

COURSE SYLLABUS

RNSG 1160 (1:0:4)

CLINICAL NURSING FOUNDATIONS (RN Training)

ASSOCIATE DEGREE NURSING PROGRAM

DEPARTMENT OF NURSING

HEALTH OCCUPATION DIVISION

LEVELLAND CAMPUS

SOUTH PLAINS COLLEGE

SCANS COMPETENCIES

RESOURCES: Identifies, organizes, plans and allocates resources

- C-1 **TIME**--Selects goal--relevant activities, ranks them, allocates time, and prepares and follows schedules.
- C-2 **MONEY**--Uses or prepares budgets, makes forecasts, keeps records, and makes adjustments to meet objectives
- C-3 **MATERIALS & FACILITIES**--Acquires, stores, allocates, and uses materials or space efficiently.
- C-4 **HUMAN RESOURCES**--Assesses skills and distributes work accordingly, evaluates performances and provides feedback.

INFORMATION--Acquires and Uses Information

- C-5 Acquires and evaluates information.
- C-6 Organizes and maintains information.
- C-7 Interprets and communicates information.
- C-8 Uses computers to Process information.

INTERPERSONAL--Works With Others

- C-9 Participates as members of a team and contributes to group effort.
- C-10 Teaches others new skills.
- C-11 Serves clients/customers--works to satisfy customer's expectations.
- C-12 Exercises leadership--communicates ideas to justify position, persuades and convinces others, responsibly challenges existing procedures and policies.
- C-13 Negotiates--Works toward agreements involving exchanges of resources resolves divergent interests.
- C-14 Works with Diversity--Works well with men and women from diverse backgrounds.

SYSTEMS--Understands Complex Interrelationships

- C-15 Understands Systems--Knows how social, organizational, and technological systems work and operates effectively with them
- C-16 Monitors and Correct Performance--Distinguishes trends, predicts impacts on system operations, diagnoses systems' performance and corrects malfunctions.
- C-17 Improves or Designs Systems--Suggests modifications to existing systems and develops new or alternative systems to improve performance.

TECHNOLOGY--Works with a variety of technologies

- C-18 Selects Technology--Chooses procedures, tools, or equipment including computers and related technologies.
- C-19 Applies Technology to Task--Understands overall intent and proper procedures for setup and operation of equipment.
- C-20 Maintains and Troubleshoots Equipment--Prevents, identifies, or solves problems with equipment, including computers and other technologies.

FOUNDATION SKILLS

BASIC SKILLS--Reads, writes, performs arithmetic and mathematical operations, listens and speaks

- F-1 Reading--Locates, understands, and interprets written information in prose and in documents such as manuals, graphs, and schedules.
- F-2 Writing--Communicates thoughts, ideas, information and messages in writing, and creates documents such as letters, directions, manuals, reports, graphs, and flow charts.
- F-3 Arithmetic--Performs basic computations; uses basic numerical concepts such as whole numbers, etc.
- F-4 Mathematics--Approaches practical problems by choosing appropriately from a variety of mathematical techniques.
- F-5 Listening--Receives, attends to, interprets, and responds to verbal messages and other cues.
- F-6 Speaking--Organizes ideas and communicates orally.

THINKING SKILLS--Thinks creatively, makes decisions, solves problems, visualizes, and knows how to learn and reason

- F-7 Creative Thinking--Generates new ideas.
- F-8 Decision-Making--Specifies goals and constraints, generates alternatives, considers risks, and evaluates and chooses best alternative.
- F-9 Problem Solving--Recognizes problems and devises and implements plan of action.
- F-10 Seeing Things in the Mind's Eye--Organizes and processes symbols, pictures, graphs, objects, and other information.
- F-11 Knowing How to Learn--Uses efficient learning techniques to acquire and apply new knowledge and skills.
- F-12 Reasoning--Discovers a rule or principle underlying the relationship between two or more objects and applies it when solving a problem.

PERSONAL QUALITIES--Displays responsibility, self-esteem, sociability, self-management, integrity and honesty

- F-13 Responsibility--Exerts a high level of effort and preservers towards goal attainment.
- F-14 Self-Esteem--Believes in own self-worth and maintains a positive view of self.
- F-15 Sociability--Demonstrates understanding, friendliness, adaptability, empathy, and politeness in group settings.
- F-16 Self-Management--Assesses self accurately, sets personal goals, monitors progress, and exhibits self-control.
- F-17 Integrity/Honesty--Chooses ethical courses of action.

**SOUTH PLAINS COLLEGE ASSOCIATE
DEGREE NURSING PROGRAM**

CLINICAL NURSING FOUNDATIONS (RN Training)

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Campus: Levelland

COURSE SYLLABUS

COURSE TITLE: RNSG 1160 Clinical-Registered Nursing/Registered Nurse

INSTRUCTORS: Jan Buxkemper, MSN, RN-Level I Semester I Coordinator,
Assistant Professor, Course Leader
Dawn Kineman, MSN, RN, CPN, Instructor
Connie Wilde, MSN, RN, Instructor
Delia Gonzales, MSN, RN, Instructor

OFFICE LOCATION, PHONE/ E-MAIL:

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OFFICE HOURS: Posted on each instructor's door.

SOUTH PLAINS COLLEGE IMPROVES EACH STUDENT'S LIFE

I. GENERAL COURSE INFORMATION:

A. COURSE DESCRIPTION

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

A method of instruction providing detailed education, practice and work-based experience and direct patient/care, generally at a clinical site. Specific detailed learning outcomes 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. Courses may be repeated if topics and learning outcomes vary.

Overview of nursing and the role of the associate degree nurse as a provider of patient-centered care, patient safety advocate, member of health care team, and member of the profession. RNSG 1160 involves the application of basic nursing principles essential in caring for the individual who is influenced by genetic inheritance, life experiences, and cultural background and is part of a larger community.

College laboratory and clinical agency experiences offer opportunities for the beginning skill practice and application of classroom learning applied to the adult client experiencing stressors of illness. These experiences include the students' application of nursing process, communication, teaching/learning,

pharmacology, nutrition, safety, problem solving, critical thinking, collaboration, delegating, referrals, cost effectiveness, quality care, ethical/legal practice, self-awareness/self-monitoring and client advocacy.

1. Placement: Level I Semester I
2. Time Allotment:
Sixteen (16) weeks. The course allows one (1) semester hours credit.
3. Teaching Strategies:
Clinical supervision and facilitation, demonstrations, independent assignments, Nursing Learning Resource Laboratory, Center for Clinical Excellence, and discussions.
4. Teaching Personnel:
Associate Degree Nursing faculty.

B. COURSE LEARNING OUTCOMES

Upon satisfactory completion of RNSG 1160, the student will meet the following:

- a.. SPC ADNP Graduate Outcomes: 1, 2, 3, 4 & 5.
- b. DEC's (Differentiated Essential Competencies) are listed in the Clinical Evaluation Tool.

C. COURSE COMPETENCIES

Successful completion of this course requires:

- a. Requires a grade of "P"
- b. Satisfactory completion of nursing care plans
- c. Satisfactory achievement of all clinical outcomes on the Clinical Evaluation Tool.
- d. Regular clinical attendance
- e. Satisfactory completion of individual/group student skills presentations
- f. Further course competencies required are identified in II.

D. ACADEMIC INTEGRITY

1. Refer to the SPC Catalog and the SPC ADNP Nursing Student Handbook for policies related to academic integrity.
2. Specific example related to this course may include but are not limited to the following; presenting work as your own when you have worked in pairs or groups to complete it. All work in this course is intended to be completed on your own unless it is specified by the instructor as group work.

3. Professional Standards: Students are expected to adhere to the professional standards set forth in the Associate Degree Nursing Program School of Nursing Student Handbook, as well as the American Nurses Association Code of Ethics for Nurses (<http://nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-of-Ethics-For-Nurses.html>). Nurses are held to an extremely high standard of professional and academic conduct. It is the responsibility of the School of Nursing to teach and model professional behaviors, and it is the responsibility of the student to demonstrate professional and academic integrity. The student is representing the School of Nursing any time they are in the student role, in any location, and are expected to maintain the highest standards. Any point deductions will be taken from the final course average.

Professional Standards	<i>Point deduction from final course grade</i>
Professional Integrity	
Applies legal and ethical standards	- 1 point per variance
Maintains patient confidentiality	- 1 point per variance
Professional Behaviors	
Exhibits professional attitude	- 0.5 points per variance
Accountable for learning	- 0.5 points per variance
Responds to SON faculty/staff contact within 24 hours	- 0.5 points per variance
Attends all appointments, including appointments with faculty and retention counselors	- 0.5 points per variance
Adheres to dress code	- 0.5 points per variance
Scheduling and Attendance	
Adheres to institutional policies and procedures related to scheduling	- 0.5 points per variance
Accountable for developing and adhering to schedule	- 0.5 points per variance

4. Plagiarism Declaration

**Plagiarism Declaration
Department of Nursing
South Plains College**

By signing this plagiarism declaration I acknowledge that I have received a copy of the honesty policy and been made aware that the penalty for plagiarism is dismissal from the program.

Examples of student plagiarism¹

- Copying material without quotes, in-text citations, and/or referencing
- Paraphrasing content without in-text citation and/or referencing
- Copying ideas, words, answers, exams, or shared work from others when individual work is required
- Using another's paper in whole or in part
- Allowing another student to use one's work
- Claiming someone else's work is one's own
- Resubmitting one's own coursework, when original work is required (self-plagiarism)
- Falsifying references or bibliographies
- Getting help from another person without faculty knowledge or approval
- Purchasing, borrowing, or selling content with the intent of meeting an academic requirement for oneself or others

Printed Name

Signature

Date

E. VERIFICATION OF WORKPLACE COMPETENCIES:

External learning experiences (Clinical) provide workplace settings in which students apply content and strategies related to program theory, management, and completion of the Differentiated Essential Competencies of Graduates of Texas Nursing Program. Level I Outcomes will allow the student to continue to advance within the program.

II. SPECIFIC COURSE/INSTRUCTOR REQUIREMENTS:

A. ATTENDANCE POLICY

1. The SPC ADNP policy must be followed. Refer to the SPC ADNP Nursing Student Handbook to review this policy. In addition, refer to the attendance policy found in the South Plains College Catalog.
2. Punctual and regular clinical/attendance, as stated in the SPC handbook, is required of all students attending South Plains College. There are no excused absences. The instructor/course leader has the prerogative of dropping the student from the course for any absences.
 - a. Students are expected to attend all scheduled days of the clinical experience. In the event of illness, it is the student's responsibility to notify his/her instructor. The student can miss no more than four (4) clinical hours. A student missing more than four (4) clinical hours will be dropped from RNSG 1160

B. ASSIGNMENT POLICY

1. All required work should be in on time in order that the student may benefit from the corrections. Assigned outside work is due on the dates specified by the instructor. Assignments turned in later than the due date will not be accepted unless the student clears the circumstances with the instructor. Late work will be assessed penalty points by the instructor. The assignment, including the Clinical Evaluation Tool, will be docked one (1) point per day for each late day. Students should keep a copy of all assignments to prevent repeating the assignment should the assignment be lost.
2. Lab prescriptions are considered student assignments and documentation of completion must be returned to the assigning instructor.

C. GRADING POLICY

1. Refer to SPC ADNP Nursing Student Handbook Grading System.
2. In order to pass the UAP clinical experience the student must pass all of the critical elements of the UAP Experience Grading Criteria. Failure of the UAP Clinical Experience (including arriving no later than 0630 and leaving before all documentation and skills have been completed as assigned) will result into a Formal Learning Contract.
3. The Clinical SIMS Laboratory Experience Performance Evaluation must be passed with 77% or better. Failure will result for not arriving at assigned time and leaving before debriefing has been completed.
4. In order to pass the Hospital clinical experience the student must pass the Performance Evaluation with a minimum of 77, including arriving at 0615, not leaving before all documentation, skills have been completed as assigned and meeting the * requirements.
5. The minimal passing grade/score on a nursing process is two (2). The student must pass the 2 nursing processes with a minimum grade/score of two (2) based on the patients in the hospital setting. The student will have only 1 opportunity to correct 1 nursing process if a grade/score of two is not obtained initially. The corrected nursing process must score a minimal of two (2).

6. A nursing diagnosis can be used only one (1) time on a nursing process during the semester. You cannot repeat a nursing diagnosis previously submitted for a nursing process in any clinical setting (including the SIMS clinical experience). **Repeating a nursing diagnosis in a nursing care plan will result in a grade of “0” for the clinical rotation and thus resulting failure in RNSG 1160.** You are required to submit one (1) nursing diagnosis for your nursing process. Any additional nursing processes submitted will not be graded. Only one (1) process per clinical experience will be graded.
7. A medical diagnosis assignment document can be used only one (1) time per clinical rotation during the semester. You cannot repeat a medical diagnosis previously submitted in any of the clinical settings. **Repeating a medical diagnosis in the submitted clinical database packet will result in a “0” on the Nursing Care Plan Grading Criteria**
8. **All clinical objectives on the Student Clinical Evaluation Tool must Score satisfactory (S) on the final clinical rotation. See Appendix A for clinical objectives.** Refer to the Student Clinical Evaluation Tool which indicates what is considered satisfactory for Level I Semester I.
9. Successfully validating skills competencies at the end of the semester requires validation of a minimum of 3 out of 4 skills. (2 of the skills that must be validated are sterile technique and pharmacology).
10. Satisfactory completion of individual/group student skills presentations and its corresponding peer validation (see student demonstration grading criteria).
11. Failure of RNSG 1413, 1160, 1144, 1105, and/or 1115 will necessitate repeating all Level I Semester I courses. When repeating any course, the student is required to complete all aspects of the course including the required written work.
12. RNSG 1160 is a pass/fail course.

D. CLINICAL COMPONENT

1. It is the student’s responsibility to seek opportunities during his/her clinical experience to perform the required skills.
2. A Clinical Performance Evaluation will be completed at the end of each clinical day. All asterisks must be completed each day and a minimal score of 77% to pass RNSG 1160.
3. Prior to beginning administration of medication in the clinical area, each student must have passed the math competency unit test within the last 90 days.
4. All students must pass a clinical math competency exam, missing no more than two (2). If a scheduled clinical math exam is missed it cannot be made up. This missed attempt will count as a failure. Failure on the 3rd exam will result in a failure in RNSG 1160.
5. Prior to administration of medication in the clinical area, each student must discuss the medications with the instructor with a minimal score of two (2).
6. Each student must demonstrate competency in performing a physical assessment within the last 90 days.
7. The clinical instructor will remove the student from the clinical setting if the student demonstrates unsafe clinical performance. **Unsafe clinical performance**

may result in clinical failure and/or dismissal from the

ADNP. Examples of unsafe clinical performance includes but are not limited to the following:

- a. failure to complete assignments as instructed
 - b. places a client in physical or emotional jeopardy
 - c. inadequately and/or inaccurately utilizes the nursing process d. violates previously mastered principles/learning outcomes in carrying out nursing care skills and/or delegated medical functions
 - e. assumes inappropriate independence in action or decisions f. fails to recognize own limitations, incompetence and/or legal responsibilities
 - g. fails to accept moral and legal responsibility for his/her own actions; therapy, violating professional integrity as expressed in the Code of Nurses.
8. Lab prescriptions – a prescription will be assigned by the clinical instructor for any specific skill that he/she decides needs further practice. The student must perform the prescribed task in the Nursing Learning Resource Lab until the learning objectives are safely met before the student returns to the clinical site.
9. The SPC Uniform Policy must be followed in the clinical area. See the ADNP Student Handbook. The student is expected to be in total compliance with the uniform dress code at any time the SPC uniform is worn. Long hair must not touch the collar of the uniform and bangs must be contained. A student will be sent home for noncompliance of the SPC Uniform Policy.
10. **No cell phones or pagers are allowed in the clinical setting.** Any student found with a cell phone/pager during any clinical rotation will be sent home, resulting in a failure for that clinical day. (Refer to II.C.10)

E. GRIEVANCE POLICY

The student is responsible for scheduling an appointment with the instructor/course leader to discuss the final grade or discipline action. If the student is not satisfied, he/she should schedule an appointment with the Level I Semester I Coordinator. The next chain of command is to make an appointment with the Health Occupation Dean. The procedure will follow the same as found in the student handbook.

F. COURSE REQUIREMENTS

1. Prerequisites: Psychology 2314, Biology 2401 & 2420 and English 1301. Concurrent enrollment of RNSG 1413, RNSG 1105, RNSG 1144, and RNSG 1115. If RNSG 1115 has been successfully completed concurrent enrollment is not required.
2. Meet all requirements for admission into the Associate Degree Nursing Program.
3. Completion of student contract.
4. RNSG 1115 must be successfully completed prior to attendance of the clinical rotation.
5. Satisfactory completion of math competency test within 90 days.
6. All clinical procedures must be performed and passed in the skills

- laboratory prior to performing the skill in the clinical setting.
7. Satisfactory completion of the student demonstration of basic nursing skills from RNSG 1144 or 1105 with a grade of 77 or better. See student demonstration grade sheet, see appendix.
 8. Satisfactory achievement of behavioral course outcomes (see unit outcomes) and clinical evaluation tool.
 9. Satisfactory administers medications in the clinical setting.
 10. Regular attendance.
 11. Successfully validating skills competencies at the end of the semester requires validation of a minimum of 3 out of 4 skills. (2 of the skills that must be validated are sterile technique and pharmacology).

III. COURSE OUTLINE

- A. Student Demonstration
- B. Skills Group Presentation
- C. Clinical Evaluation Tool
- D. Clinical Packet
- E. Math Competency

IV. ACCOMMODATIONS

Diversity Statement

In this class, the instructor will establish and support an environment that values and nurtures individual and group differences and encourages engagement and interaction. Understanding and respecting multiple experiences and perspectives will serve to challenge and stimulate all of us to learn about others, about the larger world and about ourselves. By promoting diversity and intellectual exchange, we will not only mirror society as it is, but also model society as it should and can be.

ADA Statement

Students with disabilities, including but not limited to physical, psychiatric, or learning disabilities, who wish to request accommodations in this class should notify the Disability Services Office early in the semester so that the appropriate arrangements may be made. In accordance with federal law, a student requesting accommodations must provide acceptable documentation of his/her disability to the Disability Services Office. For more information, call or visit the Disability Services Office at Levelland (Student Health & Wellness Office) 806-716-2577, Reese Center (Building 8) 806-716-4675, or Plainview Center (Main Office) 806-716-4302 or 806-296-9611.

STUDENT DEMONSTRATION

Student: _____

Maximum Point Possible	Objectives	Comments
10	1. Group Participation Practices the Demonstration Skills as A member of the group in the Lab	
25	2. Demonstration: 1:1 to Check-off. Each skill demonstrated correctly	
25	3. Knowledge: 1:1 To Check-off, Able to discuss appropriate rationales during procedure or when questioned Classroom Demonstration:	
10	4. Group Cohesiveness – Shows Planning and Who Will Do What	
10	5. Thoroughness – Cover All Required Skills	
10	6. Competency Air – Comfortable, At Ease, Relaxed	
10	7. Responsible for evaluating peers during mass Check off.	
Total Score		

**Minimum acceptable score for passing the clinical component is 77.

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SKILLS GROUP PRESENTATIONS

Example

Each student is required to assist in the planning and implementation of one of the group presentations listed. After signing up for a group you will need to see the appropriate instructor to obtain assignment and instructions. Due dates for the presentation are listed below. **You must check-off individually 2 weeks prior to the demonstration date. The group will then check off 1 week prior to demonstration date. It is the group's responsibility to initiate contact with the appropriate instructor.**

GROUP I

STUDENT NAMES

Asepsis Demonstration Date:

Instructors:

1. Medical Hand washing
2. Isolation

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Assisting the Client in Meeting Basic Needs

Demonstration Date:

1. Urinal
2. Bedpan
3. Bedside Commode
4. Feeding
5. Intake & Output

GROUP II

STUDENT NAMES

Mobility

Demonstration Date:

Instructor:

1. Active & Passive ROM
2. Positioning & Lifting
3. Assistive Ambulation Devices
4. Transfers

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Subject To change

GROUP III**STUDENT NAMES****Hygiene****Demonstration Date:****Instructor:**

- 1.
- 2.
- 3.
- 4.
- 5.

1. Bed Bath
2. Shampooing
Hair
3. Brushing Teeth
4. Back Rubs
5. Changing an Occupied/unoccupied Bed
6. Mouth Care
7. Nail & FootCare

GROUP IV**STUDENT NAMES****Oxygen****Demonstration Date:****Instructor:**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

1. TCDB/Incentive Spirometer
2. O2 Tank
3. O2 Administrative Devices
4. Yankauer Suctioning
5. Oral Airways

GROUP V**STUDENT NAMES****Urinary****Demonstration Date:****Instructor:**

- 1.
- 2.
- 3.
- 4.
- 5.

1. Condom Catheter
2. Catheter Care
3. Urinary Specimens
4. Removing a Retention
Catheter

Nutrition**Demonstration Date:****Instructor:**

1. NG Tube Insertion & Removal
2. Feeding, Suctioning, & Irrigation

Subject To Change

GROUP VI**STUDENT NAMES****Wounds****Demonstration Date:****Instructor:**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

1. Application of Binders/Splinting
2. Application of Bandages
3. Removal of Sutures

GROUP VII**STUDENT NAMES****Bowels****Demonstration Date:****Instructor:**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

1. Enemas
2. Colostomy Pouching
3. Colostomy Irrigation
4. Rectal Tube

Subject To Change

**SOUTH PLAINS COLLEGE ASSOCIATE
DEGREE NURSING PROGRAM**

MATH COMPETENCY UNIT

All students must pass clinical math competency exam, missing no more than two (2). Each line on the math exam count as one (1). If a scheduled clinical math exam is missed it cannot be made up. This missed attempt will count as a failure. Failure on the 3rd exam will result in a clinical failure and thus a failure in RNSG 1160.

Required Text: Macklin Chernecky, Infortuna (2009) or updated edition if available.
Math for Clinical Practice, Evolve.

Math Unit – Steps for Completion

1. Complete review on following pages.
2. Begin math review utilizing required text chapters 1-15 at your own pace.
3. View CAI program Med Prep in the Computer Lab.

TEST REVIEW

1. Your patient is ready to receive morning medications: aspirin 81 mg, Coumadin 7.5 mg, Lasix 20 mg, and digoxin 0.25 mg. What is the total number of milligrams for all medications?

2. **Prescription:** 40 mg
What You HAVE: One 18.8 mg tablet
How many more milligrams must you get from the pharmacy?

3. Your patient has an elevated temperature and is to receive 243 mg aspirin orally now 81 mg orally in 6 hours. What is the difference?

4. Your patient is to receive 2 tablets of 0.06 mg strength and 1 $\frac{1}{2}$ tablets of 1.5 mg strength.
What is the total strength to be given?

5. You are to administer 30 mcg thyroid tablets.
What You HAVE: 2 $\frac{1}{2}$ tablets.
How many mcg is each tablet?

6. A patient is supposed to have 1500 mL fluid every 24 hours. You know that the patient is to ingest two thirds of the fluid between breakfast (8 AM) and dinner (6 PM).
How many milliliters of fluid should be ingested between breakfast and dinner?

7. You are to give your patient the lowest percentage eye ointment the pharmacy has on hand for his eye infection. The pharmacy has $\frac{2}{100}$, $\frac{3}{8}$, and $\frac{1}{5}$ eye ointment available. Which is the lowest?

8. Decrease total fluid intake by $\frac{1}{6} \times \frac{3}{2}$ daily for your patient who is in renal failure.
Write answer as both fraction and decimal forms.

DIRECTIONS: Questions 9 & 10. Determine the following medication doses (X) based on the mathematical information given. Write your answer to the nearest tenth.

9. $X = \frac{1}{2} / \frac{1}{8} \times 5$ _____

10. $X = 1.5 / \frac{1}{2} \times 3.5 / 6$ _____

DIRECTIONS: Write the following as you would see it written in the clinical setting using the abbreviation for each unit of measure and identify each unit as weight, length, or volume.

11. One hundred micrograms of triiodothyronine (T₃, Triostat) for myxedema. _____

12. Three liters of bladder irrigant to run over 12 hours for hematuria. _____

DIRECTIONS: Convert the following metric measurements.

13. **Prescription:** 400 mg cefonicide (Monocid) intravenous for the treatment of *S. pneumoniae* septicemia

What is the equivalent dose in grams? _____

14. Aspirin 81 mg is equal to _____ grains
Round to the nearest tenth. _____

15. Cimetidine (Tagamet) 800 mg orally is prescribed for the treatment of acid indigestion.
This medication is equal to _____ g. _____

16. Your patient has a maximum dose of metformin (Glucophage) 2 g per day to control diabetes mellitus. This medication is equal to _____ mg. _____

17. **Prescription:** Premarin, a conjugated estrogen 2.5 mg by mouth daily as adjunct therapy for postmenopausal osteoporosis treatment

What You HAVE: 625 mcg tablets

Convert milligrams to micrograms:

How many tablets will you give the patient daily? _____

18. The physician writes a prescription for gentamicin 2 mg / kg intravenously every 8 hours for 7 days.

What is the patient's weight in kg? _____

What is the dose for a patient weighing 171.6 pounds? _____

DIRECTIONS: Write each percentage as a fraction and as a decimal for intravenous fluids and medications.

19. 2.5% peritoneal dialysate _____

DIRECTIONS: Question 20. In the following clinical situation, determine the number of grams of drug the solution will contain.

20. **Prescription:** 500 mL bladder irrigation with a 25% acetic acid solution _____

DIRECTIONS: Question 21 & 22. Write a ratio from the following medication information using both a fraction line and a colon.

21. Omeprazole (Prilosec) 20 mg in 1 capsule _____

22. Ibuprofen (Motrin) 100mg in 5 mL suspension for moderate pain _____

or _____

23. Your patient's eye ointment is prescribed as 5mg / 1000mg erythromycin ointment.

Write this as a ratio and reduce it. _____

24. The nurse practitioner prescribes lindane shampoo 1%

What is this as a ratio? _____

DIRECTIONS: Solve the following problems using the ratio-proportion method.

25. **Prescription:** ranitidine hydrochloride (Zantac) syrup 120 mg by mouth

What You HAVE: 15mg per 1 mL

How many milliliters will be administered? _____

26. A patient is to receive captopril (Capoten) 37.5 mg orally three times daily for treatment of hypertension. The patient's prescription bottle from home contains Capoten 25 mg tablets.

The patient will receive _____ tablet(s) for one dose. _____

27. Administer naloxone (Narcan) 0.1 mg intravenous push as per standing order to counteract morphine given for pain because respirations are less than 7 per minute. The medication cabinet contains vials with Narcan 0.4mg/mL.

The nurse administers _____ . How many mls? _____

DIRECTIONS: Convert when needed and solve for the unknown quantity.

28. The nurse practitioner prescribes octreotide (Sandostatin) 500 mcg subcutaneous twice daily for acromegaly. The pharmacy dispenses a multidose vial with 5mg / 5 ml.

The patient will receive _____ how many mls in one dose. _____

DIRECTIONS: Determine the dose of medication for each problem. Round your answers to the nearest whole number, and label your answer with the appropriate units of measure.

29. **Prescription:** metoclopramide (Reglan) 0.8 mg/kg intravenous every 4 hours over 15 minutes for three doses beginning 2 hours before chemotherapy

What You KNOW: Patient weight is 140.8 lb.

What is the patient's weight in Kg? _____

How many mg will the patient receive with each dose? _____

DIRECTIONS: Solve for X. Label you answer.

30. $200\text{mg} / 1 \text{ tablet} = 100 \text{ mg} / X \text{ tablet}$ _____

31. $12.5\text{mg} / 5 \text{ mL} = 50\text{mg} / X \text{ mL}$ _____

DIRECTIONS: Calculate the correct dose of the following liquid medications.

32. **Prescription:** Mycostatin 400,000 units swish and swallow now

What You HAVE: Mycostatin 100,000 units / 5 mL

How many mls will the patient get? _____

33. **Afternoon/Evening Prescription:** codeine phosphate 15 mg intramuscularly every 6 hours as needed for pain.
What You KNOW: The patient tells the physician that the medication does not relieve her pain. The physician instructs you to give the patient an additional 15 mg codeine intramuscularly now, along with the afternoon / evening dose.
What You HAVE: Medications drawer contains prefilled cartridges that contain codeine 30 mg/ml.

How many milliliters are needed to administer the new afternoon/evening injection? _____

34. **Prescription:** 750mg valproic acid (Depakote) by mouth
What You HAVE: 250mg capsules

How many capsules should be given? _____

TEST REVIEW ANSWER SHEET

1. Your patient is ready to receive morning medications: aspirin 81 mg, Coumadin 7.5 mg, Lasix 20 mg, and digoxin 0.25 mg. What is the total number of milligrams for all medications?
108.75mg
2. **Prescription:** 40 mg
What You HAVE: One 18.8 mg tablet
How many more milligrams must you get from the pharmacy?
21.2mg
3. Your patient has an elevated temperature and is to receive 243mg aspirin orally now 81 mg orally in 6 hours. What is the difference?
162mg
4. Your patient is to receive 2 tablets of 0.06 mg strength and $1\frac{1}{2}$ tablets of 1.5 mg strength.
What is the total strength to be given?
2.37 mg
5. You are to administer 30 mcg thyroid tablets.
What You HAVE: $2\frac{1}{2}$ tablets.
How many mcg is each tablet?
12 mcg
6. A patient is supposed to have 1500 mL fluid every 24 hours. You know that the patient is to ingest two thirds of the fluid between breakfast (8 AM) and dinner (6 PM).
How many milliliters of fluid should be ingested between breakfast and dinner?
1000 ml
7. You are to give your patient the lowest percentage eye ointment the pharmacy has on hand for his eye infection. The pharmacy has $\frac{2}{100}$, $\frac{3}{8}$, and $\frac{1}{5}$ eye ointment available. Which is the lowest?
0.02
8. Decrease total fluid intake by $\frac{1}{6} \times \frac{3}{2}$ daily for your patient who is in renal failure.
Write answer as both fraction and decimal forms.
 $\frac{1}{4}$ 0.25

DIRECTIONS: Questions 9 & 10. Determine the following medication doses (X) based on the mathematical information given. Write your answer to the nearest tenth.

9. $X = \frac{1}{2} / \frac{1}{8} \times 5$ 20

10. $X = 1.5 / 2 \times 3.5 / 6$ 0.4

DIRECTIONS: Write the following as you would see it written in the clinical setting using the abbreviation for each unit of measure and identify each unit as weight, length, or volume.

11. One hundred micrograms of triiodothyronine (T₃, Triostat) for myxedema. 100mcg weight

12. Three liters of bladder irrigant to run over 12 hours for hematuria. 3L volume

DIRECTIONS: Convert the following metric measurements.

13. **Prescription:** 400 mg cefonicide (Monocid) intravenous for the treatment of *S. pneumoniae* septicemia

What is the equivalent dose in grams? 0.4g

14. Aspirin 81 mg is equal to _____ grains
Round to the nearest tenth. 1.4gr

15. Cimetidine (Tagamet) 800 mg orally is prescribed for the treatment of acid indigestion.
This medication is equal to _____g. 0.8g

16. Your patient has a maximum dose of metformin (Glucophage) 2 g per day to control diabetes mellitus. This medication is equal to _____mg. 2000mg

17. **Prescription:** Premarin, a conjugated estrogen 2.5 mg by mouth daily as adjunct therapy for postmenopausal osteoporosis treatment
What You HAVE: 625 mcg tablets
Convert milligrams to micrograms: 2500mcg
How many tablets will you give the patient daily? 4 tablets

18. The physician writes a prescription for gentamicin 2 mg / kg intravenously every 8 hours for 7 days.
What is the patient's weight in kg? 78kg
What is the dose for a patient weighing 171.6 pounds? 156mg

DIRECTIONS: Write each percentage as a fraction and as a decimal for intravenous fluids and medications.

19. 2.5% peritoneal dialysate $\frac{1}{40}$ 0.025

DIRECTIONS: Questions 20. In each of the following clinical situations, determine the number of grams of drug the solution will contain.

20. **Prescription:** 500 mL bladder irrigation with a 25% acetic acid solution 125g

DIRECTIONS: Questions 21 & 22 Write a ratio from the following medication information using both a fraction line and a colon

21. Omeprazole (Prilosec) 20 mg in 1 capsule $\frac{20\text{mg}}{1\text{ capsule}}$ 20mg: 1capsule

22. Ibuprofen (Motrin) 100 mg in 5 mL suspension for moderate pain $\frac{100\text{mg}}{5\text{ ml}}$ 100mg:5 ml

23. Your patient's eye ointment is prescribed as 5 mg / 1000 mg erythromycin ointment.
Write this as a ratio and reduce it. 5:1000; 1:200

24. The nurse practitioner prescribes lindane shampoo 1%
What is this as a ratio? 1:100

DIRECTIONS: Solve the following problems using the ratio-proportion method.

25. **Prescription:** ranitidine hydrochloride (Zantac) syrup 120 mg by mouth
What You HAVE: 15mg per 1 mL
How many milliliters will be administered? 8 mL

26. A patient is to receive captopril (Capoten) 37.5 mg orally three times daily for treatment of hypertension. The patient's prescription bottle from home contains Capoten 25 mg tablets.
The patient will receive _____ tablet(s) for one dose. 1.5 tablets

27. Administer naloxone (Narcan) 0.1 mg intravenous push as per standing order to counteract morphine given for pain because respirations are less than 7 per minute. The medication cabinet contains vials with Narcan 0.4 mg/mL.

The nurse administers _____ . How many mls?

0.25 mL

DIRECTIONS: Convert when needed and solve for the unknown quantity.

28. The nurse practitioner prescribes octreotide (Sandostatin) 500 mcg subcutaneous twice daily for acromegaly. The pharmacy dispenses a multidose vial with 5 mg / 5 mL.

The patient will receive _____ How many mls in one dose.

0.5 mL

DIRECTIONS: Determine the dose of medication for each problem. Round your answers to the nearest whole number, and label your answer with the appropriate units of measure.

29. **Prescription:** metoclopramide (Reglan) 0.8 mg/kg intravenous every 4 hours over 15 minutes for three doses beginning 2 hours before chemotherapy

What You KNOW: Patient weight is 140.8 lb.

What is the patients weight in Kg?

64lb

How many mg will the patient receive with each dose?

51mg

DIRECTIONS: Solve for X. Label you answer.

30. $200\text{mg} / 1 \text{ tablet} = 100 \text{ mg} / X \text{ tablet}$

X= 0.5 (1/2)
tablet

31. $12.5\text{mg} / 5 \text{ mL} = 50\text{mg} / X \text{ mL}$

X= 20 mL

DIRECTIONS: Calculate the correct dose of the following liquid medications.

32. **Prescription:** Mycostatin 400,000 units swish and swallow now

What You HAVE: Mycostatin 100,000 units / 5 mL

How many mls will the patient get?

20mL

33. **Afternoon/Evening Prescription:** codeine phosphate 15 mg intramuscularly every 6 hours as needed for pain.

What You KNOW: The patient tells the physician that the medication does not relieve her pain. The physician instructs you to give the patient additional 15 mg codeine intramuscularly now, along with the afternoon / evening dose.

What You HAVE: Medications drawer contains prefilled cartridges that contain codeine 30 mg/ml.

How many milliliters are needed to administer the new afternoon/evening injection?

1mL

34. **Prescription:** 750mg valproic acid (Depakote) by mouth

What You HAVE: 250mg capsules

How many capsules should be given?

3 capsules

CLINICAL PACKET INSTRUCTIONS

- A. Medication Card and Criteria (see Skills I Syllabus [Pharmacology])
- B. Data Base example (see Foundation Syllabus [Nursing Process]). You may not use a Nursing Diagnosis more than one time during the semester.
- C. Instructions for Medical Diagnosis Form found on page 26. (You may not use a Medical Diagnosis more than one (1) time during the semester).
- D. Review Skills I syllabus documentation (May bring the charting terms and abbreviations to clinical with you).
- E. Review Foundation Syllabus – Communication

UAP Clinical packets should include and placed in a colored pocket folder (no brackets): Colors should be blue for Jan, yellow for Connie and, orange for Delia.

1. UAP Clinical Experience Grading Criteria
2. Hygiene Check Off list

SIMS Clinical packets should include and placed in a colored pocket folder (no brackets): Colors should be blue for Jan, yellow for Connie and, orange for Delia.

1. SIMS Clinical Performance Evaluation
2. Report From Off Going Nurse Form
3. Drug Card Criteria As It Pertains to your client
4. Medical Diagnosis Form
5. Laboratory Tests & Diagnostic Studies
6. Simulation Rotation Critique Form (8)
7. Performance Checklist Physical Assessment
8. Nursing Documentation
9. Nursing Process Grade Criteria

10. Nursing Process Form

Clinical packets should include and placed in a colored pocket folder (no brackets): Colors should be blue for Jan, yellow for Connie and, orange for Delia.

1. Clinical Performance Evaluation
2. Report from Off Going Nurse
3. Student's Skill Communication to TPCN
4. Data Base
5. Laboratory Data for RNSG 1160
6. Nursing Care Assignment Card
7. Nurse Drug Card Criteria as It Pertains to your client. You may need to make more copies
8. Medical Diagnosis
9. Nursing Care Plan Grading Criteria
10. Nursing Process (may need to make copies for your care plan)
11. Clinical Performance Criteria
12. Student Clinical Evaluation Tool

MEDICAL DIAGNOSIS FORM INSTRUCTIONS

What is the medical diagnosis?

Diabetes Mellitus Type I

What pathological condition causes the medical diagnosis?

Inefficient production of insulin of the pancreas.

What does the medical diagnosis cause?

High blood glucose, PVD and Neuropathy,

What are the signs and symptoms the patient is having?

Weakness, dizziness and polyuria, etc.

What laboratory and diagnostic studies are used to determine the medical diagnosis?

Blood glucose levels etc.

What medications are needed for management of this medical diagnosis?

Insulin and oral antidiabetics, etc.

What nursing care and teaching does the patient need to help/her adapt to this medical diagnosis?

Monitoring of blood glucose levels, dietary teaching, etc.

MEDICAL DIAGNOSIS

What is the medical diagnosis? _____

What pathological condition causes the medical diagnosis? _____

What does the medical diagnosis cause? _____

What are the signs and symptoms of the medical diagnosis? _____

Lab work and other diagnostic studies are used to determine the medical diagnosis: _____

What medications are needed for management of this medical diagnosis? _____

What nursing care and/or teaching does the patient need to help him/her adapt to this medical diagnosis?

Date: _____ Student Name: _____

AGENCY: _____

**SOUTH PLAINS COLLEGE ASSOCIATE
DEGREE NURSING PROGRAM**

CLINICAL INSTRUCTOR'S EVALUATION OF STUDENT

Date _____ AGENCY _____

Student's Printed Name _____

NCP Grade _____

Clinical Performance Evaluation _____

Clinical Evaluation Tool _____

Nursing Diagnosis _____

Medical Diagnosis _____

Signature of Faculty: _____

Signature of Student: _____

Date: _____

Student Printed Name:

KEY: ELA: Expected Level of Achievement DECS: Differentiated Essential Competencies (Texas BON, 2010) * Critical Objective	RATING: N/O: Not Observed (can only be used at mid-term) S: Satisfactory U: Unsatisfactory NI: Needs Improvement
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Graduate Outcome: CLINICAL DECISION MAKING - Provides competent nursing interventions based on application of the nursing process and demonstrates critical thinking, independent judgment and self-direction while caring for patients and families. (ELA 2)

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	1. Identify theoretical concepts with nursing knowledge and skills to meet the basic needs of patients and their families throughout the lifespan in a variety of settings.				
	A2		A1	Satisfactory: Consistently identifies physiological and psychosocial needs utilizing Maslow's Hierarchy and Erikson's Developmental Level. Performs skills correctly.				
	B2		A2					
	B3		B1					
	B6		B2					
	B8		D1					
	C1		D3					
	C3		D4					
	E8							
	E10			Needs Improvement: Requires assistance identifying physiological and psychosocial needs utilizing Maslow's Hierarchy and Erikson's Developmental Level. Performs skills but requires assistance with basic skills.				
	F6							
				Unsatisfactory: Does not identify physiological and psychosocial needs utilizing Maslow's Hierarchy and Erikson's Developmental Level. Does not perform skills safely.				
A2	A1	B2	A2	2. Recognize the five steps of the nursing process into nursing practice.				
	A2	B3	B1	Satisfactory: Consistently identifies the five steps of the nursing process.				
	A4	B5	C1					
	B1		D3					
	B3		D4					
	B4		E1					
	B5							
	C2							
	C3							
	C5,E6			Needs Improvement: Requires assistance in identifying the five steps of the nursing process.				
	D2,E1							
	D3E2							

Graduate Outcome: CLINICAL DECISION MAKING - Provides competent nursing interventions based on application of the nursing process and demonstrates critical thinking, independent judgment and self-direction while caring for patients and families. (ELA 2)

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	2. Recognize the five steps of the nursing process into nursing practice.				
				Unsatisfactory: Does not identify the five steps of the nursing process.				
A2	A1	A3	A3	3. Use critical thinking, problem solving, and the nursing process in a variety of setting through direct care assignment.				
B4	A2	B1B2	B2					
B6	A3	B7	D4	Satisfactory: Consistently collects data and applies the nursing process.				
	A4	C2	E1					
	B1		E2					
	B3							
	B4							
	B5			Needs Improvement: Requires assistance recognizing problems, collecting data and applying the nursing process.				
	B7							
	C2C5							
	D1D2							
	E1E2							
	E3			Unsatisfactory: Cannot utilize the nursing process.				
	E10							
	F1F4							
	F6G2							
A2	A1	A3	A3	4. Explore critical thinking and problem solving skills in prioritizing, management, and coordination of all aspects of care.				
B4	A2	B1B2	B2					
B6	A3	B7	D4	Satisfactory: Organizes schedule to allow sufficient time for obtaining client care assignment and preparing for clinical experiences. Does not violate previously mastered principles/learning in carrying out nursing intervention skills. Organize work priorities to conserve energy of the client and self. Completes clinical assignments within allotted time.				
	A4	C2	E1					
	B1		E2					
	B3							
	B4							
	B5			Needs Improvement: Is disorganized in obtaining client care assignment and preparing for clinical experiences. Needs assistance with previously mastered principles/learning in carrying out nursing intervention skills. Disorganized work priorities. Late with clinical assignments.				
	B7							
	C2C5							

Graduate Outcome: CLINICAL DECISION MAKING - Provides competent nursing interventions based on application of the nursing process and demonstrates critical thinking, independent judgment and self-direction while caring for patients and families. (ELA 2)

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors				
1	2	3	4	4. Explore critical thinking and problem solving skills in prioritizing, management, and coordination of all aspects of care. Unsatisfactory: Client care assignment incomplete. Violates previously mastered principles/learned skills, unable to prioritize. Does not turn in clinical assignments.				
	D1D2							
	E1E2							
	E3							
	E10							
	F1F4							
	F6G2							

Graduate Outcome: COMMUNICATION & INFORMATION MANAGEMENT - Communicates effectively utilizing technology, written documentation, and verbal expression with members of the health care team, patients, and their families. (ELA 2)

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	5. Develop effective skills of communication and collaboration with members of the health care team, patient and their families.				
A5	B1B3	B5	A2					
A7	B5		B3	Satisfactory: Consistently identifies verbal and non-verbal client messages. Utilizes therapeutic communication techniques during client assessments and interactions. Documents accurately, concisely, and legibly and sign all entries on nursing notes with minimal assistance.				
	D2		C2					
	E4E5		D1					
	E9		E2					
	E11		E3					
	F3		E4	Needs Improvement: Requires assistance with identifying verbal and nonverbal client messages. Does not consistently utilize therapeutic communication techniques during client assessment and interactions. Needs assistance with documentation in the clients health record and reminders to sign all entries				
				Unsatisfactory: Does not recognize verbal and/or nonverbal client messages. Does not utilize therapeutic communication techniques during client assessment and interactions. Does not document pertinent or correct information.				
B2	G1	B9	A1	6. Identify principles of teaching-learning in providing information to patients and their families, regarding health promotion, maintenance, and restoration of health or the process of death and dying.				
B6	G2		A3					
D1	G3		B1					
D3	G4		B3					
	G5		E3	Satisfactory: Consistently documents patient teaching at a beginning level of proficiency.				
	G6							
	G7							

Graduate Outcome: COMMUNICATION & INFORMATION MANAGEMENT - Communicates effectively utilizing technology, written documentation, and verbal expression with members of the health care team, patients, and their families.

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	Needs Improvement: Requires assistance with documenting patient teaching at a beginning level of proficiency.				
	H1							
	H3							
	A3							
	A4							
	B4							
	C3							
	E4							
	E10							
				Unsatisfactory: Does not document patient teaching at a beginning level of proficiency.				

Graduate Outcome: LEADERSHIP - Demonstrates knowledge of basic delegation, leadership management skills, and coordinates resources to assure optimal levels of health care for patients and their families. (ELA 1)

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	7. Identify the nurse's function within the organizational framework of various healthcare settings and recognize appropriate delegation of care to patients and their families.				
A1	C4	A2	C2					
A3	E6	B1	C3	Satisfactory: Consistently identifies and documents the nursing roles on the Clinical Performance Criteria.				
B2	F3	D1	C4					
B5	G2		D1					
B6	H3		D3					
C4								
C5								
C6				Needs Improvement: Requires assistance in identifying the nursing roles on the Clinical Performance Criteria.				
				Unsatisfactory: Does not identify the nursing roles on the Clinical Performance Criteria.				

Graduate Outcome: LEADERSHIP - Demonstrates knowledge of basic delegation, leadership management skills, and coordinates resources to assure optimal levels of health care for patients and their families.

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4					
				8. Identify the health care team in delivering care to patients and their families.				
A1	C2	A3	B3	Satisfactory: Consistently identifies and documents additional members of the health care team on the Clinical Performance Criteria.				
B5	C4	A5	B5					
B6	C5	B1	C3					
B9	D4	C1	C4					
C1	E3		D1					
C2	E6		D2	Needs Improvement: Requires assistance in identifying and documenting additional members of the health care team on the Clinical Performance Criteria.				
C3	E8		D3					
D4	F3		D6					
	F5							
	G2							
	H3			Unsatisfactory: Does not identify or document additional members of the health care team on the Clinical Performance Criteria.				
B5	C2	B1	A2	9. Identify appropriate referral sources to meet the needs of patients and their families.				
B9	C4	D2	A3	Satisfactory: Consistently identifies and documents appropriate referral sources on the Clinical Performance Criteria.				
C2	C5		B5					
D4	G2		C2					
	H3		D2					
				Needs Improvement: Requires assistance in identifying and documenting appropriate referral sources on the Clinical Performance Criteria.				
				Unsatisfactory: Does not identify or document appropriate referral sources on the Clinical Performance Criteria.				

Graduate Outcome: SAFETY - Implements appropriate interventions to promote a quality and safe environment for patients and their families. (ELA 1)								
DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	10. Recognize National Patient Safety Goals, Standards of Care, and Policy and Procedures in a variety of health care settings.				
A3	A1	A2		Satisfactory: Consistently looks up Policy and Procedures and delivers care utilizing Standards of Care and National Patient Safety Goals.				
B5	A4	A4						
B6	C1	B3						
C6	C3	B4						
D4	C5	B7						
D5	D1	C3						
	F2			Needs Improvement: Requires reminding of necessity of utilizing Policy and Procedures, Standards of Care and National Patient Safety Goals to deliver care.				
	G2							
	H6							
				Unsatisfactory: Does not utilize Policy and Procedures, Standards of Care or the National Patient Safety Goals to deliver care.				
A2	C1	A2	D1	11. Implement safe care for cost effective nursing care in collaboration with members of the healthcare team.				
B6	C6	A4		Satisfactory: Consistently implements safe, cost effective nursing care in collaboration with members of the health care team as evidenced by organizing and prioritizing patient care.				
C5	D2	B1						
	E10	B6						
	E12	C2						
		D1						
				Needs Improvement: Requires assistance in organizing and prioritizing safe, cost effective nursing care.				
				Unsatisfactory: Does not organize or prioritize in delivering safe, cost effective nursing care.				

Graduate Outcome: PROFESSIONALISM - Demonstrates knowledge of professional development and incorporates evidence-based practice in the nursing profession. Incorporates concepts of caring, including moral, ethical, legal standards while embracing the spiritual, cultural, and religious influences on patients and their families. (ELA1)

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	12. Recognize clinical data, current literature, and resources and outcomes to therapeutic interventions to make appropriate nursing practice decisions.				
B6	A3	B3	A3	<p>Satisfactory: Consistently supports planned nursing interventions by scientific rationale, researches patient medication and includes implications related to nursing care in written nursing process and administers medication safely.</p> <p>Needs Improvement: Requires assistance supporting planned nursing interventions by scientific rationale, researching patient medication and including implications related to nursing care in written nursing process and administering medications safely.</p> <p>Unsatisfactory: Does not support planned nursing interventions with scientific rationale, or research patient medication and include implications related to nursing care in written nursing process and in administering medications safely.</p>				
C1	A4	B7	D4					
D1	C3		E3					
	E5							
B4	D2	A2	D4	13. Define the responsibility for professional and personal growth and development.				
B6	E3	D1		<p>Satisfactory: Consistently identifies behaviors which need change or modifications, seeks learning experiences, demonstrates flexibility/adaptability when situations or when assignments change and comply with professional appearance requirements according to SPC Policy.</p> <p>Needs Improvement: Requires assistance/reminders to identify behaviors which need change or modification, seeking learning experiences, demonstrating flexibility/ adaptation when situations or when assignments change and complying with professional appearance requirements according to SPC Policy.</p> <p>Unsatisfactory: Does not identify behaviors which need change or modification, seeking learning experiences, demonstration flexibility/adaptation when situations or when assignments change and complying with professional appearance requirements according to SPC Policy.</p>				
B8	F1							
D1	G5							
D3								

Graduate Outcome: PROFESSIONALISM - Demonstrates knowledge of professional development and incorporates evidence-based practice in the nursing profession. Incorporates concepts of caring, including moral, ethical, legal standards while embracing the spiritual, cultural, and religious influences on patients and their families.

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	14. Recognize ethical and legal responsibility and accountability for one's nursing practice.				
A1	B5	A2	C2	Satisfactory: Consistently communicates with instructor prior to proceeding with unfamiliar nursing actions, reports errors to instructor/staff immediately and accurately, and recognize actions appropriate for delegation.				
B2	D1	A4	C4					
B5	E6	B1	D1					
B8	E12	C1						
C3		D1						
C5		E1		Needs Improvement: Requires reminders to communicate with instructor prior to performing unfamiliar patient care activities, reporting errors accurately to instructor/staff in timely manner and recognizing actions appropriate for delegation.				
D4								
				Unsatisfactory: Does not communicate with instructor prior to performing unfamiliar patient care activities, reporting errors accurately and in a timely manner to instructor/staff and recognizing actions appropriate for delegation.				
A3	A1	A2	A1	15. Understanding the actions of a health care advocate to provide quality health care while embracing the spiritual, cultural, and religious influences on patients and their families.				
B3	B4	A4	A3	Satisfactory: Consistently maintains nurse/patient relationship confidentiality, protects patient privacy and documents health care advocacy while embracing spiritual, cultural, and religious influences of patients and their families.				
B6	C2	B1	D4					
C3	C5	B6	E3					
C5	D3	E1						
C6	E1							
D4	E2							
	E13							
				Needs Improvement: Requires prompting to maintain nurse/client relationship confidentiality, protecting patient privacy and documenting health care advocacy while embracing spiritual, cultural and religious influences of patients and their families.				
				Unsatisfactory: Does not maintain nurse/client relationship confidentiality, protect privacy and documenting health care advocacy while embracing spiritual, cultural, and religious influences of patients and their families.				

Graduate Outcome: PROFESSIONALISM - Demonstrates knowledge of professional development and incorporates evidence-based practice in the nursing profession. Incorporates concepts of caring, including moral, ethical, legal standards while embracing the spiritual, cultural, and religious influences on patients and their families.

DECS (clinical)				Clinical objectives and examples of knowledge, skills, & behaviors	R -1	R-2	R-3	R-4
1	2	3	4	16. Recognize one's own caring behavior when interacting with patients, their families, and members of the health care professions.				
A3	B3	A4	A2					
B2	C5	B1	B3	Satisfactory: Recognizes and documents examples of caring behaviors performed by self and others.				
B3	E7	B7	E1					
C3	F1	D1						
C6	F5							
D4	F6							
	G4							
				Needs Improvement: Requires assistance recognizing and documenting examples of caring behaviors performed by self and others.				
				Unsatisfactory: Fails to recognize and document examples of caring behaviors performed by self and others.				

ADDENDUM

Clinical Schedule

Clinical Date	Clinical Site	Clinical Name	Clinical Times
October 3, 2016	Covenant Medical Center or Women's & Children's	Shadow A Nurse	0600-1000
October 3, 2016	Clinical Excellence Center (post conference)	Post Conference	1030-1200
October 20th, 21st, 27th, 28th, 2016	University Medical Center (UMC)	Unlicensed Assistive Personnel (UAP)	0615-1230
October 31st, November 1st, 2nd, 3rd 2016	Clinical Excellence Center	SIM Rotation	Group 1: Mon/Tues - 0730-1200
			Group 2: Mon/Tues - 1300-1730
			Group 3: Wed/Thur - 0730-1200
			Group 4: Wed/Thur - 1300-1730
Nov. 8th, 9th, 2016	University Medical Center (UMC) Group 1	Hospital Rotation	Tues. 0615-1500 Wed. 0615-1300
Nov. 15th, 16th, 2016	University Medical Center (UMC) Group 2		Tues. 0615-1500 Wed. 0615-1300
Nov. 21st, 22nd, 2016	University Medical Center (UMC) Group 1		Mon. 0615-1300 Tues. 0615-1500
Nov. 28th, 29th, 2016	University Medical Center (UMC) Group 2		Mon. 0615-1300 Tues. 0615-1500