COURSE TITLE: CARE OF CHILDREN AND FAMILIES

CREDIT: TWO HOURS (1 LECTURE / 3 LAB HOURS CONTACT; 16 WEEK COURSE)

PLACEMENT: THIRD SEMESTER OF NURSING PROGRAM

PREQUISITES: RNSG 1361 AND RNSG 1443 OR CONSENT OF DEPARTMENT

CO-REQUISITES: RNSG 1162, SPCH 1321 OR SPCH 1315 AND ENGL 1301

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

FACULTY: Barbara Stone MSN, RNC, IBCLC, CCE
Office Phone: 335-6458
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Office Number: CT 202

COURSE DESCRIPTION: Study of concepts related to the provision of nursing care for children and their families, emphasizing judgment, and professional values within a legal/ethical framework. (SCANS 1,2,3,4,5,6,9,10)

LEARNING OUTCOMES: Identify changes which may be experienced by the child/family; utilize critical thinking skills and a systematic problem-solving process as a framework for providing care for the child and the family; and explain the roles of the professional nurse in caring for children and families.

COURSE OBJECTIVES: Course objectives utilize the framework of Differentiated Essential Competencies of Graduates of Texas Nursing Programs. At the completion of the course, the student will be able to: (PO= Corresponding Program Outcome)

Member of a Profession:
1. Assume accountability and responsibility for quality nursing care, including the role of the nurse as advocate. (PO 12,13)

Provider of Patient Centered Care:
2. Utilize the five steps of the nursing process (assessment, analysis, planning, implementation and evaluation) and critical thinking to determine the health status and health needs of pediatric clients and their families. (PO 1,2,3,5,7)
3. Relate concepts and processes related to pediatric clients and their families, including physical and psychosocial growth and development, medical diagnosis and treatments,
pathophysiology, cultural and spiritual practices related to health, illness, and death and dying. (PO 1,3)

4. Explain pharmacotherapeutic principles and teaching plans to the use, administration, and interaction of medications in the pediatric client. (PO 1,3,4)

5. Examine principles of disease transmission, risk factors for chronic and acute diseases, preventive health practices and health teaching for pediatric clients and their families. (PO 1,3,4)

6. Differentiate patterns and modes of family development, communication and decision making processes within the political, economic and societal environment influencing the family unit. (PO 1,3)

7. Differentiate age specific therapeutic communication principles in delivering nursing care to children and their families. (PO 1,3)

8. Correlate current literature and implication of research findings to improving pediatric client care. (PO 7)

Patient Safety Advocate:

9. Implement measures to promote a safe environment for patients and others. (PO 14A)

Member of the health care team:

10. Collaborate with patients, families and the multidisciplinary health care team for the planning, delivery and evaluation of care in the pediatric climate. (PO 12,13)

11. Refer patients and their families to resources that facilitate continuity of care and health promotion. (PO 8,10)

TEACHING/LEARNING METHODS:
The following teaching/learning methods may be incorporated into RNSG 2201: Lecture, discussion, case studies, technological instructional modalities, reading assignments, peer interaction, role playing, group project/assignments, writing assignments, oral presentations, guest speakers, and study guides. Lab in RNSG 2201 includes skill demonstrations, case studies and virtual clinical assignments.

MATH COMPETENCY: Math competency will be demonstrated by the student throughout the course by correctly calculating math problems related to medication administration to children in the classroom and clinical environment, and through the use of ATI tutorials.

Math Competency Testing in Third Semester
Students in the THIRD semester will be given a medication math competency during the second week of RNSG 2201, Care of Children and Families. The exam will contain 25 calculation questions which may contain information from the following categories:

A. Currently used conversions between and within systems
B. Calculations of medication doses administered IM, SC, or IV, and IVP and IVPB
C. Calculations of medication dosages administered PO in liquids, tablets or capsules.
D. Combination problems such as calculating weight and dosage
E. Calculation of daily fluid requirements.
The third semester student must achieve a minimum passing grade of 88%. The third semester student will be allowed to participate in clinical activities while completing medication math competency requirements since this level of student is closely supervised, or as in the case of the transition student, has nursing experience.

Students not passing the first exam will take a second exam within two weeks of the first exam and after completing documented remediation approved by the course instructor. If unsuccessful on the second attempt, the student will take a third exam, after documented remediation approved by the course instructor. If not successful on the third attempt, the student must withdraw from RNSG 2201 Care of children and family and RNSG 1162 Clinical- (if before the college drop date.) If after the college drop date, the generic student will receive a grade of D in RNSG 1162 Clinical- and a grade of D in RNSG 2201. The student will be eligible for readmission pursuant to the readmission policies.

**EVALUATION AND GRADING SCALE:**
The grading policy for the Associate Degree Nursing Program will be followed. No assignments or tests are optional. All work must be submitted in order to earn a grade in this course unless the student has made arrangements with the instructor to receive a grade of incomplete (I) or withdrawal (W). Students will earn grades in RNSG 2201 through testing and written assignments/presentations according to the following grade distribution:

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily Grades</td>
<td>5%</td>
</tr>
<tr>
<td>4 Unit exams</td>
<td>60%</td>
</tr>
<tr>
<td>Ati proctored</td>
<td>10%</td>
</tr>
<tr>
<td>Final exam</td>
<td>25%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
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Students will be given 2 ATI practice exams during the 16 week course. Students will be allowed to take exam A once and exam B once only. The grades on the exam will be added in as a daily grade.

**ATI policy:** Assessment Technologies Institute’s (ATI) Comprehensive Assessment and Review Program (CARP) are designed to assist the student in passing the NCLEX-RN. It is composed of comprehensive on line learning tools that complement a variety of learning styles. Critical thinking and test taking skills are emphasized throughout the program. Focused content modules are comprised of critical thinking tools, practice exams, remediation suggestions and content driven proctored exam(s). Odessa College nursing students will begin ATI upon admission into the A.D.N. program and work through the program in each subsequent nursing course. Completion of the ATI program is a requirement for graduation from the A.D.N. program.

Remediation tools are available within the ATI program to facilitate the success of the student. Practice exams will be made available by the course coordinator. Practice exams can be taken only once. The proctored exam(s) will be scheduled by the course coordinator. Specific information will be found on the course calendar. These exams(s) are secured online and proctored by nursing faculty. See the table inserted below for how points will be awarded.
<table>
<thead>
<tr>
<th>Proficiency level on ATI Proctored Assessments</th>
<th>Points Awarded for Achievement on ATI proctored Exams</th>
<th>Points awarded for Evidence of Remediation on missed topics from ATI assessment</th>
<th>Total points awarded out of ten</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proficiency Level 3 on the content mastery series</td>
<td>8</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Proficiency Level 2 on the content mastery series</td>
<td>6.5</td>
<td>2</td>
<td>8.5</td>
</tr>
<tr>
<td>Proficiency Level 1 on the content mastery series</td>
<td>5.5</td>
<td>2</td>
<td>7.5</td>
</tr>
<tr>
<td>Proficiency Level below Level 1 on the content mastery series</td>
<td>4</td>
<td>2</td>
<td>6</td>
</tr>
</tbody>
</table>

A grade below 75, “C” does not meet the criteria for progression in the Odessa College Associate Degree Nursing Program. Final course grades will not be rounded up to the next whole number in order for students to achieve a passing grade of 75%. (Example: 74.99 = grade of D). Students must pass the co-requisite clinical course (RNSG 1162) in order to receive a passing grade in RNSG 2201.

Content will be covered in many different ways, some information will be required on your own accord as we cannot cover the entire book in class in 16 weeks, however we may not cover all information in each chapter, as some of the information falls under the category of nice to know, but not necessary to know.

UNIT OUTLINE:

Unit I  Introduction to Child Health Nursing: Including historical perspectives, current trends, community care, ethical dilemmas, legal issues, social issues, the role of the professional nurse. Ch 1

Unit II  Growth and development: The child and the family. Family centered care, Communication, Health Promotion for developing child, birth thru adolescents Ch 2-8

Unit III  Special Considerations in Caring for children: Physical assessment, emergency care, Ill child in hospital, Chronic condition and terminal illness, principles and procedures, medication administration and safety for infants and children, Pain management. Ch9-15

Unit IV  Caring for children with health Problems: The child with fluid and electrolyte alterations, infectious disease, immunologic alterations, gastrointestinal alterations, genitourinary alterations, respiratory alterations, cardiovascular alterations, hematologic alterations, cancer, tissue integrity, musculoskeletal alterations, endocrine and metabolic alterations, neurologic alterations, psychosocial and developmental disability, sensory alterations...Ch. 16-31
UNIT OBJECTIVES:

Unit I chapter 1
Course objectives satisfied: 1, 2, 3, 4, 5, 8
Learning Objectives: At the end of this unit, the student will be able to:

1A) Introduction to Nursing Care of children; Nurses Role in Care of child
   a. Understand the historical and current societal influences on pediatric health care and nursing practice.
   b. Analyze the current causes of child morbidity and mortality and identify opportunities for nurses to intervene.
   c. Apply theories and principles of ethics to ethical dilemmas.
   d. Discuss ethical conflicts that the nurse may encounter in pediatric nursing practice.
   e. Discuss differences in obtaining an informed consent for minors versus adults.
   f. Identify unique pediatric legal and ethical issues in pediatric nursing practice.
   g. Describe the steps of the nursing process and relate them to nursing care of children.
   h. Explain issues surrounding the use of complementary and alternative therapies.
   i. Discuss the importance of nursing research in clinical practice.

Unit II Chapters 2,3,4,5,6,7,8 (B)
Course objectives satisfied: 1, 2, 3, 4, 5, 8

2B). Family centered Nursing Care Theory and application
   a. Describe family-centered care and develop a nursing care plan for the child and family that integrates key concepts.
   b. Describe different family structures and their effect on family functioning.
   c. Identify four different types of parenting styles and analyze the impact on child personality development.
   d. Differentiate between healthy and dysfunctional families.
   e. Describe the effect of major family changes on children, including divorce, gaining a stepparent, being placed in a foster care, and adoption.

3B). Communicating with Children and Families.
   a. Describe six components of effective communication with children.
   b. Describe communication strategies that assist nurses in working effectively with children.
   c. Explain the importance of avoiding communication pitfalls in working with children.
   d. Describe effective family-centered communication strategies.
   e. Describe effective strategies for communicating with children with special needs.
   f. Describe warning signs of over involvement and under involvement in child/family relationships.

4B). Health Promotion for the Developing Child
   a. Define terms related to growth and development.
   b. Discuss principles of growth and development.
   c. Describe various factors, including genetics and genomics, that affect growth and development.
   d. Discuss the following theorists’ ideas about growth and development: Piaget, Freud, Erikson, and Kohlberg.
e. Discuss theories of language development.
f. Identify methods used to assess growth and development.
g. Describe the classifications and social aspects of play.
h. Explain how play enhances growth and development.
i. Identify health promoting activities that are essential for the normal growth and development of infants and children.
j. Discuss recommendations for scheduled vaccines.
k. Discuss the components of a nutritional assessment.
l. Discuss the etiology and prevention of childhood injuries.

5B). Health Promotion for the Infant
a. Describe the physiologic changes that occur during infancy.
b. Discuss the infant’s motor, psychosocial, language, and cognitive development.
c. Discuss the problems of infancy, such as separation anxiety, sleep problems, irritability, and colic.
d. Discuss the importance of immunizations and recommended immunization schedules for infants.
e. Provide parents with anticipatory guidance for common concerns during infancy, such as immunizations, nutrition, elimination, dental care, sleep, hygiene, safety, and play.

6B). Health Promotion during Early Childhood
a. Describe the physiologic changes and the motor, cognitive, language, and psychosocial development of the toddler and preschooler.
b. Provide parents with anticipatory guidance related to the toddler and preschooler.
c. Discuss the causes of and identify interventions for common toddler behaviors: temper tantrums, negativism, and ritualism.
d. Identify strategies to alleviate a preschool child’s fear and sleep problems.
e. Discuss strategies for disciplining a toddler and preschooler.
f. Describe signs of a toddler’s readiness for toilet training, and offer guidelines to parents.
g. Offer parents suggestions for promoting school readiness in the preschool child.

7B). Health Promotion for the School-Age Child
a. Describe the school-age child’s normal growth and development and assess the child for normal developmental milestones.
b. Describe the maturational changes that take place during the school-age period and discuss implications for health care.
c. Identify the stages of moral development in the school-age child and discuss implications for effective parenting strategies.
d. Discuss the effect school has on the child’s development and implications for teachers and parents.
e. Discuss anticipatory guidance related to various health and safety issues seen in the school-age child.
f. Describe the anticipatory guidance that the nurse can offer to decrease children’s stress.

8B). Health Promotion for the Adolescent
a. Describe the adolescent’s normal growth and development.
b. Identify the sexual maturity rating and Tanner stages and recognize deviations from normal.
c. Describe the developmental tasks of adolescence.
d. Describe the concept of identity formation in relation to adolescent psychosocial development.
e. Describe appropriate health-promoting behaviors for adolescents and young adults.
f. Provide anticipatory guidance for adolescents and their families regarding, risk-taking behaviors, nutrition and safety.
g. Discuss the prevalence of adolescent violence and strategies to deal with aggressive behavior.
h. Discuss adolescent sexuality and related health risk.

UNIT III CHAPTERS 9,10,11,12,13,14,15 (C)

Course objectives satisfied 1,2,3,4,7,8,9

9C). **Physical Assessment of Children**

a. Apply principles of anatomy and physiology to the systemic physical assessment of children.
b. Describe the major components of a pediatric health history.
c. Identify the principal techniques for performing an physical examination.
d. Use a systematic and developmentally appropriate approach for examining a child.
e. Describe the general sequence of the physical examination of the infant, the toddler and preschooler, the school-age child, and the adolescent.
f. Describe normal physical examination findings.
g. List common terms used to describe the findings on physical examination and correct documentation.

10C). **Emergency Care of the Child.**

a. Describe general principles that encourage cooperation and help make the examination and treatment of children in emergency settings more comfortable for the child and family.
b. List significant developmental issues when caring for infants, toddlers, preschool and school age children and adolescents in emergency care settings.
c. Compare the child’s airway anatomy with that of an adult and explain the significance of the differences in managing the pediatric airway.
d. Assess the early signs of shock in infants and children, recognizing that changes in heart rate and skin signs are more accurate signs of early shock than is decreased blood pressure.
e. Define triage and list the most important factors to assess when obtaining an overall (across the room) impression of an infant’s or a child’s condition.
f. Describe the general guidelines for cardiopulmonary resuscitation in infants and children and discuss what additional precautions and procedures are required for infants and children with traumatic injury.
g. List indications that suggest a child brought into the emergency care setting has been neglected or abused and discuss the nurse’s responsibility for reporting possible neglect or abuse.
h. Identify several possible roles for nurses in preventing traumatic injuries, poison ingestion, and environmental injuries.
11C). The Ill Child in the Hospital and Other Settings.
   a. Discuss the nurse’s role in various settings where care is given to ill children.
   b. List common stressors affecting hospitalized children.
   c. Describe the child’s response to illness.
   d. Discuss the stages of separation anxiety.
   e. Describe the factors that affect children’s responses to hospitalization and treatment.
   f. Discuss the psychological responses of families to illness of a child in the family.
   g. Discuss the child’s and family’s adaptation to hospitalization.
   h. Apply family centered care principles to the hospital setting.
   i. Identify nursing strategies to minimize the stressors related to hospitalization.
   j. Discuss family presence during procedures and nursing strategies used to prepare the family.
   k. Discuss strategies for preparing children and families for discharge from the hospital setting.
   l. Evaluate the effectiveness of teaching strategies used with the hospitalized child and their family.

12C). The Child with a Chronic condition or Terminal Illness
   a. Define chronic illness
   b. Analyze the effects of a chronic illness on the child and family.
   c. Discuss the concerns and needs of the child and family dealing with a chronic illness.
   d. Compare the stages of death and dying.
   e. Apply the concepts of death and dying as they relate to the pediatric patient.
   f. Explain the concerns and needs of the child and family facing an impending death.
   g. Analyze the nurse’s response to death and dying in the pediatric population.
   h. Use the nursing process to describe nursing care of the chronically ill and dying child.
   i. Identify the cultural and spiritual influences on the child and family’s responses to death, loss, and grief.
   j. Perform interventions based on developmental responses of a child to his or her impending death.
   k. Describe ethical issues associated with the care of a child who is dying.
   l. Apply assessment skills to identify the physiologic changes that occur in the dying child.
   m. Implement strategies for bereavement support of the parents and siblings after the death of a child.
   n. Describe strategies to support nurses who care for children who die.

   a. Describe how to prepare children and families for selected procedures frequently seen in an acute-care setting and a home care setting.
   b. Compare anatomic and physiologic differences in children and adults as they apply to selected procedures.
   c. Identify psychosocial considerations unique to children undergoing selected procedures.
   d. Describe techniques useful for eliciting, cooperation from the child undergoing selected procedures.
   e. Describe step-by-step nursing actions and the rationale for performing selected procedures.
14C). Medication Administration and Safety for Infants and children
   a. Describe different methods of administering medications to children.
   b. List the advantages and disadvantages of each route of administering medications to
      children.
   c. Describe the physiologic differences between children and adults that affect
      medicating a child.
   d. Describe psychosocial intervention for teaching and successful mediation
      administration for each age group.
   e. Describe quality and safety issues associated with medication administration in
      children.

15C). Pain Management for Children
   a. Define pain.
   b. Discuss the gate control theory of pain.
   c. Discuss the myths and realities of pain and pain management in children
   d. Discriminate between acute and chronic pain.
   e. Explain pain assessment in children according to developmental stages.
   f. Describe common pain assessment tools.
   g. Discuss non pharmacologic and pharmacologic interventions that may be used for
      pediatric pain management.
   h. Use the nursing process to describe nursing care of the child in pain.
   i. Describe the physiologic and behavioral consequences of pain in infants and children.
   j. Contrast the nursing care for children receiving an opioid analgesic and nonsteroidal
      anti inflammatory medication.
   k. Compare the effectiveness of pain management strategies for procedures such as
      venipuncture and immunizations.
   l. Contrast the pain management plan for the child with chronic pain and acute pain.

UNIT IV CHAPTERS 16-31 (D)
Course objectives satisfied: 1, 2, 3, 4, 7, 8, 9

16D). The Child with a Fluid and Electrolyte Alteration
   a. Identify the regulatory mechanisms that maintain fluid and electrolyte balance in the
      body.
   b. Compare those differences in body fluid and electrolyte composition and regulation
      between infants/children and adults that make infant and children more vulnerable to
      imbalances.
   c. Describe dehydration and acid-base imbalance.
   d. Differentiate among the various types of acid-base disturbances.
   e. Describe the processes and nursing care of a child with diarrhea or vomiting.
   f. Integrate assessment findings with nursing implementation to determine the success
      of therapy.
   g. Describe nursing interventions to prevent fluid and electrolyte imbalance.

17D). The Child with an Infectious Disease
   a. Analyze the infectious process.
   b. Compare the modes of transmission of infectious diseases.
   c. Analyze the pathophysiology, clinical manifestations, complications, and nursing
      management of childhood infectious diseases.
d. Use the nursing process to describe the nursing care of a child with an infectious disease.

18D). **The Child with an Immunologic Alteration**

a. Describe how the immune system attempts to maintain homeostasis of the internal and external environment and what happens when it overfunctions or underfunctions.

b. Explain how neonates acquire active and passive immunity.

c. Delineate how to prevent the spread of organisms in children with an immune deficiency.

d. Describe how to prevent, test for, care for, and support children with HIV and their families.

e. Outline critical information needed by families with children receiving long term corticosteroid therapy.

f. Describe nursing interventions to help prevent the sudden death of a child having an anaphylactic reaction.

19D). **The Child with a Gastrointestinal Alteration**

a. Describe the development of the gastrointestinal system and its relation to selected congenital defects.

b. Describe the anatomy and physiology of the gastrointestinal system in the infant and child.

c. Describe the common diagnostic and screening test used to detect alterations in gastrointestinal function.

d. Discuss and demonstrate an understanding of the structural and functional alterations in the gastrointestinal system.

e. Discuss and demonstrate and understanding of the pathophysiology, etiology clinical manifestations, diagnostic evaluation and therapeutic management of malabsorption and infectious problems affecting the GI system.

f. State expected nursing diagnosis for GI alterations.

g. Use the nursing process to develop nursing care plans and teaching guidelines for the child with GI alterations.

h. Develop nursing implications for common medications used with the child with GI alterations.

i. Demonstrate critical thinking skills to manage a given patient care situation.

20D). **The Child with a Genitourinary Alteration**

a. Describe the anatomy and physiology of the infant’s and child’s GU system.

b. Describe the most common diagnostic and screening tests used to assess alteration in GU system.

c. Discuss frequently seen alterations in GU system.

d. Use the nursing process to assess, plan and provide nursing care to children with common GU alterations.

21D). **The Child with a Respiratory Alteration**

a. Describe the differences in the anatomy and physiology of the infant’s and child’s respiratory system that increases the risk for respiratory disease.

b. Outline nursing care for a child with allergies to inhalants.

c. Discuss the patho, clinical manifestations, and therapeutic management of common acute and chronic resp alterations.
d. Identify the nursing care needs of infants and children with acute and chronic respiratory alterations.

e. Identify common triggers for asthma.

f. Apply measures that can be taken to prevent and treat asthma episodes.

g. Identify teaching needs for children with asthma and their families.

h. Describe the nursing care of the child with cystic fibrosis.

i. Discuss measures to maintain adequate oxygenation and provide appropriate developmental stimulation for the child with BPD.

j. Identify ways to prevent transmission of TB

22D). The Child with a Cardiovascular Alteration

a. Describe the anatomy and physiology of the normally functioning heart.

b. Describe the major circulatory changes that occur in the fetus during the transition from intrauterine to extrauterine life.

c. Describe specific techniques used in a comprehensive cardiac assessment.

d. Explain the various classifications of congenital heart disease, describe their underlying mechanisms, and list the associated congenital cardiac defects.

e. Discuss the nursing process used for an infant or child with CHF.

f. Discuss the major physiologic features and the therapeutic management of a child with a heart defect, including left-to-right shunting lesions, right-to-left shunting lesions and obstructive or stenotic lesions.

g. Discuss the importance of early recognition and treatment of infective endocarditis.

h. Describe nursing care of a child with rheumatic fever, Kawasaki disease or hypertension.

i. Explain why high cholesterol is an important health issue for children and adolescents, and describe the assessment and nursing management of this problem in children in the community.

j. Explain the effects of childhood obesity on future cardiovascular health.

23D). The Child with a Hematologic Alteration

a. Discuss the role of the nurse in prevention of iron deficiency anemia.

b. Describe common factors in the care of a child with anemia.

c. List possible nursing diagnoses for children with hematologic alterations.

24D). The Child with Cancer.

a. Identify the common clinical manifestations of childhood cancers.

b. Discuss the treatment modalities and their effects of children.

c. Discuss symptom management.

25D. The Child with Major Alterations in Tissue Integrity

a. Identify the manifestations of common skin disorders seen in infants and children.

b. Discuss the management of skin disorders seen frequently in children.

c. Discuss common causes of burns in children and the prevention of burn injuries.

d. Describe care aspects of burns in children.

e. Apply the nursing process to the care of infants and children with skin disorders.

26D). The Child with a Musculoskeletal Alteration.

a. Describe the implications of differences in the anatomy and physiology of the growing musculoskeletal systems of infants and young children in comparison to the mature system.
b. Describe the pathology, etiology, manifestations, diagnostic evaluation, and therapeutic management of MS alterations frequently seen in children.

c. Identify characteristic assessments that indicate alterations in MS function.

d. State appropriate nursing diagnosis for children.

e. Summarize the treatment modalities used to manage the child with MS alteration.

f. Design, implement and evaluate appropriate nursing interventions for the child with altered MS function.

27D). The Child with an Endocrine or Metabolic Alteration.

a. List the major hormones of the endocrine system.

b. Differentiate between signs and symptoms of hypo versus hyperthyroidism.

c. Differentiate between diabetes insipidus and SIADH.

d. Discuss the issues facing a child psychosocially who have precocious puberty.

e. Compare and contrast type 1 diabetes mellitus and type 2.

f. Identify management goals for the child with diabetes type 1 or 2.

28D). The Child with a Neurologic Alteration.

a. Identify the neurologic differences among the infant, child and adult.

b. Use the nursing process to assess, plan and provide nursing care to the child with common neurologic alterations.

c. Discuss the nursing implications of medications frequently used in the management of neurologic disorders.

d. Describe teaching strategies that can be used for the child with neuro problems and the child’s family.

e. List the measures used to keep a child safe during a seizure.

f. List the measures used to prevent or treat cerebral edema.

29D). Psychosocial Problems in Children and Families

a. Identify the individual and familial factors and behaviors that correlate to childhood depression, suicide, or suicide attempts.

b. Develop a nursing care plan for a child at risk for suicide and the child’s family as well as for a child’s family who committed suicide.

c. Discuss the incidence, risk factors, symptoms and nursing interventions for children with eating disorders and their families and describe their nursing care.

d. Identify the primary symptoms and manifestations of children with attention deficit-hyperactivity disorder and describe their nursing care.

e. Identify signs and symptoms of substance abuse disorders and develop a nursing care plan.

f. Describe the major types of abuse and neglect seen in children their contributing factors and nursing care.

30D). The Child with a Developmental Disability.

a. Develop understanding of the use of the terms intellectual disability versus mental retardation.

b. Develop nursing strategies for families caring for a child with Down Syndrome.

c. Identify behavioral characteristics and appropriate nursing actions when working with a child with fragile X-Syndrome.

d. Identify characteristics and appropriate nursing interventions for an infant with fetal alcohol syndrome and appropriate family assessment and intervention.

e. Identify the basic diagnostic criteria for the autism spectrum disorder.
31D). The Child with a Sensory Alteration.
   a. Define the nurse’s role in assessing for sensory alterations.

REQUIRED TEXTBOOKS: The following textbooks and references are required:

James, S.R. et Al (2013), Nursing Care of Children Principles & Practice. (4th ed.)
   St. Louis, Missouri: Elsevier Saunders
   St. Louis, Missouri: Elsevier Saunders
   Upper Saddle River, New Jersey: Prentice Hall
   Odessa College Associate Degree Nursing: Odessa, Texas.

Other references include books assigned in previous courses and
Pageburst by evolve.

COURSE POLICIES:
1. Adhere to the requirements in the OC Nursing Student Handbook.
2. Take all unit exams and the final exam.
3. All assignments must be turned in or the student will receive an incomplete (grade of “I”) for the course.
4. Content to be tested on the unit exams will follow course objectives and may include:
   math problems, assigned reading, information from audiovisual/learning aids, classroom content, study guides and other assigned activities and since this is a comprehensive class each exam may contain questions related to prior content. Exam grades will not be posted.
5. Each unit of study will require the student to complete assignments as instructed.
6. Cell phones and beepers are distracting to students and the instructors when they ring during class. Cell phones and beepers must be turned off or placed in the silent mode while in class and placed in designated cell phone area.

Attendance policy:
See the Nursing Student Handbook. All classes are considered essential for student learning. To report an absence, call your instructor. It is the student’s responsibility to make arrangements to obtain any information that was missed during the absence.
Absence from Examinations:
Missed examinations will be made up as arranged by instructor. Format for the missed exam will be at the instructor’s discretion. It is the student’s responsibility to make arrangements with the instructor to make up the exam. Exam must be made up before the next exam is given. A grade of “0” will be given for any test not taken by the date established by the instructor and agreed on by the student.

Review of Exams:
Because of limited time for instruction, exam reviews will be conducted at the instructor’s discretion. All students in the course must have completed the exam. Attendance is not required. Students have one week to review exam from date taken, if not reviewed during that time or arrangements made with instructor to review then test will no longer be available. Please arrange an appt. time to go over any test you have concerns about in the above time frame.

COURSE CALENDAR: The course calendar will be provided at the beginning of the course.

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 Becky Rivera-Weiss in the Office of Disability Services at 432-335-6861 to request assistance and accommodations.

Approved: 6/05; 7/09

"This course RNSG 2201 Care of Children and Family has been identified as a course by Career, Technical, and Workforce Education as one in which teaching and learning strategies adopted by AVID will be implemented. As a student in RNSG2201 nursing program, you will be expected to develop an understanding of the strategies, to model the strategies, to maintain fidelity of implementation, and to examine how these strategies may impact your effectiveness as a professional in your chosen area of occupation, either through coursework or practicum experience as outlined by the course instructor."
Tobacco Free Policy

In accordance with Tobacco-Free Policies of area health care facilities, students are not allowed to consume tobacco during clinical experiences. Students are not allowed to leave the grounds of the health care facility, to consume tobacco (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 warning will be issued to the student by the instructor for the first event. If a second event occurs, a second written warning will be issued. The student will receive a clinical failure for the clinical course in which he/she is enrolled if a third violation occurs.

Students are allowed to wear a nicotine Patch to clinical experiences but are not allowed to chew Nicotine gum. “Gum chewing is not permitted while in the clinical area”. (See page 35, number 11 CLINICAL, Odessa college student Handbook.)

08/09

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.

“The SEI process for face-to-face and online courses is scheduled for the week of November 26th.”