THE UNIVERSITY OF TEXAS AT TYLER
SCHOOL OF NURSING

Nursing Competencies
NURS 3603

FALL 2015

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Tuesday: 0800-1045
Location: Business Bldg Room 00257
August 24- December 12, 2015

Tuesday: 1400-1645
Location: Braithwaite Bldg (BRB) Room 1025
August 24-December 12, 2015

Clinical and Clinical Conference Times—Tuesday's TBA
The content of this syllabus is subject to change at the discretion of the faculty leaders according to current learning needs.

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NURSING COMPETENCIES NURS 3603

1.1 Course Overview

Semester Hours:
Six (6) credit hour course with three hours per week didactic content and a total of 112.5 clinical hours. Clinical hours will be both in skills lab at campus and at the local hospitals.

Prerequisites and Placement in the Curriculum:
Student has completed all academic courses required for admission to the School of Nursing

Co-Requisite Courses
Students enrolled in Nurs 3603: Nursing Competencies must have successfully completed Nurs 3303: Pathophysiology for Acute Care and Nurs 3205: Nursing Concepts and Theories and be concurrently enrolled in Nurs 3310: Health Assessment and Nurs 3307: Pharmacology. Progression in Nurs 3603: Nursing Competencies is dependent on successful progression in the co-requisite courses. If the student is withdrawing from a co-requisite course, the student will be required to drop Nurs 3603, since components of the co-requisite courses will be applied in the clinical portion of Nurs 3603.

Course Description:
The student is introduced to the process, principles and techniques related to meeting basic health needs and providing appropriate nursing care to the adult patient. The course focuses on health promotion and risk management across the health illness continuum and is based on core competencies of critical thinking, communication, assessment, and technical skills. Students demonstrate assessment skills, fundamental therapeutic nursing interventions, and nursing procedures in the laboratory and selected settings.

Student Learning Outcomes
Upon successful completion of the course, the student will:
- Apply critical thinking skills to provide comprehensive, holistic nursing care to the adult patient.
- Integrate principles from nursing and other scientific and humanistic disciplines, when applying nursing skills.
- Utilize the concepts of human caring to provide comprehensive holistic nursing care to the adult patient.
- Demonstrate accountability when providing safe, quality care to the adult patient.
- Develop a beginning comprehensive plan of care in collaboration with the adult patient to provide safe, holistic, evidence based care.
- Utilize technology and information systems to provide care to the adult patient.
- Discuss the impact of healthcare policy, finance, and regulatory agencies on care to the adult patient.
- Apply the legal, ethical, and moral professional standards in the delivery of care to the adult patient.

Required Texts and Recommended Texts

REQUIRED

- Bookstore has two book packages available. You must choose one or the other. Included in the book package, are the following required textbooks:
**NURS 3603 Fall 2015**

- Sim Chart software
- Electronic version of textbooks to load onto your portable device (available in the book package in the bookstore).
- BSN Guide for Nursing Students, School of Nursing, University of Texas at Tyler (online-blackboard)
- Syllabus for Nurs 3603: Nursing Competencies (available on Blackboard)

**RECOMMENDED**


**Required Supplies:**
- Stethoscope
- Penlight
- Watch with second hand
- Bandage scissors

**Optional Supplies**
- Hemostats, straight
- Clipboard

**1.3 Attendance**

Attendance during lecture, lab, and clinical experiences is a professional expectation and will be monitored by course faculty. Refer to the university catalog for the policy regarding student attendance and possible student consequences. Students are responsible for all course assignments and content covered in class and clinical conference, including announcements.

**1.4 University Policies**

University policies regarding students’ rights and responsibilities, absence for religious observance, absence for university-supported trips, services to students with disabilities, grade replacement, state-mandated course drop policy, and social security and privacy may be found at [http://www.uttler.edu/academicaffairs/syllabuspolicies.pdf](http://www.uttler.edu/academicaffairs/syllabuspolicies.pdf)

**Disability Statement**

“If you have a disability, including a learning disability, for which you request disability support services/accommodation(s), please contact Ida MacDonald in the Disability Support Services Office so that appropriate arrangements may be made. In accordance with federal law, a student requesting support services/accommodations must provide documentation of his/her disability to the Disability Support Services counselor.” For more information call or visit the Student Services Center located in the University Center, Room 282. The telephone number is 903-566-7079. Additional information may also be obtained at the following UT Tyler WEB address: [http://www.uttler.edu/disabilityservices](http://www.uttler.edu/disabilityservices).
1.5 Grading Policies

Completion of Nurs 3603 is based on satisfactory attainment of didactic and clinical criteria. Any student who fails to meet the course objectives and expectations in either the classroom or clinical area must repeat the entire course and may not progress to the next level.

The simple average of the exam grades, before weighted calculation is performed, must be 75% or above to pass the course. Grades will not be rounded when calculating the average (74.5 – 74.9 is not rounded to 75). Students with an exam average of 75 or higher will have course grades calculated based on the weighted calculation of the exams and other required assignments.

The Course Grade consists of the following components:

85% -- Three Examinations (20% each) and 1 Comprehensive Final (25%)

15% -- Other Assignments:
- 1 Nursing Care Plan 5%
- 1 Nursing Care Plan Project/Presentation 5%
- 3 on-line Dosage Calculation Quizzes and 1 Dosage Calculation Exam (must achieve 90% or above) 1%
- 2 ATI On-line Practice Fundamentals Exams : .5% each: 1% total
- 1 ATI Proctored Final Exam: 1%
- Participation grade comprised of attendance and posttests from ATI Skills modules 2%

A minimum grade of “C” (75 or higher) is required in all upper division nursing courses. Students in theory, laboratory or clinical components of a nursing course will be notified in writing at mid-semester of unsatisfactory progress.

Any student repeating a course must complete all course requirements or equivalent as determined by the course coordinator during the semester in which the grade will be awarded.

Students will complete 3 Dosage Calculation Quizzes in Blackboard. Each of these quizzes will be calculated in the Other Assignments grade. The Other Assignments score will be calculated into the weighted average to determine final grades. The quizzes will be available for seven days. Failure to complete the quiz within this time frame will result in 0 points for that quiz.

The students must score a 90% or better on the Dosage Calculation Examination to continue in the clinical portion of this course. See the Dosage Calculation policy of this syllabus. This is a requirement of all clinical courses.

Theory grades will be assigned on the following scale:
- 90-100 A
- 80-89 B
- 75-79 C
- 60-74 D
- < 60 F

(Approved by FO: Fall 99)

Clinical:
- Clinical Pass/Fail
- Mastery of Clinical Skills Pass/Fail
- Clinical care plan (1) Scores counted in Other Assignments grade
- Care plan presentation Scores counted in Other Assignments grade

Clinical care plans are due to clinical instructor on the day and time requested by the clinical faculty in the Week following the clinical experience. Points will be deducted if posted after designated time.
Clinical evaluation, formal and/or informal, will be done at intervals throughout the clinical experience. A formal evaluation will be completed at the end of the clinical semester. Formal evaluations are written documentation relating to a student’s progress toward meeting end-of-course objectives. Each evaluation is discussed with the student in a private one-on-one discussion of performance. The clinical evaluation tool is located in Blackboard.

Skills lab is considered a clinical experience and will be evaluated as such. Skills lab worksheets and observational experiences will be part of the skills lab experience.

A Clinical Contract will be initiated for the student having difficulty mastering laboratory and clinical experiences. Contracts will include strategies for achieving mastery of the skills and techniques in question. Students must demonstrate mastery of specific clinical skills before entry into the clinical setting. If these skills are not demonstrated to the satisfaction of the clinical instructor following contract and remediation, this will result in clinical failure and student will be required to drop the course.

The clinical instructor will evaluate clinical experiences using the clinical evaluation tool. The student is responsible for being familiar with the content of the tool and the scoring criteria. This tool and criteria is the mechanism for assigning the clinical grade. Failure to attain a passing grade in the clinical section of this course constitutes a full course failure. A score of 0 in any of the critical behaviors during the clinical experience will result in automatic failure in the clinical component of the course.

ATI Testing Policy
At the end of the term, 2 ATI Fundamentals Practice Tests will be made available at atitesting.com. In addition; all students are required to complete an ATI Proctored comprehensive exam. This exam will test the student’s knowledge of fundamental nursing skills and information learned during the first semester of nursing school. Grading criteria will be discussed in class.

Paper/Assignment Re-grading Policy
Student assignments will not be re-graded, either at the Undergraduate or Graduate level. At the instructor’s discretion, a draft may be written for review.

Dosage Calculation Policy
1. Each student will complete 3 Dosage Calculation quizzes in Blackboard. Each of these quizzes will be calculated in the Other Assignment grade. These quizzes must be completed in the time frames stated in announcements on Blackboard. The quizzes will be available from Tuesday at 1200 noon, until the following Monday evening at 2359.

2. Students are required to achieve a 90% or higher on the Dosage Calculation Exam prior to the first clinical day. Students are permitted two (2) attempts for success on the exam. Students who are unsuccessful on the first attempt of the Dosage Calculation Exam must provide written evidence that remediation has taken place before being permitted a second attempt.

3. If a student fails to achieve the required 90% or higher on the second attempt, the student will be required to withdraw from the course for the semester. A grade of ‘W’ will be posted on the student’s transcript, but will be regarded as a nursing course failure in the School of Nursing.

4. Dosage calculation is a component of medication administration. Mastery of medication administration must be demonstrated in the clinical and classroom settings for successful completion of all clinical courses. In addition to the initial Dosage Calculation Exam above, medication questions on unit exams and observation in the clinical setting will be used to assess and evaluate the clinical safety of students on an individual basis. Serious or repetitive medication and/or calculation errors may indicate unsafe clinical practice (See Unsafe Clinical Practice below).
Grade Replacement Policy
If you are repeating this course for a grade replacement, you must file an intent to receive grade forgiveness with the Office of the Registrar by the Census Date (see Academic Calendar for date) of the semester in which the course will be repeated. Failure to file an intent to use grade forgiveness will result in both the original and repeated grade being used to calculate overall grade point average. Undergraduates will receive grade forgiveness (grade replacement) for only three course repeats; graduates, for two course repeats during his/her career at UT Tyler.

Paper/Assignment Re-grading Policy
Student assignments will not be re-graded. At the instructor’s discretion, a draft may be written for review.

1.6 Examination and Examination Review Policy
1. Attendance for exams is mandatory.
2. If absence for an exam is necessary, the student is responsible for notifying the faculty prior to the exam with an acceptable reason.
3. Students will be allowed entry to the classroom/computer lab after an exam has been started ONLY with faculty discretion.
4. Exams will be made available at the time class is scheduled to begin.
5. All hats/caps must be removed during exam time. All personal items such as purses, books, backpacks, notebooks, and briefcases must be left in the front of the room during testing.
6. Silence will be enforced during the exam time. In order to avoid distraction during the exam, no one will be permitted to leave the room during the exam.
7. Make-up exams will only be given at the discretion of the faculty member and may be in a different format than the original exam. Failure to notify the course faculty of the need to take the exam on an alternate date will result in a grade of zero for that particular exam.
8. Exam reviews will be conducted at the discretion of the faculty. Test review may be scheduled with the faculty during office hours and within 10 school days from the return of the exam grades. Exams review will take place at the end of the exam and provide the student rationales for the questions incorrectly answered.
9. Any student achieving an examination grade less than 75%, must schedule an appointment with the faculty within 10 school days from the return of the exam grades.

1.7 Academic Integrity
1. Students are expected to assume full responsibility for the content and integrity of all academic work submitted as homework and examinations.
2. Students are advised to review the Scholastic Conduct and Discipline Policy in the current College of Nursing (CON) Guide for Baccalaureate Students and the UT Tyler Student Conduct and Discipline Policy at: Guide for Baccalaureate Students and UT Tyler Student Conduct and Discipline Policy. These policies are fully endorsed and enforced by all faculty members within the College of Nursing.
3. Plagiarism, cheating, and collusion are unacceptable, and if found violating any of these standards, the student will be disciplined accordingly (see Guide for Baccalaureate Students for definitions).
5. The CON reserves the right to dismiss students from the program for any infraction of a legal, moral, social, or safety nature, pursuant to the procedures detailed in the Regent’s Rules.

1.8 General Course Information
1. Lecture outlines will be posted on Blackboard a minimum of two (2) working days before class and removed at midnight prior to class.
2. The clinical portion of the course, handouts, and any other required course materials will be placed on Blackboard.
3. All submitted written material (papers, assignments, examinations, etc.) are the property of the CON. They will be maintained in an archived file in the CON.
4. The Guide for Baccalaureate Students is available on the CON website at Guide for Baccalaureate Students.
The student must sign the statement indicating they have accessed the guide and return the signed Student Affirmation Form to the instructor.

6. All nursing students are required to use their student email accounts for all correspondence.

(Approved FO 2/03)

Forms to be Read, Signed and Submitted the First Day of Class

1. Student Affirmation Form – pg. 42
   Each line must be initialed and the form signed and dated for each course every semester.
   The completed form should be turned in on the first day of class.

2. Confidentiality and Privacy Form – pg. 41
   The form must be signed and dated for each course every semester.
   The completed form should be turned in on the first day of class.

3. AUDIO/VIDEO-RECORDING AGREEMENT – pg. 40
   The form must be signed and dated for each course every semester.
   The completed form should be turned in on the first day of class.

Student Dress Code for the School of Nursing

General: It is the philosophy of the School of Nursing that the student has a responsibility to be neatly groomed and modestly dressed. Appearances should promote good health, safety and general well-being of the student. Clothing should avoid brevity and/or design that are offensive to the dignity and rights of others. School officials have the right and responsibility to counsel with the student or take any other corrective action. Types of clothing (other than those specified in this document) may be worn at the direction of the nursing instructor for special events.

Classroom: Casual or everyday business wear is recommended. This includes but is not limited to the following: slacks or skirt; sweater, blouse, and shirt. Jeans as well as conservative shorts (mid-thigh or longer) may be worn, but avoid overly frayed or soiled items. Shoes must be worn. See items to be avoided below.

Professional Presentations, Ceremonies/Graduation: Business or dressy day social: suit, dress, dressy separates, jacket, tie, nice fabrics, and dress shoes. Avoid denim, jeans, t-shirt or other casual clothes. For workshops/seminars attended by students, professional/business attire will be worn.

Skills Laboratory: The school clinical laboratory setting is designed to simulate the hospital or health care clinical area. Students will wear the adopted uniform with name badge and UT Tyler School of Nursing patch on the front left pocket area. Students should have a clean white lab coat with school patch placed as above, available when necessary, but the lab coat is not required for the school laboratory experience. In order to meet the variety of needs for warmth the following options for undershirts are permissible:

- No undershirt for females required if uniform top neckline is such that complete modesty is maintained, no cleavage.
- Sleeveless white round neck tank top.
- A short sleeve, round neck, royal blue or white top available through designated vendor.
- A 3/4 length sleeve, white top available through designated vendor.
- Men will wear a round neck white undershirt without visible logos or advertising. Short sleeves should not be visible hanging from under sleeve of uniform top.
- Long sleeve or turtleneck tops are not acceptable options.

Some individual situations may require collaborative effort by faculty to reach an appropriate solution to best deal with tattoos, skin disorders, etc.

Pre or Post-clinical Experiences in the Health Care Setting: Students may be required to attend conferences or visit the clinical areas as part of their course requirements. Students will wear lab coat with name badge and UT Tyler school patch. Professional dress will be worn under the lab coat. The following items will be avoided in the clinical areas: jeans, shorts, sandals, jogging/athletic suits, t-shirts, ball-caps, etc.
Clinical Experience: When attending any clinical experience students are required to wear the adopted student uniform and/or white lab coat with name badge and school patch. Professional dress will be worn in appropriate clinical settings as directed by the clinical faculty with white lab coat, name badge and school patch (see items to avoid in clinical areas). Students are to remember that whenever they are visiting a clinical agency or any clinical site, they are a representative of UT Tyler and the School of Nursing and are expected to be professional in appearance and behavior at all times. Students will refrain from wearing student uniforms to non-UT Tyler related activities (restaurants, shopping, etc.)

When student uniforms are required for clinical experiences, as specified by the course, the following guidelines must be adhered to:

- School patch on the front left pocket area of lab coat and uniform top.
- The UT Tyler name badge with photo will be worn in all clinical settings. Name tag must be worn above the waist, so name and title are clearly visible.
- Casual outerwear such as jackets, sweaters, etc. may not be worn over the student uniform.
- White or neutral nylon hose are worn with dress/skirt; nylon hose, knee highs or white socks with pants. Socks must cover ankles.
- Clean, white clinical shoes or white leather athletic shoes should be worn, no canvas, mesh, or clogs (shoes may be mostly white and if stripes or logos are on shoes, these must be minimal and light colored). Shoes must be secured at heel with fixed back.
- Jewelry: wedding or engagement rings only; single stud earrings and only 1 in each lobe (no dangling or hoops); no rings or studs in the nose, tongue, lip or any other facial or body piercing (other body piercing must be covered or removed); no necklaces or bracelets (only Medic Alert). Students must have a watch with a second hand.
- Make-up, hair, and grooming should be conservative. Hair shoulder length or longer must be pulled neatly back in a ponytail or bun. Hair clips, bands, etc. shall be functional, not decorative (no bows). Mustaches and beards will be neatly groomed, clean and trimmed.
- Tattoos must be covered and not visible.
- Nails are to be clean and neatly trimmed to no more than fingertip length; no polish or artificial nails.
- No perfume, after-shave or other strong scents since this causes nausea and/or difficulty in breathing for many patients.
- Gum chewing is not allowed.
- Any question concerning adherence to the dress code should be directed toward the clinical instructor.

Failure to comply with the above requirements may result in an unexcused clinical absence and/or negative clinical evaluation.

Items to be avoided in all School-related Functions (including but not limited to): overly frayed, worn or soiled garments; costume look, transparent blouses, bare midriff shirts, tank tops, spaghetti straps, muscle shirts, overtly sexual styles, gang colors or logos, facial or body piercing, obscene slogans or pictures, bedroom wear, short-shorts, short skirts, or clothing that may be offensive to others.

If the dress code rules are broken and a change of clothes is not available, the student may be removed from the school-related function for the remainder of the day.
Learning Lab/Simulation Center Guidelines
Revised: Spring 2012

Introduction:
While you are in a learning lab at a UT-Tyler School of Nursing facility in the student role, you should be respectful of the lab environment; this time is considered a clinical experience.

UT-Tyler Policy
- All student learners will follow the skills laboratory student dress code while participating in lab experience. Dress code may be altered at the discretion by the faculty of the course based on the intent or need of the lab.
- It is the student’s responsibility to bring the required, standard equipment for the learning lab/simulation experience, including, but not limited to textbooks, lab book, syllabus, stethoscope, etc.
- Students are to complete any required preparation for the lab experiences, i.e. watching of required videos, completing case studies, reading assigned articles or text, completion of ATI skill modules, etc.
- Safety for all participants must be ensured, i.e.
  a. Keep Lab neat and orderly.
  b. Put equipment where instructed.
  c. No equipment should be moved, touched, or disconnected unless supervised by the clinical faculty or lab coordinator.
  d. Be aware of any wires and tubes which may pose a risk for falls or patient endangerment.
- Students are to speak with their peers and clinical instructor with professional communication.
- No food or drink is allowed in the simulation area/skills lab except with instructor approval.
- Do not sit on any bed; there are chairs and tables available.
- Any supplies or equipment checked out from the lab needs to be returned to the skills lab coordinator by the required date. Failure to do will result in an incomplete in the course until the equipment is returned or may require replacement cost.
- Phones are to be put away and silenced while in the learning labs. Students are not to video or audio record any learning lab/simulation experience.

Mannequin Care
- Consider all mannequins (or peers acting as patients) to be true patients and treat them with respect – keep them covered and dressed. Maintain privacy between your patients (mannequins or peers) by pulling screens or pull drapes as necessary.
- Do not move, reposition, or disconnect any mannequin unless instructed by the lab coordinator.
- Do not apply or insert any substances, such as Betadine, KY jelly, IV catheters, and Foley catheters to any mannequin without specific direction from your instructor. There are specific mannequin lubricants and tapes available. Students are not to perform any practice task training on the high fidelity mannequins as replacement parts are expensive; instead, please use the task trainers for practice.
- No ink pens in the simulation hospital.
1.9 Unit Student Learning Outcomes

**Evaluation:** Exam 1

**Week 1**

Introduction to Nursing History, Health Care Delivery, Health, Wellness, and Caring

Upon successful completion of this section, the student will:

1. Discuss the development of professional nursing roles.
2. Describe educational programs available for professional registered nurse education.
3. Describe the roles and career opportunities for nurses.
4. Discuss the influence of social, political, and economic changes on nursing practices.

**Assignment:**


Chapter 1

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**Evaluation:** Exam 1

**Week 1**

Introduction to Nursing History, Health Care Delivery, Health, Wellness, and Caring

Upon successful completion of this section, the student will:

1. Compare the various methods for financing health care.
2. Explain the advantages and disadvantages of managed health care.
3. Discuss the types of settings that provide various health care services.
4. Discuss the role of nurses in different health care delivery settings.
5. Differentiate primary care from primary health care.
6. Explain the impact of quality and safety initiatives on delivery of health care.
7. Discuss the implications that changes in the health care system have on nursing.
8. Discuss opportunities for nursing within the changing health care delivery system.

**Assignment:**


Chapter 2
Evaluation: Exam 1

Week 1
Introduction to Nursing History, Health Care Delivery, Health, Wellness, and Caring

Upon successful completion of this section, the student will:
1. List the two general Healthy People 2020 public health goals for Americans.
2. Discuss the definition of health.
3. Discuss the health belief, health promotion, basic human needs, and holistic health models to understand the relationship between the patient's attitudes towards health and health practices.
4. Describe variables influencing health beliefs and practices.
5. Describe health promotion, wellness, and illness prevention activities.
6. Discuss the three levels of preventative care.
7. Describe four types of risk factors.
8. Discuss risk factor modification and changing healthy behaviors.
9. Describe variables influencing illness behavior.
10. Describe the impact of illness on the patient and family.
11. Discuss the nurse's role in health and illness.

Assignment:
Chapter 6

Evaluation: Exam 1

Week 1
Introduction to Nursing History, Health Care Delivery, Health, Wellness, and Caring

Upon successful completion of this section, the student will:
1. Discuss the role that caring plays in building the nurse-patient relationship.
2. Compare and contrast theories on caring.
3. Discuss the evidence that exists about patients' perceptions of caring.
4. Explain how an ethic of care influences nurses' decision making.
5. Describe ways to express caring through presence and touch.
6. Describe the therapeutic benefit of listening to patients.
7. Explain the relationship between knowing a patient and clinical decision making.

Assignment:
Chapter 7
Evaluation: Exam 1

Week 1
Infection Prevention & Control

Objectives:
1. Explain the relationship of the chain of infection to transmission of infection.
2. Identify the body’s normal defenses against infection.
3. Discuss the events in the inflammatory response.
4. Describe the signs and symptoms of a localized infection and those of a systemic infection.
5. Identify conditions that place an individual at increased risk for infection.
6. Explain conditions that promote the transmission of healthcare associated infection (HAI).
7. Give an example of preventing infection for each element of the infection chain.
8. Explain the modes of transmission (contact including droplet and airborne).
9. Describe standard precautions and specific isolation practices.
10. List diagnostic tests that identify an infectious process and tests that identify specific microorganisms.
11. Describe multidrug resistant organisms (MDROs such as MRSA & C. diff) including signs & symptoms and nursing considerations.

Chapter 28

Evaluation: Exam 1

Week 1
Patient Safety

Objectives:
1. Discuss the importance of reporting patient safety concerns.
2. Identify environmental safety hazards in the healthcare setting.
3. Explain the Joint Commission National Patient Safety Goals for Hospitals.
4. Describe methods that assess patients at risk for injury.
5. Describe physiological changes of aging and their effect on patient safety.
6. List interventions in the acute care setting (including falls, restraints, side rails, fires, electrical hazards, seizures, radiation, & disasters).
7. Discuss the use and legal implications of restraints.
8. Develop care plans pertaining to this unit using the Nursing Process (Assessment, Nursing Diagnosis, Planning, Implementation & Evaluation).

Assignment:
Chapter 27
**Evaluation:** Exam 1

**Week 1**

**Mobility & Immobility**

**Objectives:**
1. Describe the functions of the musculoskeletal and nervous systems in the regulation of movement.
2. Discuss physiological and pathological influences on body alignment and joint mobility.
3. Identify changes in physiological and psychosocial function associated with mobility and immobility.
4. Assess for correct and impaired body alignment and mobility.
5. Formulate appropriate nursing diagnoses for impaired body alignment and mobility.
6. Develop individualized nursing care plans for patients with impaired body alignment and mobility.
7. Discuss the importance of no-lift policies for the patient and health care provider.
8. Describe equipment needed for safe patient handling and movement.
9. Compare and contrast active and passive range-of-motion exercises.
10. Develop care plans pertaining to this unit using the Nursing Process (Assessment, Nursing Diagnosis, Planning, Implementation & Evaluation).

**Assignment:**
Chapter 47

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**Evaluation:** Exam 1

**Week 2**

**Evidence-Based Practice (EBP) & Nursing Process**

**Objectives:**
1. Discuss the benefits of evidence-based practice.
2. Describe the five steps of evidence-based practice.
3. Develop a PICOT question.
4. Explain the levels of evidence available in the literature.
5. Discuss ways to apply evidence in practice.
6. Explain how nursing research improves nursing practice.
7. Discuss the steps of the research process.
8. Discuss priorities for nursing research.
9. Explain the relationship between evidence-based practice and performance improvement.
10. Describe the components of a quality improvement program.

**Assignment:**
Chapter 5
Week 2  
Evidence-Based Practice (EBP) & Nursing Process

Objectives:
1. Discuss the relationship between critical thinking and nursing assessment.
2. Explain the process of data collection.
3. Differentiate between subjective and objective data.
4. Describe the methods of data collection.
5. Discuss the process of conducting a patient-centered interview.
6. Describe the components of a nursing history.
7. Explain the differences among comprehensive, problem-oriented, and focused assessments.
8. Explain the relationship between data interpretation and validation.

Assignment:
Chapter 16, 17, 18, 19, 20
Week 2
Evidence-Based Practice (EBP) & Nursing Process

Objectives:
1. Discuss the purposes of using nursing diagnosis in practice.
2. Differentiate among a nursing diagnosis, medical diagnosis, and collaborative problem.
3. Discuss the relationship of critical thinking to the nursing diagnostic process.
4. Describe the steps of the nursing diagnostic process.
5. Explain how defining characteristics and the etiological process individualize a nursing diagnosis.
6. Describe sources of diagnostic errors.
7. Identify nursing diagnoses from a nursing assessment.

Assignment:
Chapter 17, 18, 19, 20

Week 2
Evidence-Based Practice (EBP) & Nursing Process

Objectives:
1. Explain the relationship of planning to assessment and nursing diagnosis.
2. Discuss criteria used in priority setting.
3. Describe goal setting.
4. Discuss the difference between a goal and an expected outcome.
5. List the seven guidelines for writing an outcome statement.
6. Develop a plan of care from a nursing assessment.
7. Discuss the differences between nurse-initiated, physician-initiated, and collaborative interventions.
8. Discuss the process of selecting nursing interventions during planning.
9. Describe the role that communication plays in planning patient-centered care.
10. Describe the consultation process.

Assignment:
Chapter 18, 19, 20
Evaluation: Exam 1

Week 2
Evidence-Based Practice (EBP) & Nursing Process

Objectives:
1. Explain the relationship of implementation to the nursing diagnostic process.
2. Describe the association between critical thinking and selecting nursing interventions.
3. Discuss the difference between protocols and standing orders.
4. Identify preparatory activities to use before implementation.
5. Discuss the value of the Nursing Interventions Classification system in documenting nursing care.
6. Discuss the steps for revising a plan of care before performing implementation.
7. Define the three implementation skills.
8. Describe and compare direct and indirect nursing interventions.
9. Select appropriate interventions for an assigned patient.

Assignment:
Chapter 19

Evaluation: Exam 1

Week 2
Evidence-Based Practice (EBP) & Nursing Process

Objectives:
1. Discuss the relationship between critical thinking and evaluation.
2. Describe the standards of professional nursing practice for evaluation.
3. Explain the relationship among goals of care, expected outcomes, and evaluative measures when evaluating nursing care.
4. Give examples of evaluation measures for determining a patient's progress toward outcomes.
5. Evaluate the outcomes of care for a patient.
6. Describe how evaluation leads to discontinuation, revision, or modification of a plan of care.

Assignment:
Chapter 20
Evaluation: Exam 1

Week 2
Nutrition

Objectives:
1. Explain the importance of a balance between energy intake and energy requirements.
2. List the end products of carbohydrate, protein, and fat metabolism.
3. Explain the significance of saturated, unsaturated, and polyunsaturated fats.
4. Describe the food guide pyramid and discuss its value in planning meals for good nutrition.
5. List the current dietary guidelines for the general population.
6. Discuss the major methods of nutritional assessment.
7. Identify three major nutritional problems and describe patients at risk.
8. Establish a plan of care to meet the nutritional needs of a patient.
9. Describe the methods to avoid complications of enteral feedings.
10. Describe the methods for avoiding complications of parenteral nutrition.
11. Discuss medical nutrition therapy in relation to three medical conditions.
12. Discuss diet counseling and patient teaching in relation to patient expectations.

Assignment:
Chapter 44

Evaluation: Exam 1

Week 3
Skin Integrity & Wound Care

Objectives:
1. Discuss risk factors that contribute to pressure ulcer formation.
2. Describe the pressure ulcer staging system.
3. Discuss the normal process of wound healing.
4. Describe the differences of wound healing by primary and secondary intention.
5. Describe complications of wound healing.
6. Explain the factors that impeded or promote wound healing.
7. Complete an assessment for a patient with impaired skin integrity.
8. List nursing diagnoses associated with impaired skin integrity.
9. Develop a nursing care plan for a patient with impaired skin integrity.
10. List appropriate nursing interventions for a patient with impaired skin integrity.
11. State evaluation criteria for a patient with impaired skin integrity.
12. Identify purposes of commonly used wound dressing materials.

Assignment:
Chapter 48 in Potter & Perry
Chapter 12 in Lewis (9th ed.)
Evaluation: Exam 1

Week 4
Exam #1

Evaluation: Exam 2

Week 5
Bowel Elimination

Objectives:
1. Discuss the role of the gastrointestinal organs in digestion and elimination.
2. Describe three functions of the large intestine.
3. Explain the physiological aspects of normal defecation.
4. Discuss psychological and physiological factors that influence the elimination process.
5. Describe common physiological alterations in elimination.
6. Assess a patient's elimination pattern.
7. List nursing diagnoses related to alterations in elimination.
8. Describe nursing implications for common diagnostic examinations of the gastrointestinal tract.
9. List nursing interventions that promote normal elimination.
10. List nursing interventions included in bowel training.
11. Discuss nursing care measures required for patients with a bowel diversion.
12. Use critical thinking in provision of care to patients with alterations in bowel elimination.
13. Identify high-fiber foods (Lewis Table 43-6)

Assignment:
Chapter 46 in Potter & Perry
Chapter 39 (partial p. 902-903), diarrhea (p. 1007), fecal incontinence (p. 1009), constipation (p. 1012), ostomy (p. 1039), colostomy care (p. 1042), ileostomy care (p. 1045) in Lewis (9th ed.)

Evaluation: Exam 2

Week 5
Urinary Elimination

Objectives:
1. Discuss process of urinary elimination.
2. Identify factors that commonly influence urinary elimination.
3. Compare and contrast common alterations in urinary elimination.
4. Identify nursing diagnoses appropriate for patients with alterations in urinary elimination.
5. Obtain urine specimens correctly
6. Describe characteristics of normal and abnormal urine.
7. Describe the nursing implications of common diagnostic tests of the urinary system.
8. Discuss nursing measures to promote normal micturition and reduce episodes of incontinence.
9. Insert a urinary catheter correctly (indwelling, intermittent, condom cath).
10. Discuss nursing measures to reduce urinary tract infection.
11. Irrigate a urinary catheter correctly.
12. Identify two modalities of renal replacement therapy.
Week 5
Elimination: Bowel and Urinary

Objectives:
1. Discuss process of urinary and bowel elimination.
2. Identify physiologic and psychological responses to elimination problems.
3. Interpret laboratory and diagnostic studies in relation to elimination problems.
4. Formulate an appropriate, patient-centered care plan for common elimination disorders.
5. Discuss nursing care interventions to promote bowel and bladder elimination.

Assignment:
Chapter 45

Evaluation: Exam 2

Week 6
Oxygenation and Tissue Perfusion I & II

Objectives:
1. Describe physiologic dynamics of the cardiopulmonary system in terms of ventilation, diffusion and perfusion.
2. Discuss physiological responses to alterations in stroke volume, preload, afterload and cardiac output.
3. Identify physiological responses to hyperventilation, hypoventilation and hypoxemia.
4. Recognize physiological and psychological processes of common chronic respiratory disorders.
5. Recognize common manifestations of arterial and venous circulatory disorders.
6. Interpret laboratory and diagnostic studies in relation to oxygenation & tissue perfusion.
7. Formulate an appropriate patient-centered nursing care plan to promote oxygenation.
8. Discuss major categories of cardiac and pulmonary drugs, uses and side effects.

Assignment:
Chapter 45, 46 in Potter & Perry
Chapter 39 (partial p. 902-903), diarrhea (p. 1007), fecal incontinence (p. 1009), constipation (p. 1012), ostomy (p. 1039), colostomy care (p. 1042), ileostomy care (p. 1045) in Lewis (9th ed.)

Evaluation: Exam 2

Complete ABG Tutorial online at http://www.m2hnursing.com/ABG/index.php
Evaluation: Exam 2

**Week 7**

**Critical Thinking & Nursing Care Planning**

**Objectives:**
1. Use critical thinking throughout the processes of planning nursing care.
2. Use the nursing process as an organizing tool for critical thinking and clinical reasoning.
3. Gather a complete patient database using various sources and techniques.
4. Organize patient data in meaningful ways to provide outline of patient care concerns.
5. Prioritize patient care concerns based on individual patient situations.
6. Determine appropriate nursing diagnoses and support selected diagnoses with patient centered data.
7. Write specific, patient centered, measurable outcomes based on the collected patient data.
8. Discuss sources of diagnostic error and how to avoid these errors.
9. Discuss method to select appropriate nursing interventions for individual patients based on evidence of best practice.
10. Discuss the process of evaluating care provided for a patient.

**Assignment:**


Chapters 15, 16, 17, 18, 19, 20

Evaluation: Exam 2

**Week 7**

**Care of the Peri-Operative Patient**

**Objectives:**
1. Differentiate the common types, settings, and organization of the surgical process.
2. Apply knowledge of the nurse’s role and components of a pre-operative assessment.
3. Discuss the purpose and process for obtaining an informed surgical consent.
4. Evaluate the nurse’s role in pre-operative preparation of the patient for surgery.
5. Differentiate special pre-operative considerations for the older adult patient.
6. Discuss the various areas of the surgical area discussing the purpose and proper attire for each area.
7. List the various roles and responsibilities of members of the surgical team.
8. Identify and prioritize needs for patients undergoing surgical procedures.
9. Differentiate different roles of the nurse when managing a patient going through the peri-operative process.
10. Identify safety concerns and discuss the nurse’s role for peri-operative patients.
11. Identify and prioritize nursing responsibility for patients entering the Post Anesthesia Care Unit (PACU).
12. Discuss the role of the nurse in minimizing various complications of patients in the PACU and post-operatively on the nursing unit.
13. Apply knowledge of the etiology, assessment and nursing management of potential problems or complications of the post-operative patient.

**Assignment:**


Chapter 50 in Potter & Perry
Week 8

Comfort & Pain Management

Objectives:
1. Discuss common misconceptions about pain.
2. Describe the physiology of pain.
3. Identify components of the pain experience.
4. Explain how the physiology of pain relates to selecting interventions for pain relief.
5. Describe the components of pain assessment.
7. Explain how cultural factors influence the pain experience.
8. Describe the appropriate nursing diagnoses, outcomes, and interventions for a client with pain.
10. Explain the various pharmacological approaches to treating pain.
11. Describe applications for use of nonpharmacological pain interventions.
12. Discuss nursing implications for administering analgesics.
13. Identify barriers to effective pain management.
14. Evaluate a client’s response to pain interventions.

Assignment:
Chapter 43 in Potter & Perry
Lewis (9th ed.) Chapter 10

Week 8

Communication & Documentation

Objectives:
1. Describe aspects of critical thinking that are important to the communication process.
2. Describe the five levels of communication and their uses in nursing.
3. Describe the basic elements of the communication process.
4. Identify significant features and therapeutic outcomes of nurse-patient helping relationships.
5. Identify a nurse’s communication approaches within the four phases of a nurse-patient helping relationship.
6. Identify significant features and desired outcomes of nurse-health care team member relationships.
7. Describe qualities, behaviors, and communication techniques that affect professional communication.
8. Discuss effective communication techniques for older patients.
9. Identify patient health states that contribute to impaired communication.
10. Discuss nursing care measures for patients with special communication needs.

Assignment:
Chapters 24
Evaluation: Exam 2

Week 8
Communication & Documentation

Objectives:
1. Describe methods for interdisciplinary communication within the health care team.
2. Identify purposes of health care record.
3. Discuss legal guidelines for documentation.
4. Identify ways to maintain confidentiality of electronic and written records.
5. Describe five quality guidelines for documentation and financial reimbursement for health care.
6. Describe the different methods used in record keeping.
7. Discuss the advantages of standardized documentation forms.
8. Identify elements to include when documenting a patient’s discharge plan.
9. Identify the important aspects of home care and long-term care documentation.
10. Describe the purpose and content of a hand-off report.
11. Explain when to take and how to verify telephone orders.
12. Discuss the relationship between informatics and quality health care.
13. Describe the advantages of a nursing information system.
14. Identify ways to reduce data entry errors.

Assignment:
Chapters 26

Evaluation: Exam 2

Week 9
Exam # 2

Evaluation: Exam 3

Week 9
(Lecture will be uploaded to Tegrity on BlackBoard)
Diabetes Management and Glycemic Control

Objectives:
1. Describe difference between Type 1 and Type 2 diabetic.
2. Explain the nursing management of the patient with newly diagnosed diabetes.
3. Distinguish between types of insulin (onset, duration and indication).
4. Interpret insulin orders on MAR (sliding scale and scheduled insulin).
5. Identify hypoglycemia in a patient, discuss life-threatening effects of hypoglycemia and know treatments (PO and IV).

Assignment:
Chapter 49
**Week 9**  
(Lecture will be uploaded to Tegrity on BlackBoard)  
Diagnostic Testing

**Objectives:**
1. Describe the nurse’s role for each of the phases involved in diagnostic testing.
2. List common blood tests, urine and stool tests.
3. Relate indications and steps for collection of Culture and Sensitivity in blood, urine, sputum or wound.
4. Discuss the nursing responsibilities for specimen collection.
5. Explain the rationale for the collection of each type of specimen.
6. Compare and contrast CT, MRI, and nuclear imaging studies.

**Assignment:**
Review posted lecture notes

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**Week 10**  
Fluid and Electrolytes

**Objectives:**
1. Discuss the function, distribution, movement and regulation of fluids and electrolytes in the body.
2. Describe the regulation of acid-base balance in the body, including buffer systems.
3. Identify factors affecting expected body fluid, electrolyte and acid-base balance.
4. Demonstrate understanding of functions of selected electrolytes (sodium, potassium, calcium, magnesium).
5. Compare and contrast excesses and deficits of body fluid and major electrolytes.
6. Distinguish patients at risk for fluid and electrolyte imbalance.
7. Analyze collected patient data, including diagnostic tests and for alterations in fluid and electrolyte imbalances.
8. Select appropriate nursing diagnosis and write specific outcomes for patients exhibiting fluid and electrolyte imbalances.
9. Implement measures to correct imbalances in fluids and electrolytes.
10. Discuss proper administration of blood products, including assessment for adverse reactions to a transfusion.
11. Evaluate the effect of evidenced-based interventions for correction of imbalances in fluids and electrolytes.

**Assignment:**
Chapter 41 in Potter & Perry
In Lewis (9th ed.) Chapter 17
Evaluation: Exam 3

Week 10
Care of the Geriatric Patient

Objectives:
1. Discuss demographic trends related to older adults in the United States.
2. Discuss common developmental tasks of older adults.
3. Describe common physiological changes of aging.
4. Differentiate among delirium, dementia, and depression.
5. Describe selected health concerns of older adults.

Assignment:
Chapter 14
Review posted lecture notes

Evaluation: Exam 3

Week 11
Spirituality and Spiritual Care

Objectives:
1. Discuss research findings that suggest spiritual practices influence clients' health status.
2. Describe the relationship between faith, hope, forgiveness and love as spiritual needs.
3. Perform a spiritual assessment.
4. Compare and contrast the concepts of religion and spirituality.
5. Discuss nursing interventions designed to promote spiritual health.
6. Discuss signs of spiritual distress and recommended nursing actions.
7. Describe the components of the FICA spiritual assessment.
8. Discuss prayer as a spiritual care intervention.
9. Recognize basic cultural practices related to religion and nutrition.
10. Discuss the benefit of humor as a spiritual care intervention.

Assignment:
Chapter 35
**Evaluation: Exam 3**

**Week 11**

**Grieving, Loss, and Death**

**Objectives:**
1. Define key terms.
2. Identify the nurse’s role in assisting clients with problems related to loss, death and grief.
3. Describe and compare the phases of grieving from Kubler-Ross, Bowlby and Worden.
4. List and discuss the five categories of loss.
5. Describe the types of grief.
6. Describe characteristics of a person experiencing grief.
7. Discuss variables that influence a person’s response to grief.
8. Develop a nursing care plan for a client or family experiencing loss and grief.
9. Explain reasons for the need for improved end-of-life care for clients.
10. Discuss principles of palliative care.
11. Describe how to involve family members in palliative care.
12. Describe the procedure for care of the body after death.
13. Discuss the nurse’s own loss experience when caring for dying clients.

**Assignment:**


Chapter 30

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**Evaluation: Exam 3**

**Week 12**

**Rest and Sleep**

**Objectives:**
1. Define the key terms listed.
2. Compare the characteristics of rest and sleep.
3. Explain the effect the 24-hour sleep-wake cycle has on biological function.
4. Discuss mechanisms that regulate sleep.
5. Describe the stages of a normal sleep cycle.
6. Explain the functions of sleep.
7. Compare and contrast the sleep requirements of different age-groups.
8. Identify factors that normally promote and disrupt sleep.
9. Discuss characteristics of common sleep disorders.
10. Conduct a sleep history for a client.
11. Identify nursing diagnoses appropriate for clients with sleep alterations.
12. Identify nursing interventions designed to promote normal sleep cycles for clients of all ages.
13. Describe ways to evaluate sleep therapies.

**Assignment:**


**Chapter 42 in Potter & Perry**

**In Lewis (9th ed.) Chapters 9 & 10**
Evaluation: Exam 3

Week 12
Stress and Coping

Objectives:
1. Compare and contrast the theories of stress responses.
2. Discuss the stages of the general adaptation response, including characteristic changes.
3. Identify physiological, psychological, and cognitive indicators of stress.
4. Select nursing diagnoses that describe relationship of assessment data to a stress-related patient problem.
5. Write patient-centered, measurable outcome statements for a patient demonstrating stress-related problems.
6. Discuss types of coping and coping strategies.
7. Apply evidence-based interventions to help patients minimize and manage stress.
8. Discuss the association between laughter and stress.
9. Identify the types and the characteristics of a crisis situation.

Assignment:
Chapter 37 in Potter & Perry
In Lewis (9th ed.) Chapter 8
Clinical Skills Lab Manual

Nurs 3603 Competencies
2.0 Expectations of Students in Nursing Competencies

Unsafe Clinical Practice

Any act of omission or commission, which may result in harm to the patient, is considered unsafe clinical practice. During the clinical practicum, unsafe clinical practice includes but is defined as any one of the following:

When the student:
- Violates or threatens the physical, psychological, microbiological, chemical, or thermal safety of the patient.
- Violates previously mastered principles/learning/objectives in carrying out nursing care skills and/or delegated medical functions.
- Assumes inappropriate independence in action or decisions.
- Does not adhere to current CDC guidelines for Infection Control.
- Fails to recognize own limitations, incompetence, and/or legal responsibilities.
- Fails to accept moral and legal responsibility for his/her own actions, thereby violating professional integrity as expressed in the Code for Nurses.
- Arrives at clinical setting in an impaired condition as determined by the clinical instructor.

Failure to comply with any of the above requirements may result in an unexcused clinical and/or negative clinical evaluation.

Attendance

- Attendance for the learning laboratory and the clinical agency is MANDATORY. The student must notify the instructor prior to the clinical if an absence is necessary. The clinical instructor must be contacted directly! When in the learning laboratory, the student must leave a message with the instructor, including the telephone number where he/she may be contacted. When in the clinical agency, the student must contact the agency personnel and the instructor at least one hour prior to the scheduled clinical time. If the student is going to be late, the student must notify the agency.
- No student will be allowed to remain in the clinical area for the clinical day without correct and complete patient preparation reflected on the required clinical worksheets. No exceptions! A clinical absence will be recorded and the student will be required to consult the clinical instructor for make-up information.
- Make time for missed clinical time will be arranged at the discretion of the instructor. A student missing one or more days in one rotation will present for approval a written plan as to how he/she will meet the clinical objectives.

Professional Liability Insurance/CPR/ Required Immunizations

Students are responsible for providing proof of coverage, certification, and immunizations prior to hospital experience. Forms are available at orientation.

Clinical Injuries

Hospitals and other health facilities do NOT cover any medical expenses as a result of accident or injury; thus, each student is responsible for any medical or hospitalization charges that occur.

Working Prior to Clinical

Students working a shift prior to the assigned clinical experience are at higher risk for unsafe clinical practice and may be sent home by the clinical instructor.
Health Record

A Student Health History form must be completed and a copy of all required immunizations must be in the student’s folder prior to hospital experience. The Hepatitis B immunization series must be begun prior to clinical. Documentation of immunity to MMR or MMR immunization needs to be on your record. A current TB skin test is required prior to clinical assignments in the hospital setting. Documentation of significant laboratory studies or the successful treatment of diseases detected must be presented.

Skills Check-off

Students should study the skills outlined in the textbook prior to coming to the skill lab. The student should be able to perform the skill without coaching prior to asking for faculty evaluation. Evaluation of laboratory skills is by means of return demonstration. Skills check-offs will be performed in the skills lab and in the clinical area.

Clinical Forms

Students are expected to complete a Clinical Worksheet packet for each patient in each clinical day. A copy of these worksheets is included with syllabus. Students are responsible for making additional copies. The Preclinical worksheets and medication worksheets are due at the beginning of EACH clinical experience. No student will be allowed to remain in the clinical area for the clinical day without correct and complete patient preparation reflected on the required clinical worksheets. No exceptions! The Post-clinical Nursing care plan will be due as indicated by individual clinical instructor.

Care Plan Requirements

Students will be required to complete TWO passing (75% or greater) care plans for patients who you assumed care for while in the hospital setting. Care plans will be documented in the online medical record known as Sim Chart. Your clinical faculty will be responsible for grading, providing feedback, and returning grades to you via Sim Chart. For EACH nursing plan of care, you will be required to select TWO nursing diagnosis’ for your patient and develop a full plan of care per each diagnosis. A 3-part NANDA includes the nursing diagnosis, related to, and as evidenced by to be filled out in its entirety. For EACH nursing diagnosis you will complete the 3-part NANDA requirements along with TWO expected outcomes (provide measurement/time frame), and have at least FOUR to SIX nursing interventions for your patient. All care plans MUST BE EVALUATED. This requires that you provide comments over how you reached or did not reach your outcome/goal for your patient and whether your interventions were effective or ineffective for your patient. Once you have completed your care plan and documentation in its entirety for your patient you will submit your document through Sim Chart and it will go directly to your clinical faculty for grading. Once you have submitted it you are not allowed to edit the document. The care plan grading rubric can be found under your CLINICAL DOCUMENTS tab in Blackboard.

Care Plan Presentation

Students will be required to work in groups of 2 or 3 for the care plan presentation. Groups will be selected at the discretion of your clinical instructor. You will develop a PowerPoint Presentation with your group over a patient that at least one group member assumed care for while in the hospital setting. We will ask that you evaluate how your group members participated throughout the project and this can affect grades so be sure that you are all participating equally.

The grading rubric that is listed below can also be found on Blackboard under the Clinical Documents tab.

80% of your grade will be based on the grading rubric listed below while the other 20% will come from active participation and development of a plan of care for each presentation presented.
<table>
<thead>
<tr>
<th>Care Plan Presentation Grading Criteria</th>
<th>Points</th>
<th>Points Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Points Possible</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Points Earned</strong></td>
<td></td>
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<tr>
<td><strong>Student:</strong></td>
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<tr>
<td><strong>Faculty:</strong></td>
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<tr>
<td><strong>Patient’s Medical Dx:</strong></td>
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<tr>
<td><strong>Demographic Data:</strong> Initials, Age, Race, Marital Status, Gender, Occupation**</td>
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<tr>
<td>Don’t use specifics that could be recognizable like the town or specific employer</td>
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<tr>
<td><strong>Chief Complaint:</strong> (Use quotes)</td>
<td>5</td>
<td></td>
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<tr>
<td><strong>Reason for Hospitalization:</strong> Primary Diagnosis, include Secondary and Tertiary Diagnoses if applicable</td>
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<td></td>
</tr>
<tr>
<td><strong>Pathophysiology:</strong> Describe pathophysiology of each medical diagnosis.**</td>
<td>15</td>
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<tr>
<td>• Highlight the signs and symptoms your patient had.</td>
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<td></td>
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<tr>
<td>• Explain the etiology</td>
<td></td>
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<tr>
<td>• Discuss the pathogenesis</td>
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<td></td>
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<tr>
<td>• Describe the clinical manifestations</td>
<td></td>
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<tr>
<td>• Include the risk factors focusing on those that your patient had.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use reputable sources, preferably the Lewis <em>Medical-Surgical Nursing</em> textbook. All sources must be cited in APA format.</td>
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<tr>
<td><strong>Pathophysiology Graphic:</strong> Include at least one graphic that relates to the primary medical diagnosis. May include a video that is no more than 2 minutes in length.</td>
<td>5</td>
<td></td>
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<tr>
<td><strong>Past Medical History:</strong> Past or chronic conditions that are pertinent to this hospitalization Include pertinent surgical history and allergies with the allergic response</td>
<td>5</td>
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<tr>
<td><strong>Medication Table:</strong> Current medications including OTC, herbal, and vitamins. List generic and brand name. Include in the table:**</td>
<td>5</td>
<td></td>
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<tr>
<td>• Classification</td>
<td></td>
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<tr>
<td>• Reason</td>
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<tr>
<td>• Dose</td>
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<tr>
<td>• Route</td>
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<tr>
<td>• Frequency</td>
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<tr>
<td>• Nursing implications (potential adverse reactions and important monitoring)</td>
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<tr>
<td><strong>Diagnostic Studies:</strong> Include pertinent study results with the significance of the result as it relates to your patient.**</td>
<td>5</td>
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</tr>
<tr>
<td>Labs: Include admission and most recent CBC and BMP. Include all other pertinent lab results.</td>
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<tr>
<td>Tests: Include all pertinent tests done (radiology, Cath lab, GI lab, Neurology)</td>
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<tr>
<td><strong>Physical Assessment:</strong> Focus on abnormal findings and those related to the disease</td>
<td>10</td>
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</tr>
<tr>
<td><strong>Nursing Diagnoses:</strong> Include 1 nursing diagnosis for each person in the group Each person must select a different nursing diagnosis Must be approved 3-part NANDA nursing diagnoses Each person in the group will develop one of the nursing diagnoses (expected outcomes and interventions)</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td><strong>Expected Outcomes:</strong> Must be measurable and have a defined time frame. Include 2 outcomes for each dx Each outcome must be evaluated with data to support the evaluation.</td>
<td>10</td>
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<tr>
<td><strong>Interventions:</strong> Must include the rationale. Include 4-6 interventions each dx Each intervention must be evaluated with data to support the evaluation.</td>
<td>10</td>
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</tr>
<tr>
<td><strong>Summary:</strong> Each member of the group is to explain why he/she chose that nursing diagnosis, include why this diagnosis represents an important problem for this patient.</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td><strong>Presentation:</strong></td>
<td>5</td>
<td></td>
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<tr>
<td>• Professional dress</td>
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<tr>
<td>• Presentation readability</td>
<td></td>
<td></td>
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<tr>
<td>• Knowledge of patient</td>
<td></td>
<td></td>
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<tr>
<td>• Knowledge of disease process</td>
<td></td>
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<tr>
<td>• Creativity of presentation</td>
<td></td>
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<tr>
<td>1 point deducted for each misspelled word or grammatical error</td>
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<tr>
<td>10 points deducted for each day late</td>
<td></td>
<td></td>
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<tr>
<td>5 points deducted if presentation not submitted on Blackboard at least 24 hours prior to presentation</td>
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<td></td>
</tr>
<tr>
<td><strong>Total Points:</strong></td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

**What to bring on presentation day:**

• Grading Criteria Sheet
• Ackley book – *Nursing Diagnosis Handbook* (ebook is acceptable)

Printed Handouts of PowerPoint – 6 slides per page
Medication Worksheet

For all clinical experiences, the student will have access to information regarding medication prescribed for each assigned patient. The medications are listed on the preclinical worksheet. This worksheet is handed in to the instructor at beginning of clinical experience.

Post Conferences

After each clinical experience, the students will participate in a post-clinical discussion. These discussions will relate to clinical experiences or expectations. Participation in Clinical discussions is mandatory and will be reflected in the clinical evaluation.

Clinical Skills Checklist

Bring the master-level one clinical skills checklist to each clinical experience. At the completion of a skill, ask the instructor or nurse observing the skill performance to initial in the appropriate place on the checklist. At the end of the semester, make a copy of the signed and initialed checklist and bring it with you to the final clinical evaluation conference. This document will go in your file for reference by others as needed.

2.1 Guidelines for the Clinical Experience

Pre-Clinical Preparation & Instructions (preparation will be completed on your own time the day/ evening prior to clinical).

1. Patient selection and preparation requires approximately 3 hours.
2. Appropriate professional attire is expected [see dress policy]. Lab coat is required or UT Tyler scrub attire must be worn. A name badge should be worn at all times while in the clinical setting.
3. Consult the charge nurse or assignment sheet for patient selection (ask for the best learning experiences for a beginning student).
4. Write your patient selections clearly using the UTT signup sheet and place on the designated area in the unit. [required if patient not assigned by instructor]
5. Review the patient medical record, pt. history, operative & X-ray reports, vital signs/graphics sheet, lab reports, nursing notes for past 24 hours, doctor’s orders and progress notes.
6. Review the patient’s pathophysiology including typical signs & symptoms, assessment findings, therapeutic regimen, current health problems, and appropriate therapy. Begin formulating your plan of care. [The preclinical worksheets from Sim Chart are due the morning of clinical experience.]
7. Look up each medication and record on the preclinical worksheet in the medication area in Sim Chart. You are expected to know the mechanism of action, appropriate dose, side effects, any labs or therapeutic levels you need to check prior to administering, and any special considerations. Keep a copy of this page; mark the correct page in the drug manual, or prepare/select appropriate drug information for use in the clinical area. [Drug cards or PDA drug resource is acceptable in the clinical area for reference, but not for the graded care plans].
8. Look up and record the lab values in Sim Chart and be ready to discuss the abnormal lab values and what the values indicate in correlation with your patient.
9. Look up and record relevant diagnostic procedures performed on your patient in Sim Chart.
10. Review any new procedures that might involve your patient (you may look in the unit policy & procedure book).
11. Orient yourself to the nursing unit prior to beginning patient care.
12. You are expected to have read all relevant material in related textbooks for daily clinical preparation before caring for your patient.
13. Students may be questioned daily on their knowledge of this material. **Students unprepared for the clinical experience will be deemed unsafe and sent home. This will result in a clinical absence.**

14. The student must come to clinical practice prepared to give care, including knowledge of lab work, pertinent diagnostic procedures, and hands-on skills that will be performed.

### Clinical Guidelines

1. You must report off to the instructor and primary nurse before leaving the unit.
2. You **MUST** come to clinical with a **FULL** report printed from Sim Chart over the required pre-clinical documentation for your patient. Failure to do so can result in you being deemed unsafe, unprepared, and sent home for your clinical day. A make-up clinical day will be required at the discretion of your clinical faculty.
3. Do not do **ANY** procedure or give **ANY** medication without supervision of your clinical instructor. The clinical instructor may direct you to a nurse mentor for observation in specific instances.
4. The clinical instructor prior to administration must check all medications!
5. You are **NOT** allowed to give **ANY** medications through the patient’s IV at any time during clinical!
6. Students are not to administer blood or blood products; however, you may monitor the patient during the transfusion.
7. You may administer narcotics with your clinical instructor, but the assigned nurse must sign them out of the Accudose/Pixis
8. Complete your clinical documentation and turn it in to your instructor on time. Completed clinical documentation is due by 0800 the following week by the designated day indicated by your clinical instructor.

### Medication Administration Exam

1. All clinical courses will require a medication administration exam to be administered prior to attending actual clinical experiences.
2. If the student does not achieve a grade of 90% or higher after **2 attempts**, has failed the clinical component of the course and must withdraw from the course for the semester.
3. A grade of "W" is recorded on the student’s transcript, however, the grade is documented in the student’s file, in the College of Nursing, as a course failure.

**Clinical medication errors will be documented in College of Nursing student files.**

*Approved FO: 5/00*  
*Revised UG Studies: 1/12*

### 2.2 Unsafe Clinical Practice

1. Any act of omission or commission, which may result in harm to the patient, is considered unsafe clinical practice, and may result in removal from the clinical setting, disciplinary action according to the discretion of the course faculty, a negative clinical evaluation, a course failure, and/or dismissal from the program.
2. During the clinical practicum, unsafe clinical practice is defined as any one of the following. When the student:
   a) commits repetitive and/or a single, serious medication error.
   b) violates or threatens the physical, psychological, microbiological, chemical, or thermal safety of the patient.
   c) violates previously mastered principles/learning objectives in carrying out nursing care skills and/or delegated medical functions.
   d) assumes inappropriate independence in action or decisions.
   e) does not adhere to current CDC guidelines for infection control.
   f) fails to recognize own limitations, incompetence, and/or legal responsibilities.
   g) fails to accept moral and legal responsibility for his/her own actions thereby violating professional integrity as expressed in the Code of Ethics for Nurses.
   h) arrives at clinical settings in an impaired condition as determined by the clinical instructor.
3. Failure to comply with any of the above requirements may result in an unexcused clinical, negative clinical evaluation, and/or clinical failure.

*Policy Revision and Approval: Fall 2012*
**Student Accountability**

Students may NOT:

- Take verbal or telephone orders from physicians, midwives, nurse practitioners, or physician assistants
- Transcribe or note physician, midwife, nurse practitioner, or physician assistant orders
- Witness operative or procedural permits
- Perform any skill that violates the Nurse Practice Act, even if under a physician’s supervision (i.e. intubation of a patient)
- Perform any delegated medical act (i.e. removal of chest tube, arterial line, pacer wires)
- Discontinue central IV lines, including PICC lines
- Access central venous access devices (i.e. portacath, mediport)
- Administer chemotherapy
- Initiate or adjust IV Pitocin drips during the labor process
- Initiate IV therapy in the nursery
- Take possession of the narcotic keys
- Sign out narcotics, witness stocking of narcotics, or remove narcotics from a storage unit
- Initiate infusion of blood products

Students MUST be supervised by the preceptor/instructor when:

- Performing any peripheral or central IV related procedure (including IV initiation, hanging solutions, changing tubing, flushes, IVPB, IVP, site dressing change)
- Performing an unfamiliar skill; students should only be performing skills listed on the CON clinical lab check-off lists
- Administering medications by any route

If present during a code, a student may:

- Perform CPR except on a newborn
- Document code procedures
- NOT administer drugs or perform skills other than basic CPR

*Policy Revision and Approval: Spring 2011*

### 2.3 Clinical Student Learning Outcomes

The clinical objectives guide the experience and behaviors while students are working under the guidance of the clinical instructor and/or preceptor’s position. With increasing knowledge and skill during the experience, the student becomes more independent, is able to synthesize theories and concepts related to critical thinking, change theory, conflict resolution, delegation, and changes that impact the health care delivery system. Students prepare personal learning objectives, which complement the clinical objectives for the course.

Upon successful completion of the course, the student will:

#### 1. PROVIDER OF PATIENT-CENTERED CARE

- Assess multiple patients for health status and health needs.
- Identify actual and potential problems for multiple patients based on assessment data.
- Formulate individualized plans of care with appropriate interventions and patient outcomes for multiple patients.
- Implement nursing actions that are based on current theory and research.
- Evaluate the effectiveness of nursing interventions in meeting the expected outcomes.

#### 2. MEMBER OF THE HEALTHCARE TEAM

- Function in the role of an entry level professional nurse, providing and coordinating through others, competent, nursing care for groups of patients.
- Interrelate theory and research knowledge in the formulation, implementation, and evaluation of nursing leadership/management actions.
- Analyze the concept of professionalism, the organizational culture, and the healthcare delivery system as they relate to interdisciplinary practice.
3. **MEMBER OF THE PROFESSION**
   - Demonstrate responsibility and accountability for own actions.
   - Abide by the laws and standards designated by the University of Texas at Tyler College of Nursing, Texas Board of Nursing, ANA Standards of Practice, and the ANA Code of Ethics.
   - Project a professional image by adhering to the dress code and meeting the attendance requirements.

4. **COMMUNICATION**
   - Document in a comprehensive, organized, and clearly stated manner.
   - Establish effective working relationships with clinical faculty, facility personnel, peers, patients, and patient’s families.
   - Display responsibility and accountability for professional interactions to reflect interpersonal caring.

5. **PATIENT SAFETY ADVOCATE**
   - Provide safe care by accurately administering medication in real and simulated situations.
   - Ensure accurate transcription of all medical orders.
   - Accurately identify safety risks and appropriately intervene to provide a safe environment for patients, families, and health care providers.

2.4 **Clinical Dress Requirements**

**General:** It is the philosophy of the SON that the student has a responsibility to be neatly groomed and modestly dressed. Appearances should promote good health, safety and general well-being of the student. Clothing should avoid brevity and/or design that are offensive to the dignity and rights of others. School officials have the right and responsibility to counsel with the student or take any other corrective action. Types of clothing (other than those specified in this document) may be worn at the direction of the nursing instructor for special events.

**Classroom:** Casual or every-day business wear is recommended. This includes but is not limited to the following: slacks or skirt; sweater, blouse, and shirt. Jeans as well as conservative shorts (mid-thigh or longer) may be worn, but avoid overly frayed or soiled items. Shoes must be worn. See items to be avoided below.

**Professional Presentations, Ceremonies/Graduation:** Business or dressy day social: suit, dress, dressy separates, jacket, tie, nice fabrics, dress shoes. Avoid denim, jeans, t-shirt or other casual clothes. For workshops/seminars attended by students, professional/business attire will be worn.

**Skills Laboratory:** The school clinical laboratory setting is designed to simulate the hospital or health care clinical area. Students will wear the adopted uniform with name badge and UT Tyler SON patch on the front left pocket area. Students should have a clean white lab coat with school patch placed as above, available when necessary, but the lab coat is not required for the school laboratory experience. In order to meet the variety of needs for warmth the following options for undershirts are permissible:
1. No undershirt for females if uniform top neckline is such that complete modesty is maintained, no cleavage.
2. Sleeveless white round neck tank top.
3. A short sleeve, round neck, royal blue or white top available through designated vendor.
5. Men will wear a round neck white undershirt without visible logos or advertising. Short sleeves should not be visible hanging from under sleeve of uniform top.
6. Long sleeve or turtleneck tops are not acceptable options.

Some individual situations may require collaborative effort by faculty to reach an appropriate solution to best deal with tattoos, skin disorders etc.

**Pre or Post-clinical Experiences in the Health Care Setting:** Students may be required to attend conferences or visit the clinical areas as part of their course requirements. Students will wear lab coat with name badge and UT Tyler school patch. Professional dress will be worn under the lab coat. The following items will be avoided in the clinical areas: jeans, shorts, sandals, jogging/athletic suits, t-shirts, ball-caps, etc.
Clinical Experience: When attending any clinical experience students are required to wear the adopted student uniform and/or white lab coat with name badge and school patch. Professional dress will be worn in appropriate clinical settings as directed by the clinical faculty with white lab coat, name badge and school patch (see items to avoid in clinical areas). Students are to remember that whenever they are visiting a clinical agency or any clinical site, they are a representative of UT Tyler and the SON and are expected to be professional in appearance and behavior at all times. Students will refrain from wearing student uniforms to non-UT Tyler related activities (restaurants, shopping, etc).

When student uniforms are required for clinical experiences, as specified by the course, the following guidelines must be adhered to:

a) School patch on the front left pocket area of lab coat and uniform top.

b) The UT Tyler name badge with photo will be worn in all clinical settings. Name tag must be worn above the waist, so name and title are clearly visible.

c) Casual outerwear such as jackets, sweaters, etc. may not be worn over the student uniform.

d) White or neutral nylon hose are worn with dress/skirt; nylon hose, knee highs or white socks with pants. Socks must cover ankles.

e) Clean, white clinical shoes or white leather athletic shoes should be worn, no canvas, mesh, or clogs (shoes may be mostly white and if stripes or logos are on shoes, these must be minimal and light colored). Shoes must be secured at heel with fixed back.

f) Jewelry: wedding or engagement rings only; single stud earrings and only 1 in each lobe (no dangling or hoops); no rings or studs in the nose, tongue, lip or any other facial or body piercing (other body piercing must be covered or removed); no necklaces or bracelets (only Medic Alert). Students must have a watch with a second hand.

g) Make-up, hair, and grooming should be conservative. Hair shoulder length or longer must be pulled neatly back in a pony-tail or bun. Hair clips, bands, etc. shall be functional, not decorative (no bows). Mustaches and beards will be neatly groomed, clean and trimmed.

h) Tattoos must be covered and not visible.

i) Nails are to be clean and neatly trimmed to no more than fingertip length; no polish or artificial nails.

j) No perfume, after-shave or other strong scents since this causes nausea and/or difficulty in breathing for many patients.

k) Gum chewing is not allowed.

l) Any question concerning adherence to the dress code should be directed toward the clinical instructor.

Failure to comply with the above requirements may result in an unexcused clinical absence and/or negative clinical evaluation.

Items to be avoided in all School-related Functions (including but not limited to): overly frayed, worn or soiled garments; costume look, transparent blouses, bare midriff shirts, tank tops, spaghetti straps, muscle shirts, overtly sexual styles, gang colors or logos, facial or body piercing, obscene slogans or pictures, bedroom wear, short-shorts, short skirts, or clothing that may be offensive to others.

If the dress code rules are broken and a change of clothes is not available, the student may be removed from the school-related function for the remainder of the day.

Appropriate disciplinary action will be taken for repeated violations of this code.

Revised: Spring 2011

2.5 Learning Lab/Simulation Center Guidelines

Introduction While you are in a learning lab at a UT-Tyler College of Nursing facility in the student role, you should be respectful of the lab environment; this time is considered a clinical experience.

UT-Tyler Policy

- All student learners will follow the skills laboratory student dress code while participating in lab experience. Dress code may be altered at the discretion by the faculty of the course based on the intent or need of the lab.

- It is the student’s responsibility to bring the required, standard equipment for the learning lab/simulation experience, including, but not limited to textbooks, lab book, syllabus, stethoscope, etc.

- Students are to complete any required preparation for the lab experiences, i.e. watching of required videos, completing case studies, reading assigned articles or text, completion of ATI skill modules, etc.
• Safety for all participants must be ensured, i.e.
  a. Keep Lab neat and orderly.
  b. Put equipment where instructed.
  c. No equipment should be moved, touched, or disconnected unless supervised by the clinical faculty or lab coordinator.
  d. Be aware of any wires and tubes which may pose a risk for falls or patient endangerment.
• Students are to speak with their peers and clinical instructor with professional communication.
• No food or drink is allowed in the simulation area/skills lab except with instructor approval.
• Do not sit on any bed; there are chairs and tables available.
• Any supplies or equipment checked out from the lab needs to be returned to the skills lab coordinator by the required date. Failure to do will result in an incomplete in the course until the equipment is returned or may require replacement cost.
• Phones are to be put away and silenced while in the learning labs. Students are not to video or audio record any learning lab/simulation experience.

**Mannequin Care**

• Consider all mannequins (or peers acting as patients) to be true patients and treat them with respect – keep them covered and dressed. Maintain privacy between your patients (mannequins or peers) by pulling screens or pull drapes as necessary.
• Do not move, reposition, or disconnect any mannequin unless instructed by the lab coordinator.
• Do not apply or insert any substances, such as Betadine, KY jelly, IV catheters, and Foley catheters to any mannequin without specific direction from your instructor.
• There are specific mannequin lubricants and tapes available. Students are not to perform any practice task training on the high fidelity mannequins as replacement parts are expensive; instead, please use the task trainers for practice.

### 2.6 General Clinical Information

**Guidelines for Clinical Practice**

• Clinical orientation will be completed prior to the first scheduled clinical experience.
• All students meet with their clinical instructor the first week of the clinical rotation to determine clinical experience objectives and learning experiences.
• All students must submit a list of 3-4 personal goals to achieve during the semester specific to nursing leadership and management, pertinent to personal career advancement after graduation. Submit these goals to the clinical instructor by the first day of clinical.
• Clinical preceptors are chosen by clinical faculty, depending on the clinical area requested. Preceptors will meet criteria set by the Texas Board of Nursing and the CON. Students will not establish a preceptorship with their own supervisor. Clinical may not be on the same unit where a student is employed.
• **Students will not complete any clinical activities until the formal preceptor agreement is signed. Any clinical time completed but not scheduled with the clinical faculty will not count toward the student’s total clinical hours.**

**Clinical Attendance**

• Attendance in clinical is MANDATORY. If an absence is necessary, the student must notify the clinical faculty and the clinical preceptor at least one hour prior to the scheduled clinical time. If you are going to be late, you must also notify the clinical facility and clinical preceptor. Failure to do so will be considered a breach of accountability and will result in an unsatisfactory clinical evaluation for that day. Prior approval must also be secured from clinical faculty to leave the clinical site early.
• 112.5 clinical hours are required in this course. You may get permission to use eight hours for an appropriate continuing education opportunity.
• A student missing clinical will present for approval a written plan as to how he/she will make up the clinical time. Make up time for missed clinical time will be arranged at the discretion of the clinical faculty.
Any student who cannot/does not make up clinical time as determined by the clinical faculty, will be assigned an unsatisfactory for that clinical day.

Any student with more than one unsatisfactory clinical time will fail the clinical component and repeat the entire course.

Students working a shift prior to the assigned clinical experience are at high risk for unsafe clinical practice.

**Immunizations/CPR/Professional Insurance**

Students are responsible for providing proof of professional liability insurance coverage, CPR certification, and immunizations prior to clinical experiences. Students will not be allowed to start their clinical rotation until all requirements are met.

The University of Texas at Tyler, hospitals and other health facilities do **NOT** cover any medical expenses as a result of accident or injury; thus, each student is responsible for any medical or hospitalization charges that occur.

**Student Clinical Evaluations**

Clinical student evaluations will be placed in the student’s file at the end of the semester for each clinical course.

**Clinical Conferences**

Clinical conferences will be arranged after clinical experiences, and will interrelate both theory and research knowledge. Each student will be required to link all clinical experiences to course material and to locate and discuss findings pertinent to the clinical learning experience. Attendance is required at each designated meeting. Failure to meet and actively participate during a scheduled clinical conference will constitute an unsatisfactory clinical.

**Completed Written Work**

When submitting written work to faculty, be sure your name is on the work. Assignments are to be submitted with the instructor’s name. All papers are the property of the University.
AUDIO/VIDEO-RECORDING AGREEMENT

I have been given permission to record the following class, NURS 3603.
I understand that, the recordings are for my personal studies only. I realize that lectures recorded may not be shared with other people without the written consent of the faculty member. I also understand that recorded lectures may not be used in any way against the faculty member, other lecturer, or students whose classroom comments are recorded as part of the class activity.

I am aware that the information contained in the recorded lectures is protected under federal copyright laws and may not be published or quoted without the expressed consent of the lecturer and without giving proper identity and credit to the lecturer. I agree to abide by these guidelines with regard to any lectures I record while enrolled as a student at The University of Texas at Tyler.

Due to the confidential nature of some course content, I agree to provide written documentation of the erasure of any recordings made during the current semester. Failure to return this written documentation to the faculty by the date of the final examination will result in a grade of “I” (Incomplete).

____________________________________  __________________
Print Name                                      Date

____________________________________
Signature of Student

I have erased all recordings made during this current semester in NURS 3603.

____________________________________  __________________
Signature of Student                                      Date

Revised with permission from TCU
Approved FO: 10/06

Please copy, complete, and turn in first day of class if recording.
Confidentiality and Privacy

Violations of confidentiality include but are not limited to:

1. Photocopying patient documents, removing patient documents from the clinical site, and postings of patient information on Internet social networking sites (Facebook®, MySpace®, Twitter®, YouTube®, etc.) as well as online blogs and journals.
2. Contacting patients/patients’ family members through a social networking system.
3. Photographing in any clinical setting. Taking and/or posting any picture taken within a clinical facility without written permission of the facility or patient (even if the patient’s identity is not disclosed) is a breach of the Health Insurance Portability and Accountability Act (HIPPA).
4. Discussing/posting any patient information related to the clinical facility one is assigned on Internet social networking sites or in a public place.
5. Social networking, texting, email, and other recreational computer use is prohibited during class or clinical time.
6. Using U.T. Tyler, College of Nursing’s name, logo, or other information in one’s personal social networking profile. Pictures of oneself should not be posted wearing U.T. Tyler nursing attire. Social networking mediums, blogs, Twitter® and Internet/electronic mail, all are considered public domain.

Failure to comply with the above guidelines will result in disciplinary action which can include dismissal from the program. Any student found in violation of the above mentioned policies and/or any policies related to conduct unbecoming a University of Texas at Tyler student, is subject to procedural disciplinary action as outlined in the U.T. Tyler Manual of Policies and Procedures for Student Affairs: Specifically Sec 8-801 and 8-804:
http://www2.uttyler.edu/mopp/documents/8Student%20Conduct%20and%20Discipline.pdf

Type your signature and date in the space below

_________________________________  _________________________________
Student Signature                  Date

NURS 3603

Approved: UG Studies: 5/11

Please access this form on Blackboard/Assignments and submit first day of class.
Student Affirmation Form  
(Please initial each statement)

____ I agree to protect the privacy of faculty, peers, patients, and family members of patients by not inappropriately disclosing confidential information about faculty, peers, patients or their family members that is disclosed to me in my capacity as a University of Texas at Tyler nursing student. In addition, I agree not to inappropriately disclose confidential information about any agency or institution that is disclosed to me in my capacity as a University of Texas at Tyler nursing student. I will adhere to HIPAA guidelines.

____ I have/will read the syllabus of this nursing course I am taking this semester, and I understand the criteria established for grading my course work. I understand that my average on exams must be 75 or higher in order to attain a passing grade for the course.

____ I agree that I will conduct myself in a manner that exhibits professional values and in accordance with the American Nurses Association (ANA) Code of Ethics for Nurses, the Texas Nurse Practice Act, and UTT’s Student Academic Dishonesty Policy.

____ I will maintain and uphold the academic integrity policy of the College of Nursing and will not condone or participate in any activities of academic dishonesty including, but not limited to, plagiarism, cheating, stealing, or copying another’s assigned work.

____ I will not recreate any items or portions of any exam for my own use, or for use by others during my enrollment in the College of Nursing.

____ I will not accept or access any unauthorized information related to any exam administered during my enrollment in the College of Nursing.

____ I will sign only my own papers and other documents and will not sign any other student's name to anything, including class rolls.

____ I will not allow any other student access to any of my paperwork for the purpose of copying.

____ After any simulated learning lab experience, I will not share details and activities with other students who have not participated in the learning experience.

_________________________________________  ________________________________________
Student’s Signature                        Date

_________________________________________
Student’s Printed Name

NURS 3603

Approved: University of Texas System-Spring 1996
Faculty Organization-Spring 1996
Revised: Spring 2000; May 2004, Summer 2005, Fall 2011

Please access this form on Blackboard/Assignments and submit first day of class.
Social Networking Policy

Online social networking mediums, such as Facebook®, and MySpace®, etc. may be effective modalities for students to connect in positive ways. However, students must be aware of, and, sensitive to, the information and pictures they post (of themselves and others).

The purpose of this policy is to outline the privacy and confidentiality issues related to students' postings to ensure safeguarding of The University of Texas at Tyler (U.T. Tyler), College of Nursing’s identity, integrity and overall reputation, in an effort to prevent violations of confidentiality and privacy.

Social Networking (definition) – Any activity that involves interaction with other individuals/users in an online environment, i.e., Facebook®, Twitter®, MySpace®, Flicker®, Friendstar®, Classmates.com®, LinkedIn®, Xanga®, Bebo®, etc. (http://en.wikipedia.org/wiki/List_of_social_networking_websites). In addition, the use of other electronic devices to record pictures, images, and other information or data that may be stored, reviewed, or shared with others either immediately or at a future date are considered social networking.

For purposes of this policy, this interaction includes, but is not limited to, browsing other users' profiles/personalized web pages, browsing other users' photos, reading messages sent through social networking forums, and engaging in online messaging services, such as instant messaging or email that is in any way related to U.T. Tyler or the College of Nursing or activities conducted while in attendance at the University. The following provides guidance as to what type of behavior is inappropriate relative to online social networking. These guidelines are not all inclusive; rather, they are intended to be used as a foundation for sound decision making.

Students are encouraged to refer to the following which was prepared by the National Council of State Boards of Nursing (NCSBN): Professional Boundaries: A Nurse’s Guide to the Importance of Professional Boundaries, located at: https://www.ncsbn.org/Professional_Boundaries_2007_Web.pdf