Basic Course Information

Semester	Fall 2016	Instructor Name	Roberta Webster	
Course Title & #	VN 110 Introduction to Patient Care I	Email	roberta.webster@im perial.edu	
CRN#	10996	Webpage (optional)		
Room	2135	Office	2125	
Class Dates	08/15/16-10/6/16	Office Hours	MT 0630-0700, 1200-1300	
Class Days & Times	Mon. Tues. 0645-1500 (Clinical) Wed. Thurs. 0800-1205 (Lecture)	Office Phone #	760-355-6549	
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Course Description

In VN 110, Introduction to Patient Care 1, the student is introduced to the Imperial Valley College Nursing Program. Responsibilities of students and faculty are thoroughly discussed. The nursing process is presented as a dynamic problem solving evidence-based methodology designed to assist nurses to provide basic nursing care to clients with common well defined health problems. Concepts of the health-illness continuum and common disruptions to wellness are presented with appropriate evidence based nursing interventions discussed. Communication skills necessary for interaction with peers, instructors and patients are emphasized. Theory and skills basic to the provision of safe evidence based nursing care are introduced in the classroom and the skills laboratory. Components of the nursing process are studied. Parameters of health based on evidence based practice are defined and the physical and psychological needs of the normal individual explored.

Student Learning Outcomes

- Demonstrate correctly and safely all principles of medication administration including documentation in simulated client care situations.
- 2. Demonstrate respect and sensitivity for professional role through appropriate behavior, being prompt for clinical experience, meetings, learning activities, class, and assignment deadlines
- 3. Demonstrate knowledge appropriate to practice setting and level of learning in a paper or clinical assignment for VN 110
- 4. By the conclusion of VN 110 student will successfully identify subjective and objective data as it relates to nursing diagnosis.
- 5. Student will successfully demonstrate correct body mechanics to insure safety of self and clients in simulated client care situations.

Course Objectives

Explain the philosophy, objectives and logistics of the Imperial Valley Nursing Program.

- 1. Differentiate between the roles of the health aide, vocational nurse and the registered nurse.
- 2. Apply principles of medical asepsis to simulated and actual client care situations.
- 3. Use the nursing process to plan evidence based care for simulated client situation.
- 4. Relate implications of the health-illness continuum to nursing.
- 5. Apply principles of basic hygiene to client care.
- 6. Identify selected client reactions related to hospitalization.
- 7. Utilize correct body mechanics to insure safety of self and clients.
- 8. Apply principles of Standard Precautions to simulated and actual client care situations.
- 9. Explain principles underlying concepts of activity and rest.
- 10. Identify basic nutritional needs throughout the lifespan.
- 11. Relate nursing interventions to the ethnic/cultural environment of the community.
- 12. Use the communication process in simulated and actual situations.
- Apply principles of medication administration (not IV's) and glucometer testing to simulated and client care situations.
- 14. Identify legal/ethical constraints and institutional policies in reporting and recording client information.
- 15. Relate the principles of a safe and therapeutic environment to simulated and actual client care situations

Content Modules:

Module A: Imperial Valley College Nursing Program/Overview of the Health-Illness Continuum

1. Statement of Purpose

Man lives in a state somewhere between health and illness as defined by a variety of authors. The purpose of this module is to assist the student to become familiar with the many aspects that impact on an individual's health. Human needs, growth and development and social & cultural dimensions are viewed in terms of how they influence nursing care.

2. Terminology

Homeostasis	Problem	Ethnocentrism	Holism
Culture	Suchman	Nursing Process	Dunn
Maturation	Continuum	Cultural Sensitivity	Need
Health	Maslow	Cultural Diversity	Nursing
Illness	Advocacy	Teaching/Learning	

3. Classroom Content

Classroom Objectives

- a. Explain current concepts and theories about health and illness.
- b. Discuss the various dimensions of health with the emphasis on spirituality
- c. Describe the relationship between age and concepts of health and
- d. Describe the relationship between culture and concepts of health and illness.
- e. Describe the relationship between economic & social status & the concepts of health and illness.
- f. Explain how human needs impact on the plan of nursing care designed for each individual.
- g. Discuss the nurse-patient relationship in terms of health and illness.
- h. Discuss the nurse's needs in a well and an ill environment.
- I Discuss the philosophy and conceptual framework upon which the curriculum is based.
- j. Discuss various philosophies of nursing.
- k. Discuss the Imperial Valley College Nursing Program including the conceptual framework and philosophy

Learning Activities

- a. Know terminology
- b. Read assigned chapters in Kozier, Fundamentals of Nursing.
- c. Be prepared to discuss an experience you are aware of that demonstrates age, culture or socioeconomic status as it relates to wellness or illness behavior.
- d. Write a 100 word statement on your impression of nursing at this time. Include your goals as a nurse.
- e. Complete an orientation to the Nursing Learning Center.
- f. Discuss the philosophy and conceptual framework of the program.
- g. Read the assigned pages in <u>Taber's Cyc lopedic Medic al Dict ionary</u>.

References

- a. Kozier, Fundamentals of Nursing
- b. Handout #1
- c. Taber's Cyc lopedic Medic al Dic tionary

4. Clinical Objectives

NONE

5. Skills Laboratory Requirements

Required Skills: Medical Asepsis

- a. Handwashing
- b. Temperature
 - 1) oral
 - 2) rectal
 - 3) axillary
 - 4) electronic
- c. Pulse
 - 1) apical

2) radial

d. Respiration

e. Blood Pressure

Self-Review Skills

NONE

Skills Terminology

Blood Pressure	Respiration	<u>Temperature</u>	<u>Pulse</u>
Antecubital space	Apnea	Axilla	Arrhythmia
Auscultation	Dyspnea	Centigrade	Bradycardia
Cardiac Output	Cheyne-Stokes	Fahrenheit	Bounding
Diastole	Eupnea	Diaphoresis	Intermittent
Systole	Hyperpnea	Febrile	Pulse deficit
Hypertension	Orthopnea	Hypothalamus	Tachycardia
Hypotension	Shallow	Vasoconstriction	Weak, thready
Pulse pressure	Stertorous	Vasodilation	
Korotkoff sounds	Tachypnea		

Skills Laboratory Objectives

See Lynn,, Taylor's Clinical Nursing Skills as assigned

References

a. Lynn, Taylor's Clinical Nursing Skills

b. Kozier, Fundamentals of Nursing

c. Videotapes and computer software as assigned

Module B: Overview of the Nursing Process

1. Statement of Purpose

This module presents an overview of a systematic approach to writing a nursing care plan. In order for nurses to adequately assess, diagnose, plan, implement, and evaluate care given to an individual or a group of patients, certain decisions must be made. The purpose of this module is to introduce and summarize the total process required to design quality patient care plans. Concept Mapping will be introduced.

2. <u>Terminology</u>

Assessment Data Clustering Long & short term goals

Planning Nursing diagnosis Norms

Analysis Data collection Nursing intervention

ImplementationNursing historyClient NeedEvaluationExpected outcomeConcept Map

3. <u>Classroom Content</u>

Classroom Objectives

- a. Describe the five components of the nursing process.
- b. Describe a variety of assessment methods.
- c. Differentiate subjective and objective data.
- d. Relate nursing history to planning patient care.
- e. Analyze collected data to arrive at a nursing diagnosis.
- f. Develop a care plan based on assessment and nursing diagnosis of a simulated patient care situation.
- g. Set priorities of care based on assessed data and nursing diagnosis.
- h. Discuss long and short term goals for acute care patients; long term care patients.
- i. Explain significance of evaluation procedures.
- j. Discuss sample care plan developed in class

4. **Learning Activities**

- Know terminology.
- b. Read assigned chapters in Kozier, Fundamentals of Nursing
- Read assigned chapters in Doenges, et al., <u>Applying Nursing Process and Nursing Diagnosis</u>. c.
- d. Using IVC format, do a care plan on a simulated patient care situation.
- e. Read additional readings as assigned.
- View videotapes as assigned & complete computer software as assigned. f.

5. References

- .Kozier, Fundamentals of Nursing a.
- b. Doenges, et al., <u>Applying Nursing Process and Nursing Diagnosis.</u>
- c. Additional reading as assigned.
- Videotapes as assigned/computer software as assigned. d..
- Doenges, et al, <u>Nursing Care Plans & Documentation</u>. e.

6. Clinical Objectives:

NONE

7. **Skills Laboratory Requirements**

Required Skills: Skin Integrity

- Bathing a Client
- b. Oral Hygiene
 - (1) conscious patient
 - (2) unconscious patient
 - (3) patient with dentures
- Hair care c.
 - (1) combing
 - (2) shampooing
- d. Perineal/Genital Care
- Eve Care e.
- Ear Care f.
- g. **Foot Care**
- h. **Back Care**
- i. Making a bed
 - (1) unoccupied/surgical
 - (2) occupied
- Providing bedpan/urinal j.
- Self Review Skills 8.
- Medical Asepsis a.
- Handwashing b.

8. Skills Terminology

Distal	Back rub	Lacrimal duct	Proximal
Lacrimal fluid	Dermis	Supine	Meatus
Epidermis	Necrosis	Anus	Hypodermis
Blanching	Foreskin	Mucous membrane	Cachexia
Hygiene	Keratosis	Buttocks	Integumentary system
Fissure	Glans	Perspiration	Ischemia

Perineum Tepid Canthus Labia

Smegma Prone Excoriated

9. Skills Laboratory Objectives: See Lynn, Taylor's Clinical Nursing Skills

10. References

Lynn, Taylor's Clinic al Nurs ing Sk il Is

- b. Kozier, Fundamentals of Nursing
- Videotapes and computer software as assigned.

Module C: Principles of Standard Precautions

Statement of Purpose

This module presents an overview of a systematic approach to writing a nursing care plan. In order for nurses to adequately assess, diagnose, plan, implement, and evaluate care given to an individual or a group of patients, certain decisions must be made. The purpose of this module is to introduce and summarize the total process required to design quality patient care plans. Concept Mapping will be introduced.

2. Terminology

Assessment Data Clustering Long & short term goals

Planning Nursing diagnosis Norms

Analysis Data collection Nursing intervention

Implementation Nursing history Client Need

Evaluation Expected outcome Concept Map

3. Classroom Content

Classroom Objectives

- a. Describe the five components of the nursing process.
- b. Describe a variety of assessment methods.
- c. Differentiate subjective and objective data.
- d. Relate nursing history to planning patient care.
- e. Analyze collected data to arrive at a nursing diagnosis.
- f. Develop a care plan based on assessment and nursing diagnosis of a simulated patient care situation.
- g. Set priorities of care based on assessed data and nursing diagnosis.
- h. Discuss long and short term goals for acute care patients; long term care patients.
- i. Explain significance of evaluation procedures.
- j. Discuss sample care plan developed in class

4. <u>Learning Activities</u>

- a. Know terminology.
- b. Read assigned chapters in Kozier, Fundamentals of Nursing
- c. Read assigned chapters in Doenges, et al., <u>Applying Nursing Process and Nursing Diagnosis</u>.
- d. Using IVC format, do a care plan on a simulated patient care situation.
- e. Read additional readings as assigned.
- f View videotapes as assigned & complete computer software as assigned.

5. <u>References</u>

- a. Kozier, Fundamentals of Nursing
- b. Doenges, et al., <u>Applying Nursing Process and Nursing Diagnosis.</u>
- c. Additional reading as assigned.
- d. Videotapes as assigned/computer software as assigned.
- e. Doenges, et al, Nursing Care Plans & Documentation.

6.. <u>Clinical Objectives: NONE</u>

7. <u>Skills Laboratory Requirements</u>

Required Skills: Skin Integrity

- a. Bathing a Client
- b. Oral Hygiene
 - (1) conscious patient
 - (2) unconscious patient
 - (3) patient with dentures
- c. Hair care
 - (1) combing
 - (2) shampooing
- d. Perineal/Genital Care

- e. Eye Care
- f. Ear Care
- g. Foot Care
- h. Back Care
- i. Making a bed
 - (1) unoccupied/surgical
 - (2) occupied
- j. Providing bedpan/urinal

8. <u>Self Review Skills</u>

- a. Medical Asepsis
- b. Handwashing

9. Skills Terminology

Distal Back rub Lacrimal duct Proximal Lacrimal fluid Meatus **Dermis** Supine **Epidermis** Necrosis Anus Hypodermis Cachexia Blanching Foreskin Mucous membrane

Hygiene Keratosis Buttocks Integumentary system

Fissure Glans Perspiration Ischemia
Tepid Canthus Perineum Labia

Smegma Prone Excoriate

10. <u>Skills Laboratory Objectives</u>

See Lynn, <u>Taylor's Clinical Nursing Skills</u>

11. References

- a. Lynn, Taylor's Cli nic al Nurs ing Sk ills
- b. Kozier, Fundamentals of Nursing
- c. Videotapes and computer software as assigned.

Module D: Principles of Activity and Exercise

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

The concepts described in this module are designed to acquaint the student with the importance of exercise and activity in the maintenance and restoration of health. Specific instruction on activities that encourages mobility and prevents the many consequences of immobility are presented. The impact of immobility on all body systems is stressed.

2. <u>Terminology</u>

Hyperextension Abduction Spasticity Flexion Adduction Extension Pronation Fowler's Position Supination Proximal Atrophy Atony Distal Tonus Footdrop Circumduction Dorsal flexion Plantar flexion Line of gravity Center of gravity **Body Mechanics** Isometric exercises Isotonic exercises Contracture

Inward Rotation/Inversion Outward Rotation/Inversion

Classroom Content

Classroom Objectives

- a. Discuss the value of exercise to the maintenance and/or restoration of muscle tone.
- b. Describe the effects of immobility on the body systems for clients across the lifespan.
- c. Explain current medical thinking regarding the value of early ambulation in the recovery of patients with acute or chronic illnesses.
- d. Discuss effects of leisure time or recreational activities on the recovery of patients with acute or chronic illness.
- e. Explain the legal implications of activities & exercise to the nurse; the institution.

- f. Discuss principles and elements of negligence and malpractice.
- g. Discuss sample care plan for a client with impaired mobility including patient education.

4. <u>Learning Activities</u>

- a. Know terminology
- b. Read assigned chapters in Kozier, Fundamentals of Nursing
- c. Read assigned chapters in Lynn, Taylor's Clinical Nursing Skills
- d. Class discussion on types and appropriateness of leisure time or recreational activities.
- e. Class discussion on legal responsibilities of the nurse.
- f. View videotapes as assigned.
- g. Read additional readings as assigned.

5. <u>References</u>

- a. Kozier, Fundamentals of Nursing
- b. Lynn, <u>T aylor's C linical Nurs ing Skills</u>
- c. Additional readings as assigned
- 6. <u>Clinical Objectives: NONE</u>
- 7.. <u>Skills Laboratory Requirements</u>

Required Skills: Body Mechanics

- a..Turning/Positioning
 - 1) Sidelying
 - 2) supine
 - 3) log rolling
 - 4) protective prone
 - 5) Fowlers
- b. ROM
- c. Patient Transfers
 - 1) bed to chair pivot
 - 2) Hoyer
- d. Ambulation
- 1) with 1 assist
- 2) with 2 assist
- 3) with walker/crutches/cane
 - e. Restraints
- 1) extremity
- 2) vest
- 8. <u>Self-Review Skills: NONE</u>
- 9. <u>Skills Terminology</u>

See section 2 (Terminology)

10. <u>Skills Laboratory Objectives</u>

See Lynn, Taylor's Clinical Nursing Skills

- 11. References
 - a. Kozier, Fundamentals of Nursing
 - b. Lynn, <u>Taylor's Clinical Nursing Skills</u>
 - c. Videos and articles as assigned

1. Statement of Purpose

In Module D the value of activity and exercise was stressed. Another essential component of patient care is comfort, rest and sleep. In this module the need for evidenced based nursing care that promotes comfort and sleep is emphasized. Although drug therapy is available for many kinds of pain, the essential ingredient of patient comfort continues to be high quality evidenced based nursing care. The value of sleep is still being researched. Nursing care that recognizes the value of measures that promote comfort, rest and sleep is the focus of this module.

2. Terminology

REM	Insomnia	Exacerbation	NREM	Hypnotic
Enuresis	Sleep Apnea	Endorphins	Diurnal enuresis	
Somatic	Placebo	Nocturnal enuresis	Somnambulism	
Pain	Hypnosis	Autohypnosis	Narcolepsy	TENS

3. <u>Classroom Content</u>

Classroom Objectives

- a. Explain the importance of a balance between rest & activity in clients of all ages.
- b. Describe the stages of sleep and their physiological manifestation.
- c. Describe assessment techniques used to determine a client's need for rest and/or sleep.
- d. Explain nursing actions that promote rest & sleep in clients of all ages.
- e. Describe how prolonged pain reduces a client's capacity to maintain homeostasis.
- f. Discuss non-verbal assessment clues that give a nurse data regarding the degree of a client of any age experiencing pain.
- g. Describe nursing interventions, including drug use, that help
 - 1) remove pain stimulus
 - 2) reduce reaction of the pain receptors
 - 3) block pain perception
 - 4) alter pain perception
 - 5) alter the interpretation and responses to pain
- h. Discuss the relationship between pain and anxiety and how the nurse can interrupt that cycle.
- i. Discuss sample care plan for a client with an alteration in sleep.
- j. Discuss care plan on pain.

4. <u>Learning Activities</u>

- a. Know terminology
- b. Read assigned chapters in Kozier, Fundamentals of Nursing
- c. Do relaxation exercises in small groups.
- d. Practice assessment of rest and comfort needs on a peer.
- e. In class, discuss non-verbal clues often seen with persons who have:
 - 1) acute pain
 - 2) chronic pain
- f. Read assigned chapters in Lynn, <u>T aylo r's C linical Nurs ing Skills</u>
- g. Read articles as assigned.
- h. View videotapes/computer assignments as assigned

5. <u>References</u>

- a. Kozier, Fundamentals of Nursing
- b. Lynn, <u>T aylor's C linical Nurs ing Skills</u>
- c. Videos and articles as assigned

6. <u>Clinical Objectives: NONE</u>

7. <u>Skills Laboratory Requirements</u>

Required Skills: Bandaging/Binders

- a. Bandages
 - 1) figure eight

- 2) circular
- 3) spiral
- 4) shrink wrap/stump bandage
- b. Binders
 - scultetus
 elastic
- c. T.E.D hose
- d. Slings

8. <u>Self-Review Skills</u>

- a. Body Mechanics
- b. Positioning of Patients

9. <u>Skills Laboratory Terminology</u>

Bandage Antiembolism stockings (T.E.D Hose)

Binder Sling Shrink wrap Scultetus binder

10. <u>Skills Laboratory Objectives</u>

See Lynn, Taylor's Clinical Nursing Skills

11. References

- a. Kozier, Fundamentals of Nursing
- b. Lynn, <u>T aylor's C linical Nursing Skills</u>
- c. Videos and articles as assigned

Module F: Basic Nutritional Needs through the Lifespan

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

In order to live we must eat food. However, it is not the quantity of food alone which determines if we are well nourished. It is important to select widely and wisely form our food supply to insure adequate amounts of the major nutrients. Everyone needs the same nutrients throughout life but in differing amounts. Proportionately greater amounts of most nutrients are required for growth than for maintenance of the body once growth is completed. Large people need more energy and nutrients than small people, boys and men need more than girls and women. Active people require more food energy than inactive ones. Young people require more food energy than the elderly. People recovering from illness have different nutrient needs than healthy people. The purpose of this module is to increase the student's understanding of the importance of nutrition on health and illness throughout the lifespan.

2. <u>Terminology</u>

Absorption	Food habits	Fatty Acid	Basal Metabolism
Food fads	Amino Acid	Calorie	Food superstitions
Triglycerides	Dietetics	Malnutrition	Scurvy
Digestion	Nutrients	Beriberi	Enzyme
Secretion	Pellagra	Excretion	Food Additives

Food Supplements

3. <u>Classroom Content</u>

Classroom Objectives

- a. Describe the essential nutrients required by all people.
- b. Explain calorie intake requirements according to the following factors:
 - 1) Age
 - 2) Sex

- 3) Climate
- 4) State of health
- c. Describe variations in the diet for:
 - 1) Infants
 - 2) Children
 - 3) Adolescents
 - 4) Adults
 - 5) Elderly
- d. Discuss factors affecting eating habits:
 - 1) Culture
 - 2) Religion
 - 3) Socioeconomic factors
 - 4) Personal preference
 - 5) Emotions
 - 6) Hunger, appetite, satiety
- e. Discuss factors underlying malnutrition:
 - 1) Economic
 - 2) Education
 - 3) Social and class values
 - 4) Physiologic factors
 - 5) Psychological factors
 - 6) Food fads
- 4. <u>Learning Activities</u>
 - a. Know terminology
 - b. Read assigned chapters in Kozier, Fundamentals of Nursing
 - c. Read assigned chapters, Roth, <u>Nutrition & Diet Therapy</u>
 - d. Review additional readings as assigned
- 5. <u>References</u>
- a. Kozier, Fundamentals of Nursing
- b. Roth, <u>Nutrition & Diet Therapy</u>
- c. Additional readings as assigned
- 6. <u>Clinical Objectives: NONE</u>
 - 7. <u>Skills Laboratory Requirements</u>

Required Skills: Specimen Collection (for all ages)

- a. Collecting urine specimens
 - 1) routine
 - 2) clean catch
 - 3) From catheter
- b. Collecting stool specimens
- c. Collecting sputum specimens
- d. Administer enemas
 - 1) SSE
- 2) Fleets
- e. Testing stool for occult blood
- 8. <u>Self-Review Skills</u>
 - a. Medical asepsis
 - b. Handwashing
- 9. <u>Skills Terminology</u>

See Lynn, Taylor's Clinical Nursing Skills

10. <u>Skills Laboratory Objectives</u>

See Lynn, Taylor's Clinical Nursing Skills

11. <u>References</u>

- a. Lynn, <u>Taylor's Clinical Nursing Skills</u>
- b. Videotapes/computer works as assigned

Module G: Introduction to Diet Therapy

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

The various health care agencies use a variety of diets in the care of people. This module will build upon the student=s understanding of basic nutritional needs through the life span by introducing the concept of diet therapy - progressive, bland, and low sodium - the purpose and nursing care involved.

2. <u>Terminology</u>

Anorexia	Anorexia nervosa	Cachexia	Nausea
Kwashiorkor	Malnutrition	Marasmus	Satiety
Diet Therapy	Emaciation	Eructation	Hunger
Hematemesis	Projectile vomiting	Vomiting	Regurgitation

3. Classroom Content

Classroom Objectives

- a. Contrast the factors causing anorexia, nausea, and vomiting including the physiological mechanisms involved in each.
- b. Describe nursing interventions for clients of all ages experiencing anorexia, nausea, or vomiting.
- c. Explain briefly how the following diets differ from regular diets:
 - 1) Clear liquid
 - 2) Soft
 - 3) Low sodium
 - 4) Full liquid
 - 5) Bland
- d. Discuss the forms of intake and output and ways in which they are measured for clients of all ages.
- e. Explain the correct method of charting intake and output on sample forms.
- f. Analyze assessment data needed to adequately assess a person' nutritional status.
- g. Discuss a care plan for a client with a nutritional alteration.

4. <u>Learning Activities</u>

- a. Know terminology
- b. Read assigned chapters in Kozier, <u>Fundamentals of Nursing</u>
- c. Read assigned chapters in Roth, <u>Nutrition & Diet Therapy</u>
- d. . Complete a 24-hour assessment of your diet. Compare it with the textbook recommendations.
- e. Submit a written description of your feelings as the person feeding and the feelings of the person being
- f. Review reading assignment from Module F
- g. Complete CAI as assigned

5. References

a. Kozier, <u>Fundamentals of Nursing</u>

b. Roth, Nutrition & Diet Therapy

6. Clinical Objectives: NONE

7. Skills Laboratory Requirements

8. <u>Required Skills: Administration of Non-Injectable Medications</u>

- a. Topical Medications
- b. Medications to Mucous Membranes
- c. Oral Medications
- d. Sublingual Medications
- e. Rectal Medications
- f. Vaginal Medications/Douches
- g. Eye Medications
- h. Ear Medications
- I. Inhalant Medications

9. <u>Self-Review Skills</u>

- a. Medical Asepsis
- b. Handwashing

fed.

10. Skills Terminology

- a. See Lynn, <u>T aylor's C linical Nurs ing Skil Is</u>
- b. See Kozier, Fundamentals of Nursing

11. <u>Skills Laboratory Objectives</u>

a. See Lynn, <u>Taylor's Clinical Nursing Skills</u>

12. References

- a. Lynn, <u>Taylor's Clinical Nursing Skills</u>
- b. Kozier, Fundamentals of Nursing
- c. Videotapes and computer software as assigned

Module H: Common Disruptions to Homeostasis through the Lifespan

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

It is the purpose of this module to present physiological and psychological developmental patterns through the life span as described by Piaget, Havighurst and Erikson. Common disruptions are discussed at each stage of development. The student is reminded to remain aware of the many variations in develop-mental patterns. Cultural and socioeconomic influences are emphasized. Awareness of these influences and how they impact on nursing care is the focus of this module.

2. <u>Terminology</u>

Stages of Growth & Development

- a. Cognitive Piaget
- b. Developmental Tasks Havighurst
- c. Psychosocial Erikson

3. <u>Classroom Content</u>

Classroom Objectives

- a. Relate stages of growth & development to each age group.
- b. Discuss self- image aspects of the developmental patterns of each age group.
- c. Explain how common disruptions to the developmental stages cause an impact on a person's wellness/illness continuum.
- d. Describe cultural and psychosocial patterns which influence the developmental patterns throughout the life span. Focus on the young and the aged.
- e. Explain nursing interventions appropriate for developmental disruptions in the wellness/illness continuum.

4. <u>Learning Activities</u>

- a. Know terminology
- b. Review materials from Psych
- c. Read Assigned chapters in Kozier, Fundamentals of Nursing
- d. In group discussion, identify the common disruptions to homeostasis related to developmental stages and the nursing interventions possible for each disruption. Focus on the young and the aged.
- e. View assigned audiovisual/CAI materials.

- 5. <u>References</u>
 - a. Kozier, Fundamentals of Nursing
 - b. Psychology text.
- 6. Videotapes/CAI as assigned.
- 7. <u>Clinical Objectives:</u> none
- 8. <u>Skills Laboratory Requirements</u>
 - 9. Required Skills: Administration of Injectable Medications
 - a. I.M Medications
- 1) one solution
- 2) two solutions
- b. I.D Medications
- c. S.C Medications
- d. Z-Track Medications
- e. Insulin
- one solution
- 2) two solutions
- f. Injections to a Child
- g. Glucometer Testing
- 10. Self-Review Skills
 - a. Medical Asepsis
 - b. Hand washing
 - c. Positioning of clients
- 11. Skills Terminology
 - a. Lynn, <u>Taylor's Clinical Nursing Skills</u>
 - b. Kozier, Fundamentals of Nursing
- 12. <u>Skills Laboratory Objectives</u>

See Lynn, <u>Taylor's Clinical Nursing Skills</u>

- 13. References
 - a. Lynn, <u>Taylor's Clinical Nursing Skills</u>
 - b. Kozier, Fundamentals of Nursing
 - c. Videotapes, computer software, and articles as assigned.

Module I: The Helping Relationship, Safe Environment, and the Hospital Experience

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

The health care agency is legally and ethically responsible for providing a safe and comfortable environment. The extent to which this responsibility is met is often dependent upon the nurse. Physical safety and comfort depends largely on the technical skills of the nurse. The emotional and psychological comfort of the client is influenced by the empathy and skill displayed by the nurse in the care of clients from a wide variety of backgrounds. The hospital milieu is unfamiliar to most people. The environment is strange, unknown and often viewed as unfriendly. The nurse can make the difference in how a client views the hospital experience. Indeed, the way the nurse relates in caring for a client frequently impacts on the client's response to medical treatment. Technical skill is paramount but in order for the client to receive maximum benefits from good technical care, the nurse must also provide a caring, helpful, and safe environment.

2. <u>Terminology</u>

EmpathyDepersonalizationRegimentationRestraintsDehumanizationHealth CareTerritorialityHospital

Milieu

Sensory Overload Sensory Deprivation Social Relationship

Orientation Phase

Helping Relationship Working Phase Termination Phase

Discharge Planning Sensory Alteration Legal/Ethical Responsibilities

Therapeutic Relationship: to self

Lack of Understanding of Hospital Language

to patient

to institution

to instructor

to nursing

3. Classroom Content

Classroom Objectives

- a. Discuss the nurse's role in providing a safe, comfortable, therapeutic environment based upon recognized human needs.
- b. Describe the physical and psychological aspects of the therapeutic environment.
- c. Explain safety measures that are used to protect clients in the hospital setting.
- d. Describe the physical and psychological factors in the hospital setting that can produce anxiety in clients.
- e. Discuss the three phases of the helping relationship.
- f. Explain cultural, religious, and socioeconomic factors that must be considered when providing a therapeutic hospital environment.
- g. Discuss the nurse's role as a patient advocate.
- h. Discuss the "Patient's Bill of Rights" based on the nurse's legal and ethical responsibilities.
- i. Explain safety measures that are used to protect nurse safety in and out of the hospital setting.

Learning Activities

- a. Know terminology
- b. Read assigned chapter in Kozier, Fundamentals of Nursing
- c. Discuss, in class, the implications involved in the nurse's role as patient advocate.
- d. Discuss, in class, student feelings regarding the concepts in this module
- e View assigned videotapes.

References

- a. Kozier, <u>Fundamentals of Nursing</u>
- b. Principles of Human Relationships Handout #1
- c.. .A Patient's Bill of Rights Handout #2
- 4. Clinical Objectives: none
- 5. Skills Laboratory Requirements

Continue with previous skills

Module J: The Communication Process

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

One of man's greatest needs is the ability to express himself and, in turn, listen to the expression of others. Successful nurse-patient relationship is based on good communication. Communication is the means by which a person conveys or shares feelings, acts or thoughts with another person. It is an exchange of ideas brought about by verbal or nonverbal behavior. It is the purpose of this module to assist the student to become aware of the communication process and to help the student begin to develop skill in interpersonal relationships with patients.

2. <u>Terminology</u>

Communication Message
Non Verbal Communication Receiver
Verbal Communication Listening
Feedback Writing
Gestures Response

Sender Therapeutic Communication

Therapeutic Use of Self

3. Classroom Content

Classroom Objectives

- a. Define the basic components of communication.
- b. Differentiate verbal and non-verbal communication.
- c. Identify techniques to effective communication.
- d. Identify barriers to effective communication.
- e. Discuss the concept of therapeutic use of self.
- f. Initiate history taking & interviewing techniques.
- g. Discuss interviewing skills for clients of all ages.
- h. Discuss a sample care plan for a client with communication problems.

4. <u>Learning Activities</u>

- a. Know terminology.
- b. Read assigned chapters in Kozier, <u>Fundamentals of Nursing</u>
- c. Read assigned chapters in Lynn, <u>T aylo r's C linical Nurs ing Skills</u>
- d. Review A-V list for additional readings as assigned.
- e. Discuss, in class, Communication Handouts #1 and #2.
- f. View videotapes/CAI as assigned.

References

- a. Kozier, Fundamentals of Nursing
- b. Lynn, Taylor's Clinical Nursing Skills
- c. Handouts #1, #2.
- d. Videotapes/CAI and additional readings as assigned.

4. <u>Clinical Objectives:</u> none

5. Skills Laboratory Requirements

Continue with previous skills

Module K: Principles of Charting

1. Statement of Purpose

Charting is a written method of conveying client information, nursing assessments and interventions, and client response to care. The health record can frequently provide a comprehensive view of the client, the illness, effective treatment strategies, and factors that affect the outcomes of illness for education of the health care professional in various disciplines. Client records serve as a vehicle by which health professionals who interact with a client communicate with each other to prevent fragmentation, repetition, and delays in client care.

2. Terminology

Change of shift reportProgress NoteChartRecordChartingRecordingCharting by exception (CBE)ReportClient recordSOAP

Documenting/documentation Source-oriented record

Flow Sheet Variance Focus Charting

Kardex

Narrative Charting PIE

Problem-oriented medical record (POMR)

Problem-oriented record (POR)

3. Classroom Content

Classroom Objectives

- a. Explain the purpose and guidelines of charting.
- b. Compare and contrast different documentation methodologies: problem oriented medical records, PIE, focus charting, computerized records, and the case management model.

- c. Discuss the nurse's role in providing a safe, concise, brief charting based upon recognized human needs..
- d. Discuss the legal/ethical implications of charting.
- e. Explain measures to maintain the confidentiality of client records.
- f. Discuss how various forms in the client record are used to document steps in the nursing process.
- g. Describe prohibited abbreviations, acronyms, and symbols that cannot be used in any form of clinical documentation.

4. <u>Learning Activities</u>

- a. Know terminology
- b. Read assigned chapter in Kozier, Fundamentals of Nursing
- c. Discuss, in class, the implications involved in the nurse's role in accurate charting.
- d. Discuss, in class, student feelings regarding the concepts in this module.
- e. View assigned videotapes.

References

- a. Kozier, Fundamentals of Nursing
- b. Charting Handout
- 6,. <u>Clinical Objectives : none</u>
- 7.. Skills Laboratory Requirements

Continue with previous skills

Textbooks & Other Resources or Links

Texts:

A. Required:

- 1. Kozier & Erb, Fundamentals of Nursing, current ed., Prentice Hall.
- 2. Doenges, et al, Nursing Care Plans with CD, current ed., F.A. Davis,
- 3. Lynn, Taylor's Clinic al Nurs ing S kil Is, current ed., Lippincott Williams & Wilkins
- 4. Taber's Cyclopedic Medical Dictionary, current ed., F.A. Davis,
- Doenges, et al, <u>Nurses Pocket Guide</u>, <u>Diagnoses</u>, <u>Prioritized Intervention</u> <u>& Rationales</u>, current^h ed., F.A. Davis,
- Roth R., Townsend C., <u>Nutrition & Diet Therapy</u>, current ed., Delmar Thompson Learning

B. Recommended:

- 1. Nugent & Vitale, Test Success for Beginning Nursing Students, current ed., F.A. Davis,
- 2. Nugent & Vitale, Fundamentals Success, current ed., F.A.Davis.
- 3. Nursing Student Success Made Incredibly Easy, current^t ed., Lippincott, Williams
- 4. Tradewell & Beare, <u>Davis 's NCLEX-PN Review current ed.</u>, F.A. Davis
- 5. Doenges, Application of Nursing Process & Nursing Diagnosis, current ed., F.A. Davis
- 6. Doenges et al, Nursing Diagnosis Manual, current ed., F.A. Davis,

C. Student Handouts

Imperial Valley College Division of Nursing Education and Health Technologies VN 110 Required Skills

Student's Name	Semester: Fall	Year: <u>2016</u>
-		

MODULE	REQUIRED SKILL	DATE DUE	DATE PASSED	SIGNATURE OF EVALUATOR	STUDENT'S INITIALS
А	1. Handwashing				
Medical	2. Temperature				
	a. Oral				
Asepsis	b. Rectal				
	c. Axillary				
	3. Pulse				
	a. Apical				
	b. Radial				
	4. Respiration				
	5. BP				
В	1. Making a bed				
Skin	a. Unoccupied/Surgical				
	b. Occupied				
Integrity &	2. Bathing a Client				
Bathing	3. Evening Care				
	4. Oral Hygiene				
	a. Conscious/unconscious client				
	b. Patient with dentures				
	5. Hair Care				
	a. Combing				
	b. Shampooing				

6. Po	Perineal Care		
7. E ₁	Eye Care		
8. Fo	Foot Care		
9. Bi	Back Care		
10.	Providing a bedpan or urinal		

MODULE	REQUIRED SKILL	DATE DUE	DATE PASSED	SIGNATURE OF EVALUATOR	STUDENT'S INITIALS
С	Application of moist heat				
Heat & Cold	2. Application of cold therapy				
Therapy	3. Standard Precautions				
D	1. Turning/positioning				
Body	a. Protective side-lying				
,	b. Protective prone				
Mechanics	c. Protective supine				
	d. Protective Fowler's				
	e. Log rolling				
	2. ROM				
	3. Patient Transfer				
	a. Pivot bed to w/c				
	4. Ambulation				
	5. Restraints				
	a. Vest				
	b. Extremity				
E	1. Bandages				
Bandages	a. Figure eight				
Binders	b. Circular				
TEDS	c. Spiral				

Slings		_		l I
	d. Shrink wrap			
	2. Binders			
	a. Scultetus			
	b. Elastic			
	3. TED hose			
	4. Slings			
F	Collecting urine specimens			
Specimen	a. Routine Clean catch			
Collection	b. From catheter			
	c. Testing urine for S/A			
	Collecting stool specimen			
	3. Test stool for occult blood			
	4. Collecting sputum specimens			
	5. Administer enema			
	a. SSE			
	b. Fleets			

MODULE	REQUIRED SKILL	DATE DUE	DATE PASSED	SIGNATURE OF EVALUATOR	STUDENT'S
G	1. Topical Meds				
Non-	2. Mucous membrane meds				
	3. Oral Meds				
Injectable	4. Sublingual meds				
Medications	5. Rectal meds				
	6. Eye meds				
	7. Ear meds				
	8. Vaginal meds/Douches				
	9. Inhalant meds				
н	1. IM meds				
Injectable	2. ID meds				
,	3. SC meds				
Medications	4. Z track meds				
	5. Insulin				
	a. One solution				
	b. Two solutions				
	6. Injections to a child or infant				
	7. Glucometer testing				

Imperial Valley College Division of Nursing Education and Health Technologies VN 110

Module I Handout #1

PRINCIPLES OF HUMAN RELATIONSHIPS

- 1. Speak to people. There is nothing as nice as a cheerful greeting
- 2. Smile at people. It takes 72 muscles to frown -- only 14 to smile.
- 3. Call people by name. The sweetest music to anyone's ear is the sound of his own name.
- 4. Be friendly and helpful. Don't wait for the other person to make the first move.
- 5. Be cordial. Speak and act as if you were enjoying yourself and those around you. You may not be enjoying yourself, but politeness is a small price to pay for the affection and goodwill of others.
- 6. Be genuinely interested in people. You can like almost everyone if you try. Getting along with people depends mostly on yourself.
- 7. Be generous with praise and cautious with criticism. Few people can give constructive criticism.
- 8. Be considerate with the feelings of others. Everyone is affected by another.
- 9. Be thoughtful of the opinions of others. Nothing is all wrong; two people with different ideas can still both be right. We cannot say that something is either black or white: we must leave room for some gray area. We should be willing to tolerate a few imperfections in others and learn by their mistakes.
- 10. Be alert to give service. What counts most in life is what we do for others. Kindness and love are a universal language.
- 11. Think before you speak. Tact is being able to shut your mouth before someone else wants to.
- 12. Treat others as you would like them to treat you. We could eliminate the other 11 if we would really live the "GOLDEN RULE".

Imperial Valley College
Division of Nursing Education and Health Technologies
VN 110
Module I Handout #2

The Patient's Bill of Rights

(Adopted by the Assembly August 30, 1973)

WHEREAS, The American Hospital Association has recently approved a Patient=s Bill of Rights with the expectation that observance of the rights will contribute to more effective patient care and greater satisfaction for the patient, the patient=s physician and the hospital; be it

Resolved by the assembly of the State of California, that the Members hereby affirm the Patient=s Bill of Rights heretofore adopted by the American Hospital Association and approved by the Boards of Trustees of the California Hospital Association; and be it further resolved. That these rights are as follows:

- 1. The patient has the right to considerate and respectful care.
- 2. The patient has the right to obtain from his physician complete current information concerning his diagnosis, treatment, and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person in his behalf. He has the right to know by name, the physician responsible for coordinating his care.
- 3. The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant alternatives for care or treatment that exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
 - 4. The patient has the right to refuse treatment to the extent permitted by law, and to be informed of the medical consequences of his action.
- 5. The patient has the right to every consideration of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in his care must have permission of the patient to be present.
 - 6. The patient has the right to expect that all communications and records pertaining to his care should be treated as confidential.
- 7. The patient has the right to expect that within its capacity a hospital must make reasonable response to the request of a patient for services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible a patient may be transferred to another facility only after he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.
- 8. The patient has the right to obtain information as to any relationship of his hospital to other health care and educational institutions insofar as his care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating him.
- 9. The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment. The patient has the right to participate in such research projects.
- 10. The patient has the right to expect reasonable continuity of care. He has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that the hospital will provide a mechanism whereby he is informed by his physician or a delegate of the physician of the patient=s continuing health care requirements following discharge.
 - 11. The patient has the right to examine and receive an explanation of his bill regardless of the source of payment.
 - 12. The patient has the right to know what hospital rules and regulations apply to his conduct as a patient, and be it further

Resolved, that the Hospitals currently licensed and operating in the State of California are hereby requested to post a suitable copy of the Patient=s Bill of Rights of this resolution in appropriate places within each hospital so that such rights may be read by patients being admitted into such institutions; and be it further

Resolved, That all physicians, dentists, podiatrists, and other health professionals providing care and treatment for patients in hospitals within the State of California are requested to observe the right of the patient as set forth above, and to actively assist hospitals and all those engaged in the performance of health care services within the State of California in the observance of these rights; and be it further

Resolved, That the Chief Clerk of the Assembly transmit copies of this resolution to the Directors of the California Hospital Association, California Medical Association, California Dental Association and California Podiatric Association

Course Requirements and Instructional Methods

Prerequisites: Admission to the Nursing Program.

Course Requirements:

A. VN110, Introduction to Patient Care I is a five (5) unit course. It is divided into a theory and skills component as follows:

<u>Units</u>	i	<u>Hours</u>
Theory Lecture	1.5	27
Skills Lecture	<u>.5</u>	_ 9
	2 Units	36 Hours
Clinical	1	54
Skills Lab	_2	<u>108</u>
	3 Units	162 Hours

During this eight (8) week course clinical experiences will be simulated in the I.V.C. nursing skills laboratory and may include clinical experience in acute, long-term, and community settings.

B. 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.

1.) All assignments are graded on the following scale and grades are <u>not</u> rounded.

A = 93%-100%

B = 85%-92%

C = 78%-84%

D = 68%-77%

F = Below 68%

F= When the clinical evaluation is unsatisfactory regardless of the theory grade.

The final examination must be passed with a 78% or a grade of "F" for the course will be is sued as outlined in the LV N student handbook

- * The student is responsible for making an appointment with their instructor any time their grade average drops below 80%.
- 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.
 - (b.) Scoring requirements for successful completion of each course:
 - 78% or better of total possible points accumulated from all written work and examinations (overall coursework), and
 - (ii) 78% or better of the total possible points accumulated from the <u>major unit exams</u> as designated in the course syllabi. and
 - (iii) 'Satisfactory' and / or 78% 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.
- 2.) The student who fails a 2nd unit exam or has an accumulated average less than 78% shall:
 - (a.) Meet with the teaching team.
 - (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 78% 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>

- 4. 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 (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.
 - A formal clinical evaluation will be conducted by the clinical instructor at the 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.
 - e. 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.
- 5. 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. ATI exams will be factored into the course grade.
 - c. One comprehensive final exam will be given.
 - **d.** 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.
 - e. All written assignments must be typewritten and follow APA format.

Skills Laboratory

- a. 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.
- b. 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.

Pharmacological Dosage Calculation Exam:

- 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:
 - 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

B. <u>LVN Program Grading</u>

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.

3.) All assignments are graded on the following scale and grades are <u>not</u> rounded.

A = 93%-100%

B = 85%-92%

C = 78%-84%

D = 68%-77%

F = Below 68%

F= When the clinical evaluation is unsatisfactory regardless of the theory grade.

The final ex am ination must be passed with a 78% or a grade of "F" for the course will be is sued as outlined in the LVN s tude nt handbook

- * The student is responsible for making an appointment with their instructor any time their grade average drops below 80%.
- 4.) Student must maintain a "C" average in all nursing courses to advance in the program.
 - (c.) 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.
 - (d.) Scoring requirements for successful completion of each course:
 - (iv) 78% or better of total possible points accumulated from all written work and examinations (overall coursework), and
 - (v) 78% or better of the total possible points accumulated from the <u>major unit exams</u> as designated in the course syllabi, <u>and</u>
 - (vi) 'Satisfactory' and / or 78% 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.

- 2.) The student who fails a 2nd unit exam or has an accumulated average less than 78% shall:
 - (c.) Meet with the teaching team.
 - (d.) 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 \underline{or} has an accumulated average less than 78% shall:
 - (c.) Meet with the teaching team to consider withdrawal from the nursing program.
 - (d.) 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):

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

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

- 6. Clinical and skills laboratory performance will be determined on a satisfactory or unsatisfactory basis.
 - f. Receive one unsatisfactory in clinical/skills laboratory, complete a NLC referral (remediation) established by the instructor prior to the next clinical/skills laboratory.
 - g. If a second clinical/skills lab is "unsatisfactory", complete NLC referral (remediation) established by the instructor prior to the next clinical/skills lab.
 - h. 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.
 - A formal clinical evaluation will be conducted by the clinical instructor at the 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.
 - j. 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.
- 7. Theory, clinical, and skills laboratory requirements must be satisfactorily completed independent of each other in order to successfully complete the course.

D. Grade Components:

- I. <u>Theory</u>
 - f. A maximum of six (6) Module exams will be given.
 - g. Assessment (ATI) exams will be factored into the course grade.
 - h. One comprehensive final exam will be given.
 - i. 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.
 - j. All written assignments must be typewritten and follow APA format.

Skills Laboratory

- c. 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.
- d. Clinical instructor may refer a student back to the skills lab if in his/her judgment more practice on a skill is needed.

6. <u>Clinica</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.

F. <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
 - Students who do not pass:
 - 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

- 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. Instructors are expected to take a student's record into account in computing grades. 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 110: 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, clinical and skills lab.

Attendance

Regular attendance in all classes is expected of all students enrolled. Instructors are expected to take a student's record into account in computting grades. A student may be excluded from further attendance in a class during any semester when absences after the close of registration have exceeded the number of class hours which the class meets per week. Further, an instructor may drop any student judged to be a disturbing element in the class. The last day to drop any short term course is prior to 75% of the course being complete.

- Vocational Nursing 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 <u>VN 110: 11.5 hours</u>
 - a. A student who reaches the maximum allowable number 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.
 - b. 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.
- 2. Students who are late to class three times in any nursing course will be considered absent for one day. Class includes lecture, skills laboratory 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.
- Children in the classroom: 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
- <u>Learning Labs:</u> 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.
- <u>Library Services:</u> 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 Fall 2016

Vocational Nursing 110 Class Schedule

Instructor: Roberta Webster RN, MSN, IBCLC

Office # 2125 (760)355-6549

roberta.webster@imperial.edu

Instructor: Cristel Mora RN, MSN

Office # 2134 (760)355-6422

cristel.mora@imperial.edu

****SUBJECT TO CHANGE ****

DATE	DAY	TIME	ROOM	DESCRIPTION	INSTRUCTOR	ASSIGNMENT
8/15/16	MON	0700-	2135	General Orientation	WEBSTER	The Student Handbook
		0900		Orientation to VN110	MORA	
		0935- 1200		Module A (Lab): Medical Asepsis & Vital Signs	WEBSTER	Kozier: Ch. 29, 31 Lynn: Ch.1 pp.6-38,Ch.4 (Skill 4-
						1, 4-2, 4-6 & 4-7)
		1300-		Module B (Lab) Skin Integrity		Kozier: Ch. 33;
		1515			MORA	Ch.48, pp1289-1301
						Ch. 49, pp1336-1338
						Lynn: Ch.7, Ch. 12,pp 631- 648
8/16/16	TUES	0700-	2135	Module A (Theory)	WEBSTER	Kozier: Ch 1; Ch 3;
		1515		Overview of the Health-Illness		Ch 5; pp 80-90;
				Continuum		Ch 6;
						Ch 16-19
						Tabers: pp 2582-2609

8/17/16	WED	0800- 1205	2135	Module B: (Theory) Nursing Process	MORA	Kozier: Ch.10-15 Doenges: Reading Assign. TBA
8/18/16	THURS	0800- 1205	2135	Module B: (Theory) Nursing Process	WEBSTER MORA	Kozier: Ch.10-15 Doenges: Reading Assign. TBA
8/22/16	MON	0700- 1515	2135	Module C: (Lab) Application of Hot & Cold Module D (Lab) Body Mechanics Module E (Lab) Bandages & Binders Module F (Lab) Specimen Collection	WEBSTER MORA MORA WEBSTER	Lynn: pp 438-440,453-458 Kozier: Ch.36, pp.931-935 Kozier: Ch. 32,pp 731-737 Ch. 44, pp 1108- 1111, 1127-1161 Lynn: Ch.3 & 9 Lynn: pp 524-539 Kozier: Ch. 36, pp 928-930 Ch. 37, pp 951-953

						Kozier: Ch. 34, pp 804-827
8/23/16	TUES	0700- 1515	2135	Module C: (Theory) Standard Precautions	WEBSTER	Lynn: Ch. 4 Kozier: Ch. 31 Taber's:pp 2561-2574
8/24/16	WED	0800- 1205	2135	Module D: (Theory) Activity & Exercise	WEBSTER	Philosophy of Nursing paper due!!!! Kozier: Ch. 44, pp 1105-1127 Review "Activity & Exercise Patterns with Related Nursing Diagnosis"
8/25/16	THURS	0800- 1205	2135	Quiz # 1- MOD: A (Theory & Lab)- MOD: B (Theory & Lab)	WEBSTER MORA	
8/29/16	MON	0700- 1515	2135 Lab 1& 3	Module G: (Lab) Non-Injectable Meds Module H: (Lab), Injectable Meds	WEBSTER	Kozier: Ch.35 Lynn: Ch. 5, pp 151 -197 , pp 236-291

8/30/16	TUES	0700- 1515 0800- 1205	Lab 1 & 3	Simulations/ Skills Practice Module E (Theory) Comfort, Rest & Sleep	WEBSTER/ MORA MORA	Kozier: Ch. 45 & 46 Lynn: Ch: 10
9/01/16	THURS	0800- 1205	2135	Quiz # 2 –MOD: B (Theory) MOD: C (Theory & Lab) Cont. (Module E Theory)	MORA WEBSTER MORA	
9/5/16	MON	xxxxxxx	хххххх	HOLIDAY- NO CLASS	WEBSTER MORA	
9/6/16	TUES	0700- 1515	Lab 1 & 3	Simulation/ Skills Practice	WEBSTER MORA	
9/7/16	WED	0800- 1205	2135	Module F (Theory) Basic Nutrition	WEBSTER	Kozier: Ch. 45 & 46 Lynn: Ch: 10 Roth: Ch. 1-9 Kozier: Ch. 47

9/8/16	THURS	0800-	2135	Quiz # 3- MOD: G & H (Lab)	MORA	
5,5,10		1205				
				MOD: D (Theory &	WEBSTER	
				Lab)		
					MORA	Roth: Ch. 10-14
				Module G (Theory) Intro. To		
				Diet Therapy		Kozier: Ch 45
9/12/16	MON	0700-	2135	Skills practice	MORA	
		1515	TBA		WEBSTER	
			TBA			
9/13/16	TUES	0700-	TBA	SKILLS PRACTICE	WEBSTER	
		1515			MORA	
9/14/16	WED	0800-	2135	Module H (Theory) Common	WEBSTER	Kozier: Ch 20-24
		1205		Disruptions		Growth and Development
						Assessment Form from
						Student Handbook
9/15/16	THURS	0800-	2135	Quiz # 4- MOD: E (THEORY	MORA	
9/ 13/ 10	111043	1205	2133	&Lab)	IVIONA	
					WEBSTER	
				MOD: F (Lab)		
				Module I (Theory) Helping	WEBSTER	Kozier: Ch 5; Ch 26, pp 472-
				Relationship	, , <u>, , , , , , , , , , , , , , , , , </u>	
						474; Ch 25

9/19/16	MON	0700-	2135	SKILLS/ CLINICAL SIMULATIONS	MORA	
		1515			WEBSTER	
9/20/16	TUES	0700-	TBA	SKILLSL/ CLINICAL SIMULATIONS	WEBSTER	
		1515			MORA	
9/21/16	Wed	0800- 1205	2135	Module J (Theory) Communications	WEBSTER	Kozier: Ch .26
					MORA	
9/22/16	Thurs	0800- 1205	2135	Quiz # 5 – MOD : F (Theory)	MORA	
				MOD: G (Theory	WEBSTER	
				Module K: (Theory) Charting	MORA	Kozier: Ch 15
9/26/16	Mon	0700-	2135	Module G & H (Lab) √ off	WEBSTER	SKILLS CHECK-OFFS
		1515	Labs 1 & 3	(Non-Injectable MEDS / Injection)	MORA	

9/27/16	Tues	0700-	2135	Communication Skills	WEBSTER	
		1515			MORA	SKILLS CHECK-OFFS
			Labs 1&3	Cont. Module G & H (Lab)√ off	WEBSTER MORA	REFER TO SUPPLEMENTAL SKILLS-CHECK LIST
9/28/16	Wed	0800- 1205	Lab TBA	Cont. Clinical Skills/Sims	WEBSTER MORA	
9/29/16	Thurs	0800-	2135	Quiz # 6: MOD: H (Theory)	WEBSTER	
		1205		MOD: I (Theory)	MORA	
				MOD: J (Theory)		
10/3/16	Mon	0700- 1515	2135	CLINICAL SKILLS/SIMS CHECK-OFF	WEBSTER MORA	
10/4/16	Tues	0700- 1515	Labs 1 & 3	CONT. CLINICAL SKILL/SIMS CHECK-OFF	WEBSTER MORA	ALL SKILLS MUST BE CHECKED OFF BY THIS DATE!
10/5/16	Wed	0800- 1205	ТВА	ORIENTATION TO PMH TOTAL PROGRAM EVALS	WEBSTER MORA	

	Orientation to VN 112	HOSP: STAFF	ORIENTATION ONLINE
0800- 1205	5 VN 110 FINAL EXAM	WEBSTER MORA	