Basic Course Information

Semester	Spring 2016	Instructor Name	Cristal Mora RN,MSN
Course	VN 132	Email	cristal.mora@imperial.edu
Title & #	Common Health Problems		
	III		
CRN #		Webpage (optional)	
Room	2135	Office	2134
Class Dates	04/18/2016-06/10/2016	Office Hours	MT 0630-0700, 1200-
			1300
			WTH 1200 -1300
Class Days	Mon. Tues. 0645-1530	Office Phone #	760-355-6422
& Times	Wed. Thurs. 0800-1225		
Units	5.5	Office contact if	760-355-6348
		student will be out or	
		emergency	

Course Description

The final eight-week course designed to provide a progressive and sequential study of common well-defined health problems is presented in LVN 132. The concepts from previous courses are applied with increasing complexity to the caring of individuals throughout the lifespan. The pathophysiology, treatment, and nursing management of common disorders involving the neurological, integumentary, gastrointestinal and renal systems are studied in a progressive sequence across the lifespan. Principles of growth and development are reinforced. The nursing process is utilized by the student to identify the problems and nursing interventions needed for selected patients in the clinical setting.

Student Learning Outcomes

	0
1.	Using appropriate data collection techniques & instruments, perform
	a neurological assessment on an adult or pediatric patient and correctly
	document information.
2.	Provide nursing care that reflects evidenced based research into patient/clients medical diagnosis, prognosis, treatment and care.
3.	Paying particular attention to the integumentary system demonstrate critical thinking and judgement in clinical decision making.
4.	Student will show NCLEX readiness by passing the ATI Comprehensive Predictor which measures assessment across the lifespan, with a 75% or better.
5.	Complete an abdominal assessment on a Medical/Surgical patient in the proper sequence using standard precautions.
6.	Establish and prioritize the patient's needs utilizing both primary and secondary data related to current and past physical and psychological status.
7.	Plan, implement and evaluate nursing care of adult and or pediatric patients with common problems of neurological, gastrointestinal, renal and integumentary systems.

Course Objectives

1.	Identify common health problems related to the renal system that impacts individuals
	through the lifespan.

- 2. Contrast medical and surgical interventions common to patients with renal disorders.
- 3. Plan nursing care for patients with renal disorders who are being treated medically and/or surgically. Include the following:
 - a. Pathophysiology
 - b. Diagnostic tests
 - c. Pharmacologic agents
 - d. Nutritional requirements
 - e. Teaching/learning needs
 - f. Nursing interventions
 - g. Growth and developmental needs

- h. Coping mechanisms
- i. Legal/Ethical issues
- j. Cultural aspects
- k. Psychosocial needs
- 4. Develop technical skills required to provide comprehensive nursing care to patients with renal disorders.
- 5. Construct teaching plans for patients with renal disorders.
- 6. Identify common health problems related to the gastrointestinal system that impacts on individuals throughout the lifespan.
- 7. Contrast medical and surgical intervention common to patients with gastrointestinal disorders.
- 8. Plan nursing care for patients with gastrointestinal disorders who are being treated medically or surgically.

Include the following:

- a. Pathophysiology
- b. Diagnostic tests
- c. Pharmacologic agents
- d. Nutritional requirements
- e. Teaching/learning needs
- f. Nursing interventions
- g. Growth and developmental needs
- h. Legal/Ethical issues
- i. Cultural aspects
- j. Psychosocial needs
- 9. Develop technical skills required to provide comprehensive nursing care to patients with gastrointestinal disorders.
- 10. Construct teaching plans for patients with gastrointestinal disorders.
- 11. Identify common health problems related to the neurological system that impacts on individuals throughout the lifespan.
- 12. Contrast medical and surgical interventions common to patients with neurological disorders.
- 13. Plan nursing care for patients with neurological disorders who are being treated medically or surgically.

Include the following:

- a. Pathophysiology
- b. Diagnostic tests
- c. Pharmacologic agents
- d. Nutritional requirements
- e. Teaching/learning needs
- f. Nursing interventions
- g. Growth and developmental needs
- h. Coping mechanisms
- i. Legal/Ethical issues
- j. Cultural aspects
- k. Psychosocial needs
- 14. Develop clinical skills required to provide comprehensive nursing care to patients with neurological disorders.
- 15. Formulate teaching plans for patients with neurological disorders.
- 16. Identify common health problems related to the integumentary system that impacts on individuals throughout the lifespan.
- 17. Contrast medical and surgical interventions common to patients with integumentary disorders.
- 18. Develop clinical skills required to provide comprehensive nursing care to patients with integumentary disorders.
- 19. Formulate teaching plans for patients with integumentary disorders.
- 20. Develop and demonstrate clinical skills and formulate a plan of care for a group of patients.
- 21. Differentiate the roles of the RN and the LVN as members of the health care team.

Content Mo	dules:	
Module A-1:	Nursing Asse	ssment and Diagnostic Testing of Patients with Problems of the Neurological System
Module A-2:	Application o system	f the Nursing Process in Caring for Pediatric Patients with Common Health Problems of the Neurological
Module A-3:		f the Nursing Process in Caring for Adult Patients with Common Health Problems of the Neurological
Module B:		f the Nursing Process in Caring for Patients with Common Health Problems of the Renal System
Module C:	Application of system	the Nursing Process in Caring for Patients with Common Health Problems of the Upper Gastrointestinal
Module D:		the Nursing Process in Caring for Patients with Common Health Problems of the Lower Gastrointestinal
Module E:		the Nursing Process in Caring for Patients with Common Health Problems of the Integumentary System
Module F:	Professionalis	m: The Role of the RN and LVN as Members of the Health Team
Textbooks &	Other Resource	es or Links
Texts:		
A. Require		Osborn, <u>Medical-Surgical Nursing</u> , 2 ^{nd,t} ed., Pearson, 2014 Ricci Maternity & Pediatric Nursing, 2nd ed. Walters Kluwer/Lippincott Williams & Wilkins
A. Require	d: 1. 2.	Osborn, <u>Medical-Surgical Nursing</u> , 2 ^{nd.t} ed., Pearson, 2014 Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011
A. Require		Ricci, Maternity & Pediatric Nursing, 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins,
A. Require	2.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills,</u> 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins,
A. Require	2. 3.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing, 9th ed.,</u> Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy, 9th ed.</u> , Thompson, 2007
A. Require	2. 3. 4. 5. 6.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing, 9th ed.,</u> Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy, 9th ed.</u> , Thompson, 2007 Virtual ATI
A. Require	2. 3. 4. 5.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing, 9th ed.,</u> Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy, 9th ed.</u> , Thompson, 2007
 A. Require B. Recomm 	2. 3. 4. 5. 6. 7. mended:	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing, 9th ed.,</u> Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy, 9th ed.</u> , Thompson, 2007 Virtual ATI ATI – Review Texts
	2. 3. 4. 5. 6. 7.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing, 9th ed.,</u> Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy, 9th ed.</u> , Thompson, 2007 Virtual ATI
	2. 3. 4. 5. 6. 7. mended:	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing</u> , 9 th ed., Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy</u> , 9 th ed., Thompson, 2007 Virtual ATI ATI – Review Texts Ricci, <u>Study Guide for Ricci & Kyle's Maternity & Pediatric Nursing</u> , Walters Kluwer/Lippincott
	2. 3. 4. 5. 6. 7. mended: 1.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing</u> , 9 th ed., Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy</u> , 9 th ed., Thompson, 2007 Virtual ATI ATI – Review Texts Ricci, <u>Study Guide for Ricci & Kyle's Maternity & Pediatric Nursing</u> , Walters Kluwer/Lippincott Williams & Wilkins, 2011. Doenges, <u>Nursing Care Plans</u> , F.A. Davis, 2009 Springhouse, <u>Pathophysiology Made Incredibly Easy</u> , 4 th ed.,
	2. 3. 4. 5. 6. 7. mended: 1. 2.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Lynn, <u>Taylor's Clinical Nursing Skills</u> , 4TH ed., Walters Kluwer/Lippincott Williams & Wilkins, 2011 Kozier, <u>Fundamentals of Nursing</u> , 9 th ed., Prentice Hall, 2012 Roth, <u>Nutrition & Diet Therapy</u> , 9 th ed., Thompson, 2007 Virtual ATI ATI – Review Texts Ricci, <u>Study Guide for Ricci & Kyle's Maternity & Pediatric Nursing</u> , Walters Kluwer/Lippincott Williams & Wilkins, 2011. Doenges, <u>Nursing Care Plans</u> , F.A. Davis, 2009

Course Requirements and Instructional Methods

Prerequisites:

VN 110,112,114, 116, 120, VN 122, VN 124,130 or permission of the instructor.

Course Requirements:

A. <u>Hours</u> VN 132, Common Health Problems II, is a 5.5 unit course. It is divided into theory and clinical components as follows:

	<u>Units</u>	<u>Hours</u>
Theory Lecture	2	36
Skills Lecture	5	9
	2.5	45
Clinical	2.5	144
Skills Laboratory	.5	27
	3.0	171

During this eight (8) week course, clinical experience will be in medical-surgical nursing. (Intensive care, emergency room, pediatrics)

B. LVN Program Grading

The Licensed Vocational Program complies with the Imperial Valley College grading policies in the current catalog **and** the LVN program grading policy as outlined.

1.) All assignments are graded on the following scale and grades are <u>not</u> rounded. A = 92%-100% B = 83%-91% C = 75%-82% D = 68%-74% F = Below 68%

F= When the clinical evaluation is unsatisfactory regardless of the theory grade. The final examination must be passed with a 75% or a grade of "F" for the course will be issued as outlined in the LVN student handbook

* The <u>student is responsible</u> for making an appointment with their instructor any time their grade average drops below 78%.

- 2.) Student must maintain a "C" average in all nursing courses to advance in the program.
 - (a.) Both the clinical and classroom aspects of each course must be passed. Failure in either part results in failure of the course and requires re-taking the entire course.
 - (b.) Scoring requirements for successful completion of each course:
 - (i) 75% or better of total possible points accumulated from
 - all written work and examinations (overall coursework), and
 - 75% or better of the total possible points accumulated from the <u>major unit exams</u> as designated in the course syllabi, <u>and</u>
 - (iii) 'Satisfactory' and / or 75% or better in clinical performance, including non-graded written assignments and pre-lab preparation
- 3.) Major Unit Exams and Remediation
 - 1.) The student who fails the 1st unit exam shall:
 - (a.) Complete remediation in the Nursing Learning Center with a tutor.
 - (b.) Demonstrate knowledge of those areas identified by the faculty as being deficient prior to sitting for the next modular exam.
 - (c.) Receive a 0% on any subsequent exam, if non-compliant with remediation.
 - The student who fails a 2nd unit exam or has an accumulated average less than 75% shall:
 - (a.) <u>Meet with the teaching team.</u>
 - (b.) Develop and submit a personal learning contract that includes all items of deficiencies and specific plan for improving test success.

3.) The student who fails a 3^{rd} unit exam <u>or</u> has an accumulated average less than 75% shall:

- (a.) Meet with the teaching team to consider withdrawal from the nursing program.
- (b.) If the drop date has passed, the student will meet with the teaching team regarding the possible failure of the nursing course.

4.) ALGORITHIM FOR DIAGNOSTIC EXAMS (ATI):

- (a.) Refer to LVN Handbook for information.
- (b.) Scores will be considered as a unit exam.

C. <u>Clinical and Skills Laboratory Performance Grading:</u>

1.

- Clinical and skills laboratory performance will be determined on a satisfactory or unsatisfactory basis. a. Receive one unsatisfactory in clinical/skills laboratory, complete a NLC referral
 - b. (remediation) established by the instructor prior to the next clinical/skills laboratory.
 b. If a second clinical/skills lab is "unsatisfactory", complete NLC referral (remediation)
 - established by the instructor prior to the next clinical/skills lab.c. Receive a third "unsatisfactory" in clinical/skills lab, student will meet with the teaching
 - team to consider dismissal from the nursing course. Please bear in mind that two or three "unsatisfactory" clinical/skills lab performances could be received in one day.
 - d. A formal clinical evaluation will be conducted by the clinical instructor at the completion of each 4 week rotation.
 - e. A comprehensive classroom and clinical evaluation will be completed by the clinical instructor in conjunction with the team leader at the completion of the eight-week course.

f. When a care plan is returned to a student with an unsatisfactory grade, the student is expected to correct the plan within the designated time frame and return it to the instructor. If a student fails to correct the care plan on time or if the returned plan continues to be unsatisfactory, it will be reflected as unsatisfactory performance for the rotation.

- 2. Theory, clinical, and skills laboratory requirements must be satisfactorily completed independent of each other in order to successfully complete the course.
- D. Grade Components:
 - 1. <u>Theory</u>
 - a. A maximum of six (6) Module exams will be given.
 - b. One comprehensive final exam will be given.
 - c. Other written assignments may be given at the discretion of the instructor. Written assignments will be assigned completion dates by the instructor. Materials handed in late may be given an "unsatisfactory" grade. Written assignment grades will be averaged in with other grades according to the grading scale policy.
 - d. All written assignments must be typewritten and follow APA format.
 - 2. <u>Skills Laboratory</u>
 - . All skills described later in this course must be satisfactorily demonstrated to the instructors or the Nursing Learning Center tutors by the dates designated on the schedule.
 - Clinical instructor may refer a student back to the skills lab if in his/her judgment more practice on a skill is needed.
 - 3. <u>Clinical</u>

a. A Student Progress Report form will be given to each student at the beginning of the course. A performance assessment will be conducted at the completion of 4 weeks. A comprehensive evaluation will be conducted at the end of the class.

- E. <u>Pharmacological Dosage Calculation Exam:</u>
 - 1.) Purpose: Because patient safety is the utmost priority, each student will be required to take and successfully demonstrate competence (pass) a drug calculations exam each semester.
 - 2.) Minimum requirements:
 - a.) 10 25 questions / calculations appropriate to the level of each semester
 - b.) Student must show their work
 - c.) Pass with a score of 92 % or higher. The score is not included in the grade point average for the course as it is a pass/fail assignment.
 - d.) Time limits assigned as appropriate to the number of questions.
 - e.) Correct units must be stipulated to count as correct: i.e. ml/hr, units/hr, etc.
 - 3.) The student is allowed three (3) attempts to pass
 - a) Students who do not pass:
 - (i) Must seek tutoring from faculty and /or math department and/or computerized software in the nursing learning center.
 - (ii) Cannot administer any medication in a clinical setting, except under the direct supervision of the instructor: ensuring the 5 rights, review of drug action, nursing considerations, calculations, rates, relevant labs and administration with the instructor present.
 - (iii) If the student is unsuccessful of the 3rd attempt, the student <u>cannot</u> progress to the next nursing course.

Course Grading Based on Course Objectives

LVN Program Grading

The Licensed Vocational Program complies with the Imperial Valley College grading policies in the current catalog <u>and</u> the LVN program grading policy as outlined.

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- F = Below 68%
- F= When the clinical evaluation is unsatisfactory regardless of the theory grade.

The final examination must be passed with a 75% or a grade of "F" for the course will be issued as outlined in the LVN student handbook

* The <u>student is responsible</u> for making an appointment with their instructor any time their grade average drops below 76%.

- 2. Student must maintain a "C" average in <u>all</u> nursing courses to advance in the program.
 - a. Both the clinical and classroom aspects of each course must be passed. Failure in either part results in failure of the course and requires re-taking the entire course.
 - Scoring requirements for successful completion of each course:
 a. 75% or better of total possible points accumulated from

all written work and examinations (overall coursework), and

- 75% or better of the total possible points accumulated from the major unit exams b. as designated in the course syllabi, and
- 'Satisfactory' and / or 75% or better in clinical performance, including non-graded C. written assignments and pre-lab preparation
- 3.) Major Unit Exams and Remediation

b.)

- a.) The student who fails the 1st unit exam shall:
 - 1. Complete remediation in the Nursing Learning
 - Center with a tutor
 - 2. Demonstrate knowledge of those areas identified by the faculty as being deficient prior to sitting for the next modular exam.
 - 3. Receive a 0% on any subsequent exam, if non-compliant with remediation.
 - The student who fails a 2nd unit exam or has an accumulated average less than 75% shall
 - 1. Meet with the teaching team.
 - 2. Develop and submit a personal learning contract that includes all items of deficiencies and specific plan for improving test success.
- 4.) The student who fails a 3rd unit exam or has an accumulated average less than 75% shall:
 - 1. Meet with the teaching team to consider withdrawal from the nursing program.
 - 2. If the drop date has passed, the student will meet with the teaching team regarding the possible failure of the nursing course.

5.) ALGORITHIM FOR DIAGNOSTIC EXAMS (ATI):

- 1. Refer to LVN Handbook for information.
- 2. Scores will be considered as a unit exam.

Clinical and Skills Laboratory Performance Grading:

- A. Clinical and skills laboratory performance will be determined on a satisfactory or unsatisfactory basis.
 - Receive one unsatisfactory in clinical/skills laboratory, complete a NLC referral a. (remediation) established by the instructor prior to the next clinical/skills laboratory.
 - If a second clinical/skills lab is "unsatisfactory", complete NLC referral (remediation) b. established by the instructor prior to the next clinical/skills lab.
 - Receive a third "unsatisfactory" in clinical/skills lab, student will meet with the teaching c. team to consider dismissal from the nursing course. Please bear in mind that two or three "unsatisfactory" clinical/skills lab performances could be received in one day.
 - A formal clinical evaluation will be conducted by the clinical instructor at the d. completion of each 4 week rotation. A comprehensive classroom and clinical evaluation will be

completed by the clinical instructor in conjunction with the team leader at the completion of the eight-week course.

- When a care plan is returned to a student with an unsatisfactory grade, the student is e. expected to correct the plan within the designated time frame and return it to the instructor. If a student fails to correct the care plan on time or if the returned plan continues to be unsatisfactory, it will be reflected as unsatisfactory performance for the rotation.
- Theory, clinical, and skills laboratory requirements must be satisfactorily completed independent of 4. each other in order to successfully complete the course.

D. Grade Components:

- Theory 5.
 - A maximum of six (6) Module exams will be given. e.
 - One comprehensive final exam will be given. f.
 - Other written assignments may be given at the discretion of the instructor. Written assignments g. will be assigned completion dates by the instructor. Materials handed in late may be given an "unsatisfactory" grade. Written assignment grades will be averaged in with other grades according to the grading scale policy.
 - All written assignments must be typewritten and follow APA format. h.
 - 6. Skills Laboratory
 - 3. All skills described later in this course must be satisfactorily demonstrated to the instructors or the Nursing Learning Center tutors by the dates designated on the schedule.
 - Clinical instructor may refer a student back to the skills lab if in his/her judgment more practice on a 4. skill is needed.
 - 7. Clinical
 - A Student Progress Report form will be given to each student at the beginning of the 5. course.
 - A performance assessment will be conducted at the completion of 4 weeks. 6.
 - A comprehensive evaluation will be conducted at the end of the class. 7.
- Pharmacological Dosage Calculation Exam:
 - Purpose: Because patient safety is the utmost priority, each student will be required to take and 1.)
- F.

successfully demonstrate competence (pass) a drug calculations exam each semester. Minimum requirements:

- a.) 10 25 questions / calculations appropriate to the level of each semester
- b.) Student must show their work
 - Pass with a score of 92 % or higher. The score is not included in the grade point average for the course as it is a pass/fail assignment.
 - Time limits assigned as appropriate to the number of questions.
- e.) Correct units must be stipulated to count as correct: i.e. ml/hr, units/hr, etc.
- 3.) The student is allowed three (3) attempts to pass
 - a) Students who do not pass:
 - (i) Must seek tutoring from faculty and /or math department and/or computerized software in the nursing learning center.
 - (ii) Cannot administer any medication in a clinical setting, except under the direct supervision of the instructor: ensuring the 5 rights, review of drug action, nursing considerations, calculations, rates, relevant labs and administration with the instructor present.
 - (iii) If the student is unsuccessful of the 3rd attempt, the student <u>cannot</u> progress to the next nursing course.

Attendance

Required language

2.)

c.)

d.)

- A student who fails to attend the first meeting of a class or does not complete the first mandatory activity of an online class will be dropped by the instructor as of the first official meeting of that class. Should readmission be desired, the student's status will be the same as that of any other student who desires to add a class. It is the student's responsibility to drop or officially withdraw from the class. See General Catalog for details.
- Regular attendance in all classes is expected of all students. A student whose continuous, unexcused absences exceed the number of hours the class is scheduled to meet per week may be dropped. For online courses, students who fail to complete required activities for two consecutive weeks may be considered to have excessive absences and may be dropped.
- Absences attributed to the representation of the college at officially approved events (conferences, contests, and field trips) will be counted as 'excused' absences.
- LVN students in the Imperial Valley College Associate Degree Nursing Program are expected to attend all classes and clinical practice assignments. Absences will be limited to the following for the semester:

 VN 132: 11.5 hours
- A student who reaches the maximum allowable number of hours absent will file a petition to remain in the nursing program. The student will meet with the teaching team to discuss the situation and will be considered for dismissal. If remediation is considered, the student will be required to match missed hours, in excess of the maximum allowable, with assigned hours of study. These assignments will be based upon the classroom and clinical objectives. The instructor(s) will determine the appropriate type of remediation.
- LVN students in the Imperial Valley College Vocational Nursing Program are expected to meet the attendance requirements approved by the Board of Vocational Nurse and Psychiatric Technician Examiners as posted on the bulletin board.
- Students who are late to class three times in any nursing course will be considered absent for one day. Class includes lecture and clinical.

Classroom Etiquette

- <u>Electronic Devices</u>: Cell phones and electronic devices must be turned off and put away during class, unless otherwise directed by the instructor. **Consider:** specifics for your class/program
- 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.
- <u>Disruptive Students</u>: 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.
- <u>Children in the classroom</u>: Due to college rules and state laws, no one who is not enrolled in the class may attend, including children.

Academic Honesty

- Required Language
 - <u>Plagiarism</u> 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.
 - <u>Cheating</u> 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 School 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 Help – Discretionary Section and Language

- Blackboard support center: http://bbcrm.edusupportcenter.com/ics/support/default.asp?deptID=8543
- Learning Labs: There are several 'labs' on campus to assist you through the use of computers, tutors, or a combination. Please consult your college map for the Math Lab, Reading & Writing Lab, and Study Skills Center (library). Please speak to the instructor about labs unique to your specific program.
- 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. The DSP&S office is located in Building 2100, telephone 760-355-6313, if you feel you need to be evaluated for educational accommodations.

Student Counseling and Health Services

Students have counseling and health services available, provided by the pre-paid Student Health Fee. We now also have a fulltime mental health counselor. For information see http://www.imperial.edu/students/student-health-center/. The IVC Student Health Center is located in the Health Science building in Room 2109, telephone 760-355-6310.

Student Rights and Responsibilities

Students have the right to experience a positive learning environment and due process. For further information regarding student rights and responsibilities, please refer to the IVC General Catalog available online at http://www.imperial.edu/index.php?option=com_docman&task=doc_download&gid=4516&Itemid=762

Information Literacy

: Imperial Valley College is dedicated to helping students skillfully discover, evaluate, and use information from all sources. Students can access tutorials at http://www.imperial.edu/courses-and-programs/divisions/arts-and-letters/library-department/info-lit-tutorials/

Anticipated Class Schedule / Calendar

Imperial Valley College Division of Nursing Education and Health Technologies SPRING 2016 VN 132 Class Schedule

DATE	DAY	TIME	DESCRIPTION	INSTRUCTOR	ASSIGN.	ROOM
4/18/16	Mon	6:45 -	ORIENTATION-	MORA		PMH
		15:30	VN132	ORTIZ		
			CLINICAL			
4/19/16	Tues	6:45 -	CLINICAL	MORA		PMH
,,		15:30		ORTIZ		
4/20/16	Wed	08:00-	MOD-A-1	MORA	Osborn: Ch.20 &21	2135
		10:30	NEURO - ADULT		(28 & 29)	
		11:30-				
4/21/16	Thur	12:40 08:00-	MOD-A-1	MORA	Osborn: Ch.20&21	2135
4/21/10	mur	10:30	NEURO – ADULT	IVIORA	(28 & 29)	2135
		10.50	NEONO ADOLI		(20 G 23)	
		11:30-	MOD-A-2	MORA		
		12:40	NEURO-PEDS		Ricci: 37 &43	
4/25/16	Mon	6:45 -	CLINICAL	MORA		PMH
		15:30		ORTIZ		
4/26/16	Tues	6:45 -	CLINICAL	MORA		PMH
		15:30		ORTIZ		
4/27/16	Wed	08:00-	MOD-A-2	MORA	Ricci: 37 &43	2135
		10:30	NEURO-PEDS			
		11:30-				
		12:40				
4/28/16	Thur	08:00-	QUIZ # 1 (MOD-A-1)	MORA		2135
		10:30		ORTIZ		
			MOD-A-3	ORTIZ	Osborn: Ch: 22,23,24	

		11:30- 12:40	NEURO- ADULT		(30, 31,32)	
5/2/16	Mon	6:45 - 15:30	CLINICAL	MORA ORTIZ		РМН
5/3/16	Tues	6:45 - 15:30	CLINICAL	MORA ORTIZ		PMH
5/4/16	Wed	08:00- 10:3011:3 0-12:40	MOD-A-3 NEURO-ADULT APP/NSG/PROCES	ORTIZ	Osborn: Ch: 22,23,24 (30, 31,32)	2135
5/5/16	Thur	08:00- 10:30 11:30- 12:40	QUIZ # 2 (MOD A-2)	MORA ORTIZ		2135
5/9/16	Mon	6:45 - 15:30	CLINICAL	MORA ORTIZ		PMH
5/10/16	Tues	6:45 - 15:30	CLINICAL	MORA ORTIZ		РМН
5/11/16	Wed	08:00- 10:30 11:30- 12:40	MOD-B RENAL	ORTIZ	Roth & Townsend Ch: 19 Osborn: Ch. 39 (47) Ricci: Ch. 42 Review: Fluid & Electrolytes	2135
5/12/16	Thur	08:00- 10:30 11:30- 12:40	QUIZ # 3 (MOD-A-3)	MORA ORTIZ		2135
5/16/16	Mon	6:45 - 15:30	CLINICAL	MORA ORTIZ		РМН
5/17/16	Tues	6:45 - 15:30	CLINICAL	MORA ORTIZ		РМН
5/18/16	Wed	08:00- 10:30	MOD – C ↑ GI	WEBSTER	Osborn: Ch. 36,37 (44,45) Ricci: Ch. 41 Roth & Townsend Ch: 20	2135
		11:30- 12:40	MOD - D Lower Gl	ORTIZ	Roth & Townsend Ch: 21 Review : Ricci Ch.41 Osborn:Ch.38 (46)	
5/19/16	Thur	08:00- 10:30	QUIZ # 4 (MOD –B)	MORA ORTIZ		2135
		11:30- 12:40	MOD- D LOWER GI	ORTIZ	Roth & Townsend Ch:21 Review : Ricci Ch.41 Osborn:Ch.38 (46)	
5/23/16	Mon	6:45 - 15:30	CLINICAL	MORA ORTIZ		РМН
5/24/16	Tues	6:45 – 15:30	CLINICAL	MORA ORTIZ		PMH
5/25/16	Wed	08:00- 10:30 11:30- 12:40	MOD- E INTEGUMENTARY SYSTEM	MORA	Osborn: Ch. 58,59,61 (65,66,68) Review Osborn Ch.60 (67) Ricci:45	2135
5/26/16	Thur	08:00- 10:30 11:30- 12:40	QUIZ # 5 (MOD C&D)-	WEBSTER		2135

5/30/16	Mon	6:45 -	CLINICAL	MORA	HOLIDAY	PMH
		15:30	HOLIDAY	ORTIZ		
5/31/16	Tues	6:45 – 15:30	CLINICAL	MORA ORTIZ		РМН
6/1/16	Wed	08:00- 10:30 11:30- 12:40	MOD-F PROFESSIONALISM	WEBSTER	VN HANDBOOK	2135
6/2/16	Thur	08:00- 10:30 11:30- 12:40	QUIZ # 6 (MOD –E) MOD. F PROFESSIONALISM (CONT.)	MORA ORTIZ WEBSTER	VN HANDBOOK	2135
6/7/16	Mon	6:45 - 15:30	CLINICAL	MORA	SKILLS CHECK-OFFS	IVC
6/8/16	Tues	6:45 – 15:30	CLINICAL	MORA ORTIZ	SKILLS CHECK-OFFS	IVC
6/9/16	Wed	08:00- 10:30 11:30- 12:40	FINAL-COMPREHENSIVE END OF VN 132	MORA ORTIZ		2135
6/10/16	Thur	ТВА				

Content Modules

Module A-I: Nursing Assessment and Diagnostic Testing of Patients with Problems of the Neurological System 1.

Statement of Purpose

The nervous system is complex and interrelated with all other bodily systems. Assessment of neurological function requires an expert knowledge of the brain, spinal cord and the actions of each nerve. Therefore it is necessary for nurses to have a knowledge base about the norms and be sensitive to any deviations. Because of the complexity of neurological function, very sophisticated technology is used for diagnostic studies. Nurses need to assist patients undergoing diagnostic procedures, and their families by ensuring they understand the procedures and by providing emotional support.

2. Terminology

Cerebral Cortex	Blood Brain Barrier
Corpus Callosum	Flexion
Discography	Cerebral Spinal Fluid (CSF)
Brain Scan	Hypertension
Diencephalon	Pyramidal
Angiography	Inward Rotation
Thalamus	Extrapyramidal
Subarachnoid	Outward Rotation
Hypothalamus	Basal Ganglia
Arteriogram	Rotation
Midbrain	Cranial Nerves
Myelogram	Opposition
Pons	Papilledema
Glasgow Coma Scale	Pronation
Medulla	Ptosis
Abduction	Supination
Adduction	Nystagmus
Cerebellum	Dorsiflexion
Extension	Tinnitus
Reticular Activating System (F	RAS) Plantar Flexion
Circumduction	Doll's Eyes
Eversion	Monoplegia
Passive Range of Motion	Active (ROM)
Quadraplegia	Hemiplegia
ROM Exercises	Paraplegia
Lethargic	Atrophy
Babinski Reflex	Hypertrophy
Comatose	Neurogenic Shock
Romberg Test	Stuporous
Electromyography	Obtunded

CAT Scan	Semicomatose
LP	ECHO EEG
EEG	Ventriculogram
3. Terminology	
Cerebral Cortex	Inward Rotation
Thalamus	Outward Rotation
Hypothalamus	Rotation
Midbrain	Opposition
Pons	Pronation
Supination	Medulla
Dorsiflexion	Cerebellum
Plantar Flexion	Cerebral Spinal Fluid (CSF)
Cranial Nerves	EEG
Eversion	Subarachnoid
Ptosis	Electromyography
Passive Range of Motion	(ROM) Active
Nystagmus	Arteriogram
Tinnitus	Scan
ROM Exercises	CAT, LP, EEG, ECHO
Monoplegia	Myelogram
Lethargic	Glasgow Coma Scale
Quadraplegia	Abduction
Atrophy	Adduction
Hemiplegia	Ventriculogram
Hypertrophy	Circumduction
Paraplegia	Babinski Reflex
Romberg Test	Extension
Comatose	Flexion
Stuporous	Hypertension
Obtunded	Semicomatose

3.1 Classroom Objectives

- Differentiate between neurological disorders affecting motor control versus that which affects sensory pathways. a.
- b. Explain the functioning of the sympathetic nervous system as compared to the parasympathetic nervous system.
- Describe the importance of physical assessment to the diagnosis of neurological dysfunction. c.
- d. Explain nursing interventions that provide emotional support to the patient and family during diagnostic testing.

3.2 Learning Activities

e.

- a. Review anatomy and physiology (Neurological System)
- Know terminology. b.
- Read current journal articles as assigned by instructor. c.
- d. Review computer assisted assignments on the neurological system.
 - Review: 1. Bates: Neurologic: Motor system and reflexes
 - 2. Bates: Neurologic Cranial Nerves & Senses
- f. List on a chart the most common diagnostic tests comparing their purpose and nursing implications.
- g. Discuss, in class, personal experiences in performing neurological assessments on previous patients.
- Discuss, in class, the psychological implications of the patient with a neurological dysfunction. h.
- Familiarize yourself with the hospital forms used in performing neurological assessments. i.
- Compare the different types of convulsive disorders and discuss the assessment and care of the j. patient experiencing a seizure.

3.3 References

- a.
- Osborn, <u>Medical-Surgical Nursing</u>, 2nd ed., Pearson, 2014 Roth & Townsend, <u>Nutrition & Diet Therapy</u>, 9th ed., Thompson b.
- Anatomy & Physiology text. c.

4. **Clinical Objectives**

- Assess assigned patients to determine the status of their neurological functioning. a.
- Observe and assist the physician in performing a neurological assessment. b.
- Prepare an assigned patient for neurological diagnostic testing, and observe test when possible c.
- Perform a neurological assessment on a patient with a head injury or a CVA. d.
- Complete a nursing care plan on a patient with a neurological dysfunction. e.
- f. Utilize the Glasgow Coma Scale in assessing a patient with neurological dysfunction.
- Complete neurological assessment forms and documentation on a patient with neurological dysfunction. q.
- 5. Skills Laboratory Requirements
- Perform a neurological assessment including: level of consciousness, Glasgow Coma Scale, motor function, a. reflexes, sensory function, and vital signs.
 - b. Review neurological assessment forms required by the hospitals.
- Module A-2: Application of the Nursing Process in Caring for Pediatric Patients with Common Health Problems of the Neurological System

1. <u>Statement of Purpose</u>

Unlike the other body systems, which grow rapidly after birth, the nervous system grows proportionately before birth. This module gives special emphasis to the congenital anomalies that can occur in the central nervous system as well as those injuries, tumors or other conditions that occur as the child matures. Both medical and surgical treatments are addressed. The nurse not only needs skill in observing and assessing clinical evidence of pediatric neurological dysfunction, but he/she must also develop skill in maintaining effective interpersonal relationships with parents and family members of the child.

2. Terminology Hydrocephalus Down's Syndrome Communicating Muscular Dystrophy Non-communicating **Reye Syndrome** Shunt Epilepsy Spina Bifida Occulta ICP (Intracranial Pressure) Meningocele Meningitis Myelomeningocele Encephalitis Minimal Brain Dysfunction Guillian-Barre Syndrome

3. <u>Classroom Objectives</u>

- a. Identify common congenital conditions that result in neurological problems.
- b. Discuss medical and surgical modalities and nursing intervention for common neurological conditions.
- c. Specify common infectious processes that result in neurological dysfunction.
- d. Explain pre and postoperative care of children having surgery for:
 - hydrocephalus and 2) meningocele.
- e. Differentiate mental retardation from minimal brain dysfunction including assessment, etiology, diagnosis, management, and common pharmacological agents used.
- f. Discuss cultural beliefs which will impact on nursing care of infants and children with neurological conditions.
- g. Describe the drug therapy, psychosocial and educational needs of a child with a seizure disorder.
- h. Compare the different types of convulsive disorders and discuss the assessment and nursing care of the child having a seizure.

Learning Activities

- a. Review LVN 120, Module G.
- b. Know terminology.
- c. View audio-visual materials on congenital anomalies of the neurological system, and other pediatric neurological system disorders or diseases.
- d. Review computer programs and read current articles as assigned by instructors.
- e. Develop a nursing care plan for a patient with a seizure disorder. Include drug therapy.
- f. List the common neurological congenital anomalies, their diagnosis, methods, management and nursing

interventions.

g. Discuss inflammatory disorders and the care of the child with meningitis.

References

a. Current assigned textbook

4. <u>Clinical Objectives</u>

- a. Provide nursing care to an infant or child with a neurological problem.
- b. Prepare a child and the family for a diagnostic procedure; observe when possible.
- c. Provide pre and postoperative nursing care for a pediatric patient having surgery for a neurological disorder.
- d. Assist physician with a lumbar puncture on a pediatric patient.
- e. Complete a nursing care plan for a patient with a neurological dysfunction.
- f. Administer medications (oral and parenteral) to a pediatric patient.

5. Skills Laboratory Requirements

- a. Continue with neurological assessments concentrating on pediatric patients.
- b. Discuss how some of the neurological testing can be adapted to pediatric patients.
- c. State the nurse's <u>role</u> in "seizure precautions".
- d. Demonstrate understanding of the nursing care of a comatose adult and pediatric patient.
 - 1) Eye care
 - 2) Core temperature
 - 3) Oral hygiene
 - 4) Level of consciousness

Module A-3: Application of the Nursing Process in Caring for Adult Patients with Common Health Problems of the Neurological System

1. Statement of Purpose

Patients with neurological dysfunction represent a tremendous challenge to nursing care because of the complexity of their symptoms, frequent involvement of other systems, and their prolonged rehabilitative course. Nurses need to have a thorough knowledge of pathophysiology of conditions affecting the brain and spinal cord. It is also the nurse's responsibility to be supportive and encourage patients and their families to have positive attitudes toward improvement. This module emphasizes common health problems of the neurological system in the adult patient. Special consideration is given to nursing management including psychological and cultural aspects of care.

2. <u>Terminology</u> -	
Cerebral Vascular Accident	Parkinson's Disease
(CVA)	Multiple Sclerosis
Cerebral Vascular Disease	Amyotrophic Lateral
Transient Ischemic Attacks	Sclerosis
(TIA)	Status Epilepticus
Epidural Hematoma	Dysphasia
Stroke	Aneurysm
Subdural Hematoma	Concussion
Extradural Hematoma	Contusion
Flaccid	Brow Sequard's Syndrome
Cublingtion	Sciatica
Subluxation	Ocialica
Burr Holes	Glioma
Burr Holes	Glioma
Burr Holes Meniere's Disease	Glioma Meningioma
Burr Holes Meniere's Disease Tic Douloureaux	Glioma Meningioma Craniotomy
Burr Holes Meniere's Disease Tic Douloureaux (Trigeminal Neuralgia)	Glioma Meningioma Craniotomy Craniectomy
Burr Holes Meniere's Disease Tic Douloureaux (Trigeminal Neuralgia) Bell's Palsy	Glioma Meningioma Craniotomy Craniectomy Tetanus
Burr Holes Meniere's Disease Tic Douloureaux (Trigeminal Neuralgia) Bell's Palsy Aphasia	Glioma Meningioma Craniotomy Craniectomy Tetanus Huntington's Chorea

3. Classroom Objectives

- a. Identify the special nursing needs of patients with neurological conditions.
- b. Discuss the psychological and emotional needs of patients with a neurological dysfunction; include the physiological and emotional needs of the family
- c. Describe the early and late clinical manifestations of increased intracranial pressure.
- d. Identify the multi-system needs of the unconscious patient.
- e. Identify the risk factors of stroke and discuss health teaching needs for stroke prevention.
- f. Describe possible infectious processes that result in neurological impairment.
- g. Compare the various types of stroke, their causes, clinical manifestations, and nursing management.
- h. Explain common pharmacological agents used in treating conditions of increased intracranial pressure.
- i. Explain the types of, and the <u>nursing management</u> of, the aphasic patient.
- j. Discuss the rehabilitation process of stroke patients with emphasis on their cultural attitudes and beliefs.
- k. Compare Parkinson's Disease and Multiple Sclerosis, their causes, clinical manifestations, drug therapy and nursing interventions.
- Describe brain tumors, their classification, clinical manifestations, diagnosis, and treatments.
- m. Describe the preventative aspect of nursing care for patients with spinal cord injury.
- n. Discuss the physical, psychosocial and rehabilitative needs of the paraplegic patient.
- o. Identify systemic alterations resulting from neurological dysfunction.

Learning Activities

- a. Know terminology.
- b. View and review computer programs on neurological conditions and dysfunctions as assigned.
- c. Read current articles as assigned by instructors.
- d. Using the nursing process, develop a nursing care plan for a patient who has had a stroke.
- e. Discuss, in class, the long term needs of the stroke patient and the <u>impact of the condition</u> on the family members.
- f. Outline common safety measures that could prevent head and spinal cord injuries.
- g. Discuss, in class, how cultural beliefs can effect rehabilitation and recovery of chronic or long term neurological conditions.
- h. Identify common diagnostic procedures used in diagnosis of neurological conditions.

References

- a. Current assigned texts
- b. Anatomy & Physiology text.

4. <u>Clinical Objectives</u>

- a. Provide nursing care for patients with a variety of neurological conditions.
- b. Prepare patients for diagnostic procedures, observe and assist when possible.
- c. Administer medications (oral and parenteral) to patients with neurological problems.
- d. Provide emotional support and encouragement appropriately to a stroke patient and his/her family.
- e. Prepare a teaching plan for a neurological patient and his/her family.
- f. Assess assigned patients for risk factors related to stroke and identify preventative measures.
- g. Observe treatment modalities in rehabilitation units of the hospital to assess the inter-disciplinary approach.
- h. Provide nursing care to the adult patient undergoing a surgical procedure for a neurological condition. (Include pre and postoperative care.)

5. Skills Laboratory Requirements

a. Continue with Neurological Assessment

References :

a. Current assigned texts

Module B: Application of the Nursing Process in Caring for Patients with Common Health Problems of the Renal System

1. <u>Statement of Purpose</u>

The urinary system has significant functions in the removal of metabolic wastes and in the regulation of fluid and electrolyte balance. Health problems that occur throughout the lifespan may interfere with normal urinary elimination. This module deals with the various congenital disorders, neurogenic disorders, urinary infections and renal failure that can occur across the ages. The nurse will learn the assessment skills necessary to identify actual and potential nursing problems and will develop the necessary skills to promote, maintain, or restore health.

2. Terminology

Polycystic Disease	Cutaneous Ureterostomy
Glomerulonephritis	Cystitis
Nephrosis	lleal Loop
Renal Calculi	Ileal Conduit
Stress Incontinence	Functional Obstruction
Prostatic Hypertrophy	Mechanical Obstruction
Neurogenic Bladder	Nephrectomy
Anuria	Marshal-Marchetti Procedure
Cystometrogram	Acute Renal Failure
Cystoscopy	Chronic Renal Failure
Dysuria	Azotemia
Frequency	CAPD (Continuous Ambulatory
Hematuria	Peritoneal Dialysis)
Hesitancy	Extrophy of the Bladder
Nocturia	Hemodialysis
Oliguria	Hydronephrosis
Polyuria	Uremia
Residual Urine	Urethritis
Retention w/ Overflow	Peritoneal Dialysis

IVP	Nephrotic Syndrome
Retrograde Pyelography	Ultrafiltration
Urgency	Urolithiasis
Voiding Cystourethrogram	Renal Transplantation
Closed Drainage	Acute Tubular Necrosis
Constant Irrigation	Creatinine
Pyelonephritis	
Renal Colic	
Blood Urea Nitrogen	

- 3. Classroom Objectives
 - a. Identify the common health problems of the infant and child with an alteration in urinary function.

b. Discuss nursing problems identified for the renal patient including; alterations in patterns of voiding; alterations in fluid and electrolyte balance; inadequate elimination of metabolic waste products.

- c. Describe the common health problems of the older adult affecting renal function.
- d. Identify the common health problems of the urinary system that occur across the lifespan involving inflammation, infection, neoplasia, lithiasis, immunological and degenerative disorders.

e. Discuss the various treatment modalities for patients experiencing alterations in urinary system function.

1)	Medical management:	medications, nutrition-	metabolic considerations
2)	Surgical interventions		

- 3) Renal dialysis: hemodialysis, peritoneal dialysis
- 4) Nursing interventions
- 5) Psychosocial lifestyle influences
- 6) Adaptation/maladaptation
- f. Identify the various diagnostic and laboratory tests commonly used to identify and assess renal function/dysfunction:
 - 1) Urinalysis
 - 2) Cystoscopy
 - 3) IVP, KUB/renal scan
 - 4) Retrograde pyelography
 - 5) Renal function tests
 - 6) Biopsy
- g. Describe the patient teaching needs for those experiencing renal dysfunction. Include the caring practices necessary to relieve anxiety and fear.

3.2 Learning Activities

a. Review anatomy and physiology of urinary

system.

b. Know terminology.

c. Review assigned computer programs, A-V

materials and journal articles.

d. Discuss, in class, a teaching plan for a patient

newly diagnosed as renal failure with a shunt

placement. Include:

Nutrition-metabolic needs
 Shunt care

3) Medications

4) Skin care

5) Psychological considerations

6) Lifestyle changes

e. Complete a nursing care plan for a client with renal

dysfunction.

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3.3 <u>References</u>
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- a. Anatomy and Physiology text.
- b. Osborn, <u>Medical-Surgical Nursing</u>, 2nd^t ed., Pearson,

2014

c. Roth & Townsend, <u>Nutrition & Diet Therapy</u> 9th ed.,

Thompson

d. Ricci, Maternity & Pediatric Nursing, 2nd ed., Walters

Review Growth & Development Chapters

e. Laboratory Tests & Diagnostic Procedures Text: Student's Choice

4. <u>Clinical Objectives</u>

- a. Provide nursing care for patients having renal dysfunction.
- Assist in the preparation of patients for diagnostic procedures.
- Administer medications to patients having renal dysfunction (oral & parenteral).
- d. Complete a nursing care plan for a patient having renal dysfunction.
- e. Obtain specimens for laboratory analysis as relevant to

patient condition.

- f. Provide nursing care for the patient having dialysis therapy.
- g. Demonstrate knowledge of the principles of infection control

for the protection of the patient, self and others.

5. Skills Laboratory Requirements

- a. Review:
 - 1) Providing a bedpan or urinal
 - 2) Collecting urine specimens
 - 3) Inserting urinary catheters
 - 4) Maintaining a closed system
 - 5) Irrigating urinary catheters
 - 6) Instilling medications via urinary catheters
 - 7) Maintaining continuous bladder irrigation
- b. Assessment of the urinary system
- c. Care of the patient with urinary diversion
- d. Urinary diversion stomal care

Reference:

Lynn, <u>Taylor's Clinical Nursing Skills</u>, 2nd ed., Walters

Kluwer/Lippincott Williams & Wilkins.

Module C: Application of the Nursing Process in Caring for Patients with Common Health Problems of the Upper Gastrointestinal System

1. <u>Statement of Purpose</u>

The upper gastrointestinal system facilitates nutrition with mechanisms for ingestion and digestion necessary to support growth and maintain metabolism throughout the lifespan. Common health problems may interfere with these

mechanisms. This module will provide the information and skills necessary for identifying actual and potential nursing problems in order to plan for health promotion, maintenance, and restoration.

2. <u>Terminology</u>

Cleft Lip

Cleft Palate

Pyloroplasty

Hepatitis

Esophageal Atresia	Cirrhosis
Tracheoesophageal Fistula	Ascites
Pyloric Stenosis	Hepatic Coma
Phenylketonuria (PKU)	Portal Hypertension
Biliary Atresia	Esophageal Varices
Celiac Disease	Pancreatitis
Failure to Thrive	Stomatitis
Peptic Ulcer Disease	Parotitis
Cholethiasis	Thrush
Cholecystitis	Herpes Simplex
Cholecystectomy	Gastritis
Hemigastrectomy	Hernia
Vagotomy	Gastric Analysis
Subtotal Gastric Resection	Gastroscopy
Billroth I	
Billroth II	

3. <u>Classroom Objectives</u>

3.1

- a. Identify the common conditions of the upper G.I. system that result in problems for the neonate, infant, and child.
- b. Discuss the malignancies common to the upper G.I. system; include the various treatment modalities.
- c. Identify the common conditions of the upper G.I. system that result in problems for the adult: peptic ulcer, pancreatitis, cholelithiasis, cholecystitis, hernias (umbilical, inguinal, hiatal).
- d. Discuss the medical and surgical treatment modalities for the common adult conditions of the upper G.I. system.
- e. Review cirrhosis and hepatitis related to:
 - 1) Etiology
 - 2) Nutrition
 - 3) Diagnostic and laboratory tests
 - 4) Pharmacology
 - 5) Nursing interventions
 - 6) Cultural, legal, ethical issues

7) Complications

- f. Describe the alterations in nutrition as exemplified by obesity vs anorexia nervosa.
- g. Identify the common conditions of the mouth.
- h. Discuss the health teaching needs of patients with altered upper G.I. system function.
- i. Describe the medical treatment modalities for patients experiencing upper G.I. system dysfunction. Include:
 - 1) Special diets
 - 2) Alternative feeding patterns
 - 3) Pharmacological agents
- j. Identify the various diagnostic tests used for patients with upper G.I. system dysfunction: Radiology, endoscopy, biopsies, gastric analysis, liver function studies.
- k. Plan nursing care for adults/children having common problems of the upper G.I. system.
- I. Plan nursing care for adults/children having surgical treatment of common upper G.I. system problems.

3.2 Learning Activities

	a.	Review anatomy and physiology of upper G.I. system.
	b.	Know terminology.
relation of	c. of the body	Review anatomy and physiology of gallbladder, pancreas, and liver and the systems.
dietary p	d. atterns.	Review nutritional needs throughout the lifespan including ethnic and religious
	e.	Plan care for a variety of patients (adult &children) having common problems of the upper gastrointestinal system.
	f.	Review assigned computer programs, A-V materials and journal articles.
		1. Bates, Abdominal Assessment

3.3 <u>References</u>

a.	Anatomy and Physiology text.
b. 2014	Osborn, Medical-Surgical Nursing, 2nd ^t ed., Pearson,
C.	Ricci, <u>Maternity & Pediatric Nursing</u> , 2nd ed., Walters htt Williams & Wilkins.
d.	Roth, <u>Nutrition & Diet Therapy</u> , 9 th ed., Thompson
e.	Laboratory Tests & Diagnostic Procedures:

Student choice

4. <u>Clinical Objectives</u>

- a. Provide nursing care for patients of all ages with a variety of upper G.I. system conditions.
- b. Prepare patients for diagnostic procedures.
- c. Administer medications to patients with upper G.I. system problems (oral & parenteral).
- d. Administer nutrition by alternative feeding routes as possible.
- e. Complete a nursing care plan for a patient with a dysfunction of the upper G.I. system.
- f. Assist with endoscopy, and other medical procedures as relevant to the patient's condition.

5. Skills Laboratory Requirements

- a. Review:
 - 1) Nutritional supplements
 - 2) Providing gastrostomy and tube feedings
- b. Perform abdominal assessment on adult, infant,

child.

- c. Administer and monitor provision of nutrition by alternative routes:
 - 1) J-tube feedings
 - 2) Gastrostomy feedings
 - 3) Feeding tubes

References:

Lynn, Taylor's Clinical Nursing Skills, 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins.

Module D: Application of the Nursing Process in Caring for Patients with Common Health Problems of the Lower Gastrointestinal System

1. <u>Statement of Purpose</u>

The lower gastrointestinal system (small intestine, large intestine, rectum) provides for absorption of fluids and outlet for solid wastes. Disruptions of the system occur across the lifespan and can be manifested by alterations in bowel elimination such as diarrhea and fluid loss or intestinal obstruction. The majority of common health problems occur in adulthood but the infant and the older adult are particularly vulnerable to the effects of fluid loss. The purpose of this module is to acquaint the nurse with the assessment skills necessary for determining actual or potential nursing problems of bowel elimination and provide information necessary to plan for health promotion, maintenance, or restoration; and to implement and evaluate appropriate nursing care.

2. Terminology

3.

Anus	Ulcerative Colitis
Barium Enema	Diverticulosis
Cecum	Diverticulitis
Colon	Peritonitis
Colonoscopy	Appendicitis
Constipation	Salmonellosis
Defecation	Diarrhea
Duodenum	Dysentary
Enteritis	Impaction
lleum	Ascites
Jejunum	
Melena	
Occult Blood	
Proctoscopy	
Rectum	
Sigmoidoscopy	
Ostomy	
Cecostomy	
Colostomy	
Double-barrel Ostomy	
End Ostomy	
lleostomy	
Intussusception	
Paralytic Ileus	
Imperforate Anus	
Hirschsprung's Disease	
Classroom Objectives	
3.1	
a. Discuss the common health p	roblems of the infant and child with lower G.I. dysfunction.

b. Explain the various diagnostic tests and treatment modalities common to lower G.I. dysfunction in the infant and child.

- c. Identify the various common health problems of the young adult with lower G.I. dysfunction. Focus especially on the medical and surgical inter- ventions used in treatment of ulcerative colitis.
- d. Describe the common health problems of the adult with lower G.I. dysfunction. Include: cancers and their diagnosis/treatment; diverticulosis/diverticulitis with treatment and tests/treatment of hemorrhoids.
- e. Identify the various common health problems that occur across the lifespan.
- f. Differentiate between those common health problems that are infectious and those that are not.
- g. Explain the various forms of intestinal obstruction.
- h. Discuss the treatment modalities for patients with lower G.I. dysfunction. Include: nutrition, surgical intervention, pharmacologic agents and nursing interventions.
- i. Explain the various common diagnostic tests used in assessment of lower G.I. dysfunction.

3.2 Learning Activities

- a. Review anatomy and physiology of lower G.I. system.
- b. Know terminology.
- c. Prepare a teaching plan for a patient with lower G.I. dysfunction. Include: nutrition, medical treatment, medications.
- d. Complete a nursing care plan for pediatric and adult patients having a medical or surgical dysfunction of the lower gastrointestinal tract.
- e. Review assigned computer programs, A-V materials and journal articles.

3.3 <u>References</u>

c.

- a. Anatomy and Physiology text.
- b. Osborn, Medical-Surgical Nursing, 2nd^t ed., Pearson, 2014
 - Roth, Nutrition & Diet Therapy, 9th ed., Thompson
 - d. Ricci, Maternity & Pediatric Nursing, 2nd ed., Walters Kluwer/Lippincott Williams & Wilkins,
 - e. Laboratory Tests & Diagnostic Procedures: Student Choice

4. <u>Clinical Objectives</u>

- a. Provide nursing care for patients with a variety of lower G.I. system conditions.
- b. Assist in the preparation of patients for diagnostic procedures.
- c. Administer medications to patients with lower G.I. system problems (oral).
- d. Complete a nursing care plan on a patient with a dysfunction of the lower G.I. system.
- e. Administer nutrition by alternative means as possible.
- f. Obtain specimens as relevant to the patient's condition.
- g. Demonstrate knowledge of infection control principles for the protection of the patient, self and others.

- a. Review:
 - 1) Collecting Stool Specimens
 - 2) Inserting Rectal Tubes
 - 3) Enemas .
- b. Establishing Regular Bowel Evacuation

References

Current assigned text

LVN 132

Module D Supplement

SMALL INTESTINE

Three Division

Duodenum (10 inches)

Jejunum (8 feet)

lleum (12 feet)

1) Villi-finger-like projection

(Mucosa and Submucosa)

Increase absorption area 600 x

2) Ileocecal valve-terminal end of lleum at junction of cecum and colon. Controls flow of contents into large intestine, prevents reflux in to ileum.

- 3) 90% of nutrients and 50% H₂O and Electrolytes are absorbed in jejunum (NG⁺ K⁺ C1⁻ HCO³ MqH PO⁴)
- 4) Water-soluble vitamins (C&B complex) absorption occurs in all parts of small intestine
- 1) Iron-uptake all areas
- 2) Vitamin B12 requires intrinsic factor absorbed in ileum

3) Fat-soluble vitamin (A,D,E,K) require bile salts absorbed in jejunum

4) Ca++ requires Vitamin D absorbed in duodenum

LARGE INTESTINE

Division

Cecum

Ascending Colon

Transverse Colon

Descending Colon

Sigmoid Colon

Rectum

Two Flexures

Hepatic

Splenic

Tow Sphincters

lleocecal

Anal

FUNCTION - ABSORPTION OF:

1) H₂0 + Electrolytes NA⁺ and CI absorbed

 $K^{\scriptscriptstyle +}$ and $HC0_{\scriptscriptstyle 3}$ secreted

- 2) Urea breakdown blood urea metabolic waste product is broken down to NH₃ by mucosal cells of colon
- 3) Bacteria breakdown cellulose and synthesize vitamins (folic acid, riboflavin, vitamin K, Nicotinic acid)
- 4) Factors that enhance colonic motility High residue diet

Irritation of colon

5) Factors that inhibit, motility Low residue diet

Anticholinergic drugs-Atropine, Propanthaline

GALL BLADDER

- ! Serves as passageway for bile
- ! From liver intestine
- ! Regulates bile flow
- ! Collects conc. and stores bile
- ! Bile responsible for emulsification of fats
- ! Major bile pigment is bilirubin
- ! Bile moves form liver canaliculi

----> Hepatic duct ----> cystic duct to G.B. for storage

Stimulation GB secretes bile into cystic duct ----> common duct ----> duodenum

PANCREAS

Pancreatic duct joins common bile duct before entrance into duodenum - Ampulla of Vater

Pancreatic secretion

A. Exocrine

Acinar cells secrete a high

Concentration of NaHc0₃

H₂0 Ha⁺ K⁺ and digestive

Enzymes (Lipase, Amylase,

Trypsin, Ribonuclease)

B. Endocrine

Beta cells-secrete insulin

Alpha cells secrete glucagon

- C. Control of secretion
 - 1. Vagal-parasympathetic impulse result in moderate secretion of pancreatic enzymes during cephalic and gastric phases
 - 2. Hormonal-entrance of food into small intestine stimulates pancreatic secretions via hormonal influence (secretion, cholecystokinin)

LIVER DYSFUNCTION

Edema due to hypoalbuminemia results from Hepatic production of serum Albumin

GI, bleeding, bruising, nosebleed, bleeding wounds form inability of liver cells to use vitamin K, A, D, E

Abnormal glucose metabolism.

Hyperglycemia after meals and hypoglycemia after fasting because hepatic glycogen reserves and gluconeogenesis

Decrease metabolization of Drugs

Decrease metabolism of estrogen ----> gynecomastia testicular atrophy, loss of pubic hair, menstrual irregularities spider angiomata, reddened palms

Bilirubin not converted into urobilin regurgitated back into blood

Module E: Application of the Nursing Process in Caring for Patients with Common Health Problems of the Integumentary System

1. <u>Statement of Purpose</u>

Common health problems of the integumentary system occur across the lifespan. They often cause disfigurement but more often are the cause of discomfort and embarrassment. The discomfort and embarrassment can result in social isolation. This module presents concepts to help the nurse with the prevention, maintenance, and restoration of an intact integumentary system in patients throughout the lifespan.

2. <u>Terminology</u>

Acne	Atopic Dermatitis
Seborrheic Dermatitis	Dermatitis
Psoriasis	Medicamentosa
Eczema	Folliculitis
Impetigo	Melanoma
Pemphigus	
Furuncles	Macule
Carbuncles	Papule
Cellulitis	Nodule
Candidiasis	Vesicle
Thrush	Patch
Intertrigo	Plaque
Ringworm	Tumor
Warts	Bulla
Herpes Simplex	Wheal
Herpes Zoster	Scale
Varicella	Fissure
Pediculosis	Scar (Cicatrix)
Scabies	Ulcer

Lupus	Keloid
Squamous Cell Carcinoma	Petechiae
Leukoplakia	Pruritus
	Urticaria

3. <u>Classroom Objectives</u>

3.1

- a. Discuss the alterations in skin integrity resulting from inflammatory and/or allergic skin dysfunctions. Include:
 - 1) Acne
 - 2) Seborrhea
 - 3) Psoriasis
 - 4) Eczema
 - 5) Contact, atopic, seborrheic dermatitis
- b. Identify the symptoms of the following skin infections: impetigo, pemphigus, furuncles, carbuncles, cellulitis.
- c. Explain the nursing interventions involved in the care of skin infections.
- d. Differentiate between skin inflammation due to bacteria, virus, fungi and paracites. Include:
 - 1) Causitive organisms
 - 2) Mode of transmission
 - 3) Treatment modality
 - e. Explain the nursing responsibilities involved when a patient has a parasitic invasion of the integumentary system.
- f. Discuss the various diagnostic tools and tests used in the diagnosis of diseases of the integumentum.
 - g. Explain the importance of patient and/or family teaching in the treatment of common problems of the integumentary system.
 - h. Differentiate between the common skin carcinomas: the etiology, clinical symptoms and medical and surgical management.

3.2 Learning Activities

- a. Review anatomy and physiology of the integumentary system.
 - b. Know terminology.
 - c. Review audio-visual material and complete computer programs on problems of the integumentary system as

assigned.

- d. Complete a nursing care plan for an adult and child with a skin disease problem. Include:
 - 1) Physical assessment
 - 2) Diagnostic tests
 - 3) Nursing interventions: medications, procedures,

nutrition

- 4) Support system--interpersonal
- 5) Teaching/learning needs
- 6) Developmental needs

3.3 <u>References</u>

a. Osborn, Medical-Surgical Nursing, 2ndt ed., Pearson,

2014 Dath Nutri

- b. Roth, Nutrition & Diet Therapy, 9th ed., Thompson
- c. Anatomy and Physiology text.

4. <u>Clinical Objectives</u>

- a. Perform a physical assessment on an assigned patient paying particular attention to the integumentary system.
- b. Complete a nursing care plan on a patient with a common health problem of the integumentary system.

5. Skills Laboratory Requirements

- a. Review:
 - 1) Maintaining Skin Integrity
 - 2) Hair Care
 - 3) Perineal and Genital Care
 - 4) Foot Care
 - 5) Application of Medications to the Skin
 - 6) Treatment of pediculosis
- b. Perform physical assessment on the integumentary system of the adult, infant, and child.

References

Current assigned text

Module F: Professionalism: The Role of the RN and LVN as Members of the Health Team

1. <u>Statement of Purpose</u>

This module will acquaint the nurse with an understanding of the roles of the various members of the health care delivery system. The RN, LVN, and NA have very definite roles within the health care team. The boundaries of these roles may seem to be somewhat blurred, but there are very definite distinctions according to the Nursing Practice Acts of the various states. Both the American Nurses' Association and the National League for Nursing have issued statements regarding basic entry education for practice for the professional nurse. Competency has become an important issue. The roles of the RN, LVN, and NA are interdependent and account ability is an important concern.

2. <u>Terminology</u>

State Nurse Practice Acts

Clinical Specialist

Professional Nursing

Nurse Clinician

Technical Nursing

Nurse Practitioner

Vocational Nursing

Professional Role

Competency Role

Accountability

Nursing Research

Licensure

Standards of Nursing Practice

Clinical Career Ladder

3. <u>Classroom Objectives</u>

3.1 a. Review the individual roles of the RN, LVN, and NA as they

interrelate with one another.

- b. Define accountability, liability, negligence, and malpractice.
- c. Discuss the ANA Position Paper on basic education.

d. Describe the concept of competency as it relates to the ability of

a new graduate entering into practice.

- e. Briefly review the various educational programs available for preparation as a registered nurse; as a vocational nurse.
- f. Discuss legal aspects of nursing practice.

3.2 Learning Activities

- a. Review the Nursing Practice Acts for the State of California and the history of laws affecting practice for the RN and LVN.
- b. Know terminology.
- c. Discuss, in class, the history of Associate Degree Nursing, the current issues related to entry into practice, and educational mobility.
- d. Identify changes in society, economics, and technology which affect the nurse's role.
- e. Differentiate between health promotion, and prevention of illness related to the role of the nurse in modern health care management.
- f. Discuss the importance of the nursing process, nursing theory, and nursing research in clinical nursing practice.
- g. Review nursing antecedence.
- h. Discuss the changing environments in which the nurse has practiced historically and is practicing
- today.
- i. Explain the significance of the expanded scope of practice for nurses.
- j. Discuss Standards of Nursing Practice.
- k. Review laws affecting nursing practice.

3.3 <u>References</u>

- a. BRN Rules and Regs.
- b. BVN Rules and Regs.
- e. Vocational Nursing Program Student Handbook (Current)

4. <u>Clinical Objectives</u>

None

None