

# Nursing Department

## Syllabus Spring 2015 Nursing 339: Individual Health Challenges

### Course and Clinical Faculty

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### Class and problem solving sessions M- W-F: 0730 to 0840, PPHAC 102

Clinical Tuesday and Thursday as assigned 0645 to 1515: prep/research required the evening before assigned clinical.

### Course Description:

A course which applies nursing knowledge, interventions and attitudes for the management of individuals' complex health problems throughout the adult years in theory and in clinical practice. Students analyze various human responses to challenging health conditions to provide holistic and comprehensive nursing care.

### Nursing Program Philosophy:

"The process of learning involves accountability, diversity, mutual respect, openness, honesty, and reality base. The nursing faculty has adopted core components for the curriculum and these are Community, Holism, Inquiry and Professionalism (CHIP). These core components provide the foundation for the program and learning outcomes  
<http://home.moravian.edu/public/Nursing/HandbooksPage.html>

### Ethos Statement:

Grounded in local and global partnerships, nursing at Moravian blends compassionate art with scientific inquiry to achieve a transformative education deeply rooted in a rich liberal arts tradition. At its core the program seeks to develop students who are acutely aware of the world in which they live and their responsibilities of living in a global, inter-dependent community. The program cultivates a professional nurse graduate who values lifelong learning and service to others within a framework of social justice.

“The Moravian College nursing program is accredited by the Commission on Collegiate Nursing Education. As part of the accreditation process the program must provide evidence of assignments completed by students. Any of the methods of evaluation used in this course, may be used as evidence of student assignments during the accreditation process.”

**Course Objectives:**

1. Analyze concepts from the sciences, humanities and nursing to provide care.
2. Examine nursing roles in the safe and effective diagnosis and treatment of human responses to individuals’ health challenges.
3. Communicate nursing perspectives when collaborating with individuals, families, and health care team members.
4. Investigate best evidence for nursing practice with chronic and complex disorders.
5. Demonstrate beginning leadership skills that encourage individuals with health challenges to restore health or manage illness.
6. Apply moral, spiritual and ethical concepts in the care of individuals with health challenges.
7. Exhibit professional accountability and advocacy in the care of individuals with health challenges.

**Course Credits/Unit/Hours**

Course Units: 1

Theory Hours: 3.0

Clinical Hours: 8 per week

**Prerequisites:** All required sciences; all required nursing courses (NURS 115, 212, 310, 311, 331.2);

**Co-requisites:** NUR 332.2 and NURS 314

**Required Textbooks:**

Kaplan Products

Ball, J.W., Bindler, R.C., & Cowen, K.J. (2012). *Principles of pediatric nursing: caring for children*. (5<sup>th</sup> ed.). Boston: Pearson.

Boyd, M. (2012). *Psychiatric nursing contemporary practice* (5<sup>th</sup> ed.). Hagerstown, MD: Lippincott, Williams, and Wilkins.

Davidson, M. R., London, M.L. & Ladewig, P. A. (2012). *Old’s maternal-newborn nursing & women’s health*. (9<sup>th</sup> ed.). Boston: Pearson.

Jarvis, C. (2012). *Physical Examination and Health Assessment* (6<sup>th</sup> edition). Elsevier, Saunders.

Karch, A. M. (2013) *Focus on nursing pharmacology* (6<sup>th</sup> ed.) Philadelphia: Walters Kluwer/Lippincott, Williams & Wilkins.

Potter, P., and Perry, G. (2011). *Fundamentals of Nursing* (8<sup>th</sup> edition). Mosby, Elsevier.

Smeltzer, S. C., Bare, B. G., Hinkle, J. L. & Cheever, K. H. (2007). *Brunner and Suddarth’s textbook of medical-surgical nursing* (12<sup>th</sup> ed.). Philadelphia: Lippincott, Williams & Wilkins.

Stanhope, M. & Lancaster, J. (2014). *Foundations of nursing in the community* (4<sup>th</sup> ed.). St. Louis: Mosby.

**Recommended Textbook:**

Deglin, J. H. & Vallerand, A. H. (2012). *Davis’s drug guide for nurses* (13<sup>th</sup> ed.). Philadelphia: F. A. Davis.

Newfield, S. A., Hinz, M. D., Scott-Tilley, D., Sridaromont, K. & Marimba, P. (2007). *Cox’s clinical applications of nursing diagnosis: Adult, child, women’s, mental health, gerontic, and home health considerations* (5<sup>th</sup> ed.). Philadelphia: F. A. Davis.

**Journal Articles:**

As listed on Blackboard, these will articles will be posted throughout the course.

**Selected readings as announced on reserve in Reeves Library.**

**Course Requirements:**

1. **Class attendance is an expectation.** Students are expected to be prepared and attend all class meetings. This includes completing assignments prior to attending class. Tardiness is a distraction to the class and will not be tolerated.
2. **If unable to attend a class,** please contact the course faculty via email or phone. Students are responsible for obtaining any notes, handouts, or other class items from classmates. See Attendance Policy in Nursing Student Handbook.
3. Plagiarism is the intentional use of another’s words or ideas as your own. This can range from using another individual’s direct words or changing the words slightly (paraphrasing) without the appropriate citation to purchasing a paper from the Internet or a professional writing service. Refer to the Moravian College Academic Honesty Policy in the Student Handbook. APA format is required for all written assignments.
4. Students who wish to request accommodations in this class for a disability should contact Ms. Elaine Mara, Assistant Director of Academic & Disability Support, located on the first floor of Monocacy Hall (extension 1401). Accommodations cannot be provided until authorization is received from the Academic & Disability Support office.
5. Methods of Evaluations

**Methods of Evaluation:\*\***

1. Theoretical Examinations (4 exams 11 %, Final exam (cumulative) 20%)	64 %
2. Class participation/clicker questions	5 %
3. Quizzes/ Learning Activities/Kaplan focused assessments	5 %
4. Prep U	5 %
5. Clinical reflective journal *	4%
6. Synthesis paper	10%
7. Article Review and outline (5%) and peer review of paper (2%)	7%

8. Clinical Performance Evaluation\* Satisfactory/Unsatisfactory

6. **Lateness:** No points will be given to those students who arrive to class late and miss their i-clicker questions. Being on time is an expectation for this class.
7. **Assignments** are expected on or before their due date. **Five points** per day will be deducted from grade if assignments are handed in late.
8. There will be **5 exams** during the semester. During testing situations all students will be required to turn their phones to off, hats are to be removed and all personal belongings will be placed either on the sides or in the front of the classroom **NO EXCEPTIONS.**
9. Use of your **cell phone** and/or **texting** will not be tolerated during class or clinical time. If you need to text or phone someone during class please do so outside of the learning or clinical environment. In case of emergency please speak with your professor or clinical instructor to make arrangements to keep your phone on vibrate. You may be asked to leave the classroom or clinical area if you are caught texting during class time or in the clinical area. This is unprofessional on the clinical unit, a distraction to your fellow classmates, and just plain rude to the instructor or presenters.
10. **Kaplan policy** The nursing department has incorporated a comprehensive assessment and review program into the curriculum in order to systematically strengthen the knowledge base of nursing students which may result in a more competent, successful practitioner. This program consists of a variety of review materials, online practice assessments as well as proctored assessments. All of these materials are designed to promote learning throughout the course of study. Use of this material as a study guide is an expectation and will promote deeper learning.
11. **Nursing Departments Attendance policy for classroom and clinical attendance: Attendance Policy**
  1. Classroom attendance is necessary to promote the learning of the theoretical component of the curriculum and to enrich and expand the application of the clinical learning process. Students are expected to attend all classroom activities. An instructor may lower a student's grade because of a class absence. **Classroom participation in this course is not determined solely on being in attendance in the class. Points will be earned by answering in class questions correctly as determined by previously assigned readings and any assignments assigned by the instructor during the course of this class.** If absences occur, it is the student's responsibility to make up whatever work has been missed, in class quizzes and questions and previously assigned work are not able to be made up. Permission to make up assignments, quizzes, and periodic tests may be granted at the discretion of the instructor. Authorization to make up a final examination is given only by the Office of Academic Affairs.
  2. Participation in class means more than showing up and sitting in class. Participation indicates that you have prepared at least minimally for the events of the days class. One of your responsibilities with the i-clicker is to bring it to class with you. If you are not in

class, do not have your i-clickers with you, or you do not yet arrive to class when the i-clicker questions are presented you will not earn any points. Keep in mind that I do not give points or grades; the grades that you see are the grades that you have earned. (Professor Keeler's policy)

3. Clinical attendance is mandatory for the student to consistently demonstrate the ability to meet course objectives. It is the student's responsibility to notify the appropriate person(s) as identified by course faculty in the event that he/she is unable to attend clinical experiences. Such notification is to occur up to two hours prior to the scheduled clinical experience. If a student is absent from class/clinical activity due to illness, a health care provider's statement verifying the illness and certifying that the student is able to resume class or clinical activity may be required.
4. Future course instructors and the Chairperson of the Department of Nursing will track all clinical absences in a database for review. Students who request time off from clinical, due to events in which they have no control (death of a family member), will contact the course faculty and the clinical instructor, and the determination for clinical makeup will be decided. Students who arrive to clinical practice late or leave early may be required to make up those cumulative minutes at the end of the semester on a clinical makeup day. It is up to the discretion of the course faculty to require clinical makeup for students who routinely leave clinical early due to co-curricular activities. For student involved in co-curricular activities such as sports or music, etc., schedules must be submitted to clinical faculty at the beginning of the semester so that clinical experiences can be appropriately determined.
5. Students will be required to makeup clinical absences. The designated clinical makeup day will be scheduled on the Saturday before the last week of clinical practice. It is mandatory that students requiring clinical makeup attend that makeup day. Students will be charged **\$250.00 per day** of clinical make-up to reimburse the department for clinical supervision and administrative fees. All clinical requirements, including make-up, must be completed by the end of the final examination period for that semester. Any associated fees must be paid in full by the end of the final examination period for that semester. Students are exempt from clinical make-up if they are attending a faculty-approved conference (i.e.-NSNA or SNAP convention). In the event that a student receives an excused absence for a required educational trip and later in the semester incurs more clinical absences, the student may be in a position to consider withdrawal from the course, if the clinical experiences absences are too numerous to be made up within the available faculty contract time.
6. In the event of a protracted illness requiring multiple missed clinical days, the student, course instructor(s), and Chairperson will meet to discuss alternatives and develop an individual
7. The designated clinical makeup day is April 26, 2014. It is mandatory that students requiring makeup attend this day. As this is a very hectic time of year please plan your schedules accordingly if you need to make up a clinical day. Students will be charged

\$250.00 per day of clinical make-up to reimburse the department for clinical supervision and administrative fees.

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12. **Rounding** – Final grades **will not** be rounded. The grade that you have earned throughout the semester will stand as your final grade.

### **Grading Policy:**

Assignments are expected on or before their due date both for class and clinical.

The grading scale is as follows:

A =	93-100
A- =	90-92.99
B+ =	87-89.99
B =	83-86.99
B- =	80-82.99
C+ =	77-79.99
C =	73-76.99
C- =	70-72.99
D+ =	67-69.99
D =	63-66.99
D- =	60-62.99
F =	59.99 and below

Please review the progression requirements for the nursing program in the student handbook. Failure to **earn** a *Satisfactory* clinical evaluation will result in a grade of F in the course.

**It is within the instructor's purview to apply qualitative judgment in determining the grades for an assignment or for the course final grade. The syllabus is subject to change at the discretion of the instructor.**

### **NURS 339: Topical Outline:**

- I. Chronic Illness and Disability
  - A. Definition
  - B. Characteristics
  - C. Nursing Implications
  - D. Federal Law
  - E. Access and Barriers to Care
  - F. Home and Community Based Care
  
- II. Nutritional-Metabolic

- A. Renal
    - 1. Chronic Kidney Disease
      - a. Clinical manifestations
      - b. Assessment and Diagnosis
      - c. Management
    - 2. Acute glomerulonephritis
      - a. Clinical manifestations
      - b. Assessment and Diagnosis
      - c. Management
    - 3. Chronic glomerulonephritis
      - a. Clinical Manifestations
      - b. Assessment and Diagnosis
      - c. Management
    - 4. Polycystic Kidney Disease
      - a. Clinical manifestations
      - b. Assessment and Diagnosis
      - c. Management
    - 5. Pyelonephritis
      - a. Clinical manifestations
      - b. Assessment and Diagnosis
      - c. Management
  - B. Process Recordings – to be done with patient during dialysis experience
- III. Rehabilitation
- A. Americans with Disability Act
  - B. Rehab team
  - C. Functional Assessment
- IV. Role Relationship
- A. Chronic Rehabilitation
    - 1. Post-burn
      - a. Wound healing
      - b. Management
    - 2. Disabilities
      - a. abnormal wound healing
      - b. rehabilitation phase
      - c. home care
    - 3. Cancer Rehab
    - 4. Pulmonary/Cardiac rehabilitation
    - 5. Care associated with:
      - a. Amputations: living with prosthetics
        - 1. rehabilitation
      - b. Wounds: Vac wounding

1. Classes of wounds
2. Categories of dressings
3. Management

V. Activity-Exercise Pattern

A. Immune/Inflammatory Responses

1. Review of immune function
  - a. Brief overview
  - b. Assessments
  
2. Rheumatoid Arthritis
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management
3. Lupus
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management
4. Scleroderma
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management
5. Gout
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management
6. Fibromyalgia
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management
7. Chronic Regional Pain Syndrome aka Reflex Systemic Dystrophy Syndrome
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management
8. Sjorgen's
  - a. Clinical Manifestations
  - b. Assessment and Diagnosis
  - c. Management

VI. Activity-Exercise Pattern

A. Neurological Syndromes

1. Multiple Sclerosis
  - a. Clinical manifestations
  - b. Assessment and Diagnosis
  - c. Management
  
2. Myasthenia Gravis
  - a. Clinical manifestations
  - b. Assessment and Diagnosis
  - c. Management



- d. Crisis
- 3. Gullain-Barre Syndrome
  - a. Clinical manifestations
  - b. Assessment and Diagnosis
  - c. Management
- 4. Cranial Nerve Disorders
  - a. Trigeminal neuralgia (Tic Douloureux)
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
  - b. Bell's Palsy
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
- 5. Disorders
  - a. Stages and etiology
  - b. Nursing management
  - c. Epilepsy
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
  - d. Headache
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
- 6. Neurological Diagnostic testing
  - a. EMG
  - b. EEG
  - c. Lumbar Puncture
- 7. Degenerative Neurologic Disorders
  - a. Parkinson's Disease
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
  - b. Huntington disease
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
    - 4. Genetic Testing
  - c. Amyotrophic Lateral Sclerosis
    - 1. Clinical manifestations
    - 2. Assessment and Diagnosis
    - 3. Management
    - 4.

VII. Sexuality/Reproductive  
 A. Male

1. Prostatitis
2. Epididymitis
3. Orchitis
- B. Female Reproductive Disorders
  1. Pelvic Inflammatory Disease
  2. Pelvic organ prolapse
    - a. Cystocele/rectocele
    - b. Uterine Prolapse
  3. Benign disorders
    - a. Vulva
    - b. Ovaries
    - c. Uterus
    - d. Chronic pelvic pain
- C. Benign diseases of the breast
  1. Nipples
  2. Breast

#### VIII. Nutrition-Metabolic/Coping Stress

- A. Hepatic/Pancreatic
  1. Alcoholism – acute and chronic
    - a. Management of Delirium Tremors
    - b. Cirrhosis
      - i. esophageal varices
      - ii. paracentesis
  2. Hepatitis
  3. Fatty Liver
  4. Pancreatitis
    - a. Acute pancreatitis
    - b. Chronic Pancreatitis
    - c. Pancreatic Abscess
  5. Pancreatic Cancer

#### IX. Health Perception/Health Management

- A. Gerontology
  - a. Psychosocial aspects of aging
  - b. Cognitive Aspects of aging
  - c. Pharmacologic aspects of aging
  - d. Geriatric Syndromes
  - e. Legal and ethical issues
- B. Geriatric Health Problems
  - a. Delirium and Dementia
  - b. Alzheimer's Dementia/Disease
  - c. Alzheimer's Disease
    1. Clinical manifestations
    2. Assessment and Diagnosis
    3. Management

#### X. Nutrition-Metabolic/Coping Stress

- A. Hematologic Problems
  1. Anemia

- a. brief review of pathology
  - b. assessment and diagnostic testing
2. Hypoproliferative
- a. Iron deficiency anemia
    - 1. Assessment and Diagnostic Findings
    - 2. Clinical Manifestations
    - 3. Management
  - b. Vitamin B<sub>12</sub> deficiency (megaloblastic)
    - 1. Assessment and Diagnostic Findings
    - 2. Clinical Manifestations
    - 3. Management
  - c. Folate deficiency (megaloblastic)
    - 1. Assessment and Diagnostic Findings
    - 2. Clinical Manifestations
    - 3. Management
  - d. Decreased erythropoietin production
    - 1. Assessment and Diagnostic Findings
    - 2. Clinical Manifestations
    - 3. Management
3. Bleeding
- 1. Assessment and Diagnostic Findings
  - 2. Clinical Manifestations
  - 3. Management
4. Hemolytic
- a. Altered erythropoiesis
    - 1. Sickle cell anemia
      - i. Assessment and Diagnostic Findings
      - ii. Clinical Manifestations
      - iii. Management
    - 2. Thalassemia
      - i. Assessment and Diagnostic Findings
      - ii. Clinical Manifestations
      - iii. Management
    - 3. Other hemoglobinopathies
      - i. Assessment and Diagnostic Findings
      - ii. Clinical Manifestations
      - iii. Management
5. Hypersplenism
- 1. Assessment and Diagnostic Findings
  - 2. Clinical Manifestations
  - 3. Management
6. Drug induced anemia
- 1. Assessment and Diagnostic Findings

2. Clinical Manifestations
  3. Management
7. Autoimmune anemia
  1. Assessment and Diagnostic Findings
  2. Clinical Manifestations
  3. Management
8. Leukemia
  - a. AML, CML
    1. Assessment and Diagnostic Findings
    2. Clinical Manifestations
    3. Management
  - b. ALL, AML
    1. Assessment and Diagnostic Findings
    2. Clinical Manifestations
    3. Management
9. Lymphoma
  - a. Hodgkin's
    1. Assessment and Diagnostic Findings
    2. Clinical Manifestations
    3. Management
  - b. Non-Hodgkin's
    1. Assessment and Diagnostic Findings
    2. Clinical Manifestations
    3. Management
10. Multiple Myeloma
  1. Assessment and Diagnostic Findings
  2. Clinical Manifestations
  3. Management

Please note while the instructor will try to hold to the flow of the course outline, it may change over the course of the semester. Students will receive notification of syllabus changes in class or through electronic communication.