



Kingsborough Community College
The City University of New York
Department of Nursing

Nursing 2200 – Nursing the Ill Adult - II
Hybrid Course Syllabus: Spring 2021

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Credit – Hours: 5 credits, 17 hours. (one-half semester – 6 weeks)			
Pre-requisites	NUR 2100		
Pre or Co-requisite	PSY 3200	Recommended	SOC 3100, ENG 2400

Course Description

Nursing of the adult patient with common recurring health alterations includes advanced nursing interventions based on physiological and psychological needs of adult patients. This course builds on concepts of commonly recurring health alterations presented in Nursing the Ill Adult I (NUR 2100). The physiological and psychological needs of the adult patient are addressed through Quality and Safety for Nurses (QSEN) Initiative incorporating the concepts of patient centered care, teamwork and collaboration, evidence based practice, safety, quality improvement and informatics; the Nursing Process; and the Categories of Client Needs. The principles of priority setting, leadership and delegation are incorporated throughout the course.

Due to the COVID-19 safety restrictions, virtual lecture instruction is conducted synchronously. Laboratory is a combination of synchronous and asynchronous instruction. Clinical experiences are conducted in the clinical facilities when possible or the college laboratory utilizing simulation and remotely. Learning is enhanced through synchronous and asynchronous assignments. Class work for typical week consists of: six (6) hours of classroom instruction, three (3) hours of remote college laboratory/simulation, and eight (8) hours of health agency experiences or synchronous and asynchronous experiences in the college lab and remotely. It is essential for students to engage in additional practice for further development of skills. Students are encouraged to review NUR 2100 skills using their ATI and CoursePoint resources prior to and during the semester.

STUDENT LEARNING OUTCOMES (SLOs)

Upon completion of NUR 2200, using the Nursing Process in a variety of health care settings to a diverse population of adult patients, the student will:

Course SLOs
1. Assume safe nursing practices while providing care.
2. Prioritize nursing interventions in the delivery of patient care.

3. Employ evidence-based practice while delivering nursing care.
4. Implement critical thinking modalities while providing care.
5. Interact collaboratively with members of the healthcare team.
6. Assume a leadership role when providing care.
7. Demonstrate competency when using technology in the provision of care.
8. Apply understanding of ethical and legal principles related to the practice of nursing.

ASSESSMENT MEASURES for COURSE SLOs

Students will perform satisfactorily in the virtual classroom, laboratory/simulation and clinical setting as evidenced by achieving 75% or greater on written exam, various course specific written assignments, and demonstration of satisfactory performance on course specific clinical competency and evaluation tools.

ASSESSMENT TECHNOLOGY INSTITUTE (ATI) TESTING

Kingsborough's Nursing Department uses ATI Nursing Education tutorials, testing and remediation each semester. Active participation in ATI assignments and testing is a requirement of this course and will account for 2% of the course grade. Failure to take the proctored exam as scheduled will result in a grade of incomplete and will prevent progression in the program.

ATTENDANCE

Complete participation in class is possible only when students are able to focus attention on the class, therefore entering the virtual classroom after it has begun is disrespectful to Faculty and classmates. Talking out of turn or exhibiting other disruptive behaviors is not tolerated and students will be asked to leave the classroom or lab. Student must have video and audio capability turned on in order to participate in the virtual classroom setting.

All cell phones, smart devices or other multimedia devices that generate sound must be turned off when any member of the academic community enters the virtual classroom.

A student is deemed excessively absent in any course when he or she has been absent 15% of the number of contact hours a class meets during a semester. When a student is excessively absent, a grade of "WU" will be assigned as described in the college catalogue. Attendance at pre and post conference for laboratory experience is required. Absence from either pre or post conference constitutes an absence for the day's experience.

STUDENTS WITH DISABILITIES

Access-Ability Services (AAS) serves as a liaison and resource to the KCC community regarding disability issues, promotes equal access to all KCC programs and activities, and makes every reasonable effort to provide appropriate accommodations and assistance to students with disabilities. Your instructor will make the accommodations you need once you provide documentation from the Access-Ability office (D-205). Please contact AAS for assistance.

EXAM POLICY

All course exams are administered electronically via ExamSoft. Students will be monitored during the exam therefore it is imperative that the student use a computer with audio and video capabilities. The student testing environment should be in an area with adequate Wi-Fi and free from distractions and personal items. [The CUNY Policy on Academic Integrity](#) is strictly enforced throughout the exam. Any suspected violation of this policy may result in removal from the course. Examples of this behavior include, but are not limited to, talking, use of any reading material, hand gesturing, and the presence of other individuals in the immediate area. No headphones (both wireless and non-wireless) or any other device that can receive sound is permitted during the exam. There will be no individual exam reviews with faculty members and there will be no group exam review at the end of the exam.

Please be advised that, pursuant to accreditation requirements, the nursing program requires the mandatory use of remote proctoring tools for exams for all students in all nursing courses, regardless of whether a course is given in person or remotely.

EVALUATION

Grades will be calculated according to college and departmental policy as follows:

A+	97 – 100	B+	87 – 89	C+	78 – 79	D+	66 – 69
A	93 – 96	B	83 – 86	C	75 – 77	D	60 – 65
A-	90 – 92	B-	80 – 82	C-	70 – 74	F	< 60

W	Withdrew without penalty
WU	Unofficial withdrawal (counts as failure)
INC	Doing passing work, but missing an assignment or an examination; changes to a "FIN" if work is not made up by the 10th week of the next 12-week session
FIN	Failure as a result of an Incomplete

Nursing 2200 grades will be calculated as follows:

Lecture examinations average (2 exams)	63%
Final examination	35%
ATI testing	2%
Clinical competency	Satisfactory or Unsatisfactory
Unfolding Nursing Care Plans	Satisfactory or Unsatisfactory
Writing assignment	Satisfactory or Unsatisfactory
Case Study	Satisfactory or Unsatisfactory
Cultural Paper Assignment	Satisfactory or Unsatisfactory
ATI Practice Exams	Satisfactory or Unsatisfactory
ATI Targeted Exams	Satisfactory or Unsatisfactory

Students are expected to take all tests when scheduled. Exceptions to this rule will be for emergency situations and the faculty must know in advance. Students who do not take a test on the scheduled date are required to take a makeup test. All makeup tests may be given at the end of the semester. Students who fail to take the scheduled exams or makeup exams will receive a grade of zero for that test.

All written assignments must comply with college standards for written work. Written assignments are to be turned in during the class period on the date that they are due. All assignments must be handed in by the end of the course to complete the requirements of the course. A late assignment will meet the requirements of the course but will not receive full credit. If written assignments are not submitted by the end of the course, the student will receive a grade of "INC" for the course. Students must submit all assignments prior to the beginning of the next semester in order to progress in the program.

Clinical agency performance will be evaluated as Satisfactory (S) or Unsatisfactory (U). Performance that has been designated as "U" at the end of the course will result in failure of the course. A minimum average grade of "75%" is required on all clinical assignments to achieve a satisfactory clinical grade.

A virtual conference with the clinical instructor is required at mid-semester, and at the end of the course, at which time the student's progress in the course will be discussed. In addition, students may initiate conferences with the instructor at other times.

RETENTION CRITERIA

Criteria for retention in the Nursing Program mandates that students;

1. Earn a minimum of a “C” grade in every required Nursing and co-requisite course inclusive of BIO 1200, BIO 5100, ENG 2400, and PSY 3200.
2. **Students who achieve a “C-“ grade in required clinical nursing course may apply to repeat the course one time only in the semester immediately following, subject to space availability. The minimum grade for clinical courses that are repeated is a “B.”** The “Intent to Return to Nursing Course” form can be found on the KCC Website Nursing Department page under “Forms”. This must be completed and include a plan of success that demonstrates significant changes in how they will approach the course when repeated. Only one required nursing course may be repeated. A grade of less than a “C” in a second nursing course will cause the student to be dismissed from the program.
3. Students must achieve a grade of “B” in order to pass NUR 1700. Students in NUR 1700 who achieve a failing grade of no less than “C-“may repeat the course one time only after submitting an “Intent to Return Form.”
4. Students who enter Nursing 1700 and Nursing 1800 **MUST** complete the Nursing Program within four years from the date of entry into this course. Any student who has not attended nursing courses for two or more consecutive semesters cannot be readmitted into the Nursing Program unless qualifying examinations have been passed in the required nursing courses previously successfully completed. Qualifying examinations may be repeated only once.
5. Students in the clinical component can only appeal the retention criteria one time.
6. Students in the clinical component can only withdraw once and must be passing to do so.

Teaching Strategies

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| <ul style="list-style-type: none"> • Lecture/Discussion • Simulated Laboratory Experiences • Demonstration/Return Demonstration • Case Studies • Multicultural Written Assignment • Multimedia • Role Playing • Gaming | <ul style="list-style-type: none"> • Computer Assisted Instruction/ATI • Course Point/Prep-U • Pre and Post Conferences • Health Agency Experiences • Unfolding Nursing Care Plan |
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REQUIRED ELECTRONIC TEXTBOOK (See Student Letter)

Lippincott CoursePoint for Brunner & Suddarth's Textbook of Medical-Surgical Nursing

Retail Purchases (i.e., Bookstore): 9781975124465 or Direct/Microsite Purchase: 9781975124502

REQUIRED TEXTBOOK:

- Hargrove-Huttel, Cadenhead Colgrove (2014), Prioritization, Delegation & Management of Care, F. A. Davis Company (ISBN# 978-0-8036-3313-1)

REQUIRED RESOURCES:

Assessment Technology Institute (ATI)

SUGGESTED REFERENCES:

Nursing Central by Unbound Medicine

- Davis Drug Guide
- Diseases and Disorders
- Taber's Medical Dictionary
- Davis Lab and Diagnostics Guide

RECOMMENDED TEXTBOOKS

- Dudek, Susan G. (2017). Nutrition Handbook for Nursing Practice, 8th Edition, Philadelphia, PA.: J.B. Lippincott.
- Frandsen, G., Pennington, S., (2020). Abrams Clinical Drug Therapy, 12th Edition. Philadelphia, PA: Lippincott, Williams & Wilkins.
- Hopkins, Tracy (2011). Med Surg Notes Nurse's Clinical Pocket Guide, 4th Edition, Philadelphia, PA: F.A. Davis Company.
- LeFever-Kee, Joyce (2017). Laboratory and Diagnostic Tests with Nursing Implications, 10th Edition, Upper Saddle River, NJ: Pearson/Prentice Hall.
- Thomas, Clayton L., Editor. (2017). Taber's Cyclopedic Medical Directory, 23rd Edition. Philadelphia, Pa. F.A. Davis Company.

All students are expected to have read and to adhere to the policies pertaining to the following, as outlined in the department's Nursing Student Handbook:

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| <ul style="list-style-type: none"> • Attendance • Malpractice insurance, health clearance, and CPR training • Evaluation and grading • Clinical competencies • College laboratory practice requirements • Clinical Agency experience requirements (including appropriate dress) | <ul style="list-style-type: none"> • Netiquette • Specific dress requirements for each clinical course • Drug calculation policy • Mandatory skills review • Criteria for retention in the nursing program • Civility (including appropriate dress) • Integrity |
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TOPICAL OUTLINE

***Student receive a weekly lecture schedule posted on Backboard that reflects topics, reading assignments and method of delivery.**

Each unit incorporates the Categories of Client Needs: Safe and Effective Care Environment (Management of Care, Safety and Infection Control), Health Promotion and Maintenance, Psychosocial Integrity, Physiological Integrity (Basic Care and Comfort, Pharmacological and Parenteral Therapies, Reduction of Risk Potential, Physiological Adaptation.

- Unit 1 – Assessment & Management of the Patient who has an Oncological Disorder
- Unit 2 – Assessment & Management of the Patient who has a Hematologic Cancer
- Unit 3A – Assessment & Management of the Patient who has a Head & Neck / Lung Cancer
- Unit 3B – Assessment & Management of the Patient who has a Gastrointestinal Cancer
- Unit 3C – Assessment & Management of the Patient who has a Reproductive Cancer
- Unit 4A – Assessment & Management of the Patient who has an Acute Neurological Disorder
- Unit 4B – Assessment & Management of the Patient who has a Chronic Neurological Disorder
- Unit 5 – Assessment & Management of the Patient who has a Spinal Cord Injury / Connective Tissue Disorder / Rehabilitative Disorder
- Unit 6 - Assessment & Management of the Patient who has – Assessment & Management of the Patient who has a Sensory Perceptual Disorder

Unit 1 – Care of the Patient who has an Oncological Disorder

Content/Lecture Discussion

- The structure and function of the immune system
 - Role of the immune system, cell cycle review, abnormal cellular growth, classifications of tumors
- Strategies to involve the adult patient and family in reaching successful outcomes
 - Health teaching related to cancer prevention, care, oncological emergencies and end of life care
- Strategies for identifying and managing care
 - Coordination of care utilizing leadership, delegation, and priority setting
 - Team functioning on safety & quality of care
- Strategies relevant to the outcomes of care
 - Provision of cancer care with sensitivity and respect specific to the adult patient with cancer including
 - Combination chemotherapy
 - Radiation therapy
 - Surgery
 - Bone marrow and stem cell transplant
 - Biological response modifiers
 - Pain management
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Communication and documentation of care rendered via electronic medical record
 - Uses hand held computer devices for health teaching
 - Uses the EHR to communicate and document care, and impart for medication reconciliation

Related Learner Experiences

Review: Hinkle & Cheever: Chs.1, 7, 8, 9, 10, 12, 15, 16, 35.

Required Reading Prior to 1st day of class:

- *Hinkle & Cheever.*
- Read Chapters 1 pp. 10-11, 3 pp. 27-36, 6 pp. 84-97, 8 pp. 129-130, 15 pp. 325-379

Computer Assisted Instruction & A/V materials

- *All Programs*
- Mr. Singa: Non-Hodgkins
 - PDS scenarios Adult Health Nursing Concepts and Skills-Hematology
- Mrs. Hogan: Leukemia
 - PDS scenarios Adult Health Nursing Concepts and Skills- Hematology
- What is Cancer?
- Preventing Negligence in the 21st Century

ATI Nursing Education

- ATI Nurse Logic 2.0 Skills Module
 - Central Venous Access Device
 - Ostomy Care
 - Infection Control

Laboratory/Simulation Experiences

- Leadership and Delegation
 - The five rights of delegation
 - Roles of UAP and LPN

Unit 1 – Care of the Patient who has an Oncological Disorder

- Communicating effectively
- Managing conflicts

Gaming

Jeopardy

Case Study

Unit 2 – Care of the Patient with a Hematological Cancer

Content/Lecture Discussion

- The structure and function of the Hematological system
- Types of cancers
 - Acute/chronic myelogeneous
 - Lymphocytic leukemia
 - Hodgkin/ Non-Hodgkin's lymphoma
 - Multiple myeloma
- Strategies to involve the adult patient and family in reaching successful
 - Health teaching regarding hematological cancer prevention and care.
- Strategies for identifying and managing
 - Coordination of care in meeting related needs for the adult patient with a hematological cancer
 - Team functioning on safety & quality of care
- Strategies relevant to the outcomes of care
 - Provision of cancer care with sensitivity and respect specific to the adult patient with a hematological cancer including
 - Combination chemo and radiation therapies
 - Bone marrow and stem cell transplant
 - Pain management
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Communication and documentation of care rendered via electronic medical record
 - Uses hand held computer devices for health teaching
 - Uses the EHR to communicate and document care, and impart for medication reconciliation

Related Learner Experiences

Required Reading

- *Hinkle & Cheever*: Ch. 32 pp. 903-917; Ch. 33 pp. 925-930, 944-945; 948-949 Ch. 34 pp. 971-997.

Computer Assisted Instruction & AV materials

- Mr. Singa: Non-Hodgkins
 - PDS scenarios Adult Health Nursing Concepts and Skills-Hematology
- Mrs. Hogan: Leukemia
 - PDS scenarios Adult Health Nursing Concepts and Skills- Hematology
- Caring for the Patient with a CVAD
- ATI Targeted Medical-Surgical 2016: Immune

Laboratory/Simulation Experiences

- Central Venous Access Devices (CVAD)
 - Ports, PICCS
 - Accessing
 - De-accessing
 - Medication administration
 - Flushing
 - Sterile dressing change

Case Study

Unit 3A – Care of the Patient who has a Head & Neck / Lung Cancer**Content/Lecture Discussion**

- The structure and function of the Respiratory System
- Strategies to involve the adult patient and family in reaching successful outcomes
 - Head & Neck Cancers
 - Oral
 - Larynx, pharynx
 - Lung Cancer
 - Small and Large cell
- Health teaching regarding head & neck / lung cancer prevention and care
- Strategies for identifying and managing care
 - Coordination of care in meeting related needs for the adult patient
 - Team functioning on safety & quality of care when meeting the needs of the adult patient
- Strategies relevant to the outcomes of care
 - Provision of cancer care with sensitivity and respect specific to the adult patient with a head & neck cancer or lung cancer including
 - Surgery (Wedge Resection, Segmental Resection, Pneumonectomy, Lobectomy, Laryngectomy)
 - Combination chemo and radiation therapies
 - Phototherapy
 - Biological Response Modifier (BRM)
 - Respiratory care
- Application of critical thinking processes when practicing safely in the delivery of care
- Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Uses the EHR to communicate and document care, and impart for medication reconciliation
 - Uses hand held computer devices for health teaching.

Related Learner Experiences**Required Reading**

- *Hinkle & Cheever*: Ch. 20 pp. 481-488; Ch. 21 pp. 511-560; Ch. 22 pp. 572-581; Ch. 23 pp. 621-624,

Computer Assisted Instruction & AV Material

- Ms. Frank: Lobectomy,
- Mary Kelly: Small cell lung cancer
 - PDS scenarios Adult Health Nursing Concepts and Skills- Endocrine
- Caring for patients undergoing a laryngectomy
- ATI Targeted Medical-Surgical 2016: Immune

Lab/Simulation Experiences

- Surgical Models
 - Chest tubes
 - Tracheostomies
 - Sterile suctioning

Case Study

Unit 3B – Care of the Patient who has a Gastrointestinal Cancer**Content/Lecture Discussion**

- The structure and function of the Gastrointestinal System
- Strategies to involve the adult patient and family in reaching successful outcomes for the patient with a GI cancer
 - Stomach (gastric)
 - Pancreatic
 - Liver
 - Colon
 - Rectum
- Health teaching related to cancer prevention, cancer care, oncological emergencies, and end of life care
- Strategies for identifying and managing care utilizing a team approach
 - Coordination of care utilizing leadership, delegation, and priority setting
 - Team functioning on safety and quality of care when meeting the needs of the adult patient with a GI cancer
- Strategies relevant to the outcomes of care
 - Provision of cancer care with sensitivity and respect specific to the adult patient with a GI cancer including
 - Surgery
 - Gastrectomy
 - Hemicolectomy
 - Low anterior resection
 - A-P resection
 - Combination Chemo and radiation therapies
 - BRM
 - Pain management.
- Application of critical thinking processes when practicing safely in the delivery of care
- Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology in the care
- Communicates and documents care rendered via electronic medical record
 - Uses hand held computer devices for health teaching
 - Uses the EHR impart for medication reconciliation

Related Learner Experiences**Required Reading**

- Hinkle & Cheever: Ch. 44, pp. 1244-1256; Ch. 46, pp. 1304-1308; Ch. 47. pp. 1342-1349; Ch. 49 pp 1417-1425; Ch. 50 pp. 1450-1453;

Computer Assisted Instruction & A/V Material

- Colon Resection: Mr. Gold
 - PDS scenarios Adult Health Nursing Concepts and Sills: GI
- Ostomy Care
- ATI Targeted Medical-Surgical 2016: Immune

Case Study**Lab/Simulation Experiences**

- Ostomies
 - End stoma
 - Loop stoma
 - Double barrel stoma
 - Koch pouch
 - Ileoanal reservoir

Unit 3C – Care of the Patient who has a Reproductive Cancer**Content/Lecture Discussion**

- The structure and function of the Reproductive System:
 - Review the male and female reproductive systems
- Strategies to involve the adult patient and family in reaching successful
 - Health teaching related to cancer prevention, cancer care, oncological emergencies, and end of life care
- Strategies for identifying and managing care utilizing a team approach
 - Coordination of care utilizing leadership, delegation, and priority
 - Team functioning on safety and quality of care
- Strategies relevant to the outcomes of care for the adult patient with a reproductive cancer:
 - Provision of cancer care with sensitivity and respect specific to the adult patient with a reproductive cancer including
 - Surgery

✕ Cryotherapy	✕ TAH-BSO
✕ LEEP	✕ Prostatectomy
✕ Conization	✕ Orchiectomy
✕ Mastectomy	
 - Combination chemo, radiation and hormonal Therapies
 - BRM
 - Pain management.
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Communication and documentation of care rendered via electronic medical record
 - Uses hand held computer devices for health teaching
 - Uses the EHR to communicate and document care, and impart for medication reconciliation

Related Learner Experiences**Required Reading**

- *Hinkle & Cheever*. Ch. 56 pp. 1651-1663; Ch. 57 pp. 1706-1714; Ch. 58 pp. 1720-1726, 1730-1745; Ch. 59 pp. 1753-1756, 1764-1778, 1780-1782, 1784-1785;

Computer Assisted Instruction & A/V Materials

- Assessing your risk for Breast Cancer
- A Guide for Breast Self-Exam
- ATI Targeted Medical-Surgical 2016: Immune

Case Study**Written Assignment****Laboratory / Simulation Experience**

Simulation: Care of the Patient with Mastectomy

- Surgical Models of Female & Male Cancers

○ Breast	○ Prostate
○ Vulva	○ Testicular
○ Cervix	○ Bladder
○ Uterus	
○ Ovaries	

Unit 3D – Care of the Patient who has Skin Cancer
<p>Content/Lecture Discussion</p> <ul style="list-style-type: none"> • The structure and function of the Integumentary System • Strategies to involve the adult patient and family in reaching successful outcomes for the patient with skin cancer <ul style="list-style-type: none"> - Actinic keratoses - Squamous cell carcinomas - Basal cell carcinomas - Melanomas • Health teaching related to cancer prevention, cancer care, oncological emergencies, and end of life care • Strategies for identifying and managing care utilizing a team approach <ul style="list-style-type: none"> ○ Coordination of care utilizing leadership, delegation, and priority setting ○ Team functioning on safety and quality of care when meeting the needs of the adult patient with skin cancer • Strategies relevant to the outcomes of care <ul style="list-style-type: none"> ○ Provision of cancer care with sensitivity and respect specific to the adult patient with skin cancer including <ul style="list-style-type: none"> ▪ Surgery <ul style="list-style-type: none"> ▫ Cryosurgery ▫ Excision ▫ Wide excision ▪ Chemotherapy/Radiation ▪ Biotherapy ▪ Targeted Therapy ▫ Curettage and electrodesiccation ▫ Moh's surgery • Application of critical thinking processes when practicing safely in the delivery of care • Use of the nursing process throughout the mutually designed plan of care • Utilization of technology in the care • Communicates and documents care rendered via electronic medical record <ul style="list-style-type: none"> ○ Uses hand held computer devices for health teaching <p>Uses the EHR impart for medication reconciliation</p>
<p>Related Learner Experiences</p> <p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever</i>: Ch. 60 pp. 1790-1793; Ch. 61 pp. 1833-1839; <p>Computer Assisted Instruction & A/V Materials</p> <ul style="list-style-type: none"> • ATI Targeted Medical-Surgical 2016: Immune

Unit 3E-Care of the Patient who has Renal Cancer
<p>Content/Lecture Discussion</p> <ul style="list-style-type: none"> • The structure and function of the Renal System • Strategies to involve the adult patient and family in reaching successful outcomes for the patient with a Renal system cancer of the <ul style="list-style-type: none"> - Kidney - Bladder • Health teaching related to cancer prevention, cancer care, oncological emergencies, and end of life care • Strategies for identifying and managing care utilizing a team approach • Coordination of care utilizing leadership, delegation, and priority setting • Team functioning on safety and quality of care when meeting the needs of the adult patient with a Renal and Bladder cancer • Strategies relevant to the outcomes of care • Provision of cancer care with sensitivity and respect specific to the adult patient with a Renal System cancer including • Surgery <ul style="list-style-type: none"> • Nephrectomy • Renal Artery Embolization • Transurethral Resection • Simple Cystectomy • Radical Cystectomy • Cutaneous Urinary Diversions • Continent Urinary Diversions • Combination Chemo and radiation therapies • BRM • Pain management. • Application of critical thinking processes when practicing safely in the delivery of care • Use of the nursing process throughout the mutually designed plan of care • Utilization of technology in the care • Communicates and documents care rendered via electronic medical record • Uses hand held computer devices for health teaching • Uses the EHR impart for medication reconciliation
<p>Related Learner Experiences</p>
<p>Required Reading</p> <ul style="list-style-type: none"> • <i>Hinkle & Cheever: Ch. 53, pp. 1548 – 1550, 1562 – 1565; Ch. 54, pp. 1575; Ch. 55, pp. 1637 – 1647</i> <p>Computer Assisted Instruction & A/V Materials</p> <ul style="list-style-type: none"> • Ostomy care • ATI Targeted Medical-Surgical 2016: Immune <p>Case Study</p> <p>Laboratory / Simulation Experience</p>

Unit 4A – Care of the Patient who has an Acute Neurological Disorder**Content/Lecture Discussion**

- The structure and function of the Neurological System:
 - Review the Neurological System
- Strategies to involve the adult patient and family in reaching successful outcomes for the patient with an acute neurological disorder
 - Neuro Overview / Assessment
 - Head trauma
 - Increased ICP
 - Subdural & intracerebral hematomas
 - Cerebral herniation
 - CVA
 - Brain tumors
 - Supratentorial & infratentorial mass lesions
 - Infection
 - Meningitis
- Health teaching related to the prevention, immediate treatment, management of emergencies, management of sensory – motor deficits, and end of life care (brain death)
- Strategies for identifying and managing care utilizing a team approach
 - Coordination of care utilizing leadership, delegation, and priority setting
 - Team functioning on safety & quality of care
- Strategies relevant to the outcomes of care
 - Provision of care with sensitivity and respect specific to the adult patient with an acute neurological disorder
 - Emergency care
 - Medications
 - Surgery
 - ✧ Burr holes
 - ✧ Craniectomy
 - ✧ Cranioplasty
 - Ongoing neuro monitoring
 - Respiratory interventions
 - Chemo and radiation therapies
 - BRMs
 - Pain management
 - ✧ Sterotaxis
 - ✧ Shunt procedures
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Communication and documentation of care rendered via electronic medical record
 - Uses hand held computer devices for health teaching.
 - Uses the EHR to communicate and document care, and impart for medication reconciliation

Related Learner Experiences**Required Reading**

- *Hinkle & Cheever*: Ch. 65 pp. 1946-1971; Ch. 66 pp.1972 – 1995, Ch. 67 pp. 2009 – 2031, Ch. 68 pp. 2033 – 2048, Ch. 69 pp. 2065 – 2068, Ch. 70 pp. 2091-2100

Computer Assisted Instruction & A/V materials

- Michael Dunne: Subdural Hematoma
PDS scenarios Adult Health Nursing Concepts & Skills-Neurological
- Jim Brown: Neuro
- PDS scenarios Critical Care Health Nursing Concepts & Skills – Neurological
- Neuro Assess: Cerebellar function and reflexes
- Acute Head Injury

Unit 4A – Care of the Patient who has an Acute Neurological Disorder

- Increased Intracranial Pressure
- Glasgow Coma Scale
- Acute Ischemic Stroke
- ATI Targeted Medical-Surgical 2016: Neurosensory and Musculoskeletal

Case Study

Lab/Simulation Experience

Cerebrovascular Accident: Treatment, stabilization, and rehabilitation

- Head Trauma Model with Increased ICP
- Interprofessional CVA simulation

Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:

- Chapter 66: Management of Patients with Neurological Dysfunction
 - Increased Intracranial Pressure
- Chapter 67: Management of Patients with Cerebrovascular Disorders
 - Ischemic Stroke
 - Hemorrhagic Stroke

Clinical Experiences

- Neuro Assessment
- Glasgow Coma Scale
- Cushing's Triad

Unit 4B – Care of the Patient who has a Chronic Neurological Disorder**Content/Lecture Discussion**

- Review of the structure and function of the Neurological System continued
- Strategies to involve the adult patient and family in reaching successful outcomes for the patient with a chronic neurological disorder
 - Headache (migraine)
 - Seizure disorder
 - Parkinson's disease (PD)
 - Multiple Sclerosis (MS)
 - Myasthenia Gravis (MG)
 - Guillain-Barre Syndrome (GBS)
 - Amyotrophic Lateral Sclerosis (ALS)
- Health teaching related to the prevention, immediate treatment and management of emergencies, management of sensory-motor deficits, and end of life care (brain death)
- Strategies for identifying and managing care
 - Coordination of care utilizing leadership, delegation, and priority setting in meeting the patient's needs
 - Team functioning on safety and quality of care
- Strategies relevant to the outcomes of care
 - Provision of care with sensitivity and respect specific to the adult patient with a chronic neurological disorder
 - Emergency care
 - Medications
 - Surgery
 - Deep brain stimulation
 - Vagal nerve stimulation
 - Thymectomy
 - Ongoing neuro monitoring
 - Respiratory interventions
 - Biofeedback
 - PT/OT
 - Pain management, PT/OT.
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Uses the EHR to communicate and document care, and impart for medication reconciliation
 - Uses hand held computer devices for health teaching

Related Learner Experiences**Required Reading**

- *Hinkle & Cheever*: Ch. 66 pp. 1996 – 2008; Ch. 69 pp. 2072 – 2085; Ch. 70 pp. 2101 – 2107, 2109 – 2111
 - Computer Assisted Instruction & A/V materials
 - Ms. Stevens: Stroke
 - PDS scenarios Adult Health Nursing Concepts and Skills - Neurologic
 - Ms. Thorne: Ruptured Cerebral Aneurysm
 - PDS scenarios Critical Care Health Nursing concepts and Skills – Neurologic
 - Seizure Precautions
 - ATI Targeted Medical-Surgical 2016 Neurosensory and Musculoskeletal
- Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing:
- Chapter 69: Management of Patients with Neurologic Infections, Autoimmune Disorders and

Unit 4B – Care of the Patient who has a Chronic Neurological Disorder

Neuropathies

- Multiple Sclerosis

Unit 5 – Care of the Patient who has a Spinal Cord Injury / Connective tissue Disorder/Rehabilitation

Content/Lecture Discussion

- Review of the structure and function of the spinal column and musculoskeletal system
- Strategies to involve the adult patient and family in reaching successful outcomes for the patient with a spinal cord injury/joint disease/rehab
 - Spinal cord injury
 - Degenerative Joint Disease (DJD)
 - Total Knee Arthroplasty (TKA)
 - Arthritis:
 - Osteoarthritis (OA)
 - Inflammatory arthritis:
 - Rheumatoid Arthritis (RA)
 - Gouty Arthritis
 - Systemic Lupus Erythematosus (SLE)
- Health teaching related to the prevention, immediate treatment, management of emergencies, management of sensory-motor deficits for patients with a spinal cord injury, joint or rehabilitative disease
- Strategies for identifying and managing care
 - Coordination of care utilizing leadership, delegation, and priority setting in meeting the rehabilitative related needs for the adult patient
 - Team functioning on safety and quality of care when meeting the needs of the adult patient with a spinal cord injury/joint disease/rehab.
- Strategies relevant to the outcomes of care
 - Provision of care with sensitivity and respect specific to the adult patient with a spinal cord injury/joint disease/rehab including
 - Emergency care
 - Ventilation
 - Intubation
 - Spinal shock
 - Autonomic dysreflexia
 - Medication
 - Surgery
 - Halo traction
 - Cervical tongs
 - Ongoing neuro monitoring
 - Respiratory interventions
 - Pain management
 - Referral/community resources.
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology in the care
 - Uses the EHR to communicate, document care, and impart for medication reconciliation.
 - Uses hand held computer devices for health teaching.

Required Reading

- *Hinkle & Cheever*: Ch. 38 pp. 1082 – 1093; 1093-1100; 1104 – 1106, 1107 – 1108; Ch. 68 pp. 2048 – 2063

Case Study

Laboratory/Simulation Experiences

Traumatic Spinal Cord Injury: Cervical collar, neuro and cardiac assessment, logrolling, spinal shock

- ATI Targeted Medical-Surgical 2016: Neurosensory and Musculoskeletal

Practice and Learn Interactive Case Studies: From Lippincott's Interactive Studies in Medical- Surgical Nursing

- Chapter 38: Assessment and Management of Patients with Rheumatic Disorders
 - Osteoarthritis

Unit 4B – Care of the Patient who has a Chronic Neurological Disorder

- Systemic lupus erythematosus
- Chapter 68: Management of Patients with Neurologic Trauma
 - Acute Spinal Cord Injury

Unit 6 – Care of the Patient with a Sensory Perceptual Disorder**Content/Lecture Discussion**

- The structure and function of the sensory system
 - Review of the ear
- Strategies to involve the adult patient and family in reaching successful outcomes for the patient with a sensory perceptual disorder
 - Otitis Externa
 - Meniere's disease
- Health teaching related to the prevention, immediate treatment, management of emergencies and management of sensory-motor deficits for patients with a sensory perceptual disorder
- Strategies for identifying and managing care_utilizing a team approach
 - Coordination of care utilizing leadership, delegation, and priority setting
 - Team functioning on safety and quality of care
- Strategies relevant to the outcomes of care for the adult patient with a sensory perceptual disorder:
 - Provision of care with sensitivity and respect specific to the adult patient with a sensory perceptual disorder include
 - Emergency care
 - Medications
 - Surgery
 - Meniere's disease: endolymphatic shunt ▫
 - Ongoing sensory monitoring
 - Pain management
 - Referral and communities resources.
- Application of critical thinking processes when practicing safely in the delivery of care
 - Use of the nursing process throughout the mutually designed plan of care
- Utilization of technology
 - Uses the EHR to communicate and document care, and impart for medication reconciliation
 - Uses hand held computer devices for health teaching

Related Learner Experiences**Required Reading**

- *Hinkle & Cheever*: Ch. 64 pp.1926 – 1927; pp.1933 - 1934

Computer Assisted Instruction & A/V materials

- Mr. Lee: Meniere's disease
 - PDS scenarios Adult Health Nursing Concepts and Skills - Eye/Ear
- ATI Targeted Medical-Surgical 2016: Neurosensory and Musculoskeletal

Laboratory/Simulation Experiences

- Hearing Impaired: Safety and Altered Communication