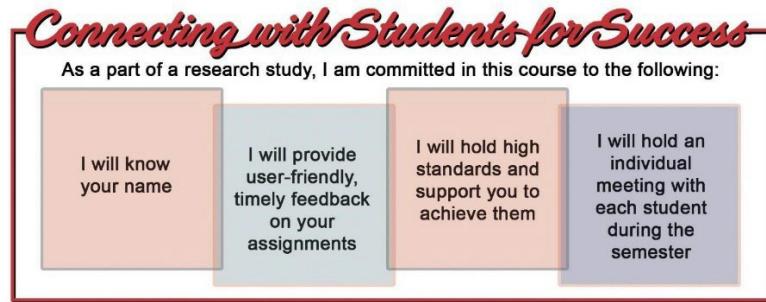


**DEPARTMENT OF NURSING**  
**NUR 4415**  
**Patient Centered Concepts Across the Life Span III**  
**Spring Senior Year**



**SEMESTER HOURS:** 4 Credit Hours (3 Credit Hours of Didactic and 1 Credit hour of Lab)

**CONTACT HOURS:** 7 Contact Hours/Week

**CLINICAL HOURS:** 4 Hours Skills/Simulation Laboratory /Week

**Level:** Senior

**PREREQUISITES:** Successful completion of NUR 4414 and 4542

**FACULTY INFORMATION:**

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University e-mail: [veronica.arredondo@sulross.edu](mailto:veronica.arredondo@sulross.edu)

**COURSE DESCRIPTION:**

Progression to advanced health/illness conditions is the focus of this course for each component of nursing care across all ages in the life span. Understanding biological changes consistent with advancing conditions, including influences of behavioral, psychological, cultural, environmental, and ethnic variables are incorporated in this course. Simulation-lab experiences provide the opportunity to demonstrate planning and implementation of nursing care for life-threatening conditions in all ages. Contrary cases which depict conditions of differential diagnosis challenge nursing-management skills.

**COURSE OBJECTIVES:**

**MEMBER OF THE PROFESSION**

1. Discuss the value of current literature related to designated biophysical and pathophysiological, advanced, health-care concepts.
2. Incorporate standards of practice for the professional nursing role when providing holistic, culturally sensitive, evidence-based care for individuals and families who are critically ill or in

life-threatening situations, such as disasters.

- 3. Demonstrate responsibility for continued competence in nursing practice.
- 4. Develop insight through reflection, self-analysis, self-care, and life-long learning

## **PROVIDER OF PATIENT-CENTERED CARE**

5. Utilize a systematic process to analyze selected, advanced, health-care concepts across the life span.
6. Describe and evaluate nursing management for selected, advanced, health-care concepts.
7. Apply learned concepts to exemplars that reflect advanced health-care conditions (status).
8. Analyze the interrelatedness of health-care concepts which support clinical judgments for optimum patient-care outcomes in patients across the life span.
9. Incorporate acquired knowledge and skills in addressing critical and life-threatening situations for individuals and communities.
10. Discuss desired actions, side effects, rationale, and nursing implications of pharmacological agents used in the care of patients with advanced health needs involving multiple body systems.
11. Create teaching, discharge, and referral plans for patients to facilitate adaptation to health needs involving multiple body systems.
12. Discuss economic, cultural, and political issues influencing care of patients with advanced health needs.

## **PATIENT SAFETY ADVOCATE**

13. Use safety alerts and decision supports to prevent harmful occurrences to patients, families, and/or staff during the care of patients.
14. Recognize clinical conditions that require notification of EMS or Rapid Response Teams.
15. Demonstrate safe use of monitoring devices, including the crash cart, AED, and/or LifePak.
16. Describe elements of disaster planning and preparedness activities in the community.

## **MEMBER OF THE HEALTH CARE TEAM**

17. Communicate issues related to exemplars for each concept to health-team members.
18. Identify a variety of community resources that assist patients with advanced health problems.
19. Employ collaborative communication principles when working with community groups and organizations to address disaster preparedness and prevention.

## **MARKETABLE SKILLS FOR THE DEPARTMENT OF NURSING**

The following marketable skills and dissemination plan has been submitted to the Texas Higher Education Board after approval from Dr. Jeanne Qvarnstrom, AVP 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 closely 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 REFERENCES:**

ATI Content Mastery Series Textbooks

**Recommended**

Drug Reference Handbook. Current Edition.

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

**LEARNING ACTIVITIES:**

**Weekly Active Learning Templates (20%)**

Structured learning activities completed weekly to reinforce course concepts, promote critical thinking, and support application of nursing knowledge through active engagement.

**Skills/Simulation Lab Activities (10%)**

Hands-on skills and simulation activities designed to develop psychomotor skills, clinical judgment, and safe nursing practice in a controlled learning environment.

**Chapter Exams (30%)**

Unit-based examinations assessing understanding and application of course content, clinical reasoning, and NCLEX-style decision-making.

**ATI Practice Exams and Comprehensive Exam (C/I)**

ATI practice and comprehensive assessments used to evaluate readiness for NCLEX-RN and identify areas for remediation. These assessments are graded as Complete/Incomplete.

**Final Exam (40%)**

A comprehensive examination evaluating mastery of course content, clinical judgment, and application of nursing concepts across all major topic areas.

**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 class discussion, clinical performance when applicable, knowledge and comprehension of reading assignments, and completion of course assignments. Criteria for each course activity and assignments, including grading rubrics, are identified in the weekly modules and located in the appendix of this syllabus. Achievable points for assignments will be totaled and calculated into the grade according to the percentage specified.

**2. Summary of Measure for Evaluation:**

<u>Course Requirements</u>	<u>Percentage</u>
Weekly Active Learning Templates	20%
Skills/Sim Lab Activities	10%
Chapter Exams	30%
ATI Practice Exams and Comprehensive Exam.	C/I
Final Exam	40%
<b>Total Points</b>	<b>100%</b>

**3. Calculation of Final Grade:**

The final grade is derived as a summary of the points delineated on specific rubrics assignments and participation. The final letter grade will follow the program grading scale:

Grading Scale  
A = 90-100  
B = 80-89  
C = 75-79  
D = 69-74  
F = 69 OR BELOW

**POLICIES FOR EXAMS AND ASSIGNMENTS (as appropriate for the course):**

A minimum average of 80% must be achieved on examinations to receive a passing grade for the course. This will include three (3) examinations and a final. The examination average must be calculated before adding grades from other assignments. When a grade of less than 80% is acquired on any examination, the student will be required to meet with the faculty of record, followed with a meeting with the Success Counselor. The purpose for this activity is to assist the student to determine the rationale for the lower grade achievement and develop an action plan to correct identified problems. The Missildine Review will be initiated to follow student progress.

## **Testing/Assessments:**

**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 faculty and student. Should scheduling conflicts and/or family emergencies arise, students should contact faculty by phone, email, 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. Five points per calendar day will be deducted for late submission of assignments. Should scheduling conflicts and/or family emergencies arise, students should contact faculty by phone, email or text as soon as possible. If students have spoken with faculty and an agreement is reached, late and make-up assignment extensions can be arranged without penalty.

## COURSE SCHEDULE

### NUR 4415 PATIENT CENTERED CONCEPTS ACROSS THE LIFE SPAN III

(This schedule is subject to change by faculty as needed.)

Week Date	Topics & Objectives	Required Readings & References	Learning Activities, Assignments & Submission Dates
1	<p><b>Course Introduction Violence</b></p> <p><b>EXEMPLARS:</b> Anger Aggression Assault Homicide Rape</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Discuss each component of the concept analysis for violence across the life span.</li> <li>2. Describe how responses to violence are mediated through perception, personality, social support, culture, and spirituality.</li> <li>3. Describe the clinical presentation of violence.</li> <li>4. Give examples of symptoms associated with manifestations of violence.</li> <li>5. Identify a stepwise process depicting how violence may lead to physiological and/or behavioral disorders.</li> <li>6. Describe short- and long-term physiological consequences of violence.</li> <li>7. Identify basic nursing interventions for persons experiencing violent behaviors.</li> </ol>	<p>Syllabus</p> <p>Resources in BB posted in Module 1</p> <p>ATI RN Mental Health Nursing Ch. 24, 25</p> <p>ATI Engage Mental Health RN: Social, Emotional, and Behavioral Concerns—Abuse, Aggression, and Violence</p>	<p>Prior to class, complete the following activities:</p> <ol style="list-style-type: none"> <li>1. Read the entire syllabus</li> <li>2. Read ATI Mental Health Ch. 24 &amp; 25</li> <li>3. Review simulation lab guidelines in the student handbook</li> <li>4. Discuss orientation activities for the skills &amp; simulation lab.</li> </ol> <p>Submit Active Learning Template for Rape</p>
2	<p><b>Abuse</b></p> <p><b>EXEMPLARS:</b> Child Abuse Intimate Partner Violence Elder Abuse Rape-Trauma Syndrome Bullying Suicide</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Identify factors contributing to abuse across the life span.</li> <li>2. Describe how responses to abuse are mediated through perception, personality, social support, culture, and spirituality.</li> <li>3. Discuss each component of the concept analysis for abuse across the life span.</li> <li>4. Describe the clinical presentation of abuse</li> <li>5. Give examples of symptoms associated with manifestations of abuse.</li> <li>6. Identify a stepwise process depicting how abuse may lead to physiological and/or behavioral disorders.</li> <li>7. Describe short- and long-term physiological consequences of abuse.</li> <li>8. Identify basic nursing interventions for persons experiencing abuse.</li> </ol>	<p>Read: ATI Mental Health Ch. 23</p> <p>ATI Engage Mental Health: Nursing Practice for Clients with Mental Health Disorders—Mood Disorders and Suicide</p>	<p>Prior to class, complete the following activities:</p> <ol style="list-style-type: none"> <li>1. Read the entire syllabus</li> <li>2. Read ATI Mental Health Ch. 23</li> </ol> <p>Submit Active Learning Template for Suicide</p>

	9. Role play a situation demonstrating elements of bullying behavior and responses to de-escalate situation.		
3	<p><b>Dysfunctional Self</b></p> <p><b>EXEMPLARS:</b></p> <p>Personality Disorders Anorexia Nervosa Bulimia Binge Eating Self-Injury</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Identify factors contributing to dysfunctional self-perception across the life span.</li> <li>2. Describe how responses to dysfunctional self-perception are mediated through perception, personality, social support, culture, and spirituality.</li> <li>3. Discuss each component of the concept analysis for dysfunctional self-perception across the life span.</li> <li>4. Describe the clinical presentation of dysfunctional self-perception.</li> <li>5. Give examples of symptoms associated with manifestations of dysfunctional self-perception.</li> <li>6. Identify a stepwise process depicting how dysfunctional self-perception may lead to physiological and/or behavioral disorders.</li> <li>7. Describe short- and long-term physiological consequences of dysfunctional self-perception.</li> <li>8. Identify basic nursing interventions for persons experiencing dysfunctional self-perception.</li> </ol>	<p>Read: ATI Mental Health Ch. 16 and 19</p> <p>ATI Pharmacology Ch. 6 and 15</p>	<p>Prior to class, complete the following activities:</p> <ol style="list-style-type: none"> <li>1. Read the entire syllabus</li> <li>2. Read ATI Mental Health Ch. 16 &amp; 19</li> <li>3. Read ATI Pharmacology Ch. 6 &amp; 15</li> </ol> <p>Submit Active Learning Template for Feeding and Eating Disorders and Personality Disorders</p>
4	<p><b>Sexuality</b></p> <p><b>EXEMPLARS:</b></p> <p>Family Planning Sexual Development Genetic Disorders Menstrual Dysfunction Menopause Gender Dysphoria Erectile Dysfunction Cryptorchidism Sexuality Transmitted Infections Sexually Transmitted Infections Cancer Screenings for Reproductive Structures</p>	<p>Read: ATI Med/Surg Ch. 64-67</p> <p>ATI Pharmacology Ch. 41-46</p> <p>ATI Engage Medical Surgical Nursing: Alterations in Health—Alterations in Sexual Function</p>	<p>Prior to class, complete the following activities:</p> <ol style="list-style-type: none"> <li>1. Read all assigned chapters</li> </ol> <p>Submit Active Learning Templates for Sexually Transmitted Infections</p>

	<p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>Identify factors contributing to sexuality across the life span.</li> <li>Identify role and risk of genetic testing and application related to reproductive structures and sexuality.</li> <li>Describe how responses to sexuality are mediated through perception, personality, social support, culture, and spirituality.</li> <li>Discuss each component of the concept analysis for sexuality across the life span.</li> <li>Describe the clinical presentation of a person's expression of sexuality.</li> <li>Give examples of symptoms associated with manifestations of sexual dysfunction.</li> </ol>		
	<ol style="list-style-type: none"> <li>Identify a stepwise process depicting how sexual dysfunction may lead to physiological and/or behavioral disorders.</li> <li>Describe short- and long-term physiological consequences of sexual dysfunction.</li> <li>Identify basic nursing interventions for persons experiencing sexual dysfunction.</li> </ol>		
5	<p><b>Oxygenation</b></p> <p><b>EXEMPLARS:</b></p> <p>Pulmonary Edema Pulmonary Emboli Pulmonary Hypertension Sudden Infant Death Syndrome (SIDS) Pulmonary Failure Inhalation Injury Acid/Base Interpretation Lactic Acidosis</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>Identify factors/antecedents that contribute to Pulmonary Function.</li> <li>Discuss diagnostic data used to identify pulmonary dysfunction.</li> <li>Discuss consequences of pulmonary dysfunction on the human body.</li> <li>Discuss diagnostic data which differentiates clinical referents from empirical referents.</li> <li>Analyze conditions (antecedents) that place a patient at risk for hypoxia.</li> <li>Identify nursing interventions for persons experiencing pulmonary dysfunction.</li> </ol>	<p>Read: ATI Med/Surg Ch. 25 and 27</p> <p>ATI Engage Medical Surgical: Alterations in Health--Alterations in Gas Exchange, Pulmonary Edema</p> <p><a href="https://www.mayoclinic.org/diseases-conditions/sudden-infant-death-syndrome/symptoms-causes/syc-20352800">https://www.mayoclinic.org/diseases-conditions/sudden-infant-death-syndrome/symptoms-causes/syc-20352800</a></p>	<p>Prior to class, read:</p> <ol style="list-style-type: none"> <li>ATI chapters and engage chapter</li> <li>Visit link to Mayo Clinic—SIDS</li> </ol> <p>Submit Active Learning Template for Pulmonary Embolism</p> <p><b>Examination 1</b></p>
6	<p><b>Intracranial Regulation/ Dysregulation</b></p>	<p>ATI Med/Surg Ch. 7, 10, and 12</p>	<p>Read all week 6 chapters prior to class.</p> <p>Submit Active Learning Template</p>

	<p><b>EXEMPLARS:</b>            Headaches &amp; Migraines            Syncope            Ataxia-            Telangiectasia            Seizure Disorders            Status Epilepticus            Hydrocephalus            Brain Tumors</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>Identify factors/antecedents that contribute to Intracranial Regulation.</li> <li>Discuss diagnostic data used to identify intracranial dysregulation.</li> <li>Discuss consequences of intracranial dysregulation on the human body.</li> <li>Discuss diagnostic data which differentiates clinical referents from empirical referents.</li> <li>Analyze conditions (antecedents) that place a patient at risk for intracranial dysregulation.</li> <li>Identify nursing interventions for persons experiencing intracranial dysregulation.</li> </ol>	ATI Engage Medical Surgical: Alterations in Health--Alterations in Neurological Function, Headaches and Seizure Disorders	for ICP and Seizures
7	<p><b>Intracranial Regulation/ Dysregulation</b></p> <p><b>EXEMPLARS:</b>            Closed Head Injury            Traumatic Brain Injury</p>	ATI Med/Surg Ch. 11, 15 & 16	Complete assigned readings prior to class.  Submit active learning template for stroke and head injury
	<p>Pediatric Stroke            Stroke Syndrome            Multiple Sclerosis            Muscular Dystrophy            Myasthenia Gravis            Huntington's Chorea            ALS</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>Identify factors/antecedents that contribute to intracranial dysregulation.</li> <li>Describe the role of genetics in intracranial dysregulation.</li> <li>Discuss diagnostic data used to identify intracranial dysregulation.</li> <li>Discuss consequences of intracranial dysregulation on the human body.</li> <li>Discuss diagnostic data which differentiates clinical referents from empirical referents.</li> <li>Analyze conditions (antecedents) that place a patient at risk for intracranial dysregulation.</li> <li>Identify nursing interventions for persons experiencing intracranial dysregulation.</li> </ol>	<a href="https://www.mayoclinic.org/diseases-conditions/muscular-dystrophy/symptoms-causes/syc-20375388">https://www.mayoclinic.org/diseases-conditions/muscular-dystrophy/symptoms-causes/syc-20375388</a>  <a href="https://www.mayoclinic.org/diseases-conditions/myasthenia-gravis/symptoms-causes/syc-20352036">https://www.mayoclinic.org/diseases-conditions/myasthenia-gravis/symptoms-causes/syc-20352036</a>  <a href="https://www.mayoclinic.org/diseases-conditions/huntingtons-disease/symptoms-causes/syc-20356117">https://www.mayoclinic.org/diseases-conditions/huntingtons-disease/symptoms-causes/syc-20356117</a>	
8	<p><b>Tissue Integrity/Burn Injury</b></p> <p><b>EXEMPLARS:</b>            Types of Burn Injury            Classification of Burn Injury            Emergent Period            Resuscitative Period            Wound Management            Types of Grafting            Rehabilitation</p>	ATI Med/Surg Ch. 76  ATI Engage Medical Surgical: Alterations in Health--Alterations in Tissue Integrity, Burns	Complete assigned readings prior to class.  Submit Active Learning Template for Burns

	<p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Discuss the progression of wound healing as the process occurs with burn injury across the life span.</li> <li>2. Describe the basic stages of wound healing, related clinical/empirical referents, and associated time intervals for each age group.</li> <li>3. Discuss diagnostic data used to evaluate process of burn-wound healing.</li> <li>4. Identify antecedents to tissue injury and damage, including existing chronic conditions that influence burn-wound healing.</li> <li>5. Describe basic nursing interventions for people in burn-wound healing</li> </ol>		
9	<p><b>Metabolism/Multisystem Failure</b></p> <p><b>EXEMPLARS:</b></p> <p>Multi-Organ Dysfunction Syndrome (MODS) Disseminated Intravascular Coagulation (DIC) Tetralogy of Fallot Sickle Cell Crisis Endocarditis Wernicke's Encephalopathy</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Identify factors/antecedents which may contribute to multisystem failure.</li> <li>2. Relate clinical/empirical referents to multisystem failure.</li> <li>3. Discuss diagnostic data used to identify multisystem failure.</li> <li>4. Discuss consequences of multisystem failure on the human body.</li> <li>5. Identify nursing interventions for persons experiencing multisystem failure.</li> </ol>	ATI Med/Surg Ch. 43  ATI Engage Medical Surgical: Critical Care Nursing—Critical Alterations in Perfusion, Multiple Organ Dysfunction Syndrome and DIC  <a href="https://www.mayoclinic.org/diseases-conditions/tetralogy-of-fallot/symptoms-causes/syc-20353477">https://www.mayoclinic.org/diseases-conditions/tetralogy-of-fallot/symptoms-causes/syc-20353477</a>  <a href="https://my.clevelandclinic.org/health/diseases/sickle-cell-crisis">https://my.clevelandclinic.org/health/diseases/sickle-cell-crisis</a>  <a href="https://my.clevelandclinic.org/health/diseases/22687-wernicke-korsakoff-syndrome">https://my.clevelandclinic.org/health/diseases/22687-wernicke-korsakoff-syndrome</a>	Complete assigned readings prior to class  <b>Examination 2</b>  Submit active learning template for DIC

10	<p><b>Perfusion</b></p> <p><b>EXEMPLARS:</b></p> <p>Cardiomyopathy Shock Syndromes: Cardiogenic Neurogenic Hypovolemic Distributive Shock Septic Shock Obstructive Shock Tetralogy of Fallot</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Distinguish between sources of decreased cardiac output.</li> <li>2. Discuss the concept of cardiac input and output including the pathophysiology, related terms, background and significance, and the significance to nursing.</li> <li>3. Discuss clinical and empirical referents related to decreased cardiac output.</li> <li>4. Identify key antecedents that commonly lead to decreased cardiac output and cardiac dysrhythmias.</li> <li>5. Analyze conditions which place a patient at risk for decreased cardiac output.</li> <li>6. Discuss how assessment methods and diagnostic data can lead to identification of decreased cardiac output.</li> <li>7. Describe basic nursing interventions for people experiencing decreased cardiac output.</li> </ol>	<p>ATI Med/Surg Ch. 38 ATI Pediatric Nursing Ch.20 (pg. 125-128) ATI Engage Medical Surgical: Critical Care Nursing—Critical Alterations in Perfusion, Shock</p>	<p>Complete assigned readings prior to class</p> <p><b>ATI Concept Based Practice Assessment A Level IV</b></p>
11	<p><b>Acid-Base Balance</b></p> <p><b><u>Exemplars For Respiratory Acidosis:</u></b> Acute Pulmonary Edema Chest Wall Disorders Trauma Pulmonary Infections</p> <p><b><u>Exemplars For Metabolic Acidosis:</u></b> Diabetic Ketoacidosis (DKA) Hyperglycemic, Hyperosmolar, Non-Ketotic Syndrome (HHNKS) Renal Failure Live Failure</p> <p><b><u>Exemplars For Respiratory Alkalosis:</u></b> Mechanical Ventilation Gram-Negative Bacteremia Thyrotoxicosis Encephalitis</p> <p><b><u>Exemplars For Metabolic Alkalosis:</u></b> Cushing Syndrome Aldosteronism Parenteral Na Bicarb Infusion</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Define the biophysical concept of acid-base balance.</li> </ol>	<p>ATI Med/Surg Ch. 46 ATI Engage Medical Surgical: Alterations in Health—Disrupted Homeostasis, Metabolic Acidosis, Metabolic Alkalosis, Respiratory Acidosis, and Respiratory Alkalosis</p>	<p>Complete assigned readings prior to class.</p> <p>Submit Active Learning Template for Acid-Base Imbalance</p>

	<ol style="list-style-type: none"> <li>2. Distinguish between acid-base balance influenced by respiratory and metabolic shifts.</li> <li>3. Discuss the concept of acid-base balance, including the pathophysiology, related terms, background and significance, and the significance to nursing.</li> <li>4. Discuss clinical and empirical referents related to shifts in acid-base balance.</li> <li>5. Identify key antecedents that commonly lead to shifts in acid-base balance.</li> <li>6. Analyze conditions that place a patient at risk for shifts in acid-base balance.</li> <li>7. Discuss how assessment methods and diagnostic data can lead to identification of shifts in acid-base balance.</li> <li>8. Describe basic nursing interventions for people experiencing shifts in acid-base balance.</li> </ol>		
12	<p><b>RESPONDING TO ENVIRONMENTAL CHALLENGES</b></p> <p><b>EXEMPLARS:</b>            Review of Community Assessment            Disaster Factors Unique to Rural/Frontier Regions            Disaster Preparedness            Exposure &amp; Environmental Control            Inhaled &amp; Contact Pesticides &amp; Herbicides            Snake Bites            Animal Contact            Hypothermia in Infants            Hypothermia in Adults            Hypothermia in Elderly</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Define the concept of environmental challenges.</li> <li>2. Distinguish between environmental threats and preparedness.</li> <li>3. Discuss the background associated with disasters in the rural border community and the significance to nursing.</li> <li>4. Identify key antecedents that commonly lead to potential environmental challenges or threats.</li> <li>5. Analyze conditions that place a community at risk for environmental threats.</li> <li>6. Discuss how assessment methods and diagnostic data can lead to disaster prevention and preparedness.</li> <li>7. Describe the role of nursing in preparing for or preventing environmental disasters.</li> </ol>	Read:  ATI Med/Surg Ch. 3  ATI Nursing Leadership & Management Ch. 5 (pg. 70-72)	Complete assigned readings prior to class.  Submit Active Learning Template for Environmental Safety  <b>ATI Concept Based Practice Assessment B Level IV</b>

13	<p><b>MASS CASUALTY RESPONSE</b></p> <p><b>EXEMPLARS:</b> Disaster Response &amp; Evaluation Disaster Recovery Bioterrorism Disaster Drill</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Define the concept of Mass Casualty.</li> <li>2. Distinguish between disaster response and recovery.</li> </ol>	ATI Leadership and Management Ch. 5 (pg. 75-79)	<p>Complete assigned readings prior to class.</p> <p>Submit active learning template for mass casualty incident</p> <p><b>Examination 3</b></p>
14	<p>3. Discuss the background associated with the impact of bioterrorism in the rural border community and the significance to nursing.</p> <p>4. Identify key antecedents that commonly lead to preparing for disaster planning and recovery.</p> <p>5. Analyze conditions that place a community at risk for disasters.</p> <p>6. Discuss how assessment methods and diagnostic data can lead to disaster prevention and preparedness.</p> <p>7. Describe the role of nursing in preparing for or preventing environmental disasters.</p>		
14	<p><b>Pre-Code/Code Situations</b></p> <p><b>EXEMPLARS:</b> Anaphylaxis Malignant Hyperthermia Organ Replacement Rejection Cardiac Failure Respiratory Failure</p> <p><b>OBJECTIVES:</b></p> <ol style="list-style-type: none"> <li>1. Define the concept of code status.</li> <li>2. Distinguish between pre-code and code situations.</li> <li>3. Discuss the pathophysiology, background-associated pre-code and code situations in the rural border community, and the significance to nursing.</li> <li>4. Identify key antecedents that commonly lead to preparing for pre-code and code situations.</li> <li>5. Analyze conditions that place a community at risk for pre-code and code situations.</li> <li>6. Discuss how assessment methods and diagnostic data can lead to the pre-code and code situations.</li> <li>7. Describe the role of nursing in preparing for pre-code and code situations.</li> </ol>	ATI Med/Surg Ch. 3	<p>Complete assigned readings prior to class</p> <p><b>ATI Concept Based Assessment Level IV Proctored</b></p> <p><b>NCLEX PREP LIVE REVIEW</b></p>
15	<p><b>Final Exam Review</b></p> <p><b>Focus:</b> Predictability Prioritization Reflection</p>	Final Exam Blueprint	
16			<b>Final Examination</b>

## **COURSE EXPECTATIONS:**

### **Orientation to Course:**

Students will participate in course orientation and orientation to designated hospitals, community agencies and clinic settings prior to engaging in clinical learning experiences. Students are accountable to adhere to facility policies and procedures. Orientation will include a review of course skills, experiences, assignments, and clinical evaluation. Expectations regarding meeting scheduled class, clinical and laboratory sessions, attendance, and promptness will be reviewed.

## **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 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 email** – Check course email frequently for communications and make sure that your email address is current. Faculty will respond to inquiries and comments within 24 hours Monday-Friday.
- **Use of technology:** If you have any technical questions, problems, or concerns with Blackboard, do not spend more than 15 minutes on any technical problems. Seek help immediately. Contact 24-7 Help Desk at: 1-888-837-2882 and/or [techassist@sulross.edu](mailto:techassist@sulross.edu).
- **Responses to emails and course postings:** Please respond to faculty requests and/or communications within 24 hours. Use course or Sul Ross email and, if not available, mobile phone or texting between the hours of 9 AM and 6PM 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 5 days of submission.
- **Writing and use of APA:** All written assignments and bulletin 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>

## **ATTENDANCE AND PARTICIPATION:**

- Your attendance is expected at every class meeting, both face to face and online.
- 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 the class discussions.
- An online course requires participation in all areas for accurate evaluation of performance, including responding to 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, email, 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 primarily applies 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 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.
  - b. Be careful with the tone of what you are communicating, i. e., sarcasm and subtle humor; one person’s joke may be another person’s insult.
  - 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.
3. Be helpful and be sure to do your part in an online class or in group work so that assignments can be completed.
4. 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.
5. Discussion Boards are public, and the University archives all materials. Do not post anything too personal as all students in the class and your instructor will see what you write.
  - a. 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.

- b. Avoid duplication. Read the previous discussions before you comment or ask a question as the information may have already been covered.
- c. When posting a response, make sure you identify the post to which you are responding.
- d. If the topic you plan to address is covered in an existing thread, do not start a new thread.
- e. When responding to a specific comment, quote only the relevant part of the comment and stay focused on the assignment.
- f. Try not to lurk, meaning you are just reading and not participating.

6. Quality of online communications/postings is important.
  - a. It is not acceptable to present work or ideas of others as your own. Use APA format when you quote directly from a source—use quotation marks and provide the original author's name, year, and page or location in the body of the narrative; when you paraphrase a source—using your own words to explain your understanding of another's ideas or work—provide author and year in the body of the narrative. At the end of the posting provide the complete reference using APA format.
  - 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.
7. Don't send large files, since someone may have a relatively slow internet connection.
8. Be sure to check for viruses when sending files.
9. 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 or faculty by e-mail, phone, or text.

## **MANDATORY UNIVERSITY STATEMENTS:**

**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 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 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.

#### **AMERICANS WITH DISABILITIES ACT (ADA) STATEMENT:**

Sul Ross State University is committed to compliance with the Americans with Disabilities Act of 1990 (ADA) and Section 504 of the Rehabilitation Act of 1973. Qualified students with disabilities needing academic or other accommodations to facilitate full participation in our programs, services and activities should contact the Accessibilities Coordinator, Ferguson Hall Room 112, Monday – Friday 8:00 a.m. – 5:00 p.m., 432-837-8203 at the Alpine campus. At the Uvalde Campus, Room C102, Monday – Friday 8:00 a.m.-5:00 p.m.

#### **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.

### **DISTANCE EDUCATION STATEMENT:**

Students enrolled in distance-education courses have equal access to the university's academic support services, such as Smarthinking, library resources, such as online databases, and instructional technology support. For more information about accessing these resources, visit the SRSU website. Students should correspond using Sul Ross email accounts and submit online assignments through Blackboard, which requires secure login information to verify students' identities and to protect students' information. The procedures for filing a student complaint are included in the student handbook. Students enrolled in distance- education courses at Sul Ross are expected to adhere to all policies pertaining to academic honesty and appropriate student conduct, as described in the student handbook. Students in web-based courses must maintain appropriate equipment and software, according to the needs and requirements of the course, as outlined on the SRSU website.

### **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.



## SKILLS COMPETENCY ASSESSMENT FORM

Student: \_\_\_\_\_ Semester: \_\_\_\_\_

Preceptor \_\_\_\_\_

Faculty: \_\_\_\_\_

**Instructions:** Students will be evaluated wherever clinical activities occur. Clinical activities occur in Nursing Skills and Simulation Laboratory and agencies.

Scale of 4 to 0 using the following:

- 4 = Accomplished (routinely and consistently demonstrates competency);
- 3 = Proficient (demonstrates competency in most situations);
- 2 = Evolving (demonstrates basic competency with faculty/preceptor support or reminders)
- 1 = Developing (Requires direction or support in order to carry out basic competency)
- 0 = Unsafe (Unable to demonstrate competencies without direct monitoring or instruction)
- CI = Critical Incidence (requires completion of a critical incident report)

All skills must be Proficient or Evolving for each course competency at the summative evaluation. Skills evaluated as **“Developing” or “Unsafe”** during any formative evaluation will require the student to successfully complete a Learning Contract in conjunction with the student’s clinical faculty. The student is required to complete a self-evaluation using this form **prior to** the evaluation appointment with the faculty. The Contract form may be copied.

The skills on the following list are expected to be mastered at level 3 or 4 by the end of the course. Once the skill is demonstrated as mastered the score and date are entered into the chart.



## Crosswalk of Course Objectives with TBON DECs and AACN Essentials

<b>Objectives</b>	<b>TBON DECs</b>	<b>AACN Essentials</b>
<b>MEMBER OF THE PROFESSION</b>		
1. Discuss the value of current literature related to designated biophysical and pathophysiological, advanced, health-care concepts.	I-A 1-4; B 1, 2; D 1; II-D 1 a-c	VIII
2. Incorporate standards of practice for the professional nursing role when providing holistic, culturally sensitive, evidence-based care for individuals and families who are critically ill or in life-threatening situations, such as disasters.	I-B 2; C 3; II-E 8, 9	II
3. Demonstrate responsibility for continued competence in nursing practice.	I B 4	III
4. Develop insight through reflection, self-analysis, self-care and life-long learning	I -B 5	VIII, IX
<b>PROVIDER OF PATIENT-CENTERED CARE</b>		
5. Utilize a systematic process to analyze selected, advanced, health-care concepts across the life span.	II-A 1.a; C.1.a; F 1	II, III
6. Describe and evaluate nursing management for selected, advanced, health-care concepts.	II-A 3.a, 4.a, b; C 4 a; E 5;	III, VII
7. Apply learned concepts to exemplars that reflect advanced health-care conditions (status).	II-B 1.b, 4; 3.a, b; E.2; F 2	I, III, IX
8. Analyze the interrelatedness of health-care concepts which support clinical judgments for optimum patient-care outcomes in patients across the life span.	II-B 6; C 6; G 1 a	I, III
9. Incorporate acquired knowledge and skills in addressing critical and life-threatening situations for individuals and communities.	II-B 5; C 1a., 2b;	I, III, VIII
10. Discuss desired actions, side effects, rationale, and nursing implications of pharmacological agents used in the care of patients with advanced health needs involving multiple body systems.	II-B 9; C 3; E 4a, 6a, 7, 12; G 3	I, II, III, VII
11. Create teaching, discharge, and referral plans for patients to facilitate adaptation to health needs involving multiple body systems.	I-A 1-4; B 1, 2; D 1; G 2a, b, 3 a; IV G 3a-c	I, II, III, VII
12. Discuss economic, cultural, and political issues influencing care of patients with advanced health needs.	IV-F 4	VI
<b>PATIENT SAFETY ADVOCATE</b>		
13. Use safety alerts and decision supports to prevent harmful occurrences to patients, families, and/or staff during the care of patients.	II-B 10; III-B 1, 2, 4; C	VII, IV, V
14. Recognize clinical conditions that require notification of EMS or Rapid Response Teams.	III-A1, 2, 3; B 4; C 2; D1; E 1, 2; F 1, 2	II, III,
15. Demonstrates safe use of monitoring devices, including the crash cart, AED, and/or LifePak.	IV-F 2 d, e;	V, VII, IX
16. Describe elements of disaster planning and preparedness activities in the community.	IV A 3, b; C 2; D 1	V, VII, IX
<b>MEMBER OF THE HEALTH CARE TEAM</b>		
17. Communicate issues related to exemplars for each concept to health-team members.	IV C 4 a, D 1, 3; E 1 a.; F 4 a	III & VI
18. Identify a variety of community resources that assist patients with advanced health problems.	IV A 5; B 2c; D 3; E2; F 1	V, VI, VII, IX
19. Employ collaborative communication principles when working with community groups and organizations to address disaster preparedness and prevention.	IV A 2, C 3; D 1, 3 a; E 1a, b, 3; F 4 a	V, VI, VII, IX