`

VOCATIONAL NURSING

**VNSG 1304, VNSG 1400,**

**VNSG 1402 and VNSG 1461**

**1st Semester SYLLABUS**

**AND**

**CLINICAL PACKET**

**HEALTH SCIENCES DIVISION**

**TEXARKANA COLLEGE**

**TEXARKANA, TEXAS**

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TC does not discriminate on the basis of race, color, national origin, sex, disability,

or age in its programs or activities. The following person has been designated to

handle inquiries regarding the nondiscrimination policies:

Human Resources Director, 2500 N. Robison Rd., Texarkana, TX, 75599

(903) 823-3017 human.resources@texarkanacollege.edu

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**TC VOCATIONAL NURSING** **PROGRAM LEARNING OUTCOMES**

Learning outcomes are based on the *Differentiated Essential Competencies* set forth by the Texas Board of Nursing for graduates of vocational nursing education programs.

Upon completion of the program, the graduate can:

1. Utilize the nursing process to assist with identifying the patient’s physical and mental health status, their needs, and the preferences of culturally, ethnically and socially diverse patients and their families based on interpretation of health-related data. (DECs I, II)

2. Observe, report, and document pertinent nursing information including alterations in patient responses to therapeutic interventions. (DECs I, II, III, IV)

3. Safely perform nursing interventions according to the vocational nurse level of practice. (DECs II, III)

4. Implement teaching plans that are based upon accepted scientific principles in order to give direct care with skill and safety. (DEC II)

5. Provide compassionate care which maintains comfort and dignity. (DECs II, III)

6. Assign nursing care to others for whom the nurse is responsible based upon an analysis of patient and unit needs, continuing to supervise this assignment through its completion.

7. Utilize self-assessment and reflective practices to identify strengths and areas for growth to enhance professional nursing competency. (DEC I)

8. Coordinate, collaborate and communicate with the interdisciplinary health care team to plan, deliver and evaluate care for diverse patients, families, and community populations. (DECs I, II, III, IV)

9. Practice within legal and ethical nursing standards. (DECs I, II)

10. Acknowledge the value of continuing education and participating in lifelong learning. (DECs I, III)

⁎⁎⁎<https://www.bon.texas.gov/pdfs/publication_pdfs/Differentiated%20Essential%20Competencies%202021.pdf>

**TEXARKANA COLLEGE**

**VOCATIONAL NURSING AWARDS**

The faculty of the Vocational Nursing Program present 3 awards at Candle lighting:

1. **ACADEMIC EXCELLENCE AWARD** - This award is presented to the student who has achieved a GPA of 3.5 or higher in all vocational nursing courses. It does not include any other courses.

 2. **ATTENDANCE AWARD** - presented to the student(s) who have

 perfect attendance in the classroom and clinical settings. The

 students who receive this award have no absences recorded during

 the entire enrollment in the Vocational Nursing Program.

 3. **SPIRIT OF VOCATIONAL NURSING AWARD** - presented to

 the student who has been and will be a positive role model for the

 vocational nursing profession. The selection of this student is

 based upon faculty nominations and then voted on by faculty.

**Student Resources**

**Basic Needs Security Statement**

Any student who has difficulty affording groceries or accessing enough food to eat every day, or who lacks a safe and stable place to live and believes this may affect their performance in this course or ability to remain in school, is urged to contact Tonja Blase, Director of Student Retention, at 903.823.3349 for support.

At Texarkana College we support and provide campus resources to create access for you to maintain your safety, health, and well-being. We understand that as a student you may experience a range of issues that can cause barriers to learning, such as strained relationships, increased anxiety, alcohol/drug concerns, depression, difficulty concentrating and/or lack of motivation. These stressful moments can impact academic performance or reduce your ability to engage. The college offers services to assist you with addressing these or ANY other concerns you may be experiencing. Students can seek confidential mental health services from the resources listed below:

**On Campus Counselor**

Luretha Loudermill -903-823-3143

tc.counselor@texarkanacollege.edu

**Suicide Hotline Number**

*1-800-273-8255 (TALK)*

**Suicide and Crisis Lifeline-**

*Call or text 988*

The 988 Suicide and Crisis Lifeline – previously known as the National Suicide Prevention
Lifeline – is a national network of more than 200 crisis centers that helps thousands of people
overcome crisis situations every day. These centers are supported by local and state sources as well as the Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration (SAMHSA). As of July 16, 2022, all calls and text messages to “988” route to a 988 Suicide and Crisis Lifeline call center.
The 988 Suicide and Crisis Lifeline provides 24/7, confidential support to people
in suicidal crisis or mental health-related distress (https://www.fcc.gov/sites/default/files/988-fact-sheet.pdf).

**REQUIRED RESOURCES**

1. Ladwig, et al, (2022), *Mosby’s Guide to Nursing Diagnosis*, 7th Edition, Elsevier, St. Louis, Missouri. (ISBN 9780323812719)

2. Cooper, K. & Gosnell, K., (2022), *Foundations and Adult Health Nursing*, 9th Edition,

 Elsevier, St. Louis, Missouri. (ISBN 9780323812054)

3. \* Cooper, K. & Gosnell, K., (2022), *Study Guide for Foundations and Adult Health*

 *Nursing,* 9th Edition, Elsevier, St. Louis, Missouri. (ISBN 9780323812061)

5. \* Morris, Deborah (2022), *Calculate with Confidence*, 8th Edition, Elsevier, St. Louis,

 Missouri. (ISBN 9780323696951)

6. Skidmore-Roth, Linda (2024), *Mosby’s Drug Guide for Nursing Students*, 15th Edition, Elsevier, St. Louis, Missouri. (ISBN 9780443123887)

7. Texarkana College, 2024-2025 Health Science Division Student Handbook,

Texarkana College, Texarkana, Texas, Online.

8. Texarkana College Vocational Nursing Syllabi, Online.

9. \*\* Vocational Nursing Skills Kit.

**OPTIONAL TEXTBOOKS**

1. Venes, D. (Ed.) (2021). Taber’s Cyclopedic Medical Dictionary, 24th Edition, F.A.

 Davis, Philadelphia, PA.

\* **These books must be purchased. It cannot be rented or in used condition. Students will be required to write in this book and turn in pages to instructor.**

\*\* **VN Skills Kit can only be purchased through the Texarkana College bookstore. No other kits are accepted.**

**Computer Requirement Policy:**

Students are required to have a computer with Internet access for classes. The computer must be an actual computer – smart phones, iPads, Androids, Chromebooks, etc., are not acceptable substitutes because they lack software compatibility necessary to complete all assignments and tests. Financial costs for the necessary equipment and internet access are the responsibility of the student.

Students needing to purchase a computer may do so through the Texarkana College Bookstore. Systems purchased through the bookstore meet or exceed all requirements, are competitively priced, and may be purchased using financial aid funds. If the system is purchased through another source, it is the student’s responsibility to ensure the system meets all requirements.

Computer systems requirements:

* Webcam, microphone, and speakers or headphones
* Windows 10 or a recent version of Mac OS (minimum Sierra). Windows 10 S mode is not supported
* Hardware capable of running Microsoft Teams (free download) and supports multi-media playback
* Support for Chrome or Microsoft Edge – Note: Firefox, Safari, or other browsers will not work
* Able to run Microsoft Office which will be provided free to TC students
* Adobe Reader or another PDF viewer
* Antivirus software such as Windows Defender or another 3rd party anti-virus solution
* The Respondus Lockdown browser may be used for taking tests; therefore, the system must be capable of running this software. Most newer systems that meet other specifications should work.

Students should regularly backup content to prevent loss of coursework due to hardware failure. Backup copies of documents and other coursework may be placed on OneDrive cloud storage. OneDrive is included free of charge for all TC students.

A list of Internet service providers can be found on the TC website at: <https://www.texarkanacollege.edu/coronavirus/>.

 **TEXARKANA COLLEGE**

**VOCATIONAL NURSING PROGRAM**

**ATTENDANCE POLICY**

**THEORY/ON-CAMPUS LAB ATTENDANCE POLICY:**

Class and on-campus lab attendance is essential. Attendance is based on the policies stated in the Texarkana College Student Handbook (Absentee Policy). Refer to the individual course syllabi for the course attendance requirements. Students are expected to regularly attend all classes for which they are registered. Responsibility for work missed because of illness, school business, or other circumstances is placed on the student. The student is responsible for contacting the instructor to make arrangements for missed work. Poor class attendance may result in a student being dropped from a course by an instructor with a grade of an “F.”

*DROPPING CLASSES MAY AFFECT YOUR FUNDING IN A NEGATIVE WAY. YOU COULD OWE MONEY TO THE COLLEGE AND/OR THE FEDERAL GOVERNMENT. PLEASE CHECK WITH THE FINANCIAL AID OFFICE.*

Prior to the last day to drop, if a student exceeds absences in any VNSG course, the student will be withdrawn from all other VNSG courses, and a W will be recorded on the transcript for all VNSG courses.

After the last day to drop, if a student exceeds absences in any theory course, a failing grade will be recorded in each course (D if the current grade is D or higher and F if the current grade is below 65). Exceeding absences in a clinical course after the last day to drop will result in the student receiving a failing grade in each VNSG course (D if the current grade is D or higher and F if the current grade is below 65).

**TARDY POLICY FOR CLASS AND CLINICAL:**

Three (3) tardies will equal one (1) absence. Tardy is defined as being up to 15 minutes late or leaving up to 15 minutes early. Being more than 15 minutes late or leaving more than 15 minutes early will constitute an absence.

**Clinical Absence Procedure:** The student must notify the assigned unit at least one hour before the assigned time of duty. The student should secure the name of the person to whom the report is given. Students may also inform their clinical instructor prior to the clinical absence. Failure to adhere to this policy will result in deduction of points for Interpersonal Relations and/or Professional Behaviors on the next graded clinical day.

**CLASSROOM/CLINICAL ABSENCES:** The number of absences allowed per course is:

**VNSG 1304 - 4**

**VNSG 1400 - 4**

**VNSG 1402 - 4**

**VNSG 1461 – 3**

 **TEXARKANA COLLEGE**

**VOCATIONAL NURSING PROGRAM**

**ON CAMPUS LABS**

**OBJECTIVES OF ON CAMPUS LABS:**

1. To provide varied learning activities through the use of media, special equipment and

 clinical simulations.

2. To allow for self-paced learning.

3. To provide demonstration of skills and supervised practice of those skills.

4. To provide a setting for interaction with peers and faculty.

5. To provide a one-to-one faculty evaluation of a student’s performance of specific skills

 prior to caring for patients in the clinical setting.

The Vocational Nursing Faculty believes that the acquisition of nursing skills is a shared responsibility in learning between the educator(s) and the learner(s). The learner’s active participation is the nucleus of all on campus clinical labs. Situations are created that enable the student to apply theory, to problem-solve, and to develop dexterity of psychomotor skills which strengthen actual performance in the clinical setting.

It is the student’s responsibility to devote the necessary time and commitment to ensure success with each skill. While practice time does vary, it must be emphasized that no student should present himself/herself for skill evaluation unless he/she has practiced at least once. If practice time is used, every student should be able to master every skill in the course. The students SHOULD NOT present themselves for evaluation until they know they can perform the skill according to the skill evaluation tool.

At no time will one student be allowed to observe the skills evaluation of another student except where two students or a group of students are involved in joint evaluations (Ex.: personal care, administration of medications).

Faculty will demonstrate a given skill during classroom or on campus clinical time. Students may arrange additional assistance by making an appointment with a faculty member. After practice, students will return the demonstration at scheduled times for evaluation by faculty. Students are expected to report at the scheduled time. The classroom or clinical attendance policy applies.

**On Campus Lab Evaluation**

Students will have three opportunities for successful completion of a required skill.  If the first demonstration is not satisfactory, the student will be given appropriate feedback to correct the problem area(s). The student will then have a second attempt. If they are once again unsuccessful, a written counseling form will be reviewed with the student. This form will describe the faculty recommendations for remediation.  The third demonstration will be observed by an alternate clinical instructor.  The ability to successfully perform skills is necessary for safe, competent patient care.  If the third demonstration is not satisfactory, the student will not be allowed to continue in the program. The student will receive an “F” for the theory course associated with the skill and a withdrawal in the clinical course. The student will also receive a withdrawal for any other vocational nursing courses in which they are currently enrolled.

**TEXARKANA COLLEGE**

**VOCATIONAL NURSING**

**CLINICAL EVALUATION**

Clinical evaluation in the Vocational Nursing Program at Texarkana College reflects the

program philosophy. Learning is:

 1. Comprised of cognitive, affective, and psychomotor components

 2. A continuous process

 3. Demonstrated by a change in behavior

 4. Enhanced by a multisensory approach

 5. Individualistic

While the faculty is accountable for curricular planning and the creation of a learning environment, learning is ultimately the responsibility of the student.

The clinical evaluation process is based upon the program philosophy, the Code of Ethics, and standards of nursing practice. Evaluation of student learning is the responsibility of the faculty. Not all student behaviors and faculty decisions about such behaviors are predictable or quantifiable; therefore, the clinical evaluation tool (CEB) is a reference tool only and not an exhaustive contract. Students should be aware that they are in a vocational nursing program and the faculty has the responsibility to use their collective professional judgment to determine when the student’s clinical, academic, or personal performance and professional accountability are inconsistent with the responsibility for guarding patient safety, and also determine if the student is to be given re-learning opportunity, asked to withdraw from the program, or subject to disciplinary action (Texarkana College Student Handbook).

CLINICAL EVALUATION PROCESS

This time of learning, beginning when the clinical portion of the nursing course starts, provides opportunity for the student to learn and practice cognitive, affective, and psychomotor skills needed for the implementation of safe nursing care. Clinical evaluation is based upon seven categories identified in the Clinical Evaluation Booklet (CEB):

 1. Assessment

 2. Planning

 3. Implementation

 4. Interpersonal relations

 5. Evaluation

 6. Professional behavior and ethics

 7. Safety

The Clinical Evaluation Booklet (CEB) identifies the specific clinical objectives in each of the seven categories. Students are graded on each clinical day according to these objectives. Failure to attain at least 75% will result in an unsatisfactory day.

The student is expected to learn from any errors in judgment or practice and to continuously improve clinical abilities. The student is expected to perform clinical skills based on content from previous courses in the curriculum and from the current nursing course.

The clinical instructor will give verbal feedback to the student regarding satisfactory and unsatisfactory performance. Written feedback is documented in the Clinical Evaluation Booklet (CEB) for each clinical day. While the student has access to the evaluation information for each clinical day, a conference may be initiated by the student or instructor if clarification is necessary.

In the interest of patient safety, all written clinical assignments are to be turned in as requested

by clinical instructors. Any assignment that is not submitted on time or is submitted incomplete

will result in a deduction of clinical points in the following applicable categories: Assessment,

Planning, Implementation, Interpersonal Relations, Evaluation, Professional Behavior, and/or

Safety. A pattern of incomplete or late assignments will result in the student being counseled

as outlined in the Clinical Evaluation Process.

**LEVELS OF EVALUATION AND PROGRESSION**

**Level I**

Student errors in judgment, issues during practice in the clinical setting, or failure to meet clinical objectives will be addressed by the instructor. If, in the professional judgment of the clinical instructor, these errors do not significantly compromise patient safety, jeopardize clinical environment relationships, or deviate from scope of vocational nursing practice, the student will be placed on a Level I Warning. This level is to make the student aware of issues that are of concern to the instructor and that corrective action is needed to be successful in the program. This level can be in the form of:

1. Documentation in the clinical evaluation booklet

2. A formal Level I written report

3. Or it may be both actions

**Level II**

When, in the professional judgment of the clinical instructor, the student’s clinical performance does not improve or it compromises patient safety, jeopardizes clinical environment relationships, or deviates from scope of vocational nursing practice, a Level II Learning Contract is indicated. If the student demonstrates that correction of the issues has occurred, the student will be allowed to continue in the nursing course without further counseling. If the student continues to fail to meet objectives or issues of concern continue to arise, a Level III One-on-One contract will be initiated.

**Level III**

When, in the professional judgment of the clinical instructor, the student continues to be unable to meet clinical objectives, or issues continue to arise that compromise patient safety, jeopardize clinical environment relationships, or deviate from scope of vocational nursing practice, the student is placed on a Level III One-on-One contract.

The VN faculty will implement a direct, one-on-one observation of the student’s clinical performance by a chosen faculty member. This faculty member will observe the student throughout the day. If, at any time throughout the observation, actions by the student are deemed to be unsafe or do not meet the requirements of the VN program, the faculty member can dismiss the student and end the observation at that time. The student’s performance will be evaluated by the observing faculty member, other faculty members, and/or the dean of the Health Sciences department for a professional consensus.

If the consensus of the evaluators is that the student’s performance is “Satisfactory”, the student will be allowed to continue in all nursing courses.

If the student’s performance is determined to be “Unsatisfactory”, the student:

1. Will not be allowed to continue in their nursing courses.

            2.    Will not be allowed to progress to the next semester or program completion.

Having earned a clinical failure, an “F” will be recorded as the grade for the clinical course. The student will be withdrawn from all other vocational nursing courses.

**PROFESSIONAL CONDUCT**

Any student who is dismissed from the Vocational Nursing (VN) program due to Professional and/or Ethical violations is not eligible for re-entry. In addition, any student who has clinical failure is not eligible for re-entry into the VN program.

Unprofessionalism, any compromised patient care, or any issue/behavior that is severe in nature can result in referral to the T. C. Professional Conduct committee.

**ACADEMIC DISHONESTY STATEMENT**

Scholastic dishonesty, involving but not limited to cheating on a test, plagiarism, collusion, or falsification of records will make the student liable for disciplinary action after being investigated by the Dean of Students. Proven violations of this nature may result in the student being dropped from the class with an “F.” This policy applies campus wide, including the TC Testing Center, as well as off-campus classroom or lab

NOTE: 1. Actions on campus or in the clinical lab that violate the standards of

 student conduct or constitutes physical, emotional, or sexual harassment

 or disruptive classroom behaviors as described in the TEXARKANA COLLEGE STUDENT HANDBOOK will result in a report to the

 Dean of Students for his disciplinary action.

 2. All records of progressive learning behaviors are the property of the

 Health Sciences Division and will be kept in the student’s file.

 *In effect: 8/98*

 *Change: 6/98 Change: 6/10*

 **ATI Resources for Student Success**

Throughout the course the student will be responsible for completing ATI assessments and modules as assigned by the instructors.

**What is ATI?**

* Assessment Technologies Institute® (ATI) offers an assessment driven review program designed to enhance student NCLEX-RN success.
* The comprehensive program offers multiple assessment and remediation activities. These include assessment indicator for academic success, critical thinking, and learning styles, online tutorials, online practice testing, and proctored testing over the major content areas in nursing. These ATI tools, in combination with the nursing program content, assist students to prepare more efficiently, as well as increase confidence and familiarity with nursing content.
* Data from student testing and remediation can be used for program’s quality improvement and outcome evaluation.
* ATI information and orientation resources can be accessed from your student home page. **It is highly recommended that you spend time navigating through these orientation materials.**

**Some of the assessment and remediation tools used in ATI are:**

* **Modular Study:** ATI provides online review modules that include written and video materials in all content areas. Students are encouraged to use these modules to supplement course work and instructors may assign these during the course and/or as part of active learning/remediation following assessments.
* **Tutorials:** ATI offers unique Tutorials that teach nursing students how to think like a nurse; how to take a nursing assessment and how to make sound clinical decisions. **Nurse Logic** is an excellent way to learn the basics of how nurses think and make decisions. **Learning System** offers practice tests in specific nursing content areas that allow students to apply the valuable learning tools from Nurse Logic. Features are embedded in the Tutorials that help students gain an understanding of the content, such as a Hint Button, a Talking Glossary, and a Critical Thinking Guide.
* **Assessments:** Standardized Assessments will help the student to identify what they know as well as areas requiring active learning/remediation. There are practice assessments available to the students and standardized proctored assessments that may be scheduled during courses.
* **Active Learning/Remediation:** Active Learning/Remediation is a process of reviewing content in an area that was not learned or not fully understood as demonstrated on an assessment. It is intended to help the students review important information to be successful in courses and on the NCLEX. The student’s individual performance profile will contain a list of topics to review. The student can remediate, using the Focused Review which contains links to ATI books, media clips and active learning templates.

The instructor has online access to detailed information about the timing and duration of time spent in the assessment, focused reviews, and tutorials. Students can provide documentation that required ATI work was completed using the “My Transcript” feature under “My Results” of the ATI Student Home Page or by submitting written Remediation Templates as required.

**Traditional/Hybrid Classroom Etiquette and Testing Guidelines**

**Theory and Clinical Class Meetings:**

Both theory and clinical classes may meet on campus, at other facilities, or virtually through Microsoft Teams or Zoom. Students must be present for the entire length of the class time to meet attendance requirements. Attendance guidelines are listed below.

It is the responsibility of the student to make necessary arrangements for childcare, transportation, etc. to meet attendance requirements.

All students must have a computer with a camera, audio capabilities, and reliable internet.

 **The following guidelines will be enforced:**

1. For virtual classes or meetings, students must be logged into the Teams or Zoom classroom 5 minutes before the scheduled time. The attendance policy will be followed. Attendance will be taken at the beginning of class and may be taken anytime during assigned class time. Any student who does not respond to the instructor will be considered absent. Students should be available to answer questions throughout the class time. If you do not respond to your instructor during class, you could receive an absence.
2. You must log into the class using a webcam to be considered ‘present’. Students should mute their audio upon entrance into the class. If you must leave the classroom early, you need to notify your instructor via chat.  Please do not ‘leave the class’ before the class is over.
3. If you are not going to be in class, please notify your instructor before class begins.
4. Driving while in virtual class is not appropriate or safe. If you cannot be actively engaged in class because of other responsibilities or appointments, you will need to take an absence or tardy, whichever is appropriate for your situation.

5. You are responsible for accessing and reviewing resources (recorded Power Point lectures, handouts, or video resources when made available). Virtual and/or traditional class times will be utilized to review content, discuss, and elaborate on content and answer any questions. Please review recorded Power Points or lectures prior to class if they are present.

**General Guidelines:**

1. Be mindful that when using webcams for virtual class meetings, everyone can see all participants. Proper attire is expected. You should get up in the mornings and dress and groom as if going to class. Pajamas are not appropriate dress for an academic, professional environment and you should not be lying in bed or reclining on the sofa during class or tests. Please remove any caps, bonnets, blankets or coverings from your head and face prior to joining class and during testing.
2. Cell phones should be on silent and no texting or web surfing during class.
3. If you have connection problems, please reach out to your instructor.
4. Please secure childcare during class meetings and testing.
5. Please do not leave the classroom in the middle of a class meeting – you will be provided with regular breaks. Contact your instructor for emergencies.

**Testing Guidelines:**

1. Exams may be administered in classrooms on campus, online using Zoom or Teams and ATI, or in the computer labs on campus. For online testing, you will need either a laptop with a camera, a webcam, or an iPad.
2. For traditional on-campus testing, please report to your assigned testing room/lab 5 minutes prior to the test time. You should not bring anything into the building with you except a pen, pencil, a highlighter, and your keys. Scratch paper and calculators will be provided when needed. When you complete the exam, leave the building, and wait in your car until the time to report to class or assigned labs. There is to be no discussion of the test and students should not form groups outside the testing area to socialize.
3. For computer testing via Zoom or Teams/ATI or on-campus computer labs, please report to your assigned testing room at least 15 minutes prior to test time. Before beginning remote exams, students may be asked to do a complete 360-degree environmental scan of the testing area and the desk area around the computer. This must be a slow and complete scan. We will want to see the whole area…walls, floor, desk.
4. During computer exams using Zoom or Teams you will be recorded utilizing both video and audio. Only those with accommodation will be allowed to mute speakers and read the questions out loud. The test proctor(s) will still be able to hear everyone.
5. An exam can be stopped at any time if the instructor needs to chat with a student.
6. Any significant ‘flagging’ will be discussed with the student. Habits and patterns that are flagged include:
7. Taking eyes off the computer screen repeatedly, such as reading the screen then looking to the side or downward.
8. Moving out of the camera view.
9. Having more than one person in the room.
10. Frequent “clicking out of the browser” logged by ATI.
11. Covering your mouth with hands, clothing or blankets.
12. Cell phones, Smart watches, or other resources such as textbooks or notes may not be used in the testing environment.
13. Students who are unsuccessful on an exam will need to schedule a meeting with their clinical instructor to review the exam. Due to test security, exams and Scantrons will not be returned to protect the integrity of the exam. Instructors may review specific questions and/or concepts with students individually or in a group setting. For test reviews, only car keys may be brought into the review environment. There are to be no technological devices including cell phones and/or Smart watches during test review.
14. Testing protocols and locations may be changed due to mandated restrictions and/or social distancing.

   *Effective* *8/21*

**TC Vocational Nursing Classroom and Testing Guidelines Acknowledgment**

I understand that as a student enrolled at Texarkana College in the Vocational Nursing program, I am entering a profession with a stated code of ethics.  I recognize that disclosing the contents of this exam to others constitutes a breach of ethics. **I therefore agree NOT to discuss the contents of this exam with anyone other than the faculty.**

For on-campus testing in classrooms or computer labs, I should arrive 5-15 minutes early. I understand that I may not bring anything to the testing environment other than a pencil, pen, highlighter, and my keys - no backpacks, bags, phones, smart watches, etc. I understand no hats or caps may be worn.

For remote computer tests, I understand that proctoring faculty may ask to see and or hear for any sounds in the testing environment. I understand that audio/visual recordings will be done for all computerized exams, and faculty/test proctors must be able to see and hear me for the duration of the test. I understand that I could be asked at any time to pan the testing area and/or desk. There should be no one else in the room with me during the entire time I am taking the exam.

If I am caught using any hardcopy information or electronic devices, including Smart watches, Smart phones, etc. or discussing questions with someone else, I will receive a zero for the test. I also understand that I could be reported to the Professional Conduct Committee for breach of ethics and may be dropped from the program for academic dishonesty.

If I score less than 75% on an exam, I should make an appointment with my clinical instructor for a test review.

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Student Printed Name

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 Student Signature

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Date

**VNSG 1304**

**FOUNDATIONS OF NURSING**

**SYLLABUS**

**VOCATIONAL NURSING**

**TEXARKANACOLLEGE**

**TEXARKANA, TEXAS**

 **CCOURSE NAME: Foundations of Nursing COURSE NUMBER: VNSG 1304 CREDIT HRS. 3 LECTURE: 3 LAB: 0 TOTAL CONTACT HOURS: 48**

**COURSE DESCRIPTION:**

Introduction to the nursing profession including history, standards of practice, legal and ethical issues, and role of the vocational nurse. Topics include mental health, therapeutic communication, cultural and spiritual diversity, nursing process and holistic awareness.

**END-OF-COURSE OUTCOMES:**

Identify roles and legal, ethical, and professional responsibilities of a vocational nurse as a member of the health care team in a variety of health care settings; identify characteristics of a therapeutic nurse/patient relationship; examine positive mental health practices emphasizing cultural and spiritual diversity; relate the history of nursing to the present day; and recognize the components of the nursing process related to primary nursing interventions.

**KEY CONCEPTS AND GENERAL COURSE PLAN:**

This is a foundational course emphasizing the historical aspects of nursing and the legal and ethical responsibilities of the licensed vocational nurse. Content includes roles of the practice nurse, standards of care, holistic healthcare, cost-effectiveness, transcultural nursing and an introduction to the nursing process. The basics of therapeutic communication and the mental health continuum are also included. Students must have concurrent enrollment in VNSG 1400, 1402, and 1461.

**VNSG 1304**

**STUDENT LEARNING OUTCOMES**

Learning outcomes are based on the *Differentiated Essential Competencies* set forth by the Texas Board of Nursing for graduates of vocational nursing education programs.

Upon completion of this course of study, the student will be able to:

 1. Identify pertinent history and trends in nursing practice. (DEC I)

 2. Identify the necessary professional characteristics needed

to become a vocational nurse. (DEC I)

 3. Describe the basic physiological and psychosocial needs of all

 individuals. (DEC II, DEC III)

 4. Apply the steps of the nursing process as related to patient care. (DEC II,

 DEC III)

 5. Use effective verbal and nonverbal communication with patients,

 families and co-workers. (DEC II, DEC IV)

 6. Define mental health and describe the mental health continuum. (DEC II)

 7. Identify legal and ethical issues related to nursing. (DEC I, DEC II, DEC III,

 DEC IV)

 **VNSG 1304 FOUNDATIONS OF NURSING**

I. INTRODUCTION

 The faculty of the Vocational Nursing program in the Health Sciences Division of

 Texarkana College adheres to the belief that the process of learning involves a dual role

 of the nursing educator and the student. The nursing educator will facilitate the learning

 environment. The student WILL assume the responsibility for achieving the learning

 outcomes and is expected to actively contribute in a direct and positive manner to the

 learning experience.

II. COURSE PRE-REQUISITES:

American Heart Association BLS, Computer Course, BIOL 2401, and BIOL 2402

 Concurrent enrollment in VNSG 1400, 1402, and 1461

III. TEACHING METHODS

* Lecture/discussion
* Reading assignments/Independent Study
* Demonstrations/return demonstrations
* Audiovisual and e-Learning resources
* Written assignments
* Group projects/activities

IV. EVALUATION

The Health Sciences Division puts tremendous effort into effectively assessing and measuring student learning outcomes. The following is how final grades are computed for each course taken throughout the program. VNSG 1304 is divided into three units with an exam given at the end of each unit. Several chapters may be included in a unit exam. A comprehensive final exam is given at the conclusion of the course.

If an exam is missed, the student is responsible for contacting the instructor to make up the missed exam the day the student returns to class. All Make-Up Unit Exams will be 25 questions.

Unit exams 70%

Final 20%

Homework, Quizzes, ATI 10%

Grading Scale:

 A = 89.5-100

 B = 80.5-89.49

 C = 74.5-80.49

 D = 64.5-74.49

 F = 64.49 or less

THE STUDENT MUST EARN A PASSING GRADE (75 OR BETTER) IN ORDER TO CONTINUE IN THE VOCATIONAL NURSING PROGRAM.

**Quizzes and Homework**

If a student is absent on the day a quiz is given, there will be no make-up quiz administered, and the student will not receive a grade for the assignment.

Grading will be as follows for each course:

* + No grade will be given for missed quizzes or in-class assignments due to absences.
	+ No late assignments will be accepted.
	+ Homework assignments are due at assigned time/date regardless of student absence (upload or email as instructed).
	+ Lowest grade in Homework/ATI/Quizzes category will be dropped.

*Grades for homework, quizzes, ATI, or any supplemental resources will be posted at the instructor’s discretion. Exam grades will be posted after sufficient time for the faculty to review the exam. Students are allowed one week after grades are posted to challenge their grade. No grade challenges are allowed after that time.*

V. ATTENDANCE

Attendance is essential due to the content presented and the necessity of meeting objectives within a limited time frame. If a lecture is missed, the student is responsible for the material covered. The student is responsible for contacting the instructor the same day the student returns to class or sooner to discuss making up any late work.

Professional development is measured by the student’s attendance throughout the entire

Vocational Nursing program. Late arrivals impact the learning environment for the

instructor and other students. If the student is not present at the scheduled start of class, the student is marked absent. If the student arrives less than 15 minutes late, the student is counted tardy but it is the student’s responsibility to notify the instructor during the first break the time of arrival or the marked absence will stand.

Four absences are allowed in this course.

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| **VNSG 1304****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 1 Evolution, Law, Ethics, and Communication**Upon completion of this unit, the student will be able to:1. Relate institutional philosophy and defined policies and procedures for delivery of nursing care.  2. Identify persons who contributed to the history of nursing. 3. Relate historical knowledge of educational  programs and schools leading to licensure.  4. Discuss factors pertaining to licensure in nursing. 5. Define and differentiate the roles of the practical and registered nurse. 6. Identify the different components of the Health Care Delivery Systems. 7. Relate basic characteristics, trends, and issues of  health care delivery. 8. Relate knowledge of ways to implement cost- effective strategies in the health care delivery  system. 9. Identify at least two standards of practice for LVNs10. Identify important provisions of Nurse Practice  Act and functions of State Board of Nursing. 11. Relate knowledge of legal and ethical issues  related to nursing. 12. Relate knowledge of the Patient’s Bill of Rights.**Therapeutic Communication**13. Define therapeutic communication and discuss the  basic components of therapeutic communication.14. Recognize the differences among passive,  assertive, and aggressive communication techniques.15. Describe and utilize verbal and/or nonverbal  therapeutic communication techniques.16. Identify factors that can affect communication.17. Discuss potential barriers to communication.18. Apply the nursing process to patients with  impaired verbal communication. 19. Apply therapeutic communication techniques to  patients with special communication needs.   | TC Health Sciences Student HandbookReadings:FoundationstextbookChapters 1 and 2Foundations: Chapter 4 | Define and Apply Terms AppropriatelyClass DiscussionsRole PlayYou Tube VideosSmall Group ActivitiesStudy GuideWorksheetsATI Resources | HomeworkQuizzesClass ParticipationUnit Exam |

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| **VNSG 1304****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 2: Cultural and Ethnic Considerations; Mental Health**Upon completion of this unit, the student will be able to:1. Relate knowledge of common health practices and behaviors related to transcultural nursing.

 2. Relate knowledge of the various  cultural responses to alterations in  health status.  3. Identify, discuss, and implement self- care strategies to prevent mental health disturbances.  4. Define mental health and describe the  mental health continuum.  5. Identify and discuss specific behaviors  associated with incivility and workplace violence and how to contribute to the establishment of a safe culture in the healthcare environments.  6. List the defining characteristics and behaviors of persons who are mentally healthy and those who are mentally ill.7. Describe the factors that influence an  individual’s response to change.8. Identify factors that contribute to the  development of emotional problems or  mental illness. 9. Identify barriers to health adaptation,  social determinants of health, and the  role of social justice in healthcare. 10. Identify major components of a nursing assessment that focuses on mental health status. 11. Identify basic nursing interventions for  those experiencing illness.  | Readings: Foundations, Chapters 6 and 34 [Incivility in Healthcare: How We Can Change the Culture (rn.com)](https://www.rn.com/nursing-news/incivility-in-healthcare-how-we-can-change-the-culture/)[incivility-bullying-and-workplace-violence--ana-position-statement.pdf (nursingworld.org)](https://www.nursingworld.org/~49d6e3/globalassets/practiceandpolicy/nursing-excellence/incivility-bullying-and-workplace-violence--ana-position-statement.pdf)CDC: Social Determinants of Health [Social Determinants of Health - Healthy People 2030 | health.gov](https://health.gov/healthypeople/objectives-and-data/social-determinants-health)[Tools for Putting SDOH into Action | Social Determinants of Health | CDC](https://www.cdc.gov/socialdeterminants/tools/index.htm)[CDC Programs Addressing SDOH | Social Determinants of Health | CDC](https://www.cdc.gov/socialdeterminants/cdcprograms/index.htm)[Treating Suicidal Patients during COVID-19 | Suicide Prevention Resource Center (sprc.org)](https://sprc.org/resources-programs/treating-suicidal-patients-during-covid-19)[Psychiatric-Mental Health Nurse Essential Competencies for Assessment and Management of Individuals at Risk for Suicide | APNA](https://www.apna.org/resources/suicide-competencies/) | Active Learning Groups Assigned Digital ResourcesATI ResourcesWeb-based Interactive Case Study (Ryerson)**Speaker: L. Loudermill, TC counselor****CDC Occupational Violence Course:** [Workplace Violence Prevention for Nurses | NIOSH | CDC](https://www.cdc.gov/niosh/topics/violence/training_nurses.html) | Unit ExamQuizzesCertificate of completion: <https://www.cdc.gov/TCEOnline>  Advance organizer (handout/Moodle) |
| **VNSG 1304** **OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 3: Nursing Process**Upon completion of this unit, the student will be able to:1. Define nursing process. 2. Define and relate critical thinking to the nursing process. 3. Relate knowledge of each step in the nursing process.4. Identify actual and potential health care  needs of the patient based on assessment. 5. Relate knowledge for setting priorities in planning and providing care for patients. 6. Identify appropriate goals based on patient  needs.  7. Identify development stages and common  situational variables affecting learning, such as stress, pain, and fear. 8. Identify appropriate nursing interventions to  meet patient’s needs.  9. Identify the relationship and obvious  conflicts between the nursing plan of care,  the therapeutic regimen, and the plans of  other health care professionals. 10. List the steps in evaluating care  | Foundations, Chapter 5Ackley & Ladwig’s Guide to Nursing Diagnosis | Group Care Plan AssignmentWorksheetsCare Plan ScenariosStudy Guide | Group Care PlansQuizzesClass ParticipationUnit Exam |

**VNSG 1400**

**NURSING IN HEALTH AND ILLNESS I**

**SYLLABUS**

**VOCATIONAL NURSING**

**TEXARKANACOLLEGE**

**TEXARKANA, TEXAS**

 **COURSE NAME: Nursing in Health and Illness I**

 **COURSE NUMBER: VNSG 1400**

  **CREDIT HOURS: 4 LECTURE: 3 LAB: 2 TOTAL CONTACT HOURS: \_80**

**COURSE DESCRIPTION:**

Introduction to general principles of growth and development, primary health care needs of the patient across the lifespan, and therapeutic nursing interventions.

**END-OF-COURSE OUTCOMES:**

The student will recognize the uniqueness of the gerontologic patient related to physical, mental, and emotional changes associated with the aging process; describe the psychosocial, growth and development, and physiological needs of patients across the life span; identify common and overt and actual and potential primary health care needs of the patient; identify the basic interventions to support the patient and family during life stages including death and dying; identify pharmacological agents and related nursing interventions; and demonstrate competency in dosage calculations.

**KEY CONCEPTS AND GENERAL COURSE PLAN:**

This course is an introduction to general principles of growth and development and primary health care needs of the adult patient including gerontology. Physical, mental, and emotional aspects of dealing with death and dying are incorporated. Introductions to pharmacology and nutrition are provided. Emergency care of patients and care of patients with AIDS are also provided.

Students must be concurrently enrolled in VNSG 1304, VNSG 1402 and VNSG 1461.

**VNSG 1400**

**STUDENT LEARNING OUTCOMES**

Learning outcomes are based on the *Differentiated Essential Competencies* set forth by the Texas Board of Nursing for graduates of vocational nursing education programs. Upon completion of this course of study, the student will be able to:

1. Differentiate the developmental tasks from early adulthood through older adulthood. (DEC II)

 2. Describe specific nursing measures related to safety, comfort,

 nutrition and sexuality of the elderly. (DECs I, II)

 3. Discuss changing attitudes toward death, living will, DNR, criteria

 for determination of death. (DEC II)

 4. Describe nursing interventions and care of the dying patient (child, adult,

and family). (DECs II, III, IV)

5. Apply concepts related to safe administration of medications. (DEC II)

6. Identify pharmacological agents and related nursing interventions, while demonstrating competency in dosage calculations. (DECs II, III)

7. Identify essential nutrients, functions, sources, and deficiencies while incorporating nutritional needs into the patients’ plans of care. (DECs II, III)

8. Identify the needs of patients with AIDS. (DEC II)

 9. Identify signs and symptoms and appropriate nursing interventions for

various types of emergencies. (DECs II, III, IV)

I. INTRODUCTION

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Texarkana College adheres to the belief that the process of learning involves a dual role

of the nursing educator and the student. The nursing educator will facilitate the learning

environment. The student WILL assume the responsibility for achieving the learning

outcomes and is expected to actively contribute in a direct and positive manner to the

learning experience.

II. COURSE PREREQUISITES:

 American Heart BCLS, Computer Course, BIOL 2401, and BIOL 2402

Concurrent enrollment in VNSG 1304, 1402, and 1461

III. TEACHING METHODS

 \* Lecture/discussion

* Reading assignments
* Independent study
* Demonstrations/return demonstrations
* Audiovisual and e-Learning resources
* Written assignments
* Group projects/activities

IV. EVALUATION

The Health Sciences Division puts tremendous effort into effectively assessing and measuring student learning outcomes. The following is how final grades are computed for each course taken throughout the program. VNSG 1400 is divided into five units with an exam given at the end of each unit. Several chapters may be included in a unit exam. A comprehensive final exam is given at the conclusion of the course.

If an exam is missed, the student is responsible for contacting the instructor to make up the missed exam the day the student returns to class. All Make-Up Unit Exams will be 25 questions.

Unit exams 70%

Final 20%

Homework, Quizzes, ATI 10%

Grading Scale:

 A = 89.5-100

 B = 80.5-89.49

 C = 74.5-80.49

 D = 64.5-74.49

 F = 64.49 or less

THE STUDENT MUST EARN A PASSING GRADE (75 OR BETTER) IN ORDER TO CONTINUE IN THE VOCATIONAL NURSING PROGRAM.

**Quizzes and Homework**

If a student is absent on the day a quiz is given, there will be no make-up quiz administered, and the student will not receive a grade for the assignment.

The grading will be as follows for each course:

* + No grade will be given for missed quizzes or in-class assignments due to absences.
	+ No late assignments will be accepted.
	+ Homework assignments are due at assigned time/date regardless of student absence (upload or email as instructed).
	+ Lowest grade in Homework/ATI/Quizzes category will be dropped.

*Grades for homework, quizzes, ATI or any supplemental resources will be posted at the instructor’s discretion. Exam grades will be posted after sufficient time for the faculty to review the exam. Students are allowed one week after grades are posted to challenge their grade. No grade challenges are allowed after that time.*

### V. ATTENDANCE

###  Due to the content presented and the necessity of meeting objectives within a limited time frame, **four** absences in VNSG 1400 may occur. If a lecture is missed, the student is responsible for the material covered. Late arrivals impact upon the learning environment for the instructor and other students. VN students are expected to arrive in a timely fashion, in preparation for the start of class. If a student arrives after the scheduled start of class and up to 15 minutes late, the student is counted tardy. It is the student’s responsibility to notify the instructor during the first break of the time of arrival to avoid being marked absent. If the student is more than 15 minutes late, the student is counted absent.

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| **VNSG 1400** **OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 1: Adult Lifespan**1. Describe Erikson’s stages of development from early adulthood through late adulthood.2. Differentiate the types of familypatterns, their functions in society, and thestressors that commonly affect families.3. Describe the aging process and how olderadults differ from younger adults inresponse to illness, medications, andhospitalizations.4. Relate implications of increasing numberof older people in U.S. and identifycommunity resources available to helpassist in the care of older adults.5. Identify and discuss nursing measures to promote health of the older adult as it relates to nutrition, activities of daily living, safety concerns and communication.**Unit 2: Death and Dying, Hospice, and Long-Term Care, Home Health**1. Describe the stages of dying and variousmethods of determining when death is imminent.2. Identify expected behavior in the dying patientand suggest nursing intervention that will provide needed support.3. Describe the role of the nurse in providing care of the dying patient; including postmortem care.4. Describe stages of grief and identify needs of the grieving family.5. Discuss the philosophy of hospice care andcriteria of admission.6. Identify the roles of the LVN and other members of the multidisciplinary team.7. Discuss pharmacologic and nonpharmacological measures that are implemented as part of the plan of care for the hospice patient.8. Describe the different types of long-term care settings and services provided.9. Describe the role of the LVN/LPN in utilizing the nursing process to deliver competent care in home health settings. | Readings, Foundations text: Chapter 24 – Lifespan(partial chapter)Chapter 33 – Older AdultChapter 25 – Death/DyingChapter 40 – HospiceChapter 38 – Long Term CareChapter 37 – Home Health | PowerPointDefine TermsClass ParticipationSmall Groups, Active LearningPowerPointDefine TermsClass ParticipationSmall Groups, Active LearningLecture | Unit ExamUnit Exam |

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|  **VNSG 1400****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 3: Oral Medication Administration**Upon completion of this unit, the student will be able to apply knowledge across the lifespan and will be able to:1. Define pharmacology and related terms/abbreviations.  2. Demonstrate competency in dosage calculation. 3. Describe each phase of drug action.4. List and describe the types, components, and  guidelines of medication orders. 5. Describe the types of medication orders (prn,  routine, etc.) and give the order of priority. 6. State the six rights of proper drug administration.  7. List the forms in which drugs are prepared and  provide examples of each. 8. List the routes of medication administration and  describe factors to consider in choosing these routes.  | Readings: *Calculate with Confidence,*Chapters 10-13, and 17*Foundations*, Chapter 17Study GuideSyllabus Pharmacology Lab Sheets | LectureDefine TermsDrug Sheet PreparationOral Medication Skills LabFoundations Study GuideSmall Group ActivitiesATI ModulesSwift River AssignmentsPractice Exercises, Calculate with Confidence | QuizzesUnit ExamOral MedicationSkills Lab \* See On- Campus Lab policy.Medication Administration Skill Check-off |
| **VNSG 1400****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| 9. Describe the time schedule that may be used for  routine medications in healthcare facilities. 10. List medication guidelines and safety precautions in the administration of medications. 11. Describe and demonstration safe administration of  oral medications. 12. Describe the general procedure for reporting an  adverse drug reaction. 13. Discuss and identify the classification, drug action,  therapeutic effect, interactions, and adverse effects  of digoxin, furosemide, potassium, and warfarin. 14. Discuss the DEA’s role in scheduling controlled substances and give examples from each category.  | Readings: *Calculate with Confidence,*Chapters 10-13, and 17*Foundations*, Chapter 17Study GuideSyllabus Pharmacology Lab Sheets, pages 46-48 | LectureDefine TermsDrug Sheet PreparationOral Medication Skills LabFoundations Study GuideSmall Group ActivitiesATI ModulesSwift River AssignmentsPractice Exercises, Calculate with Confidence | QuizzesUnit ExamOral MedicationSkills Lab \* See On- Campus Lab policy.Medication Administration Skill Check-off |

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| **VNSG 1400** **OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 4: Parenteral Medication Administration**1. Demonstrate understanding of the six rights of  medication administration as related to the delivery  of parenteral medications.  2. Describe the anatomy of a syringe and needle,  including the parts that remain sterile. 3. Describe the syringes/needles that are most  frequently used for giving an injection. 4. Demonstrate competency withdrawing medication  from vials and ampules with dexterity. 5. Discuss how to prevent needle stick injuries in the health care settings. 6. Identify the advantages and disadvantages of  parenteral drug administration. 7. List the basic guidelines for administering an  injection. 8. Discuss why it is important to assess a patient prior to the administration of an injection. 9. Demonstrate competency in land-marking and  administering subcutaneous, intramuscular, and  intradermal injections. 10. Describe the classifications of insulin and the different types of insulin. 11. Identify the actions, uses, dosage, route,  interactions, adverse reactions, nursing  implications, and patient education for insulin. 12. Describe the classification and indication of heparin and enoxaparin (Lovenox). 13. Identify the actions, uses, dosage, route,  interactions, adverse reactions, nursing implications, and patient education for heparin.  .  | *Calculate with Confidence,*Chapters 18-20*Foundations*, Chapter 17VN Skills BagSyllabus Pharmacology Lab Sheets, pages 49, 50 | Practice Problems<https://quizizz.com/>Faculty DemonstrationStudent Skill Practice  | Unit ExamInjection Skills Lab\*See On-Campus Lab policySyllabus lab sheets |

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| **VNSG 1400****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 5: Nutrition**Upon completion of this unit, the student will be able to:1. List essential nutrients, functions, sources, and  deficiencies. 2. Discuss nutrient needs throughout the life cycle.  3. List the roles of the nurse in promoting nutrition.  4. Discuss factors that influence iron absorption. 5. Describe the body’s need for water. 6. Discuss the MyPlate food guide. 7. Discuss dietary guidelines for Americans.  8. Describe key vitamins and minerals, sources,  and their role in health.  | Readings: *Foundations and Adult Health Nursing*, Chapter 19<https://www.myplate.gov/><https://www.dietaryguidelines.gov/> | Classroom DiscussionNutritional ScenariosAnalysis of Meals/SnacksWorksheetsStudy GuideMeal Planning ExerciseInternet Searches | HomeworkQuizzesClass ParticipationUnit Exam |

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| **VNSG 1400****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| 9. Review common medications and their effects on nutrition. 10. Write a meal plan that is low calorie, low fat and includes all food categories. 11. Identify sociocultural aspects of nutrition and  their influences on patients’ eating habits. 12. Identify common modified diets, listing foods included and examples of physical disorders  for which they are prescribed. 13. Discuss food safety and food borne illnesses. 14. Explain how the nurse can increase  kilocalories and protein in a client’s diet. 15. Distinguish between the three most common eating disorders.  | Readings: *Foundations and Adult Health Nursing,* Ch. 19<https://medlineplus.gov/nutrition.html> |  |  |

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| **VNSG 1400****OBJECTIVES** | **THEORETICAL CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| 16. Define enteral and parenteral nutrition and  conditions where nutritional support may be indicated. 17. List diet treatment in diabetes. 18. Define BMI (body mass index).   | Skill 19.1Skill 19.2Chapter 51, p. 1761-1762 |  |  |

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| **VNSG 1400****OBJECTIVES** | **THEORETICAL CONTENT** | **LEARNING ACTIVITIES** | **EVALUATION** |
| **Unit 6 : Emergency Care; HIV and AIDS**Upon completion of this unit, the student will be able to:1. Discuss the Good Samaritan Laws. 2. Discus the importance of assessing the safety of an emergency scene and describe, in order, the steps for assessing a person in an emergency.  3. Describe the actions for different types of emergencies in adults and children. 4. Define sudden death. 5. Describe and recognize proper techniques of  Basic Life Support as per the American Heart Association. **HIV and AIDS:** 6. Discuss HIV/AIDS, its diagnosis, clinical  manifestations and current medical  management.7. Identify nursing diagnoses utilized in the care of the HIV-AIDS patient. 8. Discuss the broad range of nursing interventions needed to care for the patient with HIV/AIDS.  | Readings:*Foundations and Adult Health Nursing, Chapter 16*Readings:Foundations, Chapter 56<https://www.cdc.gov/hiv/index.html> | Class DiscussionER Lab-ER ScenariosRole PlaySmall Group WorkWorksheets Study Guide | Unit Exam QuizzesClass Participation |

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| **STATION 1** | **STATION 2** | **STATION 3** |
| **Verification of Physician Orders and Medication Administration Record (MAR)**Student may write on MAR. Corrections maybe made on the MAR. Student will determine whether orders and MAR is correct and congruent.Student must also determine what medications are to be give based on lab, orders, dose, & allergies. Failure to correctly verify the MAR, orders or determine which medications need to be given or held will result in 2nd attempt.Instructor will then determine which medication you will be administering. | **Taking Medication from Storage Area**Student will withdraw medication from medication cart. Must perform two checks. Third checks may be done at cart or in the room if medication is a unit dose.Student may have to perform calculations based on what the order states versus what is available on medication cart.Failure to perform appropriate calculation if indicated or determine the correct dose of medication from the medication cart will result in second attempt. | **Administering Medication to the Client**Student will administer medication at this station. Student must utilize appropriate nursing implications in administering medication.Student will identify allergies. Monitor VS if indicated and perform patient teaching if indicated by instructor.Failure to monitor appropriate VS, explain the indication of the medication, failure to identify patient or allergies will result in a second attempt. |

**PHARMACOLOGY 1 ORAL ADMINISTRATION**

Pharmacology Oral Medication Skills of Proficiency

Check-off Sheet

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Station 1: Verification of physician orders and medication administration record** | **Satisfactory** | **Unsatisfactory** |
| Determines whether orders and MAR are correct and congruent. |  |  |
| Determines what medications are to be given or held based on lab, orders, dose, & allergies. |  |  |
| **Station 2: Taking medication from storage area** |  |  |
| Withdraws medication from medication cart correctly, performs three checks;(if giving unit dose; third check may be at bedside) |  |  |
| Accurately performs calculations based on what the order states versus what is available on medication cart (if applicable) |  |  |
| **Station 3: Administering medication to the client** |  |  |
| Administers medication utilizing appropriate nursing implications (ID patient, hygiene, VS, Allergies, Indications, Patient Teaching etc....) |  |  |

PASS\_\_\_\_\_\_\_\_\_

REDO\_\_\_\_\_\_\_\_\_\_

ADDITIONAL COMMENTS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Skill Validator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PHARMACOLOGY I ORAL MEDICATION DRUG INFORMATION**

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| **Generic name:** **furosemide** | **Generic name:** **warfarin**  | **Generic name:** **potassium chloride****(tablets, capsules, & liquid** | **Generic name:** **digoxin** |
| Brand names:**Lasix**  | Brand names:**Coumadin** | Brand names:**Micro K-capsules****K Dur-tablets****K-lyte-effervescent tablet** | Brand names:**Lanoxin, Digox, Digitek, Lanoxicaps** |
| Laboratory Value Associated with medication: | Laboratory Value Associated with medication: | Laboratory Value Associated with medication: | Laboratory Value Associated with medication: |
| Therapeutic Effects/Action: | Therapeutic Effects/Action: | Therapeutic Effects/Action: | Therapeutic Effects/Action: |
| Nursing Implications: | Nursing Implications: | Nursing Implications: | Nursing Implications: |
| Pertinent Patient Teaching: | Pertinent Patient Teaching: | Pertinent Patient Teaching: | Pertinent Patient Teaching: |

**Seven Rights of Medication Administration**

* 1. Right Medication
	2. Right Patient (2 forms of identification)
	3. Right Dosage (Verify to ensure therapeutic dose-min. 3 checks)
	4. Right Route (Ensure that the drug is given via the **route in the medication order** and **route is appropriate for that medication)**.
	5. Right Time (Appropriate time frame per policy and if administered with or without food).
	6. Right Reason (Why? What is it indicated for? What do we expect would be the outcome of receiving medication?
	7. Right Documentation

## Texarkana College

Skills Check List

## Student Name:

|  |
| --- |
| **Procedure:** **Drawing Up Combined Insulin** |
| **Critical Elements** | **N/A** | **S** | **U** |
| 1. States hand hygiene done
 |  |  |  |
| 1. Checks insulin sliding scale order
 |  |  |  |
| 1. Verbalizes correct dose of Regular insulin to be given
 |  |  |  |
| 1. Verbalizes Correct dose of NPH insulin to be given
 |  |  |  |
| 1. Wipe top of both vials with alcohol (separate swabs)
 |  |  |  |
| 1. Inject correct amount of air into NPH vial
 |  |  |  |
| 1. Inject correct amount of air into Regular Insulin vial
 |  |  |  |
| 1. Withdraw appropriate amount of Regular insulin (first)
 |  |  |  |
| 1. Withdraw appropriate amount of NPH insulin (Rotates vial prior to withdrawing dose)
 |  |  |  |
| 1. Follows aseptic technique during process
 |  |  |  |
| 1. Has performed three checks (medication with MAR)
 |  |  |  |

N/A: not applicable, S: satisfactory, U: unsatisfactory

Pass \_\_\_\_

Redo \_\_\_\_

Comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Skill Validator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Texarkana College

Skills Check List

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Procedure: Intramuscular Landmarks** |
| **Critical Elements** | **N/A** | **S** | **U** |
| **Vastus Lateralis Site** |  |  |  |
| 1. Verbalizes and demonstrates correct anatomical landmarks.
 |  |  |  |
| **Ventrogluteal Site** |  |  |  |
| 1. Verbalizes and demonstrates correct anatomical landmarks.
 |  |  |  |
| **Deltoid** |  |  |  |
| 1. Verbalizes and demonstrates correct anatomical landmarks.
 |  |  |  |
| **Procedure:** **Intradermal, Intramuscular and Subcutaneous Technique** |  |  |  |
| **Critical Elements** |  |  |  |
| **Intradermal Technique** |  |  |  |
| 1. Verbalizes correct sites and demonstrates correct technique.
2. Verbalizes the medication given for TB screening and amount; *(PPD 0.1 ml).*
 |  |  |  |
| **Intramuscular Technique** |  |  |  |
| 1. Demonstrates correct technique.
 |  |  |  |
| **Subcutaneous Technique** |  |  |  |
| 1. Verbalizes sites to administer anticoagulants and insulin.
2. Demonstrates appropriate technique for administering insulin.
 |  |  |  |

N/A: not applicable, S: satisfactory, U: unsatisfactory

Pass\_\_\_\_\_

Redo\_\_\_\_\_

Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Skill Validator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VNSG 1402**

**Applied Nursing Skills**

**SYLLABUS**

**VOCATIONAL NURSING**

**TEXARKANA COLLEGE**

**TEXARKANA, TEXAS**

 **COURSE NAME:** **Applied Nursing Skills**  **COURSE NUMBER: VNSG 1402** **CREDIT HRS: \_4 LECTURE:** **3\_**

 **LAB: \_\_2\_ CONTACT HOURS: 80**

**COURSE DESCRIPTION:**

Introduction to and application of primary nursing skills. Emphasis on utilization of the nursing process and related scientific principles.

**END OF COURSE OUTCOMES:**

Describe the underlining principles of selected nursing skills and their relationship to health status; demonstrate satisfactory performance of selected nursing skills utilizing principles of safety; and identifying the nursing process used to solve basic patient care problems across the life span utilizing appropriate medical terminology.

**KEY CONCEPTS AND GENERAL COURSE PLAN:**

This course is an introductory course in the application of primary nursing skills. Content will include standard precautions, principles of nosocomial infections, difference between medical and surgical asepsis, and preventing spread of disease by knowledge of the chain of infection. The content will also include general principles and skills in care of the hospital patient, personal care including skills in aseptic technique, vital signs, data collection, therapeutic measures, wound care, prevention of illness and disease, basic microbiology including various characteristics of microorganism natural defenses of the body, and types of immunity.

Students must have concurrent enrollment in VNSG 1304, VNSG 1400 and VNSG 1461.

**VNSG 1402**

**STUDENT LEARNING OUTCOMES**

Learning outcomes are based on the *Differentiated Essential Competencies* set forth by the Texas Board of Nursing for graduates of vocational nursing education programs. Upon completion of this course of study, the student will be able to:

 1. Apply medical-surgical asepsis and infection prevention and control. (DEC II: provider of

 patient-centered care; DEC III: patient safety advocate)

 2. Discuss and describe the immune system and its purposes. (DEC IV: member of the healthcare

 team)

 3. Describe the basic physiological and psychosocial needs of all

 individuals. (DEC II: provider of patient-centered care; DEC III: patient safety advocate)

 4. State the meaning, pronunciation, spelling, abbreviations, and symbols of

 medically related terms and documentation. (DEC I: member of the profession)

5. Demonstrate beginning vital sign assessment skills including recognition of deviation from normal. (DEC II: provider of patient-centered care; DEC III patient safety advocate)

 6. Apply principles of patient care documentation. (DEC II: provider of patient-centered care)

7. Demonstrate fundamental nursing skills in personal care, bed making, specimen collection, and therapeutic measures. (DEC II: provider of patient-centered care)

8. Demonstrate the correct procedure for insertion of indwelling catheter utilizing sterile technique.

 (DEC 2: provider of patient-centered care; DEC III: patient safety advocate)

9. Outline nursing interventions to control pain, promote rest, and prevent sleep deprivation for patients throughout the lifespan. (DEC II: provider of patient-centered care; DEC III: patient

 safety advocate)

10. Identify the nurse’s responsibilities for admission, transfer and discharge of a patient in the healthcare setting. (DEC IV: member of the healthcare team)

11. Relate specific safety considerations to the developmental age and needs of patients across the lifespan. (DEC III: patient safety advocate)

**VNSG 1402**

**APPLIED NURSING SKILLS I SYLLABUS**

1. INTRODUCTION

 The faculty of the Vocational Nursing program in the Health Sciences

 Division of Texarkana College adheres to the belief that the process of

 learning involves a dual role of the nursing educator and the student. The

 nursing educator will facilitate the learning environment; the student WILL

 assume the responsibility for achieving the learning outcomes and is expected

 to actively contribute in a direct and positive manner to the learning

 experience.

 II. PRE-REQUISITES

American Heart Association BLS, Computer Course, BIOL 2401, and BIOL 2402

 Concurrent enrollment in VNSG 1304, 1400, and 1461

III. TEACHING METHODS

• Lecture/discussion

• Reading assignments/Independent Study

• Group Projects/Activities

• Demonstrations/return demonstrations

• Audiovisual and e-Learning resources

• Written assignments

V. EVALUATION

The Health Sciences Division puts tremendous effort into effectively assessing and measuring student learning outcomes. The following is how final grades are computed for each course taken throughout the program. VNSG 1402 is divided into five units with an exam given at the end of each unit. Several chapters may be included in a unit exam. A comprehensive final exam is given at the conclusion of the course. If an exam is missed, the student is responsible for contacting the instructor to make up the missed exam the day the student returns to class. All Make-Up Unit Exams will be 25 questions.

Unit exams 70%

Final 20%

Homework, Quizzes, ATI 10%

Grading Scale:

 A = 89.5-100

 B = 80.5-89.49

 C = 74.5-80.49

 D = 64.5-74.49

 F = 64.49 or less

THE STUDENT MUST EARN A PASSING GRADE (75 OR BETTER) IN ORDER TO CONTINUE IN THE VOCATIONAL NURSING PROGRAM.

**Quizzes and Homework**

If a student is absent on the day a quiz is given, there will be no make-up quiz administered, and the student will not receive a grade for the assignment.

The grading will be as follows for each course:

* + No grade will be given for missed quizzes or in-class assignments due to absences.
	+ No late assignments will be accepted.
	+ Homework assignments are due at assigned time/date regardless of student absence (upload or email as instructed).
	+ Lowest grade in Homework/ATI/Quizzes category will be dropped.

*Grades for homework, quizzes, ATI or any supplemental resources will be posted at the instructor’s discretion. Exam grades will be posted after sufficient time for the faculty to review the exam. Students are allowed one week after grades are posted to challenge their grade. No grade challenges are allowed after that time.*

### V. ATTENDANCE

###  Due to the content presented and the necessity of meeting objectives within a limited time frame, **four** absences in VNSG 1402 may occur. If a lecture is missed, the student is responsible for the material covered. Late arrivals impact upon the learning environment for the instructor and other students. VN students are expected to arrive in a timely fashion, in preparation for the start of class. If a student arrives after the scheduled start of class and up to 15 minutes late, the student is counted tardy. It is the student’s responsibility to notify the instructor during the first break of the time of arrival to avoid being marked absent. If the student is more than 15 minutes late, the student is counted absent.

###

|  |  |  |  |
| --- | --- | --- | --- |
| **VNSG 1402****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 1: Care and Safety of the Hospitalized Patient**Upon completion of this unit, the student will be able to:1. State the principles of body mechanics and  discuss how they relate to the nurse and the  patient.2. Demonstrate appropriate body mechanics  while moving, lifting, turning and  transferring a patient.3. Discuss and demonstrate the various ways of positioning of a patient.4. Explain range of motion and demonstrate the safe application of knowledge. 5. Discuss the complication of immobility and  nursing interventions to prevent them.  6. Discuss the safe hospital environment and summarize safety precaution that can be implemented to prevent accidents. 7. Relate OSHA guidelines for violence  protection programs in the workplace.  8. Summarize safety precautions that can be implemented to prevent falls.  | Readings: *Foundations*, Chapter 8Box 8.1Box 8.2Skill 8.1*Foundations*, Chapter 10Box 10.7 | LectureDefine TermsStudy GuideSmall Group ActivitiesPractice LabsSkills Checks | Unit ExamSkills Lab (Personal Care)Return Demonstration, ROM Exercises |
| **VNSG 1402** **OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| 9. Describe the application of safety reminder devices. Detail measures to create a restraint- free environment. 10. Discuss the principles of fire safety (PASS and RACE). 11. Discuss the role of the nurse in disaster planning. 12. Identify the safe feeding practices for the dependent patient across the lifespan. 13. Identify the role of the nurse in the  documentation of intake and output for the hospitalized patient. Demonstrate accuracy with measuring urine and emptying a Foley catheter. 14. Identify guidelines for admission, transfer, and discharge of a patient. 15. Describe common patient reactions to hospitalization and identify nursing interventions. 16. Identify the nurse’s role when a patient chooses to leave the hospital against  medical advice. 17. Describe and demonstrate how to make an occupied and unoccupied bed.  | Skill 10.1, p. 238p. 247*Foundations*: p. 545-Long-Term Carep. 565-Feeding the Patientp. 484- Intake and OutputSkill 18.1Foundations, Chapter 11Foundations, Chapter 9 | Experimental Learning AssignmentFeeding Lab |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **VNSG 1402****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| 18. State the principles of medical asepsis and  Body mechanics related to bed making.  19. Relate knowledge to the principles in  planning and providing personal hygiene.20. Demonstrate complete bed bath and backrub,  relating principles of professionalism and  privacy skills. 21. Initiate basic nursing measures to foster psychosocial well-being through appropriate sensory stimulation and promotion of  integrity and autonomy.22. Demonstrate proper technique with a bedpan.23. Identify factors that influence patient’s  personal hygiene. 24. Describe cultural and ethnic considerations  involved with personal hygiene.   |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **VNSG 1402****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 2: Disease Control and Prevention/Immunity**Upon completion of this unit, the student will be able to:1. Differentiate between pathogenic and nonpathogenic organisms and discuss characteristics associated with bacteria, viruses, fungi, and protozoa. 2. Differentiate between medical and surgical asepsis and provide examples of each.  3. Discuss each element of the chain of infection and interventions to break the chain. 4. Relate knowledge of normal defense mechanisms against infection. 5. Distinguish between localized and systemic infections and discuss the stages of the infectious process. 6. Discuss Health-Care-Associated Infections.7. Relate knowledge of standard and transmission-based precautions including proper use of Personal Protective Equipment (PPE).8. Discuss and demonstrate the seven principles of sterile technique. 9. Discuss how the immune system functions. 10. Discuss innate and adaptive immunity including humoral and cellular immunity. 11. Discuss disorders of the immune system including hypersensitivity, immunodeficiency, and autoimmune disease.  | Readings:*Foundations*, Chapters 7, 55  | Class ParticipationCase ScenariosATI activitiesStudy Guide/Critical Thinking Questions | Unit ExamQuizzesSkills Lab:Sterile Gloving |

|  |  |  |  |
| --- | --- | --- | --- |
| **VNSG 1402****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit 3: Vital Signs, Pain, Sleep and Rest**Upon completion of this unit, the student will be able to apply knowledge across the lifespanand will be able to:1. Accurately assess and document temperature,  pulse, respirations, blood pressure, and pain.  2. Identify and utilize correct sites for assessing apical, carotid, and radial pulses. 3. Demonstrate the ability to accurately count  and describe respirations. 4. Identify the anatomical structures involved in  maintaining blood pressure, the significance  of the “approximate systolic pressure,” and how to calculate pulse pressure and pulse  deficit. 5. State the normal limits of each vital sign across the lifespan and the physiological  mechanisms that regulate vital signs.  6. Identify several factors that affect vital signs and appropriate nursing interventions for abnormal vital signs readings. 7. Demonstrate how to assess and document the height and weight of clients across the  lifespan utilizing standard and metric tools.  8. Differentiate between acute and chronic pain, identify possible causes of pain, and discuss  pharmacological and non-pharmacological  interventions utilized in pain control. 9. Explain the relationship of the gate control theory in selecting appropriate interventions for pain relief. 10. Identify subjective and objective data in pain assessment. Explain the assessment of pain  as a fifth vital sign, demonstrating documentation of pain scale reading.  11. Describe and identify the differences between sleep and rest and nursing interventions to promote sleep and rest.  12. List six S/S of sleep deprivation and  associated therapeutic interventions.   | Readings: *Foundations*, Chapters 12, 21, and 31 (pages 940-943)Syllabus page 75: VS check-off sheet | LectureDefine TermsFoundations Study GuideSmall Group ActivitiesOn Campus Lab | Unit ExamVital Signs SkillsLab-Pass/Fail Skills checklist in syllabus: page 82See “On Campus Lab”Evaluation PolicyQuizzes  |

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| --- | --- | --- | --- |
|  **VNSG 1402****OBJECTIVES** | **THEORETICAL** **CONTENT** | **LEARNING** **ACTIVITIES** | **EVALUATION** |
| **Unit Four: Medical Terminology, Data Collection, Documentation, Specimen Collection and Elimination**Upon completion of this unit, the student will be able to:1. Identify common abbreviations and medical terms. 2. Demonstrate understanding of the basic  components of medical terminology including how new words are formed. 3. List purposes of written records. 4. Describe various formats for  organizing and documenting patient care. 5. State important legal aspects of chart ownership. 6. Explain the relationship of nursing care plan to care documentation and patient care reimbursement.  7. Describe the basic guidelines for and mechanics of charting. 8. Discuss the use of computers for record  keeping and documentation in health care facilities. 9. Explain the importance of good  communication among healthcare professionals. 10. Compare and contrast the origins of  disease. 11. Discuss risk factors for disease. 12. Describe and demonstrate steps in basic  nursing observation and interviewing while  collecting a nursing history. 13. Identify signs and symptoms of disease  conditions. 14. Identify the duties of the nurse when  assisting with a physical examination of an  adult or a child. 15. Describe and demonstrate methods for  completing a physical exam using a  structured data collection tool. 16. Differentiate between positions utilized for physical examination. 17. Explain considerations in assessments of older adults. 18. Discuss patient education for diagnostic testing and specimen collection. 19. Identify the role of the nurse when performing a procedure for specimen collection.20. Differentiate between patterns of urinary and bowel elimination. 21. Recall reasons for and principles associated with administering enemas to children and adults.22. Identify nursing actions in performing colostomy care.  | Readings: Foundations TextDocumentation: Chapter 3Assessment: Chapter 13Specimen Collection: Ch. 23Elimination/Ostomies/Enemas: Ch. 15Syllabus: Data Collection Tool, Terminology Resources | Small Group DiscussionsFoundations Study GuideSimulation LabMedline Plus Website – Medical Terminology TutorialYouTube VideosATI Resources | Head to Toe AssessmentsQuizzesUnit ExamPerformance in clinical setting |

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| --- | --- | --- | --- |
| **VNSG 1402****OBJECTIVES** | **THEORETICAL****CONTENT** | **LEARNING****ACTIVITIES** | **EVALUATION** |
| **Unit 5: Therapeutic Measures**Upon completion of this unit, the student will be able to apply knowledge across the lifespan and will be able to:1. Differentiate between complementary and  alternative therapies.2. Explain why a thorough assessment of a patient’s health is important prior to  using complementary and alternative  therapies. 3. Describe several complementary and  alternative therapies.4. Describe the stages and possible  complications of wound healing. 5. Discuss the use of drains, staples, and sutures. 6. Demonstrate the application of sterile  dressing and a wet-to-dry dressing.  7. Discuss the application of bandages and  binders. 8. Explain the purposes and the precautions of hot and cold therapy. 9. Describe the role of the SVN and the LVN  during IV therapy and blood  administration. 10. Discuss nursing interventions for the patient receiving oxygen. 11. Describe and demonstrate procedure for female/male urinary catheterization. 12. Describe care of the patient with an  indwelling urinary catheter. 13. Define the philosophy and goals of  rehabilitation nursing throughout the  Lifespan.14. Discuss the members of the rehab team and their individual roles within the team.15. Discuss and identify physical and emotional  needs of persons with disabilities and  appropriate nursing interventions to address  these needs.16. Discuss the integration of pharmacological  and nutritional support in the rehabilitation setting. | Readings: Foundations TextWound Care: Chapter 22IV/Blood Transfusion: Chapter 18, pp. 513-525Oxygenation: Chapter 14Catheters: Chapter 15, pp. 364-369Skills 15.1, 15.2, 15.4Syllabus: Skills Check List, pages 76, 77Rehabilitation: Chapter 39 | Wound Care Lab: Application of Dressings and BandagingATI Skills 2.0 – Urinary Catheter CareF.A. DavisSmall Group Practice in LabMed-Surg Case Study: Oxygenation, IV, Alternative Therapies, and Wound Care | Unit ExamQuizzesSkills Check Lab: Urinary Catheter |

TEXARKANA COLLEGE

VOCATIONAL NURSING PROGRAM

VNSG 1402

#### SPELLING STUDY GUIDE

|  |  |  |
| --- | --- | --- |
| Abnormal | Decrease | offensive |
| Adequate | Discard | partial |
| Administer | Distention | productive |
| Anticipation | Emaciated | painful |
| Application | Enlarged | rigid |
| Artificial | Effective | regular |
| Asymptomatic | Elimination | redness |
| Appetite | Faint | relaxation |
| Alert | Foul | restriction |
| Acute | Generalized | stuttering |
| Benign | Hot | sediment |
| Bruised | Identification | significant |
| blood-tinged | Include | sluggish |
| Burning | Increase | symptomatic |
| Copious | Infection | systemic |
| Colorless | Irritability | shock |
| Chronic | Intense | tolerated |
| Cloudy | Irregular | throbbing |
| Complication | Mental | toxic |
| Contraindication | massive | void |

**ABBREVIATIONS THAT ARE UNSAFE TO USE**

Apothecary symbols-dram, minim-easily misread

AU-both ears, misread as OU – spell out

Drug Names (AZT, CPZ, HCL, MS…) use complete names

mg – microgram misread as milligram ug.

OD – once daily, misread for right eye

U – units misread for 4 or zero – use unit

cc – cubic centimeters – use ml

zero after the decimal point (1.0) – misread as 10 – do not use (just use 1\_

0 zero before the decimal (.5 mg) – misread as 5 mg. Always use zero before decimal (0.5 mg)

IU – international unit, misread as IV. Spell out units

TEXARKANA COLLEGE

VOCATIONAL NURSING PROGRAM

VNSG 1402 ABBREVIATIONS

|  |  |
| --- | --- |
| **A**a beforeaa of eachABD abdominal or abdomenABG arterial blood gasesac before mealsADH antidiuretic hormoneADHD attention deficit hyperactivity  disorderad lib freely, as desiredAED automatic external defibrillatorAIDS acquired immunodeficiency  syndromeAKA above the knee amputationAPAP acetaminophenASA aspirinASAP as soon as possible**B**BM bowel movementBMR basic metabolic rateBMP basic metabolic panelBK below the kneebpm beats per minuteBP blood pressureBRP bathroom privilegesBS blood sugar, bowel soundsBSA body surface areaBUN blood urea nitrogen**C**c withCa+ calciumCA cancerC&S culture and sensitivityCBC complete blood countCC chief complaintCHF congestive heart failureCMP comprehensive metabolic panelCNS central nervous systemc/o complains ofCV cardiovascularCVA cerebral vascular accidentCXR chest x-ray  | **D**DAT diet as tolerateddc discontinueD/C\* dischargeDM diabetes mellitusDNR do not resuscitateDx diagnosis**E**ECG electrocardiogramECHO echocardiogramEENT ear, eyes, nose, and throatEGD esophageal gastric duodenoscopyEEG electroencephalogrameg for exampleet andET endotracheal tube**F**f female0F degrees FahrenheitFe ironFT feeding tubeFUO fever of unknown originFx fracture**G**g gramgr grainGI gastrointestinalGT gastric tube GTT glucose tolerance testgtt drop |

 TEXARKANA COLLEGE

VOCATIONAL NURSING PROGRAM

VNSG 1402 ABBREVIATIONS

|  |  |
| --- | --- |
| **H** h hourHA headacheHct hematocritHgb hemoglobinHIV human immunodeficiency virusHOH hard of hearingH&P history and physicalHR heart ratehs hour of sleepHTN hypertensionhx history**I**I&O intake and outputID intradermalie that isIM intramuscularIV intravenousIVPB intravenous piggyback**J** J-P Jackson-Pratt drainJVD jugular vein distention**K**K+ potassiumKcL potassium chloridekg kilogramKUB kidney, ureters, bladderKVO keep vein open**L**(Lt) leftL left, literlb poundLFT liver function testLE lower extremityLLL left lower lobeLLQ left lower quadrantLOC level of consciousnessLP lumbar punctureLR Lactated Ringer’sLUL left upper lobeLUQ left upper quadrantLV left ventricle | **M**MAE moves all extremitiesMAR medication administration recordMDI metered dose inhalermEq milliequivalentmcg microgrammg milligramMI myocardial infarctionml millilitermm millimetermm Hg millimeters of mercuryMRSA methicillin resistant  Staphylococcus aureusMVA motor vehicle accident**N**NaCl sodium chlorideNAD no acute distressng nasogastric NKA no known allergiesNKDA no known drug allergiesNPO nothing by mouthNS normal salineN/V nausea and vomiting**O**O2 oxygenOOB out of bedOR operating roomORIF open reduction with internal  fixationOT occupational therapyOTC over the counteroz ounce |

TEXARKANA COLLEGE

VOCATIONAL NURSING PROGRAM

VNSG 1402 ABBREVIATIONS

|  |  |
| --- | --- |
| **P**p afterPAR post anesthesia recoverypc after mealsPERRL pupils equal round reactive to lightPO by mouthPQRST provoke, quality, radiation,  severity, timePR through the rectumPRN as neededPT prothrombinPTT partial thromboplastin time**Q**q everyqt quart**R**RBC red blood cellRICE rest, ice, compression, elevationRL Ringer’s lactateRLL right lower lobeRLQ right lower quadrantRML right middle lobeRUQ right upper quadrantR/O rule outROM range of motion(rt) rightRT respiratory therapyR/T related to**S**s withoutSC/ SQ\* subcutaneousSL sublingualSOS once, if necessarySQ subcutaneouss&s signs and symptomsss\* one halfSTAT immediately | **T**T temperaturetbs tablespoonT&C type and cross matchTEE transesophageal echocardiogramTENS transcutaneous electrical nerve  stimulatorTIA transient ischemic attackTKO to keep openTPR temperature, pulse, respirationtsp teaspoon**U**UA urinalysisUTI urinary tract infection**V**V/S vital signs**W**WA while awakeWBC white blood countWNL within normal limitswt weight**SYMBOLS** @ at# number% percent& and> greater than< less than  |
| **\* Abbreviations to avoid** | **\*\*Place a small line over c, p, s, a, and s**  |

 SUFFIXES

A suffix is added to the end of a word to change its meaning. Suffixes indicate, among other things, surgical procedures, specialties, specialist, and conditions.

|  |  |  |
| --- | --- | --- |
| -ia | Condition | Paraplegia |
| -ac | Pertaining to  | Cardiac |
| -ad | Toward | Caudad |
| -algia | Pain | Cephalagia |
| -blast | Immature | Leukoblast |
| -centesis | Surgical puncture | Amniocentesis |
| -cyte | Cell | Leukocyte |
| -dynia | Pain | Cephalodynia |
| -ectomy | Surgical removal | Appendectomy |
| -emia | Blood condition | Hyperglycemia |
| -er | One who | Radiographer |
| -gram | Record or picture | Cardiogram |
| -pathy | Disease | Adenopathy |
| -it is | Inflammation of | Pericarditis |
| -plasty | Surgical repair | Rhinoplasty |
| -scopy | The process of viewing with a scope | Colonoscopy |
| -rrhage | Bursting forth | Hemorrhage |
| -uria | Pertaining to urine | Hematuria |
| -oma | Tumor | Lipoma |
| -pnea | breathing | Dyspnea |
| -otomy | Cutting  | Lapraotomy |

ROOT WORDS

WITH COMBINING VOWEL =COMBINING FORM

|  |  |
| --- | --- |
| Aden/o | Gland |
| Arteri/o | Artery |
| Arthr/o | Joint |
| Bronch/o | Bronchus |
| Carcin/o | Cancer |
| Cardi/o | Heart |
| Cerebr/o | Cerebrum |
| Cholecyst/o | Gallbladder |
| Col/o | Colon |
| Crani/o | Skull |
| Cyst/o | Bladder |
| Cyt/o | Cell |
| Derm/o | Skin |
| Encephal/o | Brain |
| Enter/o | Intestines |
| Gastr/o | Stomach |
| Hem/o | Blood |
| Hepat/o | Liver |
| Hyster/o | Uterus |
| mast/o | Breast |
| My/o | muscle |
| Neur/o | nerve |
| Nephr/o | kidney |
| Oste/o | bone |
| Ot/o | ear |
| Phleb/o | vein |
| Pneum/o | lung |
| Proct/o | rectum |
| Rhin/o | nose |
| Ur/o | urine |

Prefixes

A prefix is attached to a word to change its meaning. Commonly, the prefix expresses numbers, measurement, position, direction, negatives, & color.

|  |  |  |
| --- | --- | --- |
| Bi- | Two, double | Bicuspid |
| Hemi- | Half | Hemiplegia |
| Milli- | One-thousandth | Milliliter |
| Mono- | One, single | Monocyte |
| Semi- | Half | Semiconscious |
| Hyper- | Excessive | Hyperlipemia |
| Poly-  | Many | Multipara |
| a- | Without | Apnea |
| Ab- | Away from | Abduct |
| Ad- | Towards  | Adduct |
| Ecto- | Outside | Ectopic |
| Endo- | Within | Endocervical |
| Ex- | Out | Extract |
| Hypo- | Less than, under | Hypoglossal |
| Inter- | Between | Intercostals |
| Infra- | Below | Infrapatellar |
| Peri- | Around | Perianal |
| Pre- | In front, before | Precordial |
| Sub- | Under | Sublingual |
| Trans- | Across, | Transurethral |
| Alb- | White | Albino |
| Dis- | To undo | Discharge |
| Contra- | Against | Contraceptive |
| Tachy- | Rapid | Tachycardia |
| Supra- | Above, over | suprapubic |

Texarkana College

Vocational Nursing Program

Vital Sign Check-Off

1st Attempt

|  |  |
| --- | --- |
| Student Documentation | Instructor/Simulator Documentation |
| Pulse | Pulse |
| Respirations | Respirations |
| Blood Pressure | Blood Pressure |

Pass/Redo Instructor & Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2nd Attempt

|  |  |
| --- | --- |
| Student Documentation | Instructor/Simulator Documentation |
| Pulse | Pulse |
| Respirations | Respirations |
| Blood Pressure | Blood Pressure |



3rd Attempt

|  |  |
| --- | --- |
| Student Documentation | Instructor/Simulator Documentation |
| Pulse | Pulse |
| Respirations | Respirations |
| Blood Pressure | Blood Pressure |



Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Procedure:** **Inserting a Retention Catheter (Male)** |
| **Critical Elements** | **N/A** | **S** | **U** |
| 1. Gathers supplies. States hand hygiene done, ID patient, check allergies. Explain procedure.
 |  |  |  |
| 1. Position patient supine with thighs slightly abducted. Perform perineal care if needed.
 |  |  |  |
| 1. Open package using sterile technique. Use outer plastic wrap for trash.
 |  |  |  |
| 1. Remove sterile absorbent pad, and position on top of patient’s thighs. Position by holding corners of pad only.
 |  |  |  |
| 1. Don sterile gloves.
 |  |  |  |
| 1. Position fenestrated drape over the client to expose the genitalia.
 |  |  |  |
| 1. Prepare contents for cleaning.
 |  |  |  |
| 1. Open lubricant and lubricate catheter tip, replace catheter in the tray.
 |  |  |  |
| 1. Hold penis upright at a 90-degree angle with non-dominant hand. (If patient not circumcised, retract foreskin with non-dominant hand).
 |  |  |  |
| 1. Prep meatus/glans using circular motion. Cleanse three times using a new swab each time. Discard swabs in/on trash.
 |  |  |  |
| 1. Insert catheter all the way to the Y-port. Grasp catheter with non-dominant hand to maintain position of catheter.
 |  |  |  |
| 1. Inflate balloon. Remove and discard empty syringe.
 |  |  |  |
| 1. Retract the catheter until resistance is felt.
 |  |  |  |
| 1. Place bag at side of bed ensuring drainage tube clamped.
 |  |  |  |
| 1. Secure catheter with catheter holder or tape.
 |  |  |  |
| 1. Clean patient. Discard disposable trash in appropriate container.
 |  |  |  |
| 1. Reposition client for comfort; put bed in LOW position with upper side rails up, call light in reach.
 |  |  |  |
| 1. Perform hand hygiene.
 |  |  |  |
| 1. Chart.
 |  |  |  |

N/A: not applicable, S: satisfactory, U: unsatisfactory

Pass Redo (Circle one)

Instructor’s Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

|  |
| --- |
| **Procedure:** **Inserting a Retention Catheter (Female)** |
| **Critical Elements** | **N/A** | **S** | **U** |
| 1. Gathers supplies. States hand hygiene done, ID patient, check allergies. Explain procedure.
 |  |  |  |
| 1. Position patient in dorsal recumbent with knees/thighs abducted. Perform perineal care and visualize the meatus.
 |  |  |  |
| 1. Open package using sterile technique. Use outer plastic wrap for trash.
 |  |  |  |
| 1. Remove sterile absorbent pad, and position under patient’s buttocks. Position by holding corners of pad only.
 |  |  |  |
| 1. Don sterile gloves.
 |  |  |  |
| 1. Position fenestrated drape over the client, exposing the genitalia (optional).
 |  |  |  |
| 1. Prepare package contents for cleaning.
 |  |  |  |
| 1. Open lubricant and lubricate catheter tip, keeping catheter in the tray.
 |  |  |  |
| 1. With nondominant hand, spread labia minora so that meatus is visualized.
 |  |  |  |
| 1. Prep meatus. Cleanse three times from top to bottom using a new swab each time. Discard swabs in/on trash. First wipe farthest away; second wipe closest to you. Last wipe down center over meatus.
 |  |  |  |
| 1. With dominant, sterile gloved hand, insert catheter. When urine flow is established, insert catheter 1 ½ inches further. Grasp catheter with nondominant hand to maintain position of catheter.
 |  |  |  |
| 1. Inflate balloon. Remove and discard empty syringe.
 |  |  |  |
| 1. Retract the catheter until resistance is felt.
 |  |  |  |
| 1. Place bag at side of bed ensuring drainage tube clamped.
 |  |  |  |
| 1. Secure catheter with catheter holder or tape.
 |  |  |  |
| 1. Clean patient. Discard disposable trash in appropriate container.
 |  |  |  |
| 1. Reposition client for comfort; put bed in LOW position with upper side rails up, call light in reach.
 |  |  |  |
| 1. Perform hand hygiene.
 |  |  |  |
| 1. Chart.
 |  |  |  |

N/A: not applicable, S: satisfactory, U: unsatisfactory

Pass Redo (Circle)

Instructor’s Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Normal Lab Values**

Please make a copy of this and place it in your notebook you will be taking to clinical and begin learning these normal values and what they mean. Your instructors will be quizzing you on them periodically during post-conference. These are only a small number of actual labs your patient may have!

**Complete Blood Count (CBC):**

WBC: 5,000-10,000

RBC: 4 million-6 million

Hgb: Females 12-16; Males 14-18

Hct: Females 37-47%; Males 42-52%

Plt: 150,000-400,000

**Chemistry (found in BMP or CMP):**

Na (sodium): 135-145 mEq/liter

K+ (potassium): 3.5-5 mEq/liter

Chl (chloride): 96-106 mEq/liter

Ca (Calcium): 4.0-5.0 mEq/liter **OR** 9-11 mg/deciliter

Mg (magnesium): 1.5-2.5 mEq/liter

Glu (glucose): 70-110

BUN: 10-20

Cr (creatinine): 0.5-1.2

Alb (albumin): 3.5-5

BNP (B-type natriuretic peptide): desired level < 100 pg/mL. Greater than 100 could indicate heart failure – the higher the number, the more severe the HF.

**VNSG 1461**

**CLINICAL-PRACTICAL NURSE**

**LAB PACKET**

**VOCATIONAL NURSING**

**TEXARKANA COLLEGE**

**TEXARKANA, TEXAS**

**COURSE NAME: Clinical-Practical Nurse**

 **COURSE NUMBER: VNSG 1461**

  **CREDIT HOURS: 4 LECTURE: 0**

 **LAB: 0 TOTAL CONTACT HOURS: 256**

**COURSE DESCRIPTION:**

A method of instruction providing detailed education, training and work-based experience, and direct patient/patient care, generally at a clinical site. Clinical experience will also be acquired through virtual simulation. Specific detailed learning objectives are developed for each course by the faculty. On-site clinical instruction, supervision, evaluation, and placement is the responsibility of the college faculty. Clinical experiences are unpaid external learning experiences.

**End of Course Outcomes:**

 As outlined in the learning plan, the student will apply the theory, concepts, and skills involving specialized materials, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental social, and legal systems associated with the particular occupation and the business/industry; and demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, communicating in the applicable language of the occupation and the business or industry.

**Key Concepts and General Course Plan**

 This course provides clinical experience for application of skills related to

assessment, planning, implementation, interpersonal skills, evaluation, professional

behavior, ethics, and safety. Students must be concurrently enrolled in VNSG 1304, 1400 and 1402.

**Student Learning Outcomes**

**VNSG 1461: Clinical**

All Texarkana College Vocational Nursing Clinical Learning Outcomes are based on the *Differentiated Essential Competencies* (DEC) set forth by the Texas Board of Nursing (TBON) for graduates of vocational nursing education programs:

DEC I: Member of the profession

DEC II: Provider of patient-centered care

DEC III: Patient safety advocate

DEC IV: Member of the healthcare team

Upon completion of this course of study, the student will be able to:

1. Continue skill demonstration with exhibition of increased confidence. (DECs II, II, IV)
2. Safely administer medications with instructor or designated supervision utilizing theory, clinical experience, and reference material. (DECs II, III)
3. Contribute to the plan of care through assessment and identification of patient care priorities. (DECs II, III, IV)
4. Utilize the nursing process in caring for individuals with common medical/surgical conditions. (DECs II, IV)
5. Discuss patient medical diagnoses, treatment plans, lab results, and imaging studies as related to patient care. (DECs II, III, IV)
6. Implement the plan of care to meet the psychosocial and physiological needs of patients. (DECs II, III, IV)
7. Demonstrate effective written and verbal/nonverbal communication. (DEC IV)
8. Consistently demonstrate professional growth and ethical behaviors. (DECs I, II, III, IV)
9. Practice techniques that promote physiological and psychological safety. (DECs II, III)
10. Participate in post conference. (DEC IV)

I. COURSE REQUIREMENTS

Attendance is essential due to the content presented and the necessity of

meeting objectives within a limited time frame. Absences result in lost clinical experiences. For this reason, the expectation is that the student will attend every day. For emergencies, there are three (3) absences allowed. If the student misses more than 3 clinicals the student will be withdrawn from the program.

Prior to the last day to drop, if a student exceeds absences in any VNSG course, the student will be withdrawn from all other VNSG courses, and a W will be recorded on the transcript for all VNSG courses.

After the last day to drop, if a student exceeds absences in any theory course, a failing grade will be recorded (D if the current grade is D or higher and F if the current grade is below 65). The student may continue in other VNSG courses. Exceeding absences in a clinical course after the last day to drop will result in the student receiving a failing grade in each VNSG course (D if the current grade is D or higher and F if the current grade is below 65).

II. TEACHING METHODS

 1. Modeling/Precetorship

 2. Feedback

 3. Case Studies

 4. Simulation/V-Clinical

 5. Pre& Post-conference Discussions

 6. Distance/Remote Learning Activities

7. Role Play

The Clinical Evaluation Booklet (CEB) identifies the clinical objectives evaluated in each of the seven categories.

Students are graded on each clinical day according to these objectives. Failure to attain at least 75% or failing to achieve an objective that is classified as a critical value will result in an unsatisfactory day.

**Dosage Calculation Competency Exam**

A dosage calculation exam will be administered during the first semester prior to students performing medication administration in the clinical setting. **A minimum grade of 80% must be attained to progress in the program.**

If the student does not pass the first exam, the student must retake a second test within the week.

If the student does not pass the second exam, they must see an instructor for remediation assignments.

After remediation, a third exam will be given. If the student is deemed to be unsuccessful on the third attempt, the student will be withdrawn from the program.

VNSG 1461

Student’s Name

The Clinical Evaluation Booklet Supplement (CEB-S) identifies the clinical objectives in each of the seven categories for determination of a clinical grade.

 1. Each student will be evaluated each clinical day based on seven categories:

 Assessment, Planning, Implementation, Interpersonal Relations, Evaluation,

 Professional and Ethical Behavior, and Safety.

 2. A scale of 1-5 will be used:

 5 – independent

 4 – supervised

 3 – assisted

 2 – marginal

 1 – dependent

 3. The maximum score each day is 35.

 4. Clinical grade will be based on total points divided by the number of days

 present in clinical.

 5. Instructors may assign clinical homework, quizzes, or other daily clinical grades

 in addition to the evaluation of clinical performance.

6. Clinical days falling on holidays will be indicated by ‘H’ on the grading sheet;

 clinical days for orientation and/or on campus labs may be indicated by an ‘S’

 for satisfactory performance or a ‘U’ for unsatisfactory performance on the

 grading sheet.

 7. Absences: If you do not call in per the policy, you will have points deducted

 from the Professional and Ethical Behaviors/Interpersonal Relations categories for the next day. An absence that is called in correctly will accrue an absence without additional points deducted.

 8. It is an unsuccessful day if you do not achieve a grade of 75% or higher (>26.1)

 9. The grading scale will be:

 31.3-35 = A

 28.2-31.2 = B

 26.1-28.1 = C

 22.6-26.0 = D

 Below 22.6 = F

 Students must achieve a grade of 26.1 or higher to be successful in the

 course. Any grade less than this will result in failure.

 If a student’s grade is marginal or failing, the student will not be assigned

 to an alternate experience from the assigned clinical unit.

**TEXARKANA COLLEGE**

**VOCATIONAL NURSING**

**CLINICAL EVALUATION**

 Clinical evaluation in the Vocational Nursing Program at Texarkana College reflects the program philosophy that learning is:

 1. Comprised of cognitive, affective, and psychomotor components

 2. A continuous process

 3. Demonstrated by a change in behavior

 4. Enhanced by a multisensory approach

 5. Individualistic

 While the faculty is accountable for curricular planning and the creation of a learning environment, learning is ultimately the responsibility of the student.

The clinical evaluation process is based upon the program philosophy, the Code of Ethics, and standards of nursing practice. Evaluation of student learning is the responsibility of the faculty. Not all student behaviors and faculty decisions about such behaviors are predictable or quantifiable; therefore, the clinical evaluation booklet (CEB) is a reference tool only and not an exhaustive contract. Students should be aware that they are in a vocational nursing program and the faculty has the responsibility to use their collective professional judgment to determine when the student’s clinical, academic, or personal performance and professional accountability are inconsistent with the responsibility for guarding patient safety, and also determine if the student is to be given re-learning opportunities, asked to withdraw from the program, or subject to disciplinary action (Texarkana College Student Handbook).

**CLINICAL EVALUATION PROCESS**

 This time of learning, beginning when the clinical portion of the nursing course starts, provides opportunity for the student to learn and practice cognitive, affective, and psychomotor skills needed for the implementation of safe nursing care. Clinical evaluation is based upon seven categories identified in the Clinical Evaluation Booklet (CEB):

 1. Assessment

 2. Planning

 3. Implementation

 4. Interpersonal relations

 5. Evaluation

 6. Professional and Ethical Behavior

 7. Safety

As learning is additive, the student is expected to learn from any errors in judgment or practice and to continuously improve clinical abilities. The student is expected to perform clinical skills based on content from previous courses in the curriculum and from the current nursing course.

The clinical instructor will give verbal feedback to the student regarding clinical performance. Written feedback is documented in the Clinical Evaluation Booklet (CEB) for each clinical day. While the student has access to the evaluation information for each clinical day, a conference may be initiated by the student or instructor if clarification is necessary. Failure to show progression in any of the seven categories of evaluation each clinical day may result in the student being placed in a level of evaluation and progression as outlined in the Clinical Evaluation Process.

In the interest of patient safety, all written clinical assignments are to be turned in as requested by clinical instructors. Any assignment that is not submitted on time or is submitted incomplete will result in a deduction of clinical points in the following applicable categories: Assessment, Planning, Implementation, Interpersonal Relations, Evaluation, Professional and Ethical Behavior, and/or Safety. A clinical grade of <75% (<26.1) will result in an unsatisfactory clinical day. A pattern of incomplete or late assignments will result in the student being counseled as outlined in the Clinical Evaluation Process.

Electronic CEBs may be initiated by clinical instructors – more information will be provided on how to complete and submit CEBs electronically.

**LEVELS OF EVALUATION AND PROGRESSION**

**Level I:**

 Student errors in judgment or practice in the clinical setting will be addressed by the instructor. If, in the professional judgment of the clinical instructor and upon documentation in the CEB, these errors do not significantly compromise patient safety, jeopardize clinical environment relationships, or deviate from scope of vocational nursing practice, the student will be allowed to continue in the nursing course. If the stated clinical objectives are met, the student will earn “Satisfactory” as an end of course clinical grade. A satisfactory clinical grade and a minimum of 75 (C) course grade are necessary for progression to the next quarter or graduation.

**Level II:**

 If, in the professional judgment of the clinical instructor and upon documentation in the CEB, the student repeatedly requires assistance to meet clinical objectives, a written learning contract may be developed. This action indicates that the student is placed on “WARNING”. If the student demonstrates that self-correction has occurred, the student will be allowed to continue in the nursing course. If the stated clinical objectives are met, the student will earn “Satisfactory” as an end of course clinical grade in the first quarter. A satisfactory or passing clinical grade and a minimum of 75 (C) course grade are necessary for progression to the next quarter or graduation.

**Level III:**

 When, in the professional judgment of the clinical instructor and upon documentation in the CEB, the student’s clinical performance does significantly compromise patient safety, jeopardize clinical environment relationships, or deviate from scope of vocational nursing practice, another level for progression and evaluation is indicated. Based upon the seriousness in nature and/or frequency of the clinical error(s), the student is in danger of not passing the clinical portion of the course. The student, therefore, is placed on “WARNING”. To confirm the student’s competence, the instructor may initiate one or more of the following strategies:

 1. Implement direct, one-on-one observation of the student’s clinical performance,

 2. Implement direct, one-on-one observation of the clinical performance by

 another designated member of the faculty, and/or

 3. Implement a review of the student’s performance in consultation with other

 members of the teaching team, the vocational nursing program coordinator,

 and the division chair for a professional consensus.

If the student’s performance is determined to be “Satisfactory” at the end of any of these three strategies implemented by the faculty, the student will be allowed to continue in the nursing course. If the stated clinical objectives are met, the student will earn “Satisfactory” as an end of course clinical grade. A satisfactory clinical grade and a minimum of 75 (C) course grade are necessary for progression to the next quarter or program completion.

 If the student’s performance remains “Unsatisfactory” following implementation of any two of these three previous strategies, the student will:

 1. not be allowed to continue in the nursing course.

 2. earn “Unsatisfactory” as a clinical grade for the course.

 3. not be allowed to progress to the next quarter or program completion.

Having earned a clinical failure, an “F” will be recorded as the final nursing course grade regardless of the grades in the theory portion of the course.

NOTE: 1. Actions on campus or in the clinical lab that violate the standards of

 student conduct or constitutes physical, emotional, or sexual harassment

 or disruptive classroom behaviors as described in the TEXARKANA COLLEGE STUDENT HANDBOOK will result in a report to the

 Dean of Students for his disciplinary action.

 2. All records of progressive learning behaviors are the property of the

 Health Occupations Division and will be kept in the student’s file.

**TEXARKANA COLLEGE**

**VOCATIONAL NURSING**

**GRADING DAILY CLINICAL EXPERIENCE**

The Texarkana College Vocational Nursing student is expected to be able to deliver care to one or more clients in a variety of clinical settings. Clinical grading will be based on the following seven broad areas:

1. **Assessment: Ability to gather information to care for assigned clients.** Includes obtaining report from staff, completing nursing assessments, collecting data and researching information pertaining to client care, and identifying actual/potential patient problems.
2. **Planning: Ability to plan care for assigned clients.** Includes setting goals, establishing priorities of care, identifying nursing interventions, managing tasks/time, and meeting all client needs within the scope of practice for a VN student.
3. **Implementation:** **Ability to** **perform and document skills.** Includes documenting client care activities in a timely manner, implementation of nursing interventions in an organized and efficient manner to all assigned clients and seeking learning opportunities when assigned client care is completed.

1. **Interpersonal Relations: Ability to interact with others.** Includes therapeutic communication and/or collaboration with clients, family members, and healthcare team, staff, instructor and peers, accepting feedback in an appropriate, professional manner, and submitting clinical assignments and/or clinical documentation on time using correct spelling and terminology.
2. **Evaluation: Ability to effectively evaluate care of assigned clients.** Includes assessing client’s response to nursing interventions performed, client teaching, and evaluating student’s ability to care for assigned clients.
3. **Professional and Ethical Behavior: Ability to demonstrate professional and ethical behavior.** Includes being on time and prepared for the clinical day (has all necessary supplies), reporting errors or safety violations promptly, accepting responsibility for client care, maintaining client dignity and confidentiality, displaying respect and maintaining a calm demeanor in stressful situations, adhering to all policies of Texarkana College and clinical agencies including but not limited to absenteeism, dress code, lying, stealing, physical/verbal abuse or harassment.
4. **Safety: Exhibits ability to give safe, competent care to assigned clients.** Includes assisting with ADLs, performing skills correctly, safely administering medications following all client rights, promptly reporting pertinent information to appropriate staff and/or instructor, and implementation of nursing actions designed to prevent complications. Also includes not performing skills that are outside the scope of practice for a VN student.

*Means of evaluation for each area: Direct observation of student; oral report to instructor; discussion of information received in report; written and/or electronic documentation/assignments; feedback from clients, family, team members, staff, and peers; and ability to discuss client care during post-conference.*

**The Vocational Nursing Student does NOT:**

1. Administer any IV specialty medications (Dopamine, Nitroglycerine, Chemotherapy, Potassium bolus, etc.)
2. Administer medications by IV push
3. Flush saline locks or give medications through saline locks
4. Perform any central line procedures, including dressing changes, or give medications by central line, including PICC lines
5. Remove vaginal packs
6. Perform vaginal or rectal examinations
7. Administer medications, do tube feedings, or perform advanced skills on newborn/pediatric clients (Please check with your instructor prior to performing skills on newborn/pediatric client)
8. Give medications in Labor and Delivery

 (Please discuss with instructor before administering any medications in this area)

**Call the instructor for procedures that require supervision. The student may perform skills with a licensed staff member after approval by the instructor.**

**Texarkana College**

**Health Sciences Division**

**Vocational Nursing Skills Checklist**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Demonstrate the proper procedure for the following:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Procedure** | **Date** | **Satisfactory** | **Needs Practice** | **Comments** |
|  **1. Ambulation** |  |  |  |  |
|  Dangle |  |  |  |  |
|  Transfer from bed to chair |  |  |  |  |
|  Ambulate with assistance |  |  |  |  |
|  Ambulate with IV pump/tubes |  |  |  |  |
|  **2. Anti-embolism stockings** |  |  |  |  |
|  Proper measurement |  |  |  |  |
|  Below the knee application |  |  |  |  |
|  Thigh high application |  |  |  |  |
|  **3. Application of heat** |  |  |  |  |
|  Warm, moist heat |  |  |  |  |
|  Thermal heating unit |  |  |  |  |
|  **4.** **Application of cold** |  |  |  |  |
|  Ice pack/Polar Care |  |  |  |  |
|  Cooling blanket |  |  |  |  |
|  **5.** **Bath** |  |  |  |  |
|  Assist with Sponge bath |  |  |  |  |
|  Complete bed bath |  |  |  |  |
|  Set-up Shower |  |  |  |  |
|  **6. Bladder Scan** |  |  |  |  |
|  **7. Chest tubes: Monitor** |  |  |  |  |
|  **8. Colostomy care** |  |  |  |  |
|  Change appliance |  |  |  |  |
|  Change bag |  |  |  |  |
|  Empty |  |  |  |  |
|  **9. Dialysis Access- Thrill/Bruit** |  |  |  |  |
| **10. Doppler Pulses** |  |  |  |  |
| **11. Enema** |  |  |  |  |
| Type: |  |  |  |  |
| Type: |  |  |  |  |
| **12. Feeding** |  |  |  |  |
|  Assist/Set-up |  |  |  |  |
|  Tube feeding |  |  |  |  |
| **13. Gastroccult**  |  |  |  |  |
| **14. Glucose monitoring** |  |  |  |  |
| **15. Hemocult** |  |  |  |  |
| **16. Incentive Spirometer** |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Procedure** | **Date** | **Satisfactory** | **Needs Practice** | **Comments** |
| **17. I&O** |  |  |  |  |
|  Intake- Oral |  |  |  |  |
|  Intake-PEG/NG |  |  |  |  |
|  Drainage from JP/Hemovac/Other |  |  |  |  |
|  Measure/Record Urine volume |  |  |  |  |
| **18. Linen change** |  |  |  |  |
|  Bed occupied |  |  |  |  |
|  Bed unoccupied |  |  |  |  |
| **19. Medication administration** |  |  |  |  |
|  Documentation |  |  |  |  |
|  Ear drops |  |  |  |  |
|  Eye drops |  |  |  |  |
|  IM |  |  |  |  |
|  Inhaler |  |  |  |  |
|  Intradermal |  |  |  |  |
|  Nasal spray |  |  |  |  |
|  NG tube |  |  |  |  |
|  Oral |  |  |  |  |
|  Patch |  |  |  |  |
|  PEG tube |  |  |  |  |
|  Pyxis medication removal |  |  |  |  |
|  Rectal |  |  |  |  |
|  Subcutaneous |  |  |  |  |
|  Topical |  |  |  |  |
| **20. Mouth care** |  |  |  |  |
|  Routine |  |  |  |  |
|  Dentures |  |  |  |  |
| **21. Moving patient** |  |  |  |  |
|  From stretcher to bed |  |  |  |  |
|  Up in bed with lift sheet |  |  |  |  |
|  Transfer to chair/BSC |  |  |  |  |
| **22. Neurochecks** |  |  |  |  |
| **23. NG tube** |  |  |  |  |
|  Discontinue |  |  |  |  |
|  Insertion |  |  |  |  |
|  Record intake |  |  |  |  |
|  Record drainage |  |  |  |  |
|  Verify placement |  |  |  |  |
| **24. Oxygen** |  |  |  |  |
|  Cannula |  |  |  |  |
|  Mask |  |  |  |  |
|  Set-up wall unit |  |  |  |  |
| **25. Portable Pulse Ox** |  |  |  |  |
| **26. Passive Range of Motion** |  |  |  |  |
| **27. Positioning** |  |  |  |  |
|  Pillows/Back rest |  |  |  |  |
|  Turn to side-lying position |  |  |  |  |
| **28. Post-mortem care** |  |  |  |  |
| **29. Restraints** |  |  |  |  |
|  Documentation |  |  |  |  |
|  Application |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Procedure** | **Date** | **Satisfactory** | **Needs****Practice** | **Comments** |
| **30. Safety** |  |  |  |  |
|  Bed Alarm |  |  |  |  |
|  Additional Safety Device |  |  |  |  |
| **31. SCD’s/Plexi-pulse application** |  |  |  |  |
| **32. Shampoo**  |  |  |  |  |
|  Bed patient |  |  |  |  |
|  Shampoo cap |  |  |  |  |
| **33. Shave** |  |  |  |  |
|  Preoperative |  |  |  |  |
|  Routine male |  |  |  |  |
| **34. Specimen Collection** |  |  |  |  |
|  Midstream voided urine |  |  |  |  |
|  Sputum |  |  |  |  |
|  Stool |  |  |  |  |
|  Urine from indwelling catheter |  |  |  |  |
|  Urine from In & Out Cath |  |  |  |  |
|  Wound culture |  |  |  |  |
|  Label specimen and send to lab |  |  |  |  |
| **35. Suction** |  |  |  |  |
|  Change canister |  |  |  |  |
|  Set-up Wall Suction |  |  |  |  |
|  Oral – Yankauer/Catheter |  |  |  |  |
| **36. Tracheostomy**  |  |  |  |  |
|  Suctioning  |  |  |  |  |
|  Trach care |  |  |  |  |
| **37. Standard Precautions** |  |  |  |  |
|  Glove |  |  |  |  |
|  Gown |  |  |  |  |
|  Handwashing |  |  |  |  |
|  Mask |  |  |  |  |
|  Surgical scrub |  |  |  |  |
| **38. Telemetry application** |  |  |  |  |
| **39. Urinary Catheters** |  |  |  |  |
|  Care of a patient with  Nephrostomy tubes |  |  |  |  |
|  Discontinue Foley |  |  |  |  |
|  Empty Foley |  |  |  |  |
|  In and Out Female |  |  |  |  |
|  In and Out Male |  |  |  |  |
|  Insert Female |  |  |  |  |
|  Insert Male |  |  |  |  |
|  Pure-wick |  |  |  |  |
| **40. Venipuncture** |  |  |  |  |
|  Care of a patient with IV pump |  |  |  |  |
|  Discontinue Saline Lock |  |  |  |  |
|  Discontinue IV  |  |  |  |  |
|  Starting an IV |  |  |  |  |
|  Hanging IV fluid |  |  |  |  |
|  Hanging IV Antibiotics |  |  |  |  |
|  Labeling blood at bedside |  |  |  |  |
|  Performing a blood draw |  |  |  |  |
|  Sending blood specimen to lab |  |  |  |  |
| **Procedure** | **Date** | **Satisfactory** | **Needs****Practice** | **Comments** |
| **41. Vital signs** |  |  |  |  |
|  Apical pulse |  |  |  |  |
|  Dinamap |  |  |  |  |
|  Manual blood pressure |  |  |  |  |
|  Radial pulse |  |  |  |  |
|  Respirations |  |  |  |  |
|  Temperature- Axillary |  |  |  |  |
|  Temperature- Oral |  |  |  |  |
|  Temperature- Tympanic |  |  |  |  |
|  Temperature-Temporal |  |  |  |  |
| **42. Wound care** |  |  |  |  |
|  Drain tube removal: |  |  |  |  |
|  Staple removal |  |  |  |  |
|  Suture removal |  |  |  |  |
|  Dressing Change |  |  |  |  |
|  Type: |  |  |  |  |
|  Type: |  |  |  |  |
| **43. Labor and Delivery** |  |  |  |  |
|  Assist with fetal heart monitoring  |  |  |  |  |
|  Immediate Post-delivery care |  |  |  |  |
|  Observe vaginal delivery |  |  |  |  |
|  Observe C/S delivery |  |  |  |  |
|  Shave Prep |  |  |  |  |
| **44. Nursery** |  |  |  |  |
|  Bathe newborn |  |  |  |  |
|  Feed and burp |  |  |  |  |
|  Vital Signs |  |  |  |  |
| **45. Doppler Fetal Heart tones** |  |  |  |  |
| **46. Postpartum** |  |  |  |  |
|  Check C/S incision |  |  |  |  |
|  Check fundus |  |  |  |  |
|  Pericare |  |  |  |  |
| **47. Other** |  |  |  |  |
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Instructor Signature Initials

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Instructor Signature Initials

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Instructor Signature Initials

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Instructor Signature Initials

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Instructor Signature Initials

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Instructor Signature Initials

Updated: 05/2023

VOCATIONAL NURSE – HISTORY DATA COLLECTION TOOL

**GENERAL INFORMATION** Admission Date: \_\_\_\_\_\_\_\_\_\_ Code Status: \_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_ Race:\_\_\_\_\_\_ Gender:\_\_\_\_\_\_\_\_ Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Background information (marital status, family members, occupation, education, religion, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HISTORY OF CURRENT ILLNESS**

**If in Hospital**: Chief Complaint (*“What made you come to the hospital?”)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If in Long Term Care: (**“***What led to LTC placement?”)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Admitting Diagnosis/Other Medical Diagnoses** *(Look at the History and Physical – H&P)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Diagnostic Tests**: *Provide date of test and summary of results (Impression)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Abnormal Lab Results:** *Provide date of test, lab values and note if high or low* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PATIENT HISTORY:** *(Y for yes, N for* No**):** Hypertension \_\_\_\_\_\_ Heart Disease \_\_\_\_\_

Lung Disease \_\_\_\_\_ Cancer \_\_\_\_\_ Diabetes \_\_\_\_\_ Stroke \_\_\_\_\_ Kidney Disease \_\_\_\_\_\_ Stomach/Colon Problems \_\_\_\_\_ Hypothyroidism \_\_\_\_\_ Seizures \_\_\_\_\_ Other \_\_\_\_\_\_\_\_

**PERSONAL HABITS/PATTERNS OF LIVING** *(When at home)*

Rest/Sleep: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Use of sleep aids: \_\_\_\_\_\_\_\_\_ Exercise: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hobbies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nutrition:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Caffeine\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nicotine\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alcohol/Drugs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

W/C\_\_\_\_\_\_\_ Walker: \_\_\_\_\_ Cane \_\_\_\_\_\_\_ Assistance Level with ADLs\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dentures: \_\_\_\_\_\_ Glasses:\_\_\_\_\_\_ Hearing aids: \_\_\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Texarkana College Vocational Nursing Program**

**Head to Toe Physical Assessment**

|  |
| --- |
| **VS & GENERAL APPEARANCE** |
| Pt Room# | Medical DX  | Date | Student Name |
| Vital Signs | T P R BP / PulseOx Pain /10  |
| Allergies |  |
| General - How does the client look? | Age\_\_\_\_\_\_\_\_\_\_\_ Male/Female Body Build: Thin Cachectic Obese WNLFacial Expression: Anxious Happy Sad Angry  |
| **HEAD** |
| Level of Consciousness and Orientation | Alert Awake Lethargic Drowsy Responds to touch/voice Oriented x \_\_\_\_: Person Place Time Event  |
| Speech | Clear Low Volume Garbled Stuttering Expressive Aphasia Other:  |
| Eyes | Sclera: White Red YellowPERRL Other: |
| Ears | Unaided hearing Hard of hearing Deaf Hearing aid Drainage |
| Oral Mucosa | Pink Moist No Lesions Other: |
| **CHEST** |
| Respirations | Rhythm: Regular Irregular Quality: Unlabored Labored Deep ShallowRate:  |
| Lung Sounds |  \*\*Be sure to check all lung fields (LUL, LLL, RUL, RML, RLL)\*\*Clear LUL RUL LLL RLL RML Anterior PosteriorWheezes location\_\_\_\_\_\_\_\_\_\_ Crackles location\_\_\_\_\_\_\_\_\_\_ Nasal flaring Sternal retraction Intercostal retraction\*\*Do lung sounds improve with cough and deep breath? If no, report to RN |
| Cough | None Nonproductive Productive Sputum: amount color  |
| Oxygen | Room Air O2 at \_\_\_\_\_\_L/min Nasal Cannula Mask Other:  |
| Skin Turgor | Rebounds Quickly Tents Slow Rebound Tight/Taut |
| Heart Sounds | Apical Pulse Rate: Rhythm: Regular IrregularQuality: Strong Faint Muffled Distant Murmur-like soundTelemetry Rhythm: |
| Other (IVs, Pacemaker, Incisions/dressings, etc) |  |
| **ABDOMEN** |
| Look | Nondistended Distended Obese Concave/Scaphoid Masses – Location:  |
| Listen: Bowel Sounds | RLQ RUQ LUQ LLQ Normoactive Hypoactive Hyperactive Absent |
| Feel | Soft Firm Nontender Tender – Location:  |
| Bowel Movement | Continent Incontinent Last BM: BRP BSC Brief Pad |
| Tubes  | None NG GT/PEG JT Suction: Drainage: Color\_\_\_\_\_\_\_\_\_\_\_ Amount\_\_\_\_\_\_\_\_Tube Feeding: Formula\_\_\_\_\_\_\_\_\_\_ Rate\_\_\_\_\_\_\_\_\_\_ Bolus Schedule\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Ostomy | None Location Stoma Output (Color/amount) Appliance Intact: Yes No Describe surrounding skin:  |
|  |
| **PELVIC/BUTTOCKS/BACK** |
| Urine | Continent Incontinent Independent with toiletingColor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Clear Cloudy Sediment Catheter: Type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Patent Amount in Drainage Collection Bag  |
| Pressure Area | Location  |
| Pressure Ulcer  | Location Describe: If dressing in place – is it clean, dry and intact? |
| **UPPER EXTREMITIES (Remember to compare right and left)** |
| Skin Appearance | Color: WNL Pallor Cyanosis Jaundice ErythemaTemperature: Warm Hot Cool Cold Dry Moist |
| Range of Motion | RUE: LUE:  |
| Pulses | RUE Radial: 1+ 2+ 3+ 4+ LUE Radial: 1+ 2+ 3+ 4+RUE Brachial: 1+ 2+ 3+ 4+ LUE Brachial: 1+ 2+ 3+ 4+  |
| Capillary Refill | RUE: <3 sec Delayed: \_\_\_\_\_\_ sec LUE: <3 sec Delayed: \_\_\_\_\_\_ sec |
| Strength | Hand Grips: Strong Moderate Weak Equal or Unequal Explain:  |
| Edema | NonePresent Location\_\_\_\_\_\_\_\_\_\_\_\_\_ Pitting: 1+ 2+ 3+ 4+ Non Pitting: Mild Moderate Severe  |
| Other (IVs, Fistulas, Skin tears, dressings etc) | \*\* For All Intravenous Access (peripheral lines and central lines): Identify and describe site, assess solution/rate infusing or note saline/hep lock. |
| **LOWER EXTREMITIES (Remember to compare right and left)** |
| Skin Appearance | Color: WNL Pallor Cyanosis Jaundice ErythemaTemperature: Warm Hot Cool Cold Dry Moist |
| Range of Motion | RLE: LLE:  |
| Pulses | RLE Pedal: 1+ 2+ 3+ 4+ LLE Pedal: 1+ 2+ 3+ 4+RLE Popliteal: 1+ 2+ 3+ 4+ LLE Popliteal: 1+ 2+ 3+ 4+RLE Femoral: 1+ 2+ 3+ 4+ LLE Femoral: 1+ 2+ 3+ 4+  |
| Capillary Refill | RLE: <3 sec Delayed: \_\_\_\_\_\_ sec LLE: <3 sec Delayed: \_\_\_\_\_\_ sec |
| Strength | Foot Pushes: Strong Moderate WeakEqual or Unequal Explain: |
| Edema | NonePresent Location\_\_\_\_\_\_\_\_\_\_\_\_\_ Pitting: 1+ 2+ 3+ 4+ Non Pitting: Mild Moderate Severe  |
| Other (Dressings, Casts, Braces, TED hose, SCDs, etc) |  |
|  |

**Current or Active Treatment Orders**

|  |
| --- |
| Code Status: Telemetry: |
| Diet:  |
| Activity:  |
| Vital Signs:0700 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pain Level\_\_\_\_\_\_\_1100\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pain Level\_\_\_\_\_\_\_ |
| Glucose Monitoring & Scale\_\_\_\_\_\_\_\_\_\_\_\_Times: |
| Labs ordered &/pending: |
|  |
|  |
| Radiology/Diagnostic Test Ordered and completed: |
|  |
|  |
| RT-Oxygen\_\_\_\_\_\_\_LPM\_Breathing Teatments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Therapy (PT,OT,ST):  |
| IV or SL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Additional Orders: |

**Diagnosis/Disease Process\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **Risk Factors** | **Pathophysiology**  | **Diagnostic Testing: Radiology & Lab** |
| **Nursing Interventions** | **Signs & Symptoms** | **Medications & Treatments** |

**Reference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MEDICATION ADMINISTRATION RECORD**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Drug**Example: furosemide (Lasix) | **Dose**20 mg | **Route**Oral/PO | **Frequency**BID | **Classification**Functional: Loop DiureticU: CHF, Liver/Kidney failure | **Nursing Interventions/Implications**I/O, DWT, Monitor B/P and K+ Levels |
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Nursing Care Plan

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| --- | --- | --- | --- |
| Nursing Diagnosis with supporting Subjective and Objective Data | Patient Centered Expected Outcome/Goal | Nursing Interventions | Evaluation |
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TEXARKANA COLLEGE

VOCATIONAL NURSING PROGRAM

PROBLEM LIST

Prioritize and place your problems in the appropriate NANDA format (Nursing diagnosis with “Related To” statement)

|  |  |  |  |
| --- | --- | --- | --- |
| Acute Pain r/t injuries from recent fallPriority-1 | **Problem**  | **Problem**  | **Problem**  |
| **Subjective Data:**“My hip hurts really bad.” “I fell out the bed yesterday.” | **Subjective Data:** | **Subjective Data:** | **Subjective Data:** |
| **Objective Data:**Guarding L hipCrying Rated 9/10 on numeric scaleFacial grimacing when turningB/P 160/110 at 0800; no history of HTN, | **Objective Data:** | **Objective Data:** | **Objective Data:** |

TEXARKANA COLLEGE

VOCATIONAL NURSING PROGRAM

PROBLEM LIST

Prioritize and place your problems in the appropriate NANDA format (Nursing diagnosis with “Related To” statement)

|  |  |  |  |
| --- | --- | --- | --- |
| **Problem**  | **Problem**  | **Problem**  | **Problem**  |
| **Subjective Data:** | **Subjective Data:** | **Subjective Data:** | **Subject Data:** |
| **Objective Data:** | **Objective Data:** | **Objective Data:** | **Objective Data:** |