Stephen F. Austin State University  
DeWitt School of Nursing  
NURSING CARE OF CLIENTS WITH COMPLEX HEALTH NEEDS  
Course Number: NUR 406  
Section Number: 001  
Clinical Section(s): 010 - 016  
Spring 2016  
Course Instructors  
Mrs. Laura Logan, MSN, RN Course Coordinator  
Ms. Regina Low, MSN, RN  
Ms. Candace Carter, MSN, RN  
Mrs. Joy Shupak, MSN, RN

ALL INFORMATION IN THIS SYLLABUS IS SUBJECT TO THE WRITTEN POLICIES AND PROCEDURES OF THE SCHOOL OF NURSING, STEPHEN F. AUSTIN STATE UNIVERSITY NACOGDOCHES, TEXAS. IN THE CASE OF COMMISSION, OMISSION, AMBIGUITY, VAGUENESS, OR CONFLICT, THE POLICIES AND PROCEDURES OF THE SCHOOL OF NURSING SHALL CONTROL. EACH STUDENT SHALL BE RESPONSIBLE FOR ACTUAL AND/OR CONSTRUCTIVE KNOWLEDGE OF THE POLICIES AND PROCEDURES OF THE SCHOOL OF NURSING AND FOR COMPLIANCE THEREWITH. EACH STUDENT IS RESPONSIBLE FOR ALL INFORMATION IN THIS SYLLABUS. This syllabus is provided for informational purposes only.
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           Friday: 12-3

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             Tuesday: 9-12; 1-4
             Friday: By appointment only

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             Tuesday: 10-4
             Friday: By appointment only

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             Tuesday: 10-2

Please call in advance as times may vary due to committee obligations.

Class meeting times and places: Refer to Course Calendar for time and location.

TEXTBOOKS & SUPPLIES

Required Texts:
- All textbooks from prior nursing courses.
- Clinical Skills Critical Care Collection, Elsevier
SUGGESTED TEXTS:
- Patient Reviews by Elsevier (On-line). May be purchased from any of the bookstores on or near the SFA campus. (You should already have this.)

Course Description
Six semester hours, three hours didactic and nine hours clinical practicum. This course provides students the opportunity apply critical thinking, nursing theory, research and practice to acutely ill clients of diverse spiritual, ethno-cultural and socioeconomic backgrounds in a variety of clinical settings. Emphasis is placed on meeting needs of acutely ill clients and nurse’s role in addressing legal, ethical and economic issues within the interdisciplinary health care team.

Unabridged Course Description
This course builds upon concepts learned in Nursing Care of Young Adults to Elderly, previous, concurrent, and pre-requisite courses. This course provides students with the opportunity to apply critical thinking, nursing theory, research, and practice to clients of diverse spiritual, ethno-cultural, and socioeconomic backgrounds. Students will utilize the nursing process with clients experiencing acute/chronic complex health problems in a variety of clinical settings. Emphasis is placed on the challenges if meeting the needs of the acutely ill clients and a holistic manner and the nurse’s role in addressing associated legal, ethical, and economic issues in conjunction with the interdisciplinary health care team.

Number of Credit Hours
6 semester hours (3 hours didactic; 9 hours clinical practicum)

Prerequisites and Co-requisites
Prerequisites: NUR 330, NUR 331, NUR 332
Co-requisites: NUR 407, NUR 408

Program Learning Outcomes
Graduates of the program will:
1. Apply knowledge of the physical, social, and behavioral sciences in the provision of nursing care based on theory and evidence based practice.
2. Deliver nursing care within established legal and ethical parameters in collaboration with clients and members of the interdisciplinary health care team.
3. Provide holistic nursing care to clients while respecting individual and cultural diversity.
4. Demonstrate effective leadership that fosters independent thinking, use of informatics, and collaborative communication in the management of nursing care.
5. Assume responsibility and accountability for quality improvement and delivery of safe and effective nursing care.
6. Serve as an advocate for clients and for the profession of nursing.
7. Demonstrate continuing competence, growth, and development in the profession of nursing

**General Education Core Curriculum Objectives/Outcomes**
None

**Student Learning Outcomes**
The student will:
1. Relate concepts and principles of the arts, sciences, humanities, and nursing as a source for making nursing practice decisions with clients and families experiencing complex health stressors.
2. Demonstrate responsibility and accountability using consistent behavior patterns and professional communication.
3. Evaluate research for applicability of findings to the provision of nursing care.
4. Incorporate the nursing process as a template to formulate and implement individualized plans of care for clients with complex health needs.
5. Utilize advanced assessment and critical thinking skills to provide comprehensive nursing care in teaching clients and families experiencing complex health stressors.
6. Incorporate moral, ethical, economic, and legal issues in the provision of nursing care to clients and families.
7. Collaborate with the interdisciplinary healthcare team members respecting holistic, socio-economic, spiritual, and ethno-culturally diverse characteristics of clients and families experiencing complex health stressors.

**Differentiated Essential Competencies (DEC’s)**
The Richard and Lucille DeWitt School of Nursing prepares graduates to demonstrate the Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments, and Behaviors (DECs). The competencies are based upon the preparation in the program of study. In nursing education, the DEC’s serve as a guideline and tool for curriculum development and revision, a tool for benchmarking and evaluation of the program, and statewide standard to ensure graduates will enter practice as safe and competent nurses. The DECs are incorporated into every course in the SON to ensure uniformity and continuity of standards.

Please refer to the Texas BON website for additional information:
https://www.bon.texas.gov/pdfs/differentiated_essential_competencies-2010.pdf

**Course Requirements**
- 4 course exams
- 2 HESI Exams
- Quizzes (including A Nurse’s Story Assignment)
- PrepU NCLEX questions for each body system and comprehensive
- Weekly clinical work
- Evolve Critical Care Collection Cases

See Below for more information
# Nursing 406

**Nursing Care of Clients with Complex Health Needs**

**Tentative Course Calendar**

**Spring 2016**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Unit</th>
<th>Title</th>
<th>Instructor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/19</td>
<td>8-12</td>
<td>LL</td>
<td>Overview of Course; intro to CC roles &amp; standards</td>
<td>All</td>
</tr>
<tr>
<td>Rm 101</td>
<td>1-5</td>
<td>LL</td>
<td>LL: Pain, Sedation, Delirium, legal issues &amp; Drugs/Calculations</td>
<td>Carter/Low</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>LL (EKGs)</td>
<td>Logan</td>
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<tr>
<td>1/20</td>
<td>8-12</td>
<td>2</td>
<td>Cardiac Day 1</td>
<td>Logan</td>
</tr>
<tr>
<td>Rm 101</td>
<td>1-5</td>
<td>LL</td>
<td>ABGs, Vents, chest tubes, oxygen delivery devices</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>1/25</td>
<td>8-11</td>
<td>3</td>
<td>Acute and Chronic Pulmonary Alterations: Resp. failure, Acute lung injury, aspiration pneumonia, pleural effusions, Thoracentesis</td>
<td>Shupak/Carter</td>
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<tr>
<td>Rm 101</td>
<td>12-3</td>
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<tr>
<td>1/27</td>
<td>8-5</td>
<td>COC 1</td>
<td>Hemodynamic Lines, Neuro assessment/ICP monitoring devices &amp; drains Concept Mapping Critical Care Assessment/Documentation Hospital Expectations/Orientation</td>
<td>All</td>
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<tr>
<td>Rm 101</td>
<td></td>
<td>(All)</td>
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<tr>
<td>1/28</td>
<td>8-11</td>
<td>COC 2</td>
<td>All things pulmonary (vents, chest tubes, oxygen) hemodynamics, neuro/ICP monitoring. IV devices/lines – review of COC</td>
<td>All</td>
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<tr>
<td>Sim Lab/Rm 101</td>
<td>12-5</td>
<td>(All)</td>
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<tr>
<td>2/1</td>
<td>8-10</td>
<td>Exam 1</td>
<td>Pain, sedation, delirium, CC roles, med calculations, medications, Hemodynamics, EKG, All pulmonary and Cardiac Day 1 Atrial and Ventricular Rhythms, Blocks, Junctional rhythms</td>
<td>All</td>
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<tr>
<td>Rm 115</td>
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<td>Shupak</td>
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<td>2/1</td>
<td>1-5</td>
<td>LL</td>
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<tr>
<td>Rm 101</td>
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<tr>
<td>2/4</td>
<td>ABC</td>
<td></td>
<td>Clinical Day</td>
<td>All</td>
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<td></td>
<td>Respective Hospital Clinical All groups 8 hours</td>
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<tr>
<td>Date</td>
<td>Code</td>
<td>Section</td>
<td>Type</td>
<td>Description</td>
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<tr>
<td>2/8</td>
<td>12-4</td>
<td>4</td>
<td>Neuro: Strokes, ICP patho and therapeutic interventions, ICP monitoring, coma, craniotomy, hematomas</td>
<td>Carter</td>
</tr>
<tr>
<td>2/10</td>
<td>DEF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group E 12 hours</td>
<td>Logan, Low &amp; Shupak</td>
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<tr>
<td>2/11</td>
<td>DF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical</td>
<td>All</td>
</tr>
<tr>
<td>2/15</td>
<td>12-3</td>
<td>5</td>
<td>Acute/Chronic Renal Alterations: Acute and Chronic renal failure, renal trauma, dialysis modalities</td>
<td>Low</td>
</tr>
<tr>
<td>2/17</td>
<td>Groups ABC</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group B 12 hour</td>
<td>Logan, Carter &amp; Low</td>
</tr>
<tr>
<td>2/18</td>
<td>Groups AC</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical</td>
<td>Logan &amp; Low</td>
</tr>
<tr>
<td>2/22</td>
<td>9-11</td>
<td>Exam 2</td>
<td>Exam 2: EKG (Atrial, Junctional, Ventricular, blocks) Neuro, &amp; Renal</td>
<td>All</td>
</tr>
<tr>
<td>Rm 101</td>
<td>12-3</td>
<td>8</td>
<td>Shock, SIRS, Sepsis, MODS</td>
<td>Logan</td>
</tr>
<tr>
<td>2/24</td>
<td>Groups DEF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical</td>
<td>Logan, Low &amp; Shupak</td>
</tr>
<tr>
<td>2/25</td>
<td>Groups DF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group B-12 hour</td>
<td>Logan &amp; Low</td>
</tr>
<tr>
<td>2/29</td>
<td>12-3</td>
<td>8,1</td>
<td>Burns and Nutrition</td>
<td>Low</td>
</tr>
<tr>
<td>Rm 101</td>
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<tr>
<td>3/2</td>
<td>Groups ABC</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group B 12 hour</td>
<td>Logan, Low &amp; Carter</td>
</tr>
<tr>
<td>3/3</td>
<td>Groups AC</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical</td>
<td>Logan &amp; Low</td>
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<tr>
<td>3/7</td>
<td>12-3</td>
<td>2</td>
<td>Cardiac Day 2</td>
<td>Logan</td>
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<tr>
<td>Rm 101</td>
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<tr>
<td>3/9</td>
<td>Groups DEF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group E 12 hour</td>
<td>Logan, Low &amp; Shupak</td>
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<tr>
<td>3/10</td>
<td>Groups DEF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group E 12 hour</td>
<td>Logan, Low &amp; Shupak</td>
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<tr>
<td>3/12-3/20</td>
<td>Spring Break</td>
<td>SPRING BREAK!!!</td>
<td>ALL</td>
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<tr>
<td>3/21</td>
<td>12-3</td>
<td>6,7</td>
<td>GI: Acute/Chronic Alterations- acute pancreatitis, Fulminant Hepatic Failure, acute GI hemorrhage, obesity &amp; bariatric surgery Endocrine Alterations: DKA, HHNK,</td>
<td>Low</td>
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<tr>
<td>Rm 101</td>
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<td></td>
<td>Shupak</td>
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<tr>
<td>Date</td>
<td>Groups</td>
<td>Time</td>
<td>Event</td>
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<tr>
<td>3/23</td>
<td>Groups ABC</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group B-12 hour</td>
<td>Logan, Low &amp; Carter</td>
</tr>
<tr>
<td>3/24-3/27</td>
<td>Easter</td>
<td></td>
<td>Easter Break! Classes resume 4pm-3/28</td>
<td>All</td>
</tr>
<tr>
<td>3/28</td>
<td>4pm</td>
<td>Exam 3</td>
<td>Shock, SIRS, Sepsis, MODs, Burns, Nutrition, Cardiac Day 2, GI, Endo</td>
<td>All</td>
</tr>
<tr>
<td>3/30</td>
<td>Groups ABC</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical Group B-12 hour</td>
<td>Logan, Carter &amp; Low</td>
</tr>
<tr>
<td>3/31</td>
<td>Groups DEF</td>
<td>Clinical Day</td>
<td>Respective Hospital Clinical All 8 hours</td>
<td>Logan, Low &amp; Shupak</td>
</tr>
<tr>
<td>4/4</td>
<td>8-11</td>
<td>9</td>
<td>Gerontology Cardiac Day 3</td>
<td>Low Logan</td>
</tr>
<tr>
<td>4/5- Sim Lab</td>
<td>Group C</td>
<td>CP</td>
<td>Clinical Scenarios in Lab</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>4/7- Sim lab</td>
<td>Group A</td>
<td>CP</td>
<td>Clinical Scenarios in Lab</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>4/11</td>
<td>9-12</td>
<td>1, 8</td>
<td>Legal/ Ethical &amp; End of Life/Organ Donation Trauma</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>4/12 Sim lab</td>
<td>Group B</td>
<td>CP</td>
<td>Clinical Scenarios in Lab</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>4/13 Sim lab</td>
<td>Group D</td>
<td>CP</td>
<td>Clinical Scenarios in Lab</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>4/14 Sim lab</td>
<td>Group EF</td>
<td>CP</td>
<td>Clinical Scenarios in Lab</td>
<td>Carter/Shupak</td>
</tr>
<tr>
<td>4/18</td>
<td>10-12</td>
<td>Exam 4</td>
<td>Exam 4: Cardiac Day 3, Legal, Ethical, End of Life, Blood transfusions, Organ donation, trauma, &amp; gerontology</td>
<td>All</td>
</tr>
<tr>
<td>4/20 Sim lab</td>
<td>830-330</td>
<td>ABCD</td>
<td>Sim Day (4 simulations)</td>
<td>All</td>
</tr>
<tr>
<td>4/21 Sim lab</td>
<td>830-1130</td>
<td>EF</td>
<td>Sim Day (4 simulations)</td>
<td>All</td>
</tr>
<tr>
<td>5/2 Rm 101</td>
<td>9-11</td>
<td>HESI Review</td>
<td>HESI Review for CC/ Med-Surg</td>
<td>All</td>
</tr>
<tr>
<td>5/3</td>
<td>Sign up</td>
<td></td>
<td>Clinical Evaluations- sign up with instructor</td>
<td>All</td>
</tr>
<tr>
<td>5/6 Rm 115</td>
<td>12-2</td>
<td>CC HESI</td>
<td>CC HESI</td>
<td>All</td>
</tr>
<tr>
<td>5/13 Rm 115</td>
<td>10-12</td>
<td>MS- HESI</td>
<td>MS- HESI</td>
<td>All</td>
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</tbody>
</table>

**Clinical Time:**

LL=Learning Lab  
COC=Clinical on Campus
CP=Clinical Practice (Clinical Scenarios in Lab)

**** LL, COC, CP, and hospital clinical days constitute clinical hours and attendance is mandatory.

Hospital Clinical Days

**Groups A & D:** WHMC = Lufkin Woodland Heights Medical Center (Logan)

**Groups C & F:** Nac Mem = Nacogdoches Memorial Hospital (Low)

**Group B:** CHI St. Luke’s Health Memorial Lufkin (Carter)

**Group E:** CHI St. Luke’s Health Memorial Lufkin (Shupak)

<table>
<thead>
<tr>
<th>Group</th>
<th>COC 1</th>
<th>COC 2</th>
<th>Hosp</th>
<th>Hosp</th>
<th>Hosp</th>
<th>Hosp</th>
<th>Hosp</th>
<th>Hosp</th>
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<td>E</td>
<td>1/27</td>
<td>1/28</td>
<td>2/10</td>
<td>2/24</td>
<td>3/9</td>
<td>3/10</td>
<td>3/31</td>
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Times will be announced. Numbers in ( ) * indicates either an 8 hour or 12 hour shift.
Grading Policy

<table>
<thead>
<tr>
<th>Didactic Points</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam 1</td>
<td>75 (15%)</td>
</tr>
<tr>
<td>Exam 2</td>
<td>75 (15%)</td>
</tr>
<tr>
<td>Exam 3</td>
<td>75 (15%)</td>
</tr>
<tr>
<td>Exam 4</td>
<td>75 (15%)</td>
</tr>
<tr>
<td>Med/Surg HESI</td>
<td>75 (15%)</td>
</tr>
<tr>
<td>Critical Care HESI</td>
<td>75 (15%)</td>
</tr>
<tr>
<td>Quiz average</td>
<td>15 (3%)</td>
</tr>
<tr>
<td>PrepU NCLEX Questions</td>
<td>35 (7%)</td>
</tr>
</tbody>
</table>

Total 500 (100%)

It is necessary to obtain a WEIGHTED MEAN TEST SCORE OF 75 on the class exam grades to pass this course. A weighted mean test score below 75 or a class average below 75 constitutes failure of Nursing 406 and will result in a grade of “F” on the transcript. Grades are rounded to the nearest hundredth. (For example: A 74.45 would be passing, and a 74.44 would be an F.) Clinical will be graded as a Pass/Fail. You must pass both the class and clinical in order to pass Nursing 406 (Nursing Policy No. 25).

The test analysis form MUST be completed after each course/unit exam if the raw score is less than 75%. All can complete it, but we need the data from those making less than 75%. Remediation is also mandatory after each exam if the nullified score is less than 75%. NOT for HESI.

Medical/Surgical HESI Exam
The Medical/Surgical HESI Exam will be taken at the end of the semester. This exam covers medical/surgical content from both medical/surgical courses. Reviewing patient reviews, case studies, NCLEX style questions and reviewing previous HESI exam remediation materials will assist in preparing for this exam.

Critical Care HESI Exam
The Critical Care HESI will be given at the end of the semester. This exam covers all of the content covered in NUR 406 and will act as the course final exam.

Cell Phone Use
Cell phones will be silenced prior to the beginning of class. Cell phones will only be used for educational purposes.

Computer Use in the Classroom
Computers are allowed in the classroom for note taking and educational use. Using a computer for any other activities will not be tolerated and may result in the confiscation of the computer.

**Attendance Policy**
Attendance is not mandatory; however, all students are expected to attend classes regularly. Roll will be taken during each class. Attendance is assessed and encouraged for the student to be successful in Nursing 406. Attendance is necessary to gain access to the online quizzes after class.

**Academic Integrity (A-9.1)**
Academic integrity is a responsibility of all university faculty and students. Faculty members promote academic integrity in multiple ways including instruction on the components of academic honesty, as well as abiding by university policy on penalties for cheating and plagiarism.

**Desire to Learn (D2L)**
For D2L technical support, contact student support in the Office of Instructional Technology (OIT) at d2l@sfasu.edu or 936-468-1919. If you call after regular business hours or on a weekend, please leave a voicemail.

For general computer support (not related to D2L), contact the Technical Support Center (TSC) at 936-468-HELP (4357) or at helpdesk@sfasu.edu.

To learn more about using D2L, visit SFA ONLINE at http://sfaonline.sfasu.edu, where you’ll find written instructions and video tutorials.

**Definition of Academic Dishonesty**
Academic dishonesty includes both cheating and plagiarism. Cheating includes, but is not limited to:
- using or attempting to use unauthorized materials on any class assignment or exam;
- falsifying or inventing of any information, including citations, on an assignment; and/or;
- helping or attempting to help another in an act of cheating or plagiarism.

Plagiarism is presenting the words or ideas of another person as if they were one’s own. Examples of plagiarism include, but are not limited to:
- submitting an assignment as one's own work when it is at least partly the work of another person;
- submitting a work that has been purchased or otherwise obtained from the Internet or another source; and/or,
- incorporating the words or ideas of an author into one's paper or presentation without giving the author credit.

Please read the complete policy for further information and penalties at http://www.sfasu.edu/policies/student_academic_dishonesty.pdf
**Withheld Grades (Semester Grades Policy A-54)**

Ordinarily, at the discretion of the instructor of record and with the approval of the academic chair/director, a grade of WH will be assigned only if the student cannot complete the course work because of unavoidable circumstances. Students must complete the work within one calendar year form the end of the semester in which they received a WH, or the grade automatically becomes an F. If students register for the same course in future terms the WH will automatically become an F and will be counted as a repeated course for the purposes of computing the grade point average.

The circumstances precipitating the request must have occurred after the last day in which a student could withdraw from a course. Students requesting a WH must be passing the course with a minimum projected grade of C.

**Students with Disabilities**

To obtain disability related accommodations, alternate formats and/or auxiliary aids, students with disabilities must contact the Office of Disability Services (ODS), Human Services Building, and Room 325, 468-3004 / 468-1004 (TDD) as early as possible in the semester. Once verified, ODS will notify the course instructor and outline the accommodation and/or auxiliary aids to be provided. Failure to request services in a timely manner may delay your accommodations. 

*For additional information, go to http://www.sfasu.edu/disabilityservices/*

**Acceptable Student Behavior**

Classroom behavior should not interfere with the instructor’s ability to conduct the class or the ability of other students to learn from the instructional program (see the Student Conduct Code, policy D-34.1). Unacceptable or disruptive behavior will not be tolerated. Students who disrupt the learning environment may be asked to leave class and may be subject to judicial, academic or other penalties. This prohibition applies to all instructional forums, including electronic, classroom, labs, discussion groups, field trips, etc. The instructor shall have full discretion over what behavior is appropriate/inappropriate in the classroom. Students who do not attend class regularly or who perform poorly on class projects/exams may be referred to the Early Alert Program. This program provides students with recommendations for resources or other assistance that is available to help SFA students succeed.

**Course Grades**

**Quizzes (15 points)**

Quizzes may be given on D2L either prior to class lecture or after class. They will range from knowledge based questions that assesses the students preparedness for class to critical thinking application questions that will prepare the student for the exams. The average of these quizzes will count as 15 points (3%) of the overall points. This grade will NOT be considered part of the exam average. **Missed quizzes will not be made up for any reason. One attempt is given for each quiz, and answers will not be posted. No quiz remediation will be done. Quizzes are password protected and password will be given during class time on the assigned quiz day or prior to class at instructor discretion. Attendance to class is required to obtain password for corresponding quiz.**

"A Nurse’s Story" (1/19/2016)
The student is required to read "A Nurse’s Story" by Tilda Shalof. On completion of the book the student will complete the assignment found on D2L under the clinical tab. This assignment is considered part of your quiz average.

This assignment will be submitted in the drop box by 5pm on 1/19/2016. Late work not accepted.

<table>
<thead>
<tr>
<th>Quiz</th>
<th>Opens</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Syllabus Quiz</td>
<td>1/19 1200</td>
<td>1/19 2359</td>
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<tr>
<td>Drug Calculations Quiz</td>
<td>1/19 1700</td>
<td>1/20 2359</td>
</tr>
<tr>
<td>Pulmonary Quiz</td>
<td>1/25 1500</td>
<td>1/25 2359</td>
</tr>
<tr>
<td>Clinical on Campus Quiz</td>
<td>1/27 1700</td>
<td>1/28 2359</td>
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<tr>
<td>EKG Quiz</td>
<td>2/1 1700</td>
<td>2/1 2359</td>
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<tr>
<td>Neurovascular Quiz</td>
<td>2/8 1600</td>
<td>2/8 2359</td>
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<tr>
<td>Renal Quiz</td>
<td>2/15 1500</td>
<td>2/15 2359</td>
</tr>
<tr>
<td>Endocrine Quiz</td>
<td>3/21 1500</td>
<td>3/21 2359</td>
</tr>
<tr>
<td>GI Quiz</td>
<td>3/21 1500</td>
<td>3/21 2359</td>
</tr>
<tr>
<td>Cardiovascular Quiz</td>
<td>4/4 1500</td>
<td>4/4 2359</td>
</tr>
<tr>
<td>Gerinuts Review Quiz</td>
<td>4/4 1500</td>
<td>4/4 2359</td>
</tr>
<tr>
<td>Trauma/Organ Donation Quiz</td>
<td>4/11 1600</td>
<td>4/11 2359</td>
</tr>
</tbody>
</table>

Course NCLEX Questions (Prep U) Assignments (35 points)

- For each content area there will be an assignment created on the Prep U web site under NUR 406. You must obtain the assigned mastery level AND complete a **Minimum of 50** questions per assignment. The instructors will obtain your grades directly from the website. No papers will be turned in or submitted to D2L.
- If the assigned mastery level AND the number of required questions (50) is achieved the student will receive a grade of 100.
- If the assigned mastery level OR the number of required questions (50) is not achieved points will be deducted: 2 points for every question under 50 not completed. A mastery level of 3=75 2=50 and 1=25.
- Each assignment is due by 5pm of the assigned dates. **Late work not accepted.**
- If the assignment says complete in PrepU prior to completing 50 questions, just continue doing additional questions for that content topic until 50 is reached. Use the quiz history tab to see previous work. ***
- Instructions for accessing class in PrepU.
  1. If you don't already have access to Lippincott CoursePoint for NCLEX-RN 10,000 – Powered by PrepU, redeem your ACCESS CODE and complete registration at [http://thePoint.lww.com/activate](http://thePoint.lww.com/activate).
  2. From the “My Content” page, click on Lippincott CoursePoint for NCLEX-RN 10,000 – Powered by PrepU.
  3. On the welcome screen or from “My Classes”, select “Join a Class”, enter your CLASS CODE: 9575BE0C, and click “Enroll”.

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If you experience any problems, check the code again and re-enter it. If it does not work, contact Lippincott Online Product Support at 1-800-468-1128 or techsupp@lww.com for assistance.

<table>
<thead>
<tr>
<th>Content area</th>
<th># of Questions</th>
<th>Points Received</th>
<th>Due Date</th>
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<tbody>
<tr>
<td>a. Pulmonary</td>
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</tr>
<tr>
<td>b. Neuro</td>
<td>50</td>
<td>5</td>
<td>2/15</td>
</tr>
<tr>
<td>c. Renal (GU)</td>
<td>50</td>
<td>5</td>
<td>2/29</td>
</tr>
<tr>
<td>d. Endocrine</td>
<td>50</td>
<td>5</td>
<td>3/7</td>
</tr>
<tr>
<td>e. GI</td>
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<td>4/4</td>
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<tr>
<td>f. Cardiovascular</td>
<td>50</td>
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<tr>
<td>g. Comprehensive</td>
<td>50</td>
<td>5</td>
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<td><strong>Total</strong></td>
<td><strong>350</strong></td>
<td><strong>35</strong></td>
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</tbody>
</table>

**Course Evaluations:** Course evaluations in Typhon may be completed online towards the end of the semester. Two points will be added to your final points (NOT an EXAM GRADE) if all evaluations are completed prior to the Final Exam. This = 0.2 points to the total average. **
Suggested Learning Activities

The faculty has located learning activities the student may use to broaden and reinforce the course content. These are not required activities and will not be graded. They are to be used as intended, to assist the student to succeed in this course as well as on the NCLEX. The student is responsible for locating useful study aids. Listed are a few of the activities:

1. **Evolve RN Patient Reviews and Case Studies**
The Evolve RN Patient Reviews and Case Studies are content dense reviews over various disease processes that will be covered this semester. These reviews and case studies are designed to assist the student prepare for class each week and review for exams. Students who have used these to study have seen improved scores on the HESI exams. The faculty suggests the student make copies of the results of these activities to assist in monitoring their strengths, weaknesses and progress.

   Patient reviews that will be helpful this semester are located on the Evolve site under:
   - Adult Health
   - Clinical Nursing Concepts
   - Critical Care

   Case Studies that will be helpful this semester are located on the Evolve site under:
   - Basic Care of the Adult Client
   - Medical-Surgical

2. **Worksheets**
Several worksheets may be found on D2L. The worksheets were created because adequate patient reviews or case studies were not located that covered this material.

3. **Evolve Website**
HESI- All prior HESI exams can be reviewed for remediation of weaker content areas.

4. **Concept mapping**
If you find a disease process that is challenging, concept mapping the disease process is an excellent activity to review the concept.
Unit 1 Objectives
Chapter 2 Ethical Issues
1. Differentiate morals and ethics.
2. Discuss ethical principles as they relate to the critically ill patient.
3. Discuss the concepts of withholding and withdrawing treatment and medical futility.
4. Describe what constitutes an ethical dilemma.
5. Analyze the leadership role of the nurse in ethical decision making.
6. List the steps for making ethical decisions.
7. Delineate strategies for integrating ethical decision making into the critical care setting.

Required Learning Activities

Unit 1
Chapter 3 Legal Issues
1. Identify legal and professional obligations of critical care nurses.
2. Describe the elements of negligence and malpractice that may result from critical care nursing practice.
3. Identify and discuss specific legal issues in critical care nursing practice.
4. Analyze case studies and legal case outcomes and discuss the implications for nursing practice.
5. Identify strategies to promote nursing responsibility and prevent liability.

Required Learning Activities

Unit 1
Chapter 8 Nutrition
1. Describe the adverse effects of nutritional impairments on critically ill patients.
3. Identify complications of nutrition support and nursing interventions for prevention and management of the complications.

Required Learning Activities
Unit 1
Chapter 9 Pain and Pain Management
1. Explain the physiology of pain.
2. Discuss how to perform a pain assessment in the critically ill patient.
3. Identify patient and health care professional barriers to a pain assessment.
4. Describe pharmacologic and nonpharmacologic interventions for pain management.
5. Describe nursing interventions that are essential in the treatment of acute pain.

Required Learning Activities

Unit 1
Chapter 10 Sedation, Agitation, Delirium: Assessment and Management
1. Identify the importance of sedation/delirium management in the critically ill patient.
2. Compare and contrast sedation assessment scales.
3. Discuss the management of sedation and delirium in the critically ill patient.
4. Describe the pharmacologic and nonpharmacologic management of sedation and delirium in the critically ill patient.

Required Learning Activities

Unit 1
Chapter 11 End-of-Life Issues
1. Identify recommendations to improve end-of-life care.
3. Discuss family care to assist in a supportive outcome.
4. Explore methods to improve communication for the patient, family, and health care team during the end-of-life process.

Required Learning Activities
Unit 2 Objectives
Chapters 12-16 Cardiovascular Alterations

1. Identify the components of a cardiovascular history.
2. Describe inspection, palpation, percussion, and auscultation of the patient with cardiovascular dysfunction.
3. Discuss the clinical significance of selected laboratory tests used in the assessment of cardiovascular disorders.
4. Describe key diagnostic procedures used in assessment of the patient with cardiovascular dysfunction.
5. Discuss the nursing management of a patient undergoing a cardiovascular diagnostic procedure.
6. Describe the use of arterial, central venous, and pulmonary artery catheters for bedside hemodynamic monitoring.
7. Outline the steps to interpret a change in Scvo₂/Svo₂ values.
8. Describe the etiology and pathophysiology of atherosclerotic coronary artery disease.
9. Identify the pathophysiology and clinical manifestations of acute heart failure.
11. Discuss the nursing priorities for managing a patient with an acute cardiovascular disorder.
12. Describe the functions of a temporary pacemaker and an implantable cardioverter-defibrillator.
13. Identify the signs of reperfusion in a patient undergoing fibrinolytic therapy.
14. Outline the nursing management for a patient undergoing cardiac surgery and cardiac interventional procedures.
15. List the most important categories of cardiovascular drugs, their intended actions, and major significance.
16. Discuss the post-operative medical and nursing management of heart transplantation.
17. Discuss the long-term considerations related to heart transplant.

Required Learning Activities
1. Reading: Urden, Linda D., Critical Care Nursing: Diagnosis and Management, 7th edition. Chapters 12-16 and appropriate readings in Chapters 37 (page 966-971).
2. NCLEX Questions: 50 questions – due 4/11
3. D2L Cardiovascular Quiz - due 4/4
Unit 3 Objectives

Chapters 17-21 Pulmonary Alterations

1. Identify the components of a pulmonary history.
2. Describe inspection, palpation, percussion, and auscultation of the patient with pulmonary dysfunction.
3. Outline the steps in analyzing an arterial blood gas and discuss causes and treatments for abnormalities.
4. Identify key diagnostic procedures used in assessment of the patient with pulmonary dysfunction.
5. Discuss the nursing management of a patient undergoing a pulmonary diagnostic procedure.
6. Delineate the use of pulse oximetry and capnography for bedside monitoring.
7. Describe the etiology and pathophysiology of selected pulmonary disorders:
   - Acute respiratory failure
   - Acute lung injury
   - Pneumonia
   - Aspiration pneumonitis
   - Pulmonary embolism
   - Status asthmaticus
   - Air leak disorders
   - Thoracic traumatic injuries
8. Explain the nursing and medical management of the patient with selected pulmonary disorders.
9. Discuss the nursing priorities for managing the patient with selected pulmonary disorders.
10. Describe nursing management of a patient receiving oxygen therapy.
11. Discuss the indications and complication of the different artificial airways.
12. Outline the principles of airway management.
13. Discuss the various modes of invasive and noninvasive mechanical ventilation.
14. Describe the management of a patient on mechanical ventilation.
15. Delineate the care of the postoperative thoracic surgery patient.
16. Describe the purpose, methods, and nursing responsibilities related to chest tubes.
17. Discuss the indications and contraindications of lung transplantation.
18. Describe the priorities of postoperative management following lung transplantation.

Required Learning Activities

2. NCLEX Questions: 50 questions due 2/8
3. D2L Quiz-due 1/25
Unit 4 Objectives
Chapters 22-24 Neurologic Alterations

1. Identify the components of a neurologic history.
2. Describe the five components of the neurologic assessment.
3. Discuss the neurologic changes associated with intracranial hypertension.
4. Identify key diagnostic procedures used in assessment of the patient with neurologic dysfunction.
5. Discuss the nursing management of a patient undergoing a neurologic diagnostic procedure.
6. Identify the different types of intracranial pressure monitoring devices.
7. Describe the etiology and pathophysiology of selected neurologic disorders:
   - Coma
   - Stroke (Ischemic, hemorrhagic)
   - Intracranial hypertension
   - Traumatic brain injuries
   - Spinal cord injuries
8. Explain the nursing and medical management of the patient with selected neurologic disorders.
9. Discuss the nursing priorities for managing the patient with selected neurologic disorders.
10. Discuss the concept of cerebral auto regulation.
11. Describe the therapies commonly used to treat intracranial hypertension.
12. List the four supratentorial herniation syndromes.
13. Identify the physiologic mechanisms that maintain normal intracranial pressure (ICP).
14. Identify the common etiologies, clinical manifestations, and collaborative care of the patient with increased ICP.
15. Discuss the nursing management of the patient undergoing cranial surgery.
16. Discuss mechanism of injury, pathophysiology, assessment findings, medical management and nursing management of traumatic injuries to the head and spinal cord.
17. Compare and contrast the pathophysiology, clinical manifestations, collaborative care, and nursing management of autonomic dysreflexia and of spinal cord.
18. Describe the collaborative care, drug therapy, and nutritional therapy for a patient with a stroke.

Required Learning Activities:
2. NCLEX Questions: 50 questions due 2/15
3. D2L Neuro Quiz due 2/8
Unit 5 Objectives
Chapters 25-27 Kidney Alterations

1. Describe the priorities of the renal nursing assessment.
2. Identify ways in which alterations of hemoglobin and hematocrit levels can signal fluid volume deficit or excess.
3. Explain why elevation of blood urea nitrogen and serum creatinine can signal kidney dysfunction.
5. List the etiologies of acute kidney injury.
6. Identify the priorities of nursing management in acute kidney injury.
7. Discuss the differences among hemodialysis, peritoneal dialysis, and continuous renal replacement therapy.
8. Discuss nutritional considerations for the patient with renal alterations.
9. Discuss the indications and contraindications of kidney transplantation.
10. Describe the priorities of postoperative management following kidney transplantation.

Required Learning Activities
1. Reading: Urden, Linda D., Critical Care Nursing: Diagnosis and Management, 7th edition, Chapters 25-27 and appropriate readings in chapter 37 pp. (986-989)
2. NCLEX Questions: 50 questions- due 2/29
3. D2L Renal Quiz- due 2/15
Unit 6 Objectives
Chapters 28-30 Gastrointestinal Alterations

1. Describe the priorities of the GI nursing assessment.
2. Discuss the clinical significance of selected laboratory tests used in the assessment of gastrointestinal disorders.
3. Identify key diagnostic procedures used in assessment of the patient with gastrointestinal dysfunction.
4. Discuss the nursing management of a patient undergoing a gastrointestinal diagnostic procedure.
5. Describe the etiology and pathophysiology, clinical manifestations, and treatment interventions of the major gastrointestinal (GI) alterations seen in the critical care unit: Acute GI hemorrhage, acute pancreatitis, fulminant hepatic failure (FHF), and abdominal trauma.
6. Discuss the nursing priorities for managing a patient with GI alterations.
7. Outline the use and care of GI tubes.
8. Describe the postoperative nursing management of a patient undergoing GI surgery or liver transplantation.

Required Learning Activities:

2. NCLEX Questions: 50 questions- due 4/4
3. D2L GI Quiz-due 3/21
Unit 7 Objectives
Chapters 31-33 Endocrine Alterations

1. Describe clinical findings in patients with pancreatic, posterior pituitary and adrenal gland dysfunction.
2. Explain the clinical significance of laboratory and diagnostic tests of pancreatic, posterior pituitary and adrenal gland dysfunction.
4. Discuss the assessment and management of adrenal dysfunction in critical illness.
5. Describe the management of hyperglycemia associated with critical illness.
6. Compare and contrast the etiology and management of type 1 and type 2 diabetes.
7. Describe the use of intensive insulin therapy in the critical care unit.
8. Compare and contrast the medical and nursing management of diabetic ketoacidosis and hyperglycemic hyperosmolar syndrome.
9. Discuss the nursing priorities for managing a patient with diabetes insipidus.
10. List three causes of the syndrome of inappropriate secretion of antidiuretic hormone.
11. Discuss the nursing priorities for managing patients with endocrine disorders for this unit.

Required Learning Activities:

1. Reading: Urden, Linda D., Critical Care Nursing: Diagnosis and Management, 7th edition, Chapters 31-33
2. NCLEX Questions: 50 questions- due 3/7
Unit 8 Objectives
Chapter 34 Trauma
1. Compare and contrast injuries associated with blunt and penetrating trauma.
2. Discuss the four phases of trauma care.
3. Discuss the mechanism of injury, pathophysiology, assessment findings, medical management, and nursing management of various traumatic injuries.
4. Identify the complications of trauma.
5. Describe nursing interventions that are essential in the treatment of dysreflexia.

Required Learning Activities:
1. Reading: Urden, Linda D., Critical Care Nursing: Diagnosis and Management, 7th edition, Chapter 34
2. D2L Quiz - due 4/11

Unit 8
Chapter 35 Shock, Sepsis, and Multiple Organ Dysfunction Syndrome
1. List the etiologies of hypovolemic, cardiogenic, anaphylactic, neurogenic and septic shock.
2. Describe the pathophysiology, clinical manifestations, nursing and collaborative management of patients experiencing hypovolemic, cardiogenic, anaphylactic, neurogenic and septic shock.
3. Summarize the nursing priorities for managing a patient with each type of shock.
4. Describe systemic inflammatory response.
5. List the etiologies of multiple organ dysfunction syndrome (MODS).
6. Describe the pathophysiology, clinical manifestations, nursing and collaborative management of patients experiencing multiple organ dysfunction syndrome (MODS).
7. Summarize the nursing priorities for managing a patient with MODS.

Required Learning Activity
1. Reading: Urden, Linda D., Critical Care Nursing: Diagnosis and Management, 7th edition, Chapter 35

Unit 8
Chapter 36 Burns
1. Describe the causes and prevention of burn injuries.
2. Describe the burn injury classification system.
3. Describe the relationship between the involved structures and the clinical appearance of partial and full-thickness burns.
4. Identify the parameters used to determine the severity of burns.
5. Describe the pathophysiology, clinical manifestations, complications, and nursing and collaborative management of the three phases of the burn injury patient.
6. Explain fluid and electrolyte shifts during the emergent and acute burn phases.
7. Describe the nutritional therapy of the burn patient during three burn phases.
8. List the American Burn Association's criteria for determining burn injuries that should be referred to a regional burn center.

Required Learning Activities

**Unit 8**  
**Chapter 37 Organ Donation**

1. Discuss how brain death is determined and the sources of organ donors.  
2. Discuss interdisciplinary approach to provide care for donor and donor family.  
3. Discuss role of critical care nurse in organ donation and therapeutic communication.  
4. Discuss process of organ donation.

**Required Learning Activities**  
2. D2L Quiz- included with trauma- 4/11
Unit 9 Objectives
Chapter 41 Gerontology

1. Describe the age-associated physiologic changes that occur in the cardiovascular, pulmonary, renal, gastrointestinal, hepatic, integumentary, immune, and neurologic systems.

2. State the clinical significance of age-related physiologic changes and the expected nursing interventions used in caring for older critical care patients.

3. Relate the age-associated changes in hepatic function and the accompanying pharmacokinetic changes to the administration of various cardiovascular medications.

Required Learning Activities

1. Reading: Urden, Linda D., Critical Care Nursing: Diagnosis and Management, 7th edition, chapters 41.

2. D2L Quiz Geri-Nuts Review—due 4/4
CLINICAL SYLLABUS

Clinical sites:
Nacogdoches Memorial Health
CHI St. Luke’s Memorial Health Lufkin
Woodland Heights Medical Center

See calendar for times and location.

Text and Materials:
Same as for the class.

Clinical Experience

PURPOSE: The purpose of the Clinical practicum is to provide the senior nursing student a 126 hour clinical practicum in order to utilize the nursing process as a framework for practice with clients requiring intensive nursing care. In addition, the course is designed to facilitate and improve proficiency in providing nursing interventions; organizational skills required to care for acutely ill patients', communication skills utilized with clients, families and other health care professionals to promote optimum well-being; and demonstration of responsibility and accountability for self-direction, self-evaluation, and for nursing care provided for a group of patients.

Clinical Hours

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<th>Activity</th>
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<tr>
<td>Hospital orientations</td>
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<tr>
<td>Hospital experience (Hospital clinical time)</td>
<td>56</td>
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<tr>
<td>ER clinical day with preceptor (Hospital time)</td>
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<tr>
<td>Clinical Practice in Lab (includes prep time)</td>
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<td>Learning labs – EKGs (includes prep time)</td>
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<tr>
<td>Learning lab – clinical information (includes prep time)</td>
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<tr>
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<tr>
<td>Clinical simulations ( includes pre/post assignments)</td>
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Clinical on Campus (COC)
Each student will complete two 8 hour days in the simulation lab practicing nursing and assessment skills needed to care for the complex client in the ICU setting. (16 hours)
Documentation will be submitted to the dropbox the day of COC by midnight. No late work accepted.

Clinical Practice (CP)
Each student will spend 8 hours in the simulation lab practicing skills needed to assist in the care of clients in the critical care unit. This will incorporate multiple aspects from classroom and clinical scenarios. Elsevier clinical skills videos will be incorporated in preparation. (10 hours)
Documentation will be submitted at the instructor discretion. No late work accepted.

Clinical Simulations (CS)
Each student will complete 4 complex simulations this semester. (8 hours)
Assignments are due to the dropbox by midnight the day of the simulation. No late work accepted.

Hospital Orientations
All students are required to complete the online orientations for Nacogdoches Memorial and CHI St. Luke’s and the Nacogdoches Memorial Hospital restraint PowerPoint. The Completion forms must be signed and turned in by first day of class. Regardless of clinical site, all forms must be completed. (1/19/16 by 0800) (4 hours)

Emergency Room
Each student will spend one 12 hour day in the emergency room. This is in addition to the 56 hours spent in acute care areas. Assignments will be posted on D2L for this clinical experience. This will be a preceptor clinical day. Hours are from 0700 – 1900. Paperwork is due in the dropbox by midnight the Monday after assigned clinical day. No late work accepted.

Clinical Learning Outcomes
1. Assess clients with complex health needs using inspection, palpation, percussion, and auscultation, as well as advanced assessment equipment (i.e. hemodynamic monitoring, cardiac monitors, arterial lines, etc.)
2. Establish nursing diagnosis for clients with complex health needs based on information gained in client assessment.
3. Plan and implement appropriate nursing care for clients with complex health needs.
4. Evaluate nursing care of clients with complex health needs.
5. Modify the plan of care based on evaluation results.
7. Formulate accurate and concise shift report.
8. Demonstrate understanding of proper use of simple to sophisticated client care equipment.
9. Administer medications according to the 8 rights.
10. Demonstrate understanding of medications, their interactions, and side effects.
11. Utilize national standards when delivering nursing care for clients with complex health needs.
12. Identify legal and ethical issues that arise in the care of clients with complex health needs.
13. Apply appropriate research findings to clinical practice.

Learning Lab Objectives:
1. Explain the important electrocardiographic findings, clinical significance, and nursing actions for each of the cardiac rhythms found in the following classes of dysrhythmias: sinus, atrial, junctional, ventricular, and all heart blocks.
2. Describe the significance of arterial blood gas values and the oxyhemoglobin dissociation curve in relation to respiratory function.
3. Interpret arterial blood gases, describing the pathophysiology, clinical manifestations, and nursing and collaborative management.
4. Demonstrate sterile technique while caring for and changing dressings of various types of central venous lines.
5. Demonstrate the appropriate techniques needed to:
   a. access various central venous lines
   b. draw blood from the lines
   c. flush the lines to maintain patency
7. List the indications for, complications of, and nursing management of artificial airways.
8. Differentiate the indications for and modes of mechanical ventilation.
9. Apply the nursing process to the client receiving mechanical ventilation including assessment, planning, nursing diagnosis, intervention and evaluation.
10. Apply the nursing process to the client with chest tubes including assessment, planning, nursing diagnosis, intervention and evaluation.
11. Demonstrate endotracheal, tracheal and nasopharyngeal suctioning using sterile technique by both the closed in-line suction apparatus and the open technique.
12. Demonstrate the calculations needed to administer the correct doses off all pertinent critical care medications.
13. Discuss nursing care and interventions appropriate for blood product administration.

Learning Lab Topic Outline:
Cardiac rhythm strip interpretation and treatment
Blood administration
Practice treating life threatening cardiac rhythms (putting it all together)
Critical care drug calculations
Pain and Sedation in the critical care units

Clinical on Campus Topic Outline:

Day One: **1/27**
8-12; 1-5 Lecture with all students together in large class room
   - Hemodynamic line assessment
   - Cardiac assessment
   - Neuro assessment
   - Assessment and documentation
   - Concept Mapping
Day Two: 1/28

8-11 Divided into groups
1. Overview of COC
2. IV lines and devices

11-12 Lunch
12-1 Stations
1-2 Stations
2-3 Stations
3-4 Stations

Each clinical group will rotate through 4 stations (ICP drains and monitoring, Ventilators, Chest tubes, and Hemodynamic lines).
The stations will cover assessment/documentation, and IV devices, lines, and drug calculations.

Evaluation - Clinical Component

Purpose: The purpose of the clinical evaluation process utilized in NUR 406 provides a method of determining whether desired outcomes have been successfully achieved by the student and to determine whether the student has sufficient knowledge for the established level of clinical practice. Clinical practicum evaluation will be focused on both the progress through the clinical practicum (in learning and practicing new knowledge and skills) and on past learning knowledge and skills.

Method of evaluation: Daily clinical evaluations, final evaluations, counseling conferences, clinical skills evaluation, nursing assessments and oral nursing processes and clinical concept maps.
Clinical performance will be evaluated using the clinical evaluation forms found on line.

Absence from Clinical Policy:
Attendance is mandatory for all clinical hours. To be an excused absence the student must be excused directly by the clinical instructor. The only excused absence is one related to illness of self, or death of immediate family member, or significant other. The student must bring a written excuse by the health provider or an obituary notice.
Absence from the clinical area exceeding 10% will result in a clinical failure regardless of the reasons (including excused absences). Refer to Policy # 21 in the student handbook.
Any clinical time missed will be made up regardless of reason for absence.
ALL CLINICAL ON CAMPUS, LEARNING LABS, CLINICAL PRACTICE DAYS, AND SIMULATIONS IS CONSIDERED CLINICAL TIME AND IS SUBJECT TO THE SAME ABSENCE POLICIES AS HOSPITAL CLINICALS. FAILURE TO CALL YOUR CLINICAL INSTRUCTOR PRIOR TO THE START OF THE CLINICAL ACTIVITY IS CONSIDERED FAILURE TO CALL/FAILURE TO SHOW AND AN “F” DAY WILL BE RECEIVED.
Requirements for passing clinical:
To receive a satisfactory clinical grade, the nursing student must:
1. Adhere to the policies stated in the student handbook.
2. Obtain a ‘satisfactory’ on all criteria found on the clinical evaluation.
3. Give a satisfactory demonstration of all selected clinical skills.
4. Give satisfactory performance in all oral or written process recordings and complete all prescribed remediation.

ALL clinical documentation is required by due date assigned or an F day will be received. **Students may not receive more than 2 clinical "F" days and receive a passing grade in the course.**

**Post Conference:** Post conference for the clinical practicum will be held at least once weekly. Students are expected to organize their care so that they can attend post conference on time on the clinical days as scheduled. The student will give an updated report on each assigned patient to the Nurse before leaving the floor. The report should include:
1. Client's name, room number, age, physician, date of admission, diagnosis, date and type of surgical procedure.
2. Diet, scheduled snacks, and any assistance required in feeding, amount of diet taken during the shift and tolerance, any special notations (i.e., NPO at midnight for tests or surgery (NG tube to low suction, etc.).
4. Orders for intake and/or output and amounts for the shift; whether the patient has had a stool during the shift.
5. Vital sign frequency and/or special instructions (i.e., neuro checks, CMS checks) and pertinent changes in these parameters.
6. Amount, route and frequency of oxygen administration, special considerations such as suctioning requirements.
7. Current treatments to be done by the oncoming shift and pertinent information related to the treatments.
8. Scheduled studies for the next two shifts. Scheduled studies completed on your shift and any results.
9. General condition and special needs.
10. Specific changes over the last 12 hours.
11. Problems or potential difficulties.
12. Significant medications or IV therapy, i.e., reactions, blood administration, anticoagulant therapy, sliding scale insulin, titrated drips, chemotherapy.
13. Pending discharges and/or transfer.
14. Any relevant information essential to proper care of the patient.

**Medication Administration**
The student will follow the institutions medication administration policies. **The student must access two patient identifiers for example by checking the clients arm band and asking the client his/her name and birth date prior to all medication administration.**
Students are to properly document medication administration following hospital policy. Students are expected to know the indications for, dose, and side effects to observe for prior to administration of any drug.

**Should an error in medication occur, the instructor should be notified immediately and the proper documentation forms initiated. The decision to give an F Day is left to the discretion of the clinical instructor.**

**The nurse or clinical instructor must accompany the student during all medication administration.**

**ALL MEDICATIONS REQUIRING CALCULATIONS (INCLUDING TITRATED IV MEDICATIONS) MUST BE VERIFIED BY THE INSTRUCTOR OR THE PATIENT’S PRIMARY NURSE PRIOR TO ADMINISTRATION.**

Critical care medications: the student is required to check the calculations of all continuous IV medications that are hanging on their patients (dopamine, lidocaine, dobutamine, inocor, heparin, morphine, ativan, propofol, etc.). These calculations will be written down and checked by the instructor by 0800 each clinical day.

**The Clinical Concept Map**

A written Clinical Concept Map will be given to the instructor for all assigned patients. There is no “right” way to draw the map. The purpose of the map is to describe the relationships between the patient's problems, signs and symptoms, therapies, and nursing diagnosis or problems. It will be evaluated on a pass/fail basis depending on the completeness of the map as well as the student's ability to verbally explain the map. The map will be reviewed with the instructor each day of clinical by 10am. Failure to complete the map or adequately defend it will result in the student receiving an "F" day and being pulled off of patient care activities for that day.

**Concept Map Guidelines**

Map out the pathophysiology of the disease.  

1. Be very detailed.  
2. Place one concept or step of the pathology in each box.  
3. Label the connections  
4. List all of the risk factors or potential causes of the disease. (One in each box) 
5. Connect to pathophysiology.  
6. Label the connections  
7. Place all of the signs/symptoms, lab values, vital signs, diagnostic test findings, etc. in the map connected to the appropriate pathology.  
8. Label the connections  
9. Identify appropriate Nursing Diagnosis and connect to the signs/symptoms, etc.  
10. Label the connections  
11. Place all suggested treatments in the map with connections to either signs/symptoms, vital signs, diagnostic test findings, or pathology.  
12. Label the connections  
13. Reference location of pathophysiology from text

When discussing the plan of care with your instructor you need to be able to explain the following:

- Why was each nursing diagnosis selected?  
- What are the priority nursing diagnoses/problems?
c. What are the priority nursing actions?
d. What conclusions did you draw from lab and diagnostic tests?
   1. Why were the tests ordered?
   2. What do the tests indicate?
   3. Is any nursing action needed?
e. How appropriate is the stated outcome for your patient?
f. How will the interventions aid in achieving the desired patient outcome?
g. Are the expected outcomes for your patient being achieved through nursing and medical intervention?
   1. Were the daily outcomes met?
   2. Have the nursing interventions been effective?
   3. Are revisions needed in the outcomes or nursing interventions?
   4. What has been the therapeutic effect of medications and treatments for your patient?
   5. Has your patient experienced any side effects? If so, is any nursing action needed.

**Clinical Portfolio**

The clinical portfolio is the notebook you will be required to carry during your NUR 406 clinical experiences. You will bring the complete portfolio to the first COC day so that we can go over documentation and forms at that time, it is not turned in. The notebook must meet the following requirements:

a. **Outside:**
   
   i. Navy blue
   
   ii. One inch or ½ inch binder
   
   iii. Name, course title, and clinical group number

b. **Inside:**

   The first page of the notebook will be a current (this semester) photo of the student (not a group shot!), in SON scrubs by 1st clinical day.

   i. Divider Sections

1. **Clinical Documentation (Paper portion to be turned in)**

   a. This section will be for concept maps.
   
   b. Daily drug calculations/EKG sheet.
   
   c. No patient identifiers please! (This is a HIPPA violation)

2. **Evaluations**

   a. Daily evaluations
b. Final clinical evaluation

c. ER evaluation

d. Clinical Skills Check list (Keep this updated through clinicals)

3. Forms: (Extra blank forms)
   a. 1 clinical documentation flow sheet (as an example) these will be done on D2L
   b. EKG rhythm sheet
   c. Drug Calculation Sheet
   d. SBAR form
   e. ER Clinical Day assignment
   g. Alternate clinical experience worksheet

** The forms (evaluations, charting, exercises, etc) are located on the N-406 D2L course website.

- We will be checking your work during the clinical day.
- Clinical work will be submitted to the Drop Box on D2L at a time specified by instructor.
- (Unless cleared by your instructor beforehand, work turned in after that time will result in a clinical F day!)***
- A sample portfolio will be available in class.

Clinical Guidelines: All groups (Low & Logan- 8 hours, Carter & Shupak- 12 hours, one 8 hour)

1.) The morning of the assigned ICU clinical day the student will be expected to arrive at a specified time to the hospital to collect the assigned patient’s data.
2.) By 0800 each clinical day the student will have calculated all of the patient’s critical care drips. The faculty will check each calculation at this time.
3.) On each clinical morning the student will present and be able to defend a completed concept map for the ICU patient.
4.) At the end of the ICU/Step down day the student will complete:
   a. Critical care documentation flowsheet (D2L Dropbox)
   b. Drug calculations (Clinical binder)
   c. EKG rhythm strips (Clinical binder)
   d. Concept map (Clinical binder)
   e. Daily clinical evaluation (Clinical binder)

5.) Post conference will be at clinical instructor discretion.
Stephen F. Austin State University
Richard and Lucille DeWitt School of Nursing
Clinical Evaluation Tool
NUR 406: Nursing Care of Clients with Complex Health Needs

Student: ____________________________ Date Fall/Spring: __________
Instructor(s): ____________________________________________

Evaluation Criteria: S = Satisfactory U= Unsatisfactory
Ongoing clinical feedback will be provided in individual student-faculty conferences throughout the clinical rotation and will be documented on page 3.
Clinical objectives for evaluation are listed on page 2.
By the end of the clinical rotation, the student must satisfactorily demonstrate all behaviors described in the clinical objectives to pass the clinical portion of the course.

<table>
<thead>
<tr>
<th>Final Clinical Grade: (Pass or Fail)</th>
<th>Final Comments</th>
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<tbody>
<tr>
<td>Instructor Signature:</td>
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<td>____________________</td>
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<tr>
<td>Student Signature:</td>
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<td>____________________</td>
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<td>Date: ____________________________</td>
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Clinical Outcomes

The student will:

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<tr>
<th>A. MEMBER OF THE PROFESSION</th>
<th>DEC</th>
<th>B. CONT.</th>
<th>DEC</th>
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<tbody>
<tr>
<td>1. Adhere to legal and ethical standards of the profession in multiple health care settings. (Includes BON, University, Facility, Code of Ethics, Standards of Practice, HIPAA, etc)</td>
<td>IA IIIA IIIE</td>
<td>10. Complete accurate detailed correlation maps for each client.</td>
<td>IIC</td>
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<tr>
<td>2. Assume responsibility and accountability for quality of nursing care.</td>
<td>IB</td>
<td>11. Provide health care that is sensitive to and consistent with cultural values, beliefs, and customs of the client with complex health needs.</td>
<td>IIA IID</td>
</tr>
<tr>
<td>4. Assess own strengths and weaknesses and utilize feedback for professional growth.</td>
<td>ID</td>
<td>12. Evaluate legal and ethical issues that arise in the care of clients with complex health needs.</td>
<td>IIE</td>
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<td>5. Arrive on time and maintains appropriate clinical attendance.</td>
<td>IA</td>
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<tr>
<th>C. PATIENT SAFETY ADVOCATE</th>
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<tr>
<td>1. Maintain strict infection control measures in clinical settings.</td>
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<tr>
<td>2. Administer medications according to the 8 rights.</td>
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<thead>
<tr>
<th>B. PROVIDER OF PATIENT-CENTERED CARE</th>
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<tr>
<td>3. Determine effects of medications, their interactions, and side effects.</td>
</tr>
<tr>
<td>4. Maintain safety of client by identifying at risk clients and intervening appropriately.</td>
</tr>
<tr>
<td>5. Ensure appropriate and safe use of equipment in performing client care procedures and treatments.</td>
</tr>
<tr>
<td>6. Teach client and families about the safe use of equipment needed for healthcare.</td>
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<tr>
<th>D. MEMBER OF THE HEALTH CARE TEAM</th>
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<tbody>
<tr>
<td>1. Collaborate with clients and interdisciplinary health care team (IDHCT) for the planning and delivery of care.</td>
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<tr>
<td>2. Refer clients to resources that facilitate continuity of care.</td>
</tr>
<tr>
<td>3. Establish effective working relationship with clients, faculty, staff &amp; peers</td>
</tr>
<tr>
<td>4. Formulate verbal/written reports for members of the interdisciplinary team for their use in caring for the client over time.</td>
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<td>5. Function as a client advocate.</td>
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