**SEMESTER HOURS**: Three (3) Credit Hours **CONTACT HOURS**: Three Clock Hours/Week

**PREREQUISITES**: Admission to The Department of Nursing

#### **FACULTY INFORMATION:**

Name:

**Office Hours:** 

Hours available via e-mail or phone:

Phone number: University E-mail:

#### **COURSE DESCRIPTION:**

This course addresses the application of bio-psycho-socio-cultural concepts to individuals with health care needs. The educational process links previous basic nursing knowledge and experience with content from previous baccalaureate courses to acquire additional knowledge and skill to obtain a comprehensive patient assessment. Students will utilize advanced systems assessment, screenings and diagnostic data, and pathophysiologic knowledge as a foundation for an individualized plan of care. This advancement of nursing knowledge and skill will be applied to nursing leadership and management principles.

#### NURSING PROGRAM OUTCOMES

Upon completion of all required nursing courses in the BSN Program, each graduate will be able to:

- 1. Apply the art and science of nursing to comprehensive assessment, diagnosis, planning, implementation, and evaluation of individualized patient care needs across the life span.
- 2. Provide safe and competent nursing care to diverse patients, aggregates, and communities based on professional standards and state rules and regulations incorporating scientific theory, evidence from research, and competencies.
- 3. Demonstrate accountability, responsibility, and critical reasoning for clinical judgment and nursing decision making.
- 4. Communicate and collaborate with patients, families, interdisciplinary team members, aggregates, and communities using oral, non-verbal, written, and electronic methods to promote and maintain optimal working environments and health outcomes.
- 5. Integrate ethical behaviors, legal and practice standards, conflict management skills, and political principles in nursing practice across the life span.
- 6. Practice within established professional roles to provide cost-effective, quality health care to consumers in structured and unstructured settings with acute and long-term needs.
- 7. Assume responsibility for lifelong learning, self-care, professional development, promoting the nursing profession, and active participation in nursing and community organizations through leadership and advocacy.
- 8. Utilize education as a foundation for continued nursing education, academic achievement and national/professional certifications.

#### **NURSING STUDENT LEARNING OUTCOMES:**

Each student enrolled in the course will be expected to meet course objectives that are presented within the applicable framework of the Texas Board of Nursing (TBON) Disseminated Essential Competencies of Graduates from Texas Nursing programs (DEC's), and the American Association of College of Nursing (AACN) Essentials of Baccalaureate Education for Professional Nursing Practice (BSN Essentials. Objectives are linked to appropriate DEC's, and BSN Essentials.

#### SACSCOC STUDENT LEARNING OUTCOMES:

At the end of the course, the student will be able to:

- 1. Students will demonstrate holistic relationship-centered nursing care to individuals, families, patients, and communities based on an ethical and legal framework and incorporating scientific theory, evidence from research, and competencies.
- 2. Students will demonstrate accountability and responsibility for competent clinical judgment essential to nursing decision-making leadership.
- 3. Students will demonstrate established professional roles to provide cost-effective, quality health care to consumers and community members within the context of the remote, rural border environment, in structured and unstructured settings through formal and informal networking.

#### MEMBER OF THE PROFESSION

1. Develop and implement a comprehensive data base for assessment of a selected patient population designated for this course. (DEC"S I-A1, 2, 3; II-B1,2,3,4,5,6,7,8,9) (Essential VI)

#### PROVIDER OF PATIENT CENTERED CARE

- 2. Incorporate laboratory and other diagnostic data into the comprehensive patient assessment process. (DEC's II-G 1,2,3, (Essential VII)
- 3. Use effective interviewing and communication skills when conducting a health history. (DEC's II-B4,5 II-C 4,5; II-F 2,3, (Essential VII, IX)
- 4. Demonstrate appropriate utilization of selected assessment tools for each body system. (DEC's IV-F 1,2) (Essential VI, VII, IX)

#### PATIENT SAFETY ADVOCATE

5. Demonstrate physical examination techniques including observation, auscultation, palpation, and percussion for each designated body system. (DEC's III-B 1) (Essential IX)

#### MEMBER OF THE HEALTH CARE TEAM

6. Apply principles of infection control and patient safety during the assessment process. (DEC's III-A1,2,3,4,5,6; III-B4,5, (Essential IX)

#### MARKETABLE SKILLS FOR THE DEPARTMENT OF NURSING

The following martketable skills and dissemination plan has been submitted to the Texas Higher Education Coordinating Board after approval from the Assistant Vice President for Institutional Effectiveness at SRSU.

#### Students will:

- 1. develop inquiry skills to evaluate situations (Sense of Inquiry);
- 2. develop communication skills to evaluate situations (Communication Skills);
- 3. develop research skills to promote their lifelong learning (Continuous Lifelong Learning); and
- 4. comport themselves verbally and visually in a professional manner (Professionalism)

#### Plan for Dissemination:

Students learn the marketable skills by first being exposed to them in all course syllabi. Each of the marketable skills is loosely observed and evaluated by clinical faculty and preceptors as students' progress through the educational program. Students hone their research and communication skills through assignments and activities in multiple classes.

#### **REQUIRED TEXT:**

- 1. Jarvis, C. (2020). Physical Examination & Health Assessment (6<sup>th</sup> Edition) St. Louis, Mo: Saunders-Elsevier.
- 2. Jarvis, C. (2020). Physical Examination & Health Assessment Student Laboratory Manual (6<sup>th</sup> Edition). St. Louis MO: Saunders-Elsevier.

#### COURSE LEARNING ACTIVITIES, ASSIGNMENTS, GRADING, AND EXPECTATIONS:

#### **LEARNING ACTIVITES:**

Students will be required to meet expectations identified in this course. Class discussion will reflect knowledge obtained from required and recommended references and evaluated according to a rubric provided. Written documents will reflect guidelines prepared by the faculty that clearly address the purpose and inclusions for topics addressed in the paper. Grading rubrics for professional papers will provide specific direction for the document and APA guidelines that are required for all written documents.

Students are required to participate in weekly, online collaborative activities that explore health care assessment issues in professional nursing and varied health care organizations. Student dialogue will focus on identifying and assessing resources, analyzing patient situations, and identifying diagnostic data that impact professional nursing management. Students are expected to contribute to the dialogue using critical thinking, clinical reasoning, and a plan of care based on assessment of their selected patient population. In accordance with educational guidelines for Sul Ross State University, students are required to enter dialogue on a weekly basis. It is important to note that all communication between faculty and students must occur on Sul Ross e-mail and/or Blackboard Collaborate..

Critical Analysis of Literature/Research: Weekly topics identified in class activities and discussion will require literature review pertinent for the patient population that each student in the course has selected for their clinical focus. Written and verbal information must be properly referenced. Postings in the discussion board must be referenced using APA format.

#### **Data Base Development:**

Students will develop a comprehensive data base that is reflective of the students selected patient population. There are numerous data bases which can be used to assure completeness and assist with development of creative approaches to recording information. It is not acceptable to totally copy a data base from a clinical agency and present the instrument without significant alteration and sequencing of information as identified in the guidelines.

#### **Final Complete Integrated Assessment:**

Each student will demonstrate their ability to perform a comprehensive assessment for a body system. A body system will be randomly selected the day of the scheduled assessment. Potential body systems include respiratory, cardiovascular, gastro-intestinal, neurological, and integumentary/musculoskeletal as presented in system competencies. Time for the integrated assessment will be presented by the clinical faculty member as arranged in the Simulation Lab located on the Southwest Texas Junior College Campus in the nursing education area. This assessment must be completed prior to mid-term for the semester.

#### **COURSE EXPECTIONS:**

Verbal and written responses to assignments will incorporate evidence that the student has read appropriate assignments and is able to articulate information that reflects individual cognition and understanding of information. All written assignments must be presented in APA format. Any technical difficulties related to Blackboard Collaboration must be referred to the IT resources close to your home address and corrected as soon as possible. Making an appointment with the IT resource and taking your computer equipment with you to the appointment will lead to a successful learning process.

Students are expected to enter into group decisions at the beginning of the semester related to planning synchronous and asynchronous learning activities designed to meet course and unit objectives. Attendance and participation in synchronous and asynchronous student groups are required unless prior arrangements have been made with the faculty of record. All assignments should be planned to meet the deadlines designated on the course schedule. Late papers and make up assignments must be discussed with the faculty of record. Examinations must be taken when scheduled unless previous arrangements have been made with the faculty of record. A detailed schedule of course activities and due dates are included in this syllabus.

#### **Orientation to Course and Library:**

It is expected that you attend a nursing orientation at the beginning of the semester unless you have attended a scheduled event prior to the course. Nursing orientation will be held at the beginning of each fall and spring semester and students will be notified by e-mail

when we have been notified that you are enrolled in the course. New students come to campus with their personal lap top so IT representatives can assist with access and solve any problems that may exist with the individual computer. Students will be able to meet with available faculty and clarify any questions that may be related to course expectations. The Director for the library will be present to orient new students to the library sources during orientation or during a synchronous class as arranged by the faculty of record.

Each student and faculty member will spend time utilizing the learning resources on the home page of BB and/or with a staff member that can assist with the learning process for Blackboard. It is important that all participants are oriented to the learning process related to resources available through the Blackboard process.

#### Faculty and Student Picture and Biography:

Faculty will submit a picture and summary of their educational and professional experiences that prepared them to teach in respective courses to be posted online.

During the first week of class, each student must submit a snap-shot of picture of themselves with a brief personal and professional biography including educational and clinical experiences and any personal information that highlights why they are choosing to seek a BSN degree.

#### STUDENT/FACULTY EXPECTATIONS IN THE TEACHING/LEARNING PROCESS

Learning is a shared endeavor based upon respectful and collaborative relationships between students and faculty. The learning activities designed for this course were developed based upon the following:

- 1. As adult learners we are partners in learning.
- 2. Faculty members serve as a mentor, resource, guide, or coach and professional peer.
- 3. Our work and life experiences differ and serve to enrich our individual and mutual learning.
- 4. Each member of the class is committed to preparing for and successfully completing class learning activities.
- 5. Each member of the class will organize their time, learning goals, work schedules and family arrangements to fully participate in the course and assignment activities.
- 6. Each member of the class is able to use computer technology and access resources via the Internet and other mobile technologies as needed for this and other courses.

#### **COMMUNICATIONS:**

- **Announcements** Check announcements each time you log onto the course.
- Course E-mail All e-mail communication must be through your Sul Ross e-mail account. Check Sul Ross e-mail frequently for communications and make sure your

email address is current. Faculty will respond to inquiries and comments within 24 hours Monday – Friday.

- Responses to e-mails and course postings Please respond to faculty requests and/or communications within 24 hours. Use course or Sul Ross e-mail and if not available, mobile phone or texting between the hours of 8 am and 8 pm if possible. Messages received on the weekends or holidays will be answered by the next working day.
- **Assignments** Assignments will be reviewed and returned with feedback/grade within 4 days of submission.
- Writing and use of APA format All written assignments and discussion board postings will be submitted using the American Psychological Association (APA) Guidelines, as indicated by faculty.

  http://owl.english.purdue.edu/owl/resource/560/01

#### **USE OF TECHNOLOGY:**

If you have any technical questions, problems or concerns with Blackboard, do not spend more than 15 minutes on any technical problem, seek help immediately.

• Contact the 24-7 Help Desk at: 1-888-837-2882.

• Uvalde OIT Department: 830-279-3045

• Eagle Pass OIT Department: 830-758-5010

• Del Rio OIT Department: 830-703-4818

#### ATTENDANCE AND PARTICIPATION:

- Your attendance is expected at every planned class meeting as agreed upon by students and faculty.
- Readings and learning activities relevant to the weekly topic are identified in the course schedule and modules.
- Scholarly and knowledgeable participation requires that you read your assigned readings prior to joining class discussions.
- An online course requires participation in all areas for accurate evaluation of performance including responding the faculty requests or communications.
- If you have an emergency and cannot attend a class meeting or complete an assignment by the due date, you must contact your faculty by phone, e-mail, or text as soon as possible and make arrangements to make up the assignments.
- Blackboard course platforms have a tracking feature. This feature quantifies how often and when students are active in the course and also provides information if the student has accessed different pages of the course. The Blackboard tracking function may be utilized to verify student online participation.

#### **RULES OF NETIQUETTE:**

The term "netiquette" refers to written and unwritten rules regarding appropriate communication on the Internet. It will apply primarily to your interactions on the course Discussion Board, assignments both individual and group, and e-mail communications.

- 1. Help create a community of scholars by encouraging a cooperative win-win attitude in which all members of the class are willing to work together, each contributing in their own way.
- 2. Be helpful and be sure to do your part in an online class or in group work so that assignments can be completed.
- 3. Common courtesy and good manners, along with proper use of grammar, sentence structure, and correct spelling, are essential when taking an online class.
  - a. Use a meaningful title in the Subject line. For e-mail, include course number.
  - b. Use the person's name you are writing to as a greeting in the first line of the message this helps ensure you are writing to the intended person (group).
  - c. Close the posting by writing your full name at the end of the message.
- 4. Do not post anything too personal as all students in the class and your instructor will see what you write and the University archives all course materials;
- 5. Be courteous and respectful to students and faculty in the course.
  - a. There is a difference between making a statement that is a critical appraisal of an idea and criticizing someone for their point of view as it will be read by others;
  - b. Be careful with the tones of what you are communicating, sarcasm and subtle humor; one person's joke may be another person's insults;
  - c. Do not use all caps in the message box (it is considered shouting);
  - d. Do not use language that is inappropriate for a classroom setting or prejudicial in regard to gender, race or ethnicity.
- 6. Keep the messages you post to the Discussion Board relevant to the course and assignment, and provide a rationale including references as appropriate to support your point-of-view.
- 7. Avoid duplication. Read the previous discussions before you comment or ask a question as the information may have already been covered.
- 8. When posting a response, make sure you clarify the post to which you are responding.
- 9. If the topic you wish to address is already covered under an existing thread, do not start a new thread.
- 10. When responding to a specific comment, quote only the relevant part of the comment and stay focused on the assignment.
- 11. Try not to lurk, meaning you are just reading and not participating.
- 12. Quality of online communications/postings is important
  - a. It is not acceptable to present work or ideas of others as your own. If you quote from a source, use quotation marks and provide the original author's name, year, and the work from which the quotation is taken. If you paraphrase, use your own understanding of the work if possible and give credit to the original author by citing name, year and source of the idea.
  - b. If the posting is going to be long, use paragraphs;
  - c. Do not overuse acronyms like you use in text messaging. Some of the participants may not be familiar with acronyms;
  - d. Just as you would proofread a formal paper, before posting;
    - i. Read what you have written for content;

- ii. Rethink what you have written for tone;
- iii. Reread what you have written for organization and coherence; and
- iv. Revise what you have written for grammar, punctuation and mechanics.
- v. Once you submit your work, discussion, or e-mail, you cannot change what you have written.
- 13. Don't send large files as someone in your class may have a relatively slow internet connection and be sure to check for viruses when sending files.
- 14. Be patient if you do not get an immediate response to your postings as others may be on a different schedule. If it is urgent, you can contact other students of faculty by e-mail, phone, or text.

#### ASSESSMENT OF STUDENT LEARNING:

1. Evaluation of student performance is based on evidence of achievement of course objectives. Students are graded on their attendance and participation in the class discussion online reflections and observations, clinical performance when applicable, knowledge and comprehension of reading assignments and completion of course assignments. Criteria for each course activity and assignments include grading rubrics are delineated either in the syllabus or in the modules.

#### 2. Summary of Measures for Evaluations:

The course grade is based on Discussion Board participation,

#### Course Requirements

1.	Discussion Participation	20%
2.	Critical Analysis of Literature/Research	20%
3.	Data Base Development	20%
4.	Weekly Documentation of Patient Assessment	10%
5.	Course Examinations	20%
5.	Final Complete Integrated Assessment	Pass/Fail
	Total	100%

3. Calculation of Final Grade: The final grade is derived as a summary of the points delineated on specific rubrics for the assignments and participation.

#### **Grading Scale**

A = 90 - 100

B = 80 - 89

C = 75 - 79

D = 70 - 74

F = 69 or below

#### POLICIES FOR EXAMS AND ASSIGNMENTS:

Online testing/Assessments: When assigned, examinations will be given via the method chosen by the faculty of record.

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Missed Examinations and Makeup Examinations: Faculty members must be informed immediately when a student is aware that an examination will be missed. Make-up should occur within a week of the scheduled examination as agreed on between the faculty and student. Should scheduling conflicts and/or family emergencies arise, students should contact faculty by phone, e-mail, or text as soon as possible. If students have spoken with faculty and an agreement is reached, late make-up exams can be arranged without penalty.

Late and Make-up Assignments: To achieve the designated points for an assignment, the assignment must be submitted at or before the scheduled date and time. Missed course work, class participation grades, written documents or presentations will result in the student receiving a zero for the assignment. Should scheduling conflicts and/or family emergencies arise, student should contact faculty by phone, e-mail, or text as soon as possible. If students have spoken with faculty and an agreement is reached, late make-up assignments can be arranged without penalty.

### COURSE SCHEDULE: (This schedule is subject to change by faculty.) NURS 4610 Reccalaureate Nursing Practice

	NUKS 4010 Dace	calaureate Nursing Pi	ractice
Week & Date	Topics & Objectives	Required Readings & References	Learning Activities, Assignments & Submission Dates
Week 1	INTRODUCTION TO	Reading	Class Activities:
Oct. 18, 2021,	BLACKBOARD & PATIENT ASSESSMENT, HEALTH HISTORY NUTRITIONAL ASSESSMENT & GENERAL SURVEY	Assignment: Jarvis, C. (2020). Physical Examination & Health Assessment	<ol> <li>Utilize interactive activities to assure that each student can utilize necessary components of Blackboard.</li> <li>Discuss some key factors from</li> </ol>
	<ul> <li>INTRODUCTION TO         HEALTH ASSESSMENT</li> <li>Development of         Population-Based Data         Base (Assessment</li> </ul>	(8 <sup>th</sup> Ed.). St. Louis, Mo: Saunders- Elsevier. Jarvis, C. (2020).	the nursing theory you selected for your patient population that will guide in the development of your data base.
	Guide) <u>Class Objectives &amp;</u> <u>Discussion Topics</u> :	Physical Examination & Health Assessment Student Laboratory	3. Discuss routine diagnostic data that will provide foundational information for

	1. Explain the	Manual (8 <sup>th</sup> Edition).	assessment of your selected
	relationship of clinical	St. Louis MO:	patient population.
	reasoning, nursing	Saunders-Elsevier	<b>4.</b> What is the value that can be
	process and health		attained by utilizing a nursing
	assessment.		theory when developing a
	2. Discuss the		population- based Data Base?
	components of a		5. Utilize the entire data base on
	comprehensive data		a minimum of two individuals
	base.		that represent your patient
	3. Explain the legal		population.
	requirements related		6. Discuss with faculty and/or
	to nursing assessment		classmates any issues that
	based on Texas Board		were difficult to assess.
	of Nursing standards,		7. Identify equipment that was
	rules, and regulations.		difficult to use and review
	4. Differentiate between		techniques in textbooks or
	subjective and		other references.
	objective data.		8. Discuss the components of a
	5. Describe health and		nutritional assessment
	illness beliefs and		including laboratory data.
	practice assessments.		Write a brief, general survey
	6. Describe the		of your patient.
	components and		•
	process of a general		
	survey.		
	7. Identify factors		
	affecting accurate		
	body measurements.		
	8. Explain the process		
	and technique of a		
	skilled interview.		
Week 2	ASSESSMENT OF THE	Reading Assignment:	
Oct. 25,	INTEGUMENTARY,	Jarvis, C. (2020).	Class Activities:
2021	SENSORY SYSTEMS AND	Physical Examination	1. Discuss techniques to utilize
	FIFTH VITAL SIGN	& Health Assessment	when assessing sensitive
		(8 <sup>th</sup> ED.). St. Louis,	information.
	Class Objectives &	MO: Saunders-	2. Differentiate between the
	Discussion Topics:	Elsevier.	skin and the integumentary
	Inspect and palpate	Jarvis, C. (2020).	system.
	the skin noting its	Physical	3. Discuss the differences that
	color, vascularity,	Examination &	must be considered for age
	edema, moisture,	Health ASSESSMENT	groups and patient
	temperature, texture,	STUENT	populations selected by
	thickness, mobility,	LABORATORY	each students.
	turgor, and any	MANUAL. Manual	4. Prepare and present an
	lesions.	(7 <sup>th</sup> Edition). St.	evidence-based clinical
	2. Inspect the fingernails,	Louis MO:	practice health promotion
	noting shape, color,	Saunders-Elsevier	presentation on the
1	and any locions	j l	

and any lesions.

	<ol> <li>Inspect the hair, noting texture, distribution, and any lesions.</li> <li>Inspect and palpate the skull noting size, contour, lumps, or tenderness.</li> <li>Inspect and palpate the skull noting size, contour, lumps, or tenderness.</li> <li>Inspect the face noting facial expression, symmetry, skin characteristics, or lesions.</li> <li>Inspect and palpate the neck for symmetry, range of motion, and integrity of lymph nodes, trachea, and thyroid gland.</li> <li>Demonstrate and explain assessment of visual acuity, visual fields, external eye structure, and ocular fundus.</li> <li>Describe and demonstrate the correct technique of an otoscopic examination.</li> <li>Describe and perform tests of hearing acuity.</li> <li>Record the history and physical examination findings accurately on your data base, reach an assessment of the health state, and</li> </ol>	Manual (6 <sup>th</sup> Edition). St. Louis MO: Saunders-Elsevier	following topics (Follow Rubric):  A. Indoor Tanning B. Sun Bathing C. Skin Cancer Risks D. Body Piercing and Tattoos E. Brain Injury Prevention (Safety of Wearing Helmets)  5. Prepare and present an evidence-based clinical practice health promotion presentation on the following topics: A. Screening for Glaucoma B. Use of Earbuds and the increasing prevalence of hearing loss in Adolescents. C. Use of hearing aids.  6. Discuss changes you need to make to refine your data base. 7. Discuss methods that are used to assess pain, the fifth vital sign in the patient population you have chosen. 8. Discuss attitudes observed related to managing complaints of pain. 9. Differentiate between types of pharmacologic pain management.
	findings accurately on your data base, reach		of pain.  9.Differentiate between types of pharmacologic pain
Nov. 1,	ASSESSMENT OF THE ABDOMEN, THROAT AND GLYCEMIC CONTROL	Reading Assignment: Jarvis, C. (2020). Physical Examination	Class Activities:

#### Class Objectives & **Discussion Topics:**

- 1. Locate anatomic landmarks (quadrants) of the abdomen.
- 2. Demonstrate inspection of the abdomen by assessing skin condition, symmetry, contour, pulsation, umbilicus, nutritional status.
- 3. Demonstrate auscultation of the abdomen by assessing the characteristics of bowel sounds and by screening for bruits.
- 4. Demonstrate light palpation by assessing muscular resistance, tenderness, and masses.
- 5. Demonstrate percussion of the abdomen.
- 6. Record the history and physical examination findings, accurately, reach an assessment of the health history state and develop a plan of care.

& Health Assessment (8th ED.). St. Louis, MO: Saunders-Elsevier.

Jarvis, C. (2020). **Physical Examination** & Health Assessment Student Laboratory Manual 76<sup>th</sup> Edition). St. Louis MO: Saunders-Elsevier.

- 1. Discuss knowledge of the symptoms related to the abdominal system by obtaining a regional health history from a peer or patient.
- 2. Discuss diagnostic data that are commonly obtained to provide information related to the status of the abdominal structures.
- 3. Discuss the issues related to prevention of abdominal maladies such as the value of colonoscopy for patients over 40 years of age.
- 4. Identify changes in assessment techniques that relate to age groups and selected patient populations selected by the enrolled students.
- 5.Discuss methods used in your clinical area to determine glycemic control and management.
- 6. Identify pros and cons for the use of a sliding scale for glycemic control.
- 7. Compare and contrast new insulins and oral hypoglycemic with conventional medications.

#### Week 4 Nov. 8, 2021

#### ASSESSMENT OF THE **IMMUNE SYSTEM.** THORAX, LUNGS AND **IMMUNIZATIONS**

Class Objectives & **Discussion Topics:** 

- 1. Discuss the humoral and cellular
- components of the immune that can provide information related to the status of the immune system.
- 2. Discuss objective and subjective symptoms

#### Reading

Assignments: Jarvis, C. (2020). **Physical Examination** & Health Assessment (8th ED.). St. Louis, MO: Saunders-Elsevier.

Jarvis, C. (2020). **Physical Examination** & Health Assessment Student Laboratory Manual (7<sup>th</sup> Edition). St. Louis MO: Saunders-Elsevier

#### Class Activities:

- 1. Prepare and discuss an evidence-based clinical practice promotion topic on the following:
  - A. Smoking Cessation
  - B. Second-Hand Smoking and its Effect on Children
  - C. Benefits of e-cigarettes
- 2. Discuss the value of prevention methods for pulmonary diseases.
- 3. Submit the final version of your Data Base by April 15, 2019.

	related to the respiratory system by obtaining a health history for your selected patient population. 3. Demonstrate correct techniques for inspection, palpation, percussion, and auscultation of the		4.Discuss pertinent vaccinations for age groups (across the life span). 5.What observations have you made related to providing pertinent vaccinations for your patient population. 6.Explore personal views related to vaccinations. 7.Plan communication principles used to provide patient education related to vaccinations.
	respiratory system.  4. Discuss diagnostic methods that can be utilized to determine the integrity of the immune and respiratory systems.		
Week 5	ASSESSMENT OF THE	Reading	Class Activities:
Nov. 15,	HEART, PERIPHERAL	Assignments:	1. Prepare and present an
2021	VASCULAR SYSTEM	Jarvis, C. (2020).	evidence-based clinical
	AND PRIMARY	Physical	practice health promotion
	HYPERTENSION	Examination &	presentation on the following
		Health Assessment	topics:
	Class Objectives and	7th ED.). St. Louis,	A. Women and Heart
	Discussion Topics:	MO: Saunders-	disease
	1. Discuss subjective and	Elsevier.	B. Prevention of Elevated
	objective symptoms		Cholesterol Levels
	related to the	Jarvis, C. (2020).	C. Prevention of High
	cardiovascular and	Physical	Blood Pressure
	peripheral vascular	Examination &	D. Obesity and Heart
	systems.	Health Assessment	Disease
	2. Correctly identify	Student Laboratory	E. Prevention of Stroke
	anatomic landmarks on	Manual (7th Edition).	2. Discuss heart and vascular
	the chest wall that will	St. Louis MO:	variations across the lifespan.
	guide the assessment of	Saunders-Elsevier.	3. Discuss the influence of fluids
	each lung and		and electrolytes on the
	abnormal heart sounds.		cardiovascular system.
	3. Demonstrate correct		4. Discuss bio-cultural
	technique for		considerations related to
	inspection and		abnormalities of the
	palpation of neck vessels.		cardiovascular system.  5.Discuss the incidence and
	4. Demonstrate correct		management of primary
	techniques for		hypertension in your selected
	inspection, palpation,		patient population.
	and auscultation of the		6.Discuss the types of medications
	precordium.		utilized to manage primary
	5. Demonstrate palpation		hypertension.
	of peripheral arterial		7.Discuss the role of renin,
	pulses (brachial,		angiotensin, and aldosterone

Week 6 Nov. 22, 2021	radial, femoral, popliteal, posterior tibial, dorsalis pedis) by assessing amplitude and symmetry, noting any signs of arterial insufficiency.  ASSESSMENT OF THE MUSCULOSKELETAL SYSTEM AND INCIDENCE OF OBESITY Class Objectives and Discussion Topics:  1. Demonstrate knowledge of subjective and objective symptoms related to the musculoskeletal system by obtaining a health history.  2. Demonstrate inspection and palpation of the musculoskeletal system by assessing the muscles, bones, and joints for size, symmetry, swelling, nodules, deformities, atrophy, and active range of motion (ROM).  3. Assess the ability to carry out functional	Reading Assignments: Jarvis, C. (2020). Physical Examination & Health Assessment 7th ED.). St. Louis, MO: Saunders- Elsevier.  Jarvis, C. (2020). Physical Examination & Health Assessment Student Laboratory Manual (7th Edition). St. Louis MO: Saunders-Elsevier	syndromes (RAAS) in primary hypertension  Class Activities:  1. Prepare and present an evidence-based clinical practice health promotion presentation on the following topics:  A. Prevention of Osteoporosis  B. Cerebral Palsy  C. Multiple Sclerosis  D. Guillain-Barre Syndrome  2. Discuss the effects of normal V-D levels in your patient population.  3.Discuss the benefits of a bodybone scan.  4. Discuss the prevalence and management of obesity in your selected patient population.  5.Is body mass index recorded during patient care?  6.Discuss secondary effects that can occur from obesity in your patient population.
	and palpation of the musculoskeletal system by assessing the muscles, bones, and joints for size, symmetry, swelling, nodules, deformities, atrophy, and active range of motion (ROM).  3. Assess the ability to carry out functional activities of daily living.  4. Record the history and physical examination findings accurately, reach an assessment about the health history state, and develop a plan of care.	St. Louis MO:	management of obesity in your selected patient population. 5.Is body mass index recorded during patient care? 6.Discuss secondary effects that can occur from obesity in your
	5. Differentiate between normal and abnormal findings of the system.		
Week 7 Nov. 29, 2021	ASSESSMENT OF MENTAL STATUS, SUBSTANCE	Reading Assignments:	Learning Activities and Discussion Board Questions:

#### USE/ABUSE, DEPRESSION AND THE NEUROLOGICAL SYSTEM

<u>Class Objectives and</u> <u>Discussion Topics:</u>

- 1. Demonstrate knowledge of subjective and objective symptoms related to the neurologic system by obtaining a regional health history from a member of your selected patient population.
- 2. Demonstrate
  examination of the
  neurologic assessment
  by assessing the cranial
  nerves; cerebellar
  function, sensory
  system, motor system,
  and deep tendon
  reflexes.
- 3. Discuss diagnostic data that can reflect the status of the neurologic system.
- 4. Select an assessment tool that will provide data that can reflect normal and abnormal findings related to mental health of your selected patient population.
- 5. Discuss common abnormalities in the neurological system in your selected patient population.

Jarvis, C. (2020).
Physical
Examination &
Health Assessment
(8<sup>th</sup> ED.). St. Louis,
MO: SaundersElsevier.

Jarvis, C. (2028).
Physical
Examination &
Health Assessment
Student Laboratory
Manual (7<sup>th</sup> Edition).
St. Louis MO:
Saunders-Elsevier.

- 1. Prepare to demonstrate a comprehensive assessment for each body system.
- 2. Prepare to demonstrate the use of all diagnostic tools required to complete a comprehensive assessment.
- 3. Utilize appropriate documentation methods for the findings from a comprehensive assessment.
- 4. Prepare and present an evidence-based clinical practice health promotion presentation on the following topics.
  - A. Assessing for Post-Traumatic Stress Disorder (PTSD).
  - B. Assessing for Alzheimer's Disease
  - C. Prevention of Traumatic Brain Injury
  - D. Assessing for Substance Abuse
  - E. Assessing for CVA
- 5. Is substance use/abuse addressed during the care of your selected patient population?
- **6.** Review the rubric which will be used to evaluate your ability to pass the designated assignments.
- 7. Are questions related to substance use/abuse discussed in the presence of family or significant others?
- 8. How might personal experiences/feelings impact communication with your selected patient population?
- 9. Is the topic of depression addressed at any time during patient assessment?
- 10. What are some of the guidelines that nursing staff follow when addressing substance abuse?

Week 8 Dec. 6, 2021	FINALS WEEK  All Evaluation Forms and Documents must be finalized	All Evaluation Forms, and Surveys from the nursing program and Sul Ross State University must be completed and submitted. These forms are vital for our CCNE Accreditation.

#### **ACADEMIC HONESTY POLICY:**

The University expects all students to engage in all academic pursuits in a manner that is beyond reproach and to maintain complete honesty and integrity in the academic experiences both in and out of the classroom. The University may initiate disciplinary proceedings against a student accused of any form of academic dishonesty, including but not limited to, cheating on an examination or other academic work, plagiarism, collusion, and the abuse of resource materials. Academic Dishonesty includes:

- 1. Copying from another student's test paper, laboratory report, other report, or computer files, data listings, and/or programs, or allowing another student to copy from same.
- 2. Using, during a test, materials not authorized by the person giving the test.
- 3. Collaborating, without authorization, with another person during an examination or in preparing academic work.
- 4. Knowingly, and without authorization, using, buying, selling, stealing, transporting, soliciting, copying, or possessing, in whole or in part, the contents of a non-administered test.
- 5. Substituting for another student; permitting any other person, or otherwise assisting any other person to substitute for oneself or for another student in the taking of an examination or test or the preparation of academic work to be submitted for academic credit.
- 6. Bribing another person to obtain a non-administered test or information about a non-administered test.
- 7. Purchasing or otherwise acquiring and submitting as one's own work any research paper or other writing assignment prepared by an individual or firm. This section does not apply to the typing of a rough and/or final version of an assignment by a professional typist.
- 8. "Plagiarism" means the appropriation and the unacknowledged incorporation of another's work or idea in one's own written work offered for credit.
- 9. "Collusion" means the unauthorized collaboration with another person in preparing written work offered for credit.
- 10. "Abuse of resource materials" means the mutilation, destruction, concealment, theft or alteration of materials provided to assist students in the mastery of course materials.

11. "Academic work" means the preparation of an essay, dissertation, thesis, report, problem, assignment, or other project that the student submits as a course requirement or for a grade.

All academic dishonesty cases may be first considered and reviewed by the faculty member. If the faculty member believes that an academic penalty is necessary, he/she may assign a penalty, but must notify the student of his/her right to appeal to the Department Chair, the Associate Provost/Dean, and eventually to the Provost and Vice President for Academic and Student Affairs before imposition of the penalty. At each step in the process, the student shall be entitled to written notice of the offense and/or the administrative decision, an opportunity to respond, and an impartial disposition as to the merits of his/her case.

In the case of flagrant or repeated violations, the Vice President for Academic and Student Affairs may refer the matter to the Dean of Students for further disciplinary action. No disciplinary action shall become effective against the student until the student has received procedural due process except as provided under Interim Disciplinary Action.

#### AMERICAN WITH DISABILITIES ACT (ADA) STATEMENT:

Sul Ross State University is committed to equal access in compliance with the Americans with Disabilities Act of 1973. It is the student's responsibility to initiate a request for accessibility services. Students seeking accessibility services must contact Kathy Biddick in Student Services, Room C-102, Uvalde campus. The mailing address is 2623 Garner Field Road, Rio Grande College-Sul Ross State University, Uvalde, Texas 78801. Telephone: 830-279-3003. E-mail: kbiddick@sulross.edu

#### **ONLINE COURSES:**

Web courses (offered online) are not self-paced and require considerable work in order to meet requirements. Students should be prepared to devote approximately 12 hours per week to accomplish the work required for a 3-hour class (i.e. student should devote approximately the same study time for an online course as would be spent in a regular class with outside work requirements—a measure generally calculated at 3 hours outside work for each hours in class.) Students MUST have a reliable high-speed internet connection available on a regular basis for course work and other assignments whenever University computer laboratories are not open. Computer labs are open Mon.-Thurs., 8 a.m.-10 p.m., and Fri. 8 a.m-5 p.m. University computer labs are not open on weekends and holidays, but computers are available at the Southwest Texas Junior College and Sul Ross State University Rio Grande College libraries. A student who fails to participate in assignments during any one work period may be subject to being withdrawn from class and given a grade of F. Students should regularly log in to their class.

#### GENERAL CAMPUS REGULATIONS AND CONDUCT:

All students are expected to conduct themselves in a manner consistent with the University's functions as an educational institution. It is also expected that all students who enroll at Sul Ross State University agree to assume the responsibilities of citizenship in the university community. Association in such a university community is purely voluntary, and any student may resign from it at any time when he/she considers the obligation of membership disproportionate to the benefits. All students are subject to University authority, and those students whose conduct is not within the policies of the University rules and regulations are subject to dismissal. Students are responsible for abiding by all published University rules and regulations. Failure to read publications will not excuse the student from the requirements and regulations described therein. The SRSU Student Handbook and other official University publications outline specific regulations and requirements.

#### DISCUSSION BOARD RUBRIC

		Performar	nce Indicators	
CRITERIA	Proficient	Competent	Substantive Area for Improvement	Unsatisfactory Work
Content Relevance of information in the posting to the assigned questions and demonstrates student learning.	Responds to discussion questions with a clear understanding of the focus of study in the module.  Posting & responses meet all the requirements of the discussion instruction	Responds to discussion questions but with minor confusion about the focus of study in the module.  Posting & responses meet most of the requirements of the discussion instructions	Responds to 1 or more discussion questions with major confusion about the focus of study in the module.  Or  Provides some answers but fails to respond to discussion questions as directed in the Forum.  Posting & responses meet some of the requirements of the discussion instructions	The discussion questions are not answered  Or  Responses have no connection to the questions.  Posting & responses meet few/none of the discussion instructions.
Scholarly Presentation Writing style allows for clear communication of thoughts through logical presentation of ideas with correct spelling, grammar, and punctuation (SGP).	25 Points  Thoughts are logically organized at the paragraph level without errors in SGP.	20 Points  Thoughts are logically organized at the paragraph level with no more than 3 errors in SG	Thoughts are logically organized at the paragraph level with no more than 4 errors in SGP. &/Or Thoughts show limited logical organization between ideas.	0 Points  Thoughts show no logical organization in the paragraph. &/ Or Postings contain in excess of 4 errors in SGP.
Engagement Engages in discussion through use of thoughtful replies to the postings of other students.	Replies in the forum to 2 peers in a thoughtful, reflective, and respectful manner.	10 Points  Replies in the forum to 1 peer in a thoughtful, reflective, and respectful manner.	5 Points Gives a limited reply to peers in a respectful manner.	0 Points  No replies to any postings.  &/ Or  Replies are clearly
	20 Points	10 Points	5 Points	disrespectful. 0 Points
Citations/APA Ideas are supported by proper citation and use of references following APA format.	Postings incorporate citations and references following APA format with only 1 error.	Postings incorporate citations and references following APA format with no more than 2 errors.	Postings incorporate citations and references following APA format with no more than 3 errors.	Postings include three or more errors in APA format.
Literature/Evidence Ideas are supported by student conducted research – outside the required course material.	20 Points  Postings and replies are supported by more than two outside references in addition to required readings.  20 Points	Postings and replies are supported by one outside reference in addition to required readings.	10 Points  Postings and/or replies are only supported by required readings.  5 Points	5 Points  Postings and replies are not supported by any evidence.  0 Points

#### RUBRIC FOR DEVELOPMENT OF POPULATION BASED DATA BASE

STUDENT NAME					DATE	
Content to be Developed	5	4	3	2	1	COMMENTS
	Exceptional	Good	Average	Needs	Inadequate	
			1	Developmen <sup>.</sup>	t	

- 1. Clearly identifies the selected patient population
- 2. Demographic Data targeted to patient population
- 3. Patient Profile/Relationship of Family Members
- 4. Family History/Pedigree
- 5. Resources & Support
- 6. Social History
- 7. Sexual/Obstetrical History
- 8. History of Present Illness
- 9. Individual's Reason for Seeking Assistance: Chief Complaint
- 10. Expectation of Treatment
- 12. Past Medical History
- 13. Past Surgical History
- 14. Summary of Diet
- 15. Review of Systems
- 16. Functional Ability
- 17. Physical Assessment
- 18. Grid for Pertinent Diagnostic Data
- 19. Summary of Findings
- 20. Common Nursing Diagnosis for Patient Population

#### **EXAMPLE DATA BASE**

Data Base Patient Identification					Date
		Λσο	Paca	Sov	Dirthdata
Name		. Age	Kace _	 sex	Birtildate
<u>Chief Complaint</u>					
D					
<u>Patient Profile</u>					
Birth Place					
Present Residence					
Occupation					
Marital Status					
Religion					
Armed Services					
Home Situation	Locations			 	
Family					
Family Relation	ns				
Income					
Amount					
Sources					
Functionability	′				
Housing					
Type					
Number of Occ	cupants				
Transportation					
Availability of Family o	r Neighbors				

Hobbie	es or Special Interests
Averag Averag	e Day e Weekend
Habits	(Alcohol, Tobacco, Drugs)
Sleep P	Pattern
Activity	/ Limitations
Prosthe	esis
	Eye
	Ear
	Extremities
	Dentures

Diet

	Beverages	Meat, Fish, Eggs	Fruit & Veg.	Milk & Cheese	Bread, Cereal
Breakfast					
Lunch					
Dinner					

Snacks								
Diet								
Diet	Salt Use							
	Other Diet Informati	on						
Ability 1	to Communicate and	Understand						
Behavio	or during Assessment							
Comme	ents							
<u>History</u>	of Present Illness							
	oositive responses an ation not available.)	d comment appropr	iately. Underline neg	ative responses leav	e unaltered if			
Past Me	edical History							
1.	<ol> <li>Pediatric and adult illnesses: mumps, measles, chickenpox, rheumatic fever, arthritis, rheumatism, chorea, scarlet, fever, pneumonia, tuberculosis, diabetes mellitus, heart disease, renal disease, hypertension, jaundice</li> </ol>							
2.	Immunizations							

3. Hospitalizations

4.	Trauma								
5.	Transfu	Fransfusions							
6.	Allergie	S							
7.	Medicat	cions (prescribed)							
		Time and/or day medio	cation taken						
		How does the medicati	ion make you feel?						
8.	. Medications (unprescribed) and why taken								
9.	Habits								
Diabete	a, heart d		, stroke, hypertension, renal es, hemophilia, mental or emo y, other		_				
(Diagram family pedigree, place siblings in order of birth from left to right, use a "/" to indicate an individual is deceased, draw a line from the patient to the "spouse line", and indicate the spouse and any children on the "spouse line".)									
MGM	1	MGF		PGM	PGF				
	M		Patient and Siblings		F				

"spouse line"

System	s Review
1.	General: weakness, fatigue, change in weight, appetite, sleeping habits, chills, fever, night sweats
2.	Integument: color changes, pruritis, nevus, infections, tumor (benign/malignant), dermatosis, hair changes, nail changes
3.	Hematopoietic: anemia, abnormal bleeding, adenopathy, excessive bruising, polycythemia
4.	Central Nervous System: headache, syncope, seizures, vertigo, amaurosis, diplopia, paralysis/paresis, muscle weakness, tremor, ataxia, dysesthesia, disturbance of smell, disturbance of taste, difficulty of speech, difficulty in swallowing, loss of memory or intellect
5.	Eyes: vision, glasses/contact lens, date of last eye exam, scotomata, pain excessive tearing color blind
6.	Ears: tinnitus, deafness, other
7.	Nose, Throat and Sinuses: epistaxis, discharge, hoarseness, thryo-megaly, sore throats
8.	Dentition: caries, pyorrhea, dentures
9.	Breasts: masses, discharge, pain
10.	Respiratory: cough (productive/nonproductive), change in cough, amount and characteristic sputum, duration of sputum production, tobacco usage years pkg. per day, wheezing, hemoptysis, recurrent respiratory tract infections, positive tuberculin test
11.	Cardiovascular: chest pain, typical angina pectoris, dyspnea on exertion, orthopnea, paroxysma nocturnal dyspnea, peripheral edema, murmur, palpitation, varicosities, thrombophlebitis,

claudication, Raynaud's phenomenon, syncope, near syncope

12.	Gastrointestinal: nausea, vomiting, diarrhea, constipation, melena, hematemesis, rectal bleeding, change in bowel habits, hemorrhoids, dysphagia, food intolerances, excessive gas or indigestion, abdominal pain, jaundice, use of antacids, use of laxatives
13.	Urinary tract: dysuria, hematuria, frequency, polyuria, urgency, hesitancy, incontinence, renal calculi, nocturia, urinary tract infection (recurrent), proteinuria, renal trauma, glomerulonephritis, nephrosis
14.	Genito-Reproductive System:  Male: penile discharge, lesion, history of veneral disease, serology, testicular pain, testicular mass, infertility, impotence, libido
	Female:  Gynecologic history:  Age of menarche  Last Menstrual Cycle  Regularity of Menses  Amount of Flow during Menses  Intermenstrual bleeding, postcoital bleeding, leukorrhea, pruritus, history of venereal disease, serology, uterine fibromyomas, libido  Last Pap smear Results  Age of Menopause Post-Menopausal Bleeding
	Obstetric History: Pregnancies Abortions Full-term Deliveries Living Children Complications of Pregnancies, Infertility
	Methods of Contraception Past
	Present

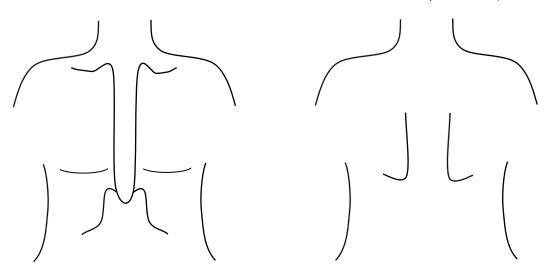
#### 15. Musculoskeletal:

- a. Joints: pain, edema, heat, rubor, stiffness, deformity, gout
- b. Muscles: myalgias

16.	Endocrine: goiter, heat intolera glycosuria, excessive sweating, characteristics			
17.	Psychiatric: hyperventilation, n	nervousness, depression,	nightmares, memory l	OSS
18.	Additional historical data			
<u>Physica</u>	ll Examination			
Vital Sig	gns:			
	Pulse reg/irreg.		Temp	_ oral/rectal
	Blood Pressure—supine	R. Arm Sitting Arm		_ Leg
		Standing Arm		
	Weight	Scales Used	Height	
	Integument: turgor, texture, pi ecchymosis, infection, lesions, Lymph Nodes: cervical, post-au	hair, nails, mucous mem	branes	
	Skull: trauma, bruits, other			
	Eyes: lacrimal glands, cornea, l	ids, sclerae, conjunctivae	, exophthalmos, lid lag	Ţ.
	Fundi: discs, arteries, veins, he	morrhages, exudates, mi	cro aneurysms	
	Grade			

Ears: tophi, tymphanic conduction		_		, bone
Mouth, Nose and Thro sinuses	at: dentition, gingiv	a, tongue, tonsils, ph	narynx, nasal mucos	a, nasal septum
Neck: mobility, scars, n	masses, thyroid, sali	vary glands, trachea	I shift, bruits	
Breasts: masses, discha	arge, nipples, asymr	metry, gynecomastia		
Chest:				
Respiratory Rate	/min	Amplitude:	Shallow Deep Normal	
Respiratory Rhythm:	Regular Irregular Periodical Inspiration/Expira	tion Ratio		
Chest Wall:	Deformities Motion Lateral Motion: go Use of Accessory (	•		
•	wheezes, rhonchi Sounds: increased,	decreased, normal		
Other:				

(Diagram location of abnormal breath sounds, transmitted voice, or abnormal percussion.)



elevation from supine.		cm. above the angle of Louis at			es of truncal
TWISTITCHETCS at the					
$S_1$					
$S_2$					
Gallops					
Systolic Murmur					
Diastolic Murmur					
Other					
	S <sub>1</sub>	$ S_2 $	S <sub>1</sub>	$S_2$	S <sub>1</sub>
Int. Jugular Vein					
Carotid Artery					
Precordial Movements					← Apex ← Ant. Precordium
and Locations					<b>◆</b> Other
Auscultation					
$\psi$					

#### Peripheral Pulses

Caratoid	Brachial	Radial	Aorta	Femoral	Popiteal	dp	pt	
								l

0 – Absent	1 /- Thready	2 /- Decreased	3 /- Normal	4 /- Hyperactive	

Extremities: edema, cyanosis, stasis, ulceration, hair distribution, clubbing

Abdomen: obesity, contour, scars, tenderness, CVA tenderness, masses, rebound, rigidity, fluid wave, shifting dullness, frank ascites, bruits, hernia, venous collaterals

(Diagram any finding as needed to help in explanation.)
Male: Genitalia: penis, scrotum, testes, epididymis, masses, other Rectal: perineum, hemorrhoids, sphincter tone, prostate, bleeding, masses Stool
Female: External Genitalia: labia, clitoris, introitus, urethra, perineum, other
Internal Genitalia: vagina, cervix, adnexa, cul-de-sac, discharge
Pap smear: done, omitted
Rectal: hemorrhoids, sphincter tone, bleeding, masses Stool

Bowel Sounds: normal, absent, hyperactive, hypoactive, obstructive

Organomegaly: liver, spleen, kidneys, bladder, gall bladder

Liver Size \_\_\_\_\_ cm (total dullness)
Liver Tenderness: absent, increased
Liver Edge: smooth, irregular, nodular

Joints: deformity, rubor, calor, tenderness, edema Range of Motion: fingers, wrists, elbow, shoulder, hips, knees, ankles Spine: deformity (kyphosis, lordosis, scoliosis), thoracic, excursion Neurological: Cerebral Function: alert wakefulness, lethargic, obtunded, stuporous, semicomatose, comatose Mental Status: **Cranial Nerves:** ١. (List test materials) II. Discs, papilledema, venous pulses, optic atrophy, visual fields, visual acuity III, IV, VI. Ptosis, palpebral fissure L \_\_\_\_\_ mm R \_\_\_\_\_ R to L \_\_\_\_\_ Pupils: R \_\_\_\_\_mm Shape \_\_\_\_\_ L \_\_\_\_\_ L to R \_\_\_\_\_ Reaction to light: Consensual Reaction: Reaction to Near Vision Extraocular Movements: full, abnormal, dolls-eyes, cold calorics, gaze preference, nystagmus, optico-kinetic nystagmus ٧. 2<sup>nd</sup> Division 3<sup>rd</sup> Division 1<sup>st</sup> Division Sensory: R Corneal L Corneal Motor: masseters, pterygoids, temporalis VII. Intact, RL central, RL Peripheral VIII. IX, X. Sternocleidomastoids, trapezii

Gait and Station:

XII.

Walking: normal, abnormal, heel walking, toe walking, tandem walking

Tongue in midline, deviation to R-L, atrophy, fasiculations

Truncal Ataxia

Ro	Romberg: present, absent, R-L											
Inv	Involuntary Movements											
	rebellum sturing	: rapid al	ternating	g movem	ents, fing	ger-nose, fin	ger-fing	ger, he	el-shin, pa	st-pointing	g, reboun	d,
Se	nsory: pa	in, tempe	erature, I	ight-tou	ch, joint-ہ	oosition, vib	ratory,	two-po	oint discrin	nination, s	tereogno	sis
As	sociative	function	s: speech	, writing	, reading	, apraxia, ag	nosia, d	other				
М	otor: tone									le e e e e e e e e e e e e		
					and _					hemiplegi	а	
	_											
Re	flexes											
	- Absent - Sustaine			tr-tra	ce	1/- Decre	ased		2/- Norma	al 3/-	Hyperacti	ive
	Bi	Tri	F	K	Α	Plantar	Abdo	men	Snout	Grasp	Jaw	Suck
R												
L												
<u>La</u>	boratory	<u>Data</u>										
He	matology											
WBC					Differential							
	Hct											
	RBC	Morpho	ology			Platelet E	stimatio	on				
Ch	emistry: Na	- mEa	ı/liter			BUN						

	K -	Creat.	
	CO2	Uric Acid	
Urinaly	Cl	Cholesterol	
	Blood Sugar	mg/100cc.	
	sis: Protein Sugar	Other	
	Blood		
Chest X-Ray (Diagram if appropriate): routine, protable, A-P			
			1
		\	! /
			l aVL
		aVR	/ avr
			\i/
Electro	cardiogram: Rate	/	
	Rhythm		
	P-R QRS QT _		
	Interpretation		aVF

Other laboratory data possibly indicated.

Plasma Renin

17 OHC's

Metanephrine

IVP