# ODESSA COLLEGE ASSOCIATE DEGREE NURSING PROGRAM SYLLABUS RNSG 1361-98 (CLINICAL) EVENING CLASS Spring 2013

**COURSE TITLE:** CLINICAL – COMPLEX

**CREDIT:** 3 CREDIT HOURS (9 CONTACT)

**PLACEMENT:** SECOND SEMESTER OF NURSING PROGRAM

**PREREQUISITES:** RNSG 1105, RNSG 1201, RNSG 1215, RNSG 1309, RNSG 1341

AND RNSG 1160 & RNSG 1260 OR CONSENT OF

**DEPARTMENT** 

COREQUISITES: RNSG 1443, RNSG 2213, RNSG 2161, BCIS 1305 AND PSYC

2314

LICENSING/CERTIFICATION AGENCY: TEXAS BOARD of NURSING (BON)

**FACULTY:** Sarah Shellenberger, MSN, RN, CLNC

Office: CT 208

Office Number: 335-6627 Cell Phone Number: 770-3218

Sue Albe, BSN, RN Office: CT 212

Office Number: 335-6408 Cell Phone Number: 413-5163

**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. (SCANS 1, 2, 3, 4, 5, 6, 8, 9, 10, 11)

**END OF COURSE OUTCOMES:** As outlined in the learning plan, apply advanced theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business industry.

**COURSE OBJECTIVES:** Course objectives utilize the framework of Differentiated Entry Level Competencies of Graduates of Texas Nursing Program. At the completion of the course, the student will be able to: (PO = corresponding program outcome).

#### I. Member of a Profession:

- A. Illustrate ways to assume accountability for quality nursing care of patients. (PO 2)
- B. Explain the role of advocacy in the provision of quality health care for patients. (PO 13)

#### II. Provider of Patient-Centered Care:

- A. Examine the health status and health needs of patients based upon interpretation of health data and preventative health practices. (PO 1)
  - 1. Differentiate concepts and processes related to patients and families including physical and psychosocial growth and development, pathophysiology, psychopathology, pharmacology, medical diagnosis and treatments.
  - 2. Compare cultural and spiritual practices related to health, illness, death and dying.
  - 3. Examine characteristics, concepts, and processes related to disease transmission, risk factors, health promotion and disease prevention practices and their implications for patients and their families in the classroom and laboratory setting.
  - 4. Examine current literature and implications of research findings to improve care of patients with complex health care needs.
  - 5. Perform selected intermediate nursing skills in the simulation laboratory setting according to approved standards and criteria.
- B. Utilize clinical data to determine the health status and health needs of patients with complex health care problems (PO 2, 3, 4, 5, 7) and to develop teaching plans using decision making skills.
  - 1. List the assessment techniques used for patients with complex health problems.
  - 2. Analyze assessment findings to select appropriate nursing diagnosis.
  - 3. Define goals to maximize patient compliance and achievement.
  - 4. Select interventions according to Maslow's hierarchy.
  - 5. Determine success of plan by comparing results of interventions to goal.
- C. Select community resources including agencies and health care providers related to the needs of patient and their families. (PO 10)

#### **III.** Patient Safety Advocate:

- A. Demonstrate knowledge of the Texas Nursing Practice Act and the Texas Board of Nursing Rules that emphasize safety, as well as all federal, state and local government and accreditation organization safety requirements and standards.
- B. Formulate goals and outcomes using evidence-based data to reduce patient risks.

#### IV. Member of the Health Care Team:

Communicate and manage information using technology to support decision making to improve patient care.

**TEACHING/LEARNING METHODS:** Students learn by providing hands-on care to one or two patients under the guidance and direction of faculty, preceptors, and/or hospital/agency staff nurses in a variety of clinical settings. As appropriate for the setting, students will discuss each one of their patients with an instructor, preceptor, or agency staff member on each clinical day. Students will be expected to be able to knowledgeably discuss each patient's diagnoses, diagnostic tests and the results, lab work and the results, medications and why the patient is receiving them, and any signs or symptoms that the patient has with the appropriate nursing interventions. There will be one-on-one interactions with individual students and faculty as well as group discussions. Presentations, case studies, and/or discussions will be conducted in post clinical conferences by faculty and/or students following the clinical experience.

#### CORRELATION OF THEORY TO CLINICAL/PREPARATION FOR CLINICAL

Students learn nursing care and procedures related to intravenous therapy and fluid and electrolyte balance. Blood components and transfusion principles are presented. Students learn intravenous therapy procedures and skills by watching streaming videos loaded into Blackboard, allowing preparation to occur at the college or on personal computers. Skills taught, demonstrated and return-demonstrated include the following:

- 1. Starting an IV infusion
- 2. Changing an IV solution container and tubing
- 3. Monitoring an IV site & infusion
- 4. Changing a peripheral IV dressing
- 5. Capping a primary IV line for intermittent use
- 6. Utilizing an IV pump
- 7. Removing medications from an ampule
- 8. Adding medications by IV bolus or push through an IV infusion (both compatible and incompatible)
- 9. Administering a piggyback intermittent IV infusion of medication
- 10. Introducing drugs through a medication or drug-infusion lock using a saline flush
- 11. Reconstituting powdered medication in a vial
- 12. Changing the dressing and flushing central venous access devices
- 13. Setting up chest tube drainage system
- 14. Monitoring/management of chest tube drainage system

Students may encounter patients on ventilators in second semester (however, students **will not choose these patients as part of their clinical rotation)**. The following skills related to respiratory management are taught and return-demonstrated:

- 1. Suctioning the tracheostomy
- 2. Providing tracheostomy care

**EVALUATION AND GRADING:** The final clinical grade is evaluated as 'Pass' or 'Fail". Students will receive daily, mid-rotation and final clinical evaluations. Components of clinical evaluation include:

- 1. Clinical performance
- 2. Patient selection
- 3. Meeting 75 % of clinical objectives
- 4. Weekly pre and post clinical work for all assigned areas
- 5. Caring for up to two patients by MIDDLE of rotation

6. <u>In order to pass a clinical course, students must obtain an average of at least 75% or above on the total number of concept maps assigned in each clinical course. The total number of concept maps assigned in each course must be submitted to the instructor in order to pass each clinical course.</u>

Using the clinical evaluation tool, performance criteria are measured as 'satisfactory' or 'unsatisfactory'. The clinical evaluation tool denotes non-critical and critical elements. A critical element is defined as a behavior to be met during each clinical experience. Critical elements are distinguished on the evaluation form by the use of "\*\*".

Instructor observation of care delivered to patients, input from agency staff or preceptors, written concept maps, charting, assigned written work, and other requirements are included in the assessment of clinical performance.

Verbal and written feedback on student performance occurs throughout the course (formative evaluation). If the student has been told he/she made an error, a clinical evaluation will be given immediately with a corrective prescription to remediate. If the student demonstrates unsafe clinical practice, the student may receive an unsatisfactory clinical evaluation and may be dropped from the course. Unsafe occurrences are found in the Nursing Student Handbook and Learning Materials Packet.

Clinical evaluation will reflect the student's ability to meet clinical objectives and to implement classroom theory. Any identified weakness will need to be <u>strengthened</u> by the end of the course. As the course progresses, the instructor may rate clinical objectives as **Needs Improvement (NI)**.

**Satisfactory** ratings of clinical objectives signify at least minimal accomplishment of tasks as stated or required. The student is consistent in performing nursing responsibilities. A satisfactory rating on all objectives on the summative (final) evaluation is necessary for the student to earn a pass (PA) in clinical courses.

**Unsatisfactory** ratings on clinical objectives signify unacceptable performance in one or more areas. The student displays one or more of the following:

- 1) Unsafe practice by the lack of application of principles of safety and asepsis;
- 2) Failure to accomplish task(s);
- 3) Disregard for the patient and /or family in administering care;
- 4) Inability to identify or correct errors;
- 5) Inability to transfer theory knowledge to clinical practice; and/or
- 6) Inconsistent clinical behavior in the performance of nursing responsibilities.

In cases of clinical failure, the student will be apprised of the failure as soon as reasonably possible. If clinical failure occurs before the end of the semester, the student has the option of continuing in the didactic course. If the student questions the decision, he/she may refer to the grievance policy.

The student should refer to the Nursing Student Handbook for further information on clinical requirements and grading policies.

Students are encouraged to speak with instructors at any time regarding clinical performance.

Students should plan sufficient time to prepare for the clinical experience. Incomplete prep work may result in the student receiving 1) an absence and being sent home, 2) another assignment, such as being sent to work with OC Nursing Laboratory Skill Lab Coordinator, 3) an unsatisfactory grade, or 4) a clinical failure for the day, at instructor's discretion.

**NURSING PERFORMANCE EVALUATION:** It is the instructor's expectation that clinical nursing skills will be performed in a manner that shows the application of basic nursing principles. The evaluation tool is based on the Differential Level of Competencies for A.D.N. Graduates of Texas.

#### CLINICAL EXPERIENCES:

Clinical experiences may be scheduled at one or more of the following area facilities:

- 1. Medical Center Hospital, Odessa, TX
- 2. Midland Memorial Hospital, Midland, TX

Other selected clinical sites may also be assigned. Clinical guidelines for the various sites are provided in the Learning Packet Material.

#### **COURSE POLICIES:** All students are expected to:

- 1. In order to be admitted to the first day of class/clinical proof of required health information, CPR, fingerprints, health & liability insurance, etc. <u>MUST</u> be in the students file in the nursing office. If any of the information is not in file, the student will be required to obtain the information <u>BEFORE</u> being able to attend class/clinical.
- 2. Adhere to the OC Nursing Student Handbook and guidelines found in this syllabus and the Learning Material Packet.
- 3. Students will attend clinical properly attired. Follow Student Handbook policy regarding hair, nails, and jewelry. Failure to do so will result in being sent home. No student may go into a patient's room, in a student uniform if no faculty is present in the hospital (example: when in hospital obtaining pre-work on patient on the day prior to the clinical experience). Gum chewing is not allowed during clinical time.
- 4. All assigned written work must be turned in or the student will receive an incomplete for the semester. Assignments are graded satisfactory, needs improvement, or unsatisfactory.
- 5. Apply skills and theory taught in the classroom to practice in the clinical site.
- 6. Clinical attendance is mandatory. Back up plans need to be made in case of family illnesses. **To report a clinical absence, call and speak with your instructor between 0530 & 0600** (do not leave a message or send a text message). Any missed clinical time must be made up, as arranged by the clinical instructor within a set time limit. Please refer to the Student Handbook for the Clinical Absence policy for further requirements. If the student misses a second day of clinical time they may be unable to complete the clinical objectives and may receive an 'incomplete' for RNSG 1361 until the time can be made up.
- 7. **Cellular phones can not be used to talk on or text in patient care areas**. Students may use cell phones to access patient information related to patient care in privacy of non-patient care areas, such as break rooms. Patients should not be discussed on cell phones or text under any circumstances. Phone calls may be made during lunch break. Pictures of any kind may **NOT** be taken in any health care facility by any device. Violation of this policy WILL result in dismissal from the program (see Student Handbook).
- 8. **PDA Policy**: PDA Policy

Definition: A personal digital assistant (PDA) is also known as a palmtop computer or personal data assistant. The PDA is a mobile device that functions as a personal information

manager. Currently PDA's have the ability to connect to the internet. A PDA has an electronic visual display, enabling it to include a web browser, but some newer models have audio capabilities, enabling them to be used as a mobile phone or portable media player. Many PDA's can access the Internet by Wi Fi or Wirelesss Wide Area Networks (see Student Handbook). <a href="http://en.wikipedia.org/wiki/Personal\_digital\_assistant">http://en.wikipedia.org/wiki/Personal\_digital\_assistant</a>

#### Guidelines:

- a. Nursing students shall follow all Student Handbook guidelines regarding the use of cell phones and electronic media in the clinical setting. (See cell phone policy and social networking policy).
- b. Nursing students shall use their PDA's to access copies of their text books, drug books, IV books, and other electronic books that are pertinent to their clinical objectives.
- c. Nursing students may use the PDA's to access approved websites or electronic resources only to gain information pertinent to their clinical objectives and information for patient teaching.
- d. Nursing students shall not use the PDA's to access any personal information or social networking site during the clinical time or on the clinical sites (see social networking policy).
- e. Nursing students shall not collect or transmit any information in a forum which could be construed as Protected Health Information (PHI) under the Health Information Portability and Accountability Act (HIPAA). Protected Health Information is any information about health status, provision of health care, or location of health care.

<u>Reporting</u>: Nursing students, faculty, and preceptors have a duty to report nursing students who violate the PDA policy. Any policy infractions and or abuse should be sent to the Director of Associate Degree of Nursing.

<u>Disciplinary actions</u>: PDA's must not be used for communication in any manner. Failure to follow this policy and its condition may result in disciplinary action up to and including termination from the nursing program.

9. In accordance with Tobacco-Free Policies of area health care facilities, students are not allowed to use tobacco products of any kind during clinical experiences. This includes cigarettes, cigars, and oral tobacco products. Students are not allowed to leave the grounds of the health care facility to use tobacco products, or for any other reason. If a student leaves the grounds of the clinical site or violates the Tobacco-Free Policy of the Odessa College Nursing Program or of a clinical facility, a written "Tobacco Use Warning Form" will be issued to the student by the instructor for the first event. This form will be signed by the instructor and the student and will be placed in the student's personal file in the Nursing Office. In the event an instructor has the need to issue a "Tobacco Use Warning Form" to a student, the instructor will check the student's file for previous Tobacco Use warnings. A second violation of this policy will result in a second warning which will also be recorded on the form and signed by the instructor and the student. A third violation of this policy will result in a "Clinical Failure" in the clinical course in which the student is currently enrolled. Refer to the Odessa College Nursing Student handbook regarding Clinical Failures.

#### 10. Expectations for Engagement – Face to Face Learning

To help make the learning experience fulfilling and rewarding, the following Expectations for Engagement provide the parameters for reasonable engagement between students and instructors for the learning environment. Students and instructors are welcome to exceed these requirements.

#### Reasonable Expectations of Engagement for Instructors

- 1. As an instructor, I understand the importance of clear, timely communication with my students. In order to maintain sufficient communication, I will
  - provided my contact information at the beginning of the syllabus;
  - respond to all messages in a timely manner through telephone, email, or next classroom contact; and,
  - notify students of any extended times that I will be unavailable and provide them with alternative contact information (for me or for my supervisor) in case of emergencies during the time I'm unavailable.
- 2. As an instructor, I understand that my students will work to the best of their abilities to fulfill the course requirements. In order to help them in this area, I will
  - provide clear information about grading policies and assignment requirements in the course syllabus, and
  - communicate any changes to assignments and/or to the course calendar to students as quickly as possible.
- 3. As an instructor, I understand that I need to provide regular, timely feedback to students about their performance in the course. To keep students informed about their progress, I will
  - return classroom activities and homework within one week of the due date and
  - provide grades for major assignments within 2 weeks of the due date or at least 3 days before the next major assignment is due, whichever comes first.

#### Reasonable Expectations of Engagement for Students

- 1. As a student, I understand that I am responsible for keeping up with the course. To help with this, I will
  - attend the course regularly and line up alternative transportation in case my primary means of transportation is unavailable;
  - recognize that the college provides free wi-fi, computer labs, and library resources during regular campus hours to help me with completing my assignments; and,
  - understand that my instructor does not have to accept my technical issues as a legitimate reason for late or missing work if my personal computer equipment or internet service is unreliable.
- 2. As a student, I understand that it is my responsibility to communicate quickly with the instructor any issue or emergency that will impact my involvement with or performance in the class. This includes, but is not limited to,
  - missing class when a major test is planned or a major assignment is due;
  - having trouble submitting assignments;

- dealing with a traumatic personal event; and,
- having my work or childcare schedule changed so that my classroom attendance is affected.
- 3. As a student, I understand that it is my responsibility to understand course material and requirements and to keep up with the course calendar. While my instructor is available for help and clarification, I will
  - seek out help from my instructor and/or from tutors;
  - ask questions if I don't understand; and,
  - attend class regularly to keep up with assignments and announcements

#### **REQUIRED TEXT BOOKS:**

Ignatavicius, D., Workman, M.L., (2012). *Medical-Surgical Nursing: Patient-Centered Collaborative Care*, *Single Volume*, (7th Edition) Publication Date: **February 23, 2012** | ISBN-10: **1437728014** | ISBN-13: **978-1437728019** | Edition: 7

Deglin, J. & Vallerand, A. (2010). *Davis's Drug Guide for Nurses* (12<sup>th</sup> Ed.). Davis: PhiladelphiaPublication Date: **June 14, 2010** | ISBN-10: **0803623089** | ISBN-13: **978-0803623088** | Edition: 12

Gahart, B. & Nazareno, A. (2012). *Intravenous Medications.A Handbook for Nurses and Health Professionals* (28th Ed.) Mosby: St.Louis.8Pagana, K.D. & Publication Date: **July 29, 2012** | ISBN-10: **0323084818** | ISBN-13: **978-0323084819** | Edition: 29

Pagana, T.J.(2009). *Mosby's Manual of Diagnostic & Laboratory Test* (4th Edition ). Mosby: St Louis Publication Date: **October 21, 2009** | ISBN-10: **0323057470** | ISBN-13: **978-0323057479** | Edition: 4

Sylvestri, L.(2010) *Saunders Comprehensive Review NCLEX RN* (4th Ed.). Saunders: Philadelphia Publication Date: **October 26, 2010** | ISBN-10: **1437708250** | ISBN-13: **978-1437708257** | Edition: 5

Winningham & Prusser (2005). *Critical Thinking in Medical-Surgical Settings: A Case Study Approach* (4th Ed.). Mosby: St. Louis (Orange Book) Publication Date: **May 28, 2008** | ISBN-10: **0323053599** | ISBN-13: **978-0323053594** | Edition: 4

#### THERE IS A NEWER EDITION OF CRITICAL THINKING CASES. SEE BELOW:

Winningham's (2012). *Critical Thinking Cases in Nursing: Medical-Surgical, Pediatric, Maternity, and Psychiatric,* (5th Edution). Harding, Snyder, Preusser (White with green print on cover) Publication Date: June 14, 2012 | ISBN-10: 0323083250 | ISBN-13: 978-0323083256 | Edition: 5

#### OTHER BOOKS SUGGESTED TO PURCHASE FOR 2<sup>nd</sup> Semester

Ignatavicius, D., Workman, M.L., (2012) Clinical Companion for Medical-Surgical Nursing: Patient-Centered Collaborative Care, Single Volume, (7th Edition) Publication Date: **February 21, 2012** | ISBN-10: **1437727972** | ISBN-13: **978-1437727975** | Edition: 7

Ignatavicius, D., Workman, M.L., (2012) Clinical Decision-Making Study Guide for Medical-Surgical Nursing: Patient-Centered Collaborative Care, Single Volume, (7th Edition) Publication Date: **February 15, 2012** | ISBN-10: **1437728030** | ISBN-13: **978-1437728033** | Edition: **7** 

#### **COURSE SCHEDULE:** Course calendar will be distributed to students.

#### PROCEDURE FOR REQUESTING SPECIAL ACCOMMODATIONS

Odessa College complies with Section 504 of the Vocational Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. If the student has any special needs or issues pertaining to access to and participation in any class at Odessa College, please contact the Office of Disability Services at 432-335-6861 to request assistance and accommodations.

Nursing students with a disability who request reasonable accommodations should meet with the Program Director no later than the first week of classes. Reasonable accommodations will be provided as authorized by the Office of Disability Services as long as the ability to meet course requirements is not compromised. Nursing faculty provide no accommodations without authorization. It is the student's responsibility to be a self-advocate when requesting accommodations. The student will need to meet with each course instructor at the beginning of class to discuss the particular accommodation needed. Documentation of special needs will be maintained in the student's file.

Approved: 6/05; 7/09 Updated 12/11

"The SEI process for face-to-face and online courses will be scheduled near end of semester. Additional information will be provided."

Information in this syllabus may change as needed during this semester.

### CLINICAL EVALUATION RNSG 1361 CLINICAL COMPLEX (SEMESTER TWO)

Student's Name:	Daily	Mid- rotation	Final
Role of the Nurse:			
Member of a Profession:			
A. Function within the nurse's legal scope of practice and in accordance with the policies and procedures			
of the employing health care institution or practice setting.			
<ol> <li>Use a systematic approach to provide individualized, goal-directed nursing care to meet health care needs of patients and their families.</li> </ol>			
Demonstrate practice according to facility policies and procedures.			
3. Questions orders, policies and procedures that may not be in the patient's best interest.			
B. Assume responsibility and accountability for the quality of nursing care provided to patients and their families.			
Demonstrate continuing competency and professional development.			
2. Displays professional characteristics and values such as human dignity, truth,			
justice, freedom and equality.			
<ol> <li>Utilizes appropriate communication techniques and skills to maintain professional boundaries.</li> </ol>			
Provider of Patient Centered Care:			
A. Identify the health status and health needs of patients based upon interpretation of health data			
and preventative health practices. CONCEPT MAP and or SIM CHART			
1. Relate alterations in health status to health needs after performing a health assessment.			
2. Articulate psycho-social and cultural factors and explain how they impact the holistic care of the adult and family. <b>CONCEPT MAP</b>			
3. Identify alterations in health status with diagnosis and health data findings. <b>SIM CHART</b>			
4. Documentation on chart is complete and accurate with increasing independence. SIM CHART			
5. Identify correctly developmental levels according to Erickson. <b>CONCEPT MAP</b>			
B. Identify information from the assessment to select an appropriate plan of care for their patient			
and families. CONCEPT MAP			
<ol> <li>Outline appropriate nursing diagnoses using assessment.</li> <li>Construct goals to maximize patient compliance and achievement.</li> </ol>			
3. Select interventions according to Maslow's hierarchy. <b>CONCEPT MAP</b>			
4. Administer safe, effective, and caring nursing interventions.			
5. Relate results of interventions to goals to determine success of plan of care.			
C. Outlines appropriate teaching plans for patients concerning the promotion, maintenance and			
restoration of health. <b>CONCEPT MAP and SIM CHART</b>			
1. Explain and demonstrates effective verbal and non-verbal communication techniques with patients and families adapting to complex medical and surgical health alterations.			
<ol> <li>Outline teaching plans to patient and family to promote health and safety after discharge.</li> </ol>			
D. Provide direct care for one to two patients.			
1. Select patients according to patient needs and clinical objectives.			
2. Provide care for each patient according to Maslow's Hierarchy of Needs.**			
3. Administer medications safely to one to two patients.**			
Utilize the five rights of medication administration			
<ul> <li>Match drug to disease process</li> <li>Select correct injection site/correctly dispenses drug</li> </ul>			
Calculate dosages correctly (pre/post conference or on unit)			
Evaluate client condition after applying pharmacological interventions			
4. Give parenteral and non-parenteral medications, including intravenous medications, relying on			
knowledge of pharmacological principles and administration techniques.			
E Organize cooperation between the patient and interdisciplinary team for planning health care			
delivery to improve the quality of care to the adult and geriatric client.  1. Interact in a collegial manner with patient, families, and other health care team members to			
implement interventions to meet the patient's health care needs.			
2. Promote open communication between health care team members.			
3. Give report to primary nurse prior to leaving unit.			

Role of the Nurse:  Patient Safety Advocate:  A. Explain and demonstrate accountability and responsibility for the quality of nursing care provided to the patient and family.  1. Maintain patient confidentially.** 2. Complete prap work in a patient-focused and timely manner.** SIM CHART  B. Promote the profession of nursing in a manner which reflects positively on self and nursing.  1. Function as a safe, competent provider of nursing care. 2. Practice under evidenced-based modalities. 3. Qualify nursing actions according to scope of practice. **  C. Formulate goals and outcomes using evidence-based data to reduce patient risks.  D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.  Member of the Health Care Team:  A. Coordinate, collaborate, and communicate with patients, their families, and the interdisciplinary health care team to plan, deliver and evaluate patient-centered care.  B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families.  C. Communicate and collaborate in a timely manner with members of the interdisciplinary health care team to promote and maintain optimal health status of patients and their families.  D. Communicate and manage information using technology to support decision making to improve patient care.	Student's Name:		Daily	M id-
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Patient Safety Advocate: A. Explain and demonstrate accountability and responsibility for the quality of musing care provided to the patient and family.  1. Maintain patient confidentially.** 2. Complete prp work in a patient-focused and timely manner.** SIM CHART B. Promote the profession of nussing in a manner which reflects positively on self and nursing. 1. Function as a safe, competent provide of nursing care. 2. Practice under evidenced-based modalities. 3. Qualify nussing actions according to scope of practice. ** C. Formulate goals and outcomes using evidence-based data to reduce patient risks. D. Obtain instruction, supervision, or training as needed when implementing nursing procedures or practices.  Wember of the Health Care Team: A. Coordinate, collaborate, and communicate with patient-centered care. B. Serve as a health care advocate in monitoring and promoting quality and access to health care for patients and their families. C. Communicate and malaculatorate in a timely manner with members of the interdisciplinary health care team to plan deliver and evaluate patient-centered care. C. Communicate and malaculation optimal health status of patients and their families. D. Communicate and manage information using technology to support decision making to improve patient care. E. Identify and select community and healthcare resources to provide continuity of care after discharge. CONCEPT MAP  Key: **Critical Elements must be met each clinical day Performance criteria are graded as: Satisfactory — U Needs Improvement — NI (Daily & Mid-Rotation Only)  The final grade for the clinical course is Pass (PA) or Fail (F). All criteria must be passed to receive a course grade of Pass (PA).  Mid-Rotation Evaluation:  Student Signature	Role of the Nurse:			
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	Student Signature	Date		
Comments:	Instructor Signature	Date:		
	Comments:			

Final

## Student Contract RNSG 1361 Spring 2012

I have read the course syllabus and Learning Materials Packet for this course and understand the requirements, grading policies, and attendance policies for RNSG 1361. I received a copy of the **Odessa College Nursing Program Student Handbook** during orientation to the nursing program.

Student Signature	Date	
Student Name (Print):		
Instructor Signature	Date	