

**THE UNIVERSITY OF TEXAS AT TYLER  
College of Nursing and Health Sciences  
NURS 4632: Medical-Surgical Nursing II (Tyler)  
Syllabus Fall 2015**

**Tyler Campus Faculty**

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Lectures/Tegrity/Exams are on Tuesdays in the Computer Lab. Final Exam TBA  
Simulation Labs Tuesdays & varied days

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

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Fall 2015	Week	Tegrity lecture/assigned reading	Date	Time/ Location	Clinical Lab Activity	'On Your Own' Activities	Attire	
Exam 1 Material begins	1	Exploring the ICU	8-25	Classroom	Course Orientation	Complete Practice Calculations	Casual	7
		Coronary Artery Disease & Acute Coronary Syndrome	8-26	Computer Lab	Drug calculation		Casual	
			8-28	Times vary	Med Calculation Test		Scrub	
	2	Dysrhythmias	Sept 1 TBA	Classroom Sim Lab	Dysrhythmia Assessment ICU client	Review provider CPR Weeks 1,2 Lab Quiz 1 Wed 8a-Mon 11:59P	Casual Scrub	3.5 4
	3	Inflammatory/Structural Heart Disorders	TBA	Sim Lab.	Cardiac lab		Scrub	4
Exam 2 Material begins	4	Lower Respiratory Disorders	Sept 15	Computer Lab.	Exam 1	Start Atrium Chest Tube Training EBP Conf. 7:30-4p	Casual	2
			Sept 18				Scrub	6
	5	Acute Respiratory Distress(ARDS) Mechanical Ventilation	TBA	Sim Lab	Resp Shock Lab	Lab Quiz 2 Wed 8a-Mon 11:59P	Scrub	5
	6	Shock Part I & II	TBA	Sim Lab	Resp Shock Lab	Atrium CT due Sept 28 9AM	Scrub	
Exam 3 Material begins	7	Burns	Oct 6	Computer Lab	Exam 2 CCP Presentation Post Conferences	CCP, date by clinical group Clinical activities by clinical group. Dates vary.	Casual	4
			TBA TBA				Profess. Scrub	12
	8	Acute Kidney Injury (AKI) Chronic Kidney Disease (CKD)	TBA		Burn/Renal Lab	Lab Quiz 3 Wed 8a-Mon 11:59P	Scrub	5
	9	Endocrine Part 1 & 2	TBA		Burn/Renal Lab		Scrub	
Exam 4 Material begins	10	Acute Intracranial Problems Stroke	Oct 27	Computer Lab.	Exam 3	Start NIHSS Training Start ATI Practice A & B	Casual	3
	11	Chronic Neurologic Problems Peripheral Nerve/SCI	Nov 3 TBA	Classroom 8a-1p Sim Lab.	Expert Guest Speaker Neuro Lab	Lab Quiz#4 Wed 8a-Mon 11:59P	Professio nal Dress	4 5
Final Material begins	12	Arthritis/Autoimmune Disorders HIV/AIDS	TBA	Sim Lab.	Neuro Lab	NIHSS Training due Nov 9 at 9AM	Scrub	
	13	Musculoskeletal	Nov 17	Computer Lab.	Exam 4		Casual	
	14	Gastrointestinal Obesity	TBA		PICO Presentations	ATI Practice A & B due Dec 2 11:59Pm	Professio nal	4
			Dec 3	Computer Lab.	ATI(Family/Med Surg)		2	
	15		Dec 10	Computer Lab.	Final Exam		Campus Hospital total	64.5 48 112.5
							<b>Clinical Hours</b>	

**\*\*See syllabus for weekly reading assignments and Tegrity lectures\*\***

## 2.0 OVERVIEW OF N4632

NURS 4632 – Medical Surgical Nursing II

Semester Credit Hours – 6 hours; 3 hours theory & 3 hours clinical

Prerequisites: Successful completion of all courses through Semester II for the generic and LVN student.

## 2.0 COURSE DESCRIPTION

This advanced medical/surgical course expands on previously learned knowledge and skills acquired in prior nursing courses. Emphasis is on care of complex high acuity adult patients in selected settings. **Prerequisites:** Successful completion of NURS 3333, NURS 3513, and NURS 3611. (Credit: 3:3)

## 3.0 COURSE STUDENT LEARNING OUTCOMES

Upon successful completion of this course, the student will:

1. Synthesize knowledge from nursing and other scientific and humanistic disciplines as they relate to medical/surgical nursing.
2. Assume accountability by utilizing the nursing process to coordinate quality care for the adult patient with complex care needs.
3. Integrate interdisciplinary evidence based findings to improve patient outcomes.
4. Integrate the use of technology and information systems to facilitate and improve delivery of comprehensive care to adult patients experiencing complex health care needs.
5. Discuss the economic and regulatory impact of provision of care in the critical care area.
6. Display human caring by assuming responsibility and accountability for professional interactions for adult patients experiencing complex health care needs.
7. Collaborate with the health care team to promote health restoration and maintenance, risk reduction, and disease management in adult patients experiencing complex health care needs.
8. Exemplify professional values that employ ethical, legal, and moral standards in caring for adult patients and their families.
9. Provide safe, holistic, patient centered care for culturally diverse adult patients experiencing complex health care needs.

#### 4.0 TEXTBOOKS:

##### Required:

College of Nursing. (2015). *BSN/MSN guide for nursing students*. Tyler: The University of Texas at Tyler.

Lewis, S., Dirksen, S., Heikemper, M., & Bucher, L. (2014) *Medical-surgical nursing: Clinical management for positive outcomes* (9th ed.) St. Louis, Mosby. ISBN 978-0-323-08678-3

NCLEX-RN 10,000, Prep-U, ISBN-13: 978-1-4511-1601-4 (Highly recommended) or Elsevier EAQ.

*Nursing: Scope and Standards of Practice* (2010). Silver Spring, MD: American Nurses Association.

University of Texas at Tyler. (2014). *University General Policies applicable to all students*. Retrieve from:  
<http://www.uttyler.edu/academicaffairs/syllabuspolicies.pdf>.

*A recent (within the past 2 years) lab book, IV drug book, and drug reference book are required. PDA software is acceptable.*

Elsevier website: You are encouraged to make use of this website to access the latest information on the subject matter that we will be covering in class.

<http://evolve.elsevier.com/Lewis/medsurg>

ATItesting.com: You are encouraged to make use of this website to access modules on the subject matter that we will be covering in class. <http://www.atitesting.com>

#### **5.0 UNIVERSITY POLICIES FOR STUDENTS (Rev 10/2013)**

The following University policies must appear on each course syllabus or be provided as an informational sheet (web-links to these policies may be used in the print or electronic syllabus) <http://www.uttyler.edu/academicaffairs/syllabuspolicies.pdf>

##### **Students Rights and Responsibilities**

To know and understand the policies that affect your rights and responsibilities as a student at UT Tyler, please follow this link:

<http://www.uttyler.edu/wellness/rightsresponsibilities.php>

##### **Grade Replacement/Forgiveness and Census Date Policies**

Students repeating a course for grade forgiveness (grade replacement) must file a Grade Replacement Contract with the Enrollment Services Center (ADM 230) on or before the Census Date of the semester in which the course will be repeated. Grade Replacement Contracts are available in the Enrollment Services Center or at <http://www.uttyler.edu/registrar>. Each semester's Census Date can be found on the Contract itself, on the Academic Calendar, or in the information pamphlets published each semester by the Office of the Registrar. Failure to file a Grade Replacement

Contract will result in both the original and repeated grade being used to calculate your overall grade point average. Undergraduates are eligible to exercise grade replacement for only three course repeats during their career at UT Tyler; graduates are eligible for two grade replacements. Full policy details are printed on each Grade Replacement Contract.

The Census Date is the deadline for many forms and enrollment actions that students need to be aware of. These include:

- Submitting Grade Replacement Contracts, Transient Forms, requests to withhold directory information, approvals for taking courses as Audit, Pass/Fail or Credit/No Credit.
- Receiving 100% refunds for partial withdrawals. (There is no refund for these after the Census Date)
- Schedule adjustments (section changes, adding a new class, dropping without a “W” grade)
- Being reinstated or re-enrolled in classes after being dropped for non-payment
- Completing the process for tuition exemptions or waivers through Financial Aid

### **State-Mandated Course Drop Policy**

Texas law prohibits a student who began college for the first time in Fall 2007 or thereafter from dropping more than six courses during their entire undergraduate career. This includes courses dropped at another 2-year or 4-year Texas public college or university. For purposes of this rule, a dropped course is any course that is dropped after the census date (See Academic Calendar for the specific date). Exceptions to the 6-drop rule may be found in the catalog. Petitions for exemptions must be submitted to the Enrollment Services Center and must be accompanied by documentation of the extenuating circumstance. Please contact the Enrollment Services Center if you have any questions.

### **Disability Services**

In accordance with Section 504 of the Rehabilitation Act, Americans with Disabilities Act (ADA) and the ADA Amendments Act (ADAAA) the University offers accommodations to students with learning, physical and/or psychiatric disabilities. If you have a disability, including non-visible disabilities such as chronic diseases, learning disabilities, head injury, PTSD or ADHD, or you have a history of modifications or accommodations in a previous educational environment you are encouraged to contact the Student Accessibility and Resources office and schedule an interview with the Accessibility Case Manager/ADA Coordinator, Cynthia Lowery Staples. If you are unsure if the above criteria applies to you, but have questions or concerns please contact the SAR office. For more information or to set up an appointment please visit the SAR office located in the University Center, Room 3150 or call 903.566.7079. You may also send an email to [cstaples@uttyler.edu](mailto:cstaples@uttyler.edu)

### **Student Absence due to Religious Observance**

Students who anticipate being absent from class due to a religious observance are requested to inform the instructor of such absences by the second class meeting of the semester.

### **Student Absence for University-Sponsored Events and Activities**

If you intend to be absent for a university-sponsored event or activity, you (or the event sponsor) must notify the instructor at least two weeks prior to the date of the planned absence. At that time the instructor will set a date and time when make-up assignments will be completed.

### **Social Security and FERPA Statement:**

It is the policy of The University of Texas at Tyler to protect the confidential nature of social security numbers. The University has changed its computer programming so that all students have an identification number. The electronic transmission of grades (e.g., via e-mail) risks violation of the Family Educational Rights and Privacy Act; grades will not be transmitted electronically.

**Emergency Exits and Evacuation:** Everyone is required to exit the building when a fire alarm goes off. Follow your instructor's directions regarding the appropriate exit. If you require assistance during an evacuation, inform your instructor in the first week of class. Do not re-enter the building unless given permission by University Police, Fire department, or Fire Prevention Services.

## **6.0 EXAMINATIONS/ASSIGNMENTS AND GRADING POLICY**

Completion of NURS 4632 is based on satisfactory attainment of didactic and clinical criteria. Any student who fails to meet the course objectives in either the classroom or clinical area must repeat the entire course and may not progress to the next level.

### **6.1 GRADING POLICY**

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 grade average of 75 or higher will have course grades calculated based on the weighted calculation of the exams and other required course work.

#### ***The Course Grade consists of the following components:***

Four Unit Exams each (4 @ 17% each)	68%
Comprehensive Final	17%
Medication Calculation Exam (Must obtain 90% on above exam to pass)	Pass/Fail
Clinical Care Plan Must obtain 75% to pass clinical	5%
Evidence Based Case Study Presentation Must obtain 75% on presentation to pass clinical	5%
Sim Lab Quizzes	5%
Clinical mastery of 112.5 clinical hours	Pass/Fail
25 NCLEX Practice questions each week Must obtain 75% on 350 questions to pass clinical.	Pass/Fail
ATI Medical-Surgical Proctored Assessment	<u>Must Take</u>
	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 FO Spring 1999

#### **6.4. Paper/Assignment Re-grading Policy**

Student assignments will not be re-graded. At the instructor's discretion, a draft may be written for review.

#### **6.5. Examination and Examination Review Policy**

1. Attendance for exams are 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 after an exam has been started ONLY with faculty discretion.
4. Exams will be distributed 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.
8. Students will not share calculators during exams. Students will not bring their own calculators, cell phones, or any communicating devices into an examination
9. 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.
10. Any student achieving an examination grade less than 75% are encouraged to schedule an appointment with the faculty within 10 school days from the return of the exam grades.

#### **6.6 Quiz Guidelines**

1. There are 4 quizzes, worth a total of 5% of the overall grade, to be completed according to the syllabus schedule. The content of the quizzes correspond to the scheduled Skills/Simulation Lab. Each quiz is worth 1.25%
2. Quizzes are offered online under the Quiz Menu tab on Blackboard.
2. Each quiz will be 10 questions worth 10 points each. Quizzes may be fill-in-the-blank, multiple choice, matching, or true-false. The instructor teaching the lecture material will develop the quizzes. Quiz material will come primarily from the Lewis textbook required reading as listed in your syllabus.

3. Each quiz will open in Blackboard on **Wednesday at 8 AM the week before the Simulation Lab**, and will be **turned off on the day before the designated Simulation Lab at 11:59 PM**. The goal is for you to read ahead and be prepared for simulation lab.
4. Quizzes are to be completed independently, in one sitting. **One hour** is allowed for completion (although most students should complete them in a shorter time period). For students who have unreliable internet connections at home, the campus lab computers should be used. **Should you be kicked off of the internet and require your quiz to be reset, please email the course coordinator.** Students who email course coordinators to reset quizzes after 9 pm and over the weekend (due to internet connection failure) should not expect an immediate answer. Quizzes will not be reset after the “turn off” time.
5. Students who miss the originally scheduled online quizzes will receive a zero for missed quizzes.

## **7.0 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 UTT Academic Dishonesty Policy and Academic Integrity Policy in the current College of Nursing Student Handbook. These policies are fully endorsed and enforced by all faculty in 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.
4. The College 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.

## **8.0 GENERAL EXPECTATIONS OF STUDENTS IN Medical Surgical Nursing II**

### **8.1 Attendance**

- a. Attendance during lecture, clinical experiences and clinical conferences is a professional expectation and will be monitored by course faculty. Attendance for clinical assignments is addressed at length in the syllabus. Refer to the university catalog for the policy regarding student attendance and possible student consequences.
- b. Students should read and understand the attendance statement in the current UT Tyler General Catalogue.
- c. Students are responsible for all material discussed and all announcements made if they are absent.
- d. Students must notify the instructor prior to any scheduled clinical or post clinical conference if an absence is necessary. When scheduled in the clinical agency, the students must contact the agency personnel at least one hour prior to the

scheduled clinical time. If the student is going to be late, the student must notify the agency and indicate the approximate time of arrival.

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- e. Make up 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 a written plan as to how he/she will meet the clinical objectives. Make up time and location for missed post clinical conferences learning experiences will be arranged at the discretion of the instructor.

## **8.2 Dress Code Requirements**

**General:** It is the philosophy of the College 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/Simulation 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 College 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.

**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

### **8.3 Professional Liability Insurance/CPR/Required Immunizations**

Students are responsible for providing proof of professional liability, CPR Certification and immunizations prior to hospital experience. Failure to comply with the College of Nursing requirements will result in unexcused clinical absence.

### **8.4 Clinical Injuries**

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

### **8.5 Working Prior To Clinical**

Students working the shift prior to the assigned clinical experiences are at high risk for unsafe clinical practice. It is advised that the student not work prior to the assigned clinical day.

### **8.6 Lecture**

- a) If lecture outlines are used, they will be posted at the time of the scheduled tegrity session and may be removed following the exam.
- b) The clinical portion of the course syllabus, handouts, and any other required course materials will be placed on blackboard.
- c) All submitted written material (papers, assignments, examinations, etc.) are the property of the College of Nursing. They will be maintained in an archived file in the College of Nursing.

- d) ATI testing is completed at the end of the course at a scheduled time and must be taken prior to the final. If the student has not fulfilled this requirement, he/she will not be allowed to take the final exam. A grade of \* 0\* will be recorded for the final exam for this student.
- e) All nursing students are required to use their student email accounts for all correspondence (Approved FO: 2/03)

### **8.7 Student Affirmation Form**

1. Each line must be acknowledged within the affirmation form. You are to complete this form on blackboard during the first week of the semester.

### **8.8 Skills 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

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 by 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.
10. No ink pens are allowed in the Simulation Center, pencils only. Do not mark the mannequins for any reason.

## Mannequin Care

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11. 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.
12. Do not move, reposition, or disconnect any mannequin unless instructed by the lab coordinator.
13. 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.

## WEEK 1

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### EXPLORING THE INTENSIVE CARE UNIT

#### OBJECTIVES:

Following completion of this unit, the student will be able to:

1. Discuss how critical care units meet the needs of acutely and critically ill patients.
2. Describe special needs of the critically ill patient, including family presence, nutrition, communication, sensory-perceptual, sleep, and relief from anxiety and pain.
2. Recognize healthcare policies (including financial and regulatory), that influence the functioning environment of the ICU's: resuscitation, end-of-life, and organ donation.
3. Identify ethical issues that may impact patient care in an ICU environment.
4. Identify common modalities to assess and treat critical care patient problems: hemodynamic monitoring (arterial blood pressure, pulmonary artery catheter, CVP, IABP, VAD, and mechanical ventilation)

### NURSING MANAGEMENT: CORONARY ARTERY DISEASE AND ACUTE CORONARY SYNDROME

#### OBJECTIVES:

Following completion of this unit, the student will be able to:

1. Relate the etiology and pathophysiology of coronary artery disease, angina, and acute coronary syndrome to the clinical manifestations of each disorder.
2. Describe the nursing role in the promotion of therapeutic lifestyle changes in patients at risk for coronary artery disease.
3. Differentiate the precipitating factors, clinical manifestations, and collaborative care and nursing management of the patient with coronary artery disease and chronic stable angina.
4. Explain the clinical manifestations, complications, diagnostic study results, and collaborative care of the patient with acute coronary syndrome, including standards of care for STEMI patients.
5. Evaluate commonly used drug therapy in treating patients with coronary artery disease and acute coronary syndrome.
6. Prioritize key components to include in the rehabilitation of patients recovering from acute coronary syndrome and coronary revascularization procedures.
7. Differentiate the precipitating factors, clinical presentation, and collaborative care of patients who are at risk for or have experienced sudden cardiac death.

#### Learning Activities

1. Pre-Class Assignment: Read Lewis Chapter 66: Critical Care – Read 1598-1602, 142, 145-147 (legal and ethical); 1603-1618 (description of devices); 1678 (family presence). Chapter 34 (730-765) & Chapter 32 (pg. 698-708). Watch Tegrity recording of Exploring the Intensive Care Unit and CAD.
2. Review Standards of care for STEMI at external link site on Blackboard site
3. Review readings from pharmacological text.
4. Attend Dysrhythmia I Simulation.
5. Evaluation: Exam



**WEEK 2**  
**NURSING MANAGEMENT: DYSRHYTHMIAS**

**OBJECTIVES:**

Following completion of this unit, the student will be able to:

1. Examine the nursing management of patients requiring continuous electrocardiographic (ECG) monitoring
2. Differentiate the clinical characteristics and ECG patterns of normal sinus rhythm, common dysrhythmias, and acute coronary syndrome (ACS)
3. Compare the nursing and collaborative management of patients with common dysrhythmias and ECG changes associated with ACS.
4. Differentiate between defibrillation and cardioversion, including indications for use and physiologic effects.
5. Describe the management of a patient with pacemakers and implantable cardioverter-defibrillators.
7. Explore through evidence-based research the quality of life patients experience following ICD implantation and interventions to improve outcomes.
8. Select appropriate interventions for patients undergoing electrophysiologic testing and radiofrequency catheter ablation therapy.

**Learning Activities**

1. Pre-Class Assignment: Read Lewis, chapter 36, (pg. 787-809). Watch Tegrity recording of Dysrhythmias before Dysrhythmia I and II Simulations.
2. Review readings from pharmacological text.
3. Review the 2012 EBP article: Educational and Psychological Intervention to Improve Outcomes for Recipients of Implantable Cardioverter Defibrillators and Their Families: (<http://circ.ahajournals.org/content/126/17/2146.full.pdf+html>) and on Blackboard.
4. Complete the clinical skills lab Dysrhythmia worksheets (found in Blackboard)
4. Attend Dysrhythmia I and II Simulation
5. Evaluation: Exams

**WEEK 3**  
**NURSING MANAGEMENT: INFLAMMATORY AND STRUCTURAL HEART DISORDERS**

**OBJECTIVES**

1. Differentiate the etiology, pathophysiology, and clinical manifestations of infective endocarditis and pericarditis.
2. Describe the collaborative care and nursing management of the patient with infective endocarditis and pericarditis.
3. Describe the etiology, pathophysiology, and clinical manifestations of myocarditis.
4. Describe the collaborative care and nursing management of the patient with myocarditis.
5. Differentiate the etiology, pathophysiology, and clinical manifestations of rheumatic fever and rheumatic heart disease.
6. Describe the collaborative care and nursing management of the patient with rheumatic fever and rheumatic heart disease.
7. Relate the pathophysiology to the clinical manifestations and diagnostic studies for the various types of valvular heart disease.
8. Describe the collaborative care and nursing management of the patient with valvular heart disease.
9. Relate the pathophysiology to the clinical manifestations and diagnostic studies for the different types of cardiomyopathy.
10. Compare the nursing and collaborative management of patients with different types of cardiomyopathy.

**Learning Activities**

1. Pre-Class Assignment: Read Lewis, chapter 37 (pgs, 810 – 832). Watch Tegrity recording of Inflammatory and Structural Heart Disorders.
2. Review readings from pharmacological text.
3. Evaluation: Exams

**WEEK 4****NURSING MANAGEMENT: SPECIFIC LOWER RESPIRATORY PROBLEMS****OBJECTIVES**

1. Identify the mechanisms involved, the clinical manifestations, and treatment of pneumothorax, fractured ribs, and flail chest.
2. Describe the purpose, methods, and nursing responsibilities related to chest tubes, including the differences between water seal and dry suction chest drainage; differentiate treatment of pneumothorax from pleural effusion.
3. Describe the pathophysiology, clinical manifestations, and collaborative nursing management of patients with pulmonary emboli (including drug therapy).

**LEARNING ACTIVITIES**

1. Pre-class assignment: read Lewis, pgs. 541-550 & 551-553. Watch Tegrity recording of Specific Lower Respiratory Problems.
2. Review readings from drug book or pharmacology text for related medications.
3. Review Atrium website for videos on chest drainage (posted on Blackboard)
4. Evaluation: Exams

**NURSING MANAGEMENT: RESPIRATORY FAILURE AND ACUTE RESPIRATORY DISTRESS SYNDROME**

**OBJECTIVES**

1. Compare the pathophysiologic mechanisms that result in hypoxemic and hypercapnic respiratory failure.
2. Describe the nursing and collaborative management (including acute intervention) of the patient with hypoxemic or hypercapnic respiratory failure,
3. Differentiate between early and late manifestations of acute respiratory failure.
4. Describe use and maintenance of artificial airways, the principles of mechanical ventilation and related collaborative and/or nursing care of the intubated critically ill patient with complex care needs.
5. Describe the common modes used with mechanical ventilation and indications for each of the ventilator modes.
6. Relate the pathophysiologic mechanisms that result in acute respiratory distress syndrome (ARDS) and the clinical manifestations of ARDS.
7. Describe the nursing and collaborative management of the patient with ARDS.
8. Explain the complications that may result from acute respiratory failure, ARDS, and mechanical ventilation (including ventilator associated pneumonia); and describe measures to prevent these complications.
9. Describe the use of drug therapy for patients with respiratory failure and ARDS, and the medications used to manage patients on mechanical ventilation.

**LEARNING ACTIVITIES**

1. Lewis, Chapter 66, pgs. 1613-1629 & Chapter 68, pgs. 1654-1673. Watch Tegrity recording of Respiratory Failure and Acute Respiratory Distress Syndrome prior to Respiratory Sim Lab.
2. Review drug book or related pharmacology text regarding drug therapy for respiratory failure and management of patients on mechanical ventilation.
3. Attend Respiratory Lab and participate in activities.
4. Review VAP protocol.
5. Review modes of oxygen therapy (e.g. nasal cannula, mask, non-rebreather, bi-pap, CPAP) and utilize ABGs plus other diagnostic tests to evaluate a patient's ventilation status. See Blackboard for supplemental websites and articles.
6. Evaluation: Exams

**WEEK 6**  
**NURSING MANAGEMENT: SHOCK**

OBJECTIVES

1. Relate the pathophysiology to the clinical manifestations of the different types of shock: cardiogenic, hypovolemic, distributive, and obstructive.
2. Compare and contrast the effects of shock and sepsis on the major body systems.
3. Compare the collaborative care, drug therapy, fluid therapy, and nursing management of patients experiencing sepsis and the different types of shock.
4. Discuss the principles and nursing management of the patient receiving hemodynamic monitoring, specifically arterial and CVP (central venous pressure) lines.
5. Compare and contrast the effects of sepsis and systemic inflammatory response syndrome (SIRS) on the body systems. Identify drug therapy, fluid therapy, and nursing management of the septic and SIRS patient.
6. Identify common problems and the collaborative care of the critically ill patient.

Learning Activities

1. Pre-Class Assignment: Read Lewis, Chapter 66 (pgs.1600-1610) & Chapter 67 (pgs. 1631-1653). Watch Tegrity recording of Shock prior to Respiratory-Shock Simulation
2. Review readings from pharmacology textbook.
3. Attend Respiratory-Shock Simulation.
4. Attend or present at PICO Presentations
5. Evaluation: Exams

**WEEK 7**  
**NURSING MANAGEMENT: BURNS**

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OBJECTIVES

1. Explain the causes and prevention strategies related to burn injuries.
2. Apply the parameters used to determine the severity of burns.
3. Compare the pathophysiology, clinical manifestations, complications, and nursing and collaborative management throughout the three burn phases.
4. Compare the fluid and electrolyte shifts during the emergent and acute burn phases.
5. Compare the various burn wound care techniques and surgical options for partial-thickness versus full-thickness burn wounds..
6. Examine the various physiologic and psychosocial aspects of burn rehabilitation.

Learning Activities

1. Pre-Class Assignment: Read Lewis, chapters 25, (pgs. 450-473). Watch Tegrity recording of Burns prior to Renal Burn Simulation.
2. Review readings from pharmacology textbook.
3. Attend Renal Burn Simulation.
4. Evaluation: Exams

**WEEK 8**  
**NURSING MANAGEMENT: ACUTE RENAL INJURY AND CHRONIC KIDNEY DISEASE**

**OBJECTIVES**

1. Differentiate between acute kidney injury and chronic kidney disease.
2. Identify criteria used in the classification of acute kidney injury using the acronym RIFLE (Risk, Injury, Failure, Loss, End-stage kidney disease).
3. Describe the clinical course of acute renal injury.
4. Explain the collaborative care and nursing management of a patient with acute kidney injury.
5. Define chronic kidney disease and delineate its five stages based on the glomerular filtration rate (GFR).
6. Select risk factors that contribute to the development of chronic kidney disease.
7. Summarize the significance of cardiovascular disease in individuals with chronic kidney disease.
8. Explain the conservative collaborative care for and the related nursing management of the patient with chronic kidney disease.
9. Differentiate among renal replacement therapy options for individuals with end-stage renal disease.
10. Compare and contrast nursing interventions for individuals on peritoneal dialysis and hemodialysis.
11. Discuss the role of nurses in the management of individuals who receive a kidney transplant.

**Learning Activities**

1. Pre-Class Assignment: Read Lewis, Chapter 47 (pgs. 1101 – 1132). Watch Tegrity recording of Acute Renal Injury and Chronic Renal Disease prior to Renal Burn Simulation
2. Review readings from pharmacology textbook.
3. Attend Renal Burn Simulation.
4. Evaluation: Exams

**WEEK 9**  
**NURSING MANAGEMENT: ENDOCRINE PROBLEMS**

**OBJECTIVES**

- 1.. Examine the pathophysiology, clinical manifestations, collaborative care, and nursing management of the patient with an imbalance of hormones produced by the anterior and posterior pituitary gland.
2. Explain the pathophysiology, clinical manifestations, collaborative care, and nursing management of the patient with thyroid dysfunction.
3. Describe the pathophysiology, clinical manifestations, collaborative care, and nursing management of the patient with an imbalance of the hormone produced by the parathyroid glands.
4. Identify the pathophysiology, clinical manifestations, collaborative care, medication therapy, and nursing management of the patient with an imbalance of hormones produced by the adrenal cortex and adrenal medulla.
5. Describe the collaborative care and nursing management of glucose levels in both the hospitalized and critically ill patient.

**Learning Activities**

1. Pre-Class Assignment: Read Lewis, Chapter 48 (pgs. 1134-1151) & Chapter 50 (pgs. 1189-1217) Watch Tegrity recording of Endocrine Problems
2. Review readings from pharmacology textbook.
3. Evaluation: Exams



**WEEK 10**  
**NURSING MANAGEMENT: ACUTE INTRACRANIAL PROBLEMS**

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OBJECTIVES

1. Explain the physiologic mechanisms that maintain normal intracranial pressure.
2. Describe the common etiologies, clinical manifestations, and collaborative care of the patient with increased intracranial pressure
3. Describe nursing management of the patient with increased intracranial pressure.
4. Differentiate types of head injury by mechanism of injury and clinical manifestations.
5. Describe the collaborative care and nursing management of the patient with a head injury.
6. Compare the types, clinical manifestations, and collaborative care of brain tumors.
7. Discuss the nursing management of the patient with a brain tumor.
8. Describe the nursing management of the patient undergoing cranial surgery.
9. Differentiate among the primary causes, collaborative care, and nursing management of brain abscess, meningitis, and encephalitis.

**NURSING MANAGEMENT: STROKE**

OBJECTIVES

1. Describe the incidence of and risk factors for stroke.
2. Explain mechanisms that affect cerebral blood flow.
3. Compare and contrast the etiology and pathophysiology of ischemic and hemorrhagic strokes.
4. Correlate the clinical manifestations of stroke with the underlying pathophysiology.
5. Identify diagnostic studies performed for patients with strokes.
6. Differentiate among the collaborative care, drug therapy, and surgical therapy for patients with ischemic strokes and hemorrhagic strokes.
7. Describe the acute nursing management of the patient with a stroke.
8. Describe the rehabilitative nursing management of a patient with a stroke.
9. Explain the psychosocial impact of a stroke on the patient and the family.

Learning Activity

1. Pre-Class Assignment: Read Lewis, Chapter 57 (pgs.1356 – 1387) and Chapter 58 (pgs 1388-1412). Watch Tegrity recording of Acute Intracranial Problems and Stroke.
2. Review Standards of care for neurological disorders at external link site on blackboard site or at <http://www.aann.org/pubs/guidelines.html>
3. Review readings from pharmacology textbooks.
4. Complete NIHSS Training
5. Attend Neuro Speaker during Week 11.
6. Attend Neurological Simulation Lab during Week 12
7. Evaluation: Exam

**WEEK 11**  
**NURSING MANAGEMENT: CHRONIC NEUROLOGIC PROBLEMS**

OBJECTIVES

1. Differentiate the etiology, clinical manifestations, diagnostic studies, collaborative care, and nursing management of seizure disorder, multiple sclerosis, Parkinson's disease and myasthenia gravis.
2. Explain the potential impact of chronic neurologic disease on physical and psychological well-being.
3. Outline the major goals of treatment for the patient with a chronic, progressive neurologic disease.

Learning Activities

1. Pre-Class Assignment: Read Lewis- Chapter 59 (pgs. 1413-1442) Watch Tegrity recording of Chronic Neurological Problems prior to Neurological Lab.
3. Review readings from pharmacology textbook
4. Participate in Neurological Simulation Lab.
5. Evaluation: Exams

**NURSING MANAGEMENT: PERIPHERAL NERVE AND SPINAL CORD PROBLEMS**

OBJECTIVES

1. Explain the etiology, clinical manifestations, collaborative care, and nursing management of trigeminal neuralgia and Bell's palsy.
2. Explain the etiology, clinical manifestations, collaborative care, and nursing management of Guillain-Barre syndrome.
3. Describe the classification of spinal cord injuries and associated clinical manifestations.
4. Describe the clinical manifestations, collaborative care, and nursing management of neurogenic and spinal shock.
5. Relate the clinical manifestations of spinal cord injury with the level of disruption and rehabilitation potential.
6. Describe the nursing management of the major physical and psychologic problems of the patient with a spinal cord injury.

Learning Activities

1. Pre-Class Assignment: Read Lewis-Chapter 56 (pgs 1335-1355) & Chapter 61 (pgs 1463-1488.) Watch Tegrity recordings of peripheral nerve and spinal cord problems prior to lab.
2. Review Standards of care for neurological disorders at external link site on blackboard site or at <http://www.aann.org/pubs/guidelines.html>
3. Review readings from pharmacology textbook.
4. Attend/ Present PICO presentations.
5. Evaluation: Exams

**WEEK 12**  
**NURSING MANAGEMENT: INFECTION AND HUMAN IMMUNODEFICIENCY VIRUS (HIV)**

**OBJECTIVES**

1. Evaluate the impact of emerging and reemerging infection on health care.
2. Identify ways to decrease the development of resistance to antibiotics.
3. Explain the ways human immunodeficiency virus (HIV) is transmitted and the spectrum of untreated HIV infection.
4. Describe the pathophysiology and methods used to test for HIV.
5. Identify the diagnostic criteria for acquired immunodeficiency syndrome (AIDS).
6. Summarize the characteristics of opportunistic diseases associated with AIDS.
7. Describe the potential complications associated with the treatment of HIV infection.
8. Compare and contrast HIV prevention methods.
9. Discuss the collaborative and nursing management of HIV-infected patients and HIV-at-risk patients.

**NURSING MANAGEMENT: ARTHRITIS AND CONNECTIVE TISSUE DISEASES**  
**OBJECTIVES**

1. Compare and contrast the sequence of events leading to joint destruction in osteoarthritis and rheumatoid arthritis.
2. Detail the clinical manifestations, collaborative care, and nursing management of osteoarthritis and rheumatoid arthritis.
3. Describe the pathophysiology, clinical manifestations, and collaborative care of septic arthritis, Lyme disease, and gout.
4. Differentiate the pathophysiology, clinical manifestations, collaborative care, and nursing management of systemic lupus erythematosus, and Scleroderma.
5. Explain the drug therapy and related nursing management associated with arthritis and connective tissue diseases.
6. Compare and contrast the possible etiologies, clinical manifestations, and collaborative and nursing management of, fibromyalgia syndrome, and chronic fatigue syndrome.

**Learning Activities.**

1. Pre-Class Assignment: Read Lewis, Chapter 15 (pgs. 226– 246) & Chapter 65 (pgs. 1561–1595). Watch Tegrity recording of HIV, Arthritis, & Connective Tissues Diseases.
2. Review readings from pharmacological text.
3. Attend or present at PICO Presentations.
4. Evaluation: Exams

**NURSING MANAGEMENT: MUSCULOSKELETAL TRAUMA AND ORTHOPEDIC SURGERY**

OBJECTIVES

1. Differentiate among the etiology, pathophysiology, clinical manifestations, and collaborative care of soft tissue injuries, i.e. strains and sprains.
2. Relate the sequential events involved in fracture healing.
3. Compare closed reduction, cast immobilization, open reduction, and traction regarding purpose, complications, and nursing management.
4. Summarize the neurovascular assessment of an injured extremity.
5. Explain common complications associated with fracture and fracture healing.
6. Describe the collaborative care and nursing management of patients with specific fractures.
7. Describe the indications for and the collaborative care and nursing management of the patient with an amputation.
8. Describe the types of joint replacement surgery associated with arthritis and connective tissue diseases.
9. Identify the preoperative and postoperative management of the patient having joint replacement surgery.

**NURSING MANAGEMENT: MUSCULOSKELETAL PROBLEMS**

OBJECTIVES

1. Describe the pathophysiology, clinical manifestations, collaborative care, and nursing management of osteomyelitis.

Learning Activities

1. Pre-Class Assignment: Read Lewis, Chapter 63 (pg 1505-1538) and Chapter 64 (pgs 1539-1560). Watch Tegrity recording of Musculoskeletal Problems 1&2
2. Review readings from pharmacology textbook.
3. Review Musculoskeletal Case Study in Blackboard (found in PICO Presentations tab)
3. Attend or present at PICO Presentations
4. Evaluation: Exams

## WEEK 14

### NURSING MANAGEMENT: LIVER, PANCREAS, AND BILIARY TRACT PROBLEMS

#### OBJECTIVES

1. Identify the etiologies, clinical manifestations and differing diagnostic findings for the various classifications of jaundice.
2. Differentiate among the types of viral hepatitis, including etiology, pathophysiology, clinical manifestations, complications, collaborative and nursing care.
3. Describe the pathophysiology, clinical manifestations and complications of autoimmune, genetic and metabolic diseases of the liver, pancreas and biliary tract.
4. Explain the etiology, pathophysiology, clinical manifestations, complications, and collaborative care of the patient with cirrhosis of the liver.
- 5.. Differentiate between acute and chronic pancreatitis related to the pathophysiology, clinical manifestations, complications, and collaborative care.
6. Describe the nursing management of the patient with pancreatitis.
7. Describe the pathophysiology, clinical manifestations, complications, and collaborative care, including surgical therapy of gallbladder disorders.
- 8.. Describe the nursing management of the patient undergoing conservative or surgical treatment of cholecystitis and cholelithiasis.

### NURSING MANAGEMENT: OBESITY

#### OBJECTIVES

1. Discuss the epidemiology and etiology of obesity.
2. Compare the classification systems for determining a person's body size.
3. Explain the health risks associated with obesity.
4. Discuss the nutritional therapy and exercise plans for the obese patient.
5. Describe the different bariatric surgical procedures used to treat obesity.
6. Describe the nursing management related to conservative, pharmacologic, and surgical therapies for obesity.
7. Describe the etiology, clinical manifestations, and nursing and collaborative management of metabolic syndrome.

#### Learning Activities

1. Pre-Class Assignment: Read Lewis, Chapter 41 (pgs 906-923) & 44 (pgs 1006 – 1043). Watch Tegrity recording of Liver, Pancreas and Biliary Tract Problems and Obesity.
2. Review readings from pharmacology textbook.
3. Review PICO case studies: Pancreatitis and Cirrhosis and attend/present at PICO presentations
5. Complete ATI testing
6. Evaluation: Exams

## 10.0 CLINICAL COMPONENT

### 10.1 OVERVIEW OF CLINICAL EXPECTATIONS

The clinical component of this course consists of 112.5 hours of clinical time within an acute care facility and skills/simulation labs. To receive a satisfactory score within the clinical component of the course, the student must achieve a score of 2 or 3 in all areas of the clinical evaluation tool. Please refer to the clinical objectives and the clinical evaluation tool and Guidelines for clinical evaluation sections of the clinical syllabus.

Clinical experiences may vary between groups, but each student's total hours must equal 112.5. These hours are divided differently between clinical groups.

**Clinical days (acute care and skills/simulation labs)** –You are not allowed to miss a scheduled clinical day or lab. In case of true emergency, you and your clinical instructor will schedule make-up time/assignment. Please notify the Charge Nurse on the designated unit prior to the start of the missed scheduled clinical day. You must notify the unit 2 hours prior to the start of the clinical. You must also contact your clinical instructor prior to the missed clinical/simulation lab. Your clinical instructor will inform you of the preferred route of communication

Failure to complete 112.5 clinical hours will result in a failure in the clinical portion of NURS4632. The student must successfully complete both didactic and clinical portions to pass the course. Unexcused clinical absences may result in a clinical failure.

Skills/Simulation Lab Experiences: Students will meet for skills lab clinical experiences as announced by their clinical instructor and on the calendar posted under blackboard. This time will be used to encourage critical thinking through use of case studies, to provide time for student presentations, practice of skills with simulations, and other learning opportunities. **Attendance at skills lab experiences are mandatory, and plans should be made to be on time for these experiences.** You are required to sign in at all skills labs. There are no make- up skills lab days, so missed time will occur in the hospital with a paper due for each skills lab missed related to the content area.

**10.1 CLINICAL OBJECTIVES:**

Upon completion of the course, the student will:

**A. PROVIDER OF CARE**

1. Assess the adult patient with medical-surgical conditions for health status and health needs.
2. Identify actual and potential problems for the adult patient based on assessment data.
3. Formulate an individualized plan of care with appropriate interventions and patient outcomes for the adult patient.
4. Implement nursing actions that are based on current theory and research.
5. Evaluate the effectiveness of nursing interventions in meeting the expected outcomes.
6. Revise the plan of care when the expected outcomes are resolved or not met.

**B. COORDINATOR OF CARE**

7. Coordinate comprehensive care for a minimum of four patients with medical-surgical conditions through collaboration with the individual, family, and other health care providers, utilizing critical decision-making and time management skills.

**C. MEMBER OF THE PROFESSION**

8. Demonstrate responsibility and accountability for own actions.
9. Abide by the laws and standards designated by the University of Texas at Tyler College of Nursing, Texas State Board of Nurse Examiners, and the ANA Code of Ethics.
10. Project a professional image by adhering to the dress code and meeting the attendance requirements.

**D. COMMUNICATION**

11. Document in a comprehensive, organized, and clearly stated manner the nursing care delivered.
12. Communicate with the clinical faculty and other health care providers regarding patient status.
13. Establish effective working relationships with clinical faculty, facility personnel, peers, patients, and patient's families.

**E. SAFETY**

14. Provide safe care by accurately administering medications in real and simulated situations.
15. Accurately identify safety risks and appropriately intervene to provide a safe patient and family environment.

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

## **10.2 Clinical assignments:**

For this course, the following assignments will be required:

### **a. Successful completion of medication calculation exam**

#### **Medication Calculation Policy**

1. Students are required to achieve a 90 or higher on the medication calculation exam prior to the first clinical day. Students are permitted two (2) attempts for success on the exam.
2. Students who are unsuccessful on the first attempt of the medication 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 College of Nursing.
4. Medication 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 medication 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.

**b. Successful completion of *Clinical Care Plan (CCP)*.** A minimum of 75 points must be achieved on the CCP. The paper will be graded according to the Grading Criteria. No "redos" or revisions will be allowed. If a grade of 75 is not achieved, the student will resubmit with changes reflecting a passing grade. The highest grade for resubmission is 75. If the student does not receive a 75 on the resubmitted CCP, they will fail NURS4632.

**c. *PICO Presentation*** - Each student is to take an active leadership role in coordinating and directing the learning of others in his or her clinical groups. Their clinical instructor will provide the student with a case study. Student groups will need to develop the case study into a presentation /demonstration format. In addition, the group must expand the case study by developing one EBP question and will need to include one nursing research based or EBP articles to support/refute their EBP question.

**d. Submit 25 NCLEX questions each week for a total of 350 questions for the semester.**

**e. Completion of the ATI Adult Medical Surgical Nursing Exam.**



### **10.3 Student accountability in special situations**

1. Students are not allowed to:
  - a. take verbal or telephone orders from physicians
  - b. transcribe or note physician's orders
  - c. witness operative permits
  - d. administer blood transfusions

\*\*\* Students are expected to seek experiences where they may observe blood administration and assist with assessment of the patient and procedure.
2. Students must be supervised by a staff nurse or by the clinical instructor to:
  - a. perform IV-related procedures, including IV saline flushes, IV starts, IVPB, and IV pushes.
  - b. sign out narcotics (requires co-signature)
3. In Code 44 situations students may perform CPR only.
4. Students must wear full UTT Students Uniforms to all clinical experiences. (See Dress Code Requirements)
5. Students **are expected to appropriately** identify situations in which the presence of the preceptor/clinical instructor is necessary for student learning and/or patient safety, and to call their preceptor/instructor as necessary.
6. It is recommended that the primary nurse review all medications before a student administers them.
7. No medication will be given unless the student has established the 5 rights of medication administration: Right Patient, Right Time, Right Route, Right Dose, and Right Medication. The student must use 2 patient identifiers (Joint Commission requirement) when administering medications, and visibly check armband accuracy
8. Students should refer to facility clinical policy and procedure manuals as part of your practice development and learning.

#### **Unsafe Clinical Performance:**

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. During the clinical practicum, unsafe clinical practice is defined as any one of the following:

When the student:

1. Commits repetitive and/or a single, serious medication error.
2. Violates or threatens the physical, psychological, microbiological, chemical, or thermal safety of the patient.
3. Violates previously mastered principles/learning objectives in carrying out nursing care skills and/or delegated medical functions.

4. Assumes inappropriate independence in action or decisions.
5. Does not adhere to current CDC guidelines for infection control.
6. Fails to recognize own limitations, incompetence, and/or legal responsibilities.
7. Fails to accept moral and legal responsibility for his/her own actions thereby violating professional integrity as expressed in the Code for Nurses.
8. Arrives at clinical settings 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