nurse's responsibility within each approach.	D. Crisis Intervention	
	E. Relaxation Therapy	
Explain limitations of each therapeutic approach.	F. Assertiveness Therapy	
	G. Promoting Self-Esteem	
	H. Behavioral Therapy	
	I. Cognitive Therapy	
	J. Electroncolvulsive Therapy	
	K. Complementary Therapy	
	L. Client Education	

UNIT II
INTERFERENCE TO PSYCHOLOGICAL FUNCTION DUE TO SUBSTANCE RELATED DISORDER

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITES
<p>At the conclusion of this Learning sequence the student will:</p> <p>Discuss trends in the use of alcohol, drugs, the abuse, dependence, intoxicant and withdrawal behavior.</p> <p>Describe applications of the nursing process for an individual with substance abuse.</p> <p>Describe the behaviors associated with abuse, dependence and withdrawal.</p> <p>Discuss methods of assessing for substance abuse.</p> <p>Analyze predisposing factors including developmental influences and precipitating stressors related to substance abuse.</p> <p>Discuss the use of pharmacological agents for clients withdrawing from harmful substances.</p>	<p>I. <u>Drug Abuse, Alcoholism</u></p> <p>A. Define the term addiction, dependency, abuse, intoxication, detoxification and withdrawal.</p> <p>B. Discuss substance use disorders.</p> <p>C. Describe the DSM IV criteria used to classify substance abuse disorders.</p> <p>D. Identify the classes of substances abused.</p> <p>E. Describe the psychological, biological and sociocultural predisposing factors which influence predisposition for abuse of substances.</p> <p>F. Define the assessments indicating substance abuse and withdrawal</p> <p>G. Identify appropriate nursing diagnosis by analyzing data collected during assessment of substance abuse client.</p> <p>H. Describe nursing interventions appropriate for a client with substance abuse.</p> <p>I. Formulate a teaching plan for a substance abuse client.</p> <p>J. Review the professional responsibility of the nurse when dealing with the substance impaired nurse.</p>	<p><u>Readings:</u> Substance Related Disorders, Chap. 27</p> <p>Townsend, Mary C. (2006) <u>Psychiatric Mental Health Nursing Concepts of Care.</u> (5th ed.). Philadelphia: F.A. Davis</p>

UNIT III
ALTERATIONS IN PSYCHOSOCIAL ADAPTATION

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITES
<p>Discuss alterations in psychosocial adaptations related to development of eating disorders.</p> <p>Describe appropriate nursing interventions for behaviors associated with eating disorders.</p> <p>Apply the nursing process when caring for a client with eating disorders.</p>	<ul style="list-style-type: none">I. <u>Eating Disorders</u><ul style="list-style-type: none">A. Define obesity, anorexia nervosa, bulimia nervosa.B. Describe holistic assessment approach indicating an eating disorder.C. Identify developmental, genetic and family influences on individuals who develop eating disorders.D. List nursing diagnoses for clients with an eating disorder.E. Describe outcome criteria used for measurement of outcomes for care of clients with eating disorders.F. Explain a teaching plan for a client with an eating disorder.G. Design a plan of nursing intervention for a client with an eating disorder.	<p>Readings: Eating Disorders, Chap. 34</p> <p>Townsend, Mary C. (2006) <u>Psychiatric Mental Health Nursing Concepts of Care</u>. (5th ed.). Philadelphia: F.A. Davis</p>

Eating Disorders (continued)

- H. Describe differences in treatment approach for acute and chronic eating disorders.
- I. Identify information to provide clients with eating disorders based on current research and available community resources.
- J. Explain the nurse's responsibility when administering medications used for associated symptoms seen in clients with eating disorders.
- K. Be aware of community support agencies available for eating disorder clients.

UNIT IV
INTERFERENCES IN PSYCHOLOGICAL FUNCTIONING DUE TO ALTERATIONS IN COGNITIVE MEMORY

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITES
<p>Discuss disorders which cause a significant deficient in cognition or memory exists representing a significant change in previous level of functioning.</p> <p>Determine nursing care to use with clients with cognitive disorders.</p> <p>Describe supportive approaches needed to be used with families of clients with cognitive disorders.</p>	<p>II. <u>Delirium, Dementia and amnesic Disorders</u></p> <p>A. Define delirium, dementia and amnesic disorders.</p> <p>B. Identify predisposing factors causing delirium, dementia and amnesic disorders.</p> <p>C. Compare the health trends of the past and present showing the increase incidence of delirium, dementia and animistic disorders.</p> <p>D. Define the assessment which indicates delirium, dementia and amnesic disorders.</p> <p>E. Show the relationship of other disorders to delirium, dementia, and amnesic disorders.</p> <p>F. List nursing diagnosis appropriate for delirium, dementia, and amnesic disorders.</p> <p>G. Review list of topics for client and families education related to cognitive disorders.</p> <p>H. Define the highest level of functioning for the client with a cognitive disorder in order to identify appropriate nursing interventions.</p> <p>I. Determine how to assess the family in dealing with a chronic progressive cognitive disorder.</p> <p>J. List community support groups for cognitive disorders.</p> <p>K. Describe pharmacological approaches for symptom management of clients with cognitive disorders.</p>	<p>Readings: Delirium, Dementia and Amnesic Disorders, Chapt. 26</p> <p>Townsend, Mary C. (2006) <u>Psychiatric Mental Health Nursing Concepts of Care</u>. (5th ed.). Philadelphia: F.A. Davis</p>

UNIT V
INTERFERENCE TO PSYCHOLOGICAL FUNCTION DUE TO MOOD DISORDER

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITES
<p>Discuss alternations in psychosocial adaptations seen in mood disorders as manifestations of dysfunctional grieving.</p> <p>Discuss the psychopharmacology in the treatment of mood disorders.</p> <p>Analyze the relationship between coping resources and positive outcomes in depression.</p> <p>Discuss ECT as a somatic therapy for treatment of mood disorders.</p>	<p>I. <u>Bipolar and Depressive Disorders</u></p> <p>A. Define Depressive Disorders.</p> <p>B. Identify behaviors which can be assessed for by the nurse indicating a depressive mood disorder.</p> <p>C. Discuss biological and psychologic theories of predisposing factors causing mood disorders.</p> <p>D. Developmental differences in how clients develop mood disorders.</p> <p>E. Apply the nursing process to clients with mood disorders.</p> <p>F. Describe nursing responsibility in administering medications to clients with mood disorders.</p> <ol style="list-style-type: none"> 1. antidepressants 2. monoamine oxidase inhibitors 3. antimanic agents 	<p>Readings: Mood Disorders, Chapt. 29</p> <p>Townsend, Mary C. (2006) <u>Psychiatric Mental Health Nursing Concepts of Care</u>. (5th ed.). Philadelphia: F.A. Davis</p>

LEARNING OBJECTIVES**CONTENT OUTLINE****LEARNING ACTIVITIES**

Assess for suicidal maladaptive responses.

Analyze the relationship between suicide and a caring therapeutic environment.

Discuss concepts of anger and aggression in psychiatric nursing

Identify predisposing factors leading to maladaptive expression of anger.

Apply the nursing process as a means of delivery of care to clients in management of anger and aggression.

II. Suicide

- A. List risk factors leading to suicide.
- B. Review predisposing factors explained by psychological, sociological and biological theories as to the cause of suicide.
- C. Identify assessments which indicate risk for suicide.
- D. Describe how the nurse provides a caring therapeutic environment.
- E. Provide appropriate follow up referrals after the crisis has resolved.

III. Anger/Aggression

- A. Define anger and aggression
- B. Predisposing factors to anger and aggression
 - 1. biological
 - 2. environmental
- C. Assessment of risk factors and behaviors indicating potential anger in order to prevent violence.
- D. Identify nursing diagnosis considered for clients demonstrating inappropriate expression of anger or aggression.
- E. Define outcomes/criteria utilized to measure care of clients needing assistance with management of anger and aggression.
- F. Legal limitations of use of restraints for aggressive clients.

Readings: The Suicidal Client, Chap. 18

Townsend, Mary C. (2006) Psychiatric Mental Health Nursing Concepts of Care. (5th ed.). Philadelphia: F.A. Davis

Readings: Anger/Aggression Management, Chap. 17

Townsend, Mary C. (2006) Psychiatric Mental Health Nursing Concepts of Care. (5th ed.). Philadelphia: F.A. Davis

LEARNING OBJECTIVES

Discuss the problems associated with abuse and neglect.

Compare the theories of predisposing factors for abuse to the assessments of client data.

Apply crisis intervention concepts to problems of abuse.

CONTENT OUTLINE**IV. Abuse and Neglect**

A. Review historical perspectives related to abuse.

B. Identify predisposing factors.

1. biological theories
2. psychological theories
3. sociocultural theories

C. Review specific types of abuse.

1. spouse abuse
2. child abuse
3. sexual abuse
4. sexual assault

D. Combine assessment data, predisposing factors and background information to determine nursing diagnosis appropriate for abuse.

E. Develop educational plans for clients experiencing abuse.

F. Assist client and family member to deal with the crisis of abuse.

G. Provide supportive referrals for clients experiencing abuse.

LEARNING ACTIVITIES

Readings: Problems Related to Abuse and Neglect, Chap. 40

Townsend, Mary C. (2006) Psychiatric Mental Health Nursing Concepts of Care. (5th ed.). Philadelphia: F.A. Davis

LEARNING OBJECTIVES

Discuss theoretical perspectives on grief and loss.

Discuss the meaning of loss to the client, family and health care providers.

CONTENT OUTLINEV. Grief and Loss

- A. Discuss the grief response.
- B. Explain maladaptive responses to loss.
- C. Describe theoretical viewpoints about death and dying
- D. Define the developmental variations of responses to death and dying.
- E. Assessment of dying client and family.
- F. Nursing interventions which facilitate the mourning process.
- G. Supportive measures focused on the dying client and family.
- H. Supportive measures focused on the nurse/caregiver.
- I. Describe physiology of dying.
- J. Hospice care.
- K. End of life moral and ethical issues.

LEARNING ACTIVITIES

Readings: Bereaved Individual, Chap. 43

Townsend, Mary C. (2006) Psychiatric Mental Health Nursing Concepts of Care. (5th ed.). Philadelphia: F.A. Davis

UNIT VI
INTERFERENCES TO SAFETY NEEDS DUE TO
SENSORY DEPRIVATION AND AGING

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITIES
Identify diagnostic tests utilized to assess the structures of the eye as well as vision.	I. Anatomy and Physiology	<u>READINGS:</u>
Describe the components of any eye assessment.	A. Structures of the External Eye	<u>Ball and Bindler:</u>
Define the nursing care of clients having surgery for corneal disorders and for detached retina.	B. Structures of the Anterior Chamber	Alterations in Eye, Ear, Nose, Throat
Utilizing the nursing process as a framework, outline the care to be given to clients undergoing cataract surgery.	C. Structures of the Posterior Chamber	
Describe the care for a client diagnosed with glaucoma.	D. Gerontologic Considerations	
Identify the pathophysiology behind Meniere's Disease.	II. Ophthalmic Assessment	<u>Lilley:</u>
Using the nursing process as a framework, identify the nursing care for a client with Meniere's Disease.	A. History	<u>Chapter 53</u> Ophthalmic Agents
Identify the pathophysiology of retinal degeneration and the nursing needs for an individual with this diagnosis.	B. Gerontologic Considerations	<u>Chapter 54</u> Otic Agents
Describe the degenerative changes in the ear caused by aging.	C. Physical Assessment	
Identify interventions utilized to improve hearing/halt hearing loss.	D. Diagnostic Evaluation	<u>Ignatavicious/Workman:</u>
	E. Refraction/Accommodation	<u>Chapter 49 - 52:</u> Eye/Ear
	III. Conditions of the Eye	Review of A&P, assessment, impaired vision, glaucoma, cataracts
	A. Cataracts	Retinal Detachment
	1. Pathophysiology	Macular Degeneration
	2. Clinical Manifestations	Orbital Trauma
	3. Diagnostic Evaluations	Diabetic Retinopathy
	4. Management	Ocular Medication
	5. Client Education	Ear
	6. Perioperative Care	Review of A & P, assessment and evaluation
	B. Glaucoma	Meniere's
	1. Classification	
	2. Assessment and Clinical Manifestations	
	3. Diagnostic Evaluation	
	4. Management	
	5. Client Education/Home Care	
	6. Gerontologic Considerations	
	C. Retinal Detachment	
	1. Clinical Manifestations	
	2. Management	
	D. Diabetic Retinopathy	
	E. Age-Related Macular Degeneration	
	F. Ocular Emergencies	

- IV. Ophthalmic Laser Surgery
 - A. Client Education
 - B. Nursing Assessment
 - C. Nursing Interventions

- V. Ophthalmic Nursing Care
 - A. Special Eye Care
 - B. General Eye Care

- VI. Anatomy and Physiology of the Ear (review)

- VII. Assessment of Hearing Ability
 - A. Examination of the Ear
 - B. Auditory/Vestibular Diagnostic Procedures
 - C. Communication

- VIII. Conditions of the Inner Ear
 - A. Meniere's Disease
 - 1. Clinical Manifestations
 - 2. Diagnostic Evaluation
 - 3. Management

UNIT VII
INTERFERENCES TO OXYGEN NEEDS:
CONGENITAL HEART ANOMALIES AND CARDIOVASCULAR SURGERY

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Compare and contrast fetal circulation with neonatal circulation addressing both anatomical and hemodynamic functioning.	I. Transition from fetal to pulmonary circulation	<u>Ball and Bindler:</u> <u>Chapter 12</u> Alterations in Cardiovascular function, pg. 466-511
Identify distinctive clinical manifestations found in the following congenital heart defects: Coarctation of the aorta Patent ductus arteriosus Atrial septal defect Ventricular septal defect Tetralogy of fallot Transposition of the great vessels Aortic stenosis Pulmonic stenosis	II. Congenital heart disease A. Acyanotic defects 1. patent ductus arteriosus 2. arterial septal defect 3. ventricular septal defect 4. aortic stenosis 5. pulmonic stenosis 6. coarctation of the aorta B. Cyanotic defects 1. Tetralogy of Fallot 2. Transposition of the Great Vessels C. Diagnostics 1. Cardiac catheterization 2. Chest x-ray 3. ECG D. Congestive Heart Failure 1. Pathophysiology 2. Clinical manifestations 3. Diagnostics 4. Nursing assessment 5. Medical management E. Surgical Intervention 1. Types of surgeries 2. Nursing care	<u>Lilley:</u> <u>Chapter 20</u> Positive Inotropic Agents <u>Chapter 21</u> Antidysrhythmic Agents <u>Chapter 26</u> Coagulation Modifier Agent <u>Chapter 24</u> Diuretic Agents
Identify and explain the diagnostic tests frequently employed to identify anatomical changes in the heart, and the nursing implications.		<u>Ignatavicious/Workman:</u> <u>Chapter 36</u> Cardiac Assessment <u>Chapter 38</u> Review CHF, valvular heart disease, infective endocarditis, pericarditis, rheumatic carditis, transplant <u>Chapter 39</u> Abdominal aortic aneurysm
Identify the nurse care for the client (pediatric and adult) undergoing a cardiac catheterization.		
List the points to make when performing discharge teaching for the cardiac catheterization client.		
Outline the plan of care (including rationales) for an infant or child with congestive heart failure.	III. Acquired Valvular Disorders of the Heart A. Types of valvular problems (mitral stenosis, mitral valve prolapse, aortic stenosis, aortic regurgitation) B. Valve repair and replacement C. Infectious diseases of the heart (endocarditis, pericarditis)	
Explain how infective endocarditis effects the client systematically.		
Describe the following palliative/corrective surgical procedures and identify for which congenital defect they are used: Arterial switch		

LEARNING OBJECTIVES

Fontan
Modified Blalock-Taussig
Mustard or senning
Norwood
Patent ductus arteriosus ligation
Rashkind
Valvuloplasty

Define the various types of valvular heart disorders describing the pathophysiology, clinical manifestations and management of each one.

Identify the various types of valvuloplasty.

Identify the types of valve replacements and the advantages/disadvantages of each.

Identify the microorganisms that may cause cardiac valve disease and their port of entry.

Define chemoprophylaxis in relation to cardiac valve disease and nursing implications.

Compare the infectious disease of the heart, identifying their causes, pathologic changes, clinical manifestations, management and prevention.

Describe how a heart-lung bypass machine is utilized during cardiac surgery.

Identify the problems associated with cardiopulmonary bypass.

Using the nursing process as a framework, identify the care given to a client pre- and post-op for cardiac surgery.

Describe the classifications used for aortic aneurysms.

Compare and contrast thoracic aortic

CONTENT OUTLINE

IV. Cardiopulmonary bypass
A. Transplantation
B. Mechanical assist devices and total artificial hearts
C. Pre-op nursing management
D. Intro-op nursing management
E. Post-op nursing management
F. Complications of cardiac surgery

V. Aortic Aneurysms
A. Classifications
B. Thoracic
C. Abdominal
D. Dissecting

VI. Medications Used
A. Cardiac glycosides
B. Dysrhythmics
C. Anticoagulants

LEARNING ACTIVITIES

LEARNING OBJECTIVES**CONTENT OUTLINE****LEARNING ACTIVITIES**

aneurysms, abdominal aortic aneurysms, and dissecting aneurysms.

Explain what the mechanism of action of the cardiac glycosides is and why they are used in congestive heart failure.

Identify other classes of drugs used in congestive heart failure and how they work.

Identify how the following anti-dysrhythmics work and are used in the client having cardiac surgery:

- Atropine
- Propranolol
- Amiodarone
- Lidocaine
- Procainamide

Identify the adverse effects of heparin and coumadin and associate with what the nurse would be looking for on client assessment.

UNIT VIII
INTERFERENCE TO NUTRITIONAL NEEDS DUE TO DEGENERATION AND INFLAMMATION:
BILIARY AND PANCREATIC DISORDERS, GASTRO-DUODENAL ULCERS

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Identify the possible causes of gallbladder disease.	<ul style="list-style-type: none"> I. Biliary Conditions <ul style="list-style-type: none"> A. Cholecystitis B. Cholelithiasis <ul style="list-style-type: none"> 1. Pathophysiology 2. Clinical manifestations 3. Diagnostic evaluation 4. Medical management 5. Surgical management II. The Pancreas <ul style="list-style-type: none"> A. Pancreatitis <ul style="list-style-type: none"> 1. Acute pancreatitis <ul style="list-style-type: none"> a. pathophysiology b. clinical manifestations c. diagnostic evaluation d. management 2. Chronic pancreatitis <ul style="list-style-type: none"> a. causes b. clinical manifestations c. diagnostic evaluation d. management III. Peptic Ulcer <ul style="list-style-type: none"> A. Etiology and Incidence B. Pathophysiology C. Clinical Manifestations D. Diagnostic Evaluation E. Medical Management <ul style="list-style-type: none"> 1. Lifestyle modification 2. Diet 3. Medications <ul style="list-style-type: none"> a. antacids b. H2 blockers c. antibiotics and bismuth salts d. Proton pump inhibitor e. Cytoprotective agents f. Anticholinergics/antimuscarins F. Surgical Management <ul style="list-style-type: none"> 1. vagotomy 2. bilroth I 	<p><u>Ignatavicious/Workman:</u> <u>Chapter 56</u> Assessment of the gastrointestinal system <u>Chapter 63</u> Cholecystitis, pancreatitis <u>Chapter 59</u> Interventions for clients with stomach disorders, peptic, gastric, duodenal and stress ulcers.</p> <p><u>Lilley:</u> <u>Chapter 47</u> Cytoprotective Agents, Antacids, Antiflatulents, H2 Antagonists, Proton Pump Inhibitors, Cytoprotective Agents, Anticholinergics, Antimuscarins</p> <p><u>Ball and Bindler:</u> Peptic Ulcer, pg. 616 Biliary Atresia, pg. 629-630</p>
List signs and symptoms of gallbladder disease.		
Compare approaches to management of cholelithiasis.		
Using the nursing process as a framework, identify the care of clients with cholelithiasis and those undergoing cholecystectomy.		
Explain the anatomy and physiology of the pancreas.		
Differentiate between acute and chronic pancreatitis.		
Using the nursing process as a framework, identify the care for clients with acute pancreatitis.		
List the predisposing factors of a gastro-duodenal ulcer.		
Describe the pathophysiologic process of peptic ulcer.		
Identify the dietary, pharmacologic and surgical treatment of peptic ulcer disease.		
Using the nursing process as a framework, outline a plan of care for the client undergoing gastric surgery.		

LEARNING OBJECTIVES

CONTENT OUTLINE

LEARNING ACTIVITIES

3. bilroth II
4. subtotal gastrectomy

UNIT IX
INTERFERENCE TO NUTRITIONAL NEEDS DUE TO DEGENERATION AND INFLAMMATION:
CIRRHOSIS OF THE LIVER AND HEPATITIS

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Identify metabolic functions of the liver.	I. Physiologic Overview	<u>Ball and Bindler:</u> <u>Chapter 15</u> Acute Hepatitis, pg. 630-635
Explain liver function tests and clinical manifestations of liver dysfunction in relation to pathophysiologic alterations of the liver.	A. Liver anatomy B. Liver physiology 1. Metabolic functions 2. Medication metabolism 3. Bile formation 4. Bile excretion 5. Gallbladder function	<u>Ignatavicious/Workman:</u> <u>Chapter 62</u> Cirrhosis, hepatitis, liver transplant, cancer of the liver
Compare and contrast the various types of hepatitis: cause, clinical manifestations, management, prognosis, home health care needs and prevention.	C. Pathophysiology 1. Causes 2. Manifestations 3. Hematologic effects 4. Endocrine imbalances	<u>Lilley:</u> <u>Chapter 43</u> Immunosuppressant Agents
Identify precipitating factors in cirrhosis.	D. Gerontologic Considerations	
Describe the pathophysiology of cirrhosis and correlate clinical manifestations with these processes.	II. Diagnostic Evaluation of Hepatic Function	
Using the nursing process as a framework, outline a plan of care for the client with cirrhosis.	A. Examination of liver B. Liver function tests C. Other diagnostic tests	
Identify the connection between portal hypertension, cirrhosis and esophageal varices.	III. Clinical Manifestations of Hepatic Dysfunction	
Discuss the mechanism of action, contraindications, cautions, side effects and toxicity associated with the most commonly used immunosuppressives.	A. Jaundice B. Hyperbilirubinemia C. Portal hypertension D. Hepatic encephalopathy and hepatic coma	
Discuss the education guidelines for clients receiving an immunosuppressant agent.	IV. Hepatic Disorders	
	A. Viral hepatitis 1. Hepatitis A 2. Hepatitis B 3. Hepatitis C 4. Hepatitis D 5. Hepatitis E	

LEARNING OBJECTIVES

CONTENT OUTLINE

LEARNING ACTIVITIES

- 6. Toxic hepatitis and drug-induced hepatitis
 - 7. Fulminant hepatic failure
- V. Hepatic Cirrhosis
- A. Types
 - B. Pathophysiology
 - C. Clinical manifestations
 - D. Diagnostic evaluation
 - E. Medical management
 - F. Complications
 - 1. Esophageal varices
 - a. pathophysiology
 - b. diagnostic evaluation
 - c. medical management
 - d. surgical management

UNIT X
INTERFERENCES TO NUTRITIONAL ELIMINATION NEEDS:
INTESTINAL AND URINARY DIVERSIONS

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITIES
Describe the responsibilities of the nurse in meeting the needs of the client with fecal diversion.	I. Types of Fecal Diversions A. Ileostomy B. Continent ileal reservoir C. Ileoanal anastomosis	<u>Ball and Bindler:</u> <u>Chapter 16</u> Renal Failure, pg. 662-675 <u>Chapter 15</u> Ostomies, pg. 585, 6017-608
Using the nursing process as a framework, create a plan of care for the client with cancer of the colon.	II. The Client Requiring an Illeostomy A. Pre-op considerations B. Post-op considerations C. Psychosocial considerations D. Rehabilitation E. Client education/home care considerations F. Complications	<u>Lilley:</u> <u>Chapter 43</u> Immunosuppressant Agents
Compare and contrast the nursing care of a client with a colostomy to one with an ileostomy.		<u>Ignatavicious/Workman:</u> <u>Chapter 60</u> Colorectal cancer/colostomy <u>Chapter 61</u> Ileostomy, J-pouch <u>Chapter 72</u> Assessment of renal/urinary system <u>Chapter 73</u> Urothelial cancer/urinary diversions <u>Chapter 75</u> Interventions for clients with acute and chronic renal failure
Compare and contrast hemodialysis and peritoneal dialysis in terms of underlying principles, procedures, complications and missing considerations.	III. Cancer of the Large Intestine: Colon/Rectum A. Risk factors B. Pathophysiology C. Clinical manifestations D. Gerontological considerations E. Diagnostic workup F. Medical management G. Surgical management	
Describe nursing management of the hospitalized dialysis client.		
Using the nursing process as a framework, create a care plan for a client undergoing kidney surgery.	IV. Dialysis A. Hemodialysis 1. Access 2. Long term management 3. Complications 4. Client education 5. Psychosocial considerations 6. Alternatives B. Peritoneal 1. goals/indications 2. preparation	
Describe the causes of acute and chronic renal failure.		
Differentiate between acute and chronic renal failure as to pathophysiology, clinical manifestations, management and nursing interventions.		
Develop a post-op nursing care plan and teaching plan for the client undergoing kidney transplantation.		
Describe the most common types of urinary diversions in use today. Identify pre- and post-op nursing interventions for a client undergoing		

LEARNING OBJECTIVES**CONTENT OUTLINE****LEARNING ACTIVITIES**

a urinary diversion.

- 3. CAPD
- C. Care of the hospitalized dialysis client
- D. Client undergoing kidney surgery

V. Acute Renal Failure

- A. Pathophysiology
- B. Clinical manifestations/Lab abnormalities
- C. Prevention
- D. Management
- E. Nursing interventions

VI. Chronic Renal Failure

- A. Pathophysiology
- B. Clinical manifestations
- C. Management
- D. Nursing interventions
- E. Gerontologic considerations

VII. Kidney Transplant

- A. Pre-op management
- B. Post-op management

VIII. Urinary Diversions

- A. Ileal conduit urinary diversion
- B. Continent ileal urinary reservoir
- C. Ureterosigmoidostomy
- D. Cutaneous ureterostomy

UNIT XI
INTERFERENCES TO OXYGEN NEEDS:
HEAD, NECK AND CHEST SURGERY

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Identify the risk factors and clinical manifestations for cancer of the larynx.	<ul style="list-style-type: none"> I. Cancer of the Larynx <ul style="list-style-type: none"> A. Demographics <ul style="list-style-type: none"> 1. Who is at risk 2. Causative agents 3. Anatomical areas affected B. Clinical Manifestations <ul style="list-style-type: none"> 1. Early signs 2. Late signs C. Diagnostics <ul style="list-style-type: none"> 1. X-ray studies 2. Biopsies 3. Tumor classifications D. Medical Management <ul style="list-style-type: none"> 1. Radiation 2. Surgery <ul style="list-style-type: none"> a. partial laryngectomy b. supraglottic laryngectomy c. hemivertical laryngectomy d. total laryngectomy E. Nursing Care of the Laryngectomy Client <ul style="list-style-type: none"> 1. Assessment 2. Goals 3. Pre-op interventions 4. Post-op interventions F. Client Education <ul style="list-style-type: none"> 1. Care of tracheostomy 2. Respiratory precautions 3. Discharge concerns G. Radical Neck Dissection <ul style="list-style-type: none"> 1. Anatomical changes 2. Nursing care <ul style="list-style-type: none"> a. goals b. pre-op interventions c. post-op interventions II. Lung Cancer <ul style="list-style-type: none"> A. Demographics <ul style="list-style-type: none"> 1. Risk factors 2. Classification and staging 	<p><u>Lilley:</u> <i>Chapter 45</i> Antineoplastic Agents</p> <p><u>Ignatavicious/Workman:</u> <i>Chapter 31</i> Review tracheostomy and oxygen therapy <i>Chapter 32</i> Cancer of the larynx <i>Chapter 33</i> Lung cancer, chest drainage</p>
Describe the anatomical alterations produced by the various types of laryngeal surgeries for laryngeal cancer.		
Using the nursing process as a framework, identify the nursing concerns (both pre- and post-op) for the client with laryngeal cancer.		
Identify the client education and home care considerations for the laryngectomy client.		
Using the nursing process as a framework, identify the nursing concerns/care (both pre- and post-op) for the client undergoing a neck dissection.		
Describe the nursing interventions to be used with the client undergoing chemotherapy for lung cancer.		
Identify risk factors and clinical manifestations for lung cancer.		
Describe the surgical procedures used to treat/manage lung cancer.		
Using the nursing process as a framework, identify nursing concerns/care (both pre- and post-op) for the client undergoing thoracic surgery.		
Describe the principles of water-seal chest drainage and the nursing responsibilities related to the care of the client with water-seal chest drainage system.		

LEARNING OBJECTIVES

Describe the client education and home care considerations for clients who have had thoracic surgery.

CONTENT OUTLINE

- B. Clinical Manifestations
 - 1. Signs and symptoms
- C. Diagnostics
 - 1. Procedures
 - 2. Biopsies
 - 3. Metastasis work-up
- D. Medical Management
 - 1. Surgery
 - a. lobectomy
 - b. sleeve lobectomy
 - c. pneumonectomy
 - 2. Radiation therapy
 - a. benefits
 - b. side effects
 - 3. Chemotherapy
 - a. Agents used
 - b. Client education
 - 1) side effects
 - 2) lab studies
- E. Nursing Care/Interventions
 - 1. Respiratory care modalities
 - 2. Pre-op interventions
 - 3. Post-op interventions
 - a. goals
 - b. chest drainage
 - c. respiratory care
 - d. mobility/arm exercises
- F. Client Education
 - 1. Comfort
 - 2. Arm exercises
 - 3. Rest/Activity
 - 4. Prophylaxis

LEARNING ACTIVITIES

UNIT XII
INTERFERENCES TO NUTRITIONAL NEEDS DUE TO HEREDITARY FACTORS:
DIABETES MELLITUS, CELIAC DISEASE, CYSTIC FIBROSIS

LEARNING OBJECTIVES	CONTENT OUTLINE	LEARNING ACTIVITIES
Compare and contrast Type I and Type II diabetes as to cause, clinical manifestations, medical management.	<ul style="list-style-type: none"> I. Types of Diabetes <ul style="list-style-type: none"> A. Type I <ul style="list-style-type: none"> 1. Pathophysiology 2. Clinical characteristics 3. Diagnostic evaluation 4. Management B. Type II <ul style="list-style-type: none"> 1. Pathophysiology 2. Clinical characteristics 3. Diagnostic evaluation 4. Management II. Acute Complications of Diabetes <ul style="list-style-type: none"> A. Hypoglycemia B. Diabetic ketoacidosis C. Hyperglycemic Hyperosmolar Nonketotic Coma III. Long-Term Complications of Diabetes <ul style="list-style-type: none"> A. Macrovascular Complications B. Microvascular Complications C. Foot & Leg Problems IV. Special Issues in Diabetes <ul style="list-style-type: none"> A. Undergoing Surgery B. The Hospitalized Client C. Sick Day Rules D. Stress E. Gerontologic Considerations V. Celiac Disease <ul style="list-style-type: none"> A. Definition B. Symptoms C. Diagnosis D. Nursing Management E. Medications VI. Cystic Fibrosis <ul style="list-style-type: none"> A. Definition 	<p><u>Ball and Bindler:</u> <i>Chapter 20</i> Disorders of Altered Pancreatic Function, pg. 849-854 <i>Chapter 11</i> Cystic Fibrosis, pg. 454-459 <i>Chapter 11</i> Alterations in Respiratory Function (review of A&P differences in pediatrics), pg. 408-412 <i>Chapter 13</i> Disorders of Malabsorption, pg. 627-628</p> <p><u>Lilley:</u> <i>Chapter 35</i> Bronchodilators and Other Respiratory Agents <i>Chapter 34</i> Antihistamines, Decongestants, Antitussives and Expectorants <i>Chapter 30</i> Antidiabetic and Hypoglycemic Agents <i>Chapter 48</i> Antidiarrheals and Laxatives</p> <p><u>Smelter & Beare:</u> <i>Chapter 38</i> Malabsorption Conditions, pg. 1034-1035 <i>Chapter 68</i> Diabetes <i>Chapter 33</i> Cystic fibrosis <i>Chapter 60</i> Malabsorption syndrome, celiac/sprue</p>
Create a schematic diagram to describe the pathophysiology of diabetic ketoacidosis.		
Using the above schematic diagram, identify clinical signs/symptoms of diabetes.		
Identify the diagnostic tests utilized to diagnose diabetes mellitus.		
Identify the medications utilized in treating the diabetic client and describe how they work.		
Compare and contrast hypoglycemia, diabetic ketoacidosis and hyperosmolar nonketotic syndrome.		
Identify the long-term effects of diabetes.		
Using the nursing process as a framework, develop a plan of care for the diabetic client.		
Describe the pathophysiology of celiac disease and related clinical manifestations.		
Identify the treatment for celiac disease.		
Identify the physiologic effects of cystic fibrosis.		

LEARNING OBJECTIVES

CONTENT OUTLINE

LEARNING ACTIVITIES

- B. Clinical Manifestations
- C. Etiology and Pathophysiology
- D. Diagnostic Tests
- E. Medical Management
- F. Nursing Management

UNIT XIII
INTERFERENCES TO NUTRITIONAL NEEDS DUE TO REGULATORY MECHANISM DYSFUNCTION:
ENDOCRINE DISORDERS

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Describe the functions and hormones secreted by each of the endocrine glands.	I. Physiologic Overview	<u>Ball and Bindler:</u> <u>Chapter 22</u> Alterations in Endocrine Function, pg. 821-861
Identify the diagnostic tests used to determine alterations in function of each of the endocrine glands.	A. Pituitary Gland B. Thyroid Gland C. Adrenal Gland D. Parathyroid Gland E. Pancreas	<u>Lilley:</u> <u>Chapter 28</u> Pituitary Agents <u>Chapter 29</u> Thyroid and Antithyroid Agents <u>Chapter 31</u> Adrenal Agents
Compare hypo- and hyperthyroidism as to cause, clinical manifestations, management and nursing intervention.	II. Assessment	<u>Ignatavicious/Workman:</u> <u>Chapter 65</u> Assessment of endocrine
Compare hypo- and hyperparathyroidism as to cause, clinical manifestations, management and nursing interventions.	A. Tests of thyroid function B. Diagnostic evaluation of hyper- and hypoparathyroidism C. Diagnostic evaluation of adrenal glands 1. Pheochromocytoma 2. Addison's disease 3. Cushing's disease	<u>Chapter 66</u> Pituitary & adrenal <u>Chapter 67</u> Thyroid & parathyroid
Compare Addison's Disease with Cushing's Syndrome: causes, clinical manifestations, management and nursing interventions.	III. Diseases	
Identify the teaching needs of clients requiring corticosteroid therapy.	A. Hypothyroidism B. Hyperthyroidism C. Hyperparathyroidism D. Hypoparathyroidism E. Pheochromocytoma F. Addison's disease G. Cushing's disease	
	IV. Corticosteroid Therapy	
	A. Side Effects B. Client Teaching	

UNIT XIV
INTERFERENCES TO REST AND ACTIVITY NEEDS:
CENTRAL NERVOUS SYSTEM DISORDERS

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Describe the pathophysiology of increased intracranial pressure.	I. Increased Intracranial Pressure	<u>Ball and Bindler:</u> <i>Chapter 20</i> Alterations in Neurologic Function, pg. 725-778 <u>Lilley:</u> <i>Chapter 12</i> Antiepileptic Agents <i>Chapter 24</i> Diuretic Agents <u>Ignatavicious/Workman:</u> <i>Chapter 44</i> Assessment of the nervous system <i>Chapter 45</i> Seizures, meningitis, parkinsons <i>Chapter 46</i> Lumbar spinal surgery, spinal cord injury, multiple sclerosis, any atrophic lateral sclerosis <i>Chapter 47</i> Guillian-Barré, Bells Palsy, Myasthenia gravis, trigeminal neuralgia
Identify the early and late clinical manifestations of increased intracranial pressure.	A. Pathophysiology B. Clinical Manifestations C. Management D. Complications E. The Client with IICP F. Monitoring Intracranial Pressure G. Nursing Implications of ICP Monitoring H. Causes of IICP	
Identify those situations where the client might experience increased intracranial pressure.	II. The Client with Neurologic Dysfunction	
Identify the special nursing interventions necessary for managing IICP caused by:	A. Assessment B. Goals C. Nursing Interventions	
Brain tumors	III. The Unconscious Client	
Meningitis	A. Diagnostic Evaluation B. Medical Management C. Complications D. The Unconscious Client	
Intracranial abscess	IV. Cerebral Hemorrhage	
Intracranial aneurysm	A. Extradural B. Subdural C. Subarachnoid D. Intracerebral	
Convulsive disorders	V. The Client Undergoing Intracranial Surgery	
Head injuries	A. Surgical Approaches B. Diagnostic Evaluation C. Management D. Nursing Care E. Transphenoidal Surgery	
Hydrocephalus	VI. Anticonvulsants	
Using the nursing process as a framework, create a care plan for the client with increased intracranial pressure.	A. Epilepsy	
Describe specific nursing actions and their rationale in caring for an unconscious client.	VII. Osmotic Diuretics	
Describe how cerebral hemorrhage might increase intracranial pressure.		
Using the nursing process as a framework, create a plan for the client undergoing intracranial surgery.		
Identify the medications commonly used in treating the client with neurologic dysfunction.		

UNIT XV
**INTERFERENCES TO REST AND ACTIVITY NEEDS DUE TO TRAUMA AND DEGENERATIVE DISORDERS, SPINAL CORD INJURIES/
 DEVELOPMENTAL ALTERATIONS, AMPUTATIONS**

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Compare and contrast the pathophysiology of multiple sclerosis. Parkinson's disease and myasthenia gravis.	I. Multiple Sclerosis A. Pathophysiology B. Clinical Manifestations C. Diagnostic Evaluations D. Management E. Nursing Assessment F. Nursing Interventions II. Parkinson's Disease A. Pathophysiology B. Clinical Manifestations C. Diagnostic Evaluations D. Management E. Nursing Assessment F. Nursing Interventions III. Myasthenia Gravis A. Pathophysiology B. Clinical Manifestations C. Diagnostic Evaluations D. Medical Management E. Surgical Management F. Myasthenic Crisis vs. Cholinergic Crisis G. Nursing Assessment H. Nursing Interventions IV. Cranial Nerve Disorders A. Trigeminal Neuralgia B. Bells' Palsy C. Guillan-Barré Syndrome V. Herniation of an Intervertebral Disc A. Clinical Manifestations B. Diagnostic Evaluation C. Management D. Cervical Disc Herniation E. Lumbar Disc Herniation VI. Spinal Cord Injury	<u>Ball and Bindler:</u> <u>Chapter 20</u> Alterations in Neurologic Function, pg. 725-778 <u>Chapter 21</u> Amputations, pg. 816-817 <u>Lilley:</u> <u>Chapter 13</u> Anti-Parkinsonian Agent <u>Chapter 19</u> Cholinergic Agents <u>Chapter 65</u> Brain Tumors, Parkinson's Disease, ALS, Degenerative Disc, Herniated Disc <u>Chapter 69</u> Amputation, pg. 2103-2110 <u>Chapter 63</u> Head Injury, Spinal Cord Injury
Using the nursing process as a framework, identify the care required for the client having multiple sclerosis, Parkinson's disease and myasthenia gravis.		
Describe the medical and nursing management of a client with neurological problems due to cranial nerve involvement.		
Describe the pathophysiology of a herniated intervertebral disc and correlate clinical manifestations.		
Describe the conservative medical and nursing management of a client with a herniated disc.		
Identify the emergency medical goals for a client with a spinal cord injury.		
Explain the nursing actions in caring for a client undergoing treatment for a spinal cord injury.		
Construct a nursing care plan for a client who is a paraplegic including short and long term goals.		
Identify the care to be given to the client having an amputation: pre-op, post-op, rehab and psychological.		
Using the nursing process as a framework, develop care plans for the following pediatric neurologic dysfunctions: Cerebral Palsy Spina Bifida		

LEARNING OBJECTIVES

CONTENT OUTLINE

LEARNING ACTIVITIES

- A. Prevention
- B. Pathophysiology
- C. Emergency Management
- D. Clinical Manifestations
- E. Diagnostic Evaluation
- F. Management of Spinal Cord Injuries
- G. Complications of Spinal Injury
- H. Nursing Assessment
- I. Nursing Intervention
- J. The Quadriplegic or Paraplegic Client

Chapter 48 Traumatic brain injury, increased intracranial pressure, hemorrhage, hydrocephalus, brain tumors, craniotomy

- VII. Amputation
 - A. Factors Affecting Amputation
 - B. Management
 - C. Nursing Assessment
 - D. Nursing Intervention
- VIII. Pediatric Neurology
 - A. Cerebral Palsy
 - B. Spina Bifida

UNIT XVI
INTERFERENCES TO SAFETY NEEDS DUE TO BURNS AND ALLERGIES

<u>LEARNING OBJECTIVES</u>	<u>CONTENT OUTLINE</u>	<u>LEARNING ACTIVITIES</u>
Describe local and systemic effects of a burn injury.	I. Pathophysiology of Burns	<u>Ball and Bindler:</u> <u>Chapter 23</u> Alterations in Skin Integrity, pg. 863-903
Identify the three phases of burn care and the priorities of care for each phase.	A. Systemic Response <ol style="list-style-type: none"> 1. Cardiovascular response 2. Effects of fluids, electrolytes and blood volume 3. Pulmonary 4. Other systemic response 	<u>Lilley:</u> <u>Chapter 10</u> Alterations in Fluid and Electrolyte Balance, pg. 309-353
Using the nursing care process as a framework, outline the care of a client during each phase of burn care.	B. Local Response and Extent of Burns	<u>Chapter 52</u> Topical Anti-Infective Drugs, pg. 756; Epinephrine, pg. 208; Benadryl, pg. 458-464; Steroids, pg. 475-484
Explain the physiology underlying allergic reactions.	C. Emergent/Resuscitative Phase	
Describe the management and nursing care of clients with allergic disorders.	D. Acute/Intermediate Phase	<u>Ignatavicious/Workman:</u> <u>Chapter 71</u> Burns
Plan emergency care for a client experiencing anaphylactic shock.	E. Rehabilitation Phase	<u>Chapter 26</u> Anaphylaxis (pp. 458-460)
	II. Allergic Reaction: Physiologic Overview	
	A. Antibody Production	
	B. Chemical Mediators	
	C. Allergy	
	D. Hypersensitivity	
	III. Assessment and Diagnosis of Allergic Disorders	
	A. Diagnostic Tests	
	B. Allergic Disorders	
	IV. Management of Anaphylactic Shock	

Academic Integrity Statement:

Students are required to perform all the work specified by the faculty and are responsible for the content and integrity of all academic work submitted, such as papers, reports and examinations. A student will be guilty of violating the Rule of Academic Integrity if he or she:

- knowingly represents the work of others as his or her own;
- uses or obtains unauthorized assistance in any academic work;
- gives fraudulent assistance to another student.
- fabricates data in support of an academic assignment
- inappropriately or unethically uses technological means to gain academic advantage

Appendix

Verbs that may be useful in formulating and assessing Student learning goals and objectives

(listed from lower-order to higher-order learning)

Knowledge (list, define, describe, identify, state, name, [who/when/where])

Comprehension (summarize, describe, interpret, contrast, predict, distinguish, discuss, paraphrase)

Application (complete, illustrate, examine, classify, discover, solve, use)

Analysis (analyze, order, connect, arrange, compare, contrast, explain, infer, categorize, discuss)

Synthesis (combine, integrate, create, design, hypothesize, develop, formulate, rewrite)

Evaluation (judge, assess, convince, support, justify, rank, recommend, choose, criticize)

This listing, generally known as Bloom's Taxonomy, relates to cognitive behaviors (B.S. Bloom, "Major Categories in the Taxonomy of Educational Objectives," 1956).

Student learning objectives can also be stated in terms of affective and *psychomotor* Objectives:

- Affective objectives emphasize feeling and emotion (e.g., accept, attempt, challenge, defend, dispute, join, judge, praise, question, share, support and volunteer).
- Psychomotor objectives are concerned with motor skills (e.g., measure, dissect, assemble, ...).

For more resources on this topic, many helpful websites are available. For example:
<http://www.humboldt.edu/~tha1/bloomtax.html>