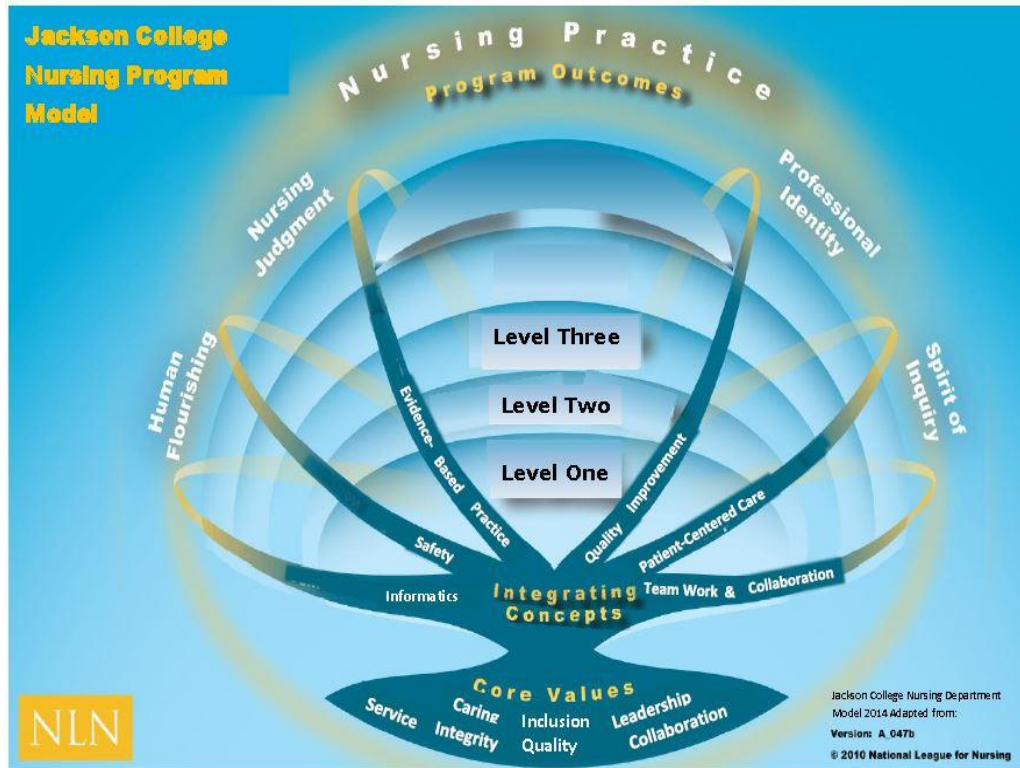


Jackson College



Based upon NLN Education Competencies Model / Nursing Program Model Aligned with Core Values of Jackson College

MEDICAL SURGICAL NURSING 3

NRS 230

2019-2020

Course Number NRS 230
Course Title Medical Surgical Nursing 3
Credits 4 Credits
Contact Hours: 34.5 hours (2.3 BCH) of class
 76.5 hours (5.1 BCH) of clinical

INSTRUCTORS

Erin Mazur MSN, RN, FNP-BC

OFFICE NUMBER AND PHONE

Whiting Hall 224 517-796-8483
E-Mail: mazurerine@jccmi.edu

OFFICE HOURS

See instructor's office door for office hours.
Also available by appointment and after class sessions.

COURSE DESCRIPTION

This course prepares students to provide culturally responsive safe, quality, transitional care while utilizing nursing judgement to increasingly complex, critically ill, and/or multiple clients and their families. Clinical experiences designed to reinforce theory are included in both acute care and community settings.

The Clinical Performance Guide will serve as a vehicle to evaluate the student's clinical judgment at the proficient level in order to protect and promote the health of the client. The student should be able to connect the theory taught in class with the clinical picture. The student will demonstrate the ability to interpret assessment and lab findings and taking appropriate action. Students are required to achieve a rating of satisfactory in all categories.

Program Learning Outcomes	Level Learning Outcome	Student Learning Outcome
Upon successful completion of the program, the graduate will:	Upon successful completion of the level, the student will:	Upon successful completion of the course, the student will:
<p>Human Flourishing:</p> <p>Advocate for culturally diverse clients, families, significant others, and members of the healthcare team in ways that promote self-determination, integrity, and ongoing growth as human beings to reach their maximum potential in various healthcare environments throughout the lifespan.</p> <p>Nursing Judgment:</p> <p>a. Make judgments in practice, substantiated with evidence, that integrate nursing science into the provision of safe and quality care that promotes the health of clients throughout the lifespan.</p> <p>b. Demonstrate competency in nursing health care technology and informatics to communicate, manage knowledge, mitigate error, and support organizational reimbursement.</p> <p>Professional Identity:</p> <p>Implement one's role as a nurse in ways that reflect integrity, responsibility, legal and ethical practices, and an evolving identity as a nurse committed to evidence-based practice, caring, advocacy and safe quality care for culturally diverse clients throughout the lifespan.</p>	<p>Human Flourishing:</p> <p>Advocate for culturally diverse, increasingly complex, critically ill and/or multiple clients and their families while providing culturally responsive, evidence-based care in ways that promote self-determination, integrity, and ongoing growth.</p> <p>Nursing Judgment:</p> <p>a. Using the nursing process and evidence-based practice, prioritizes and provides safe, quality, client-centered care for increasingly complex, critically ill, and/or multiple clients.</p> <p>b. Evaluate quality improvement and analysis of aggregate data for the increasing complex, critically ill and/or multiple clients.</p> <p>Professional Identity:</p> <p>a. Integrate legal, ethical and practice standards into the care of increasingly complex, critically ill, and/or multiple clients.</p> <p>b. Transition from the role of student to that of a graduate nurse while developing leadership</p>	<p>Human Flourishing:</p> <p>Assimilate skills to support culturally diverse clients and families to reach their maximum potential while experiencing stress, family crisis, and transitions in the increasingly complex, critically ill, and/or multiple clients.</p> <p>Nursing Judgment:</p> <p>Plan and prioritize safe transitional quality care, utilizing clinical judgment for the increasingly complex, critically ill, and/or multiple clients.</p> <p>Professional Identity:</p> <p>Value a level of professionalism that is congruent with the inherent values, ethics, and behaviors of the discipline of nursing.</p>

<p>Spirit of Inquiry:</p> <p>Evaluate evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for clients throughout the lifespan.</p>	<p>characteristics.</p> <p>Spirit of Inquiry:</p> <p>Translate, question and challenge the status quo of research findings in collaboration with inter-professional healthcare teams to manage increasingly complex, critically ill, and/or multiple clients.</p>	<p>Spirit of Inquiry:</p> <p>Evaluate ongoing evidence-based initiatives in collaboration with inter-professional teams to manage increasingly complex, critically ill, and/or multiple clients.</p>
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Student Learning Outcomes	Behavioral Competencies
<p>Upon successful completion of the course, the student will:</p>	
<p>Human Flourishing:</p> <p>Assimilate skills to support culturally diverse clients and families to reach their maximum potential while experiencing stress, family crisis, and transitions in the increasingly complex, critically ill, and/or multiple clients.</p> <p>Nursing Judgment:</p> <p>Plan and prioritize safe transitional quality care, utilizing clinical judgment for the increasingly complex, critically ill, and/or multiple clients.</p> <p>Professional Identity:</p> <p>Value a level of professionalism that is congruent with the inherent values, ethics, and behaviors of the discipline of nursing.</p>	<p>Human Flourishing:</p> <ol style="list-style-type: none"> 1. Manage and prioritize culturally responsive nursing care to the increasingly complex, critically ill, and/or multiple clients based on present bio-psycho-social-cultural-spiritual situation. 2. Construct a comprehensive plan of care that holistically addresses the needs of the increasingly complex, critically ill client encompassing the impact of illness, hospitalization, and treatment on the family unit. <p>Nursing Judgment:</p> <ol style="list-style-type: none"> 1. Integrate and prioritize individualized care based on evidence. 2. Utilize clinical judgment to direct practice decisions. 3. Utilize professional communication techniques in verbal, written, and electronic formats. <p>Professional Identity:</p> <ol style="list-style-type: none"> 1. Integrate effective legal, ethical, and standards of practice for increasingly complex, critically ill, and/or multiple

<p>Spirit of Inquiry:</p> <p>Evaluate ongoing evidence-based initiatives in collaboration with inter-professional teams to manage increasingly complex, critically ill, and/or multiple clients.</p>	<p>clients.</p> <p>Spirit of Inquiry:</p> <p>1. Question underlying assumptions and the status quo associated with practice decisions and make changes based on evidence for increasingly complex, critically ill, and/or multiple clients.</p>
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PREREQUISITES

- NRS 214 – Medical Surgical 2
- NRS 213 - Pediatrics or NRS 223 Pediatric Nursing Bridge
- NRS 212 – Behavioral Health or NRS 222 Behavioral Health Bridge

LECTURE SCHEDULE (Calendar will be provided to students by week 1)

- Week 1: IV medications, critically ill, central lines, dysrhythmias, hospice
- Week 2: Dysrhythmias, shock
- Week 3: Shock, pacemakers
- Week 4: Organ Failure/renal
- Week 5: Organ Failure/respiratory
- Week 6: Neurological
- Week 7: Neurological, family care

STUDENT RESPONSIBILITIES

A. CLASS REQUIREMENTS

1. Attendance in class is not required, but it is HIGHLY recommended. If a student must be absent, it is the student’s responsibility to obtain all lecture notes and other information shared in class PRIOR to returning to the class. Please note that quiz/tests are given almost every class. **Attendance will be taken each class and logged into JetStream.**
2. Course communications will be made through JetNet and the Jackson College email system. **All students must utilize their JC email when sending email communications to faculty regarding the course and clinical.**
3. Cell Phone and Texting Policy: While the nursing faculty recognizes that communication with family and friends is important, the use of cell phones in class is very distracting to other students and your instructor. Please keep all electronic devices on either vibrate or voice mail mode during class. If you are experiencing a family emergency and must keep a cell phone on, please obtain instructor permission prior to class. We appreciate your cooperating in providing an environment conducive to learning for all students. **Cell phones may not be out during testing or while reviewing an exam. If a student is found to have a cell phone out during testing or during test review the student will receive a zero on the test in question.**

4. Written work should be neatly done using proper grammar, spelling and punctuation, and sentence structure. Written work with three or more spelling errors or with improper sentence structure will be unsatisfactory
5. Reading assignments (text, assigned articles, handouts, etc.) should be read for understanding before coming to class for which they are assigned. Class discussions and group critical thinking exercises will be based on the student coming prepared to class. Students are encouraged to bring questions to class. Some questions, however, will be best answered following lecture because of limited class time.
6. Testing will be done from content objectives found in course learning guides. *Cell phones and apple watches **may not be out** during testing or while reviewing an exam. **If a student is found to have a cell phone out during testing or during test review the student will receive a zero on the test in question.*** Students will be allowed to review the test once testing is complete. Once the review is complete and grades are entered into JetNet the student will not be able to review the test again. Students are required to follow the **Testing Guidelines** posted in this course syllabus.
7. A Standardized Medical-Surgical Test will be given during the course. The student must take the exam and the grade will be counted toward the final course grade.
8. Timed Testing: Students will be given one and a half minutes per questions when taking at test. This means that if the test is 50 questions, there will be 75 minutes to complete the test. If the student comes late when a test is being administered, the student will have the option of taking the test in the Testing Center as defined below in Test Make-Up where it will be timed or taking it in the classroom with the reduced amount of time that is remaining when the student arrives. The reason for this limitation is to prepare the student for the timed NCLEX-RN examination. Students need to learn how to pace themselves as they take a test to ensure that they finish on time.
9. Test Make-Up: A student will be allowed to take a make-up test only 1 time without penalty. If the student is taking a second test outside of the class, 5% will be subtracted from the test score. If the student takes a 3rd test outside of class, 10% will be subtracted from the test as will any further outside of class tests.

Student are strongly encouraged to be present for all tests. Students must call before the test is to be given unless there is an unforeseen event and notify the instructor, they will be absent and acknowledge that they will make up the test. **Unless the student is informed otherwise, missed tests are available for makeup in the JC Testing Center in BW 121 two days after the test was originally scheduled during the JC testing center's open hours.** The student should contact the testing center for open hours before making a trip to the college. The student must make up the test before their next class period unless other arrangements are made.

10. Grading Tests: Students must put all their answers for a test on the scantron sheet unless directed otherwise in the test directions. Only answers on the

scantron will be graded unless directed otherwise. It is important to review the scantron and ensure that all questions have been answered. No adjustments can be given if answers were not recorded as directed. The answer marked on the scantron will be considered the student's final answer. Points will not be given for questions answered on the test booklet correctly and on the scantron incorrectly. Ensure your scantron was marked properly prior to submission. When grading tests, faculty reserves the right to not count questions that they deem are not of good quality. In this situation, all answers will be accepted for the question(s) discarded. No additional point will be given to the student who had the question "right" prior to it being discarded.

11. Students will be required to take a 10-question Dosage Calculation Competency. **The student must achieve a $\geq 90\%$ in order to pass the course.** The student will have a maximum of three attempts, with three different competencies, in order to achieve a $\geq 90\%$. Failure to achieve a $\geq 90\%$ will result in a 1.5 in the course and not progressing to NRS 240. Please see the "Dosage Calculation Competency Requirements" form in course pack.

12. **Academic Integrity and Honesty Policy:**

Nurses are highly regarded as trusted professionals. The JC Nursing Department faculty and staff are committed to the ideals that honesty and integrity are essential qualities for the profession of nursing. At Jackson College each of us has a personal responsibility to strive for veracity, integrity, and trust in our work and relationships.

Academic integrity and honesty are expected of all students. Any student found to be cheating on an exam, quiz, or other assessment will be subjected to corrective action in accordance with the level of infraction as outlined in the Jackson College Nursing Department AAS-N Student Handbook and Jackson College Academic Honesty Policy. Corrective action may include receiving a maximum grade of 1.5 for the course in mention or possibly permanent removal from the program.

CHEATING and serious violation of responsible technology use (see the Social Media/Simulation Lab Policy) can take on many forms. These may include but are not limited to:

- Bringing an answer source to the testing site. This could be a cheat sheet, cell phone, smart watch, etc.
- Copying answers or work from another student's test or project.
- Making copies or taking cell phone pictures of test or course materials including PowerPoint presentations.
- Changing an answer or work after submission.
- Sharing test information, test answers and content with someone who has not yet taken the test.
- Uploading prohibited course materials to any internet site or facilitating others to do so. Periodic audits of the internet are performed. All course materials have been specifically prohibited for distribution by instructors unless specifically indicated otherwise. This includes but is not limited to graded quizzes and exams, group work answers, etc., along with any questions that are or might be intended for future quizzes and exams.
- Unauthorized possession or disposition of academic materials includes the unauthorized selling or purchasing of exams, quizzes, midterm projects, or other academic work; stealing or using another student's work; using information from or possessing exams/quizzes that a faculty member did not authorize for release to students.

- Facilitation of any act of academic misconduct includes knowingly assisting another to commit an act of misconduct; providing others with course materials to be uploaded digitally or to be shared manually.
- Taking quizzes with another student. Quizzes are to be done individually - do not share answers with others in person, through e-mail or on the phone. Sharing answers is considered cheating and will be treated as such.
- Plagiarism is another form of cheating. Plagiarism may involve but is not limited to submitting a paper written by someone else (obtained from the web or a fellow student) or using direct quotes from any source without crediting the source.
- Additional areas of concern specific to nursing include but are not limited to:
 - Covering up or not reporting a clinical error.
 - Charting something complete that was not done.
 - Altering any legal documents.
 - Deviation from an accepted Standard of Care or Standard of Practice.
 - Any form of lying/misrepresentation to faculty, health team members or others.

If a student is unsure if a practice might be considered cheating, he or she is advised to check with an instructor and/or do not engage in that practice.

*THE BEST POLICY IS **ALWAYS** HONESTY AND INTERGRITY*

13. Civility: Students will maintain program civility and respect at all times. This includes the classroom, clinical environments, lab, and anytime outside the learning environment such as individual advising, email, social media, etc.

B. CLINICAL REQUIREMENTS

1. Attendance in clinical is required and is very important. All missed clinical days must be made up. Please refer to the attendance policy in the Nursing Department AAS-N Student Handbook. **IF GREATER THAN 20% OF THE CLINICAL HOURS ARE MISSED, EVEN THOUGH MAKE-UP WORK HAS BEEN DONE, THE STUDENT MUST REPEAT THE COURSE BEFORE CONTINUING IN THE PROGRAM.** The student must satisfactorily complete NRS 230 with a minimum 2.0 grade before progressing to NRS 240 Nursing Capstone.
2. The student is required to call the clinical unit before clinical starts if she/he will be absent or late. Excessive tardiness, defined as being late two times in the clinical area will result in a warning notice as outlined in the Nursing Department AAS-N Student Handbook.
3. The student must come prepared to the clinical area. If the student comes unprepared, she/he will be given a performance notice warning and will be sent home from clinical resulting in an absence that must be made up. If there is an additional incidence, further disciplinary action will be taken as defined in the Nursing Handbook in addition to being sent home from clinical resulting in another absence that must be made up. If there is a third incidence of unsatisfactory clinical preparation, the student will fail the clinical portion of the class.

4. The students should be attired and groomed as defined in the Nursing Department AAS-N Student Handbook. The instructor reserves the right to determine appropriate dress in any given situation based on the uniform policy.
5. The Clinical Performance Guide (CPG) presents all clinical objectives as identified in the clinical evaluation tool in addition to detailing skills and abilities that will further assist the individual student to satisfactorily meet clinical objectives, actively engage in his/her own self-assessment, demonstrate accountability for learning and promote self-growth. The student's weekly recording in the CPG provides both faculty and the student with a method to monitor the student's experience and progression toward meeting clinical objectives. The individual student and faculty will jointly review the student's self-assessment and progress as noted in the CPG in the faculty's evaluation of the student's satisfactory attainment of clinical objectives. Satisfactory (S), Unsatisfactory (U), Not applicable/Not available (NA), with detailed comments will be used as grading criteria.
6. The CPG presents mandatory clinical objectives which the student must satisfactorily attain in order to pass the course. Students will be evaluated according to a satisfactory (S) or unsatisfactory (U) grading criteria. If the clinical objectives are not met, the clinical grade will be unsatisfactory, and the course grade will be a failure of 1.5.
7. **SMOKING POLICY:** Smoking is inconsistent with the health promotion role of nurses. Some patients, students, and faculty suffer from asthma triggered by exposure to third-hand smoke. Third hand smoke has been found to be a cancer risk to others. Please do not come to class or clinical with residual smoke on yourself, clothing, scrubs, or paperwork (as it may be returned for resubmission). Smoking or use of other tobacco products will not be permitted at any time or place during a student's clinical rotation, regardless of the setting. Students who present to the clinical setting smelling of smoke will be sent and be given a written performance notice. Being sent home will be treated as a clinical absence.
8. **CELL PHONE AND TEXTING POLICY:** Cell phone calls and texting are not appropriate in the clinical setting due to the risk of distractors, errors, and HIPAA violations. Unit phone numbers are available in case of emergency.
9. **Written Clinical Assignments**

The student's clinical preparation each clinical week will include:

- Critical Thinking- Prioritization Form with attached PMP/Care Pathway.
- Medication Summary
- Laboratory Summary with abnormal values and relevant normal (including entire ABG, even if part of it is normal)

Each clinical instructor will notify students of the deadline for submission of the clinical paperwork. The weekly paperwork is not graded. It is a tool to help evaluate the student's ability to critically think. The weekly paperwork is required unless alternative assignments are given for the week. Failure to submit the required paperwork will result in a Clinical Performance Notice.

Students will also be required to complete a Clinical Case Study as part of the NRS 230 clinical rotation. Students must achieve a minimum of a 78% on the assignment. Students who fail to complete the assignment or who receive less than the required 78% will receive an unsatisfactory on their CPG which will result in a 1.5 in NRS 230.

10. **AGENCY POLICIES:** It is the student's responsibility to be informed and adhere to agency policies such as student parking, orientation modules, smoking, cell phones, and HIPPA. Failure to follow agency policy can result in the agency prohibiting the student from continuing the clinical experience at said agency. This may result in course failure and/or dismissal from the JC nursing program.
11. Students will be offered off-site observation only experiences in NRS 230. These are **observation only** experiences because there will be no clinical instructor present. Students are prohibited from assessing clients, documenting, passing medications, performing procedures, or offer advice/teaching clients.

INSTRUCTIONAL METHODS

<i>Theory</i>	<i>Clinical</i>
<i>Collaborative/group work</i>	<i>Demonstration</i>
<i>Lecture</i>	<i>Patient care</i>
<i>PowerPoint</i>	<i>Observation</i>
<i>Discussion</i>	<i>Critical Thinking Clinical Forms</i>
<i>Demonstration/Equipment</i>	<i>Concept Maps</i>
<i>Audio Visual materials</i>	<i>Individual conferences</i>
<i>Handouts</i>	<i>Critical Care experience</i>
<i>Assigned and optional readings</i>	<i>Community experiences</i>
<i>Computer simulations</i>	

ADDITIONAL SUPPLIES

Calipers (contained in Health Assessment Nursing Kits).

RECOMMENDED TEXTBOOKS:

Ignatavicius, D.D, Workman, M.L, Rebar, C.R.: Medical-Surgical Nursing: Concepts for Interprofessional Collaborative Care 9th edition. Elsevier.



Electronic versions of textbooks are available

Any EKG book with practice rhythm strips such as Walraven or others.

TEXTBOOK(S) REQUIRED FROM PREVIOUS COURSES

You may utilize your current editions of the following:

An electronic version of the Medical-Surgical textbook is available.

Ackley, Ladwig, Makic, Nursing Diagnosis Handbook.

State Board Review Books of Choice.

Nursing Diagnostic Test Book of Choice.

Nursing Drug Reference Book of Choice.

AVAILABLE LEARNING SERVICES

"Students with disabilities who believe that they may need accommodations in this class are encouraged to contact the Office of Learning Support Services as soon as possible to ensure that such accommodations are implemented in a timely fashion."

The Nursing Laboratory is staffed by faculty that can assist your learning. The hours change each semester but are posted. Tutors are available through Center for Student Success in Bert Walker Hall. See your instructor if you feel this would be helpful for you. The Center for Student Success can help students with academic and personal problems. If you feel the need to talk with the faculty, their office hours are available and posted on their office doors. Keeping communication open assists both student and faculty.

For technical assistance, please contact the Jackson College Solution Center. All technical work requests are initiated through the following venues:

E-mail: jcsolutioncenter@jccmi.edu

Phone: 517.796.8639

Walk-in: Atkinson Hall, Room 203

Graduation Application

Submit your graduation application prior to the due date, preferably before your planned final semester, to ensure that you have all the requirements you need to be on track to graduate. You can download a graduation application from the JC website.

STUDENT EVALUATION CRITERIA

The grade that the student earns will be determined from the examinations, quizzes, and any other assignments that are part of the course. An unsatisfactory performance in either theory or clinical practice will constitute failure in the course. If the failure is in clinical, the student will receive a 1.5 grade that cannot be made up other than by

repeating the entire NRS 230 Medical-Surgical 3 course, class, and clinical subject to the Nursing Department readmission policy.

UNIT EXAMS:	4 Unit Exams
QUIZZES:	One dysrhythmia quiz and 3 Kaplan in-class quizzes will be given
COMPREHENSIVE MED-SURG EXAM:	One comprehensive exam will be given.
MED-SURG: STANDARDIZED EXAM	One MED-SURG STANDARDIZED KAPLAN exam will be given.
OTHER:	Ticket-to-class. See the Nursing Department AAS-N Student Handbook for evaluation behaviors based on the Code of Nursing. The minimal clinical competencies for the course are listed with the Clinical Performance Guide.

GRADING SCALE

The total number of points on the quizzes, examinations or other assignments will be cumulative and a percentage computed to figure the final grade. BUT . . . There will be two scores computed for Medical-Surgical 3, one score based on in-class tests, and then a cumulative grade that includes the tests, quizzes, Med-Surg Standardized exam and any other assignments. The cumulative grade will be the final grade for the class if the student passes the test component. The student must receive an average grade of at least 78% on the tests in order to pass Medical-Surgical 3. If the student receives less than a 78% on the tests or fails to achieve a $\geq 90\%$ on the math competency, she/he will receive a 1.5 grade regardless of the cumulative grade in the course unless the earned cumulative grade is lower than 73% in which case the lower earned grade will be given. This is necessary because it has been shown that students that do not pass tests at this minimal level in the nursing program do not pass the NCLEX examination - the national licensure examination.

The grading scale for the course is as follows:

4.0	94-100%
3.5	90- 93%
3.0	86- 89%
2.5	82- 85%
<u>2.0</u>	<u>78- 81%</u>
1.5	74- 77%
1.0	70-73%
0.5	66-69%
0.0	< 66%

Each test will be graded utilizing the above scale. When calculating final grades if the percentage includes a decimal, 0.5 or more the grade will be rounded up to the next whole number (e.g. 83.5=84). If a decimal grade of 0.4 or less is calculated the grade will be rounded down to the nearest whole number (e.g. 83.4 = 83). If the faculty decides that a test question is not valid, everyone in the course receives one point for that question whether they got the question “right or wrong”. (This is not an additional point if the question was scored as being correct).

MAKE-UP POLICY

Classroom attendance is not mandatory but is HIGHLY recommended. The student is responsible for his or her own learning. If the student must miss or be late to class, it is the student’s responsibility to obtain lecture notes, messages, instructions, handouts, announcements, etc. from a fellow student. The student will be held responsible for all material and information regardless of whether the student was in class. Tardiness to class may mean missing a quiz, or reduced time to take a test.

Students are strongly encouraged to be present for all exams. A student may miss only one test for makeup without point reduction. A student must arrange to take a missed exam before returning to class. A five-percent reduction in the earned grade may be made on a student’s first make-up exam. A ten-percent reduction may be made on the second make-up exam, fifteen percent on the third exam, and so on.

NURSING PROGRESSION POLICY:

See the Nursing Department AAS-N Student Handbook for progression policies. The student must earn a 2.0 grade in Theory and a satisfactory in Clinical to pass the course. Students who withdraw or fail this course cannot progress into NRS 240 Nursing Capstone. Consult the handbook for current Progression/Readmission policy.

Point Summary

Test Component = 80% of total grade

	Possible Points	Your Earned Points	Your Total Points	Total Points Possible	% = Your total earned points/ Total points possible
Test 1	50			50	
Test 2	50			100	
Test 3	75			175	
Test 4	75			250	

78% average required on above testing component to pass course.

Other Components = 20% of total grade

Kaplan Standardized Med-Surg Exam is worth 10% of grade					
Kaplan Standardized Med-Surg Exam	25			275	
Quiz, Med-Surg Comp Quiz, Kaplan quizzes, Ticket to class is worth 10% of grade					
Dysrhythmia Quiz	5			280	
Med-Surg Comprehensive Exam	20			300	
Kaplan Quizzes (3 – 5-point quizzes)	15			315	

Ticket-to-Class	5			320	
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78% average required on overall course grade to pass course.

All students are required to pass a Dosage Calculation Competency with a passing score of $\geq 90\%$ to pass NRS 230 and progress to NRS 240.

Students are required to maintain current documentation of CPR/TB/Immunizations prior to clinical in the nursing office to avoid a 3% reduction in the total grade in NRS 230. It is the student's responsibility to maintain these records without reminders from faculty.

NRS 230 MEDICAL SURGICAL 3 CLINICAL GUIDELINES

GOALS:

- 1) Clinical nursing experiences in NRS 230 Medical Surgical Nursing 3 provide instructor supervised care for patients who have increasingly complex needs.
- 2) Students will administer specified IV fluids/medications with instructor supervision (see IV guidelines for further details).
- 3) Students will develop ability to manage RN care responsibilities progressing from two to three patients. As the course progresses and the number of assigned patients increases, the goal for the student is to manage more of the responsibilities of the RN role for several patients. Students will communicate with staff team members during daily report exactly the nursing care interventions they will provide for each one of their patients, including ADLs, AM/HS care, medications, types of IV fluids and medications, assessment/charting.

The student will:

- Obtain patient report and discuss with patient's RN the student's specific care responsibilities for the patient, especially documentation, medication administration, nursing procedures, and AM/HS care. Other team members should also be aware of the student's role. (If the student is unable to complete any patient care item the RN/team members should be informed immediately so the care may be reassigned and completed).
- Provide designated care for two patients first week, progressing up to three patients as clinical weeks progress.
- Administer oral and injection medications with instructor supervision. All insulin must be double checked and co-signed on the medication record per hospital policy. Coumadin is double checked also after PT/INR values are reviewed.
- Administer IV fluids/medications specified in IV guidelines with instructor supervision. Provide care for central IV lines.
- Perform nursing procedures with instructor supervision such as urinary catheters, nasogastric tube insertion, drain removal, and complex dressings.
- Complete charting as instructed before leaving unit.
- Report off to RN on unit whenever leaving unit such as breaks, conferences and at the end of the shift.

Students will NOT:

- ◆ Obtain or administer blood or blood products.
- ◆ Administer IVs other than those specified in IV guidelines.
- ◆ Give IV push medications or administer chemotherapy as specified in IV guidelines.
- ◆ Witness legal documents per hospital policy.
- ◆ Call physicians, take or note physician's orders.

NRS 230 Clinical IV Administration Guidelines

1. **WITH INSTRUCTOR PRESENT**, may hang peripheral IV bulks without added medication and IVPB antibiotics after reviewing appropriate lab tests. Students may administer antibiotics IVP with instructor present. These will be co-signed by the client's RN.
2. **WITH INSTRUCTOR PRESENT**, may do normal saline flush or heparin flush.
3. **WITH INSTRUCTOR PRESENT**, may hang CPN, PPN, lipids, heparin infusion, and insulin infusion which will be co-signed by the client's RN.
4. Central Lines: **WITH INSTRUCTOR PRESENT** for ALL care of central lines, may hang IV bulks and antibiotics for central lines, flush lines with normal saline and/or heparin, and change dressings. Will NOT give IV push medications through central lines.
PICC Lines: Will **not** change dressings or remove PICC lines.
5. Will **NOT** hang, regulate pumps, or titrate IVs containing narcotics, potassium IVPBs, chemotherapy, dopamine, dobutamine, Cardizem, nitroglycerin, or any other serious IV medication.
6. Will **NOT** administer IV push medications.
7. Will **NOT** change PCA medication or reprogram PCA pumps. May do history recall with supervision of instructor/nursing staff to document client usage of medication.
8. Will **NOT** hang epidural solutions or reprogram epidural pumps.
9. Will **NOT** obtain or administer blood or blood products.

NRS 230 Critical Care Medication Administration Guidelines

- Students may pass medications **with instructor and/or RN present** – never alone.
- RN assigned to patient

- Will be informed of any medications being given prior to administration.
- Will be told at the time of occurrence if a medication is being held and rationale.
- Will be told if a medication issue arises, so RN is kept informed at all time of patient's medication status.
- Students under the direct supervision of an instructor – never alone – may give only these IV push medications:
 - Normal Saline flush
 - Heparin flush

Peripherally:

- Bumex (bumetanide)
- Lasix (furosemide)
- Solu-cortef (methylprednisolone)
- Solu-medrol (hydrocortisone sodium succinate)
- Protonix (pantoprazole)
- Pepcid (famotidine)
- Antibiotics
- Students **will NOT** give IV push narcotics or other medications as listed in the general IV guidelines.

NRS 230 **Dosage Calculation Competency Requirements**

INTRODUCTION:

One of the most important nursing skills to master is safe and accurate administration of patient medications. **Students are expected to have the prior knowledge of essential basic math skills** needed for accurate calculation of medicine dosages. All nursing students should be able to confidently:

- Compute arithmetic for medical dosage calculations including but not limited to:
 - Converting fractions to decimal numbers
 - Converting decimal numbers to fractions
 - Rounding decimal numbers to fractions
 - Rounding decimal numbers for medications and desired number of places e.g., nearest whole number, tenths, or hundredths
 - Multiplying and dividing fractions
 - Simplifying fractions
 - Proper use of zeros – (**placement zeros but NO trailing zeros i.e. 0.5 no .5**)

It is the **STUDENT'S RESPONSIBILITY** to seek the needed remediation if necessary. Support services include those of the JC Center for Student Success, nursing tutor (if one is available), on-line resources, and fellow classmates. Students are expected to be

able to **accurately and confidently compute** the following types of medication problems:

- Calculating dosages using a label
- Reading and measuring dosages on an intramuscular, tuberculin, and/or insulin syringes
- Calculating flow rates and durations of enteral infusions (volume divided by infusion time)
- Calculating safe dosages, minimum, maximum, and recommended dosages [mg/kg]
- Converting within and between metric and household units using one and/or two step conversions
- Calculating two medication dosages and combining the medications into the same syringe
- Calculating dosages for parental medications.
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DIMENSIONAL ANALYSIS:

Students will be required to show all work.

ROUNDING NUMBERS - GENERAL GUIDELINES:

- Quantities > 1 are rounded to the nearest tenth
- Quantities < 1 are rounded to the nearest hundredth
- Drops are rounded to the nearest whole number as drops cannot be split (5 or higher round up i.e. 26.6 gtt/min = 27 gtts/min)
- Intravenous solutions are delivered in drops per minute or mL/hr on a pump
- Round adult weight to the nearest whole number unless otherwise indicated
- Oral medications are poured to the exact amount ordered, may need to use a syringe

ABBREVIATION GUIDELINES:

- Metric abbreviations are always singular
- No period after metric abbreviations except if it falls at the end of a sentence
- Nurses must master and become comfortable using approved abbreviations and metric units employed in medication administration to ensure patient safety
- Included in this handout is a reference list of common abbreviation and equivalents used in medication administration

EQUIVALENTS:

Students are required to know the most common conversions in order to accurately complete medication problems. Below are some common conversions that will be used in the dosage competency. This is not an all-inclusive list.

- mcg \leftrightarrow mg \leftrightarrow g
- kg \leftrightarrow lb
- mL \leftrightarrow oz \leftrightarrow tsp \leftrightarrow tbsp.
- mL \leftrightarrow micro/macro drops
- mL \leftrightarrow L
- mg \leftrightarrow mcg
- cup \leftrightarrow oz \leftrightarrow mL

EVALUATION:

- The student will take a 10-question dosage calculation competency the first week of class.
- Each question will be worth 1 point apiece. No partial credit will be given.
- The competency will be graded within the first week of class.
- The instructor will provide rounding directions for each question.
- **A ≥90% or greater mastery is required.** Students who do not pass the first attempt with a 90% must retake the competency on another day in the testing lab. It is in the student's best interest to prepare as needed!!!
- Students who do not successful pass the first competency attempt will need to make an appointment with faculty to review the competency.
- ALL students are required to successfully complete the dosage competency with a score of **≥90%** by the **end of the 6th week** of class.
- The Dosage Competency **must** be successfully completed in three attempts or the student will earn a 1.5 in NRS 230 and not progress to NRS 240.

Metric Equivalents	Metric	Household
1000 mcg = 1 mg	5 mL	1 teaspoon
1000 mg = 1 g		3 teaspoons = 1 tablespoon
1000 g = 1 kg	15 mL =	1 tablespoon = ½ ounce
	30 mL =	2 tablespoons = 1 ounce
	240 mL =	1 cup = 8 ounces
	500 mL=½ L =	1 pint
	1000 mL = 1 L =	1 quart = 32 ounces
Weight 2.2 lb = 1 kg		
Macro drop = 1 mL = 10 gtts/min		
Micro drop = 1 mL = 60 gtts/min		

Web References:

*****Math MagicFor Meds** – Go to:<http://www.edgt.com/> and register ☞ **your student access key is: S-LE-1045-1247**
<http://www.dosagehelp.com/>
http://ratguide.com/meds/reference/conversions_and_calculations.php
<http://www.ismp.org/tools/abbreviations/>

Jackson College Nursing Department Testing Guidelines for Students

1. All student possessions (backpacks, cell-phones, water bottles, hats, etc.) must be left at the front or sides of the room – not under individual desks or tables.
2. Students are not permitted to sit at their desk with notes prior to the test. Any last-minute studying must be conducted outside the classroom.
3. The student may have only a pencil, scrap paper, simple calculator with no memory (if warranted) and earplugs as warranted by faculty. Watches and cell phones are not allowed.
4. Once class begins, students are not permitted to sit at their desk with class notes and or text prior to the test. Last minute studying or review must be conducted outside the classroom.
5. Students are not allowed to remove any testing material from the testing/classroom.
6. If a student must take an exam at a different time than the rest of the class due to an illness or emergency, a different exam is given.
7. Bathroom breaks will not be permitted during any exam or quiz.
8. There will be no discussion of test items between the student and faculty on the day of the test.
9. Students who disagree with the answers may complete a Student Test Item Query form to explain their rationale for their chosen answer. These forms will be submitted the faculty for consideration.
10. Students will be given 1.5 minutes per test item.
11. Students must pass a Dosage Calculation Competency at 90% within three attempts. Failure to obtain 90% results in failure of the course.

NCLEX-RN TEST PLAN LAB VALUES – PLEASE MEMORIZE
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***Students will not be given normal values on NRS 230 exams for the labs listed. ***

ABG's

pH	7.35 – 7.45
pCO ₂	35 – 45
HCO ₃	22 -28
pO ₂	80 – 100
O ₂ Saturation	95 – 100%

CBC

Hematocrit	Males 42% - 52% Females 37% - 47%
Hemoglobin (Hgb)	Males 14 – 18 Females 12 – 16
White Blood Count (WBC)	5,000 – 10,000
Platelets	150,000 – 400,000

Clotting Studies

INR (Coumadin)	Therapeutic 2.0 – 3.0
Prothrombin Time (Coumadin) normal)	11.0 – 12.5 seconds (therapeutic 1.5 – 2 times normal)
PTT (Heparin)	60 – 70 seconds (therapeutic 1.5 – 2 times normal)
APTT (Heparin)	30 – 40 seconds (therapeutic 1.5 – 2 times normal)

Electrolytes

Sodium (Na ⁺)	135 – 145
Potassium (K ⁺)	3.5 – 5.0

Renal

Serum Creatinine	0.6 – 1.5
Blood Urea Nitrogen (BUN)	10 – 20

Total Cholesterol < 200

Glucose 70 - 105

HgbA_{1c}

Non-diabetic 2.2 – 4.8

Good Diabetic control 2.5 – 5.9

PAIN MANAGEMENT GUIDELINES

Pain Assessment – The Fifth Vital Sign

1. Always have a baseline pain assessment. Assess pain at beginning of shift, with vital signs and according to client condition. Document pain assessment.
2. Anticipate need for frequent assessment for client who may be newly post-op or who have a painful condition (i.e. cancer, fracture, pancreatitis).
3. Recognize that clients with dementia experience pain and require and Deserve pain relief. Utilize dementia appropriate methods of pain assessment for clients with dementia who are unable to rate their pain.
4. Assessment must include:
 - a. Pain rating by the client. Call the pain a number 0 – 10.
 - b. Sedation level
 - 1 = wide awake
 - 2 = drowsy
 - 3 = dozing intermittently
 - 4 = difficult to arouse
 - 5 = unable to arouse
5. Pain rating and sedation levels must be documented prior to and one hour after medication administration for pain.
6. Assessment should include if client is opioid naïve vs. opioid tolerant.

Pain Medication Administration

1. **Start low and go slow but GO!** Opioid induced respiratory depression is rare if opioids doses are titrated slowly and decreased when increased sedation is detected.
2. Pain free or a pain score of “0” is not the primary goal of pain management. Rather pain is managed so the client is comfortable and can function. On admission the client’s pain score goal should be determined with the client and documented.
3. Be aware of co-existing client conditions (i.e. renal and liver impairment) or Other CNS depressants the client may have received that may influence pain medication effects.
4. Know medication route, onset, peak, and duration to avoid under or overmedication.

COURSE SYLLABUS ATTESTATION FORM
NRS 230 Medical Surgical 3

Name (Please Print): _____ Date: _____

Please Check All That Apply:

- I have read the complete syllabus, weekly schedule and reviewed all resource materials for NRS 230 including the Dosage Calculation Competency Requirements and the Nursing Department Testing Guidelines for Students.
- I have reviewed the NRS 230 Clinical Guidelines as well as the IV Administration Guidelines and Critical Care Medication Administration Guidelines.
- I understand that off-site clinical experiences are observation only experiences. If I participate in client care during the off-site experiences without a clinical instructor present it may result in failure of NRS 230 clinical which will result in failure of NRS 230.
- I understand that it is my responsibly to maintain updated records of immunizations and BLS certification. Failure to comply with the health care requirements may result in an unexcused clinical absence and possible failure of the course. Failure to submit the required documents at the beginning to each semester will result in a 3% deduction in the final course grade.
- I have reviewed the JC Nursing Department AAS-N Student Handbook Simulation & Social Media Policy as it relates to this course. I will adhere to the guidelines for Responsible Use of Technology at Jackson College at all times while I am a student of the nursing program. **I understand if I violate these policies I may be dismissed from the course/and or/ nursing program.**
- I understand that all types of electronic devices may not be appropriate at certain times within this course and that it is not permissible to take photos of any course PowerPoints, or any other form of lecture/online materials without expressed permission from my instructor. Failure to abide by this policy may result in dismissal from the course. No exceptions!!
- All my questions related to course resources have been answered at this time.

I understand the information contained within the resources checked and will adhere to any additional course, JC Nursing Department and, or College policies not mentioned in this document that may apply to my status as a student in NRS 230.

Signature: _____ Date: _____
[Please sign and return to your instructor by the first week of class.]

Reviewed/Revised; E. Mazur: 8/2019

