



**Course Number: NURS 246**

**Course Title: Promotion of Adaptation in Childbearing Families**

**Course Term and Year: Fall 2009**

**Course Section: NURS 246**

**Meeting Time and Place: Harrogate & Blount Sites: See attached lecture schedule for times**

**Course Credit Hours: 4 Credit Hours (3 hours classroom, 1 hour clinical)**

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**FACULTY CONTACT INFORMATION**

**Course Coordinator:** Robin Wilson Ed.S, MSN, RNC 423-869-6321

**Harrogate:** Robin Wilson Ed.S, MSN, RNC 423-869-6321 robin.wilson@lmunet.edu

**ACC:** Gwen Davis MSN, RN 865-273-1543 gwen.davis@lmunet.edu

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**I. COURSE DESCRIPTION:**

A 3 hour lecture 1 hour clinical course utilizing the RAM nursing process to promote adaptation in childbearing families; specifically, focuses on adaptive and ineffective human responses in women, including the childbearing years, neonates, and families. Physiological and behavioral deviations associated with ineffective human responses seen in compensatory and/or compromised health states examined. Use of current research findings in promotion of adaptation for human persons/family adaptive systems included. Clinical learning experiences occur in campus laboratory and in community and/or hospital settings to develop skills in providing care for human persons/families.

Prerequisites/Co-requisites: NURS 115, 124 or 125, 126, 241.

**II. COURSE OBJECTIVES:**

Students who successfully complete NURS 246 will be able to demonstrate in the clinical/campus laboratory setting, in individual and group conferences, and on written material, the ability to:

1. Describe physiological and behavioral deviations associated with adaptive and/or ineffective human responses seen in women, neonates and families.
2. Utilize the Roy Adaptation Model (RAM) nursing process to provide effective nursing care for women, neonates, and families.
3. Perform technical skills necessary to provide effective nursing care for women, neonates, and families
4. Assist the family unit in developing goals to promote health and adaptation.
5. Incorporate teaching-learning strategies in providing education to the family unit.
6. Demonstrate therapeutic communication skills with human persons in the family unit.
7. Apply ethical and legal standards of nursing care for women, neonates, and families.
8. Identify the services of appropriate community facilities in provision of care to the child-bearing family.
9. Incorporate research findings pertinent to the delivery of care for women, neonates, and families to promote adaptation in the four modes: physiologic, interdependence, role function, and self-concept.

### III. TEXTS/MATERIALS FOR THE COURSE:

ATI-Plan: Prescriptive Learning for all Nurses: Maternal Newborn Nursing DVD.  
(Provided in class.).

Cashion, K. & Crum, K. A. (2006). *Virtual Clinical Excursions, Version 3.0: Pacific View Regional Hospital*. St. Louis, MO: Saunders Elsevier.

Kee, J. L., Hayes, E. R., & McCuiston, L. E. (2009). *Pharmacology: A Nursing Process Approach* (6<sup>th</sup> ed.). St. Louis, MO: Saunders Elsevier.

Murray, S. S. & McKinney, E. S. (2006). *Foundations of Maternal-Newborn Nursing*. St. Louis, MO: Saunders Elsevier.

Wissmann, J. (Ed.) (2007). *Maternal Newborn Nursing: RN Edition 7.1*. USA: Assessment Technologies Institute. (Provided in class.).

### IV. COURSE REQUIREMENTS, ASSESSMENT (LEARNING OUTCOMES) AND EVALUATION METHODS:

#### A. Fulfill course requirements. (See LMU Nursing Student Handbook Online 2009- 2010.)

##### 1. Attendance requirements:

- a. Attendance will be taken each class period (lecture/exam). To be counted present, the student must be present for the ENTIRE class period.
  - b. Study labs will be provided in each ASN clinical course for faculty to expand on content presented in lecture. Attendance at these study labs is mandatory for ALL students until after the first course exam. After this time, the study labs are mandatory for students who do not have a course average of 83 or greater. Students with course averages of 83 or greater are encouraged to attend the study labs. Attendance will be taken at each study lab. To be counted present, the student must be present for the ENTIRE study lab.
  - c. After two (2) absences (lecture/exam/study lab) in one semester, it may necessitate that the student withdraw from this NURS course. The student is to contact the lead faculty to arrange for withdrawal from this NURS course.
2. **Cell phone usage is NOT permitted in the classroom or clinical area.** This includes, but not limited to, talking on the phone, checking messages and text messaging. If a student uses a cell phone during class or clinical, they will be asked to leave and counted absent for that day.
  3. Taping of lectures is a privilege which may be granted by the individual faculty member, but it is up to students who wish to tape lectures to ask permission, and not simply assume permission. Students should ask for permission at the beginning of the semester with each individual faculty member. Faculty members reserve the right to discuss with students their desire to tape lecture and what benefit it will have for the student.

#### B. Written Requirements

##### 1. Tests and Examinations:

- a. Five (5) exams and one (1) course assessment exam are scheduled. Test dates and times are specified on the lecture schedule. Completion of ALL exams (classroom and course assessment exams) is required to receive credit for NURS 246.

### **Instructions regarding Course Assessment Exams:**

1. The student must register get a user name and password for Course Assessment Exams.
  2. If technical assistance is needed call: 1-800-667-7531. Office hours of support are Monday – Friday, 7am-6pm Central Standard Time.
  3. The faculty at each site will make arrangements for each Course Assessment Exam. Some exams will be administered via paper/pencil and some via the computer.
  4. If the Course Assessment Exam is for completion only (satisfactory/unsatisfactory), the student will be required to take the exam and turn in the grade sheet by a date specified by the faculty. If the Course Assessment Exam is not taken, completed and turned in by the specified time, the student will not be allowed to take a specific scheduled course exam and will receive a zero for that course exam.
  5. If the Course Assessment Exam is for a % of the course grade and the student does not complete the exam at the scheduled time, a grade of zero (0) will be recorded.
- b. A dosage calculation quiz must be taken and the student must achieve a score of 80% before being allowed to pass medications in the hospital. If the student does not achieve 80% on the second attempt and is not allowed to pass medication, the student will receive an unsatisfactory grade in clinical and will NOT be allowed to continue in the course. **Students will have a maximum time limit of 30 minutes.**

### **Rules regarding tests and examinations:**

1. All students are expected to take exams as scheduled. Students are required to notify the faculty by phone or email prior to the scheduled exam time if they are not going to be present. Students are given faculty contact information in each\_NURS course syllabi and are expected to have it available at all times. If for any reason a student is unable to leave a message for the faculty member via the contact information provided, it is the student's responsibility to contact the Nursing Office on campus (1-800-325-0900, ext. 6324) and talk to the Nursing\_Secretary or leave a message on her voice mail. Please remember to state you are unable to take the exam and be specific as to the course, the faculty's name and the site you attend. **Any student that does not notify the appropriate faculty will receive a zero for the exam.**
2. The faculty will determine the date and time of any alternate make-up exam. **If the student does not make up the exam on the scheduled date and time, the student will get a zero on the exam.**
3. All electronic devices (pagers, cell phones, PDA's, etc), personal belongings (book bags, purses, coats) are prohibited during examination times. Students may only bring into the exam room pencils and a simple calculator. Students must make arrangements for their other personal belongings during test time.
4. Ball caps or hats with any type of brim will not be allowed to be worn during exam administration.
5. Simple calculators are the ONLY calculators allowed during test time. Scientific calculators or those combined with cell phones, PDA's, or other electronic devices are not permitted. If a student presents to an exam with any calculator other than a simple calculator the faculty will collect the calculator and the student will be required to do mathematic calculations by hand only.

Calculators collected prior to the exam will be returned after the exam.

6. Editorial corrections will be given at the beginning of the exam. If corrections to the exam are needed once the exam has started, the faculty will interrupt the exam and announce the correction and also write it on the board.
7. Any student who has questions during the exam must raise his/her hand and stay seated.
8. The student must not leave his/her seat until the exam is finished, except for emergencies.
9. The exam will be timed. The time for exam booklets to be turned in and for class to resume will be written on the board. Any student entering late will be required to turn his/her exam at the stated time.

**10. Violation of ANY of the above policies will result in a zero (0) for that exam.**

11. After the exam is finished, the student has the following options:
  - a) Return to his/her seat, and remain quiet until class resumes.
  - b) Leave the classroom. (If the student chooses to leave the room, he/she may not reenter until class resumes.)
12. Nursing Faculty will review and score the exam during the week after the exam is given. Individual student grades will be available and posted one week after the exam has been given. Faculty will post exam grades on Blackboard.
13. Faculty reserves the right to correct any clerical error. This includes both increases and decreases to adjusted exam grades.
14. Exam reviews will be scheduled outside of class time. Attendance for exam review is strongly recommended. No books, pencils, electronic devices, or taping are allowed during the exam review.
15. Students have one calendar week after the test review to meet with their instructor for clarification of any exam related issue. For the last exam of the semester (final unit exam or final comprehensive exam), students must contact the instructor within 24 hours for clarification of any exam related issue. If a student wants to appeal any exam related issue, it must be presented via email within the time frame listed above and addressed to the instructor who taught the content.

**2. Clinical Written Work:** Assigned by the clinical instructor, these works shall be college level submissions.

During the clinical rotation, students will be given the opportunity to learn more about the newborn, utilizing the Comprehensive Newborn Assessment. Each clinical instructor will assign the Comprehensive Newborn Assessment to students in the clinical setting. The student will have one (1) attempt and must achieve a grade of 80% or greater in order to pass the clinical portion of NURS 246. If a student has not scored 80%, this will constitute an unsatisfactory grade for the clinical and will result in an "F" for the course. One point per day will be subtracted for late assignments. For this assignment, gather data from parental interview, infant exam, and from mother and infant charts. Students may also be

given the opportunity to complete a variety of clinical paperwork, such as Antenatal Assessment, Intrapartal Assessment, Postpartal Assessment, or Surgical Observation and Assessment. All NURS 246 clinical assignments must be completed satisfactorily (80% or greater) in order to successfully pass NURS 246. If a student reports to the clinical area unprepared, he/she will be sent home and the absence will be recorded as an unexcused absence.

**3. Coaching Material:**

Coaching material is available through the ATI Review Modules, ATI DVD's and student customized review guides generated through practice ATI exams. Students are expected to utilize this ATI material to supplement all NURS course material in order to successfully complete this course.

**C. Campus Lab/Clinical Requirements:** There will be a total of 45 campus lab/clinical hours for NURS 246. Attendance is required in clinical/campus lab experiences. See LMU Nursing Student Handbook Online 2009-2010). All clinical/campus lab absences must be made up. A make up day will be required for excused absences. (A doctor's excuse will be required.)

**1. Campus Lab:** NURS 246 will have one campus lab session during the first week of the semester. Students who miss NURS 246 campus lab will not be allowed to attend NURS 246 clinical until the campus lab day is made up at the instructor's discretion.

**2. Clinical:** Each clinical day in a health care facility will be 7 hours in length including a ½ hour lunch break. Students will be in the clinical setting two days per week. Clinical group assignments will be made at the individual sites by the nursing faculty. Clinical days will occur on Thursdays and Fridays from August 27 to November 13, 2009. Clinical make-up days are scheduled for November 19 & 20.

a. After two (2) clinical/campus lab absences (excused and/or unexcused) in one semester, it may necessitate that the student withdraw from this and any other clinical NURS course in which the student is enrolled. The student is to contact the Lead Faculty to arrange for withdrawal from this course/courses. If the student is enrolled in both a med/surg course and a specialty NURS course the policy of two (2) clinical/campus lab absences relates to the combined number of absences between these two NURS courses.

b. A tardy is defined as arriving to the clinical facility ANY time after the scheduled start time. If a student is more than 15 minutes late to the clinical area the clinical instructor has the right to inform the student to go home and the absence will be counted as an unexcused absence.

c. A student who has unexcused absences and/or tardies will have a point for each absence and each tardy deducted from his/her final exam grade. The only absences that will be recognized as an excused absence will be illness accompanied by a doctor's excuse or a death in the immediate family.

d. In order to receive a satisfactory grade in clinical, the student must perform the critical behaviors identified in the Clinical Outcomes Tool.

e. In order for a student to be eligible to go into the clinical areas, he/she must

produce evidence of an annual negative PPD or negative chest x-ray, record of Hepatitis B vaccination or declination form, a Rubella titer and/or second MMR, and current certification the first time this course meets this semester. **If this documentation is not on file before the first clinical day of the semester, the student will not be allowed to attend clinical and the absence(s) will be counted as unexcused.**

- f. Students are reminded that any time they are in the clinical setting for pre-planning, pre-conference, clinical and/or post-conference, they are to adhere to the Caylor School of Nursing uniform policy.

**D. Methods of Evaluation**

Women’s Health Exam	19%
Prenatal Exam	19%
Intrapartal Exam	19%
Postpartum Exam	19%
Newborn Exam	19%
Maternity Nursing Course Assessment	5%
Newborn Assessment	Satisfactory/Unsatisfactory
Clinical Evaluation	Satisfactory/Unsatisfactory
Clinical Attendance	Satisfactory/Unsatisfactory

**E. Incomplete Policy**

Students are expected to complete all requirements as assigned during the semester. Incompletes are only given in extreme circumstances deemed by the instructor. If the request for an “I” is approved, the work must be completed within the first six weeks of the following semester (excluding summer terms); otherwise the grade automatically becomes “F”. The grade of “I” is calculated in the grade point average with zero points.

**E. ASN Caylor School of Nursing Grading Scale:**

F.

- A = 90-100%
- B = 80-89%
- C = 70-79%
- D = 60-69%
- F = below 60%

The minimal acceptable grade in nursing is a "B" in theory, and a satisfactory in clinical. An unsatisfactory grade in clinical will result in an “F” for the course. See the LMU Student Handbook Online 2009-2010 or obtain one from the secretary of the Caylor School of Nursing.

A failing grade for either theory or clinical performance will result in a failing grade for the course. The student must attain an overall average of 80% to pass NURS 241 with a "B". **There will be NO rounding of earned grades within the course and NO rounding of the final grade for the course.**

## G. Clinical Facilities

<u>Tennessee Facilities</u>	<u>Phone #</u>
University of Tennessee Medical Center	865-305-9000
St. Mary's Medical Center - Knoxville	865-545-8000
Lakeway Regional Hospital - Morristown	423-522-6520

## V. METHODS OF INSTRUCTION:

Lecture	Small Group Activities
Discussion	Independent Study
Audio-Visual Materials	Required and Recommended Readings
Campus Lab/Clinical Experiences	Written Assignments
Self Evaluation	Role Play
Guest Lecturers	Individual Guidance & Assistance from Instructors
Computer-Assisted Learning	Case Studies

## VI. INFORMATION LITERACY/TECHNOLOGICAL RESOURCES:

Blackboard will be used for this course to post announcements and individual course grades. In addition the student's email address will be used for all correspondences. Students must have computer skills necessary to participate in this course.

## VII. UNIVERSITY POLICIES:

**Students with Disabilities Policy:** Any student with a disability should bring documentation for the disability to the ADA Compliance Officer in the Office of Student Services [which is presently located on the third floor of the Student Center]. When the documentation has been reviewed, a form will be completed stating the reasonable accommodations to be granted to the student with a disability. All students with disabilities (learning or physical) should contact the Office of the Vice President for Student Services and Enrollment Management at (423) 869-6393.

**Discrimination Policy:** Lincoln Memorial University is committed to maintaining study and work environments that are free from discriminatory harassment based on sex, race, color, national origin, religion, pregnancy, age, military status, disability or any other protected discriminatory factor. Sexual or other discriminatory harassment of its students is strictly prohibited, whether by non-employees (such as contractors or vendors), other students, or by its employees, and LMU will take immediate and appropriate action to prevent and to correct behavior that violates this policy. Likewise, students are strictly prohibited from engaging in harassing behavior directed at LMU's employees, its visitors, vendors and contractors. All students must comply with this policy and take appropriate measures to create an atmosphere free of harassment and discrimination. Appropriate disciplinary action, up to and including, as appropriate, suspension, expulsion, termination from employment or being banned from LMU properties, will be taken against individuals who violate this policy.

**Scholastic Dishonesty:** It is the aim of the faculty of LMU to foster a spirit of complete honesty and a high standard of integrity. The attempt of any student to present work as his/her own that he/she has not honestly performed is regarded by the faculty and the administration as a very serious offense and renders the offender liable to several consequences and possible suspension.

**Cheating:** LMU prohibits dishonesty of any kind on examinations or written assignments. These include unauthorized possession of examination questions, the use of unauthorized notes during an examination, obtaining information during an examination from another student, assisting others to cheat, altering grade records, or entering any campus office without permission. Violations will subject the students to disciplinary action.

**Plagiarism:** LMU prohibits offering the work of another as one's own without proper acknowledgment. Any student who fails to give credit for quotations or essentially identical material taken from books, magazines, encyclopedias, or other reference works, or from the themes, reports or other writings of a fellow student has committed plagiarism.

**LMU's Inclement Weather Policy:** Local radio and television stations will be contacted and every effort made to have morning or daytime cancellations posted/announced by 6:00 a.m., along with a recorded announcement on the LMU main campus telephone number: (423) 869-3611. You may also check the university's website for class cancellation notices; they will be posted on <http://www.lmunet.edu/curstudents/weather.html>.

#### **VIII. LINCOLN MEMORIAL UNIVERSITY MISSION STATEMENT:**

This may be found at <http://www.lmunet.edu/about/mission.html>

#### **IX. CAYLOR SCHOOL OF NURSING MISSION STATEMENT:**

In conjunction with the University's mission, the Faculty of the Caylor School of Nursing strives to instill responsibility and high moral/ethical standards in the preparation of quality nurses, at multiple levels of nursing education, through superior academic programs at the undergraduate and graduate level. Specifically, the mission of the Faculty is to prepare nurses with the ASN degree, the RN to BSN degree, and MSN degree, to assist individuals, families, communities, and society as they adapt to changes in physiological needs, role function, self-concept, and interdependent relationships during health and illness. The Caylor School of Nursing seeks to respond to the needs of nursing education and healthcare in the surrounding communities by preparing nurses at multiple levels and by providing continuing education/professional development opportunities that are rooted in knowledge, research, and other scholarly activities.

**X. COURSE OUTLINE/ASSIGNMENT OR CLINIC SCHEDULE:**

**NURS 246 LECTURE SCHEDULE – FALL 2009**  
**Blount Campus and Harrogate Campus**

**Scheduled class at all sites: Monday 9:00am -11:50am**

**Blount Site First Week:** Lecture: Thursday 8/20: 9-11:50; 1-3:50 (Syllabus Rev/Women’s Health)  
**Campus Lab:** Tues 8/18: 9-12 or Wed 8/19: 9-12  
*(Students attend lab on the day they are not in Med/Surg).*

**Harrogate Site First Week:** Lecture: Tuesday 8/18: 9-11:50 (Syllabus Rev/Women’s Health)  
 Thursday 8/20: 9 – 11:50 (Women’s Health)  
**Campus Lab:** Thurs 8/20: 1 – 4

**THE SCHEDULE BELOW IS FOR THE SECOND THROUGH THE FINAL WEEK OF THE SEMESTER**

<b>Monday</b>	<b>Lecture Content</b>
August 24	Complete Women’s Health Unit
31	<b>Women’s Health Unit Exam</b> (50 questions – 1 hr); begin Prenatal Unit (approx 1 hr, 50 minutes)
September 7	<b>Labor Day, No Classes</b>
14	Continue Prenatal Unit
21	Continue Prenatal Unit
28	Complete Prenatal Unit
October 5	<b>Prenatal Unit Exam</b> (50 questions – 1 hr); begin Intrapartal Unit
12	Continue Intrapartal Unit
19/20	<b>Fall Break, No Classes</b>
26	Continue Intrapartal Unit
November 2	Complete Intrapartal Unit
9	<b>Intrapartal Unit Exam</b> (50 questions – 1 hr); begin Postpartal Unit
16	Continue and Complete Postpartal Unit
23	<b>Postpartal Unit Exam</b> (50 questions – 1 hr); begin Newborn Unit
30	Continue and Complete Newborn Unit
December 7	<b>Newborn Unit Exam</b> (50 questions – 1 hr) <b>Review for ATI Course Assessment</b>
<b>December 9 9:00 – 11:00</b>	<b>ATI Course Assessment</b>

**Clinical Make-up Days:**

**Clinical make-up days for NURS 246 are scheduled for November 19 and 20. Please refer to this course syllabus for guidelines related to class/lab/clinical absences.**

## **XI. IMPORTANT DATES IN THE ACADEMIC CALENDAR FALL 2009:**

<b>Fall Semester 2009</b>	
Registration/New Student Continuing Orientation	August 17
Classes begin	August 18
Last day to complete registration/add classes without late fee	August 26
Labor Day (no classes, residence halls remain open)	September 7
Convocation (9:30 a.m. in session classes & resident students)	September 15
<b>Last day to drop course without "WD"</b>	October 7
Homecoming (classes held as scheduled)	October 9-11
Fall Break	October 19-20
<b>Last day to drop course without "F"</b>	October 23
Early registration begins	October 26
Thanksgiving holiday (no classes)	November 26-27
Classes end	December 4
Final exams	December 7-11
Commencement (11 a.m.)	December 12

**XII. THE INSTRUCTOR RESERVES THE RIGHT TO REVISE, ALTER AND/OR AMEND THIS SYLLABUS, AS NECESSARY. STUDENTS WILL BE NOTIFIED IN WRITING AND/OR BY EMAIL OF ANY SUCH REVISIONS, ALTERATIONS AND/OR AMENDMENTS.**

LINCOLN MEMORIAL UNIVERSITY - CAYLOR SCHOOL OF NURSING  
NURSING 246

Criteria for Credit on Newborn Assessment

Each student is required to complete the Newborn Assessment in Nursing 246. The student will have one (1) attempt and must achieve a grade of 80% or greater in order to pass the clinical portion of NURS 246. If a student has not scored 80%, this will constitute an unsatisfactory grade for the clinical and will result in an “F” for the course. One point per day will be subtracted for late assignments. For this assignment, gather data from parental interview, infant exam, and from mother and infant charts.

<b>Dimension/Task</b>	<b>Limited:</b>  <b>Student fails to complete the category (1 – 6) in a minimally acceptable manner.</b>	<b>Acceptable:</b>  <b>Student understands and completes the category in an acceptable manner.</b>	<b>Proficient:</b>  <b>Student clearly understands and completes the category in a proficient manner.</b>
<b>1. Biographical &amp; Birth Data</b> includes Apgar Scoring	1 pt	2 pts	3 pts
<b>2. Physiologic/Physical Mode:</b> Oxygenation/MS Nutrition Elimination Activity & Rest Protection Life Processes	12 pts	16 pts	20 pts
<b>3. Self-Concept Mode</b>	1 pt	2 pts	3 pts
<b>4. Erikson’s Stage</b>	3 pts	6 pts	9 pts
<b>5. Role Function/ Interdependence Mode</b> A. Eval – Mother/Infant Interaction B. Eval – Family History	10 pts	16 pts	20 pts
<b>6. Role Function/ Interdependence Mode</b> C. Formulation of Nursing Diagnoses & Concept Maps	20 pts	30 pts	40 pts
<b>6. College Level Submission</b> Includes References Thoroughness of Assessment	3 pts	4 pts	5 pts
<b>Total Score per Column:</b>	_____	_____	_____

**Total Score for Newborn Assessment:** \_\_\_\_\_

LINCOLN MEMORIAL UNIVERSITY  
 CAYLOR SCHOOL OF NURSING  
 NURSING 246  
 NEWBORN ASSESSMENT

**I. A. Biographical & Birth Data**

Infant initials \_\_\_\_\_ Sex \_\_\_\_\_ Gestational Age \_\_\_\_\_  
 Date of Exam \_\_\_\_\_ DOB \_\_\_\_\_ Delivery Time \_\_\_\_\_  
 Vaginal or C Section (circle) \_\_\_\_\_ First BM/Time \_\_\_\_\_  
 First Void/Time \_\_\_\_\_ VS @ Birth: Temp \_\_\_\_\_ HR \_\_\_\_\_ Resp \_\_\_\_\_  
 Mother's Blood Type & Rh \_\_\_\_\_ Infant's Blood Type & Rh \_\_\_\_\_  
 Breast or Bottle (circle) Formula \_\_\_\_\_ Apgars \_\_\_\_\_

**B. Apgar Scoring** Please circle appropriate scores for your patient, utilizing one color ink for the 1 minute Apgar, and a second color ink for the 5 minute Apgar.

	0	1	2
<b>Heart Rate</b>	absent	slow, < 100	> 100
<b>Resp. Effort</b>	absent	slow, irregular	good, crying
<b>Muscle Tone</b>	flaccid	some flexion of extrem	active motion
<b>Reflex Irritability</b>	no response	cry	vigorous cry
<b>Color</b>	blue, pale	body pink, Cyanotic extremities	completely pink

**Please note the 1 minute \_\_\_\_\_ and 5 minute \_\_\_\_\_ apgars. What changed and why? (Be thorough).**

## II. Physiologic/Physical Mode

### Oxygenation/Musculoskeletal

#### Ventilation

*Behavior:* Resp Rate \_\_\_\_\_ Rhythm \_\_\_\_\_ Depth \_\_\_\_\_

Nasal Flaring \_\_\_\_\_ Apnea \_\_\_\_\_ Retractions \_\_\_\_\_

Breath Sounds \_\_\_\_\_

*Stimuli:* Chest Circumference \_\_\_\_\_ Symmetry \_\_\_\_\_

Clavicles \_\_\_\_\_ Breast Engorgement \_\_\_\_\_

Breast Secretions \_\_\_\_\_ (Please describe abnormal findings on back).

#### Exchange of Gases

*Behavior:* Cord Gases \_\_\_\_\_

Pulse Oximetry \_\_\_\_\_

*Stimuli:* Oxygen in Use \_\_\_\_\_ via \_\_\_\_\_ @ \_\_\_\_\_

#### Transport of Gases

*Behavior:* Apical Pulse Rate \_\_\_\_\_ Rhythm \_\_\_\_\_

Volume \_\_\_\_\_ Heart Sounds S1 S2 \_\_\_\_\_ Abn Heart Sounds \_\_\_\_\_

Mottling \_\_\_\_\_ Plethora \_\_\_\_\_ Peripheral Cyanosis \_\_\_\_\_

Umbilical Cord: 2 Arteries \_\_\_\_\_ 1 Vein \_\_\_\_\_ Describe Appearance of Cord \_\_\_\_\_

Upper Extremities: Color \_\_\_\_\_ Temp \_\_\_\_\_ Position \_\_\_\_\_

Muscle Tone \_\_\_\_\_ Length (Fingertips should cover proximal thighs) \_\_\_\_\_

Fingernails \_\_\_\_\_ Cap Refill \_\_\_\_\_ Syndactyly \_\_\_\_\_ Polydactyly \_\_\_\_\_

Symmetrical Movement \_\_\_\_\_

Lower Extremities: Color \_\_\_\_\_ Temp \_\_\_\_\_ Posterior Thighs \_\_\_\_\_

Symmetrical \_\_\_\_\_ Movement Symmetrical \_\_\_\_\_

Polydactyly \_\_\_\_\_ Syndactyly \_\_\_\_\_ Toe Nails \_\_\_\_\_

Cap Refill \_\_\_\_\_ Unusual Spacing Between Toes \_\_\_\_\_

Back: Scapula symmetrical \_\_\_\_\_ Abnormal tufts of hair \_\_\_\_\_

Spinal alignment \_\_\_\_\_ Dimples along spine \_\_\_\_\_

Buttocks: Regular Skin Folds \_\_\_\_\_ Mongolian Spots \_\_\_\_\_

Anal Opening \_\_\_\_\_

Diagnostic Tests: Bilirubin Level \_\_\_\_\_ Rh Factor \_\_\_\_\_

**Coombs Test** \_\_\_\_\_ CBC, H & H \_\_\_\_\_ CXR \_\_\_\_\_

Any other Tests \_\_\_\_\_

*Stimuli:* Known Cardiac Disease \_\_\_\_\_

### Nutrition

*Behavior:* Breast or Bottle \_\_\_\_\_ Formula \_\_\_\_\_

Feeding Times \_\_\_\_\_ Length of Feeding (Breast) \_\_\_\_\_

Birth Weight kg/lb \_\_\_\_\_ Today's Weight kg/lb \_\_\_\_\_

Percent weight loss \_\_\_\_\_ Is this weight loss appropriate? Discuss. \_\_\_\_\_

Head Circumference cm/in \_\_\_\_\_ Chest Circumference cm/in \_\_\_\_\_

Length cm/in \_\_\_\_\_ Are measurements proportional? \_\_\_\_\_

Discuss \_\_\_\_\_

Nares patent bilaterally \_\_\_\_\_ (Discuss if not) \_\_\_\_\_

Feeding Abnormalities \_\_\_\_\_

Mouth: Symmetry \_\_\_\_\_ Cleft Lip or Palate \_\_\_\_\_

Tongue in Midline \_\_\_\_\_ Frenulum \_\_\_\_\_ First Water \_\_\_\_\_

First Breast/Bottle \_\_\_\_\_ Formula Amt taken per feeding/length of BF \_\_\_\_\_  
Regurgitation/Amount \_\_\_\_\_ NG/OG Tube Feeding \_\_\_\_\_  
Amt/Freq of Feeding \_\_\_\_\_ Bowel Sounds \_\_\_\_\_  
PKU Testing \_\_\_\_\_ 1 hour Glucose \_\_\_\_\_  
Additional Glucose Monitoring \_\_\_\_\_

### Elimination

*Behavior:* Stool; Freq \_\_\_\_\_ Color \_\_\_\_\_ Consistency \_\_\_\_\_  
Odor \_\_\_\_\_ Meconium plug expelled \_\_\_\_\_ Progressive Stools \_\_\_\_\_  
Abdomen: Soft \_\_\_\_\_ Firm \_\_\_\_\_ Slightly rounded \_\_\_\_\_  
Distended \_\_\_\_\_ Tenderness \_\_\_\_\_ Pain upon elimination \_\_\_\_\_  
Perineal area skin irritation \_\_\_\_\_ Medications \_\_\_\_\_  
First voiding \_\_\_\_\_ Characteristics \_\_\_\_\_ Describe urinary  
Stream \_\_\_\_\_ Frequency/Amount of Voiding \_\_\_\_\_  
*Stimuli:* Any diagnosed abnormalities of GI/Urinary System \_\_\_\_\_

### Activity & Rest

*Behavior:* Physical Activity: Symmetrical movement of all four extremities \_\_\_\_\_  
Strength: initiate grasp reflex and attempt to pull to sitting position \_\_\_\_\_  
Mobility: ROM appropriate for NB \_\_\_\_\_ Tremors/weakness noted \_\_\_\_\_  
Hours of sleep versus waking hours \_\_\_\_\_  
Difficulty staying asleep \_\_\_\_\_ Appears rested \_\_\_\_\_  
Pacifier or other infant ritual for comfort \_\_\_\_\_  
*Stimuli:* Environmental disturbances?Physical abnormalities/Other \_\_\_\_\_

### Protection

*Behavior:* Skin: Color: Pink \_\_\_\_\_ Pallor \_\_\_\_\_ Jaundice \_\_\_\_\_  
Erythema Toxicum \_\_\_\_\_ Acrocyanosis \_\_\_\_\_  
Central cyanosis \_\_\_\_\_ Condition: Turgor \_\_\_\_\_ Dry \_\_\_\_\_  
Moist \_\_\_\_\_ Intact \_\_\_\_\_ Peeling \_\_\_\_\_ Thin \_\_\_\_\_  
Lacerations \_\_\_\_\_ Scratches \_\_\_\_\_ Lesions \_\_\_\_\_  
Birthmarks \_\_\_\_\_ Mongolian Spots \_\_\_\_\_ Edema \_\_\_\_\_  
Appearance/condition of umbilical stump \_\_\_\_\_  
Vernix caseosa/describe \_\_\_\_\_  
Lanugo/describe \_\_\_\_\_  
Forcep Marks/ vacuum extraction marks/describe \_\_\_\_\_  
Hair : Distribution \_\_\_\_\_ Character \_\_\_\_\_  
Nails: present on fingers/toes \_\_\_\_\_ Body Temp: Axillary \_\_\_\_\_  
Mucous membranes: Moist \_\_\_\_\_ Dry \_\_\_\_\_ Pink \_\_\_\_\_  
Pale \_\_\_\_\_ Cyanaotic \_\_\_\_\_ Intact Palate \_\_\_\_\_  
*Stimuli:* Exposure to room air/extreme temps \_\_\_\_\_

### Life Processes

*Senses:* Pupils: PERRL \_\_\_\_\_ unequal \_\_\_\_\_  
Eyes: Symmetrical \_\_\_\_\_ Periorbital Edema \_\_\_\_\_ Sunken \_\_\_\_\_  
Clear \_\_\_\_\_ Irritated \_\_\_\_\_ Red Reflex present \_\_\_\_\_  
Hypertelorism \_\_\_\_\_ Hypotelorism \_\_\_\_\_  
Ear Canals: Patent \_\_\_\_\_ Cerumen/vernix present \_\_\_\_\_ Drainage \_\_\_\_\_  
Ears: Level \_\_\_\_\_ Symmetrical \_\_\_\_\_ Passes Hearing Test \_\_\_\_\_  
Cartilage/maturity of ear \_\_\_\_\_  
Exhibition of Pain (Grimacing, crying, thrashing) \_\_\_\_\_  
Relief measures (by nurse) \_\_\_\_\_

Fluid, electrolytes, acid-base balance: Deficits noted in Oxygenation \_\_\_\_\_  
 Nutrition \_\_\_\_\_ Elimination \_\_\_\_\_ Activity/Rest \_\_\_\_\_  
 Protection \_\_\_\_\_  
 Lab Values: Urinalysis \_\_\_\_\_ Urine pH \_\_\_\_\_ Sp Gravity \_\_\_\_\_  
 Hgb/Hct \_\_\_\_\_ Electrolytes \_\_\_\_\_  
 Vomitus/Regurgitation: Amount \_\_\_\_\_ Frequency \_\_\_\_\_  
 Color: \_\_\_\_\_ trigger \_\_\_\_\_  
 Neurological function: Awake/alert \_\_\_\_\_ Sleeping \_\_\_\_\_  
 Drowsy \_\_\_\_\_ Lethargic \_\_\_\_\_ Comatose \_\_\_\_\_  
 Abnormal posturing \_\_\_\_\_  
 Head: Circumference cm/in. \_\_\_\_\_ Microcephaly \_\_\_\_\_  
 Hydrocephalic \_\_\_\_\_ Molding \_\_\_\_\_  
 Caput succedaneum \_\_\_\_\_ Cephalhematoma \_\_\_\_\_  
 Fontanels: Shape: anterior: \_\_\_\_\_ posterior: \_\_\_\_\_ Size: anterior: \_\_\_\_\_ post: \_\_\_\_\_  
 Bulging \_\_\_\_\_ Depression \_\_\_\_\_  
 Neck: Turns head from side to side \_\_\_\_\_  
 Attempts to lift head \_\_\_\_\_  
 Neuromuscular: Describe the stimulus utilized **and** infant's response:  
 Blink Reflex \_\_\_\_\_  
 Moro Reflex \_\_\_\_\_  
 Tonic Neck Reflex \_\_\_\_\_  
 Rooting Reflex \_\_\_\_\_  
 Sucking Reflex \_\_\_\_\_  
 Grasp Reflex - Palmar - Plantar \_\_\_\_\_  
 Stepping Reflex \_\_\_\_\_  
 Trunk Incurvation \_\_\_\_\_  
 Babinski Reflex \_\_\_\_\_  
 Endocrine Function: Deficits noted in: Oxygenation \_\_\_\_\_ Nutrition \_\_\_\_\_  
 Elimination \_\_\_\_\_ Activity/Rest \_\_\_\_\_ Protection \_\_\_\_\_ Senses \_\_\_\_\_  
 Structural Development: Skeletal growth age appropriate \_\_\_\_\_ SGA \_\_\_\_\_  
 LGA \_\_\_\_\_ IUGR \_\_\_\_\_ Macrosomia \_\_\_\_\_  
 Genitalia: Male: Symmetry \_\_\_\_\_ Testes Descended \_\_\_\_\_  
 Glans \_\_\_\_\_ Urethral Opening/location \_\_\_\_\_ Rugae \_\_\_\_\_  
 Presence/condition of circumcision \_\_\_\_\_  
 Female: Labial Fullness/approximation \_\_\_\_\_ Clitoris \_\_\_\_\_  
 Meatus (easy to visualize or well covered) \_\_\_\_\_  
 Vaginal Secretions (presence/description/significance) \_\_\_\_\_

**III. Self-Concept Mode**

Body/Physical Sensations: Infant appears: Comfortable \_\_\_\_\_ Anxious \_\_\_\_\_  
 Restless \_\_\_\_\_ Agitated/crying \_\_\_\_\_  
 Age appropriate physical development: Yes \_\_\_\_\_ No (describe) \_\_\_\_\_  
 Infant coping mechanisms \_\_\_\_\_  
 Individual(s) responsible for health care \_\_\_\_\_  
 Access to health care \_\_\_\_\_ Insurance \_\_\_\_\_ Fixed Income \_\_\_\_\_  
 Family: Nuclear \_\_\_\_\_ Single Parent \_\_\_\_\_ Extended \_\_\_\_\_

Erikson's developmental stage. **(Please cover fully on separate sheet)**

#### **IV. Role Function/Interdependence Modes – Please Be Thorough!**

- A. Evaluate mother(family)/infant interaction for 10 -15 minutes. Note verbal/nonverbal communication techniques used by mother (family) and infant.
- B. Assess for significant family history relative to inherited disorders. Was genetic counseling performed or recommended? Determine presence of risk factor for disease. (Remember that the maternal and paternal health histories are the baby's health history, too.) Describe health practices of mother that put the infant at risk. Summarize findings that are significant to nursing care related to family history/risk for inherited disorders.
- C. Identify six nursing diagnoses based on your assessment data of the newborn and the family. Normal newborns have few "true" problems, but many potential ones. Identify all true problems before developing nursing diagnoses from 'potential' problems. Prioritize your nursing diagnoses and formulate a concept map for the top three (3) nursing diagnosis.

## NURS 246

### 'Ticket-In' on Exam Day

The following assignments are due on each exam day as your 'ticket in' to the exam. Each student must turn in the designated assignment from the *Virtual Clinical Excursions* book prior to taking each scheduled exam. After completing the assigned pages in the VCE book, students should tear those pages out and staple them together. Also, students should print the evaluations at the end of each assigned lesson (Examination Report and Medication Scorecard) and turn the evaluations in on test day, stapled together with the lesson pages.

August 31	Women's Health Exam	Lesson 16 (50 minutes)
October 5	Prenatal Unit Exam	Lesson 2 (35 m) & Lesson 3 (40 m) Lesson 6 (40 m)
November 9	Intrapartal Unit Exam	Lesson 4 (95 m), Lesson 5 (120 m), & Lesson 14 (80 m)
November 23	Postpartum Unit Exam	Lesson 17 (Medication Administration – 95m)
December 7	Newborn Exam	Lesson 15 (85m)

All sites will complete Lesson 1 (55 minutes) in lecture or campus lab.

#### Optional Activities for Prenatal Unit:

- Lesson 7 – Childbearing Family with Special Needs: Grief (35m)
- Lesson 8 – Childbearing Family with Special Needs: Partner Violence (80m)
- Lesson 11 – Concurrent Disorders: Gestational Diabetes (70m)
- Lesson 13 – Concurrent Disorders: Cardiac/Lupus (80m)

#### Optional Activities for Intrapartal Unit:

- Lesson 9 – Complications of Pregnancy: Hypertensive Disorders (70m)
- Lesson 10 – Complications of Pregnancy: Hemorrhagic Disorders (120 m)
- Lesson 12 – Concurrent Disorders: Infections (50m)