KINGSBOROUGH
COMMUNITY COLLEGE

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

Nursing 1900 – Family-Centered Maternity Nursing
Course Syllabus Spring 2026

Professor Loni J. Scott, MSN, RN, CNS Assistant Professor Course Coordinator	Professor Isabella Catherine Clement-Charles, RN, MSN-ED, CEFM, CLC Adjunct Faculty
Credit – Hours: 4 credits, 15 hours (one-half semester)	
Pre-requisites	NUR 2000, NUR 2200
Pre or Co-requisite	SOC 3100, ENG 2400

Welcome to Maternal-Newborn Nursing, and yes we have saved the best for last!! You are so close to graduation and we want to help you get there! As you know, this is a Mini course and we will be covering a lot of information in 6 weeks. Remember that many students have gone before you and succeeded. And many of them have chosen to be maternity nurses! Please let us know if you are having any difficulties. It is not unusual to feel overwhelmed in this course. There's a lot of new vocabulary and it can feel like you are learning a new language. We are here to help! Send us an email or come see us after lecture.

As your teachers, my colleague and I (Loni Scott and me, Janette O'Sullivan), strive to create mutually valuable interactions with you, our students. We learn from each other. As students and faculty here at Kingsborough, we are a diverse group and we honor and respect that diversity in all its forms, including race, ethnicity, religion, beliefs, values, gender identity, sexual orientation, and socioeconomic status.

This course is an introduction to learning about nursing care for women, for those who are pregnant and giving birth, as well as assessment and care of the newborn and their family. Maternity care in this country is in crisis. We know that Black women are three to four times more likely to die when giving birth than white women. Native American women have 1.5 the rate than white women. In the US more women die from pregnancy related issues than in other high resource countries. Black babies die at twice the rate of white babies. Much of the disparity can be attributed to inequity in the health care that people receive. We must consider structural racism, which is "the totality of ways in which societies foster racial discrimination through mutually reinforcing systems of housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice. These patterns and practices in turn reinforce discriminatory beliefs, values and distribution of resources."[1] We must address these inequities, and as soon to be health professionals, you have a responsibility to be aware of these issues and be advocates for change. But first we have to know the issues.

1. Bailey, ZD, Krieger N, Agenor M, Graves J, Linos N, Bassest MT. Structural racism and health inequities in the USA: evidence and interventions. Lancet. 2017;389(10077):1453-1463. Doi: 10.1016/S0140-6736(17)30569-X

(11/17/2011. Rev. 03/06/2012, 8/21/13, 7/8/14, 02/27/15, 01/19/16. 8/7/17, 7/24/18, 7/29/18, 9/2/20, 2/27/2021, 9/8/2021, 2/28/22, 7/20/22, 5/15/2023, 1/11/2024, 8/9/2024, 2/10/2025, 6/11/2025,9/23/2025,1/18/26
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COURSE DESCRIPTION

This course presents some history, facts, principles and concepts relevant to the care of individuals and families during the reproductive years of the life cycle and introduces the student to family centered maternity nursing. Recognizing the impact of pregnancy on the individual and their family, you will develop an awareness of their physiological and psychosocial that may occur during the childbearing years. This is 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.

We will meet on campus for lab simulation and lectures. A typical week will consist of: five (5) hours in-person classroom instruction, two hours on campus laboratory/simulation and eight (8) hours of clinical.

INSTRUCTOR CONTACT INFORMATION

Contact your instructor using Kingsborough email as follows:
Loni.Scott@kbcc.cuny.edu
Isabella.Clement@kbcc.cuny.edu

Please use only your CUNY email when emailing your instructors. Your CUNY email is also how you will receive invitations to online lectures, labs and clinicals. **Please make sure your CUNY email is valid and working**

END OF PROGRAM STUDENT LEARNING OUTCOMES (EPSLOs)

Upon completion of NUR 1900 and the Kingsborough Community College Nursing Program, using the Nursing Process in a variety of health care settings to a diverse population of patients, the student will:

1. Organize nursing care to provide a safe patient environment.
2. Prioritize nursing interventions when providing nursing care.
3. Integrate evidence-based nursing practice into nursing care.
4. Integrate critical thinking/clinical reasoning strategies when providing nursing care.
5. Support principles of teamwork and collaboration when working with members of the interprofessional team.
6. Develop appropriate leadership/management strategies when providing nursing care.
7. Incorporate the utilization of informatics principles and technology systems while providing nursing care.
8. Support ethical and legal principles relevant to the practice of a registered nurse.

ASSESSMENT MEASURES for COURSE SLOs

Students will perform satisfactorily in the classroom, laboratory/simulation, clinical, and on campus lab settings as evidenced by achieving 75% or greater on written exams and, completion/submission of 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 3% 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.

(11/17/2011. Rev. 03/06/2012, 8/21/13, 7/8/14, 02/27/15, 01/19/16. 8/7/17, 7/24/18, 7/29/18, 9/2/20, 2/27/2021, 9/8/2021, 2/28/22, 7/20/22, 5/15/2023, 1/11/2024, 8/9/2024, 2/10/2025, 6/11/2025,9/23/2025,1/18/26
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ATI Proctored Assessments with Respondus Lockdown Browser

The Respondus LockDown Browser will be utilized for **all** ATI *Proctored* Assessments given remotely or in person. It will prevent students from copying, printing, visiting another URL, or accessing other applications during a test. When you launch an ATI Proctored Assessment with Respondus through the ATI student portal, Respondus Lockdown browser will open **automatically when you begin a proctored assessment.**

An ATI attestation form is to be submitted to your instructor during the first week of class, for each course you take that administers an ATI Proctored Exam (Nursing 1000, 2100, 2200, 2000, 1900, 2300). This form is located in Brightspace within the Table of Contents. If you fail to sign the form, you will not be able to take your ATI Proctored exam. If the exam is not rescheduled prior to the end of the semester, you will receive an Incomplete (INC) grade and will not be able to progress in the program.

The Respondus Monitor will record the student using video during the exam. The video record will only be reviewed by ATI if there is a reason to believe test protocol has been breached and the student may have committed an act of academic dishonesty. If a student is found or suspected of an act of academic dishonesty, they will be investigated by ATI and reported to KBCC's Office of Academic Integrity. *If ATI Test Security has deemed a student has committed any act of academic dishonesty, ATI can permanently suspend the student's ATI account. Without an ATI account, a student will be unable to complete the KBCC Nursing program requirements and therefore be dismissed from the nursing program.*

ATI Proctoring-Student Quick Guide (PDF)
ATI Proctoring-Student Orientation (6 min)

ATTENDANCE

Complete participation in class is possible only when students are able to focus attention on the class. Coming to class after it has begun is disrespectful to faculty and classmates. Talking out of turn or exhibiting other disruptive behaviors are not tolerated and students will be asked to leave the classroom or lab.

A student is deemed excessively absent in any course when they have 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.

ACCESS-ABILITY SERVICES

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

The CUNY Policy on Academic Integrity is strictly enforced throughout exams. Any suspected violation of this policy may result in removal from the course. There will be no individual exam reviews with faculty members and there will be no group exam review at the end of the exam. However, if you have failed an exam, you have an opportunity to meet with your instructor where we will review concepts on the exam where the student did poorly and offer suggestions on how to improve.

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

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KCC Nursing Department

Exam Agreement

1. Students are required to arrive at least 15 minutes prior to scheduled exam time.
2. All students (including NUR 2000 students) are required to wear the designated KCC clinical uniform for all examinations. No shirts can be worn under or over the uniform; arms need to be visible. Failure to comply with this requirement will result in the student being prohibited from sitting for the examination. A makeup exam will be scheduled on the next makeup exam date.
3. All students should have their hair tied back so that their ears are visible. Only medically prescribed hearing devices or devices required for an AAS accommodation are acceptable. Medical documentation needs to be provided at the beginning of the semester to the instructor.
4. The wearing of jewelry of any kind is strictly prohibited during the examination. This includes, but is not limited to earrings, necklaces, bracelets, all types of watches and any other item the faculty proctors deem unacceptable. Failure to comply with this requirement will result in the student being prohibited from sitting for the examination. A makeup exam will be scheduled on the next makeup exam date.
5. All eyeglasses are subject to inspections.
6. *Any student who arrives 15 minutes later than the posted exam time will not be permitted to take the exam that day. A makeup exam will be scheduled on the next makeup exam date. There will be no exceptions to this policy. Students will be allowed only one make up exam/semester.*
7. Students are required to line up outside of assigned classroom and will be seated at the discretion of the faculty.
8. All personal items (cell phones, smart watches, earbuds/pods, backpacks, purses, pens, highlighters, pencils, food and drinks etc.) must be placed in the classroom, at a location designated by the proctor before taking assigned seat.
9. Cell phones are to be turned off (not vibrate) and placed with all personal items in the area designated by the proctor. At no time shall a student have their cell phone on their person once seated for the exam.
10. Students should remove all hats, scarves, sweatshirts, hoodies, prior to the beginning of the exam (The only exceptions are head coverings worn for religious purposes).
11. Students will be given a pencil and paper for med math calculations only. No other data should be written on the paper. Please write your name on the paper.
12. Students are prohibited from talking once the exam starts until the proctor states the exam is over and the students have exited the testing room.
13. Students are not permitted to discuss/record/write down the exam questions in any context on their own or with each other during or after the exam.
14. If the student has any questions once the exam begins, they are required to raise their hand and a proctor will come to them.
15. Questions related to medical terminology are not allowed.
16. Once the student completes the exam, they are to raise their hand after the green check mark is visible on their computer screen. A proctor will come over to them to confirm their exam is uploaded.
17. After exam upload confirmation has occurred, the student will sign out of ExamSoft.
18. Once signed out of ExamSoft, the computer will not be used by the student for any reason. (Assignments, internet searching, personal use etc.).
19. Students will remain silent while they are waiting for the examination to be over.
20. If a student does not comply with the exam rules, they will be dismissed from the exam and receive a grade of zero for the exam.

Academic Integrity Policy – The City University of New York (cuny.edu) Revised Academic Integrity Policy now **includes the use of Artificial Intelligence.** The policy outlines definitions and examples of academic dishonesty.

Dosage Calculation Competency-Pass/Fail or Satisfactory/Unsatisfactory

Students are required to take the ATI: Dosage Calculation RN Adult Medical Surgical Online Practice Assessment 3.2 and quiz at the beginning of each semester to validate drug calculation competency. Students can complete the learning portion to refresh their med math skills. Students must upload the 'Individual Performance Profile' to Brightspace Assignments. A minimum grade of 80% is required. The student will receive a satisfactory/unsatisfactory grade for Dosage Calculation, as it is not part of the numerical calculation for your Final Grade in a course.

Nursing 1900– Final grades will be calculated as follows:

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Lecture examinations average (2 exams)	62% (31% each)
Final examination	35%
ATI assignments and testing	3%
Clinical competency	Satisfactory or Unsatisfactory
• Writing Assignments	Satisfactory or Unsatisfactory
• Group Assignments	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 on the specified date and time. All assignments must be handed in by the end of the course to complete the requirements of the course. If you are having difficulty meeting a deadline for an assignment, please let your instructor know. 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.

Assignments/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.

Students must meet with their instructor if they are failing the course. A conference with the instructor will be scheduled to discuss identify strengths and weaknesses and discuss strategies to attain a successful outcome in the course. In addition, students may initiate conferences with the instructor at other times. Conference times should be scheduled via instructor/student email as above.

AI ACADEMIC INTEGRITY POLICY

Please see CUNY's policy on Academic Integrity at this website:

https://www.cuny.edu/about/administration/offices/legal-affairs/policies-resources/academic-integrity-policy/

Information from the website specific to AI use:

- Copying from another person or from a generative AI system or allowing others to copy work submitted for credit or a grade. This includes uploading work or submitting class assignments or exams to third party platforms and websites beyond those assigned for the class, such as commercial homework aggregators, without the proper authorization of a professor. Any use of generative AI tools must be in line with the usage policy for specific assignments as defined in the course of the syllabus and/or communicated by the course instructor.

- Using artificial intelligence tools to generate content for assignments or exams, including but not limited to language models or code generators, without written authorization from the instructor.

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	
- In person lecture/discussion - On Campus lab/simulation - Case studies - Written assignments - Group presentations	- Computer Assisted Instruction / ATI - Interactive online videos (synchronous and asynchronous) - Group Work; Role Play

HOW TO PROCEED SUCCESSFULLY THROUGH THIS COURSE
- Content will be delivered online via Brightspace for content and some group collaboration, on campus lecture/simulation throughout the course.
- Students should have a working computer with camera and audio, should the need arise to hold a virtual lecture, simulation or clinical experience.
- Each week includes live lecture on campus, on campus lab/simulation and clinical.
- Weekly assignments, lectures, labs, simulation videos will be posted under course content on Brightspace. An outline of requirements for lecture and lab can be found on the course week to week schedule which includes specifics for all assignments.
- E Text book listed below is required and will be used throughout the course.
- Please let your instructor know if you are experiencing any problems. Communicate with her via your CUNY email only. Let us know if you need help navigating Brightspace. We can work together to find solutions.
- Preparation for all course activities is outlined in the weekly schedule on BRightspace. The course moves quickly and you're advised to not fall behind in the assignments. Please communicate with your instructor if you are having any difficulties.
- We are here for you and want you to pass the course! Again, email your instructor with any questions or concerns. We will respond within 24 hours during the week. Please allow some leeway on the weekend

REQUIRED RESOURCES AND TEXTS

- Assessment Technology Institute **(ATI)**

- Access to computer with camera and audio (please notify your instructor if you need access to a computer)

REQUIRED TEXTBOOK FOR NURSING 1900

Murray, McKinney, Holub, Jones, & Scheffer (2024) Foundations of Maternal – Newborn and Women's Health Nursing.(8th ed.).Elsevier – Evolve.
https://pageburstls.elsevier.com/books/9780323846387

RECOMMENDED TEXTBOOKS
- Dudek, Susan G. (2014). <u>Nutrition Handbook for Nursing Practice</u>, 7th Edition, Philadelphia, PA.: J.B. Lippincott.
- Frandsen G.,Pennington S.,(2014). <u>Abrams Clinical Drug Therapy</u>, 11th 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 (2014). <u>Laboratory and Diagnostic Tests with Nursing Implications</u>, 9th Edition, Upper Saddle River, NJ: Pearson/Prentice Hall.
- Thomas, Clayton L., Editor. (2013). <u>Taber's Cyclopedic Medical Directory</u>, 22nd Edition. Philadelphia, PA. F.A. Davis Company.

OPTIONAL REFERENCES
- AJN: American Journal of Nursing
- JOGNN: Journal of Obstetric, Gynecologic and Neonatal Nursing
- MCN: The American Journal of Maternal/Child Nursing
- JMWH: The Journal of Midwifery and Women's Health
- NWH: Nursing and Women's Health

White RS, Aaronson JA. Obstetric and perinatal racial and ethnic disparities. *Curr Opin Anaesthesiol*. 2022; 35(3):260-266
 DOI: 10.1097/ACO.0000000000001133

Reduction of Peripartum Racial and Ethnic Disparities: A Conceptual Framework and Maternal Safety Consensus Bundle
https://www.jognn.org/action/showPdf?pii=S0884-2175(18)30064-9

Crear-Perry J, Correa-de-Araujo R, Lewis Johnson T, McLemore MR, Neilson E, Wallace M. Social and Structural Determinants of Health Inequities in Maternal Health. J Womens Health (Larchmt). 2021 Feb;30(2):230-235. doi: 10.1089/jwh.2020.8882. Epub 2020 Nov 12. PMID: 33181043; PMCID: PMC8020519.

Implicit Bias:
The most common tool used to assess implicit bias is the Implicit Association Test, which is available online (https://implicit.harvard.edu/ implicit). Hall et al. (2015)

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:

- Attendance
- Health clearance, and CPR training
- Evaluation and grading
- Clinical competencies
- College laboratory practice requirements
- Clinical Agency experience requirements

- Netiquette
- Drug calculation policy
- Mandatory skills review
- Criteria for retention in the nursing program
- Civility
  - Specific dress requirements for each clinical course
- Integrity

TOPICAL OUTLINE

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 Adaptations

- Unit 1 Orientation to Family-Centered Maternity Nursing/ Intrapartum Fetal Surveillance
- Unit 2 Assessment and Management of the Antepartum Patient and Family
- Unit 3 Assessment and Management of the Intrapartum Patient and Family
- Unit 4 Assessment and Management of the Postpartum Patient and Family
- Unit 5 Assessment of the Neonate and Family
- Unit 6 Assessment and Management of Women's Health

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Unit 1 – Orientation to Family – Centered Maternity Nursing / Intrapartum Fetal Surveillance. Maternal Adaptations

Content/Lecture Discussion

- Strategies to involve the students in reaching successful outcomes for successful completion of this course
- Strategies for identifying and managing current trends in contemporary maternity nursing
- Coordination of care utilizing leadership, delegation, and priority setting in applying critical thinking to the nursing process
- Team functioning on safety & quality of care when meeting the needs of the maternity patient and her family
- Strategies relevant to the outcomes of care regarding principles of family as they apply to the child bearing family
- Provision of Course requirements with sensitivity and respect including:
    - Maternity and Women's Health Care Today
    - Introduction to Labor / The Nurse's Role in Maternity and Women's Health Care
    - Ethical, Social, and Legal Issues
    - Reproductive Anatomy and Physiology
    - Hereditary and Environmental Influences on Childbearing
    - Societal and Cultural Influences on childbearing, such as structural racism and its affect on maternity care

    - Responsibility and accountability
    - Research
    - Quality assurance
    - Informed consent
    - Maternal rights
    - Legal issues during delivery
    - Home health care
    - Managed care

- Application of critical thinking processes when practicing safely in the delivery of care to the pregnant patient
- The purpose and the steps in critical thinking
- The nurse's role in maternity and women's health care
- Utilization of technology in the care of the antepartum patient

Unit 1 – Orientation to Family – Centered Maternity Nursing / Intrapartum Fetal Surveillance. Maternal Adaptations (cont'd)

- Strategies to involve the patient and family in reaching successful outcomes for the antepartum patient
- Coordination of care utilizing leadership, delegation, and priority setting in meeting antepartum related needs
- Team functioning on safety & quality of care when meeting the needs of the antepartum patient
- Strategies relevant to the outcomes of care for the antepartum patient
- Purpose/ Content and Provision of prenatal care including:
  - Conception and prenatal development – Assessing the Fetus
  - Maternal Adaptations to pregnancy
  - Antepartum Assessment, Care & Education
  - Nutrition for childbearing
  - Childbearing Family with Special Needs
- Application of critical thinking processes when practicing safely in the delivery of care to the pregnant patient
- Use of the nursing process throughout the mutually designed plan of care for the antepartum patient
- Utilization of technology in the care of the antepartum patient.
  - Communication and documentation of care rendered via electronic medical record
  - Uses hand held computer devices for health teaching as appropriate

Related Learner Experiences
Required Reading

- *Murray, McKinney, Holub, Jones, & Scheffer:* Chapters 6, 7, 8; Chapter 14.

LAB #1
See Lab Assignment Week #1 Under Course Content
On BB
On campus Lab: Film and Group Discussion: "The Business of Being Born"

Clinical Experiences
- Student will
  - Accurately identify how to assess the laboring patient.
  - Define Leopold's Maneuvers
  - Describe fetal and uterine monitoring techniques and devices.
  - Evaluate uterine and fetal monitoring strips.
  - Discuss patient-centered care based on evidence based practice with sensitivity and respect
  - Discuss cultural influences on patient perception/response to pain/childbearing
  - Identify the role of team leader using the principles of priority setting and delegation
  - Incorporate national safety standards to ensure the safe and effective delivery of patient care
  - Communicate to all members of the healthcare team utilizing SBAR during simulation
  - Discuss importance of documenting patient status, health teaching, and medication reconciliation using the EHR

Unit 2 – *Assessment and Management of the Antepartum Patient/Complications*
Content/Lecture Discussion

- Strategies to involve the patient and family in reaching successful outcomes for the antepartum patient (cont'd)
- Health teaching related to prenatal care
- Strategies for identifying and managing care of the pregnant patient during antepartum period
  - Strategies for identifying complications of pregnancy
  - Strategies for caring for a pregnant patient who has complications
- Coordination of care utilizing leadership, delegation, and priority setting in meeting antepartum related needs of both normal and complicated pregnant patients
- Team functioning on safety & quality of care when meeting the needs of the antepartum patient
- Strategies relevant to the outcomes of care for the antepartum patient
- Purpose/ Content and Provision of prenatal care including:
  - Conception and prenatal development – Assessing the Fetus
  - Maternal Adaptations to pregnancy
  - Antepartum Assessment, Care & Education
  - Nutrition for childbearing
  - Childbearing Family with Special Needs
- Assessment and nursing management of complications (include discussion regarding how structural racism may contribute to risk for marginalized groups) during pregnancy including:
  - Gestational Diabetes
  - Preeclampsia
  - Abnormalities in placentation
  - Hemorrhagic conditions of early pregnancy
  - Hyperemesis
  - Preterm labor

- Application of critical thinking processes when practicing safely in the delivery of care to the pregnant patient
- Use of the nursing process throughout the mutually designed plan of care for the antepartum patient
- Utilization of technology in the care of the antepartum patient.

Related Learner Experiences

Required Reading
- *Murray, McKinney, Holub, Jones, & Scheffer*: Chapters 7, 8, 9, 10 & 11.

LAB #2
See **Lab assignment Week #2** Under Course Content on BB.

Clinical Experiences

- Student will
  - Describe the components of a prenatal health assessment, physical exam, labs
  - Evaluate a patient's prenatal care record as available
    - Differentiate normal and abnormal adaptations in pregnancy
  - Provide patient-centered care based on evidence based practice with sensitivity and respect
  - Act as a team leader using the principles of priority setting and delegation
  - Incorporate national safety standards to ensure the safe and effective delivery of patient care
  - Communicate to all members of the healthcare team utilizing SBAR during simulation
  - Discuss importance of documenting patient status, health teaching, and medication reconciliation using the HER

Unit 3 – *Assessment and Management of the Intrapartum Patient and Family / Complications*
Content/Lecture Discussion

- Components of the birthing process
  - Passage
  - Passenger
  - Powers
  - Psyche
- Strategies to involve the patient and family in reaching a successful outcome in labor and birth
- Health teaching regarding labor and birth.
- Strategies for identifying and managing care of intrapartum patient
  - Coordination of care in meeting related needs for the woman and her family during intrapartum
  - Team functioning on safety & quality of care when meeting the needs of the intrapartum patient
- Strategies relevant to the outcomes of care for the intrapartum patient.
- Provision of intrapartum care with sensitivity and respect specific to

  - Complications of Pregnancy
  - Processes of Birth; Support of physiologic birth
  - Pain Management During Childbirth
  - Intrapartum Fetal Surveillance (review)
  - Nursing care During Labor and Birth
  - Intrapartum Complications

- Application of critical thinking processes when practicing safely in the delivery of care to the laboring patient

Related Learner Experiences

Required Reading
- *Murray, McKinney, Holub, Jones, & Scheffer:* Chapters 10, 12, 13, 14, 15, & 16.

LAB #3
See **Lab assignment Week #3** Under Course Content on BB.

Clinical Experiences

- Student will
  - Identify components of a health assessment of a laboring patient
  - Evaluate uterine and fetal monitoring strips
  - Utilize the nursing process to formulate a plan of care for the laboring patient
  - Identify patient-centered evidence based practices for the laboring patient
  - Describe the team leader role using the principles of priority setting and delegation
  - Incorporate national safety standards to ensure the safe and effective delivery of patient care
  - Communicate to all members of the healthcare team utilizing SBAR during simulation
  - Discuss importance of documenting patient status, health teaching, and medication reconciliation using the EHR

Unit 4 – *Assessment and Management of the Postpartum Patient and Family*
Content/Lecture Discussion

- The Postpartum assessment
- Evaluation of method of feeding; breastfeeding assessment and strategies to support breastfeeding including discussion of Baby Friendly Initiative
- Strategies to reach successful outcomes for the postpartum patient, her newborn and her identified family
    - Health teaching regarding care of the postpartum mother and newborn including normal physiologic changes to be expected, deviations from normal and signs and symptoms to report
- Strategies for managing care of the postpartum patient and her family
    - Coordination of care in meeting related needs for the postpartum patient
- Team functioning on safety & quality of care when meeting the needs of the postpartum patient and family
- Provision of postpartum and newborn Care with cultural sensitivity and respect specific to:
    - Postpartum Physiologic Adaptations
    - Postpartum Psychosocial Adaptations
    - Postpartum Maternal Complications

- Application of critical thinking processes when practicing safely in the delivery of care of the postpartum and newborn.
    - Use of the nursing process throughout the mutually designed plan of care for the postpartum patient.
- Utilization of technology in the care of the postpartum patient.
- Use the EHR to communicate, document care, and for medication reconciliation.

Related Learner Experiences

Required Reading
- *Murray, McKinney, Holub, Jones, & Scheffer:* Chapters 17 & 18; Chapter 19: pages 525-532

Lab #4
See Lab assignment Week #4 Under Course Content on BB.
Clinical Experiences
- Student will:
    - Identify components of a health assessment with a focus on postpartum / post op (Post C/Section) issues
    - Discuss advantages and disadvantages of breastfeeding
    - Offer strategies for breastfeeding support as appropriate
    - Identify components of a head to toe physical exam for the postpartum patient and the newborn
    - Describe a plan of care for the postpartum patient (S/P normal birth and S/P C/S) and the newborn; differentiate normal from abnormal findings
    - Describe patient-centered care utilizing evidence based practice with sensitivity and respect
    - Describe the team leader role using the principles of priority setting and delegation
    - Incorporate national safety standards to ensure the safe and effective delivery of care
    - Communicate to all members of the healthcare team utilizing SBAR during simulation
    - Discuss the importance of documenting patient status, health teaching, and medication reconciliation using the EHR.

Unit 5 – Assessment and Management of the Neonate and Family
Content/Lecture Discussion
- The Newborn assessment   - Strategies to involve the patient and family in reaching successful outcomes for the Neonate and Family   - Health teaching related to care of the newborn   - Breastfeeding Benefits / Baby Friendly Initiative   - Strategies for identifying and managing care of the neonate utilizing a team approach   - Coordination of care utilizing leadership, delegation, and priority setting in meeting neonatal needs   - Team functioning on safety and quality of care when meeting the needs of the neonate.   - Strategies relevant to the outcomes of care for the neonate   - Provision of care of families at risk (include discussion of disparities in newborn outcomes for Black and Brown people in the US) including: - Normal Newborn processes of Adaptation   - Assessment of the Normal Newborn   - Care of the Normal Newborn   - Assessment of infant feeding with breastfeeding support strategies   - High-Risk Newborn: Complications Associated with Gestational Age and Development   - High- Risk Newborn: Acquired and Congenital Conditions.   - Application of critical thinking processes when practicing safely in the delivery of care to the Neonate   - Use of the nursing process throughout the mutually designed plan of care for the neonate   - Utilization of technology in the care of the adult patient with a Neonate   - Communication and documentation of care rendered via electronic medical record
Related Learner Experiences
Required Reading   *Murray, McKinney, Holub, Jones, & Scheffer:* Chapters 20,21,22, 23, Chapter 24: pages 672- 684; 687-691; 694- 696; 698-702.   **Lab #5** **See Lab assignment Week #5** Under Course Content on BB. **Clinical Experiences**   - Student will: - Identify the components a health assessment of the newborn   - Describe a head to toe physical exam of the newborn   - Implement an individualized plan of care for the newborn   - Describe patient-centered care based on evidence based practice with sensitivity and respect   - Identify appropriate parental teaching and counseling regarding newborn care   - Describe the team leader role using the principles of priority setting and delegation   - Incorporate national safety standards to ensure the safe and effective delivery of care   - Communicate to all members of the healthcare team utilizing SBAR during simulation   - Discuss the importance of documenting patient status, health teaching, and medication reconciliation using the EHR while meeting the needs of the neonate

Unit 6 – Assessment and Management of Women's Health Care.

Content/Lecture Discussion

- Review the methods of contraception
- Review changes in women's health needs throughout the lifespan including menopause
- Strategies to involve the patient and family in reaching successful outcomes for the woman with health issues
- Strategies for reduction of health risks for women throughout the lifespan including review of sexually transmitted diseases/ infections: prevention and treatment
- Strategies for identifying and managing care of the woman with health issues utilizing a team approach:
  - Coordination of care utilizing leadership, delegation, and priority setting in meeting the needs for women with health issues
- Team functioning on safety and quality of care when meeting the needs of the woman with health issues
- Strategies relevant to the outcomes of care for women with health issues
- Provision of health care with sensitivity and respect specific to women with health issues including:
  - Family Planning
  - Infertility
  - Preventive Care for Women
  - Women's Health Problems.
- Application of critical thinking processes when practicing safely in the delivery of care to women with health issues
- Use of the nursing process throughout the mutually designed plan of care for women with health issues
- Utilization of technology in the care of women with health issues.
- Communication and documentation of care rendered via electronic medical record

Related Learner Experiences

Required Reading
   Murray, McKinney, Holub, Jones, & Scheffer: Chapters 26, 27: pages 756-765; 774-775;

   Chapter 28: pages 775-784; 790- 796; 803-809

Lab #6
See **Lab assignment Week #6** Under Course Content on BB.
Clinical Experiences
- Student will:
  - Identify the components of a health assessment of a woman
  - Describe a head to toe physical exam for a woman
  - Implement an individualized plan of care for a woman seeking birth control including risks and benefits, contraindications, method of use, etc for individual methods of birth control
  - Provide patient-centered care based on evidence based practice with sensitivity and respect and include information on safer sex practices and healthy lifestyles
  - Act as a team leader using the principles of priority setting and delegation during simulation
  - Incorporate national safety standards to ensure the safe and effective delivery of care
  - Communicate to all members of the healthcare team utilizing SBAR during simulation
  - Discuss importance of documenting patient status, health teaching, and medication reconciliation using the EHR while meeting the needs of the patient with women's health issues