

**THE UNIVERSITY OF TEXAS AT TYLER
School of Nursing**

**NURS 3310
Health Assessment**

Fall 2015

Faculty

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The content of this syllabus/WEB site is subject to change at the discretion of the faculty leaders according to current learning needs.

Approved by FO: 10/02

NURS 3310-Health Assessment

Course Description

This course focuses on knowledge and skills to perform a health history and head-to-toe assessment of individuals across the lifespan. Students practice health assessment skills in laboratory and selected settings.

Prerequisites: Admission to the nursing program and successful completion of NURS 3205 and NURS 3303. Note: NURS 3310-Health Assessment is a pre-requisite or co-requisite of NURS 3603-Nursing Competencies. If a student is failing or drops NURS 3310-Health Assessment, the student must also drop NURS 3603-Nursing Competencies.

Semester Credit Hours: 1Theory/2 Laboratory: 3 credit hours

The UT Tyler Undergraduate Catalog can be found online at: <http://www.uttyler.edu/catalog/>

Course Learning Outcomes

Upon successful completion of the course the student will:

1. Integrate principles from the physical and behavioral sciences in the development of health history and physical assessment skills.
2. Apply evidence-based findings to the assessment of adult patients.
3. Demonstrate the use of technology and information systems to facilitate and improve patient assessment.
4. Demonstrate basic knowledge of regulatory requirements related to patient assessment.
5. Discuss importance of inter/intra-professional collaboration as related to patient assessment.
6. Integrate health promotion, maintenance, restoration, and disease prevention when educating patients.
7. Demonstrate professional values and the concept of caring in developing nurse/patient relationships.
8. Integrate the skills, knowledge, and attitudes required of the nurse when applying the nursing process to perform a holistic patient assessment.

Approved UGS: 5/12

Required College of Nursing Forms

Please follow directions on Blackboard to complete and submit the following required forms:

- Student Affirmation Form
- Social Networking Policy Statement

Resources for Students Taking Online or Hybrid Courses

NURS 3310 (Health Assessment) is considered a "hybrid" course, in that it includes both online and on-campus components. Follow this link <http://lms-media.uttyler.edu/fileman/oid/resource/> to some resources available to students taking online or hybrid courses, including the following:

- What is an Online or Hybrid Course?
- Technical Assistance
- Necessary Skills for Taking an Online or Hybrid Course
- Netiquette Guide
- Campus Directory Quick Reference
- University Policies (*A link to a pdf document of this information is below.)

University Policies*

Follow this link <http://www.uttyler.edu/academicaffairs/syllabuspolicies.pdf> to find a pdf of the following University policies:

- Students Rights and Responsibilities
- Grade Replacement/Forgiveness and Census Date Policies
- State-Mandated Course Drop Policy
- Disability Services
- Student Absence due to Religious Observance
- Student Absence for University-Sponsored Events and Activities
- Social Security and FERPA Statement
- Emergency Exits and Evacuation

Required Texts

- Jarvis, C. (2016). *Physical examination and health assessment (7th Ed.)*. Philadelphia: W.B.Saunders. ISBN: 978-1-4557-2810-7
- Baccalaureate Student Guide, which can be found at <http://www.uttyler.edu/nursing/college/student-resources.php>
- SimChart Program through Elsevier (6-month only required)

Required Tools/Equipment

- Watch with second hand (for counting heart & respiratory rates)
- Stethoscope
- Penlight
- UT Tyler nametag
- (Optional) Lab coat (thigh-length) with College of Nursing patch

Other Helpful (not required) Resources

- Pocket Companion for Physical Examination and Health Assessment 6th edition ISBN: 781437714425
- Nursing Made Insanely Easy and Pharmacology Made Insanely Easy (Helpful books with lots of illustrations to help with concepts) Available at www.icanpublishing.com
- Mosby's Assessment Memory Notecards by Zerwekh, Joann. Available online. (Also available: Pharmacology Notecards)
- Health Assessment Made Incredibly Visual! (2nd Ed.) ISBN/ISSN: 9781605479736
http://www.lww.com/webapp/wcs/stores/servlet/product_Health-Assessment-Made-Incredibly-Visual!_11851_-1_12551_Prod-9781605479736

Grading Policy

Completion of NURS 3310: Health Assessment is based on satisfactory attainment of both didactic (lecture) 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 will be unable to progress to the next level.

Course Grade

The course grade for NURS 3310 will be determined in the following way:

The simple average of the 4 exam grades (including Exam 1, 2, 3, and Final Exam), before weighted calculation is performed, must first be at or above 75% in order to pass the course. Grades **will not** be rounded when calculating this simple exam average. (For example, a simple exam average of 74.5 -74.9 will not be rounded up to 75.) Once the student has achieved a simple exam average of 75% or higher, course grades will be determined based on the weighted calculation of exams and other required course work, as described here:

Activity	Percentage toward final course grade
Exams (1, 2, 3 & Final Exam-17.5% each)	70%
Health History Assignment*	10%
Grand Rounds Presentation*	10%
ATI Grade**	5%
Readiness Assessments***	5%
TOTAL	100%

Letter grades will be assigned on the following scale:

- A 90-100
- B 80-89
- C 75-79
- D 60-74
- F Below 60

Approved Faculty Organization: Fall 1999, implemented Spring 2000

Health History Assignment* & Grand Rounds Presentation*

The Health History Assignment and Grand Rounds Presentation should be completed according to the grading criteria on Blackboard and submitted by the due date/time noted on the course calendar. A minimum grade of 75% is required on each assignment in order to successfully meet the requirements for NURS3310.

ATI Grade**

The ATI Grade is made up of the following activities and should be completed and submitted by the due date/time noted on the course calendar:

Activity:	Required portions:	Grade:	Percentage:
ATI Vital Signs Module	Module, Pretest & Posttest	Post-test grade	1%
ATI Nurse Logic-4 modules: 1. Knowledge & Clinical Judgment 2. Nursing Concepts 3. Priority-Setting Frameworks 4. Testing & Remediation	Lesson & Test for 4 modules	Post-test grades	4% (1% for each module)

Total = 5% of course grade

Readiness Assessments***

Required Individual & Team Readiness Assessment Tests (i-RATs & t-RATs) will be given as scheduled on the course calendar, and will cover content from the Pre-Lab Study Material for that week's unit. The average of these quiz grades will count as 5% of the course grade.

Expectations of Students for Health Assessment Labs

- Lab attendance is **MANDATORY**. Students must notify the instructor if they will be absent from lab to arrange for makeup activity.
- Students must come prepared to each lab by reading and mastering the assigned content that will be practiced in lab before that Health Assessment Lab day.
- There will be a required clicker quiz before many of the scheduled labs. Students are expected to pass the quizzes, or they will be required to remediate the content missed.
- Ongoing failure of quizzes, lack of preparation for lab, or multiple absences may result in the student being placed on clinical contract for the course.

Lab/Clinical Mastery Skills

Completion of the following Mastery Skills is mandatory, and will be graded on a Pass/Fail basis:

- Vital signs check off
- Blood Pressure Assignment
- Head-to-Toe Assessment
- Lung sounds competency
- Heart sounds competency
- Lab written assignments
- Focused SimMan assessments

Mastery Skills will be evaluated by the lab instructor through student demonstration in the learning laboratory. A passing grade is achieved when the student can successfully demonstrate competency for that skill. If the student is unsuccessful, remediation will be provided, followed by re-demonstration of the skill. If the student is unable to successfully perform any one of the mastery skills during the semester, a clinical failure will result.

NURS 3310 Mastery Skill	Grading Criteria
Vital Signs, including assessment of temperature, pulse, respiratory rate and manual blood pressure	Student will check off with the lab instructor, accurately determining temperature, pulse, respiratory rate, and blood pressure in a patient (lab classmate) or simulation mannequin. May repeat at instructor's discretion.
Blood Pressure Assignment (In Lab Portfolio)	Student will complete manual blood pressures in and outside of lab setting, as outlined in the lab portfolio.
Head-to-Toe Assessment (Assignments Menu on BBD)	Student will perform a head-to-toe assessment on a selected patient or mannequin with instructor check-off. See expanded grading criteria on BBD.
Lung sounds and Heart sounds competencies	Student must correctly identify specified lung and heart sounds Must retest until sounds are correctly identified.

SimMan Lab Case Studies	Student must be an active participant in simulation lab activities and must correctly identify problems presented as case studies using simulation mannequins.
Lab assignments and Written assignments	Student will satisfactorily complete written laboratory assignments, corresponding with content selected weeks. Satisfactory completion of the written laboratory assignments includes work that is legible, correct, complete (with no blanks), and completed by the end of the lab period.

Examination and Examination Review Policy

- Attendance for exams is mandatory.
- If absence for an exam is necessary, the student is responsible for notifying the faculty prior to the exam with an acceptable reason.
- Students will be allowed entry to the classroom after an exam has been started ONLY at faculty discretion.
- Exams will be administered on ExamSoft in the Computer Lab.
- 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.
- All cell phones will be turned off and placed face down in front of the student's computer.
- 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.
- Make-up exams will only be given at the discretion of faculty and may be in a different format than the original exam.
- Students will have the opportunity to review their exam on the computer after the exam. Additional 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.
- Any student achieving an examination grade less than 75% should schedule an appointment with the faculty within 10 school days from the return of the exam grades.

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 UT Tyler Academic Dishonesty Policy and Academic Integrity Policy in the College of Nursing Student Handbook and the Academic Integrity Policy for UT Tyler students at <http://www.uttyler.edu/mopp/index.php> (Chapter 8: Student Conduct and Discipline). 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 School of Nursing Guide for Baccalaureate Students on the UT-Tyler website.
4. The School of Nursing 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*.

Undergraduate Clinical Dress Requirements

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. (NOTE this is dress for Grand Rounds)

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:

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.
4. A 3/4 length sleeve, 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 College 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:

- 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 ponytail 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, and/or clinical failure.

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 mid-drift 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

Course Information

A. General

1. Didactic portion of the course: Syllabus, lab portfolio, lecture notes, and any other required course materials will be placed on Blackboard. Lectures will be recorded in a Tegrity recording format. Students are expected to review the Tegrity recording, as well as other resources listed on the Blackboard site, prior to lab.
2. All submitted written material (papers, assignments, examinations, etc.) are the property of the School of Nursing. They will be maintained in an archived file in the School of Nursing.
3. A current copy of the School of Nursing *Guide for Baccalaureate Students* is available on the CON website. Required forms should be accessed and digitally signed through the Blackboard course.
4. There is NO ATI exam associated with this course (only ATI Skills modules).
5. All nursing students are required to use their student email accounts for all course-related correspondence.

(Approved FO: 2/03)

Important phone numbers:

Tyler Campus School of Nursing Main number: 903-566-7320
Longview Campus: 903.663.8222
Palestine Campus: 903.727.2300
Tyler Campus University Police: 903.566.7300
Emergencies: 911

Laboratory Portion of Course

B. 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 and/or negative clinical evaluation.

Policy Revision and approval: Spring 2006

Learning Lab/Simulation Center Guidelines

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

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

2. 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.
3. 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.
4. 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.
5. Students are to speak with their peers and clinical instructor with professional communication.
6. No food or drink is allowed in the simulation area/skills lab except with instructor approval.
7. Do not sit on any bed; there are chairs and tables available.
8. 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.
9. 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

10. 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.
11. Do not move, reposition, or disconnect any mannequin unless instructed by the lab coordinator.
12. 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.

Overview of Modules

Module	Topics	Jarvis Chapters
1	Introduction to NURS 3310 Evidence-Based Assessment Cultural Competence The Interview Complete Health History Functional Assessment of Older Adult	3-Interview 4-Complete Health History <i>Selected Topics from:</i> <i>1-Evidence-Based Assessment,</i> <i>2-Cultural Competence &</i> <i>31-Functional Assessment of the Older Adult</i>
2	Assessment Techniques & Safety General Survey Measurement & VS Pain Assessment Nutritional Assessment	8-Assessment Techniques & Safety in the Clinical Setting 9-General Survey, Measurement, Vital Signs <i>Selected Topics from: 10-Pain Assessment & 11-Nutrition</i>
3	Respiratory Assessment	18-Thorax & Lungs
4	Cardiovascular Assessment Peripheral Vascular & Lymphatic Systems	19-Heart & Neck Vessels 20-Peripheral Vascular & Lymphatic Systems
5	Skin, Hair & Nails Abdominal Assessment	12-Skin, Hair & Nails 21-Abdomen
6	Bedside Assessment Electronic Health Record	29-Bedside Assessment & Electronic Health Record
7	Neurological Assessment Mental Status Assessment	23-Neurological 5-Mental
8	Head, Eyes, Ears, Nose, Mouth & Throat	13-Head, Face, Neck 14-Eyes, 15-Ears & 16-Nose, Mouth, Throat
9	Musculoskeletal System	22-Musculoskeletal System
10	Breasts & Regional Lymphatics Female Genitourinary System	17-Breasts & Regional Lymphatics 26-Female Genitourinary System
11	Male Genitourinary System Anus, Rectum & Prostate	24-Male Genitourinary System 25-Anus, Rectum, and Prostate
12	Substance Use Assessment Domestic & Family Violence Assessments	6-Substance Use Assessment 7-Domestic & Family Violence Assessment

STUDENT LEARNING OUTCOMES BY MODULE

Module 1:

3-Interview, 4-Complete Health History,

Selected Topics from:

1-Evidence-Based Assessment, 2-Cultural Competence & 31-Functional Assessment of the Older Adult

STUDENT LEARNING OUTCOMES:

INTERVIEW-

1. Distinguish between subjective and objective data.
2. Discuss the concept of health promotion related to health assessment.
3. State the purpose of a complete health history.
4. Identify the different types of health histories based on individual patient situations.
5. Apply principles of therapeutic communication.
6. Compare techniques that enhance and block effective communication.
7. Discuss individual patient needs (development, cultural, acuity) that require modified communication.
8. Discuss assessment and communication techniques for patients who are at risk for suicide, are aggressive, or have a language barrier.

COMPLETE HEALTH HISTORY-

9. Delineate types of data that belong under each section of the health history.
10. Describe the eight characteristics included in the analysis of a symptom.
11. Accurately discuss and complete the components of a complete health history.
12. Develop an awareness of patients' spiritual beliefs and values and how those beliefs and values impact healthcare.

EVIDENCE-BASED ASSESSMENT-

13. Discuss the role of assessment as the starting point of all models of clinical reasoning.
14. Describe the use of diagnostic reasoning in clinical judgment.
15. Discuss the use of the nursing process in clinical judgment.
16. Describe the use of critical thinking in diagnostic reasoning and clinical judgment.
17. Differentiate first-level, second-level, and third-level priority problems.
18. Relate the patient situation to the amount of data collected.
19. Consider life cycle and cross-cultural factors when performing a health assessment.
20. Discuss the importance of high-level assessment skills.

CULTURAL COMPETENCE-

21. Describe the basic characteristics of culture and the steps to cultural competence.
22. Explain the concept of ethnicity.
23. Discuss areas of potential cultural conflicts between nurses and patients of different ethnic groups.
24. Examine the sources that influence the culture and beliefs the student embraces.
25. Provide care that reflects an acceptance of the patient as a unique individual.

FUNCTIONAL ASSESSMENT OF THE OLDER ADULT-

26. Describe the assessment of activities of daily living and instrumental activities of daily living in the older adult.
27. Describe the various functional assessments that may be performed with the older adult.

Laboratory Student Learning Outcomes (See Lab Portfolio for all Lab Activities)

- Demonstrate use of open-ended, close-ended, and direct questioning.
- Draw a genogram that includes three generations.
- Accurately record the review of systems with a lab partner.
- Describe the 8 health variables for a patient with low back pain.

Module 2:

8-Assessment Techniques & Safety in the Clinical Setting

9-General Survey, Measurement, Vital Signs

Selected Topics from: 10-Pain Assessment & 11-Nutrition

STUDENT LEARNING OUTCOMES:**ASSESSMENT TECHNIQUES & SAFETY-**

1. Describe the use of inspection, palpation, auscultation, and percussion as a physical assessment technique.
2. Differentiate between parts of the hand used for palpation techniques.
3. Differentiate between light, deep, and bimanual palpation.
4. Discuss appropriate infection control measures used to prevent spread of infection.
5. Discuss developmental considerations in performing a physical assessment.
6. Discuss ways to ensure accurate identification of patients.
7. From Scope and Standards of Nursing practice, Standard 1, Assessment:
 - a. Collect data in a systematic and ongoing process.
 - b. Document relevant data in a retrievable format.
 - c. Apply principles of infection control.
 - d. Apply principles of patient confidentiality.
 - e. Ensure accurate identification of the patient.

GENERAL SURVEY-

8. Discuss the purpose of a general survey.
9. List the information considered in each of the four general areas of general survey.
10. Discuss developmental considerations in a general survey.

MEASUREMENT-

11. Discuss how to evaluate a client's weight and height.
12. Determine appropriate documentation of height, weight and BMI.
13. Based on patient data, determine priority of assessment related to measurement.
14. Describe variations for BMI.

VITAL SIGNS-

15. Describe various routes of temperature measurement and special considerations for each route.
16. Describe the four qualities considered when assessing the pulse.
17. Describe the appropriate procedure for assessing normal respirations.
18. Describe the relationships among the terms blood pressure, systolic pressure, diastolic pressure, and pulse pressure.
19. List the factors that affect blood pressure.
20. Relate the use of a blood pressure cuff of improper size to the possible findings that may be obtained.

PAIN-

21. Compare acute and chronic pain.
22. Describe developmental care as well as cross-cultural and gender considerations regarding pain.
23. Describe the initial pain assessment.
24. Compare available pain assessment tools.
25. Compare acute and chronic pain behaviors (nonverbal behaviors of pain).
26. Describe the physical changes that may occur because of poorly controlled pain.

NUTRITION-

27. State the purposes of a nutritional assessment.
28. Describe the components of a nutritional assessment.
29. Use anthropometric measures and laboratory data to assess the nutritional status of patients.
30. Use nutritional assessment in the provision of health care and for health promotion.
31. Discuss subjective information related to a nutritional assessment.
32. Discuss unique developmental considerations when performing a nutritional assessment.
33. Discuss common nutritional variations.

Module 3:

18-Thorax & Lungs

STUDENT LEARNING OUTCOMES:**THORAX & LUNGS**

1. Identify landmarks for a respiratory assessment.
2. Relate the relevant subjective information in an assessment of the respiratory system.
3. Discuss health promotion practices that are pertinent to the respiratory system.
4. Identify equipment appropriate to the examination of the respiratory system.
5. Describe appropriate inspection, palpation, auscultation, percussion and positioning techniques used in the examination of the respiratory system.
6. Discuss the developmental considerations associated with the respiratory assessment.
7. Compare abnormal findings in a thorax and lung assessment.
8. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the thorax and lungs.
9. Cite risk factors associated with lung disease.
10. Discuss characteristics of normal breath sounds.
11. Describe adventitious breath sounds.
12. Compare respiratory disease assessment findings.
13. Recognize respiratory distress signs and symptoms.
14. Determine appropriate documentation for assessment of the thorax and lungs.
15. Based on patient data, determine priority of assessment related to the thorax and lungs.

Module 4:

19-Heart & Neck Vessels

20-Peripheral Vascular & Lymphatic Systems

STUDENT LEARNING OUTCOMES:**HEART & NECK VESSELS-**

1. Recall the anatomy and physiology of the heart.
2. Relate the relevant subjective information in an assessment of the heart.
3. Discuss health promotion practices that are pertinent to the heart.
4. Identify equipment appropriate to the examination of the heart.
5. Describe appropriate inspection, palpation, auscultation, and positioning techniques used in the examination of the heart.
6. Discuss the developmental considerations associated with the assessment of the heart.
7. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the heart.
8. Cite risk factors associated with heart disease.
9. Recognize and describe normal and abnormal findings in assessment of the heart.
10. Determine appropriate documentation for assessment of the heart.
11. Based on patient data, determine priority of assessment related to the heart.

PERIPHERAL VASCULAR & LYMPHATICS-

12. Recall the anatomy and physiology of the peripheral vascular and lymphatics systems.
13. Relate the relevant subjective information in an assessment of the peripheral vascular and lymphatics systems.
14. Discuss health promotion practices that are pertinent to the peripheral vascular and lymphatics systems.
15. Identify equipment appropriate to the examination of the peripheral vascular and lymphatics systems.
16. Describe appropriate inspection, palpation, auscultation, and positioning techniques used in the examination of the peripheral vascular and lymphatics systems.
17. Discuss the developmental considerations associated with the peripheral vascular and lymphatics systems.

18. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the peripheral vascular and lymphatics systems.
19. Cite risk factors associated with peripheral vascular disease and stroke.
20. Recognize normal and abnormal findings in assessment of the peripheral vascular and lymphatics systems.
21. Determine appropriate documentation for assessment of the peripheral vascular and lymphatics systems.
22. Based on patient data, determine priority of assessment related to the peripheral vascular and lymphatics systems.
23. Compare venous and arterial disease of the peripheral blood vessels.

Laboratory Student Learning Outcomes

- Demonstrate Head to Toe Mastery Skills: Cardiovascular & Gastrointestinal
- Demonstrate proper technique for using the Doppler to assess an arterial pulse.
- Recognize normal and abnormal heart sounds (murmur, extra heart sound or gallop) in lab by testing.

Module 5:

12-Skin, Hair & Nails
21-Abdomen

STUDENT LEARNING OUTCOMES:

SKIN, HAIR & NAILS-

1. Describe the differences between basal cell carcinoma and melanoma.
2. Discuss subjective information collected for a skin, hair, and nail assessment.
3. Discuss health promotion practices that are pertinent to the skin.
4. Describe the techniques for inspection and palpation of the skin, hair and nails.
5. Differentiate between common shapes and configurations of lesions.
6. Identify common skin lesions.
7. Discuss the developmental considerations associated with the skin, hair and nails.
8. Recognize and describe normal and abnormal findings in assessment of the skin, hair and nails.
9. Determine appropriate documentation for assessment of the skin, hair and nails.
10. Based on patient data, determine priority of assessment related to the skin, hair and nails.

ABDOMEN-

11. Recall anatomy and physiology of the abdomen, and identify the organs in the 4 quadrants.
12. Relate the relevant subjective information in an assessment of the abdomen.
13. Discuss health promotion practices that are pertinent to the abdomen.
14. Identify equipment appropriate to the examination of the abdomen.
15. Describe appropriate inspection, palpation, auscultation, percussion, and positioning techniques used in the examination of the abdomen.
16. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the abdomen.
17. Identify common causes of abdominal distention.

Module 6

29-Bedside Assessment & Electronic Health Record

STUDENT LEARNING OUTCOMES:

BEDSIDE ASSESSMENT & E.H.R.-

1. Use recommended techniques to perform an appropriate reassessment of the hospitalized patient.
2. Discuss the use of the SBAR framework for verbal communication of patient data and situations.

Module 7

23-Neurological

5-Mental

STUDENT LEARNING OUTCOMES:**NEUROLOGICAL-**

1. Recall anatomy and physiology of the neurologic system.
2. Relate the relevant subjective information in an assessment of the neurologic system.
3. Discuss health promotion practices that are pertinent to the neurologic system.
4. Identify equipment appropriate to the examination of the neurologic system.
5. Describe appropriate inspection, palpation, percussion, and positioning techniques used in the examination of the neurologic system.
6. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the neurologic system.
7. Identify expected and unexpected findings associated with the cranial nerves.
8. Describe exams that assess cerebellar function
9. Describe exams that assess sensory function
10. Describe the different deep tendon reflexes including normal and abnormal responses
11. Discuss abnormalities of the neurologic system
12. Determine appropriate documentation.
13. Based on patient data, determine priority of assessment
14. Compare normal and abnormal findings related to the Glasgow Coma Scale
15. Compare neurological disease assessment findings.

MENTAL STATUS-

16. Describe the following components of a mental status exam: appearance, behavior, cognition, and thought processes.
17. Discuss developmental considerations of the mental status examination.
18. Discuss measures and tests of cognitive functioning including memory.
19. Discuss examples of abnormalities of thought content
20. Relate the relevant subjective information in an assessment of the mental status exam
21. Describe the characteristics of major depression and potential safety issues.
22. Describe abnormalities of mood and affect
23. Describe delirium and dementia
24. Determine appropriate documentation.
25. Based on patient data, determine priority of assessment

Module 8

13-Head, Face, Neck

14-Eyes, 15-Ears & 16-Nose, Mouth, Throat

STUDENT LEARNING OUTCOMES:**HEAD, FACE & NECK-**

1. Recall anatomy and physiology of the head and neck assessment and lymphatic system
2. Relate the relevant subjective information in an assessment of the head and neck assessment and lymphatic system
3. Identify equipment appropriate to the examination of the head and neck assessment and lymphatic system
4. Describe appropriate inspection, palpation, of the head and neck assessment and lymphatic system
5. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the head and neck assessment and lymphatic system
6. Identify the structures and landmarks of the neck.
7. Identify abnormal findings associated with the exam of the head and neck.
8. Identify developmental considerations in the head and neck exam.

EYES-

9. Recall anatomy and physiology of the eyes.
10. Relate the relevant subjective information in an assessment of the eyes.
11. Discuss health promotion practices that are pertinent to the eyes.
12. Identify equipment appropriate to the examination of the eyes.
13. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the eyes.
14. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the eyes.
15. Understand abnormalities of the eyes

EARS-

16. Recall anatomy and physiology of the ears.
17. Relate the relevant subjective information in an assessment of the ears.
18. Discuss health promotion practices that are pertinent to the ears.
19. Identify equipment appropriate to the examination of the ears.
20. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the ears.
21. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the ears.
22. Compare abnormalities of the ear including the tympanic membrane
23. Identify expected and abnormal findings of tuning fork tests.

NOSE, MOUTH & THROAT-

24. Recall anatomy and physiology of the nose, mouth, and throat.
25. Relate the relevant subjective information in an assessment of the nose, mouth, and throat.
26. Discuss health promotion practices that are pertinent to the nose, mouth, and throat.
27. Identify equipment appropriate to the examination of the nose, mouth, and throat.
28. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the nose, mouth, and throat.
29. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the nose, mouth, and throat.
30. Compare abnormalities of the nose, mouth, and throat.
31. Determine appropriate documentation.
32. Based on patient data, determine priority of assessment

Module 9**22-Musculoskeletal System****STUDENT LEARNING OUTCOMES:****MUSCULOSKELETAL-**

1. Recall anatomy and physiology of the musculoskeletal system.
2. Relate the relevant subjective information in an assessment of the musculoskeletal system.
3. Discuss health promotion practices that are pertinent to the musculoskeletal system.
4. Identify equipment appropriate to the examination of the musculoskeletal system.
5. Describe appropriate inspection, palpation, specific exams, and positioning techniques used in the examination of the musculoskeletal system
6. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the musculoskeletal system.
7. Identify abnormalities of the bones, joints, spine, and ligaments and muscles (rheumatoid arthritis, carpal tunnel syndrome, osteoporosis, and osteoarthritis)
8. Determine appropriate documentation.
9. Based on patient data, determine priority of assessment

Module 10

17-Breasts & Regional Lymphatics

26-Female Genitourinary System

STUDENT LEARNING OUTCOMES:**BREASTS-**

1. Recall anatomy and physiology of the breasts and regional lymphatics.
2. Relate the relevant subjective information in an assessment of the breasts and regional lymphatics.
3. Discuss health promotion practices that are pertinent to the breasts and regional lymphatics.
4. Identify equipment appropriate to the examination of the breasts and regional lymphatics.
5. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the breasts and regional lymphatics.
6. Describe expected findings, minor variations, variations related to age, race, gender, and pregnancy that may be found on examination of the breasts and regional lymphatics.
7. Identify risk factors and signs of breast cancer.
8. Compare disorders occurring during lactation.
9. Discuss abnormal findings related to a breast exam
10. Discuss breast cancer and other abnormalities of the male breast.
11. Determine appropriate documentation.
12. Based on patient data, determine priority of assessment

FEMALE GU-

13. Recall anatomy and physiology of the female genitalia.
14. Relate the relevant subjective information in an assessment of the female genitalia.
15. Discuss health promotion practices that are pertinent to the female genitalia.
16. Discuss expected findings and procedures for the pelvic exam.
17. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the female genitalia.
18. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the female genitalia.
19. Compare abnormalities of external female genitalia.
20. Compare abnormalities of female pelvic musculature.
21. Identify risk factors for cervical and ovarian cancer
22. Identify signs and symptoms and patient education regarding sexually transmitted diseases
23. Compare abnormalities of the cervix and vulvovaginal inflammations.

Module 11

24-Male Genitourinary System

25-Anus, Rectum, and Prostate

STUDENT LEARNING OUTCOMES:**MALE GU-**

1. Recall anatomy and physiology of the male genitalia.
2. Relate the relevant subjective information in an assessment of the male genitalia and urinary system.
3. Discuss health promotion practices that are pertinent to the male genitalia.
4. Identify equipment appropriate to the examination of the male genitalia.
5. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the male genitalia.
6. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the male genitalia.
7. Identify male genital lesions and abnormalities of the scrotum.
8. Identify abnormalities of the penis.

ANUS, RECTUM & PROSTATE-

9. Recall anatomy and physiology of the anus, rectum, and prostate.
10. Relate the relevant subjective information in an assessment of the anus, rectum, and prostate.
11. Discuss health promotion practices that are pertinent to the anus, rectum, and prostate.
12. Identify equipment appropriate to the examination of the anus, rectum, and prostate.
13. Describe appropriate inspection, palpation, and positioning techniques used in the examination of the anus, rectum, and prostate.
14. Describe expected findings, minor variations, variations related to age, race, gender that may be found on examination of the anus, rectum, and prostate.
15. Identify abnormalities of the rectum.
16. Identify abnormalities of the prostate gland.
17. Determine appropriate documentation.
18. Based on patient data, determine priority of assessment.

Note: Omit physical exam of male genitalia and rectum.

Module 12

6-Substance Use Assessment

7-Domestic & Family Violence Assessment

STUDENT LEARNING OUTCOMES:**SUBSTANCE USE-**

1. Identify risk factors associated with increased alcohol use.
2. Incorporate the use of alcohol and drug abuse tools into the assessment of patients in the health care environment.
3. Identify and assess substance abuse in individuals across the life span.

DOMESTIC VIOLENCE-

4. Recognize health care professional's role as mandatory reporters of domestic violence.
5. Explain the aspects of assessment and history taking for suspected domestic violence.
6. Compare assessment findings consistent with domestic violence.
7. Recognize the difference between physical abuse, physical neglect, unintentional neglect, psychological abuse, and psychological neglect.
8. Recognize causes for patterned injury.
9. Identify the different types and populations of domestic and family violence.
10. Discuss the health effects of violence.
11. Discuss the importance of and procedures for both written and photographic documentation of IPV and elder abuse.
12. Determine what steps to take if a patient denies IPV, but abuse is still suspected.