Faculty Development Plan

Teaching

Philosophy:
I believe that “we teach who we are” (Palmer, 1997). My best me incorporates spiritual strength, scientific and experiential knowledge, and a passion to better the lives of all those I touch. In the educator role, I offer myself to students; I share my experience and knowledge in the hopes of enlarging their horizons as they learn the healer’s art.

Goals:
My goal for teaching is to be a role model. In the classroom I will use current resources to present the most meaningful nursing knowledge available. In the clinical setting I will encourage and model professional behaviors, knowledgeable interventions and compassionate interactions with clients. I will make myself available to students. In particular, I will continue to provide assistance to students who struggle with understanding difficult concepts and need extra assistance to conquer the more demanding testing skills required to succeed in the program and to pass the NCLEX examination. In my personal life, I will exemplify “the Master Healer” to the best of my ability. An integral element of this goal will be to treat all I come in contact with in a compassionate manner, honoring cultural, spiritual, age, educational and health variables with respect.

Plans:
1. Keep up with current literature and incorporate it in my assigned lectures.
2. Continue to strongly support and educate new faculty working in NURS 342 clinical areas.
3. Refine and disseminate a disc to help clinical faculty utilize post-conference sessions as a meaningful, educational offering.
4. Continue to present and refine the optional “test taking tips” seminar in conjunction with the didactic NURS 341 course each semester.
5. Pursue a doctoral degree in nursing education beginning in fall of 2013.

Citizenship:

Goals:
I desire to be an active advocate for nursing and nursing education in the professional and university communities. Within the College of Nursing I will actively participate on committees that support and improve the quality of teaching for our students. On the local/state level I will engage in organizations that improve the visibility and effectiveness of professional nurses. Nationally and internationally I will contribute to the discipline of nursing through projects, presentations, authoring journal articles, engaging in international networking efforts and joining organizations that increase the visibility and effectiveness of nurses.

Plans:
1. Continue to actively serve on College of Nursing Committees
   a. Global Health and Human Diversity Council
   b. Undergraduate Academic Council
   c. Faculty Development Council
2. Serve as a board member for the local chapter of Sigma Theta Tau International Honor Society.
3. Serve on the Board of the Utah Nurses Association.
4. Continue membership in appropriate nursing organizations.

### Contribution to the Discipline

#### Goals:

Professional Track faculty are required to engage in activities that provide contribution to the profession of nursing. The two areas of contribution I have focused on have been on the development of clinical faculty/clinical education techniques and in the arena of global health and cultural sensitivity within the practice of nursing. I will continue through committee work and mentoring to support the development of part-time and new faculty in the arena of clinical education. I have determined to invest more efforts into the cultural focus both in the college of nursing and in my doctoral studies, however. Professional presentations in national and international venues on the topic and/or publishing articles in professional nursing journals are methods of sharing my expertise and developing nursing knowledge on the topic.

#### Plans:

1. I will submit abstracts for presenting on cultural issues in a professional venue at least once each year.
2. I will continue to develop relationships with peers in the College of Nursing, through professional organizations and with international nursing leaders, especially in Ghana.
3. I will develop a working relationship with a recognized expert in the area of culture and nursing applications.
4. I will pursue opportunities to improve my writing skills and join a writing group within the University.
5. I will write at least half an hour twice weekly, scheduling the time in my work calendar.
6. I will submit at least one article per year for publication.

#### Strengths and Skill Sets:

I have a passion for the profession of nursing and for teaching.

I have extensive practical experience dealing with culturally diverse populations.

I am able to integrate science, empiric nursing knowledge and spiritual content into a cohesive whole in both didactic and clinical presentations to students.

I have had multiple opportunities to share my expertise with peers in professional venues.

I am organized and pay attention to details in my work.
I am able to adjust my teaching strategies based on feedback from peers, students and best practice information.

I feel I work with a very strong team that is able to provide a quality educational experience for students in a faith-based educational system.

**Areas for development:**

I would like to author independently in a professional journal.

I tend to over-plan and over-prepare at times, which can be time wasting.

I sometimes struggle with the changing technology available to support my teaching efforts.

I want to more effectively use a teaching assistant as I organize my work load.

Although as a course coordinator I will continue to work with clinical faculty regularly, I need to concentrate more of my efforts toward my focus area of global health and cultural diversity.

**Resources Needed:**

**Teaching**

1. Financial and schedule support to attend university and nursing education conferences to improve my teaching skills.
2. Continuing support to obtain texts, printing services, and other teaching resources for courses I teach.
3. Continuing resources for a TA to assist with courses I coordinate.
4. NURS 341 team support in terms of flexibility in lecture schedule if needed to accommodate my doctoral studies.

**Citizenship**

1. Continuing assignment to College of Nursing committees as above mentioned.
2. Rarely may need time accommodation for work on SSTI and UNA boards.

**Scholarship**

1. Continued financial, supplies, and schedule support for professional nursing conference presentations
2. Occasional scheduling flexibility to attend on-campus writing workshops, seminars, and writing group to improve my writing skills
3. Continued involvement in the GHHD Ghana program to further work on cultural diversity
Course Development Project – Grant Proposal

Course Overview

NURS342: Nursing Care of Adults with Acute and Chronic Illnesses Clinical Practicum is the foundational medical-surgical experience for nursing students. This clinical is the first in-hospital experience students have with acutely ill clients. Learning in this semester exposes students to basic nursing theory, common illnesses, medication administration and safety principles that will be utilized throughout every student’s entire nursing career. The students will have one clinical day, lasting 10 – 12 hours, each week of the semester. The day in the clinical setting is divided into three distinct experiences: a) a preconference where the student presents the particulars of their assigned client in a manner that indicates they are ready to safely assist with care during the shift, b) actual clinical experience where the student, along with a mentoring Registered Nurse, provide client care for 8 – 10 hours, and c) a post conference, during which the clinical faculty member provides a milieu which allows students to share learning from the day, introduces new concepts and skills, and/or reinforces previously learned nursing content.

Problem Statement

A unique challenge in professional programs such as the Baccalaureate Nursing Program, is that often times clinical faculty do not have a background in education. They are often nurses practicing in the clinical setting. However, they do have strong practical skill sets that students can emulate and learn from. These practicing nurses often struggle with the post conference experience. Topic selection, leveled teaching methods, appropriate handouts, educational tools, and learning measurement tools are often difficult or impossible for them to find and implement.

Project Overview

This monies for this project would be used to create a DVD that would list a wide variety of appropriate post conference topics. Each topic would have a topical folder within the DVD. Topical folders would include lesson plans, PowerPoint presentations, handouts and activities that have been developed by this faculty member for this particular course. In addition, directions guiding the clinical faculty member to other electronic or hard copy resources would be listed. Often appropriate hands-on equipment to facilitate the experience are available to the nurse in the clinical setting. With this DVD, preparation could be made before the clinical post conference to obtain these tools to enhance the learning experience. This educator believes this educational tool would be of great benefit to College of Nursing adjunct clinical faculty. Current full time faculty would also be able to use the DVD, perhaps providing more consistency in the post conference experience for this course.
Student Name:

Professional Practice Paper Grading Rubric

1. Professional Practice Paper (The purpose of this assignment is to more closely tie required courses of research, medical surgical lecture and clinical coursework together.)
   a. Choose an article found in a professional nursing journal or on line source that relates to your **NSG 342 Process Paper client or another client whom you have provided care. The article must relate to a specific medical/surgical client.**
   b. Write a 1-2 page paper on the article to include the following:
      i. Give a summary of the article findings or recommendations
      ii. Explain how the paper is pertinent to the diagnosis or care of the client – be specific and relate the findings to a patient to whom you have provided care. How do the findings from the article impact your care of this patient?
      iii. Defend the scholarship of the paper. The assignments from your N320 research course will assist in this process. (Were the findings significant? How do you know that this article is valid? Were accepted tools used in the study? Is the source peer-reviewed? Does the information agree with other best practice information you have been researching?)
      iv. Flow of information will be smooth with no grammar, spelling, or punctuation errors. Appropriate in-paper citations in APA format will be done. Article will be referenced at end of paper in APA format. **Article also must be submitted as a pdf file with your paper.**

<table>
<thead>
<tr>
<th>Points allocated:</th>
<th>Actual points received:</th>
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<tr>
<td>1. Summary of article findings or recommendations</td>
<td>15 points</td>
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<td>2. How paper is pertinent to the diagnosis or care of the client</td>
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<td>3. Scholarship of the paper</td>
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<td>4. Grammar, readability, punctuation, spelling, APA citations</td>
<td>5 points</td>
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<td>TOTAL:</td>
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Classes are held in B135 JFSB from 1300 - 1550 on Tuesdays.

Reading assignments are often quite comprehensive. Note some assignments specify ‘read’ while others are for ‘review.’ The objectives, case studies, and power points are provided to help focus your studies.

<table>
<thead>
<tr>
<th>Week # Date &amp; Lecturer(s)</th>
<th>Lecture Preparation</th>
<th>Learning Objectives:</th>
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<tbody>
<tr>
<td>#1 September 3</td>
<td>Review syllabus</td>
<td>1. Getting to know the class (1300-1315)</td>
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<tr>
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<td>a. Spiritual thought, prayer</td>
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<td>b. Students’ perceptions</td>
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<td>c. Course introduction and it’s relation to N342 and N343</td>
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<td>2. Introduction of Course Faculty members (1315-1325)</td>
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<td>a. Background</td>
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<td>b. Professional Roles</td>
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<td>3. Introduction of Kathryn Whitenight (1325 – 1330)</td>
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<td>a. Incident procedures</td>
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<td>4. Introduction of Peggy Anderson (1335-1340)</td>
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<td>a. Perioperative Information</td>
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<td>5. Introduction of Debra Wing (1340 – 1350)</td>
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<td>a. Lab information</td>
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<td>6. Alyssa Lark &amp; Melanie Vandenbark(1350 – 1400)</td>
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<td>a. Background</td>
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<td>b. Assignment submission instructions</td>
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<td>Break : 1400 - 1410</td>
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<td>7. Review of N341 Documents (1415- 1445)</td>
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<td>i. Syllabus</td>
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<td>ii. Integrated Course Calendar</td>
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<td>iii. Lecture Preparation Schedule</td>
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<td>iv. Grade Sheet</td>
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<td>8. Discussion - learning environment (1445 – 1500)</td>
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<td>Break: 10:00-1010</td>
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<td>9. Bloom’s taxonomy/learning/application/test questions (1510 - 1520)</td>
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<td>10. Introduction to laboratory values and interpretation (1520 – 1535)</td>
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<td>11. Review of Diabetes Mellitus (1535 – 1550)</td>
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<td>Dismiss: 1550</td>
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<td>#2 September 10</td>
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<tr>
<td>Perioperative Nursing</td>
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<td>• Discuss the Nursing Process as it relates to Perioperative Nursing</td>
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<td>Peggy</td>
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<td>• Demonstrate pre-operative teaching for the surgical patient and family.</td>
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<td>• Identify common pre-operative medications and the nurse’s role in administering them.</td>
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<td>• Discuss a minimum of four different types of anesthesia used during surgery, identifying advantages and disadvantages.</td>
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<td>• Identify three physical and psycho-social factors that may affect the patient’s course of surgery and hospitalization. Describe appropriate nursing care for these factors.</td>
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<td>• Describe five different patient positions used in surgery with an example of a surgical procedure for each.</td>
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<td>• Identify eight principles of asepsis as established by AORN Standards.</td>
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<td>• Discuss the various roles of the RN in surgery as well as roles of other members of the surgical team.</td>
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<td>• Demonstrate nursing roles in PACU as well as the use of the PACU assessment and scoring system.</td>
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<td>• Discuss and be able to teach common postoperative activities to the surgical client. Understand the rationale for each activity.</td>
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<td>CLASS ACTIVITIES: Lecture, discussion, case studies/critical thinking activities and group activities. Incorporate the Nursing process and Nursing Diagnoses’ for Positive Patient Outcomes. Discussion of Course Outcomes.</td>
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<td>#3 September 17</td>
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<td>• Articulate plans of care for patients requiring respiratory interventions: airway suctioning, ventilator support and chest tubes.</td>
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<td>• Identify appropriate respiratory infection control techniques to protect the hospitalized patient.</td>
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<td>Health Promotion and Maintenance</td>
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<td>• Identify patients at highest risk for selected chronic and acute respiratory system dysfunction.</td>
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<td>Psychosocial Integrity</td>
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<td>• Discuss teaching objectives for the patient with chronic lung disease.</td>
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<td>Physiological Integrity</td>
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<td>• Review general anatomy and principles of human respiratory function.</td>
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<td>• Discuss assessment and diagnostic testing options used to evaluate the patient with chest and respiratory problems.</td>
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<td>• Discuss risk factors, assessment, pathophysiology, diagnostic criteria, treatments, evaluations,</td>
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</tbody>
</table>
| Pulmonary Embolism  
-Chapter 33 p.682-684  
***You may skip sections on pathophysiology and pharmacology as these are covered in other classes  
Additional Support:  
1. ATI chapters 3-19 |
| and expected outcomes for patients with selected respiratory system disorders. |

### #4  
**September 24**  
**Neurological dysfunction part 1**  
**Julie**  
Ignatavicius & Workman:  
- Review Chapter 43,  
“Assessment of the Nervous System” as needed for Neuro 1 & Neuro 2 lectures.  
- Headaches p. 928-932  
- Seizures and Epilepsy p. 932-937  
- Transient Ischemic Attack and Stroke (Brain Attack) p. 1005-1020  
- ATI: chapters 80, 90  

#### Safe and Effective Care Environment  
- Determine a patient’s allergy to iodine-based contrast media before diagnostic testing.  
- Plan health teaching for hospital discharge to home or other setting for patients with chronic problems of the brain.  
- Implement interventions to protect patients with seizures from injury.  
- Prioritize care for patients with a stroke.  

#### Health Promotion and Maintenance  
- Explain pre-test and post-test care associated with neurologic diagnostic testing.  
- Teach patients with chronic headaches about complementary and alternative therapies  
- Develop a teaching plan about risk factors for having a stroke.  

### #5  
**October 1**  
**Neurological dysfunction part 2**  
**Julie**  
Ignatavicius & Workman:  
- Meningitis and Encephalitis p.937-941  
- Back pain p.960-967  
- Multiple Sclerosis p. 978-983  
- Myasthenia Gravis p. 991-996  
- Guillain-Barre Syndrome p. 987-991  
- Diseases of the Cranial Nerves p.1000-1002  
- ATI chapters 84, 85, 86, 87, 91  

#### Safe and Effective Care Environment  
- Develop a teaching plan to educate the patient on ways to prevent back and neck pain.  

#### Health Promotion and Maintenance  
- Develop a discharge plan for the patient and family after a lumbar or cervical laminectomy.  

### #6  
**October 8**  
**Fluid, Electrolytes, Nutrition, and Metabolism**  
**Blaine**  
Ignatavicius & Workman:  
- Chapter 13: Review pages 166-169. Study pages 169-194  
- Chapter 14: Review pages 196-199. Study pages 199-208  
- Chapter 15: Study pages 210-212  
- ATI Topics – Fluid and electrolyte imbalances and acid-base imbalances  

#### Chapter 13:  
- Use safety precautions to prevent injury or death when administering parenteral potassium-containing solutions.  
- Assess patients for factors that increase the risk for fluid and electrolyte imbalances, especially older adults.  
- Teach patients at risk for fluid or electrolyte imbalances as a result of drug therapy about the manifestations of the imbalance.  
- Explain the relationship between weight gain or loss and fluid imbalance.  
- Demonstrate accurate calculation of intake and output.  
- Use laboratory data and clinical manifestations to determine the presence of fluid or electrolyte imbalances.  
- Interpret blood chemistry laboratory results to determine whether the patient has a fluid or electrolyte imbalance and to determine the effectiveness of interventions.  

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<tr>
<th>Date</th>
<th>Assignment</th>
<th>Details</th>
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| October 15 | Cardiovascular Disorders Part 1 Blaine                                    | "HEPATOBILIARY: Ignatavicius & Workman: Liver Problems – p.  “Prioritize interventions for patients who have dehydration or fluid overload.  Prioritize interventions for patients who have specific electrolyte imbalances."

**Chapter 14:**
- Describe the relationship between free hydrogen ion level and pH.
- Explain the concept of compensation.
- Compare the roles of the respiratory system and the kidneys in maintaining acid-base balance.
- Use laboratory data and clinical manifestations to determine the presence of acid-base imbalances.
- Interpret arterial blood gases to determine whether a patient has one of the following: respiratory acidosis, respiratory alkalosis, metabolic acidosis, or metabolic alkalosis.
- Prioritize nursing care for the patient with acid-base imbalance.

**Chapter 15:**
- Describe the reasons for using infusion therapy.
- Describe the 3 types of infusion therapy fluids, when they are used, and their possible complications.
- Identify the essential components of a prescription for infusion therapy.

**Chapter 38:**
- Identify risk factors for vascular problems.
- Teach patients about lifestyle modifications to prevent vascular problems.
- Explain the pathophysiology of arteriosclerosis and atherosclerosis.
- Interpret essential laboratory data related to risk for atherosclerosis.
- Discuss the role of nutrition therapy in the management of patients with atherosclerosis.
- Describe the differences between essential and secondary hypertension.
- Develop a collaborative plan of care for a patient with essential hypertension.
- Develop a teaching plan for patients on the adverse effects of drugs for hypertension and when to notify the health care provider.
- Compare common assessment findings present in patients with peripheral arterial and peripheral venous disease.
- Identify when venous thromboembolism (VTE) and complications of VTE occur.
- Plan nursing interventions to help prevent VTE.
- Describe the nurse’s role in monitoring patients who are receiving anticoagulants.

**Chapter 40:**
- Plan continuity of care between health care agencies or hospital and home when discharging patients who have had cardiac interventions or surgeries.
- Differentiate between modifiable and nonmodifiable risk factors for coronary artery disease (CAD).
- Develop a teaching plan for patients at risk for CAD regarding cardiovascular risk modification programs and lifestyle changes.
- Compare and contrast the clinical manifestations of stable angina, unstable angina, and myocardial infarction (MI).
- Interpret physical and diagnostic assessment findings in patients who have CAD.
- Prioritize nursing care for patients who have chest pain.
- Teach patients and families about drug therapy for CAD.
- Explain nursing care for patients who have had the following for treatment of a myocardial infarction: thrombolysis, percutaneous transluminal coronary angioplasty, and coronary artery bypass graft (CABG).

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# Dys  

**October 22**  
Cardiovascular Disorders Part 2 Blaine  

**Chapter 37:**  
- Provide the patient with heart failure (HF) and the family information on discharge to home, hospice, or other community-based setting.
- Provide special care needs of older adults with heart failure.
- Teach patients about actions to maintain health and prevent worsening heart failure.
- Explain the pathophysiology of heart failure.
- Identify priority problems for patients with heart failure.
- Explain how common drug therapies improve cardiac output and prevent worsening heart failure.
- Identify the four Heart Failure Core Measures required by The Joint Commission.

**Chapter 39:**  
- Define shock.
- Identify the role of poor oxygenation and tissue perfusion in shock.
- Identify the manifestations of cardiogenic shock and hypovolemic shock.
- Identify appropriate treatments for patients in cardiogenic or hypovolemic shock.

**Chapter 11:**  
- Teach people at risk how to prevent heat-related and cold-related injuries, especially older adults.
- Identify the manifestations of heat exhaustion and heat stroke.
- Identify the manifestations of hypothermia.
- Prioritize care for patients who have heat-related or cold-related injuries.

**Safe and Effective Care Environment**  
- Collaborative with health care team members to provide care for patients with...
<table>
<thead>
<tr>
<th>Week</th>
<th>Assignments</th>
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| #9  | Ignatavicius & Workman:  
- Diagnostic Assessment p. 1184-1189  
- Oral Cavity Problems p. 1193-1196  
- Esophageal Problems p. 1203-1211, 1217-1218  
- Stomach Disorders p. 1220-1233, Gastric Cancer 1234-1238  
- Noninflammatory Intestinal Disorders p. 1240-1253, 1254-1257, 1260-1261, 1262-1263  
- Inflammatory Intestinal Disorders 1266-1288  
**you may skip the areas on pathophysiology and pharmacology as these are covered in other classes.  
Review: ATI Unit 7 pp 603-705, 714-753  
| Safe and Effective Care Environment  
- Assess patient for complication of diagnostic tests.  
- Describe the importance of collaborating with health care team members to provide care for patients with IBD.  
**Health Promotion and Maintenance  
- Develop a teaching plan for patients who have stomatitis to promote digestion and nutrition.  
- Teach the patient about lifestyle changes to decrease GERD and discomfort of hiatal hernias.  
**Psychosocial Integrity  
- Assess patient and family response to a diagnosis of CRC.  
- Describe patient and family response to chronic IBD.  
**Physiological Integrity  
- Explain and interpret common laboratory tests for a patient with a GI health problem.  
- Perform focused assessments for patients with esophageal health problems.  
- Compare etiologies and assessment findings of acute and chronic gastritis.  
- Identify the most common medical complications that can result from PUD.  
- Prioritize interventions for patients with upper GI bleeding.  
- Evaluate the impact of gastric disorders on the nutrition status of the patient.  
- Develop a teaching-learning plan for patients with IBS.  
- Identify risk factors for CRC.  
- Explain the differences between large bowel and small bowel obstructions.  
- Explain the pathophysiology of malabsorption syndrome.  
- Differentiate common types of acute inflammatory bowel disease.  
- Compare and contrast the pathophysiology and clinical manifestations of ulcerative colitis and Crohn’s Disease  
- Identify priority problems for patients with ulcerative colitis.  
- Explain the role of nutrition therapy in managing the patient with diverticular disease.  |
| #10 | Ignatavicius & Workman:  
Review: Chapter 68  
Read Chapter 69-71  
FOCUS:  
- Chapter 69 p.1490-1496  
- Cystitis  
- Chapter 69 p.1507-1512  
- Urolithiasis  
- Chapter 70 p.1518-1532  
- PKD - Diabetic Nephropathy  
**Chapter 71 p.1537-1572  
**You may skip sections on pathophysiology and pharmacology as these are covered in other classes  
Additional Support:  
1. ATI chapters 42-50  
| Safe and Effective Care Environment  
- Discuss methods to prevent further injury in patients experiencing systemic complications from chronic renal disease.  
- Create an infection control plan for the patient undergoing hemodialysis.  
**Health Promotion and maintenance  
- Identify critical teaching elements for the client after kidney transplantation.  
**Psychosocial Integrity  
- Develop teaching plans for patients undergoing hemodialysis and peritoneal dialysis treatments.  
- Articulate a collaborative plan of care for the patient undergoing kidney surgery, considering both expected and problematic potential outcomes.  
**Physiological Integrity  
- Review general anatomy and function of the renal and urinary systems  
- Articulate risk factors, assessment, pathophysiology, diagnostic testing, interventions, evaluation and expected outcomes for patients with selected renal and urinary tract disorders.  
- Differentiate between causes, evaluation and management of patients with chronic and acute renal failure.  |
<table>
<thead>
<tr>
<th>#11</th>
<th>November 12</th>
<th>Blaine Pain of Oncologic Conditions and Oncologic Hematologic Problems</th>
<th>Safe and Effective Care Environment</th>
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<tr>
<td></td>
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<td>-From “Lupus” 343-354.</td>
<td>Use appropriate techniques to reduce the risk for infection in an immunosuppressed patient.</td>
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<td>-Ch. 21 p. 357-381</td>
<td>Use Standard Precautions to prevent HIV transmission to you, patients, and other members of the health care team.</td>
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<td>-Ch. 22 p. 383-394</td>
<td>Implement measures to prevent anaphylaxis.</td>
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<td>**you may skip the areas on pathophysiology and pharmacology as these are covered in other classes.</td>
<td><strong>Health Promotion and Maintenance</strong></td>
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<td>**you may skip the areas on pathophysiology and pharmacology as these are covered in other classes.</td>
<td>Assess all patients for high-risk behaviors for HIV disease.</td>
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<td>Teach patients with allergies how to avoid known allergens and, if needed, how to self-inject epinephrine.</td>
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<td></td>
<td><strong>Psychosocial Integrity</strong></td>
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<td></td>
<td>Use a nonjudgmental approach when discussing sexual practices, sexual behaviors, and recreational drug use.</td>
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<td></td>
<td><strong>Physiological Integrity</strong></td>
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<td></td>
<td>Explain the differences between inflammation and immunity in terms of cells, functions and features.</td>
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<td>Interpret a WBC count with differential to indicate no immune problems, immune suppression, Infection, or an allergic infection.</td>
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<td>Prioritize nursing interventions for patients with systemic lupus erythematosus and systemic sclerosis.</td>
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<td>Compare primary and secondary immune deficiencies for cause and onset of problems.</td>
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<td></td>
<td>Distinguish between the conditions of HIV infection and AIDS for clinical manifestations and risks for complications.</td>
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<td>Describe the ways in which HIV is transmitted.</td>
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<td></td>
<td>Compare the characteristics and manifestations of type I, type II, type III, type IV, and type V hypersensitivity reactions.</td>
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<td></td>
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<td></td>
<td>Prioritize care for the patient experiencing anaphylaxis.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>#12</th>
<th>November 19</th>
<th>Ignatavicius &amp; Workman: Review: Ch. 52 Read: Chapter 53-54 FOCUS: -Chapter 53 p.1120-1133 -Chapter 54 p.1143-1162 Fractures -Chapter 54 p.1169-1174 Sports/Other Injuries ***You may skip sections on pathophysiology and pharmacology as these are covered in other classes Additional Support: -ATI pp 921-971</th>
<th>Safe and Effective Care Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Develop an infection control plan of care for the patient undergoing joint replacement, considering both expected and problematic potential outcomes.</td>
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<td><strong>Health Promotion and Maintenance</strong></td>
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<td>Identify causes of musculoskeletal pathology that stem from postural, CNS, congenital, disease related and traumatic influences.</td>
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<td><strong>Psychosocial Integrity</strong></td>
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<td>Discuss the effects of immobility in relation to physiological and psychosocial impact, incorporating growth and development theory.</td>
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<td></td>
<td><strong>Physiological Integrity</strong></td>
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<td></td>
<td>Review basic structure and function of the musculoskeletal system.</td>
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<td>Explore treatment options for patients with skeletal dysfunctions, with emphasis on pharmacologic, physical therapy, traction and surgical interventions.</td>
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<td>Articulate risk factors, assessment, pathophysiology, diagnostic testing, evaluation and expected outcomes for patients with selected acute and chronic musculoskeletal dysfunctions.</td>
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<td></td>
<td>Discuss principles of care for the neutropenic patient.</td>
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<td><strong>Health Promotion and Maintenance</strong></td>
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<td>Educate on factors leading to appropriate referral for “hospice care” in both the in-patient and out-patient settings.</td>
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<td>Formulate a teaching plan on pain for the patient with bone metastasis.</td>
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<td></td>
<td><strong>Psychosocial Integrity</strong></td>
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<td>Identify assessment data collected to evaluate pain, anxiety and grief in the newly diagnosed oncologic patient.</td>
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<td></td>
<td><strong>Physiological Integrity</strong></td>
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<td>Discuss the definition of cancer, its incidence, cost, and affect on patient’s quality of living.</td>
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<td>Discuss the three processes which cause anemia, i.e., poor production, destruction, and loss.</td>
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<td>Evaluate the primary three modalities of cancer treatment.</td>
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<td>Describe epidemiology, signs &amp; symptoms, treatment options, and nursing care for patients with selected cancer diagnoses.</td>
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<td>Explain addiction, balanced analgesia, breakthrough pain, dependence, opioid, pain, pain tolerance, PCA, referred pain, sensitization, and tolerance.</td>
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<tr>
<td>#14</td>
<td>Ignatavicius &amp; Workman:</td>
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<tr>
<td>December 10</td>
<td>- Review Ch. 64 as needed</td>
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<tr>
<td>Endocrine and reproductive systems</td>
<td>- Ch. 65 p. 1371-1390</td>
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<td>- Ch. 66 p. 1393-1409</td>
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<tr>
<td>Julie</td>
<td>- Review Ch. 67 as needed</td>
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<td></td>
<td>- Ch. 74 p. 1611-1614, 1624-1627</td>
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<td>- Ch. 75 p. 1630-1651</td>
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<tr>
<td></td>
<td>- Ch. 76 p. 1652-1653, review remainder of chapter.</td>
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<tr>
<td>Additional Support:</td>
<td>- ATI chapters 51-59</td>
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<td></td>
<td>- ATI chapters 118-123</td>
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### Safe and Effective Care Environment
- Ensure the availability of suction and emergency intubation equipment for anyone who has thyroid or parathyroid surgery.

### Health Promotion and Maintenance
- Teach the patient and family about the manifestations and emergency treatment of hypoglycemia and hyperglycemia.

### Psychosocial Integrity
- Identify general psychological responses to reproductive health problems.
- Discuss ways to help patients adapt to physical changes, including impaired sexuality, caused by reproductive problems and their treatments.

### Physiological Integrity
- Compare the common clinical manifestations associated with pituitary hypofunction and pituitary hyperfunction.
- Interpret clinical changes and laboratory data to determine the effectiveness of therapy for DI and for SIADH.
- Prioritize nursing care for the patient with acute adrenal insufficiency.
- Coordinate nursing care for the patient with Cushing’s disease or syndrome.
- Compare the clinical manifestations of hyperthyroidism with those of hypothyroidism.
- Compare the clinical manifestations of hyperparathyroidism with those of hypoparathyroidism.
- Evaluate laboratory data to determine effectiveness of the prescribed dietary, drug, and exercise therapies for diabetes.
- Briefly review the anatomy and physiology of the male and female reproductive systems.
- Describe the mechanisms of action, side effects, and nursing implications for pharmacologic Management of BPH.
- Discuss treatment options for prostate cancer.
- Develop a plan of care for a patient with testicular cancer, including fertility issues.
- Compare the assessment and treatment of hydrocele, spermatocele, and varicocele.

Describe the assessment findings that are typical in patients with STDs.
Note: The course syllabus is as accurate as possible and includes the expectations for both students and faculty. Occasionally changes must be made to accommodate unusual events or corrected information. Such changes will be posted on the course website, announced in class, and communicated by class email.
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**NURSING 341**

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BYU COLLEGE OF NURSING MISSION STATEMENT

Learning the Healer’s Art

The mission of the Brigham Young University College of Nursing is to Develop Professional Nurses Who:

Promote Health
Care for the Suffering
Engage in the Scholarship of the Discipline
Invite the Spirit into Health and Healing
and Lead with Faith and Integrity

Our purpose is to teach and advance the discipline of Nursing within the context of the principles of the Gospel of Jesus Christ.

We inherit a legacy of service from faithful pioneers who blessed the lives of their families, their neighbors, their communities, their nation and the world because of the knowledge of the art and science of nursing and their commitment to the well-being of God’s children.

BYU COLLEGE OF NURSING VISION

We are a community of scholars engaged in discovery and application of the Healer’s Art to strengthen health and healing worldwide and to enhance the discipline of nursing.

Accountability
Respect
Integrity
Service
Excellence

….. ARISE in Faith
UNIVERSITY POLICIES

In Case of an Emergency
Please follow the instructor’s instructions. If there is an evacuation alarm, exit the classroom in an orderly fashion via the stairways. If evacuation is from the Kimball Tower, gather at the south end of the sidewalk between the Kimball Tower and McKay Building.

Honor Code Standards
It is a violation of the Honor Code for a student to represent someone else’s work as his or her own. In keeping with the principles of the BYU Honor Code, students are expected to be honest in all of their academic work. Academic honesty means, most fundamentally, that any work you present as your own must in fact be your own work and not that of another. As a condition of attending BYU, you affirmed that you would help others obey the Honor Code. Violations of this principle may result in a failing grade in the course and additional disciplinary action by the university.

Students are also expected to adhere to the Dress and Grooming Standards. Adherence demonstrates respect for yourself and others and ensures an effective learning and working environment. It is the university’s expectation, and our expectation in class, that each student will abide by all Honor Code standards. Please call the Honor Code Office at 422-2847 if you have questions about those standards.

Preventing Sexual Harassment
Title IX of the Education Amendments of 1972 prohibits sex discrimination against any participant in an educational program or activity that receives federal funds. The act is intended to eliminate sex discrimination in education. Title IX covers discrimination in programs, admissions, activities, and student-to-student sexual harassment. BYU’s policy against sexual harassment extends not only to employees of the university but to students as well. If you encounter unlawful sexual harassment or gender based discrimination, please talk to your professor; contact the Equal Employment Office at 422-5895 or 1-888-238-1062 (24-hours; or contact the Honor Code Office at 422-2847.

Students with Disabilities
Brigham Young University is committed to providing a working and learning atmosphere, which reasonably accommodates qualified persons with disabilities. If you have any disability, which may impair your ability to complete this course successfully, please contact the University Accessibility Center (UAC) Office (422-2767). Reasonable academic accommodations are reviewed for all students who have qualified documented disabilities. Services are coordinated with the student and instructor by the UAC. If you need assistance or if you feel you have been unlawfully discriminated against on the basis of disability, you may seek resolution through established grievance policy and procedures. You should contact the Equal Employment Office at 422-5895, D-282 ASB.
COURSE INFORMATION AND DESCRIPTION

Classroom / Didactic Course: 3 Credit Hours- 3 hours on Tuesdays from 1:00 - 4:50 in JFSB – B 135

Welcome to N341. This course will assist you in gaining the skills and knowledge necessary to provide nursing care to the adult patient with acute and chronic illness in inpatient settings. It will also support you in gaining confidence to succeed as you develop your professional nursing practice. This course uses the principles set out in the Essentials of a Baccalaureate Education of the American Association of Colleges of Nursing.

BRIGHAM YOUNG UNIVERSITY
COLLEGE OF NURSING
UNDERGRADUATE PROGRAM
PROGRAM OUTCOMES

COLLEGE OF NURSING PROGRAM OUTCOMES

During each semester and within the context of nursing, the student will:
1. Integrate the values of the gospel of Jesus Christ as part of caring.
2. Demonstrate effective critical thinking and communication.
3. Design, provide, and evaluate professional nursing care for individuals, families, and communities.
4. Practice and lead with an understanding of the discipline of nursing at the local, national, and global levels.
5. Exemplify lifelong learning.

Course Objectives and Learning Outcomes

Objective: The Student will comprehend principles of safe nursing practice for the adult hospitalized patient and will apply that knowledge to demonstrate proficiency in identifying best current nursing practice.

Student Learning Outcomes
a. Identify pertinent pathophysiology, risk factors, diagnostic procedures, assessment findings and nursing interventions of common acute and chronic illnesses as well as medical, surgical and procedural interventions.
b. Identify common expected treatments with rationales for selected illnesses and surgical or procedural interventions.
c. Correlate laboratory, procedure, treatment and other patient data to the effects on disease processes and treatments.
d. Identify effects of chronic illness on the patient and their significant others (SO).
e. Identify situations where skills and knowledge are beyond the student/nursing scope of practice, and verbalize methods to obtain appropriate assistance.
f. Demonstrate critical thinking skills by identifying priority nursing care interventions for hospitalized patients with selected medical diagnoses and/or surgical interventions.
REQUIRED TEXTBOOKS

The required texts are those you should already have from Semester 1 to include:


ADDITIONAL REQUIRED TEXTBOOKS


ATI Fundamentals for Nursing – Use the current online version on the ATI website

ATI Medical-Surgical Nursing – Use the current online version on the ATI website

*Note – A pathophysiology text is required. You may use one from your prior or current pathophysiology class or another new or used one that is fairly recent.
FACULTY INFORMATION

Karen de la Cruz, RN, MSN, AACNP/FNP, NurseEd
Email: karen-delacruz@byu.edu
Work Phone: 801-422-7332
Cell Phone: 719-251-1078
Office Location: SWKT 428
Notes: Assistant Teaching Professor, Course Coordinator N341/N342, Clinical Instructor, Utah Valley Regional Medical Center, Thursday

Blaine Winters DNP, ACNP-BC
Email: blaine-winters@byu.edu
Work phone: 801-422-4891
Cell phone: 801-903-9802
Office Location: SWKT 422
Notes: Assistant Teaching Professor

Julie Valentine, MS, RN, SANE-A
Email: julie_valentine@byu.edu
Work Phone: 801-422-3164
Cell Phone: 801-573-0640 Office Location: SWKT 535
Notes: Assistant Teaching Professor, Clinical Instructor, Veterans Affairs Medical Center, Friday

Note: To dial office or phone mail when you are on campus, just dial 2 plus the extension.

COURSE EXPECTATIONS

Preparation for professional nursing, specifically in caring for the acutely and chronically ill patient in the hospital setting, requires self motivation. This is your chance to put your skills to work, to gain confidence by integrating your solid base knowledge with hands-on patient care. Therefore, the faculty expects you will come to class on time, having read the assigned materials. You should be prepared to participate in class, ask relevant questions, and contribute meaningful information.

COURSE REQUIREMENTS AND GRADING CRITERIA

The following criteria MUST BE MET IN ORDER TO PASS Nursing 341.
1. Students must earn a 73% cumulative average on all assignments and tests to pass N341. The ATI test does not figure in the 73% average.
2. Tests will be available in the Humanities Computer Center on the dates indicated on the course calendar and must be taken at the time which you have selected. Tests will include content received in prior weeks from reading assignments, classroom instruction, and knowledge from previous classes. Tests will typically contain N-CLEX-type multiple choice questions. **Failure to take a test by the scheduled date will result in a 30% deduction and will be scheduled the next available day with the course coordinator.** If you do not finish the test by the closing time of the testing center, unanswered questions will be graded as incorrect. Go to JFSB, room B-153 to sign up for and take the tests. You are able to sign up 1 week ahead of the time you want to take the test.

3. Case studies – During the semester there will be case studies posted on the BYU Learning Suite. You are required to complete 4 of these. Please see the N341 Calendar Fall 2013 posted on Learning Suite for due dates. These case studies will usually take 45 - 60 minutes each to complete. Each case study is worth 25 points. These are designed to strengthen your critical thinking skills and see how well you know the material. **Group work is encouraged for this assignment. Up to 3 students may collaborate for these assignments.**

4. Professional Practice Paper – **Due October 11. E-mail to Karen at karen.delacruz@byu.edu** This 1-2 page paper will analyze a research article that may be used for your N342 Process Paper. Details of this assignment may be found on the N341 Grade Sheet Fall 2013 document posted on Learning Suite. The purpose of this assignment is to more closely tie required courses of research, medical surgical lecture and clinical coursework together.

5. **All written work must be completed to pass the course.** All work must be the student’s own work, and will be periodically checked by the “TurnitIn” word processor to check for plagiarism. Written assignments are due at the scheduled times (due dates listed in the course calendar).

   **10% of total assignment points will be deducted for each day an assignment is turned in late. After 5 working days the work will no longer be accepted for credit.**

Course Council:
A course council is implemented into this semester and is an additional opportunity for student involvement. Student representatives can volunteer or be chosen by peer election to represent the student population. The student representative will work directly with Karen de la Cruz who is the Course Coordinator for N341-2.

**ATI Testing - NCLEX Preparation**

The ultimate goal of your undergraduate nursing education is for you to pass the national NCLEX-RN examination and become a licensed Registered Nurse (RN). To meet that goal the College of Nursing has partnered with Assessment Technologies Institute (ATI) to improve NCLEX-RN pass rates. For each clinical course you will be taking practice examinations that closely mirror the NCLEX examination. You will be able to see areas in which you may be weak. Through working with your faculty as well as books, DVDs and online practice assessments you will be able to remediate those areas which may enhance your likelihood of successfully passing of the NCLEX-RN
These are criterion referenced examinations and each one has been tested on nursing students across the country. Proficiency levels, rather than percentages are used to determine your readiness for the NCLEX-RN examination in each subject area. Points are awarded based on both proficiency level for the first proctored examination in a course and completed remediation. The following chart indicates how points will be awarded. Please note that you are granted points based on the level of mastery achieved on this test, NOT on the percentage of correct answers you achieve.

<table>
<thead>
<tr>
<th>Proficiency Achievement on Proctored Examination</th>
<th>Points Granted</th>
<th>Remediation Requirements</th>
<th>Additional Points Awarded for Successful Remediation</th>
<th>Total Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 3 – very likely to exceed NCLEX standards in the content area A</td>
<td>100</td>
<td>None required, but ATI recommends</td>
<td>N/A</td>
<td>100</td>
</tr>
<tr>
<td>Level 2 – fairly certain to meet NCLEX standards in this content area B</td>
<td>60</td>
<td>must complete to get additional points</td>
<td>30</td>
<td>90</td>
</tr>
<tr>
<td>Level 1 – likely to just meet NCLEX standards in this content area C</td>
<td>50</td>
<td>must complete to get additional points</td>
<td>30</td>
<td>80</td>
</tr>
<tr>
<td>Below Level 1</td>
<td>40</td>
<td>must complete to get additional points</td>
<td>30</td>
<td>70</td>
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</table>

The ATI test is the only exception for this course of needing to get 73% or higher to pass the course.

There are two types of ATI exams: Practice and Proctored

**Practice exams** allow you plenty of time to ponder the questions and answers and provide rationales for correct and incorrect answers. You can change your answers as many times as you want, but suggestions for remediation will be based on the first answer you select. There are two practice exams for most content areas

**Online practice Assessment IDs and Passwords**

<table>
<thead>
<tr>
<th>Assessment ID</th>
<th>Assessment Name</th>
<th>Password</th>
</tr>
</thead>
<tbody>
<tr>
<td>4767756</td>
<td>RN Fundamentals Online Practice</td>
<td>87B5298R77</td>
</tr>
<tr>
<td>4767757</td>
<td>RN Fundamentals Online Practice</td>
<td>86B6963R69</td>
</tr>
</tbody>
</table>

**Proctored exams** are taken in the testing center at a prescribed time. There are course points assigned to these tests. If you do not reach the level as required by your faculty, you will not receive all points and will be required to remediate using the focused review suggestions from ATI. Points can be earned by appropriate remediation as determined by the faculty.

- In most courses, you will be asked to take a practice exam to prepare for the proctored exam. Depending on how you do on the practice exam, you may choose to do some remediation.
- Generally, when you have had about 80% of the course content, you will be required to take a proctored exam. You will be required to do remediation if you did not reach the designated proficiency level or benchmark set by your course faculty.
- **Proctored exam for our class is scheduled on December 2 and December 5.** You will
sign up for your testing time during the second week of the semester. Sign-up sheets will be posted on Karen de la Cruz’ office door, 428 SWKT, from September 9 through September 13. Changes in time slots cannot be made after that time.

- Remediation is due by December 12 by midnight. See instructions below for reporting.
- The ATI test is given in the HGB (Testing Center) room 121.

Remediation - After taking the test, print off the ATI report. If you received other than a level 3 rating, identify the areas in which you got less than 80%. Go back to the ATI Fundamentals book and read about those specific areas. **Once you have completed reviewing all of the needed areas,** email both TA’s: Melanie Vandenbark at melvandenbark@gmail and Alyssa Robinson at lyssarobinson@hotmail.com to notify them that you have completed the remediation. Include information on how much time you spent on remediation and the specific areas you reviewed.

**LEARNING ACTIVITIES**

Preparation for professional nursing practice includes gaining a solid base knowledge, acquiring competence with certain skills and techniques, developing behavior in professional roles, forming professional values, and learning how to apply all of these in an actual nurse-patient relationship. Learning activities are geared towards assisting you in this preparation and may be different than those you have had in other university courses.

*Individual study* activities include reading the assigned chapters from texts or other sources, viewing instructional media (e.g. videotapes, computer-assisted instruction), practicing techniques learned in the lab setting, and completing the writing assignments. It is generally not possible for faculty members to cover all of the assigned readings in class. Nevertheless, you are accountable for all readings and other preparatory assignments. Test questions may be taken from the readings (whether they are discussed in class or not) and from the class activities - lectures, discussions, presentations, group activities, etc.

Your success in the nursing program depends largely on your own individual study habits. A good plan is to read and prepare thoroughly before each class, ask questions and participate in class, and review your notes frequently.

*Group work* is strongly encouraged in nursing courses as collaboration is the standard in professional practice. Some professional assignments involve students working in pairs or small groups to accomplish the objectives. Discussing class topics and reading assignments in groups can help to improve understanding of concepts. Group discussion may be enjoyable and will help clarify difficult ideas, but it can never make up for the lack of individual preparation and effort.

*Classroom* learning activities take a variety of forms, including lecture, discussion, small group discussion, case studies, audio-visual media, student presentation, etc. Students may have assignments to be completed before class as listed in the lesson plan for each class period. Short quizzes may be given in class unannounced.

**PROFESSIONALISM**

**BRIGHAM YOUNG UNIVERSITY COLLEGE OF NURSING**

**PROFESSIONAL BEHAVIOR AND DRESS STANDARDS**
As a profession, nursing requires intensive study in acquiring new knowledge and the mastery of clinical skills. Professionalism is also an integral part of nursing practice. Positive work attitudes such as reliability, loyalty and cooperation are as important to success in a profession as are clinical skills. High standards of behavior and attitude are consistent with the profession and the philosophy of Brigham Young University College of Nursing.

In addition to fulfilling all academic requirements, students are required to display attitudes, personal characteristics, and behaviors consistent with accepted standards of professional conduct. The overarching resources for this document are taken from the American Nurses Association Code of Ethics for Nurses (http://www.nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/EthicsStandards/CodeofEthics/2110Provisions.aspx), BYU Honor Code (http://honorcode.byu.edu/index.php?option=com_content&task=view&id=3585&Itemid=4643), and the College of Nursing (CON) Baccalaureate Handbook (http://nursing.byu.edu/Documents/academics/under_grad/bachandbook.pdf). You are responsible and accountable for the specifics contained within each document. If you are in doubt about personal behavior or the dress standard for a particular class or activity, ask your faculty for advice.

PROFESSIONALISM IN DIDACTIC, NLC, CONFERENCES AND PROFESSIONAL ACTIVITIES

Professionalism is an integral part of all aspects of nursing including didactic sessions. Students are to attend lectures, labs and conferences unless previously cleared through one of the course faculty members. Be respectful of the time and effort they have put in preparing for and presenting their material. Failure to demonstrate professional behavior in the classroom is grounds for lowering of a grade, failure in a course, and/or dismissal from the College of Nursing, regardless of performance in other aspects of the course.

Professional behavior is exemplified by:

1. **Being on time.** Punctuality is one way to demonstrate professional behavior. Tardiness is considered unprofessional, impolite and discourteous to the faculty/presenter as well as other students.
2. **Coming prepared to participate in the discussion topic.**
3. **Being respectful of all people in the learning environment.** Respect others by being attentive, demonstrating appropriate use of language, not condemning others for their comments and not interrupting others.
4. **Practicing professional etiquette with regards to the use of electronic devices such as cell phones, PDAs, personal computers or any other electronic devices.**
   A. During class/lab/conferences, turn off cell phones/PDAs, etc., and do not text or answer or make phone calls.
   B. Use of personal computers for note taking or looking up pertinent references is acceptable during lecture/lab/conferences. Unacceptable use of personal computers or other electronic devices includes but is not limited to: looking at pictures, playing games, surfing the internet and emailing.
5. **Making childcare arrangements.** Infants or children are not to be brought to lecture, lab or conferences.
6. **Maintaining appropriate dress standards as outlined in the BYU Dress Code.**

PROFESSIONALISM IN THE CLINICAL SETTING

Students are to demonstrate appropriate professional behavior in the clinical setting. Students should remember they are guests in the clinical agencies. They should treat physicians, nurses, other staff, patients, and families with courtesy and respect. Should a problem or conflict occur the supervising faculty member should be contacted immediately. Failure to demonstrate professional behavior is grounds for lowering of a grade, failure in a course, and/or dismissal from the College of Nursing, regardless of performance in other aspects of the course.

Professional behavior is exemplified by:
1. Maintaining all CON and/or agency requirements such as CPR, vaccinations, OSHA standards and background checks.

2. Placing patient care as a top priority. Students have an obligation to patients, families and clinical agencies to ensure they are well prepared to care for patients. Students are to be alert and prepared with adequate knowledge and skills necessary to care for patients. Such preparation may require curtailing employment and other responsibilities. Students cannot work the night prior to clinical. If the faculty member finds the student unprepared or in a mental or physical state unfit to care for patients, the student will be sent home. Being sent home may result in lowering of a grade, failure in a course, and/or dismissal from the College of Nursing, regardless of performance in other aspects of the course.

3. Attending required clinical. Clinical attendance is mandatory; a student who is unable to attend must notify the faculty member prior to the assigned experience. Absences without granted permission are unacceptable and may result in course failure. The College of Nursing may request a health care provider’s signed statement concerning the health status of a student. If health problems interfere with the quality and completion of course requirements, the student may be asked to withdraw or take an incomplete. (See information regarding incompletes in the Student Handbook.)

4. Being on time for clinical experiences. Tardiness is considered unprofessional, impolite and discourteous.

5. Being actively involved in all aspects of their clinical experiences. This includes being proactive in seeking learning opportunities.

6. By using cell phones, i-pods, PDA’s, laptops or other electronic devices only when authorized by faculty and for clinical activities, not personal use.

Uniform and Professionalism Dress Standards are exemplified by:

1. Wearing the BYU CON uniform which is a white tunic top with BYU CON patch and navy blue uniform pants. It is expected that uniforms will be clean and wrinkle-free. The top is to be worn over the bottoms, not tucked in.
   a. Tunic may be V-neck, button-front, or keyhole neck with pockets. A clean white shirt without a logo may be worn under the tunic.
   b. Pants may have elastic or drawstring waist (drawstring tucked in) with or without a cargo pocket and without ribbed cuffs.
   c. Shoes must be white with closed toes and heels. Comfortable and supportive water resistant shoes are recommended. The shoes should be worn only in clinical and not in recreational settings. White or navy blue socks (which cover the ankles) must be worn.
   d. A white sweater or white jacket with a College of Nursing patch may be worn if desired. In some situations, a laboratory coat with a CON patch over professional dress may be required.
   e. The CON patch is sewn, not pinned, on the left sleeve two inches below the shoulder on the uniform and on the laboratory coat.
   f. An identification badge needs to be worn at all times. The agency specific badge is worn, and/or the BYU name tag.
   e. Scarves (except for religious observance), bright colored ornaments or jewelry in the hair or elsewhere are not worn with the uniform. Wedding rings may be worn unless otherwise specified in individual courses. Women may wear small non-dangling earrings.
   f. Long fingernails, fingernail polish, and/or artificial nails are not acceptable.
2. The standard equipment students always take to the hospital to care for patients include the following:
   1) Watch with a second hand
   2) Pen and notepad
   3) Bandage scissors
   4) Stethoscope
   5) Goggles

3. Wearing business professional dress in some clinical environments, such as public health. This is especially true for students during pre-assessment times. Students need to wear a lab coat or their white tunic top with the BYU College of nursing patch in addition to the following dress. Examples include, but are not limited to the following:
   a. Dress slacks, khakis, etc. (no jeans, no shorts)—for men and woman.
   b. Professional shirts or blouses (no slogans, t-shirts with distracting designs, or bare midriffs.
   c. Professional shoes/dress shoes (no beach-type flip-flops).
   d. Modest skirts or dresses for women.
   e. Name pins are worn on the professional dress.

PROFESSIONALISM IN REGARDS TO SOCIAL NETWORKING

It is advised to use extreme caution when using social networking tools, such as Twitter, Facebook, YouTube, blogs, etc. These tools can create ethical and professional dilemmas if used to discuss patients and their families, medical facilities and clinics, and other professional issues which might be construed as a breach in trust and confidentiality (HIPPA). As nurse practitioner students, nursing students, and representatives of BYU, we are held to high standards of nursing professional behavior. Please remember that once you post something on the world wide web, it is out there and you cannot retrieve it. It can be used by anyone for any purpose.

PROFESSIONALISM IN SERVICE RELATED ACTIVITIES

Service related activities may take on a variety of venues. For specific dress requirements, consult with your course faculty or the activity director. Professional character is exemplified by students honoring service commitments.

PROFESSIONALISM AND RESEARCH CONFERENCES

1. The Research Conference and the Professionalism Conference are considered to be a part of the curriculum, and all students are required to attend. There is no charge for the conference.
2. Course assignments may be based on the topics of the conferences, and discussions may take place in class about the topics.

PROFESSIONAL NURSING ORGANIZATIONS AND MEETINGS

1. Active participation in professional nursing organizations and meetings is expected of all professional nurses. Throughout the educational experience, students have the opportunity to attend professional meetings. At times a fee may be charged for the meetings. Students should check individual course syllabi for approved professional meetings for each course.
2. Each student is encouraged to actively participate in the BYU Student Nurses Association, and Utah Student Nurses Association, as well as other nursing organizations. Nurses need organizations to discuss problems, derive solutions, influence policies, and explore options and possibilities for nursing and health care.
This provides a significant opportunity to meet with nurses from other locations, educational backgrounds, and work settings, and to make an impact on the profession.

**PROFESSIONALISM GRADE SHEET – N341**

Student Name____________________________     Date___________________

<table>
<thead>
<tr>
<th>PROFESSIONAL OBJECTIVE</th>
<th>Pass</th>
<th>No Pass</th>
<th>COMMENTS</th>
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<tr>
<td>CLASSROOM</td>
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<tr>
<td>1. Participate in classroom activities, have regular attendance in class.</td>
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<td>2. Respectful of instructor and other students</td>
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<td>3. Adhere to BYU Honor code, including dress and honesty issues.</td>
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<td>OVERALL</td>
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<tr>
<td>1. Respect human dignity.</td>
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<td>2. Assume responsibility for individual decisions and actions.</td>
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<td>3. Participate in activities that contribute to profession’s body of knowledge (SNA, service projects, class participation, etc).</td>
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<tr>
<td>2. Avoid plagiarism in all assignments.</td>
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**GOOD MANNERS ARE JUST AN EXTENSION OF A CHRIST-LIKE ATTITUDE**  
-Elder Packer

**All sections must be completed with a ‘Pass’ grade to pass N341.**

**During the semester, the above professional objectives will be evaluated on a continual basis.**

**Depending on the offense the following may occur:**

The first ‘no pass’ situation during the semester will receive a **verbal warning**.

The second ‘no pass’ will receive a **written warning, meet with the Associate Dean, and develop a remediation plan.**

The third ‘no pass’ will receive a **No Pass** for the semester despite performance or grade in other class and/or clinical activities.

**COMMUNITY LIFE-LONG LEARNING ACTIVITY PASS/FAIL**
N341 Syllabus Contract Form

Print Name:____________________________________________________________

**Please turn in this form on the first day of class, September 3, 2013.

1. I have read and understand the requirements and policies listed in this syllabus.

2. I understand that I am responsible to contact the Course Instructors if I have any additional questions.

3. I understand that I am responsible to review the FALL 2012 Grade Sheet and Lecture Preparation Schedule posted on BYU Learning Suite. These documents specify assignment grading criteria, reading assignments and due dates for written assignments.

4. I understand it is my responsibility to review the N341 Calendar on BYU Learning Suite and complete assignments listed in a timely manner.

5. I understand it is important to check my e-mail regularly and/or Learning Suite announcements as events may occur that may alter the order of classroom topics and therefore assignments. (It is a very good habit to check e-mails daily as changes and important announcements may occur.)

6. I recognize I am responsible to review my schedule each week to make sure I am in class at the correct time.

Signed__________________________________________________    Date:___________
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<td>13-15:50 N341 JFSB Room B135</td>
<td>IMC, Alta View Orientation</td>
<td>IMC, U of U, LDS, TIMP - Orientation</td>
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<td>13-15:50 N341 JFSB Room B135 Peri-op Lecture (Peggy Hubert)</td>
<td>Clinical-Buddy Day</td>
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<td>Last Day to sign up for ATI testing time. SWKT 428</td>
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<td>13-15:50 N341 JFSB Room B135 Respiratory Lecture (Karen de la Cruz)</td>
<td>Clinical (N341 Test #1 Begins in Humanities Testing Lab)</td>
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<td>13-15:50 N341 JFSB Room B135 Neuro 1 Lecture (Julie Valentine)</td>
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(Respiratory or Neuro) | 4 Clinical | 5 |
|        |        |         | 6 13-15:50 N341 JFSB Room B135 Fluid & Electrolytes, Nutrition, | 7 | 8 | 9 13-15:50 N341 JFSB Room B135  
(N341 Test #2 Begins in Humanities Testing Lab) | 10 Clinical | 11 Clinical | 12 |
| 13 14  
(Last day to take N341 Test #2) | 15 13-15:50 N341 JFSB Room B135 Cardio 1 Lecture (Blaine Winters) | 16 Clinical | 17 Clinical | 18 Clinical  
(Professional Practice Paper Due) | 19 |
| 20 | 21 | 22 13-15:50 N341 JFSB Room B135 Cardio 2 (Blaine) & Hepatobiliary Lecture (Julie Valentine) | 23 Clinical | 24 Clinical  
(2nd Case Study Due Fluid & Electrolytes or Cardiovascular) | 25 Clinical | 26 |
| 27 | 28 | 29 13-15:50 N341 JFSB Room B135 GI Lecture (Julie Valentine) | 30 Clinical  
(N341 Test #3 Begins in Hum. Testing Lab) | 31 Clinical | |
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# N341 November 2013

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<td><strong>Daylight Savings Time Ends</strong></td>
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<td>13-15:50 N341 JFSB Room B135 Renal Lectures (Karen de la Cruz)</td>
<td><strong>Clinical</strong></td>
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<td>13:15:50 N341 JFSB Room B135 (N341 Test #4 Begins in Hum. Testing Lab)</td>
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<td>FRIDAY INSTRUCTION (Last day to take N341 Test #4)</td>
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<td>313-15:50 N341 JFSB Room B135 Hematology/Oncology/Pain Management</td>
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<td>10 13-15:50 N341 JFSB Room B135 Endocrine/Reproductive lecture (Julie Valentine)</td>
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<td>Christmas Day</td>
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<td>31 Christmas Eve</td>
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