



Department: Nursing
Course Title: Clinical Management
Section Name: RNSG 2163
Semester: Spring 2013
Time: Monday 0645am-7:15pm
Classroom: Hospital

Instructor: Sandra Shaw MSN,RN, CPHQ
Email: sshaw@odessa.edu
Office: CT213
Phone: 335-6670
Office Hours: Wednesday 1-5, Hospital

Course Description:

(51.3801) (0-4) 1 hour

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. (ICOs 1, 2, 3, 4, 5, 6). Prerequisites: RNSG 2201, RNSG 2208, RNSG 1161 and RNSG 1162. Corequisites: RNSG 1146, RNSG, 2331, RNSG 2262, RNSG 2121, PHED 1100, and the humanities/visual and performing arts requirement.

Required Texts:

Drug Handbook purchased earlier in the program

Laboratory and Diagnostic Handbook purchased earlier in the program

Various care planning resources purchased earlier in the Program

Description of Institutional Core Objectives (ICO's)

Given the rapid evolution of necessary knowledge and skills and the need to take into account global, national, state, and local cultures, the core curriculum must ensure that students will develop the essential knowledge and skills they need to be successful in college, in a career, in their communities, and in life. Therefore, with the assistance of the Undergraduate Education Advisory Committee, the Coordinating Board has approved guidelines for a core curriculum for all undergraduate students in Texas.

Through the application and assessment of objectives within the institution's core curriculum, students will gain a foundation of knowledge of human cultures and the physical and natural world; develop principles of personal and social responsibility for living in a diverse world; and advance intellectual and practical skills that are essential for all learning. Appropriate Odessa College faculty periodically evaluates all of the courses listed in the descriptions on the

following pages of this catalog and keys them to Odessa College's Institutional Core Objectives (ICOs), as defined by the Texas Higher Education Coordinating Board (THECB). (Source: *Odessa College Catalog of Courses 2012-2013, page 73*)

Odessa College's Institutional Core Objectives (ICOs):

- 1) *Critical Thinking Skills* - to include creative thinking, innovation, inquiry, and analysis, evaluation and synthesis of information
- 2) *Communication Skills* - to include effective development, interpretation and expression of ideas through written, oral and visual communication
- 3) *Empirical and Quantitative Skills* - to include the manipulation and analysis of numerical data or observable facts resulting in informed conclusions
- 4) *Teamwork* - to include the ability to consider different points of view and to work effectively with others to support a shared purpose or goal
- 5) *Personal Responsibility* - to include the ability to connect choices, actions and consequences to ethical decision-making
- 6) *Social Responsibility* - to include intercultural competence, knowledge of civic responsibility, and the ability to engage effectively in regional, national, and global communities

Learning Outcomes for RNSG 2163 (Source: *Odessa College Catalog of Courses*)

Outcome	ICO
<ol style="list-style-type: none"> 1. Use a critical thinking approach to analyze clinical data and current literature as a basis for decision-making and development of teaching plans in nursing practice. (PO 4, 7) <ol style="list-style-type: none"> 1. Demonstrates evidence of critical thinking when making clinical judgments for clients and families. 2. Make appropriately independent, evidenced-based clinical judgments that reflect the legal and ethical parameters of prudent nursing practice. 	<i>Critical Thinking Skills</i> - to include creative thinking, innovation, inquiry, and analysis, evaluation and synthesis of information

<p>2. Implement plan of care within legal and ethical parameters, including scope of practice, in collaboration with the client and interdisciplinary health care team to assist client in meeting health care needs. (PO 3)</p> <ol style="list-style-type: none"> 1. Promote the effective coordination of client-centered nursing care. 2. Facilitate communication and teaching between the client, family, nursing team, and other health care providers. 3. Use basic management and leadership skills when team leading, supervising care, giving care, and delegating care to insure safety and cost-efficiency. <p>3.</p>	<p><i>Communication Skills</i> - to include effective development, interpretation and expression of ideas through written, oral and visual communication</p>
<p>4. Provide for the care of multiple clients either through direct care of assignment and/or delegation of care to other members of the health care team. (PO 3, 6)</p> <ol style="list-style-type: none"> 1. Provide for the care of one to four clients within the assigned health care team 2. Incorporate knowledge learned from previous course work into the care of clients and 	<p><i>Empirical and Quantitative Skills</i> - to include the manipulation and analysis of numerical data or observable facts resulting in informed conclusions</p>

5.	interactions with families and health care team members.	
6.	<p>Coordinate human and material resources for the provision of care for clients and families (PO 8)</p> <ol style="list-style-type: none"> 1. Facilitate time management strategies and priority setting to provide care for multiple clients. 2. Participate in team meetings or conferences to enhance nursing care delivery. 	<i>Teamwork</i> - to include the ability to consider different points of view and to work effectively with others to support a shared purpose or goal
7.	Assume accountability and responsibility for the quality of nursing care provided to clients. (PO 12)	<i>Personal Responsibility</i> - to include the ability to connect choices, actions and consequences to ethical decision-making
8.	Demonstrates value for the self-evaluation process (PO 4)	
9.	Maintain professional boundaries between clients, family members, and individual health care team members.(PO 19, 21)	
10.	Participate in activities that promote the development of the practice of professional nursing. (PO 3, 13, 14, 16)	
11.	Maintain professional boundaries between clients, family members, and individual health care team members.(PO 19, 21)	<i>Social Responsibility</i> - to include intercultural competence, knowledge of civic responsibility, and the ability to engage effectively in regional, national, and global communities
12.	Participate in activities that promote the development of the practice of professional nursing. (PO 3, 13, 14, 16)	

Odessa College Policies

Academic Policies

Note that the OC Student Handbook states (page 32) that “[i]n cases of academic dishonesty, the instructor has the authority to impose appropriate scholastic penalties. Complaints or appeals of disciplinary sanctions may be filed in accordance with the college due process procedure. Copies of the college due process procedure are available in the office of The Director of Student Life (CC104).”

For more information on your rights and responsibilities as a student at Odessa College, please refer to the following: *The 411 of OC: Student Handbook 2012-2013; Student Rights & Responsibilities* <http://www.odessa.edu/dept/studenthandbook/handbook.pdf>

Scholastic Dishonesty

Scholastic dishonesty shall constitute a violation of these rules and regulations and is punishable as prescribed by board policies. Scholastic dishonesty shall include, but not be limited to, cheating on a test, plagiarism and collusion.

"Cheating on a test" shall include:

- Copying from another student's test paper
- Using test materials not authorized by the person administering the test.
- Collaborating with or seeking aid from another student during a test without permission from the test administrator.
- Knowingly using, buying, selling, stealing or soliciting, in whole or in part, the contents of an unadministered test.
- The unauthorized transporting or removal, in whole or in part, of the contents of the unadministered test.
- Substituting for another student, or permitting another student to substitute for one's self, to take a test.
- Bribing another person to obtain an unadministered test or information about an unadministered test.
- "Plagiarism" shall be defined as the appropriating, buying, receiving as a gift, or obtaining by any means another's work and the unacknowledged submission or incorporation of it in one's own written work.
- "Collusion" shall be defined as the unauthorized collaboration with another person in preparing written work for fulfillment of course requirements. (Source: *Odessa College Student Handbook 2012-2013, page 29-30*)

Special Populations/Disability Services/Learning Assistance

Odessa College complies with Section 504 of the Vocational Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. If you have any special needs or issues pertaining to your access to and participation in this or any other class at Odessa College, please feel free to contact me to discuss your concerns. You may also call the Office of Disability services at 432-335-6861 to request assistance and accommodations.

Odessa College affirms that it will provide access to programs, services and activities to qualified individuals with known disabilities as required by **Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act of 1990 (ADA)**, unless doing so poses an undue hardship or fundamentally alters the nature of the program or activity. Disabilities may include hearing, mobility or visual impairments as well as hidden disabilities such as chronic medical conditions (arthritis, cancer, diabetes, heart disease, kidney disorders, lupus, seizure disorders, etc.), learning disabilities or psychiatric or emotional disabilities. A student who comes to Odessa College with diagnosed disabilities which may interfere with learning may receive accommodations when the student requests them and submits proper documentation of the diagnosis. A Request for Accommodations form and guidelines for beginning the request process are available in the OC Help Center or on the Odessa College web site at www.odessa.edu/dept/counseling/disabilities.htm. The college strives to provide a complete and appropriate range of services for students with disabilities such as assistance with testing, registration, information on adaptive and assistive equipment, tutoring, assistance with access and accommodations for the classroom where appropriate. For information regarding services, students with disabilities should contact the Office of Disability Services in the OC Help Center located in Room 204 of the Student Union Building or call 432-335-6433. (Source: *Odessa College Catalog of Courses 2012-2013*, page 52)

Dropping a Course or Withdrawing from College

Students wishing to drop a non-developmental course may do so online using WebAdvisor, at the Wrangler Express, or Registrar's Office. A student wishing to drop a developmental course or withdraw from college should obtain a drop or withdrawal form from the Wrangler Express or the Registrar's Office. Students are encouraged to consult with instructors prior to dropping a class. Students may not completely withdraw from the college by use of the Web. Students must drop a class or withdraw from college before the official withdrawal date stated in the class schedule. Students who are part of the Armed Forces Reserves may withdraw with a full refund if the withdrawal is due to their being ordered into active duty. A copy of the student's orders must be presented to the Registrar's Office at the time of the withdrawal. For details, please contact the Office of the Registrar. **No longer attending class does not automatically constitute withdrawal from that class, nor does a student's notification to an instructor that the student wishes to be dropped. Failure of a student to complete the drop/withdrawal process will result in a grade of "F."** (Source: *Odessa College Catalog of Courses 2012-2013*, page 36)

Learning Resource Center (LRC; Library)

The Library, known as the Learning Resources Center, provides research assistance via the LRC's catalog (print books, videos, e-books) and databases (journal and magazine articles). Research guides covering specific subject areas, tutorials, and the "Ask a Librarian" service provide additional help.

Student Success Center (SCC)

Located in the LRC, the Student Success Center (SSC) provides assistance to students in meeting their academic and career goals. We strive to provide new and updated resources and services at no charge to OC students. Academic support services include tutoring, study skills training, workshops, and the mentoring program. Tutoring is available for a variety of subjects including college mathematics, English, government, history, speech, chemistry, biology, and all developmental coursework. Appointments are preferred, but walk-ins will be served as soon as possible. Smarthinking online tutoring is also available. All computers in the center have Internet access, Microsoft Office, and software resources to assist OC students in improving their reading, writing and mathematical skills. The center also offers special assistance to students preparing for the THEA/COMPASS test. Computer lab assistants are available to assist students with student email, Blackboard, OC portal, Course Compass and more. For more information or to make an appointment, please call 432-335-6673 or visit www.odessa.edu/dept/ssc/ (Source: *Odessa College Catalog of Courses 2012-2013, page 54*)

Student E-mail

Please access your Odessa College Student E-mail, by following the link to either set up or update your account: <http://www.odessa.edu/gmail/>. **Correspondence will be submitted using your Odessa College email as an alternative method to contact you with information regarding this course.**

Technical Support

For Blackboard username and password help and for help accessing your online course availability and student email account contact the Student Success Center at 432-335-6878 or online at https://www.odessa.edu/dept/ssc/helpdesk_form.htm.

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.

COURSE POLICIES:

Students will adhere to the OC Nursing Student Handbook.

Students will report to the clinical area properly attired in uniform.

Complete and turn in clinical assignment on or before 7:00pm the following clinical day. Assignments from the last clinical day are due on or before March 22, 2013 at 5:00pm.

Must be concurrently enrolled in RNSG 2121.

GRADING SCALE: Satisfactory = 75 or above.

Unsatisfactory = < 75.

In order to be satisfactory in clinical performance the student must requirements for RNSG 2163. All clinical objectives must be at a "Pass" at the end of the clinical course.

Performing below a satisfactory level is an indication for a grade of NI = Needs Improvement. Performing below the satisfactory level is an indication for a grade of U = unsatisfactory. Anytime a student is evaluated as NI or U will submit a written plan for self-improvement to the instructor. Repeated performance below satisfactory and/or lack of evidence of improvement will be grounds for a clinical failure.

Daily Goal:

The goal for each clinical day is to learn and/or demonstrate improving ability to manage a multiple patient load. Students will not be able to meet the clinical objectives without diversity among client problems. Students must also complete the clinical skills tracking sheet. The clinical skills tracking sheets will be turned in to the instructor of the last clinical rotation.

The clinical rotations will be conducted at Medical Center Hospital or Midland Memorial Hospital on the following units: medical, surgical, oncology, orthopedics, and telemetry. The course coordinator is responsible for determining appropriate clinical settings. Clinical units will have been assigned: Clinical schedule will be provided at the beginning of the course.

ATTENDANCE POLICY: All clinical days are mandatory.

Clinical hours are 0645-1915. Please arrive on time to the assigned unit for report from the previous shift nurse. Students will be expected to give report to the oncoming shift before leaving for the day. Students must leave the unit at 1915.

Any absences from clinical must be made up by the end of the clinical rotation or the student will receive an incomplete for the clinical until make-up time is completed. It is the student's responsibility to make arrangements with an instructor for make-up days. Make-up days cannot be made-up. To report an absence the student must call the assigned nursing unit by 0600, and the instructor by 0700. The student must note the name of the person to whom the message was given on the assigned nursing unit. If you do not get the name of the person to verify you have called in, a no-call-no-show will be given to the student for the day. No-call-no-show will be handled on an individual basis with a documented conference before the next clinical day. In addition, the student with a no-call-no-show will be required to write a 1000 word paper discussing the legal and ethical implications of short staffing in the hospital caused by no-call-no-show behavior, and will not be allowed to return to clinicals until the paper is completed satisfactorily.

Student's Name:	Role of the Nurse:	Daily	Mid-rotation	Final
As a Member of a Profession:				
1. Demonstrates accountability and responsibility for the quality of nursing care provided to patients by:.				
a. Functioning as a safe, competent provider of nursing care.				
b. Practicing under current evidence based modalities				
c. Qualifying nursing actions according to scope of practice.**				
2. Practices therapeutic communication techniques and management skills that maintain professional boundaries between patients and health care team members				
3. Serves as a positive role model for peers and other members of the interdisciplinary team				
As a Provider of Patient-Centered Care:				
4. Initiate decision making skills in the clinical setting with current literature as a basis for determining nursing diagnoses and appropriate interventions.				
a. Ratepatient care appropriately according to Maslow's Heirarchy of Needs and client condition.**				
b. Prioritize nursing diagnoses appropriate to nursing care.				
c. Test nursing interventions to determine effectiveness of care for 3 or 4 patients.				
d. Shows self-reliance when working independently.				
5. Determines the physical and mental health status, needs, and preferences of culturally, ethnically, and socially diverse patient needs based upon assessment findings.				
6. Justify delegation ability in the clinical setting.				
a. Use objective approach in determining solutions to multiple client objectives.				
b. Assess need for assistance during management role.				
c. Perform end of shift report efficiently and accurately to appropriate personnel.				
7. Justify teaching plan for health prevention and maintenance and restoration.				
a. Explain recommendations to clients and families using effective communication techniques.				
b. Determine educational level of client and family and prepares a teaching plan accordingly.				
c. Propose community resources to client and family to facilitate the continuity of care.				
d. Select resources in the hospital to aid clients and families in care during hospitalization and after discharge.				
As a Patient Safety Advocate				

8. Justifies a safe and effective environment of care conducive to the optimal health and dignity of the patient and their family by: a. Accurately identifying patients** b. Provide, coordinate, and prioritize care for 3 or 4 patients in a safe and effective manner. c. Provides safe medication administration and evaluates effectiveness of treatments.**			
9. Seeks learning and assistance when practice behaviors or judgments are outside of individual knowledge and experiences			
As a Member of the Health Care Team:			
10. Compares and contrasts human and material resources for the provision of care. a. Choose appropriate agencies within patient's community to assist in health maintenance. b. Evaluate resources available in client community based on cost effectiveness and quality of service or equipment available.			
11. Collaborate with interdisciplinary teams to plan and deliver effective health care within the context of the organizational framework of the healthcare facility. a. Explain components of interdisciplinary team in regard to care of clients delivered. b. Summarize chain of command within hospital setting as it relates to conflict c. Critique conflict resolution techniques for effectiveness in dealing with clients, families, and health care personnel.			

Key: **Critical Elements must be met each clinical day.

Performance criteria are graded as:

Satisfactory—S Unsatisfactory—U Needs Improvement—NI (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-Clinical Evaluation

Student Signature_____Date_____

Instructor Signature_____Date_____

Comments:

Final Evaluation/Course Grade: _____ Pass _____ Fail

Student Signature:_____Date_____

Instructor Signature:_____Date_____

LEARNING MATERIAL PACKET
MANAGEMENT OF CLIENT CARE CLINICAL 4TH SEMESTER

Spring 2013

RNSG 2163

INSTRUCTOR: Sandra Shaw MSN, R.N Course Coordinator
OFFICE: CT 213
PHONE: (432) 335-6770
CELL: (432) 413-3401

STUDENT CONTRACT

I have read the course syllabus and Learning Material Packer for RNSG 2163, the Odessa College Handbook, and the Nursing Department Student Handbook. I understand the requirements, grading policies, and attendance policies for the theory and clinical portions of this course.

Student Signature _____ Date _____
Instructor Signature _____ Date _____

This clinical course focuses on administering care to multiple patient assignments in adult medical/surgical and telemetry areas. This course is a pass/fail course. The student works directly with an assigned clinical preceptor. A current list of signed preceptors will be available on Blackboard at the beginning of the course. *It is each student's responsibility to make certain he/she is working with a preceptor on the approved list. Please check the list frequently as preceptor changes occur during the course. Clinical hours are from 0645-1915 each day.*

Each instructor will keep daily clinical notes on each student. The instructor will also utilize the preceptor's daily evaluation of the student regarding clinical performance. There will be a mid-rotation and an end of clinical rotation evaluation done on each student. If more than one instructor is involved during one clinical rotation the evaluations will be done as a collaborative effort. **A clinical failure may result from performing skills without the assigned preceptor's permission, repetitive errors, making a serious medication error, or not performing at the required level of competency.**

EVALUATION:

This course is a pass/fail course. Each student must receive a Pass(PA) on the final clinical evaluation for ALL clinical competencies in order to pass RNSG2262.

Number of Patients to be assigned:

Please report to the assigned unit at 0645 to the Charge nurse for patient/preceptor assignment. *Remember to check the preceptor list when the assignment is made for the day.* Please check the preceptor list periodically as new preceptors are added. Students are **not** allowed to choose their preceptor for the clinical day. Each student will perform total nursing care of multiple patients each 12 hour clinical day as follows:

- Day 1—3 patients, meds on 1
- Day 2—3 patients, meds on 2
- Day 3—4 patients, meds on 2
- Day 4—4 patients, meds on 3
- Day 5—4 patients, meds on 4

STUDENT CONTRIBUTIONS:

Students learn by providing hands-on care to one or more patients under the guidance and direction of assigned preceptors and faculty a variety of clinical settings. In order to demonstrate the ability to critically think in the clinical setting, students must be able to discuss the patient's nursing plan of care which includes discharge planning and end of shift report with an instructor or preceptor on each clinical day.

In order to pass this clinical course, students must receive a grade of PA (Pass) on written clinical assignments. A grade of PA (Pass) is awarded when the student earns a *minimum of 75 points* according to the grading criteria for this assignment. The student may be required to repeat this assignment on a new client if the minimum score of 75 is not achieved. A "NI" will be earned on the Daily Clinical Evaluation Tool for the competency that relates to formulating the plan of care. Assignments must be submitted by 5:00pm the Friday following each clinical day to the nursing office. Assignments must be submitted in a folder. The student must also complete a minimum of 90% of the clinical skills found on the Clinical Skills Tracking Sheet.

There will be one-on-one interactions with individual students and faculty as well as group discussions.

The student is expected to place a daily clinical evaluation tool, a preceptor evaluation tool, and the evaluation tool regarding the respective preceptor at the end of the clinical day. Please refer to the clinical instructor for instructions regarding this assignment. The preceptor's evaluation of the student must be in a sealed envelope with the preceptor's signature across the flap. All work related to clinical experiences must be completed and turned in on time in order to pass this course. Please see the syllabus regarding late assignments. Instructor observation of care delivered to clients, input from agency staff or preceptors, charting, assigned written work, and other requirements are included in the assessment of clinical performance.

Clinical skills tracking sheets must be turned in to the clinical instructor in a folder at the end of the last clinical rotation.

Confidentiality: Please be reminded **NOT** to use the patient's actual name on any of the paperwork or the names of physicians, nurses, or other health care staff. Patient confidentiality **MUST BE MAINTAINED** at all times. The patient's initials may be used for identification purposes for the instructor's benefit. **If a patient's full name is used, a grade of 0 will be recorded for that assignment and further actions may occur. Assignments must be done individually by each student and must be thorough and satisfactory. The medical/surgical textbook and other student reference materials should be utilized by the student in order to complete assignments.**

Students will report to their assigned clinical unit at 0645 or at the time specified by the clinical instructor. The charge nurse will assign the student to work with an assigned preceptor. *It is the responsibility of the student to make certain he/she is working with a signed preceptor for this clinical course.* A list of signed preceptors will be available on Blackboard at the beginning of the clinical course.

Guidelines for Precepted Clinical Experiences

1. Please refer to the clinical calendar for specific clinical hours and assignments. A course calendar will be provided on Blackboard.
2. The student's clinical experience will be supervised by assigned agency preceptors. The clinical instructor will make rounds during the clinical day. The course instructor will be available by cell phone. The instructor's cell phone number will be given to the preceptors as well as the student. If needed, the clinical instructor will report to the clinical unit as soon as possible after receiving notification. The clinical instructor must be notified as quickly as possible if any problems regarding potential liability issues occur. Furthermore, the instructor may be reached by email at OdessaCollege.
3. Students will wear the OdessaCollege student uniform with appropriate school name-tag and agency badge. Failure to wear school and agency name-tags may result in the student being sent home and a make-up day required.
4. The student will report to the charge nurse who will assign the student to their assigned preceptor. The student may assist with the following procedures under the direct supervision of the preceptor:
1) assessments; 2) medication administration; 3) venipunctures; 4) urinary catheterization; 5) nasogastric intubation; 6) dressing changes and wound care; 7) transferring clients to and from x-ray, therapy, etc; 8) placing clients on cardiac monitors; 9) oral and endotracheal suctioning; and 10) removal of staples or sutures.
5. Students will prepare and administer medications, including parenteral routes and IV's, under the ***DIRECT SUPERVISION*** of their preceptor. Students are not allowed to titrate IV medications such as Dopamine. Students may not administer conscious sedation. Chemotherapeutic agents are not to be given by the student.

6. Students are expected to *work directly with and perform tasks assigned by the preceptor*. Please ask each preceptor how charting is to be managed at the beginning of the shift. Students are expected to document all care of their assigned patients during the clinical day. This is the responsibility of the student. All nurses' notes are to begin at 0700. The opening note and assessment should be documented in a timely manner. The student should be ready to verbally report to either the preceptor or the clinical instructor the plan of care related to the client.
7. The student *must not change settings on the client's equipment*, with the exception of IV and enteral pumps, and then only when instructed to do so by the client's preceptor or charge nurse.
8. Certain procedures and medications are **NOT TO BE PERFORMED OR ADMINISTERED BY THE STUDENT DURING THIS CLINICAL COURSE**. Please refer to the following list:
 - a. Students are not allowed to titrate IV infusions of any type of cardiovascular medication or IV sedation/anesthesia. Students are not allowed to titrate IV Insulin. Students are not allowed to administer blood or blood products. No chemotherapy drugs are to be given by the student.
 - b. Students are not allowed to remove Swan-Ganz caths., any type of central line, PICC lines, or ET tubes. Please observe these procedures if the opportunity presents. Students are not allowed to draw blood via central or PICC lines.
9. The preceptors will participate in the clinical evaluation process. Evaluation forms are provided in the Learning Materials Packet. The student has the responsibility of taking the evaluation for to each preceptored clinical experience for their preceptor. The student should also provide the preceptor with an envelope that can be sealed by the preceptor. Place the completed evaluation in a folder and turn it in to the clinical instructor with the clinical assignments for the day. If the preceptor prefers, the clinical instructor will pick-up the completed evaluations.
10. The student must complete an evaluation of the clinical preceptor for each clinical experience. **Turn this in to the clinical instructor with the other paperwork for the day.** This letter should be given to your preceptor along with the Preceptor Evaluation Form.

Dear Preceptor,

THANK YOU for allowing this student to learn from you and for your completing this form. Please feel free to make any additional comments on the back of this form. An envelope is provided in which you are asked to place this form. Please seal the envelope, place your signature over the seal, and return it to the student. The student will submit the envelope to the appropriate clinical instructor. If you have any questions, comments, or concerns, please contact the appropriate clinical instructor: Sandra Shaw @ (432) 413-3401 or Mary Alice Snow @ (432) 935-4712. We welcome your input as a way of making this experience valuable to the student's learning. Please write your contact number below your signature if you would prefer my contacting you.

Preceptor Signature _____ Contact # _____

ODESSA COLLEGE NURSING

PRECEPTOR EVALUATION OF STUDENT
RNSG 2163: MANAGEMENT CLINICAL

STUDENT _____

DATE _____

HOSPITAL: _____

UNIT: _____

Please circle the appropriate choice.

- | | | |
|--|-----|----|
| 1. Student was punctual for clinical experience? | Yes | No |
| 2. Student was prepared for clinical experience? | Yes | No |
| 3. Student actively sought learning experiences? | Yes | No |
| 3. Student administered medications? | Yes | No |

If yes, which route or routes were used? _____

- | | | |
|---|-----|----|
| 4. Student was able to discuss objectives for this clinical experience? | Yes | No |
| 5. Student represented self in a professional manner? | Yes | No |
| 6. Student managed time effectively? | Yes | No |
| 7. Student prioritized and delegated appropriately? | Yes | No |

Comments:

Preceptor Signature _____

Date _____

Odessa College Associate Degree Nursing Program
Student Evaluation of Preceptor

Student Name: _____ Date of Clinical Assignment _____

Clinical Facility: _____ Area _____

Name of Preceptor: _____

1. Preceptor demonstrated professional demeanor during clinical. Yes No
2. Preceptor encouraged critical thinking skills. Yes No
3. Preceptor encouraged discussion of clinical objectives. Yes No
4. This clinical was a valuable learning opportunity. Yes No

If you answered "NO" to any of the above, please comment below.

Additional Comments:

60 Second Assessment Tool-

Directions: Complete Clinical DAY-1

Enter the patient's room and observe the patient, family and environment for up to 60 seconds. Complete one 60 Second Assessment Tool for each patient you provide care each day. Post to Blackboard by Friday, January 25, 2010- 5pm

ABC without touching the patient:

- What data leads you to believe there is a problem with airway-breathing-circulation?
- Is the problem urgent/non-urgent?
- What clinical data would indicate that the situation needs immediate action and why?
- Who needs to be contacted? Do you have any suggestions/recommendations?

Tubes and Lines:

- Does the patient have any tubes, or an IV?
- Is the IV solution the correct one at the correct rate?
- Does the patient need these tubes? If so, why?
- Do you note any complications?
- What further assessment needs to be done?

Respiratory Equipment:

- If the patient is utilizing oxygen, what would you need to continue to monitor?
- How would you know it is functioning properly?

Patient Safety Survey:

- What are your safety concerns with this patient?
- Do you need to report this problem and to whom?

Environmental Survey:

- What about the environment could lead to a problem for the patient?
- How would you manage the problem?

Sensory:

- What are your senses telling you?
- Do you hear, smell, see or feel something that needs to be explored?

- Does the patient's situation seem "right"?

What additional information would be helpful for further clarification of the situation?

What questions are unanswered and what answers are unquestioned?

- **After a review of** each patient, which patient would you focus on first? Why?

Adapted from:

New Nurse Toolkit

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Clinical Rotation –Day 2

Complete Assessment on 2 of 3 patients,

**Odessa College Nursing Program
History and Physical Assessment**

This form is intended to be used for a “focused” physical assessment. It is the responsibility of the student to determine specific information which applies to the individual client. This is to be completed on the first day assigned to ICU or CCU.

Mark identified problems with a red “P” and Potential Problems with a “PP”

Student Name_____	General Behavior/Appearance _____
Course Name and Instructor_____	_____
_____	_____
Patient Room Number_____	_____
Age _____ Sex _____ Ht _____ Wt. _____	_____
Date and Time of Admission_____	_____
_____	_____
Code Status _____	Past Medical History
Allergies(include all types)_____	General Health _____
_____	_____
_____	_____
_____	Medical History_____
_____	_____
Primary Language Spoken_____	_____
_____	_____
Special Communication Needs_____	_____
_____	_____
_____	Surgical History_____
_____	_____
_____	_____
Medical Diagnosis_____	_____
_____	_____
_____	Other Hospitalizations_____
_____	_____
_____	_____

Chief Complaint _____

History of
Complaint _____

Surgery (Date and Procedure) _____

Habits-Drugs, Alcohol, Tobacco _____

Acute Infectious Diseases (include childhood diseases) _____

Home Medications and Dosage (include OTC and herbal meds) _____

Family History (if applicable)

Mother

Father



[illegible]

Review of Systems

(Include date on all tests)

Chest

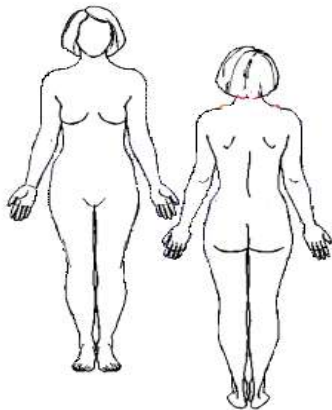
A. Respiratory

Chest Movement _____

Rate _____

Rhythm _____

Breath Sounds (Describe and circle areas where sounds are heard) _____



B. Cardiovascular

Apical rate _____

Rhythm _____

Telemetry: Lead/Interpretation _____

Pulses (circle) C B R F PT DP _____

Quality of pulses _____

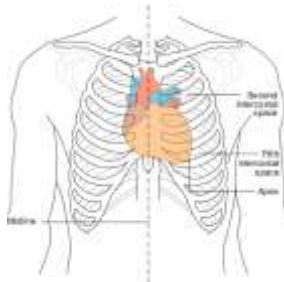
Capillary refill _____

JVD _____

Edema _____

Heart sounds (List and circle area where heard) _____

Valve Sites:



Chest x-ray results

ABG's

(values/interpretation) _____

Incentive spirometry (include orders) _____

Supplemental oxygen(include method) _____

Ventilator Settings _____

Vital Signs (at time of assessment)

BP _____ P _____ R _____ T _____

EKG results(12 lead) _____

Value/Interpretation labs:

Hgb _____

Hct _____

RBC _____

Platelets _____

Protime _____

APTT _____

WBC _____

Diff _____

Sed rate _____

Enzymes _____

Triglycerides _____

Cholesterol – HDL _____

LDL _____

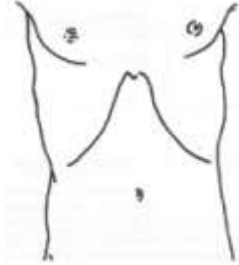
Other _____

Gastrointestinal

A. Diet _____
Abdomen (soft, tender) _____
Scars/tattoos _____

Bowel sounds _____

Circle areas where listened _____



Pain (Describe and mark area with x) _____

Level of pain _____

Distention _____

N/G _____

PEG Tube _____

B. Rectal (if applicable) _____

Last B .M. _____

Genitourinary

A. Male

Voiding (Describe urine) _____

Foley(size, describe urine) _____

Penile Discharge _____

Number of time voids during night _____

Bladder Training _____

B. Female

Voiding (Describe urine) _____

Foley (size, describe urine) _____

History of frequent urinary tract infections _____

Discharge at meatus _____

Date, Results, and Interpretation of Labs

AST _____ ALT _____

Bilirubin _____

Other Labs _____

X-rays(results) _____

Other _____

Date, Results, and Interpretation of Labs

Urinalysis

pH _____ Leukocytes _____

Protein _____ WBC _____

Occult blood _____ Bacteria _____

Urobilinogen _____ Mucus _____

Color _____ Character _____

Specific Gravity _____

BUN _____ Creatinine _____

Other _____

C. Gynecologic History

History of sexually transmittable diseases_____

Age of menarche_____

Last menstrual period_____

Abnormal Menses_____

Postcoital bleeding_____

Age of
Menopause_____

Postmenopausal bleeding_____

Leukorrhea_____

Pruritus_____

Last Pap Date and
results_____

Methods of Contraception_____

MusculoskeletalExtremities (strength/movement/ambulation/assistive
devices)_____

Joints (ROM)_____

Spine_____

Sensation_____

7 P's (if
applicable)_____**Neurological**

LOC _____

Pupils_____

Sensations_____

Labs

Serology_____

Other_Diagnostics:_____

X-ray Results _____

Other _____

X-ray Results _____

Scans_____

Motor Function_____

Swallowing_____

Speech_____

Gait_____

Posturing_____

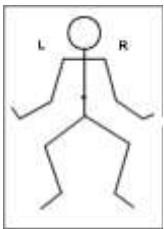
Reflexes_____

Glasgow Coma Scale Rating_____

Pain/Pressure_____

Indicate Reflexes on Stick Figure_____

0



1+ = Diminished but present

2+ = Normal

3+ = More brisk than normal

4+ = Hyperactive

Psychiatric

Any History_____

Depression_____

Anxiety_____

Insomnia_____

Hyperventilation_____

Other_____

Additional Information_____

Other_____

Labs

Na_____ K+_____

Other_____

Other_____

Trade and Generic Classification	Dose & Route Ordered / Administration Times	Date Ordered	1: Reason your client is receiving 2: Mechanism of action	1: Major Side effects 2: Interactions with other drugs/food	Nursing Interventions & Teaching	Evaluation of Drug Effectiveness

MEDICATION SHEET / Source (Author, Year) _____
 Allergies_____

SOURCE:

LABS

TESTS	NORMAL	ADMISSION & DATE	MOST CURRENT & DATE	SIGNIFICANCE OF ABNORMAL FINDING TO <u>THIS</u> CLIENT
CBC				
RBC				
HGB				
HCT				
PLATELETS				
WBC				
DIFFERENTIAL				
NEUTROPHILS				
LYMPHS				
MONOCYTES				
EOSINOPHILS				
BASOPHILS				

SOURCE:

Chemistry

TESTS	NORMAL	ADMISSION & DATE	CURRENT & DATE	SIGNIFICANCE OF ABNORMAL FINDINGS TO <u>THIS</u> CLIENT
CPK				
LDH				
AST				
ALT				
ALT				
Na				
K				
Cl				
CO2				
Ca				
Phos				
Mag				
CHOLESTEROL LDL HDL				
TRIGLYCERIDES				
Amylase				
Lipase				
BUN				
Creatinine				
Total Bilirubin				

TESTS	NORMAL	ADMISSION & DATE	CURRENT & DATE	SIGNIFICANCE OF ABNORMAL FINDINGS TO <u>THIS</u> CLIENT
CPK				
LDH				
AST				
ALT				
ALT				
Na				
K				
Cl				
CO2				
Ca				
Phos				
Mag				
CHOLESTEROL LDL HDL				
TRIGLYCERIDES				
Amylase				
Lipase				
BUN				
Creatinine				
Total Bilirubin				

Clinical Day 3 Log: **Complete one “time log” form at the end clinical day 3 and submit with Preceptor evaluation.** Describe using time notation your tasks and other events of the clinical day. All activities must be noted, and all time frames from 0645-1915 must be included. Please add additional pages as needed. Time logs must conclude with a written end of shift report on each patient cared for during that clinical day. At the conclusion of the shift, the student must review their time log for the day and in a separate paragraph at the end of the document note how they could have managed time or prioritized care better during the clinical day.

[illegible]

[illegible]

[illegible]

Clinical Rotation: Day 4

Directions: Choose 4 of the communication strategies below and write a detailed paragraph of how it was used in your clinical experiences.

TeamSTEPPS Strategies

Call Out: Used to communicate important information to the entire team simultaneously.

Cross-Monitoring: Process of monitoring the actions of other team members for the purpose of sharing the workload and reducing or avoiding errors.

CUS:

C oncerned

U ncomfortable

S afety

Debrief: When the team comes together to reflect on an event to identify successes and opportunities for improvement.

Effective Effective communication is Complete (all relevant information), Clear

Communication: (plainly understood), Brief (concise manner), and Timely (offered and requested in an appropriate timeframe with verified authenticity and either validated or acknowledged).

Feedback: Information provided for the purpose of improving team performance.

Handoff: The transfer of information (along with authority and responsibility) during transitions in care across the continuum; to include an opportunity to ask questions, clarify, and confirm.

Read Back: Technique used to confirm message was transcribed properly.

Repeat Back: Technique used to confirm message was heard correctly.

Safety Huddle: Scheduled opportunity to review pertinent client information and care plan.

SBAR:

S ituation: Describe what is happening with the patient

B ackground: Explain the background of the patient's circumstance

A ssessment: What data do you have regarding the situation

R ecommendation: What do you think needs to be done to correct the situation

Time Out: Process where all present health care workers stop, verify the correct client, correct procedure and correct site prior to performing a procedure.

Two Challenge If an individual doesn't feel that their first attempt to bring attention to **Rule:** the client concern is successful, they are obligated to make a second attempt.

I PASS
theBATON:

Introduction: Introduce yourself and your role/job (include patient)

Patient: Identifiers, age, sex, location

Assessment: Present chief complaint, vital signs, symptoms, and diagnosis

Situation: Current status/circumstances, including code status, level of uncertainty, recent changes, and response to treatment

Safety: Critical lab values/reports, socio-economic factors, allergies, and alerts (falls, isolation, etc.)

the

Background: Co-morbidities, previous episodes, current medications, and family history

Actions: What actions were taken or are required? Provide brief rationale

Timing: Level of urgency and explicit timing and prioritization of actions

Ownership: Who is responsible (nurse/doctor/team)?
Include patient/family responsibilities

Next: What will happen next? Anticipated changes? What is the plan? Are there contingency plans?

Grading Criteria

Rubric: Communication Summary Evaluation

Directions: Choose 4 of the communication strategies above and write a detailed summary of how it was used in your clinical experiences.

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rubricgradepostf	0	0		rubricgradeeditf.c	rubricprinteditc.cl
No	E875B370E6DCB	NO	no		

989020	989021	989022	Report Summary		
	6254847		6254848		6254849
	Poor		Fair		Good
	3	Poor	7	Fair	10
	3 pts		7 pts		10 pts
Format	Contains a few of the requirements . Introduction. description of strategy used. Documentation of evidence that strategy enhanced communication	Contains most of the requirements (e.g. summary of the strategy used, documentation of increased communication, example of when strategy used. Description of whether or not it enhanced communication	Contains all of the requirements (e.g. summary of the communication strategy used. Introduction to how the strategy is supposed to enhance communication Documentation of whether communication was complete, enhanced or not. Example of situation strategy was used in		
6254850					
Contains a few o					
	6254851		6254852		
	Contains most of		Contains all of the		
	Poor	Fair	Good		
Organization	The Report Summary's information is not organized.	The Report Summary's information is mostly organized.	The Report Summary's information is organized.		
6254853					
The Report Sumn					
	6254854	6254855			
	The Report Sumn	The Report Sumn			
	Poor	Fair	Good		
Content	Content does not exhibit critical thinking and global awareness.	Content exhibits some critical thinking and global awareness.	Content exhibits critical thinking and global awareness.		
6254856					
Content does not					
	6254857	6254858			
	Content exhibits s	Content exhibits c			
	Poor	Fair	Good		
Grammar	Contains many grammatical errors and punctuation	Contains a few grammatical errors and punctuation	Contains no grammatical errors and punctuation		
6254859					

Contains many gr

errors.

6254860

errors.

6254861

errors.

Contains a few g

Contains no gran

Comments:

CLINICAL TRACKING SKILLS SHEET

Skill	Date/Init.	Diagnosis	Diagnosis2	Diagnosis3	Diagnosis4
Pass medications on 3 patients using 5 rights					
Pass medications on 4 patients using 5 rights					
Document scheduled medication administration on MAR (eMAR)					
Document PRN medication administration on MAR (eMAR)					
Give report to oncoming nurse on 3 patients					
Give report to oncoming nurse on 4 patients					
Successfully manage total care of 3 patients					
Successfully manage total care of 4 patients					

Document full assessment, nursing interventions, procedures, and care of 3 patients during 12 hour shift					
Document full assessment, nursing interventions, procedures, and care of 4 patients during 12 hour shift					
Effectively manages time while caring for 3 patients					
Effectively manages time while caring for 4 patients					
Delegates care to unlicensed staff appropriately					
Collaborates with non-nursing members of the health care team (specify discipline)					
Demonstrates therapeutic communication when speaking with patients and families					
Assists (more than 40% of process) with a patient admission					
Assists (more than 40% of process) with a patient discharge					
Successfully administers and documents narcotic medication with a preceptor including discussion of sign-out and waste procedures required for narcotic administration					

Observes physician rounds on at least one assigned patient					
Successfully documents plan of care on 3 patients					
Successfully completes and documents patient/family education for 3 patients					
Demonstrates appropriate hand hygiene when entering and exiting patient rooms with multiple patient assignment					
Demonstrates appropriate isolation precautions when caring for isolation patients in a multiple patient assignment					
Arrives on the unit on time and ready to receive report					