**Kettering College**

**NRSB 361 Theory: Alterations in Adult Health I**

**Fall 2017**

**Course Number:**  NRSB 361 Section 01

**Course Title:**  Theory: Alterations in Adult Health I

**Course Location & Time:**  Thursdays: 0830-1120 in L-20

**Faculty Facilitators:** Name: Melinda Hopkins, MSN, RN

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 Name: Joan Ulloth, PhD, RN, CNE

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**Course Description:**

Integrates nursing concepts to provide Christian caring for multiple patients experiencing acute health alterations. Emphasis is placed on theoretical application of analysis and synthesis of patient data and use of nursing judgment to formulate, implement, and evaluate outcomes for a whole-person plan of care.

**Credit Hours**: 3 credit hours: 3 theory, 0 clinical, 0 lab (45 clock hours, 0 clock hours, 0 clock hours)

**Prerequisites**: Successful completion NRSB 341, NRSB 351, MATH 215

**Corequisites:** NRSB 362, NRSB 371, NRSB 381

**Institutional Outcomes:** Kettering College’s institutional learning outcomes represent the knowledge, skills, and attitudes fostered within the Kettering College experience to enable students to be successful in their personal and professional lives, in their future educational efforts, and as engaged members of their communities. (**IO = Kettering College Institutional Outcome)**

**Nursing End of Program Student Learning Outcomes:** This course helps to develop the following outcomes:

1. Synthesizes knowledge from the arts and sciences and from nursing theory, practice, and evidenced-based research to provide and to manage the health care needs of diverse community populations, patients, and families across the continuum of health care.
2. Uses professional nursing judgment, informed by Christian principles, moral and ethical reasoning, professional nursing standards, and evidence-based practice to promote health, prevent disease, and provide safe, competent, whole-person nursing care across the continuum of health care.
3. Is a compassionate and conscientious nurse who serves humanity and the profession of nursing in the spirit of Christian caring.
4. Uses written, verbal, non-verbal, and emerging technological methods to communicate effectively in the provision, management, and coordination of health care across the life span.
5. Designs care based upon an understanding of how regulatory policies, economic, political, and socio-cultural forces directly and indirectly influence the health care system and professional nursing practice.
6. Engages in learning-centered experiences that promote lifelong personal and professional growth within the scope of baccalaureate nursing practice

 (SLO = END OF PROGRAM STUDENT LEARNING OUTCOME)

**Course Learning Outcomes:** At the successful completion of the course, the student will be able to:

1. Integrate pharmacological, nutritional and fluid/electrolyte principles into the plan of care of adult medical-surgical patients experiencing health alterations. (SLO1) (IO B)
2. Use the nursing process to develop an evidence-based whole person plan of care for adult medical-surgical patients experiencing health alterations. (SLO2, 8) (IO A, IO I)
3. Discuss priorities of nursing care for adult medical-surgical patients experiencing acute health alterations. (SLO2) (IO A)
4. Exhibit professionalism and Christian caring in all interactions with faculty, peers, and populations. (SLO3) (IO C)
5. Discuss the physiological, psychosocial, sociocultural, and spiritual impact of acute health alterations affecting adult medical-surgical patients. (SLO7) (IO I)
6. Design individualized teaching plans for adult medical-surgical patients experiencing acute health alterations. (SLO4) (IO A)
7. Differentiate between acute and chronic health alterations when developing a while person plan of care. (SLO2) (IO A)
8. Use technology to support evidence-based information gathering related to theoretical concepts within the course. (SLO7) (IO I)
9. Integrate understanding of legal and ethical implications into planning of whole person care for adult medical-surgical patients.

(SLO7) (IO C)

**Course Materials:**

**Textbooks:**

* 1. Assessment Technologies Institute. (2016). RN Adult Medical Surgical Nursing (10th

ed.). Leewood, KS: Assessment Technologies Institute.

* 1. Cummins, D. & Reed, M. (2015). *Creation health discovery: Your path to a healthy 100*.

 Orlando, Florida: Florida Hospital Publishing

* 1. D’Amco, D. & Barbarito, C. (2012). *Clinical pocket guide for health and physical assessment in nursing* (2nd ed.). Upper Saddle River, New Jersey: Pearson Education, Inc.
	2. Ignatavicius, D. D. & Workman, M. L.(2016). *Medical-surgical nursing: Patient-*

*Centered collaborative care* (8th ed.). St. Louis: Elsevier.

* 1. Kee, J. (2014). *Laboratory and diagnostic tests with nursing implications* (9th ed.).

Upper Saddle River, New Jersey: Pearson Education, Inc.

* 1. Lilley, L. L., Collins, S. R., Harrington, S., & Synder, J. S. (2017). *Pharmacology and the nursing process* (7th ed.). St. Louis: Mosby.
	2. VandenBos, G. R.. (2010).*Publication Manual of the American Psychological Association* (6th ed.). Washington D.C.: American Psychological Association

**PDA or Smartphone with Mobile Software References** from Skyscape:

* Nursing Constellation Plus
* Nurses Pocket Guide: DX Prioritized Interventions and Rationales

 **iClicker2 Response System:** see Technical Needs for the course.

**Attire:** Follow KC dress code for theory as outlined in the KC Student Handbook.

**Attendance:**

KC faculty believes learning is a combination of individual study as well as engagement with others in a structured learning environment. Therefore, KC faculty expects students to meet their academic obligations in a professional, responsible and timely manner. Communication and planning are the keys to success in the Nursing Program. Active participation is essential and students are expected to be present for all course activities. Lack of attendance in educational experiences will compromise the learning process regardless of the type of absence.  With this understanding, students are expected to exercise professional judgment in handling absences, which should only occur in the presence of unforeseen emergencies.

**Late/Missing Work:**

Students are expected to submit assignments on time. Please ask for clarification if you do not understand or realize certain circumstances may preclude you from completing assigned work on time. Alternate arrangements for submitting assignments and fulfilling course requirements will be handled on an individual basis by course faculty. Students are expected to provide notification of absence to the appropriate faculty prior to the absence. It is the student’s responsibility to provide and make suitable arrangements with the appropriate faculty before the assignment is due. Late assignments will be graded according to timeliness criteria on the assignment’s attached grading rubric. A written assignment submitted more than 1 week following the due date will result in a zero for the missed course work. An “incomplete” grade for the course will not be given for late or missing assignments.

**Policy for Missed Exams/Quizzes:**

* Missed exams will be made up only with prior notification and approval of course faculty and will likely be a different examination covering the same test content.
* The student will be expected to schedule a make-up test or quiz within 3 days and completed within one week of the student’s return to school.

**Extra credit**

Extra credit is not available in any NRSB course at Kettering College.

**Withdrawal**

The last day to withdraw from the course with a grade of WP or WF is **Monday, November 20, 2017.**

Your participation in this course indicates your acceptance of its content, requirements and policies as outlined in this syllabus. Please review the syllabus and course requirements promptly. If you believe you will not be able to meet the demands and requirements of this course, you should drop the course by the drop/add deadline, listed on the calendar for the current academic semester.

**Technical Requirements:**

This course follows the technical requirement of Kettering College. For further information see <http://kc.edu/campus-resources/it-department/technology-requirements-students/>. Students must have the program required technological hardware and software and access to the internet.

The user of email, iClickers, and Canvas is also required for all NRSB courses in the BSN-prelicensure program. Specific information can be found by visiting the “student” section of the Kettering College IT and Help Desk website located at <http://sites.google.com/site/kcithelpdesk/> and accessing the links below:

 **Email:** Click on “All about your Computer Accounts”

* Students are expected to have an active “@my.kc.edu” email account, and to check it at least once daily for emails, updates, and announcements.

**i>clicker2:** Click on “iClicker information”

**Canvas:** Click on “Canvas Quick-Start Guides”

**Expectations:** Per the KC Academic Bulletin, “Students are assumed to have computer skills. Students will be expected to use the Internet for coursework.”

**Technical Issues**:

The Help Desk can provide further information or assistance with computer issues.

**KC Information Technology Help Desk**

Open from 8:00 a.m. to 4:30 p.m. weekdays when school is in session.

Phone (either voice or text): (937) 203-8303

Email: kcithelpdesk@gmail.com

Twitter: [@KCITHelpDesk](https://twitter.com/#%21/kcithelpdesk)

Instant Messenger: Google Talk: add kcithelpdesk to your contacts. If you don't have an IM client installed you can use [iLoveIM.com](http://www.iloveim.com/).

**Nursing Student Handbook:**

Students will be held accountable for all policies and procedures in the current “Nursing Student Handbook” located in Canvas

**Copyright Policy:**

Kettering College’s values and respects the laws that govern the creation and distribution of intellectual property (copyright) and the rights of members of the academic community to use such intellectual property (fair use). It is the expectation of the administration of Kettering College that students will be familiar with these laws and use copyright protected works in accordance with the law.

**Methods of Assessing Learner Progress:**

A variety of learner-centered methods and assignments used in this course include, but are not limited to: discussion, individual projects, team work, reading assignments, professional paper writing, personal reflection, internet assignments, and media supplementation. Emphasis will be placed on learning where student participation is essential. This course is based on adult learning-centered principles; therefore, much of the course learning will depend on your contribution. While it is expected that each student will perform individual work and study, this course is not designed to be independent study. We believe each student has experiences, thoughts, and ideas that when shared with others contribute to an enriching learning experience for all.

The division of nursing faculty desires to partner with you for your success. As adult learners, students will be assessed through various methods including, but not limited to, contribution in class and group work, written assignments, discussion forums, peer review, and examinations. All assignments as indicated below must be completed to successfully meet the course requirements.

|  |  |  |
| --- | --- | --- |
| **Assignment Categories**  | **Total Category Weight/Points = 380** | Students are required to achieve an average of 77% to achieve a passing grade to meet minimum course requirements.For this course, the student must achieve 293 overall points. |
| Assignments\* | Total = 80 points |  |
| * Multimedia Presentation
* Medication PowerPoint
* Reflection paper on passport/service learning
* Wound Care Documentation Activity
* iClicker Questions (9 at 1 point each)
* Fundamentals ATI
* Ticket to Class (9 total)
 | 40 points10 points10 points5 points9 points6 pointsComplete/Incomplete |  |
| Tests/Quizzes\* | Total = 300 points |  |
| * Quiz 1: Introduction
* Quiz 2 thru 4 at 10 points each
* Quiz 5: Pharmacology
* Targeted Medical-Surgical: Perioperative
* Test One: Module 1
* Targeted Medical-Surgical: Endocrine
* Test Two: Module 2
* Targeted Medical-Surgical: Gastrointestinal
* Test Three: Modules 3 and 4
* Targeted Medical-Surgical: Fluid, Electrolytes and Acid Base
* Final: Comprehensive
 | 15 points30 points 25 points2 points48 points2 points48 points2 points48 points2 points78 points | Each Targeted Medical-Surgical assignment that is completed AND submitted prior to the corresponding unit exam with a **FIRST –TIME** grade of 77% or higher will count as 2 points on the unit exam. **Scores below 77% or achieved after the unit exam will not be counted on the unit exam.** |

\* see Canvas for specific information on assignments.

 **Final Course Grade:**

1. The final grade for the NRSB 361 course will be the theory grade.
2. Any one of the following constitutes a course failure in nursing:
	1. A grade below C (77%) in any nursing course.
	2. An unsatisfactory clinical grade.
	3. Withdrawing under condition 2a or 2b.
3. Students are required to achieve an average of 77% overall to achieve a passing grade in the course.
4. To remain in the nursing program, students must achieve a minimum grade of C in all courses required for the BSN degree in semesters 4, 5, 6, 7, and 8.

**Grading Scale:**

A = 94 – 100 B+ = 87 – 89 C+ = 79 – 80 D = 66 – 74

A- = 90 – 93 B = 84 – 86 C = 77 – 78 F = Below 66

B- = 81 – 83 C- = 75 - 76

**Writing Assignment notes:**

* Students will be expected to use the KC Writing Center. Faculty may use TurnItIn on writing assignments.
* Students will be expected to use APA format for all papers/projects as assigned.
* Computer skills include proficiency in the Microsoft Windows environment that includes word processing, spreadsheets, and Power Point presentations Students will be required to submit assignments in one of the following formats. Other formats will not be accepted.
* .doc or .docx (Word file)
* .xls or .xlsx (Excel file)
* .ppt or .pptx (Power point file)

**Grading Notes:**

* Grades will be posted in Canvas in approximately 24 hours following tests/quizzes unless there is a holiday, etc. Group project grades will be posted on Canvas within approximately one week.
* Grades will not be rounded.
* Any student with a test score of 80 and below is expected to make an appointment with the faculty member for test review.
* Tests/quizzes may be reviewed individually with a full time NRSB 361 faculty member by appointment or during office hours after grades have been posted.

**Course Content:**

The Canvas Voluntary Product Accessibility Template (VPAT) outlines the Canvas’ conformance with the accessibility standards under Section 508 of the Rehabilitation Act. It can be found under <http://www.instructure.com/canvas-vpat>

**Syllabus change policy:**

This syllabus is a guide and every attempt is made to provide an accurate overview of the course. However, circumstances and events may make it necessary for the instructor to modify the syllabus during the semester and may depend, in part, on the progress, needs and experiences of the students. Changes to the syllabus will be made with advance notice.

**Americans with Disabilities Statement & Non-Discrimination/Academic Support Statement:**

KC is committed to promoting student academic success by complying with the Americans with Disabilities Act (ADA), and will provide reasonable accommodations for those students supplying appropriate documentation.

The Nita Jennings Academic Support Center in the Learning Commons is the designated office on campus to provide services and accommodations to students with diagnosed disabilities. You need to provide documentation of your disability to the Academic Support Center if you seek accommodations in this course. Students are strongly encouraged to contact the academic support coordinator to request specific accommodations at least two weeks in advance of the need. The coordinator will arrange necessary internal support and facilitate referral to external resources, as appropriate. Refer to the current KC Student Handbook for specific information.

It is the student’s responsibility to notify the instructor and the Academic Support Coordinator regarding accommodations (See Student Handbook). In addition, the Academic Support Center strives to empower all students do develop effective strategies for learning and offers peer tutoring, group tutorials and private consultation.

Your success as a student is of utmost importance to us. If you have a disability or any other special circumstance that may have some impact on your work in this class, and for which you may require special accommodations, please contact me early in the semester so that accommodations can be made in a timely manner.

**Honor Code: Academic Integrity & Professional Conduct for Undergraduate and Graduate Students:**

Honor Code: An atmosphere of academic integrity can be successfully preserved only when students and faculty unite in mutually supportive acts of trust and assistance. They share equally the obligation to create and promote ethical standards. It is the faculty’s duty to uphold academic standards in both the classroom and the clinical settings and to ensure that students receive credit only for their own work; instructors will take any reasonable precautions necessary to achieve these goals. Students are expected to join faculty members in maintaining an honorable academic environment. They are expected to refrain from unethical and dishonest activities such as lying, plagiarism, cheating, and stealing and are expected to report others who engage in such activities. Failure to report the occurrence of academic dishonesty is also classified as dishonest behavior. Allegations that cannot be resolved by faculty members and students on an informal basis will be handled under disciplinary procedures. Students are to work independently on all assignments other than “group work”. Refer to the “KC Student Handbook” for full disclosure.

**Faculty Assistance Statement**:

Students are expected to be in contact regularly with their faculty regarding any academic issues of importance to the students, and specifically if they are experiencing any concerns or difficulty with their studies.

**Writing Center:**

Students are expected to consult with the KC writing center for assistance with their work. Information for the writing center may be found on Canvas and <http://kc.edu/writing-center>

 **Learning-Centered Class:**

Welcome to NRSB 361, a milestone in your journey toward reaching your academic goal. This course provides you with learning opportunities designed to enhance your understanding of current nursing issues and trends. A critical part of this learning process involves the integration of self-regulating behaviors and lifelong learning concepts into your professional role development.

You may be wondering what type of environment supports this kind of learning. Your faculty believes learning to be the center of this environment; an environment built upon trust, mutual respect, open communication, and shared responsibilities. This is called the learning-centered environment.

In a learning-centered course, you are engaged in activities that foster learning through discovery and critical reflection. These activities may take multiple forms, but all forms involve the element of participation. Some activities are completed outside of class in preparation for classroom discussion. Other activities are interactive and involve in-class cooperative and collaborative small group work. Regardless of the form the activity takes, the integration of prior learning into the acquisition of new learning is vital to this learning process.

Everyone in the learning-centered classroom, both student and faculty, are responsible and accountable for facilitating learning. A journey begins with a single step. Let the journey begin.

*“You cannot teach a man anything; you can only help him to discover it in himself.” – Galileo*

**Learning Experiences:**

A variety of learning methods may be used in this course including, but not limited to: presentations, discussion, individual and group projects and activities, case studies, micro-teaching, cooperative learning, simulations/role play, field observations, personal conferencing, critical summaries of professional journal articles, tests and quizzes, reflections/integration papers, diagnostic use of audio/video multi-media, reading assignments, internet assignments, guest speakers, service learning***,*** and media supplementation. Emphasis will be placed on learning and students are required to participate and contribute.

**Keeping Your Coursework:**

You will have access to the course and your coursework beginning with the start date and for two weeks after the course ends. After this time, you will not be able to access the course or related materials. For this reason, it is strongly recommended that you save copies of your completed assignments along with any learning objectives or other documents you wish to keep. Kettering College and faculty are not responsible for lost or missing coursework at any time during or after the course.

**Nursing Statement on Professionalism:**

Your nursing faculty believe it is essential that all persons preparing to enter and practicing the profession of nursing conduct themselves in a professional manner. Racial, ethnic, cultural, experiential, and generational differences are to be respected in all aspects of nursing including the academic setting. Standard one of the American Nurses Association Code of Ethics states: “The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems”. Professional conduct is an expectation in the classroom and clinical setting. **Reference:** [http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsfor Nurses/Code-of-Ethics.pdf](http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsfor%20Nurses/Code-of-Ethics.pdf)

**Review concepts from previous learning:**

* Professionalism –
* Anatomy and physiology BIOL 119 and 129
* Chemistry – CHEM 105
* MATH 105 and 215
	+ Dosage Calculations
	+ Statistics
* Pathophysiology – BIOL 151
* Critical thinking, clinical reasoning, clinical judgment –
* Assessment (hard and soft skills) –
* Caring Interventions –
* Teaching and Learning –
* EBP –
* Legal issues –
* Nutrition
* Pharmacology - Pharmacological principles (rights including documentation and teaching), medication administration, and medications
* Cultural Diversity -
* Health Promotion, Wellness, and Illness -
* Healthcare team members’ roles and functions -
* Principles of documentation
* Legal and Ethical Principles/Frameworks
* Communication –
* Collaboration –
* Safety -
* Mental Health Nursing Concepts
	+ Therapeutic Milieu
	+ Conflict Management
	+ Crisis intervention
* Community Nursing Concepts
	+ Assessment
	+ Needs identification
	+ Needs prioritization
* Lifespan/Development -
	+ Developmental Theories and Principles
* Mental Health Nursing Concepts
	+ Therapeutic Milieu
	+ Conflict Management
	+ Crisis intervention
* Community Nursing Concepts
	+ Assessment
	+ Needs identification
	+ Needs prioritization

**ATI Skills Modules you may wish to review:**

HIPAA

Pain Management

Nutrition

Foley Insertion

Dosage calculations

Medication administration 1, 2, 3 ,4

Pharmacology Made Easy

Surgical asepsis, wound care

**Medication PowerPoint Assignment**

Create a drug advertisement that might appear in a medical journal to be read by a health care provider. This is NOT a patient education document.

Each advertisement must be written on **ONE PowerPoint slide** and may contain colors, photos/videos, sounds, transitions, and links.

If you are paired up with someone, you must work together to include everything on **ONE slide**.

What would you want your reader to know so they would provide safe patient care for someone taking this medication?

**Required components one ONE slide:**

* Classification(s) and names of the drug(s)
* Actions/therapeutic uses
* Side effects/adverse reactions
* Contraindications/drug interactions- **be sure to include any black box warnings**
* Nursing precautions/implications
* Reference(s)

You may also include data from this link if the drug is biogenomically active.

<http://www.fda.gov/drugs/scienceresearch/researchareas/pharmacogenetics/ucm083378.htm>

Submit each advertisement to the drop box by the due date. These will be used as study tools by classmates. People assigned to each category are listed on the table below.

|  |  |
| --- | --- |
| **Due September 21** |  |
| Adams | 1. anesthetics: general inhaled- isoflurane (forane) |
| Adkins | 2. anesthetics: general IV- propofol |
| Appelbaum | 3. anesthetics: local- lidocaine |
| Bennett | 4. antiemetics: ondansetron (Zofran) |
| Bernadotte | 5. antiemetics: promethazine (Phenergan) |
| Bilinski | 6. Steroids: prednisone (Deltasone) |
| Burge, Chesaro | 7. Macrolides: Erythromycin, clarithromycin (Biaxin) |
| Chrisman | 8. Aminoglycosides: Neomycin,  |
| Chujutalli-Sandoval | 9. Antitussives: guaifenesin (Robitussin, Humabid) |
| Clemons | 10. Decongestants: phenylephrine (Ephedrine) |
| Corder | 11. Antihistamines: diphenhydramine (Benadryl) |
| D’Arrigo, A | 12. DMARDS: etanercept (Enbrel) |
| D’Arrigo, S, Datts | 13. analgesics: opioids: morphine; NSAIDS (aspirin, ibuprofen) |
| Daum | 14. DMARDS: abatacept (Orencia) |
| **Due by October 19** |  |
| Davis | 15. Thyroid medications: levothyroxine (Synthroid) |
| Delaberta, Djuzeu Wandji II | 16. Antithyroid medications: PTU, radioactive iodine |
| Dyer, Fanwar | 17. Insulins (Humalog, R, N, Lantus) |
| Finley, Garcia | 18. Sulfonylureas: Glucotrol (glipizide), micronase (Glyburide) |
| Golomski | 19. Biguanide: metformin (Glucophage) |
| Graham, Hancock | 20. Thiazolidinedione (TZD): rosiglitazone (Avandia) |
| Henderson | 21. Alpha- glucosidase inhibitor: Precose |
| Horrell | 22. Incretion mimetics: Byetta (axenatide) |
| Johnson, Jones, T | 23. Dipeptidyl Petidase IV (DPP4) inhibitors: sitaGLIPtin (Januvia) |
| Jones, A | 24. Amylin replacement: Symlin (pramlintide) |
| Keller, Switzer | 25. Sodium-Glucose Cotransporter 2 (SGLT2) Inhibitor: canagliflozin (Invokana) |
| Lawson, Tabron | 26. Glucagon-Like Peptide-1 (GLP-1) Receptor Agonist liraglutide (Victoza) |
| Liang | 27. Glucose |
| Loewen | 28. glucagon (GlucaGen) |
| Mack | 29. Steroids: fludrocortisone (Florinef) |
| **Due by November 16** |  |
| Mantia | 30. Antacids: aluminum hydroxide (Mylanta) |
| Martin, Sullivan | 31. H2 receptor blockers: ranitidine (Zantac), Axid |
| Michaelson, Strayer | 32. Proton Pump inhibitors: Prilosec, Nexium |
| Milnickel | 33. Protectant: sucralfate (Carafate) |
| Panjaitan, Younce | 34. Anticholinergics: dicyclomine (Bentyl) |
| Partida, Werstler | 35. 5-aminosalicylates: mesalamine (Asacol) |
| Reams, Warsaw | 36. 5-aminosalicylates: sulfasalazine (Azulfidine) |
| Reiterman, Walz | 37. Pancreatic enzymes: pancrelipase |
| Reynolds, Vordenberg | 38. Chloride channel activator: lubiprostone (Amitiza) |
| Roach | 39. monoclonal antibody: infliximab (Remicade) |
| **Due by December 7** |  |
| Rockey | 40. GABA analog: gabapentin (Neurontin) |
| Shakhmandarova, Z and F | 41. Anticoagulants: heparin, enaxaprin (Lovenox) |
| Shirimpumu, Traylor | 42. Antiplatelet: clopidogrel (Plavix) |
| Sihombing, Tolle | 43. Anticoagulant: Vitamin K Antagonist: warfarin (Coumadin) |
| Smith, Ting | 44. Anticoagulant: Direct Thrombin Inhibitor: dabigatran (Pradaxa) |
| Snow, Thies | 45. Anticoagulant: Factor Xa Inhibitor: rivaroxaban (Xarelto) |
| Spahr, Taw | 46. Thrombolytic: tissue plasminogen activator (TpA) altepase (Adivase) |
| Stevens | 47. Potassium supplement: potassium chloride (microK) |
| Stewart | 48. Calcium supplement: calcium chloride (Oscal) |

**Requirements for Group Presentation**

**Directions: Each group of students will develop a multi-media presentation about the assigned procedure and disorder. The presentation may be delivered as a video, Prezi, PowerPoint, role playing skit, or other creative method. ALL group members must participate in development and presentation of the project.
The 10 minute presentation will be given in class on the assigned date (check schedule). It will be evaluated by the class using the Group Presentation rubric below.**

1. Describe and show the procedure. Use weblinks such as <http://www.orlive.com/live-broadcasts>

2. Identify diagnostic labs or exams that indicate which patients are candidates for the procedure

3. Describe what preparation is needed prior to procedure: include physical, emotional, spiritual, legal, consent, and ethical.

4. Explain possible complications of doing (or not doing) the procedure.

5. Prioritize patient education that is needed.

6. Describe immediate and long-term post-procedure care. Include expected recovery time.

7. Provide a handout/brochure summarizing essential points from the presentation. **This must be sent to the class PRIOR to the presentation via CANVAS.**

**List of Presentation Topics (see schedule for due dates)**

1 THR for rheumatoid arthritis

2 Open reduction internal fixation for fracture

3 Thoracentesis for pleural effusion

4 Thyroidectomy for Addison’s disease

5 Adrenalectomy for Cushing's disease

6 EMG for diabetes

7 EGD for peptic ulcer disease

8 Laparoscopic appendectomy

9 ERCP for pancreatitis/gall stones

10 Ileostomy for Crohn's disease

11 Colon resection for diverticulitis

12 Endarterectomy for PAD

13 Stent placement for peripheral arterial disease

**Classroom Activity**

**Wound Documentation Assignment from Module 1**

1. Document a narrative note on your assigned picture.

2. Include the following EPIC components in your documentation:

 a. Location of body part

 b. Assessment: clean, dry, intact, bleeding, edema, color, condition of wound bed, etc.

c. Size: length and width of area of concern- describe the incision, and surrounding

 tissue

d. Assessment peri-wound tissue: color, edema, rash, excoriated, macerated, intact

e. Closure: approximated, dermabond, open to air, staples, steri-strips, mattress sutures,

 etc. Number of staples or sutures. Size and location of any non-approximated areas.

 f. Drainage amount

 None = Wound tissue dry

 Scant = Wound tissue moist, no measureable drainage

 Small = Wound tissues very moist, <25% drainage on dressing

 Moderate = Wound tissues wet, 25-75% drainage on dressing

 Large = Wound tissues filled with fluid, >75% drainage on dressing

Copious

g. Drainage description: (color and characteristics

Black, brown, clear, gray, rusty, etc.
Sanguineous = thin, bright red

Serosanguineous = thin, watery, pale red to pink

Serous = thin, watery, clear

Purulent = thick or thin, opaque tan to yellow

Foul Purulent = thick opaque yellow to green with offensive odor

 h. Dressing/Treatment

barrier film, cleansed, dry dressing, heat applied, hydrocolloid, ice applied, wet to dry, moisture barrier, etc.

 i. Dressing Intervention

 new dressing, changed, reinforced, removed

j. Dressing Status

 changed, dry, intact, new dressing, new drainage, occlusive, etc.

k. Drain: type, location, amount of drainage, description of drainage

3. Identify the top three nursing focus areas for this patient. Include all aspects of the nursing process to develop the plan of care. What are the nursing implications for each patient?

**Wounds**

1. left hip

2. right knee

3. lower legs

4. left foot

5. abdomen

6. right lower quadrant

7. left lower leg

8. right lower leg

9. descending colostomy

10. breast

11. central neck

12. lateral neck

13. left arm

14. right leg

**Passport/Service Learning Assignment**

**Directions: Select the passport or service activity of your choice and notify the faculty using the sign-up sheets posted. Attend the activity for at least 2 hours. Locate and read an article in a healthcare related journal that correlates with your activity. Write a reflection paper about the experience including answers to the questions below.**

 **Submit the paper as a WORD document (.doc, or .docx) in CANVAS.
Due within one week of attending the Passport/Service Learning activity.**

* 2-3 pages in length, not including title and reference page
* APA format guidelines, 6th edition (*May use first person language*)

Reflection must address all of the following questions with completeness and depth (quality):

1. What type of experience did you participate in or observe and how did your participation impact the organization or event?
2. What were your goal(s) for this experience? What course learning outcome(s) for NRSB 361, 362, 371, or 381 did you meet by having this experience?
3. How have your knowledge, skills, and attitudes been impacted as a result of this experience?
4. Based on your above answer, how has this Passport/Service Learning experience impacted your view of yourself and the world?
5. If you could repeat this experience, what would you do differently? Why?
6. How has this Passport/Service Learning experience prepared you for your transition into professional nursing practice?
7. How did this experience impact your view of the challenges faced by adults with alterations in health within acute care settings and / or the community, as well as the challenges  faced by their family members / support persons? How do you see the nursing profession affecting change addressing these challenges in the future?
8. How did the healthcare journal article help you understand the Passport/Service Learning experience?

Top of Form

**MODULE 1**

***Surgical and Mobility Concepts***

**Behavioral Objectives:**

**The student will be able to:**

1. Identify the nurse's professional, ethical, and legal responsibilities in caring for patients during the perioperative experience. (CLO 3, 9)

2. Use the nursing process to address adult medical surgical patient needs during the perioperative experience. Include the impact of physiological, psychosocial, sociocultural, and spiritual factors. (CLO 2, 3, 5)

3. Plan and implement care for patients experiencing acute and chronic health alterations affecting the musculoskeletal system. Include pharmacology, nutrition, and teaching and learning needs. (CLO 1, 6, 7)

4. Integrate pharmacological, nutritional, and fluid/electrolyte principles into the care of adult medical surgical patients experiencing surgery. (CLO 1)

5. Analyze pathologic and physiologic changes that alter mobility in patients with fractures, rheumatoid
 arthritis, wound dehiscence, evisceration, decubitus ulcers, and surgical interventions. (CLO 2, 5)

6. Analyze pathologic and physiologic changes that alter oxygenation in patients with
 pneumonia, bronchitis, and sinusitis. (CLO 2, 5)

7. Analyze pathologic and physiologic changes associated with these surgical complications
 related to wounds: dehiscence, evisceration, and decubitus ulcers; and related to circulatory
 impairment: pulmonary emboli, and DVT. (CLO 2, 5)

8. Identify potential complications of lifestyle choices, and nursing interventions to prevent or
 treat them. (CLO 1)

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| Day | Topic | Assignment |
| Day 1 | Perioperative care Preoperative Intraoperative Postoperative Patient education, consent, safetyTime out**Meds to know:**General anesthetics: isoflurane (Forane), propofol (Diprivan) Local anesthetics: lidocaine (Xylocaine) Antiemetics: ondansetron (Zofran), promethazine (Phenergan)Analgesics: narcotics morphine, Antidote: naloxone (Narcan)NSAIDS- reviewLink for incentive spirometer <http://www.bing.com/videos/search?q=incentive+spirometer+instructions&FORM=HDRSC3> | Iggy: p. 215-237 Preoperativep. 238-255 Intraoperativep. 256-274 PostoperativeLilley: p. 846-854 antiemeticsp. 169-176 anestheticsATI med surg book p. 633-637 anesthesia and perioperative nursingATI pharm bookp. 119-120 IV anesthetics, p. 301-302 local anesthetics |
| Day 2 | Complications Impaired skin integrity: Dehiscence, eviscerationImpaired circulation: Pulmonary Embolism, DVT**Meds to Know:**Aminoglycosides: neomycin (Neo-fradin)Macrolides: Erythromycin, clarithromycin (Biaxin)Link for Doppler- includes how to measure the Ankle brachial index <http://www.bing.com/videos/search?q=peripheral+doppler&FORM=HDRSC3#view=detail&mid=F7F39C82AB52BCA472DDF7F39C82AB52BCA472DD>Link for crutchwalking. This is a big selection of files- watch about which gait you want to learn. <http://www.bing.com/videos/search?q=Crutch+Walking+Instructions+for+Patients&FORM=RESTAB> | Iggy:p. 267-269 wound infectionp. 603-610 Pulmonary EmbolismLilley: p. 609-614 infectionp. 635-638 aminoglycosidesp. 623-626 macrolides p.629-632, 644-650 nursing processATI med surg bookp. 543-544 lab values for infectionsp. 648-650 wound care/dehiscence ATI pharm bookp. 364-365 macrolidesp. 365-366 aminoglycosides |
| Day 3 | Musculoskeletal conditionsAcute injury: fracture, sprain, strain, dislocationChronic MS condition: rheumatoid arthritisMedical interventionsSurgical interventions:  total hip replacement (THR)  total knee resurfacing (TKR)Assistive devicesCast careComplicationsPresentations: Total Hip Replacement, Open Reduction Internal Fixation**Meds to Know:**DMARDS-etanercept (Enbrel), abatacept (Orencia)Steroids- prednisone (Deltasone) | Iggy: p. 1051-1068 fracturesp.1079-1080 dislocation, sprains, strainsp.295-304 Total joint arthroplastyp. 304-313 RALilley: p. 533-542 steroidsp. 776-782 rheumatoid arthritis/ DMARDSATI med surg bookp. 431-433 diagnostic proceduresp. 435-443 musculoskeletal surgical proceduresp. 451-459 fracturesp. 565-567 Rheumatoid arthritisATI pharm bookp. 261-264 DMARDS for RAp. 271-274 medications for bone disordersAssistive devices handout |
| Day 4 | Oxygenation/ complications Impaired oxygenation: pneumonia, atelectasis, bronchitis, sinusitis**Meds to know:** Antitussives: guaifenesin (Robitussin, Humabid)Decongestants:phenylephrine (Ephedrine)Antihistamines: diphenhydramine (Benadryl) PRESENTATION on Pleural Effusion and Thoracentesis | Iggy: p. 588-594 pneumoniap. 220 atelectasisp. 584 sinusitisLilley: p.582-587 antitussivesATI med surg book p.279-287 pneumoniap.245-250 oxygenation (review)ATI pharm bookp.133-137 antitussives, mucolytics, decongestants, antihistamines **Review ATI skills module:** **Oxygen therapy** **ATI skills module:** **Medication Administration 2:** Accepted practice: Inhaled medications |
| Day 5 | Unit Test IEndocrine introductionOverview, diagnostic procedures | **Due: ATI practice assessment:** Targeted Medical Surgical 2016: Perioperative Iggy:p. 1255-1265 Assessment of the endocrine systemATI med surg book p. 489-494 endocrine dx procedures |

**MODULE 2**

***Metabolism Concepts***

**Behavioral Objectives:**

**The student will be able to:**

1. Identify the nurse's professional, ethical, and legal responsibilities in caring for patients with disorders affecting endocrine function. (CLO 3, 9)

2. Use the nursing process to address needs of adult medical surgical patients being treated for endocrine disorders. Include the impact of physiological, psychosocial, sociocultural, and spiritual factors. (CLO 2, 3, 5)

3. Plan and implement care for patients experiencing acute and chronic health alterations affecting
 the endocrine system. Include pharmacology, nutrition, and teaching and learning needs. (CLO 1, 6, 7)

4. Integrate pharmacological, nutritional, and fluid/electrolyte principles into the care of adult medical surgical patients experiencing alterations in endocrine function. (CLO 1)

5. Analyze pathologic and physiologic changes that alter metabolism in patients with diabetes mellitus,

hypothyroidism, hyperthyroidism, Cushing’s disease, Addison’s disease, and pheochromocytoma. (CLO 2, 5)

6. Identify potential complications of lifestyle choices, and nursing interventions to prevent or
 treat them. (CLO 1)

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| Day | Topic | Assignment |
| Day 6 | Thyroid disorders:  goiter,  hypothyroid,  hyperthyroidAdrenal cortex disorders: Addison’s disease Cushing’s diseaseAdrenal medulla disorders: pheochromocytoma**Meds to Know:** Synthroid, PTU radioactive iodineprednisone (Deltasone), fludrocortisone (Florinef)PRESENTATIONS on Hypothyroidism and goiter with thyroidectomy, Cushing’s Disease and adrenalectomy | Iggy:p. 1273-1276 Addison’s diseasep. 1276-1281 Cushing’s diseasep. 1282-1283 pheochromocytomap. 1285-1291 hyperthyroidismp. 1291-1295 hypothyroidismLilley: p. 502-509 thyroid/antithyroid medicationsp. 534-541 adrenal medicationsATI med surg bookp. 505-515 hypo/hyperthyroidismp. 517-525 Cushing’s/Addison’s diseaseATI pharm bookp. 315-320 thyroid/antithyroid medicationsp. 320-321 adrenal replacement hormones<http://endocrinediseases.org/adrenal/pheochromocytoma_diagnosis.shtml> Skyscape-pheochromocytoma |
| Day 7 | FALL BREAK |
| Day 8 | Diabetes mellitusDisorder, hypo/hyperglycemia,Complications:HHNS, DKA **Meds to Know:**Insulins (Humalog, R, N, Lantus)**Other hypoglycemic agents**Sulfonylureas: glucotrol, micronasebiguanide: metformin (Glucophage) TZD: rosiglitazone (Avandia), pioglitazone (Actos)alpha- glucosidase inhibitor: precoseincretion mimetics: ByettaDPP4 inhibitors: sitagliptin JanuviaAmylin replacement: SymlinSGLT2 inhibitor: canagliflozin (Invokana)GLP-1 agonist: liraglutide (Victoza)**Antihypoglycemics**GlucoseGlucagonPRESENTATION on Diabetes Mellitus and EMGLink to video about insulin pump<http://www.webmd.com/diabetes/video/insulin-pump> | Iggy:p. 1300-1339 care of patients with diabetes mellitusp. 1271-1272 diabetes insipidusLilley: p. 511-515 pancreas and DM overviewp. 520-532 oral antidiabetic agentsp. 516-519 insulinsATI med surg bookp. 441-443 amputationsp. 517-525 Cushing’s/Addison’s diseasep. 527-539 DMATI pharm bookp. 297-302 miscellaneous pain medicationsp. 307-313 diabetes mellitus medicationsp. 320-321 adrenal hormone replacementATI Nutrition book p. 87-89 diabetes mellitus |
| Day 9 | Unit Test 2GI introduction/ diagnostic procedures Irritable bowel disorder **Meds to know:** Lubiprostone (Amitiza)Presentation: Peptic Ulcer Disease and EGD | **Due: ATI practice assessment:** Targeted Medical Surgical 2016: endocrineIggy: p.1084-1098 Assessment and diagnostic procedures of the GI systemp.1144-1146 Irritable bowelLilley: p. 838-839 drugs for irritable bowel syndrome ATI med surg book p. 289-306 GI proceduresATI Nutrition book p. 73-77 Alterations in nutrition GI disorders |

**MODULE 3**

***Nutrition/Elimination Concepts***

**Behavioral Objectives:**

**The student will be able to:**

1. Identify the nurse's professional, ethical, and legal responsibilities in caring for patients with disorders affecting the gastrointestinal system. (CLO 3, 9)

2. Use the nursing process to address needs of adult medical surgical patients being treated for gastrointestinal and neurologic disorders. Include the impact of physiological, psychosocial, sociocultural, and spiritual factors. (CLO 2, 3, 5)

3. Plan and implement care for patients experiencing acute and chronic health alterations affecting the gastrointestinal and neurologic systems. Include pharmacology, nutrition, and teaching and learning needs. (CLO 1, 6, 7)

4. Integrate pharmacological, nutritional, and fluid/electrolyte principles into the care of adult medical surgical patients experiencing alterations in gastrointestinal function. (CLO 1)

5. Analyze pathologic and physiologic changes that alter nutrition and elimination in
 patients with cholelithiasis, cholecystitis, pancreatitis, bowel obstruction, irritable bowel
 syndrome, appendicitis, diverticulitis, gastroenteritis, gastric ulcers, duodenal ulcers,
 ulcerative colitis, Crohn’s disease. (CLO 2, 5)

6. Identify potential complications of lifestyle choices, and nursing interventions to prevent or
 treat them. (CLO 1)

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| Day | Topic | Assignment |
| Day 10 | Infections: appendicitis, diverticulitisPeptic ulcer disease/ Cholecystitis, cholelithiasis, Pancreatitis**Meds to Know:** Proton Pump inhibitors: Prilosec, Nexium Antacids: MylantaH2 receptor blockers: Zantac, AxidMucosal protectant: sucralfate (Carafate)Anticholinergics: dicyclomine (Bentyl)**Meds to know:** Pancreatic enzymes: pancrelipasePRESENTATIONS on Peptic Ulcer Disease and EGD, Appendicitis and laparoscopic appendectomy | Iggy: p.1168-1172 appendicitisp.1186-1188 diverticulitisp.1128-1138 PUDp.1213-1218 cholecystitis/cholelithiasisp.1218-1226 pancreatitisLilley: p. 816-827 acid modifying drugsp.337-338 dicyclomine (Bentyl)ATI med surg bookp. 315-318 PUDp.343-345 gall bladder diseasep. 347-350 pancreatitisATI pharm bookp. 215-219 PUDKee: Serum amylase, serum lipase |
| Day 11 | Inflammatory bowel disease Intestinal obstruction**Meds to Know:**5-aminosalicylates:Mesalamine (Asacol), Sulfasalazine (Azulfidine)Monoclonal antibody: infliximab (Remicade)PRESENTATIONS on Inflammatory bowel disease: Crohn’s disease and ileostomy, Bowel obstruction and colon resection | Iggy: p. 1174-1181 ulcerative colitis/ ostomiesp. 1181-1186 Crohn’s diseaseATI med surg bookp. 329-331 bowel obstructionp. 335-340 inflammatory bowel diseaseATI pharm bookp. 226 IBD medsp. 227 5-aminosalicylatesp. 261-264 DMARDS for IBD |
| Day 12 | ATI FUNDAMENTALS PROCTORED EXAM |
| Day 13 | THANKSGIVING BREAK |
| Day 14 | Unit Test 3 | **Due: ATI practice assessment:** Targeted Medical Surgical 2016: Gastrointestinal |

**MODULE 4**

***Circulation and Neurologic Concepts***

**Behavioral Objectives:**

**The student will be able to:**

1. Identify the nurse's professional, ethical, and legal responsibilities in caring for patients with disorders affecting circulatory function. (CLO 3, 9)

2. Use the nursing process to address needs of adult medical surgical patients being treated for circulatory disorders. Include the impact of physiological, psychosocial, sociocultural, and spiritual factors. (CLO 2, 3, 5)

3. Plan and implement care for patients experiencing acute and chronic health alterations affecting the circulatory system. Include pharmacology, nutrition, and teaching and learning needs. (CLO 1, 6, 7)

4. Integrate pharmacological, nutritional, and fluid/electrolyte principles into the care of adult medical surgical patients experiencing alterations in circulatory system. (CLO 1)

5. Analyze pathologic and physiologic changes that alter circulatory function in patients with fluid and electrolyte imbalances, PVD, PAD, DVT, venous insufficiency, and pulmonary embolism, aneurysm, and renal calculi. (CLO 2, 5)

6. Analyze pathologic and physiologic changes that alter neurological functioning in patients with neuropathies. (CLO 2, 5)

7. Identify potential complications of lifestyle choices, and nursing interventions to prevent or
 treat them. (CLO 1)

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| Day | Topic | Assignment |
| Day 15 | Circulation: Fluid and electrolytes, PAD/PVD/PE, venous ulcers**Meds to Know:** Anticoagulant: heparin, lovenoxantiplatelet: clopidogrel (Plavix)Anticoagulant: warfarin (Coumadin)Anticoagulant: dabigatran (Pradaxa)Anticoagulant: rivaroxaban (Xarelto), apixaban (Eliquis)Factor Xa Inhibitor Antidote: andexanetThrombolytic (tissue plasminogen activator: altepase (Adivase)Gabapentin (Neurontin), Micro KPRESENTATIONS on PAD and endarterectomy, stent placement,PVD/PE and Inferior Vena Cava filter (Greenfield filter) placement | Iggy: p.155-158 dehydrationp.158-160 fluid overloadp. 161-163 sodium imbalancep. 163-167 potassium imbalancep. 167-170 calcium balancep. 603-610 PEp. 718-725 PADp. 729 (Table 36-7) Raynaud’s diseasep.728-736 PVD/DVTKee: Serum calcium, serum potassium, PTT, PT, INRLilley: p. 473-490 fluids and electrolytesp. 229-230 gabapentinp. 418-432 coagulation modifiersATI med surg book p. 215-221 PVD/ PAD p. 239-241 aneurysmsp. 245-247 hematologic diagnostic proceduresp. 265-268 FVD/FVEp. 271-278 electrolyte imbalancesATI pharm bookp.191-199 medications affecting coagulationATI nutrition bookp. 3-8 sources of nutrition |
| Day 16 | Comprehensive Final Exam | **Due: ATI practice assessment:** Targeted Medical Surgical 2016: Fluid, electrolytes, and acid base |