

Basic Course Information

Semester:	First Semester	Instructor Name:	Rosalba Jepson MSN
Course Title & #:	Gerontology NUR 108	Email:	Rosalba.jepson@imperial.edu
CRN #:	20603	Webpage (optional):	
Classroom:	2139	Office #:	2126
Class Dates:	5/4/15 - 6/12/15	Office Hours:	M - Th 11:30 - 12:40
Class Days:	M-T-W	Office Phone #:	760-355-6294
Class Times:	08:00 -12:40	Emergency Contact:	Dolores Hartfield , Nrs Office
Units:	2.0		

Course Description

This course provides an introduction to the care of older adults while focusing on their unique physiological and psychosocial needs. Emphasis is placed on promoting healthy aging and retaining functional ability within a home or residential environment. Common health alterations of the older adult as well as safety and end-of-life care are introduced. Clinical experiences provide the student an opportunity to apply theoretical concepts and implement safe client care to older adults in selected settings.

Student Learning Outcomes

1. Upon course completion, the successful student will have acquired new skills, knowledge, and or attitudes as demonstrated by being able to:
2. Perform a health assessment interview on the older adult patient using therapeutic communication techniques that facilitate a caring nurse/patient relationship, which will be evaluated by a written care plan/research paper (ILO1, ILO2, ILO4, ILO5)
3. The student will develop a health related patient education plan and implement appropriate teaching to the older adult patient and their families. Evaluations of outcome will be assessed by a written individualized care plan and outcomes. (ILO1, ILO2, ILO4, ILO5)

Course Objectives

1. Perform a health assessment that focuses on the needs of older adult patients and determines their functional status.
2. Develop an evidence based plan of care with assistance that demonstrates an appreciation of an older adult patient's cultural, spiritual, and developmental variations, and includes recommendations for the adoption of health-promoting behaviors
3. Participate as a member of the interprofessional health care team and patient advocate while providing quality care that promotes safety for older adults with common health alterations
4. Demonstrate decision-making when identifying and reporting health deviations and treatment related responses of older adult clients.
5. Apply knowledge of pharmacology, pathophysiology, and nutrition as well as established evidence based practice to the care of older adult patients with common health alterations

6. Use verbal and nonverbal communication that promotes caring, therapeutic relationships with older adult patients and professional relationships with members of the interprofessional health care team.
7. Use information technologies to access evidence based literature and patient information as well as communicate with members of the interprofessional health care team, accurately documenting client care in a secure and timely manner.
8. Identify health education and safety needs of older adult patients and their families and provide education in conjunction with members of the interprofessional health care team.
9. Use organizational and priority setting skills when providing care to older adult patients with common health alterations in selected settings.
10. Identify and report concerns related to patient safety and the delivery of quality care and acknowledge the nurse's role in supporting activities that promote performance improvement.
11. Adhere to ethical, legal and professional standards while maintaining accountability and responsibility for the care provided to older adult patients

Textbooks & Other Resources or Links

1. Eliopoulos, C. (2014). Gerontological Nursing (8th/e). Lippincott, Williams & Wilkins. ISBN: 145117277X
2. Berman (2012). Kozier & Erb's Fundamental of Nursing w/CD (9th/e). Upper Saddle River Pearson/Prentise Hall. ISBN: 0138024618
3. Hogan (2013). Reviews & Rationales: Fluids, Electrolytes, and Acid-Base Balance w/CD (2013/e). Prentice Hall. ISBN: 0132958554
4. Lutz (2011). Nutrition & Diet Therapy (5th/e). FA Davis . ISBN: 0803622022
5. Doenges, Marilyn (2013). Application of Nursing Process and Nursing Diagnosis (6th/e). FA Davis. ISBN: 0803629125 Doenges (2010). Nursing Care Plans (8th/e). FA Davis. ISBN: 803630413 (optional)

Course Requirements and Instructional Methods

- Demonstration: Practice skills learned in NUR 107; compare and contrast assessment findings in the older adults
- Audio Visual: DVD, CD-ROM
- Computer Assisted Instruction: Internet research, case study
- Discussion: Related topics on Gerontological nursing care
- Group Activity: presentation on Fluid & Electrolytes
- Lab Activity: Assessment skills of the older adult
- Lecture/ Powerpoint
- Simulation/Case Study: Therapeutic Communication skills and basic nursing care

Two (2) hours of independent work done out of class per each hour of lecture or class work, or 3 hours lab, practicum, or the equivalent per unit is expected.

ASSIGNMENTS:

Class activities:

Class discussion, be prepared to discuss the reading assignment: Class participation and discussion, presentations, case studies, unit exams, pop quizzes, and Final exam.

Out-of-class:

Reading assignments from required textbooks listed for this course (see text book list), and the pharmacology text used in the pharmacology course. Writing assignments will reflect the objectives listed and may include, but not be limited to, care plans, concept-mapping, drug cards, short essays, and/or professional papers. CD/DVD viewing, internet, research evidence-base articles Additional reference materials will be available in the nursing learning center. Outside assignments may include, but not limited to, nursing lectures or inservices offered by local health facilities, independent exercises, learning center activities, and reviewing peer-review evidence-based journals available at IVC library. .

Clinical assignments:

1. Clinical pre-assignments will include reviewing and practicing skills learned in NUR 107.
2. Develop a care plan for the older adult using the nursing process based on clinical assessment: obtaining patient data, reviewing medication information, and evaluating preventive care and patient education.
3. Obtain a patient medical history interview
4. Application of therapeutic communication: interviewing the older adult, implementing SBAR when giving report
5. Clinical hours will be spent demonstrating proficiency, providing professional nursing care to assigned patients, observations in various clinical departments, and participating in simulation.
6. Written post-assignments will relate to the clinical experience and may include but not be limited to care plans, case studies, documentation exercises.
7. Clinical sites may include Long-term care facility, Adult day out centers, Assistive living facility and Simulation setting

Simulations

Simulations are a safe learning environment where all students will have the opportunity to interact within a structured scenario. Simulations will be utilized during this class and simulation materials will be handed out during the semester. All advance assignments must be completed before the start of class. Failure to complete the pre-assignment will prevent the student from attending the class for the day and results in a clinical absence.

It is each student's responsibility to complete all facility requirements, i.e., BLS training, immunizations, background checks, drug screening, specific hospital orientation, etc., prior to clinical rotations (please see the student handbook for more information). A student will not be allowed to attend any clinical hours until this is done. If over the maximum hours of absenteeism because of this, the student will be dropped from the class.

Plagiarism and cheating policies noted in the student handbook and IVC policies will be strictly enforced. Students are expected to develop original work for this course. It is recommended that students visit the college library to become acquainted with research tools available.

Out of Class Assignments:

The Department of Education policy states that one (1) credit hour is the amount of student work that reasonably approximates not less than one hour of class time and two (2) hours of out-of-class time per week over the span of a semester. WASC has adopted a similar requirement.

Course Grading Based on Course Objectives

Students must maintain a “C” average grade as determined by the scale below. Grades will not be “rounded”. To advance to the next semester, a “C” or better is required in this course.

- A = 92-100%
- B = 83-91%
- C = 75-82%
- D = 68-74%
- F = Below 68%

All of the following must be attained to successfully pass this course:

- A. Final Theory Exam score must be passed at a 75%.
- B. Clinical grade must total equivalent of 75% or greater based on all points accumulated.
- C. Theory (exams) grade must total equivalent of 75% or greater.
- D. Attendance requirements as noted below must be met.
- F. Must not accrue more than 1 unsatisfactory performance in the clinical setting.
- G. Final clinical evaluation must show all categories as “Adequate” or “Satisfactory”.
- H. THERE WILL BE NO MAKE-UPS FOR TESTS OR QUIZZES MISSED DUE TO ABSENCE
- I. A point will be taken off for written assignments that are turned in without a name. It is a nurse’s responsibility to sign documentation. This process begins in class.

Clinical Assignment Paper:

- 1. Peer Review Journal article
- 2. Patient Health Assessment & Medical History Interview with a care plan on Preventive Care
- 3. Physical Assessment and Care Plan of the Institutionalized Long-term care patient
- 4. Concept Mapping a Care Plan
- 5. Simulation Exercise
- 6. Patient Interaction: Analyze Therapeutic Communication (NLN scenario)

Clinical evaluation: Clinical evaluation will be done on an ongoing basis with a student required to meet “adequate” or “satisfactory” in all areas to pass the course. Evaluation is based on written assignments, adherence to nursing standards of care, QSEN competencies, and professional performance. An unsatisfactory in clinical may be given based on the same standards of care and professional performance and will require remediation in the learning center. One unsatisfactory grades given in clinical or failure to meet the clinical objectives will result in failure of this class regardless of the overall grade.

Schedule and total points available may change at the discretion of the instructors, taking into account the progress of students with the materials. Any change will be announced in class or via email through Blackboard. Students are held responsible for all materials covered in the syllabus and for any changes that are announced in class or by email.

To evaluate a student's ability to provide for patient safety and to demonstrate clinical competence, students must be present in clinical during assigned times. Absenteeism and/or tardiness beyond the maximum allowed will result in being dropped from NUR 108. This will result in a "W" grade if before the drop date and "F" if after that date.

It is recommended that if a grade falls below 78% that the student will arrange to meet with the faculty member. Faculty can be reached in person, by email, or during office hours to discuss grades or other classroom or clinical matters.

The student is responsible for withdrawing (W) from the class before the deadline as outlined on your registration forms. Failure to pass this class will affect your ability to progress to the next semester. Students failing or withdrawing must complete a Petition to Re-Enter.

Attendance

It is the responsibility of each student to attend all classroom and clinical hours and to contact the faculty person before the start of class of any need to be excused from class. If a student does not contact the faculty member by the assigned time and is absent, a clinical unsatisfactory for professional behaviors will be given. Students are expected to attend all classes. Absences are limited to 3 hours and 30 minutes of theory or 4.5 hours of clinical throughout the semester (equivalent to number of hours class meets in one week, related to a 16 week semester course). A student who reaches the maximum allowable hours of absenteeism or tardiness may be dropped by the instructor.

It is strongly recommended that student DOES NOT MISS ANY CLINICAL or THEORY hours since this is a very short-term course. Acceptance of absenteeism may be excused for an extreme and unforeseen situation, and is solely at the discretion of the faculty member and may result in failure of the class. A student who reaches the maximum allowable number of hours absent and is not allowed to

continue may file a petition to reenter the nursing program. The teaching team will meet with the student to discuss remediation and the possibility of reentry.

Students who are late for class/clinical three times will be considered absent for one day.

Classroom Etiquette

- **Electronic Devices:** Cell phones and electronic devices must be turned off and put away during class, unless otherwise directed by the instructor.
- **Food and Drink** are prohibited in all classrooms. Water bottles with lids/caps are the only exception. Additional restrictions will apply in labs. Please comply as directed by the instructor.
- **Disruptive Students:** Students who disrupt or interfere with a class may be sent out of the room and told to meet with the Campus Disciplinary Officer before returning to continue with coursework. Disciplinary procedures will be followed as outlined in the [General Catalog](#).
- **Children in the classroom:** Due to college rules and state laws, no one who is not enrolled in the class may attend, including children.

Online Netiquette

- What is netiquette? Netiquette is internet manners, online etiquette, and digital etiquette all rolled into one word. Basically, netiquette is a set of rules for behaving properly online.
- Students are to comply with the following rules of netiquette: (1) identify yourself, (2) include a subject line, (3) avoid sarcasm, (4) respect others' opinions and privacy, (5) acknowledge and return messages promptly, (6) copy with caution, (7) do not spam or junk mail, (8) be concise, (9) use appropriate language, (10) use appropriate emoticons (emotional icons) to help convey meaning, and (11) use appropriate intensifiers to help convey meaning [do not use ALL CAPS or multiple exclamation marks (!!!)].

Academic Honesty

Academic honesty in the advancement of knowledge requires that all students and instructors respect the integrity of one another's work and recognize the important of acknowledging and safeguarding intellectual property.

There are many different forms of academic dishonesty. The following kinds of honesty violations and their definitions are not meant to be exhaustive. Rather, they are intended to serve as examples of unacceptable academic conduct.

- **Plagiarism** is taking and presenting as one's own the writings or ideas of others, without citing the source. You should understand the concept of plagiarism and keep it in mind when taking exams and preparing written materials. If you do not understand how to "cite a source" correctly, you must ask for help.
- **Cheating** is defined as fraud, deceit, or dishonesty in an academic assignment, or using or attempting to use materials, or assisting others in using materials that are prohibited or inappropriate in the context of the academic assignment in question.

Anyone caught cheating or plagiarizing will receive a zero (0) on the exam or assignment, and the instructor may report the incident to the Campus Disciplinary Officer, who may place related documentation in a file. Repeated acts of cheating may result in an F in the course and/or disciplinary action. Please refer to the [General Catalog](#) for more information on academic dishonesty or other misconduct. Acts of cheating include, but are not limited to, the following: (a) plagiarism; (b) copying or attempting to copy from others during an examination or on an assignment; (c) communicating test information with another person during an examination; (d) allowing others to do an assignment or portion of an assignment; (e) using a commercial term paper service.

Additional Student Services

Imperial Valley College offers various services in support of student success. The following are some of the services available for students. Please speak to your instructor about additional services which may be available.

- **[Blackboard Support Site](#)**. The Blackboard Support Site provides a variety of support channels available to students 24 hours per day.
- **[Learning Services](#)**. There are several learning labs on campus to assist students through the use of computers and tutors. Please consult your [Campus Map](#) for the [Math Lab](#); [Reading, Writing & Language Labs](#); and the [Study Skills Center](#).

- [Library Services](#). There is more to our library than just books. You have access to tutors in the [Study Skills Center](#), study rooms for small groups, and online access to a wealth of resources.

Disabled Student Programs and Services (DSPS)

Any student with a documented disability who may need educational accommodations should notify the instructor or the Disabled Student Programs and Services (DSP&S) office as soon as possible. It is the student's responsibility to make this notification to the faculty member.

DSP&S
Health Science Building, Room 2117
355-6312

Student Counseling and Health Services

Students have counseling and health services available, provided by the pre-paid Student Health Fee.

- [Student Health Center](#). A Student Health Nurse is available on campus. In addition, Pioneers Memorial Healthcare District and El Centro Regional Center provide basic health services for students, such as first aid and care for minor illnesses. Contact the IVC [Student Health Center](#) at 760-355-6310 in Room 2109 for more information.
- [Mental Health Counseling Services](#). Short-term individual, couples, family, and group therapy are provided to currently enrolled students. Contact the IVC [Mental Health Counseling Services](#) at 760-355-6196 in Room 2109 for more information.

Student Rights and Responsibilities

Students have the right to experience a positive learning environment and to due process of law. For more information regarding student rights and responsibilities, please refer to the IVC [General Catalog](#).

Information Literacy

Imperial Valley College is dedicated to helping students skillfully discover, evaluate, and use information from all sources. The IVC [Library Department](#) provides numerous [Information Literacy Tutorials](#) to assist students in this endeavor.

Anticipated Class Schedule/Calendar

[Required Information – Discretionary Language and Formatting: The instructor will provide a tentative, provisional overview of the readings, assignments, tests, and/or other activities for the duration of the course. A table format may be useful for this purpose.]

Anticipated Class Schedule/Calendar

SPRING 2015

CRN # 20603 NUR 108 - Gerontology Nursing

Rosalba Jepson MSN RN office: # 2130 ph# 460-355-6294

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Carmen Fitzsimmons RN (clin instructor) ph# 760-604-1913

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Last Date to add: 5/5/15

Deadline to drop with "W": 6/2/15

ROOM	DATE	TIME	DESCRIPTIONS and Assignment	INSTRUCTOR
Week 1 Lecture Room 2139	Mon. 5/4/15	0800 to 1140	<p>Principles of Gerontology Tabloski ch 1, ch 2 – chronic illness Physical & Psychosocial Variation - Tabloski, ch 7 Therapeutic Communication Kozier ch 26 Sensory/Cognitive alterations Tabloski ch 14, 22 - sensory; neurological Kozier, ch 38 sensory perception</p> <p>Discuss Chronic Illness in the older adult Communication Handout on Blackboard Class preparation – complete case study: Mr. Stanza</p>	R. Jepson
Week 2 Lecture Room 2139	Mon. 5/11/15	0800 to 1140	<p>Alteration in Mobility - Tabloski ch 18 - musculoskeletal system Tabloski ch6, p.136-137 – Falls r/t medications Environmental Safety - Tabloski ch 24 - Comorbidities - Tabloski ch10 - Violence & mistreatment - Tabloski ch 6 - Drug safety Alterations in Integumentary Tabloski, ch 12 - Integument System End-of-Life - (Guest Speaker) Tabloski, ch 11; Kozier ch 42-43</p>	R. Jepson
Week 3 Lecture Room 2139	Mon 11/18/14	0800 to 1140	<p>Exam #1 – Comm./pshySoc., Sensory, Safety, Integumentary & Mobility</p> <p>Alterations in Oxygenation Tabloski: ch.16 – Respiratory system Alteration in Cardiac Output & Tissue Perfusion Tabloski: ch.15 – Cardiovascular system Kozier: ch 51 – Circulation Alterations in Fluid and Electrolytes. Acid/Base Balance: Hogan: ch 1 – 7 Taboski, ch 5 - Fluid dysregulation & risk factors p.98 Geriatric lab test values p.390; Kozier: ch 52</p> <p>Audio-Visual tools in the NLC Fluids and Electrolytes in the Adult/ Part I & II Acid/Base Balance: Respiratory Alkalosis and Acidosis Acid/Base Balance: Metabolic Alkalosis and Acidosis</p>	R. Jepson

Week 4	Mon 5/25/15		MEMORIAL DAY - CAMPUS CLOSED	
Week 5 Lecture Room 2139	Mon 6/1/15	0800 to 1140	Exam #2 – O2, FI Electrolytes, Acid/Base, Cardiac Nutrition & Aging: Tabloski, ch 5; ch 6- Gastric effects p.135-136 Alterations in Digestive/Elimination/Metabolism Tabloski, Gastrointestinal system, ch 20 Genitourinary/renal system ch 17, p.446-449, p.452- 462 Endocrine system ch 19 Alteration in Immunity Tabloski, ch 23 – Immune system Alteration in Reproduction Tabloski, ch 17, p.449 – 452, p.462 - 470 p.460 – menopause	R. Jepson
Week 6 Lecture Room 2139	Mon 6/8/15	0800 to 1140	Final Exam – Comprehensive + Nutri/GI, GU, Endo/Immune, Repro	R. Jepson

This syllabus is subject to minor changes without prior notice.

QSEN – Quality and Safety Education for Nurses. QSEN competencies are integrated into the course curriculum to build upon the fundamental concepts introduced in prior courses with the focus on health issues across the lifespan. Clinical opportunities are designed to facilitate application of QSEN competencies in knowledge, skills, and attitude focusing on lifespan health issues through care of diverse populations in a variety of settings.

*****Tentative, subject to change without prior notice*****

Course Content

UNIT CONTENT

Unit 1: Alterations in Fluid and Electrolytes (Coarse objectives 1, 2, 4, 5)

- **Recognize alterations in laboratory values of urine osmolarity, and serum sodium, potassium, chloride, calcium, and phosphorus.**
- **Recognize clinical manifestation of fluid imbalances and alterations in sodium, potassium, chloride, calcium, and phosphorus**
- **Apply knowledge of pathophysiology when planning care for patients with alterations in fluid balance**
- **Apply knowledge of pathophysiology when planning care for patients with alterations in sodium, potassium, chloride, calcium, and phosphorus.**
- **Identify priority actions for patients with an alteration in fluid balance or sodium, potassium, chloride, calcium, and phosphorus.**

Unit 2: Alteration in Oxygenation (Coarse objectives 1 -11)

- **Recognize components of an assessment that should be included when collecting data on older adults who have an alteration in oxygenation.**
- **Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in oxygenation.**
- **Identify priority actions for older adults who have an alteration in oxygenation**
- **Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in oxygenation.**
- **Recognize alterations in pulse oximetry and other laboratory values related to alterations in oxygenation.**
- **Discuss the correct use and functioning of therapeutic devices that support oxygenation.**
- **Describe the role of the nurse in providing quality care to older adults who have an alteration in oxygenation.**
- **Identify health care education and safety needs for older adults who have an alteration in oxygenation**

Content Topic

- **Pathophysiology:**
 - a. **Infectious and inflammatory disorders (bronchitis, pneumonia, influenza, tuberculosis)**
 - b. **Obstructive disorders (COPD – introduction)**
- **Pharmacology:**
 - a. **Antibiotics (penicillins, cephalosporins, tetracyclines, macrolides, flouroquinolones, monobactams)**
 - b. **Antimycobacterials**
 - c. **Bronchodilators**
 - d. **Expectorants and mucolytics**
 - e. **Adult immunizations**
- **Nutrition:**
 - a. **Diets for patients with dyspnea (high calorie, high protein diet, soft diet; small frequent meals)**
 - b. **Nutritional supplements**

Unit 3: Alterations in Cardiac Output and Tissue Perfusion (Coarse objectives 1 -11)

- **Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in cardiac output and tissue perfusion.**
- **Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in cardiac output and tissue perfusion.**
- **Identify priority actions for older adults who have an alteration in cardiac output and tissue perfusion.**
- **Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in cardiac output and tissue perfusion.**

- Recognize alterations in pulse oximetry and other laboratory values related to alterations in cardiac output and tissue perfusion.
- Discuss the correct use and functioning of therapeutic devices that support cardiac output and tissue perfusion.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in cardiac output and tissue perfusion.
- Identify health care education and safety needs for older adults who have an alteration in cardiac output and tissue perfusion.

Content Topic

- Pathophysiology:
 - a. Increased arterial pressure disorders (hypertension)
 - b. Peripheral vascular disorders (venous stasis, emboli, aneurysms)
 - c. Decreased cardiac output disorders (heart failure - Intro)
- Pharmacology:
 - a. Diuretics (thiazide, loop, potassium-sparing)
 - b. Renin-angiotension-aldosterone system inhibitors (beta blockers, calcium channel blockers,
- ACE inhibitors, (ARBs) - Cardiac glycosides
- Nutrition:
 - a. Low-fat, low-salt, calorie appropriate diet
 - b. Dietary Approaches to stop Hypertension (DASH) diet
 - c. Potassium supplements

Unit 4: Alterations in Regulation and Metabolism (Coarse objectives 1 -11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in regulation and metabolism.
- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in metabolism.
- Identify priority actions for older adults who have an alteration in regulation and metabolism.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in regulation and metabolism
- Recognize alterations in pulse oximetry and other laboratory values related to alterations in regulation and metabolism.
- Discuss the correct use and functioning of therapeutic devices that support regulation and metabolism.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in regulation and metabolism.
- Identify health care education and safety needs for the older adults who have an alteration in regulation and metabolism.

Content Topic

- Pathophysiology:
 - a. Endocrine/ exocrine disorders (diabetes mellitus)
 - b. Insulins

- c. Oral hypoglycemics
- d. Glucagon
- Nutrition:
 - a. Consistent carbohydrate meal plan, carbohydrate counting
 - b. Exchange list meal plans
 - c. Sweeteners

Unit 5: Alterations in Cognition and Sensation (Coarse objectives: 1-11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in cognition and sensation.
- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in cognition and sensation.
- Identify priority actions for older adults who have an alteration in cognition and sensation.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in cognition and sensation.
- Recognize alterations in pulse oximetry and other laboratory values related to alterations in cognition and sensation.
- Discuss the correct use and functioning of therapeutic devices that support cognition and sensation.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in cognition and sensation.
- Identify health care education and safety needs for older adults who have an alteration in cognition and sensation.

Content Topic

- Pathophysiology;
 - a. Ischemic disorders (TIA, cerebrovascular accident)
 - b. Degenerative neurological disorders (Parkinson's disease, Alzheimer's disease, dementias).
 - c. Vision related disorders (cataracts, glaucoma)
 - d. Hearing related disorders (conductive hearing loss, sensorineural hearing loss)
- Pharmacology:
 - a. Dopaminergics
 - b. Cholinesterase inhibitors
 - c. NMDA receptor antagonists
 - d. Topical agents for glaucoma (beta blockers, cholinergic agonists)
 - e. Carbonic anhydrase inhibitors
- Nutrition:
 - a. Commercial thickeners
 - b. Nutritional supplements and tube feedings

Unit 6: Alterations in Immunity (Coarse objectives 1 -11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in immunity.

- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in immunity.
- Identify priority actions for older adults who have an alteration in immunity.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in immunity.
- Recognize alterations in pulse oximetry and other laboratory values related to alterations in immunity.
- Discuss the correct use and functioning of therapeutic devices that support immunity.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in immunity
- Identify health care education and safety needs for older adults who have an alteration in immunity.

Content Topic

- Pathophysiology:
 - a. Infectious and inflammatory disorders (rheumatoid arthritis, gout)
- Pharmacology:
 - a. Nonsteroidal anti-inflammatory drugs (NSAIDs – first and second generation)
 - b. Disease modifying antirheumatic drugs (DMARDs – I, II, III, IV)
 - c. Antimetabolites (folic acid analogs)
 - d. Glucocorticoids
 - e. Pharmacology/ Colchicine
 - f. Antihyperuricemics
- Nutrition: Low purine diet

Unit 7: Alterations in Integument (Coarse objectives 1 -11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in integument.
- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in integument.
- Identify priority actions for older adults who have an alteration in integument.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in integument.
- Recognize alterations in pulse oximetry and other laboratory values related to alterations in integument.
- Discuss the correct use and functioning of therapeutic devices that support integument.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in integument.
- Identify health care education and safety needs for older adults who have an alteration in integument.

Content Topic

- Pathophysiology:
 - a. Infectious and inflammatory disorders (cellulitis, herpes zoster)
 - b. Tissue injury disorders (pressure ulcers)
- Pharmacology:

- a. Antivirals
- b. Antibiotics carbapenems)
- c. Enzymatic debriding agents
- Nutrition:
 - a. Vitamin C and zinc supplements
 - b. Nutrition/Nutritional supplements

Unit 8: Alterations in Mobility (Coarse objectives 1 -11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in mobility.
- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in mobility.
- Identify priority actions for older adults who have an alteration in mobility.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in mobility.
- Recognize alterations in pulse oximetry and other laboratory values related to alterations in mobility.
- Discuss the correct use and functioning of therapeutic devices that support mobility.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in mobility.
- Identify health care education and safety needs for older adults who have an alteration in mobility.

Content Topic

- Pathophysiology:
 - a. Degenerative musculoskeletal disorders, osteoporosis, osteoarthritis – introduction)
- Pharmacology:
 - a. Antibiotics (monobactams)
 - b. Calcium salts
 - c. Selective estrogen receptor modifiers
 - d. Biophosphanates
 - e. Calcitonin- salmon
- Nutrition:
 - a. Calcium supplements
 - b. Lactase enzyme replacements

Unit 9: Alterations in Reproduction (Coarse objectives 1-11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in reproduction.
- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in reproduction.
- Identify priority actions for older adults who have an alteration in reproduction.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in reproduction

- Recognize alterations in pulse oximetry and other laboratory values related to alterations in reproduction.
- Discuss the correct use and functioning of therapeutic devices that support reproduction.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in reproduction.
- Identify health care education and safety needs for older adults who have an alteration in reproduction.

Content Topic

1. Pathophysiology:

- a. Impaired functioning/sexual (erectile dysfunction, decreased libido)

2. Pharmacology:

- a. PDE5 inhibitors
- b. Pharmacology/ Testosterone
- c. Pharmacology/ Vaginal lubricants

Unit 10: Alterations in Ingestion, Digestion, Absorption, and Elimination (Coarse objectives 1-11)

- Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in ingestion, digestion, and absorption, and elimination.
- Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in ingestion, digestion, absorption, and elimination.
- Identify priority actions for older adults who have an alteration in ingestion, digestion, absorption, and elimination.
- Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in ingestion, digestion, absorption, and elimination.
- Recognize alterations in pulse oximetry and other laboratory values related to alterations in ingestion, digestion, absorption, and elimination.
- Discuss the correct use and functioning of therapeutic devices that support ingestion, digestion, absorption and elimination.
- Describe the role of the nurse in providing quality care to older adults who have an alteration in ingestion, digestion, absorption, elimination.
- Identify health care education and safety needs for older adults who have an alteration in ingestion, digestion, absorption, and elimination.

Content Topic

• Pathophysiology:

- a. Impaired functioning/bowel (constipation, fecal impactions)
- b. Impaired voluntary control/bowel (bowel incontinence)

• Pharmacology:

- a. Laxatives and Antidiarrheals

• Nutrition:

- a. High fiber diet and Fiber supplements

Unit 11: Alterations in Excretion (Coarse objectives 1-11)

- **Recognize components of a focused assessment that should be included when collecting data on older adults who have an alteration in excretion**
- **Apply knowledge of anatomy, physiology, pathophysiology, nutrition, and developmental variations when helping to plan care for older adults who have an alteration in excretion.**
- **Identify priority actions for older adults who have an alteration in excretion.**
- **Apply knowledge of the actions, potential side effects, and nursing implications when administering medications to older adults who have an alteration in excretion.**
- **Recognize alterations in pulse oximetry and other laboratory values related to alterations in excretion.**
- **Discuss the correct use and functioning of therapeutic devices that support excretion.**
- **Describe the role of the nurse in providing quality care to older adults who have an alteration in excretion.**
- **Identify health care education and safety needs for older adults who have an alteration in excretion.**

Content Topic

- **Pathophysiology**
 - a. **Infectious and inflammatory disorders (cystitis, urethritis)**
 - b. **Impaired functioning/urinary (urinary retention)**
 - c. **Impaired voluntary control/ bladder (bladder incontinence)**
- **Pharmacology:**
 - a. **Antibiotics (sulfonamides, trimethoprim)**
 - b. **Urinary tract antiseptics and analgesics**
- **Nutrition:**
 - a. **Avoidance of bladder irritants**
 - b. **Cranberry juice**

Unit 12: Physical and Psychosocial Variations of the Older Adult (Coarse objectives 1, 2, 5)

- **Discuss the demographic trends of American society and the implications this poses for the current health care system.**
- **Review selected biological and psychosocial theories of aging.**
- **Recall developmental tasks specific to older adults.**
- **Describe common physiological changes that occur in older adults.**
- **Describe common psychosocial changes and issues faced by older adults.**
- **Discuss the concept of sexuality in regard to the older adult.**
- **Address the importance of health promotion and maintenance in relation to facilitating healthy aging.**
- **Review the considerations that should be made when administering medications to older adults**
- **Discuss the focus of a functional assessment and common tools that are used to measure a client's functional abilities**
- **Describe options older adults have for assistance with meeting housing and personal needs when functional deficits are present.**

- Determine the effect that social isolation and sensory deficits has on the incidence of sensory deprivation in older adults
- Apply knowledge of physiological, psychosocial, and developmental variations when planning care for older adults at risk for social isolation and sensory deprivation.

Unit 13: Chronic Illness (Coarse objectives 1-3)

- Ascertain the variables that have contributed to an increased incidence of chronic illness in older adults.
- Discuss the impact chronic illness and an aging population has on the health care system.
- Discuss the incidence of falls in older adults and measures that can be taken to prevent them.
- Use a fall risk assessment tool to determine a client's risk for falls.
- Discuss the legal and ethical use of restraints in clients who are at risk for falls.
- Apply knowledge of physiological, psychosocial, and developmental variations when planning care for older adults who are at risk for falls.

Unit 14: Environmental Safety (Coarse objectives 1, 2, 3, 5, 11)

- Identify common safety hazards in the environment of older adults.
- Recognize unsafe behaviors and alterations in health that contribute to an unsafe environment for older adults.
- Discuss the incidence of falls in older adults and measures that can be taken to prevent them.
- Use a fall risk assessment tool to determine a client's risk for falls.
- Discuss the legal and ethical use of restraints in clients who are at risk for falls.
- Apply knowledge of physiological, psychosocial, and developmental variations when planning care for older adults who are at risk for falls.

Unit 15: End of Life Care (Coarse objectives 1, 2, 3, 5, 8)

- Differentiate between the terms grief and bereavement and their relationship to loss.
- Analyze selected grief theories and their application to clients and families experiencing a loss.
- Compare and contrast the various types of grief.
- Identify resources available for clients and families experiencing a loss.
- Compare and contrast the philosophy and goals of palliative and hospice care.
- Recognize common signs and symptoms of impending death.
- Identify comfort measures that can be taken to minimize discomfort experienced during the dying process.
- Explore the cultural and religious beliefs that impact the experience of dying and death by the patient and family.
- Apply knowledge of physiological, and psychosocial considerations when planning care for older adults and their families who are coping with the dying process.

Unit 16: Emergency Preparedness (Coarse objectives 3, 4, 10)

- Discuss issues related to an internal threat, natural disaster, or a mass casualty situation.
- Review prepared security plans and chain of responsibility for emergency situations.

- Relate the importance of knowing the location and purpose of the MSDS Manual.
- Describe the RACE acronym and its use as a guide for action during a fire.
- Define the term triage and its related steps.
- Determine priorities when evacuating patients from a client care setting.

Unit 17: Skills (Coarse objectives 3, 5, 11)

- Review principles related to selected fundamental skills.
- Practice patient care skills using proper techniques while ensuring patient safety.

Theory Content Topic

- a. Post-mortem care and tissue/organ donation (preparation of the body, tagging, shrouding, and documentation).
- b. Glucose monitoring and screening tests (urine and blood glucose testing, and reporting, sliding scale, hemocult, dipsticks and documentation).
- c. Maintenance of enteral tubes and feedings (enteral tubes, enteral formulas, continuous and bolus feedings, medication administration, flushing and checking placement, and documentation).
- d. Complications of immobility (complications of immobility precautions, thromboembolic hose, sequential compression devices, pressure ulcer risk assessment, pressure ulcer prevention, pressure ulcer relief mattresses/beds and documentation).
- e. Patient safety (reality orientation, fall risk assessment, bed/wheelchair sensors, restraints and documentation).
- f. Medication administration (parenteral and documentation).
- g. Wound care (wound cleaning and irrigation, wound vacuum, sterile dressing change, wound packing, wound specimen collection, special dressings, sutures and staple removal, care of drains and documentation)
- h. Elimination (enemas, incontinent pads, external and indwelling urinary catheters)
- i. Emergency Preparedness (RACE, triage)

Unit 14: CLINICAL OBJECTIVES

1. Use the Nursing process as a framework for providing nursing care:
 - a. Perform a focused assessment of patients
 - b. Contribute to the development of a plan of care based on data collected during a focused assessment
 - c. Select cultural and age-appropriate interventions for inclusion in the plan of care.
 - d. Implement nursing care that is safe and based on the established plan of care.
 - e. Use clinical judgment when providing patient care and participating in the evaluation of patient outcomes.
2. Promote continuity of health care within the health care team and across various settings;
 - a. Participate as a member of the interdisciplinary health care team.
 - b. Communicate patient- related information to designated team members in a timely manner
 - c. Participate in the planning and reinforcement of health-related education.
 - d. Use information technology to document patient information and communicate with members of the health care team.

- 3. Use scientific principles and evidence-based practice as a foundation for nursing practice:**
 - a. Apply knowledge of pathophysiology, pharmacology, and nutrition when providing patient care.**
 - b. Use appropriate resources when determining best established practice for patients.**
 - c. Use scientific evidence as a basis for nursing practice**
- 4. Provide high-quality nursing care in an environment that is safe for the patient, self, and others:**
 - a. Use communication techniques that facilitate the development of a caring nurse-patient relationship .**
 - b. Advocate for the patient when health care or health related issues arise.**
 - c. Identify patient issues that affect quality of care and participate in activities that promote improvements.**
 - d. Identify actual and potential environmental safety risks while providing a safe environment for the patient, self, and others**
 - e. Use leadership skills to enhance efficient delivery of patient care**
- 5. Practice nursing in a professional, ethical, and legal manner:**
 - a. Practice nursing in accordance with professional standards.**
 - b. Practice nursing in an ethical manner.**
 - c. Practice nursing within established legal parameters.**
 - d. Accept accountability and responsibility for patient care provided.**