



Course Number: NURS 561

Course Title: Culturally Congruent Care for Young Middle, and Elderly Adults

Course Term and Year: Spring 2010

Course Section: NURS 561-00 Harrogate and West Knoxville

Meeting Time and Place: 9:00am to 12:50pm

Course Credit Hours: 6 (4 credit lecture – 2 credit practicum)

Faculty Contact Information:

Jean Croce Hemphill, PhD, FNP, BC **Course Coordinator** jean.hemphill@lmunet.edu

Carol Crye, MSN, APRN, BC, FNP carol.crye@lmunet.edu

Jennifer Savage, MSN, FNP-BC jennifer.savage@lmunet.edu

Elizabeth Chadwell, MSN, FNP-BC liz417@aol.com

Office hours: 1:00pm-2 :00pm every other Friday and by appointment
800-325-0900

It is the responsibility of the student to check her or his official email account and course Blackboard regularly for announcements or instructions from faculty or the university.

COURSE DESCRIPTION: FNP Core I: Integration of theory with clinical practice in the initial development of the role of the family nurse practitioner. Diagnostic, therapeutic, and pharmacological regimens are examined. Continued emphasis is placed on developing cultural sensitivity to the variations in health care needs of rural populations. Under the supervision of preceptors and faculty, students manage and coordinate primary care for rural adults experiencing health promotion, acute, episodic, and chronic illness problems. The diagnostic, therapeutic, evaluative, consultative, and teaching functions of the nurse practitioner role are explored in the classroom and applied at the clinical site which may include but are not limited to private practice, primary care centers, hospital-based clinics, and long-term care facilities. Emerging skills in collaborative interdisciplinary practice are used to develop comprehensive health assessments and treatment plans in the delivery of culturally congruent primary care. Prerequisites: NURS 500, 510, 520, 530

COURSE OBJECTIVES:

At completion of NURS 561, the student will be able to:

1. Demonstrate basic competence in advanced practice role in the assessment and management of family focused primary care of adult populations for health maintenance and for common episodic health related problems.

2. Collaborate within a trans-disciplinary health care team in order to ensure in care coordination of for adult clients and families.
3. Identify professional, legal, and ethical standards to advanced practice in the care of clients living in multicultural communities.
4. Identify nursing theory and clinically relevant research to provide culturally competent, family focused primary health care to rural adults.
5. Integrate strategies for health promotion activities in the comprehensive treatment plans for adults and families in the context of their cultural and community.
6. Describe and critique clinical practice using current standards of care and scope of practice for the family nurse practitioner.
7. Identify legislative, economic, and ethical issues impacting provision of primary care to individuals and families across the lifespan.

TEXTS/MATERIALS FOR THE COURSE:

Required:

Dains, J. E., Baumann, L. C., & Scheibel, P. (2007). *Advanced Health Assessment & Clinical Diagnosis in Primary Care*(3rd ed.). New York: Mosby.

Goroll, A. H., & Mulley, Jr. A. G. (2009). *Primary care medicine: Office evaluation and management of the adult patient* (6th ed.). Philadelphia: Lippincott Williams & Wilkins.

Stern, S. D. C., Cifu, A. S., & Alkorn, D. (2006). *Symptom to diagnosis: An evidence-based guide*. New York: Lange Medical Books/McGraw-Hill.

American Psychological Association (APA). (2009). *Publication manual of the American Psychological Association* (6th ed.). Washington, DC: American Psychological Association.

Recommended:

Andreoli, T. E., Carpenter, C. C. J., Griggs, R.C., & Benjamin, I. J. (Eds.). (2007). *Cecil Essentials of Medicine* (7th ed.). Philadelphia: Saunders.

Colyar, M.R., & Ehrhardt, C. R. (2004). *Ambulatory Care Procedures for the Nurse Practitioner*. Philadelphia: F.A. Davis.

Edmunds, M.W. & Mayhew, M.S. (2009). *Pharmacology for the primary care provider* (3nd ed.). Philadelphia: Elsevier.

Ham, R. J., Sloane, P. D., Warshaw, G. A., Bernard, M. A., & Flaherty, E. (2007). *Primary Care Geriatrics: A Case- Based Approach* (5th ed.). Philadelphia: Mosby Elsevier.

Wolff, K., Johnson, R. A., & Suurmond, R. (2009). *Fitzpatrick's*

Color Atlas & Synopsis of Clinical Dermatology (6th ed.). New York: McGraw-Hill Medical Publisher Division.

INFORMATION LITERACY/TECHNOLOGICAL RESOURCES:

<http://library.lmunet.edu>

Epocrates Online is located in the database section of the Lincoln Memorial University library's website. Each user must register their own User ID and Password as it does not automatically utilize the LMU User ID and Password.

METHODS OF INSTRUCTION:

Teaching and learning methods will include lectures, clinical simulations in the simulation laboratory, standardized patient simulations, use of selected on-line tutorials, supervised clinical practice, and in-class demonstration (i.e. suturing lab and wound care), group discussions, case studies, student generated SOAPE papers, community projects, written examinations, and 120 hours of clinical practicum.

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

Assignments are designed to support development of skills needed for evidence based practice, diagnostic reasoning, developing a plan of care, evaluating the care and application of nursing theory, and application of nursing and related research.

Graded Assignments for NURS561

	% of Course Grade
SOAPE I	10
Simulation	5
Midterm (written)	15
Clinical case analysis presentation	20
SOAPE II	15
Community Project	5
Quizzes	5
Standardized patient evaluation final	10
Final (written)	15
Clinical logs/journals/mini	P/F

SOAPE notes (three)	
Total	100

Grading Scale and Procedures: Grades on written assignments will be computed using the provided grading tools. For all assignments, please read your grading tool.

Clinical evaluation: Consult your handbook for tools and forms related to clinical evaluations. Clinical evaluation includes self-evaluations, preceptor evaluations and faculty evaluations of on-site performance as well as evaluation of related clinical written work. Faculty members retain ultimate responsibility for students' clinical grades.

Grading

Grading scale for the course is:

93-100	A
89-92	B+
83-88	B
79-82	C+
73-78	C
72 or below	D

1. The student must have a minimum of two scientific references available for use during class discussion. You may choose two of your textbooks and supplement with scientific references pertinent to the concurrent class topic.
2. Attendance is mandatory. Please review Caylor School of Nursing attendance policy in the student handbook.
3. Late assignments will receive one letter grade lower than that achieved if the assignment had been turned in on time.
4. Students are required and held accountable for checking their LMU email account on a regular basis, University offices, as well as faculty, will use this email address to correspond with the student throughout the semester.
5. APA format is required for all written assignments.

SOAPE I& II

- Choose an acute patient problem from your practice. Each case should be a different problem and from a different age group or gender. For example, if the first SOAPE focuses on ear pain in a 20-year-old man, the second SOAPE should focus on a different acute problem in a middle-aged woman.
- Using the CC, HPI, focused SOAPE format, write up your patient including diagnostics and plan.
- Cite a minimum of four references from the current scientific refereed literature.
- To continue to integrate nursing theory and practice, part of this assignment requires that you choose a theorist and BRIEFLY describe SELECTED elements of the theory (focus

on one major concept(s), relationships between concepts, and or sections of the theory that relate to this case).

- Justifications for diagnostic hypotheses and, final diagnosis and management include documentation from your clinical findings such as pertinent historical elements, pertinent physical exam findings, interpretation of labs/diagnostics, and documentation of evidence using references from current literature.
- Completed assignment must address all of the following items:
 - chief complaint or reason for seeking care
 - history of present illness (HPI)
 - physical exam pertinent to HPI-must include advanced techniques
 - current medications, dosages
 - allergies
 - diagnostic hypotheses with justification (list of possible differential diagnoses)
 - final diagnoses (assessment) with justification as to why you eliminated competing diagnoses (see above for description of an acceptable justification)
 - management (plan)
 - medications
 - nursing
 - procedures, labs, x-ray
 - activity (or other health maintenance)
 - diet (or other health maintenance)
 - community: intervention(s), obstacles to care, resources
 - collaboration
 - consultation/referral, including medical consultation with preceptor, medical or nursing specialty, emergent and non-emergent, and trans-disciplinary referrals
 - follow-up
 - evaluation: evaluate yourself and evaluate your plan/management
 - Nursing role
 - Theory application and development of a research question from this case
 - Pertinent research and peer reviewed literature

APA format is REQUIRED.

Grading criteria for SOAPE assignments.

	Points possible	Points earned
Appropriate subjective data	25	
Appropriate objective data	10	
Correct Assessment (including correct diagnostic hypotheses and final diagnosis(es))	15	
Plan appropriate		

Appropriate management includes the 10 elements and documentation of rational and evidence based practice 25

- medications
- nursing
- procedures, labs, x-ray
- activity (as appropriate) (or other health maintenance)
- diet (as appropriate) (or other health maintenance)
- community
- collaboration
- consultation/referral
- follow-up
- evaluation

Role of the nurse practitioner 10

Application of nursing theory 5

Nursing research question relevant to case 5

APA 5

Percent of total points SUM(ABOVE) 100

CLINICAL CASE ANALYSIS CLASS PRESENTATION (Group Assignment)

Each student group will be required to participate in a group to present one case chosen from the clinical practice site. Presentation guidelines must include criteria for a case presentation. The focus of discussion will be on:

- Diagnostic hypotheses and final diagnoses: expected outcomes
- Consideration of specific facts that led to your decision
- Justification for interventions (including specific history and PE findings and evidence based literature)
- How you ruled out competing diagnoses and interventions
- Patient management including analysis as to whether you investigated the problem efficiently
- Specific findings (present or potential) that would lead you to consult and refer
- Specific evidence in peer reviewed literature that supports your decisions (you may not use your textbooks)
- The group must provide the class with at least two peer reviewed reference articles (not including your textbooks) pertinent to the topic at least one week prior to your presentation.
- The student develops Handouts/AV aids.
- Specific nursing research question with method generated from this case. The specific nursing theory must be incorporated into the development of the research question and method.

The oral case presentation is the primary means by which professional clinicians convey information about clients to each other. Excellence of oral presentation reflects your basic grasp of the client's condition and your capacity to reduce complex data to readily understandable information. In learning to present well, you develop skills in obtaining, organizing, and conveying clinical information, in diagnostic reasoning, and in therapeutics. The oral presentation gives a concise account of the essential facts, and in the case of education, allows discussion and new learning opportunities.

You may choose to present a case for which you are writing a SOAPE or you may choose a case that challenged you or expands new knowledge from your clinical practice.

Each student in the group must present a portion of the assignment and will receive both a group and individual grade, 50 % of the grade will be a group evaluation and 50% of the grade will be an individual evaluation. The average of the two grades will be your final grade for this assignment.

Grading Tool Clinical Case Analysis Class Presentation (Group Evaluation)

	Points possible	Points earned
1. Appropriate subjective data presented	20	
2. Appropriated objective data presented	10	
3. Presented and considered more than one scientific viewpoint	5	
4. Diagnostic hypotheses and final diagnoses, management, interventions, expected outcomes and justification for interventions discussed	5	
5. Discussed how you ruled out competing diagnoses	5	
6. Evaluated patient management including analysis as to whether you investigated the problem efficiently	10	
7. Discussed specific findings (if present or potential dangers) that would lead you to consult and refer	10	
8. Presented specific evidence in <u>peer reviewed literature</u> that supports your decisions	10	
9. Exhibited professional presentation demeanor	5	
10. Nursing theory concept was discussed	5	
11. Nursing research question generated from specific theory pertinent to case	10	

12. Class participation and discussion 5

Percent of total points SUM (ABOVE) 100

Grading Tool Clinical Case Analysis Class Presentation (Individual Evaluation)

	Points possible	Points earned
Clearly identified goals of the presentation	10	
Content		
Pertinent information	25	
New knowledge presented	20	
Logical organization	15	
Delivery	10	
Engaged the listeners		
Usefulness of handouts/&/or AV	10	
Professional presentation demeanor	10	
Percent of total points	SUM (ABOVE)	100

Clinical Mini SOAPE Note: each student is required to submit 3 mini clinical SOAPE notes that are developed from clinical practice, each dealing with a different problem. The mini clinical SOAPE note is written as you would write it within a clinical setting. APA format is not required. Clinical mini soapes are used to evaluate your clinical thought processes and to provide feedback to you on symptom analysis, focused physical exam and diagnostic development. They are graded as Pass/Fail.

Required elements:

- chief complaint or reason for seeking care
- history of present illness (HPI)
- current medications
- social history
- physical exam pertinent to HPI-must include advanced techniques
- diagnostic hypotheses with justification (list of possible differential diagnoses)
- final diagnoses (assessment) with justification as to why you eliminated competing diagnoses (see above for description of an acceptable justification)
- management (plan)
 - medications
 - nursing

- procedures, labs, x-ray
- activity (or other health maintenance)
- diet (or other health maintenance)
- community: intervention(s), obstacles to care, resources
- collaboration
- consultation/referral, including medical consultation with preceptor, medical or nursing specialty, emergent and non-emergent, and trans-disciplinary referrals
- follow-up

Community Project: The goal of this assignment is to integrate population-based prevention in the community and use the information to individualize care specific to the target community. Identify the target population that may need or has requested an intervention. *The target population must include persons from a minority or ethnic population, such as African Americans, Hispanic, or those of a culture different from the predominant ethnic population.* Develop a community- based intervention after mutually identifying with the key participants in that community. Some examples include nutrition and exercise education, hypertensive screenings, identification of safe play and activity areas in a community, developing a health educational brochure for a community agency, developing safe medication use in target groups in collaboration with a parish nurse, identifying health needs of public school teachers, developing diabetes prevention with marginalized women of color.

Requirements:

The student must submit an outline describing the target population, the intervention, date(s) of intervention and method(s) of evaluation. Describe the final project, outcome and evaluation in a 2-3 page paper using APA format. Attach any educational materials or tools that you developed. This is worth 10% of the course grade.

Grading Tool for Community Project

Possible Points

Identifies target population, including those of different ethnic groups_____	2
Evidence that community participants were involved in choosing the intervention_____	2
Intervention is culturally relevant_____	2
Evaluation includes outcomes and future needs and/or things that might have been done differently_____	2
Student used peer- reviewed literature to support the project_____	1
APA format_____	1

Total Points Earned_____

Simulation Laboratory Case: The objective of the simulated laboratory case is to provide

opportunity for a group of students to participate in symptom analysis, focused physical exam incorporating advanced techniques, and to develop a diagnosis and plan of an acute primary care problem. Students will be evaluated on:

1. history taking pertinent to presenting symptoms
2. physical exam performance, including advanced techniques
3. diagnostic thinking with correct assessment and plan.

The grade will include each of these components but will also include criteria specific to the presenting symptom/case.

A post-simulation debriefing period will follow immediately; participation required.

This is worth 5% of your course grade.

Standardized Patient Evaluation Clinical Midterm and Final Exams: Students will be evaluated on their ability to perform a focused history and physical exam, develop a diagnosis and plan using a standardized patient simulating a common, acute, episodic complaint.

Each student will arrive 10 minutes prior she/he is scheduled to see the patient, during which time she/he will have access to typical demographic and health data, chief complaint, and vital signs.

At the scheduled time, the student will enter the room, introduce her/himself, wash hands, and obtain a focused history and physical exam within 15 minutes. This portion of the exam will be videotaped. Upon exiting the room the student will provide an oral presentation of the case to the faculty member.

When the student exits the room, she/he will have 10 minutes to write a SOAP note.

Evaluation of the videotaped encounter will include components specific to the presenting problem, history taking skills, physical exam performance specific to the case.

The SOAP write up will be evaluated on pertinent historical elements including onset, duration, quality, quantity, precipitation factors, alleviating factors, associated symptoms. Pertinent physical exam, correct assessment and plan including patient education, follow up, consultation or referral. Language appropriate to health communication is part of the evaluation.

Standardized patient evaluation is 10% of the course grade and is part of your final exam.

Quizzes

Spot quizzes composed of multiple choice questions are based upon reading assignments and administered in class. These quizzes are unannounced with no make-up availability. Total quiz average is worth 5% of the course grade.

Midterm and final exams: Written

These exams will be a combination of short answer, written symptom analyses, and multiple-choice questions.

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, Scholastic Dishonesty, Cheating, and Plagiarism Policies can be found in the student handbook: <http://www.lmunet.edu/campuslife/sthandbook/handbook.pdf>

LMU's Inclement Weather Policy: <http://www.lmunet.edu/curstudents/weather.html>.
mission statements:

LINCOLN MEMORIAL UNIVERSITY MISSION STATEMENT:
<http://www.lmunet.edu/about/mission.html>.

DEPARTMENT OR PROGRAM MISSION STATEMENT:

Please refer to Caylor School of Nursing MSN student handbook

COURSE OUTLINE/ASSIGNMENT/UNITS OF INSTRUCTION OR CLINIC SCHEDULE:

Clinical Policies

1. Students are expected to be familiar with and comply with all the requirements and policies in the student handbook regarding the clinical component of coursework.
2. Before beginning clinical, students must have on file with LMU evidence of a current negative PPD or chest x-ray, record of hepatitis B vaccine or declination form, a Rubella titer or second MMR, and current CPR certification.
3. Professional behavior requires that students communicate with their preceptors as soon as possible if they discover that they will be late or absent for any scheduled clinical experiences. Unprofessional behavior may be grounds for a clinical failure.
4. Students are expected to complete the required hours of clinical before the end of each semester. This requires careful planning by each student.
5. Clinical logs and journals are required to be submitted weekly.
6. Clinical logs must be documented on the official clinical log recording form and all components of the encounters must be documented as listed on the form. Clinical hours must be totaled weekly and documented and the clinical preceptor must sign the log.

7. If a student becomes aware of any barriers to the timely completion of clinical hours, the student should immediately consult with faculty to explore remedies and options.
8. Under extenuating circumstances, an incomplete may be given to allow completion of required clinical hours with the proviso that any deficiency in clinical hours will be removed as soon as possible. NB: Students may not enroll in subsequent clinical classes until the incomplete is removed.
9. One must pass the clinical component in order to pass the class.
10. This course requires 120 hours of clinical with a focus on acute, episodic primary care of the young and middle adult including some geriatrics.

Only Caylor School of Nursing approved clinical sites are acceptable. The course coordinator must approve any change in clinical sites in advance. Practice sites are selected in order to allow the student to fulfill the course objectives.

IMPORTANT DATES IN THE ACADEMIC CALENDAR SPRING 2010:

Last Day to Add Classes	January 13, 2010
Martin Luther King Day (no classes)	January 18, 2010
Convocation (9:30 a.m.)	February 2, 2010
Last Day to Drop Course without “WD”	February 19, 2010
Midterm	February 22-26 2010
Last Day to Drop Course without “F”	March 10, 2010
Spring Break/Easter Holiday (no classes)	March 15-19, 2010
Good Friday (no classes)	April 2, 2010
Last Day of Classes	April 23, 2010
Final Exams	April 26-April 30, 2010

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.