



A POLYTECHNIC INSTITUTION

School of Health Sciences

Program: Bachelor of Technology in Nursing

Option:

NURS 1020**Clinical Techniques 1 – Laboratory****Start Date:** January, 2004**End Date:** May, 2004**Total Hours:** 51 **Total Weeks:** 17**Term/Level:** 1 **Course Credits:** 3.5**Hours/Week:** 3 **Lecture:** 1 **Lab:** 2**Shop:** **Seminar:** **Other:****Prerequisites****Course No.** **Course Name**

None

NURS 1020 is a Prerequisite for:**Course No.** **Course Name**

NURS 2020 Clinical Techniques 2 – Laboratory

NURS 2030 Nursing Practicum 2

NURS 1020 is a Corequisite for:

NURS 1030 Nursing Practicum 1

■ Course Description

This course presents basic nursing skills related to hygiene, touch therapies and therapeutic touch, movement and rest, feeding, oxygen use, voiding, bowel care, and oral and topical medications. **Emphasis** is placed on student understanding of the purpose of the skill, focused assessment related to the skill, as well as the safe and confident performance of the skill. The communication and research aspects of the skills are also included. Student independent and laboratory practice, demonstrations and examinations are part of the course.

■ Detailed Course Description

Clinical Techniques 1 — Laboratory facilitates student learning of particular hands-on nursing skills used in professional nursing practice.

■ Evaluation

Multiple choice exam (midterm)	30%	<ul style="list-style-type: none"> Students must achieve a 50% average between the two multiple choice exams in order to achieve credit for this course. All assignments must be completed to achieve a passing grade.
Multiple choice exam (final)	30%	
Skill demonstration	20%	
Research activity	20%	
TOTAL	100%	

■ Course Learning Outcomes/Competencies

Upon successful completion, the student will be able to:

1. prepare a focused assessment of the patient related to the skill.
2. describe the safety principles for all hands-on nursing skills.
3. describe the purpose of the skills to the patient.
4. demonstrate selected skills safely and confidently while maintaining patient comfort.
5. demonstrate the communication aspects of hands-on nursing skills.
6. demonstrate responsibility for attaining and maintaining a safe level of skill performance.
7. think and reflect about nursing skills by:
 - 7.1 demonstrating awareness of the research base associated with the skills.
 - 7.2 recognizing the real potential risks associated with the skills.
 - 7.3 making judgements about the skill considering the context.

■ Process Learning Threads

This course facilitates student growth in relation to these graduate outcomes.

Professionalism: Students begin to develop an understanding of the professional nurse's role regarding technical skills. They keep standards of practice in mind for all skills.

Communication: Students thoughtfully discuss clinical techniques verbally and in writing. They dialogue with colleagues and teachers in the process of learning. They learn to share information about skills with people.

Systematic Inquiry: Students think and reflect about nursing skills appreciating the research base, recognizing the real and potential risks associated with the skills and making judgments about the skill considering the context. Students learn to critique research on technical skills and develop a poster explaining their critique.

Professional Growth: Students take responsibility for their learning and for preparing information for classes that is accurate and relevant. They take responsibility for attaining and maintaining a safe level of skill performance. Also, they are responsible and accountable for their actions.

Creative Leadership: Students identify agency policies for technical skills prior to performing them. They are able to set priorities for technical skills and become confident in performing them. They understand the safety aspects of technical skills so can identify when they should not be performed.

Technical Skills: Students anticipate skills to be performed and prepare and organize themselves to perform them. They maintain patient and own safety when performing skills. The specific skills included are:

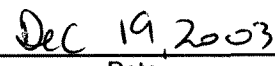
- medical asepsis, universal precautions, assistive devices, restraints.
- feeding, mouth care, special mouth care, oral suctioning, dental care.
- body mechanics, transfers.
- hygiene — bed bath, perineal care, catheter care, condom care, bedpans, urinals, incontinent briefs.
- bed making, back massage.
- positioning, hazards of immobility, range of motion, transparent clean dressings.
- medications — oral medications, topical medications, inhaled medications, anorectal interventions, oxygen therapy.
- collection of samples, intake and output.
- therapeutic touch.

■ **Verification**

I verify that the content of this course outline is current.

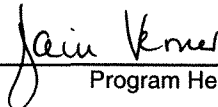


Authoring Instructor

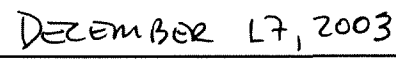


Date

I verify that this course outline has been reviewed.

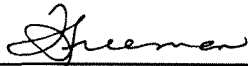


Program Head/Chief Instructor

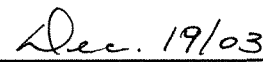


Date

I verify that this course outline complies with BCIT policy.



Dean/Associate Dean



Date

Note: Should changes be required to the content of this course outline, students will be given reasonable notice.

■ Instructor(s)

Connie Evans	Office Location: SE 12-418	Office Phone: 604-432-8687
	Office Hrs.: See posted hours at desk	E-mail Address: connie_evans@bcit.ca

■ Learning Resources

Required:

1. A clinical skills text.

Perry, A.G., & Potter, P.A. (Eds.). (2002). *Clinical nursing skills and techniques* (5th ed.). St. Louis: Mosby, Inc.

2. Registered Nurses Association of British Columbia. (March, 2003). *Administration of Medications*.

Optional:

1. A math for medications book.

Buchaolz, S., & Henke, G. (2003). *Henke's med-math: Dosage calculations, preparation and administration* (4th ed.). Philadelphia: J.B. Lippincott Co.

Supplemental:

The following textbooks are compulsory for other courses but will be used as a supplement to NURS 1020.

1. Jarvis, C. (2003). *Physical examination and health assessment* (4th ed.). Philadelphia: Saunders.

2. A medical-surgical nursing text.

Black, J.M., & Matassarin-Jacobs, E. (2001). *Medical-surgical nursing: Clinical management for continuity of care* (6th ed.). Philadelphia: Saunders.

3. A medical dictionary.

4. Wilson, D.D. (1999). *Nurses guide to understanding laboratory and diagnostic texts*. Philadelphia: Lippincott.

Recommended:

Gulinick, M., et al. (2003). *Nursing care plans: Nursing diagnosis and intervention* (5th ed.). Philadelphia: Lippincott.

■ Information for Students

Assignments: Late assignments, lab reports or projects will **not** be accepted for marking. Assignments must be done on an individual basis unless otherwise specified by the instructor.

Makeup Tests, Exams or Quizzes: There will be **no** makeup tests, exams or quizzes. If you miss a test, exam or quiz, you will receive zero marks. Exceptions may be made for **documented** medical reasons or extenuating circumstances. In such a case, it is the responsibility of the student to inform the instructor **immediately**.

Ethics: BCIT assumes that all students attending the Institute will follow a high standard of ethics. Incidents of cheating or plagiarism may, therefore, result in a grade of zero for the assignment, quiz, test, exam or project for all parties involved and/or expulsion from the course.

Attendance: The attendance policy as outlined in the current BCIT Calendar will be enforced. Attendance will be taken at the beginning of each session. Students not present at that time will be recorded as absent.

Illness: A doctor's note is required for any illness causing you to miss assignments, quizzes, tests, projects or exam. At the discretion of the instructor, you may complete the work missed or have the work prorated.

Attempts: Students must successfully complete a course within a maximum of three attempts at the course. Students with two attempts in a single course will be allowed to repeat the course only upon special written permission from the Associate Dean. Students who have not successfully completed a course within three attempts will not be eligible to graduate from the appropriate program.

Course Outline Changes: The material or schedule specified in this course outline may be changed by the instructor. If changes are required, they will be announced in class.

Note:

1. Course delivery and evaluation methods will be discussed during the first week of the class.
2. Clinical techniques will be practiced during laboratory periods and tested at specific times on the class schedule. These are noted on the class schedule.
3. Unforeseeable circumstances may necessitate the alteration of course content, sequencing, timing or evaluation. As much as possible, students will be given adequate notice of such changes.

Participation/Attendance

1. Regular attendance in lecture, seminars and laboratory periods is required of all students. If a student is absent **for any cause other than illness** for more than **ten percent (10%)** of the time prescribed for any subject, he/she may be prohibited from completing the course (4.07.10 BCIT Policy Manual).
2. If a lecture and/or laboratory period is missed, the student is responsible for the content of the class. The skill must be learned and practiced **prior** to performing the technique in the clinical area. **The student must discuss with the course instructor how he or she plans to learn this content.** This must be completed within a week. You will be expected to perform this skill in the clinical area ASAP. Your clinical instructor will be notified about your plan.

■ Assignment Details

1. Students must achieve a 50% average between the midterm multiple choice exam and the final multiple choice exam in order to achieve credit for the course.
2. The skill testing demonstration is worth 20% of your final grade. Your demonstration of specific techniques will be graded satisfactory/unsatisfactory according to criteria on a checklist. The skill testing will be broken down into two parts. Part 1 will be 5% of your overall mark. If you meet all the criteria, you will receive 5%. There will be no opportunity to retake Part 1. Part 2 of the skill testing will be 15% of your overall mark. If you meet all criteria you will receive a satisfactory and be granted 15%. One opportunity to retake this test will be offered. If the second demonstration is satisfactory, the student will be awarded 7%. If neither the first nor the second demonstration is satisfactory, the student will receive 0%. For all techniques demonstration tests, you will be asked to perform the technique as well as answer questions about the particular technique being demonstrated. Therefore, Part 1 for 5% and Part 2 for 15% are worth a total of 20% of your final grade.

■ Assignment Details (cont'd.)

3. Research Activity

After identifying a *clinical technique* or related issue to a *clinical technique* taught in NURS 1020, investigate current knowledge, thinking and research significant to this technique or related issue. Conduct your investigation by:

- reviewing current research literature.
- comparing nursing textbook information with research reported in nursing journals.
- reviewing appropriate hospital documents, e.g., policy and procedure manuals.
- reviewing RNABC discussion papers.
- interviewing a practicing nurse and/or client.

By following these steps you should be able to locate a research article related to your topic of interest.

Ask a question such as “Does a back rub before bedtime promote relaxation and consequently induce sleep?”

Expectations and Evaluation Methods

Once you have chosen a research article, you are ready to go on to the following.

1. You are to analyze the research article by looking at the critical components essential to a research study. These criteria will be discussed in class.
2. You are to convey your research findings to your classmates in a **poster** presentation format. It must meet the recommended criteria for a poster presentation.
3. Each group will have 15 minutes to complete their presentation.
4. You **must** submit a reference list. All printed and oral (interviewee) sources of information must be acknowledged and included in your reference list by the assignment deadline.
5. A class day will be scheduled for students to present and share information about the research topic. Faculty and students from the other levels will be invited to attend.
6. This research assignment is worth 20% of your final grade.
7. The grading of this assignment will be the responsibility of you and your clinical techniques instructors.

Evaluation of Research Assignment

1. You will work in groups of 3–4 students from the same set to complete this assignment.
2. Marks are assigned based on three criteria. The distribution of marks is outlined for you. A more detailed outline will be provided during class time.
3. Your clinical techniques instructors will grade the assignment.

Assignment Details (cont'd.)

A. Content

Content presented should reflect the thinking of a beginning researcher. The thinking shows familiarity with the research process. A question or problem is clearly identified and is relevant to nursing practice. It should describe the sample studied, the method and tools used and a data analysis. A summary and conclusion should be clearly stated. Implications of research findings for nursing practice are identified and discussed. Ideas for further research are identified.

B. Organization

The research study must relate to the skills you have learned in this course. Information is presented in a logical and orderly manner. A systematic approach to gathering evidence is evident. Language used is clear and precise, condensed and is free of jargon, vagueness and ambiguity. Research nursing and medical terms are defined for the audience (Level 1 Nursing students). ***A reference list must be submitted along with a copy of the research paper which is to be left beside the poster.*** APA style of referencing is utilized.

C. Creativity

Creativity refers to the visual impact the poster elicits. The research findings should be presented in an interesting, stimulating and thought-provoking manner.

4. Students may request one review of their assignment mark. This may involve a meeting with the instructors and students involved in the assignment.

Schedule

Week of/ Number	Indicators/Material Covered	Reference/Reading
Jan. 8 Week 1	<p>Introduction to Clinical Techniques 1</p> <ul style="list-style-type: none"> Overview of course content, course outcomes, relevant process threads Discussion of course delivery methods Discussion of course requirements and evaluation methods <p>Concept and Principles of Medical Asepsis</p> <ul style="list-style-type: none"> Hand washing Clean gloving Gowning <p>Standard Precautions (Routine Precautions)</p> <ul style="list-style-type: none"> Universal precautions Body substance precautions Modes of transmission <p>Assistive Aids and Devices</p> <ul style="list-style-type: none"> Transfer belt for assisting patients to walk crutches canes walkers <p>Restraints</p> <ul style="list-style-type: none"> Chemical Physical Environmental Alternatives to restraints 	<p>Readings: Nursing Fundamentals text</p> <p>Article: (Library reserve) Benner, P. (1982). From novice to expert. <i>American Journal of Nursing</i>, 82(3), 402–407.</p> <p>Borton, D. (1997). Isolation precautions: Clearing up the confusion. <i>Nursing97</i>, 27(1), 49–51.</p> <p>Brown, B. (1999). VRE & MRSA: Putting bad bugs out of business. <i>Nursing Management</i>, 30(6), 42–43.</p> <p>McConnell, E.A. (1999). Proper hand-washing techniques. <i>Nursing99</i>, 29(4), 26.</p> <p>McConnell, E.A. (1996). Applying wrist restraints. <i>Nursing96</i>, 26(1), 28.</p> <p>Metules, T.J. (2000). Tips for nurses who wash too much. <i>RN</i>, 63(3), 34–37.</p> <p>Napierkowski, D. (2002). Using restraints with restraint. <i>Nursing2002</i>, 32(11), 58–62.</p> <p>Parini, S., & Myers, F. (2003). Keeping up with hand hygiene recommendations. <i>Nursing2003</i>, 33(2), 17.</p> <p>In Class:</p> <ul style="list-style-type: none"> Video – Handwashing (Library copy) <p>Practice Activities: During this session you will practice hand washing, clean gloving and gowning, and utilizing assistive devices and restraints.</p> <p>Next Week in Practicum: Locate and read your practicum areas infection control policy.</p>

Week of/ Number	Indicators/Material Covered	Reference/Reading
<p>Jan. 15</p> <p>Week 2</p>	<p>Feeding</p> <ul style="list-style-type: none"> • Nutritional intake/Types of diets • Measuring and monitoring intake • Feeding techniques <ul style="list-style-type: none"> – Dysphagic patient – Deficits such as blindness – Confused patient <p>Mouth Care</p> <ul style="list-style-type: none"> • Routine mouth care • Special mouth care • Oral suctioning related to mouth care (Yaunker or Tonsillar suctioning using clean technique) • Denture care 	<p>Readings: Nursing Fundamentals text</p> <p>Articles: (Library reserve) Helping patients with dysphagia eat. (2003). <i>Nursing2003</i>, 33(5), 68. As cited from: Nutrition Made Incredibly Easy. (2003). Lippincott, Williams & Wilkins.</p> <p>Hineman, M., Anderson, C., & Hardy, J. (1996, November). <i>Self-learning package: Dysphagia nursing assessment</i>. Royal Columbian Hospital.</p> <p>Lugger, K.E. (1994). Dysphagia in the elderly stroke patient. <i>Journal of Neuroscience Nursing</i>, 26(2), 78–84.</p> <p>Sternberg, S. (1998, April 15). Your dirty mouth could be killing you. <i>The Province</i>, .</p> <p>Oral Hygiene Protocols – VHHSC – UBC. (1997). Standard Hospital Diets.</p> <p>In Class: Assignment: Lecture Complete the three scenarios prior to class. Video – Mouth Care</p> <p>Practice Activities: In groups of two, you will brush each other's teeth. Please bring your toothbrush and toothpaste. Three different clinical scenarios present opportunities to perform focused assessments and feed patients with various disabilities. Come prepared to play the role of the patient as well as the nurse.</p>

Week of/ Number	Indicators/Material Covered	Reference/Reading
Jan. 22 Week 3	Mobility <ul style="list-style-type: none"> • Concepts and principles of mobility • Body mechanics • Criteria to assess in a patient before transferring • Moving patient up in bed • 1-person pivot transfer • 2-person front and back transfer • Bed to stretcher • Assist to sitting position – dangling 	Readings: Nursing Fundamentals text Articles: (Library reserve) Goodridge, D., & Laurila, B. (1997). Minimizing transfer injuries. <i>Canadian Nurse</i> , 93(7), 38–41. McConnell, E. (2002). Using proper body mechanics. <i>Nursing2002</i> , 32(5), 17. In Class: Video – Transfers and Lift Techniques Practice Activities: In groups of three, you will practice and evaluate partner's performance with mobilizing patients, and maintaining proper body mechanics.

Week of/ Number	Indicators/Material Covered	Reference/Reading
Jan. 29 Week 4	<p>Positioning</p> <ul style="list-style-type: none"> • Dorsal recumbent (supine) • Lateral • Semi-prone • Fowler's <ul style="list-style-type: none"> – Semi-Fowler's (45–60°) – High Fowler's (> 60°) • Prone <p>Hazards of Immobility</p> <ul style="list-style-type: none"> • Clean dressing changes (transparent dressings for Stage I and II decubitus ulcers) <p>Range of Motion Exercises (ROM)</p> <ul style="list-style-type: none"> • Passive range of motion exercises • Active ROM exercises 	<p>Readings: Nursing Fundamentals text</p> <p>Articles: (Library reserve) Ayello, E.A. (2003). Predicting pressure ulcer sore risk. <i>MEDSURG Nursing</i>, 12(3), 197–198.</p> <p>Perry, P., & Potter, A. (1997). <i>Canadian fundamentals of nursing</i> (4th ed.), (p. 984). St. Louis, Missouri: Mosby.</p> <p>Russell, L. (2002). Pressure ulcer classification: Defining early skin damage. <i>British Journal of Nursing</i>, 11(16), S33–S41.</p> <p>Smith, S., Duell, D., & Martin, B. (2000). <i>Clinical nursing skills – Basic to advanced skills</i> (5th ed.), (pp. 276–278 and 256–257). Uppersaddle River, New Jersey: Prentice Hall.</p> <p>US Department of Health and Human Services. (1992). <i>Clinical practice guidelines – Pressure ulcers in adults: Prediction and prevention</i> (p. 8). Rockville, MD: Public Health Service: The Benjamin/Cummings Publishing Company.</p> <p>Williams, L. (2003). Pressure ulcers: Case study and lessons learned. <i>Nursing Homes Long Term Management</i>, 52(1), 64–65.</p> <p>Practice Activities: In groups of two, you will practice passive ROM exercises and place your partner in the five positions. You will also apply a clean dressing to your partner's hand.</p>

Week of/ Number	Indicators/Material Covered	Reference/Reading
Feb. 5 Week 5	<p>Hygiene Practices Bed bath (complete or partial)</p> <ul style="list-style-type: none"> • Tub bath • Eye care • Hair care • Nail care • Shaving • Perineal care • Catheter care • Condom care • Bedpans, urinals, incontinent briefs <p>Touch Therapy</p> <ul style="list-style-type: none"> • Back massage <p>Occupied Bed Making</p>	<p>Readings: Nursing Fundamentals text</p> <p>Articles: (Library reserve) McConnell, E. (2001). Applying a condom catheter. <i>Nursing2001</i>, 31(1), 70. Poznaski-Hutchinson, C. (1999). Healing touch: An energetic approach. <i>American Journal of Nursing</i>, 99(4), 43–48. Skewes, S.M. (1997). Bathing: It's a tough job. <i>Journal of Gerontological Nursing</i>, 23(5), 45–49.</p> <p>Practice Activities: Come prepared to practice a bed bath and making an occupied bed. A scenario involving catheter care will be set up.</p>
Feb. 12 Week 6	No NURS 1020 class due to Assessment Skill Performance Testing.	

Week of/ Number	Indicators/Material Covered	Reference/Reading
Feb. 19 Week 7	<p>Common Hour</p> <ul style="list-style-type: none"> • Midterm Multiple Choice Exam Place SE 12–412 and 416 <p>Medications Part 1</p> <ul style="list-style-type: none"> • Legal aspects of drug administration • Foundations for administering medications <ul style="list-style-type: none"> – Medication orders – Medication knowledge and calculations – Focused assessment – Medication preparation, e.g., 3 checks – Health protecting strategies, e.g., 7 rights – Documentation (Chart, MAR) • Administering oral medications 	<p>Readings:</p> <ul style="list-style-type: none"> • Nursing Fundamentals text • Henke pp. 79–84 • BCIT student policies related to medication administration • RNABC. (2003, March). Administration of Medications. <p>Article: (Library reserve) Ignatavicius, D.D. (2000). Asking the right questions about medication safety. <i>Nursing2000</i>, 30(9), 51–54.</p> <p>In Class: Lecture</p> <p>Practice Activity: One clinical scenario presents opportunities to perform a focused assessment, prepare and administer oral medications.</p>

Week of/ Number	Indicators/Material Covered	Reference/Reading
Feb. 26 Week 8	Medications Part 2 <ul style="list-style-type: none"> • Routes of drug administration <ul style="list-style-type: none"> – Oral-narcotic medications (controlled drugs) – Topical (skin and mucous membranes) <ul style="list-style-type: none"> ▸ Special eye care ▸ Transdermal ▸ Powders ▸ Creams ▸ Ungt ▸ Pastes ▸ Aerosols ▸ Suppositories • Focused assessments • Documentation • Medication errors <ul style="list-style-type: none"> – Responsibilities <ul style="list-style-type: none"> ▸ incident reports ▸ focused assessment ▸ documentation 	Readings: <ul style="list-style-type: none"> • Nursing Fundamentals text • Henke p. 81, 261–279, 299–304 • BCIT student policies Articles: (Library reserve) Cohen, H., Robinson, E.S., & Mandrack, M. (2003). Getting to the root of medication errors. <i>Nursing2003</i> , 33(9), 36–45. Ins and outs of giving drugs transmucosally. (2003). <i>Nursing2003</i> , 33(8), 84. As cited from: Medication Administration Made Easy. (2003). Lippencott, Williams & Wilkins (eds.). McConnell, E. (1997). Using transdermal medication patches. <i>Nursing97</i> , 27(7), 18. In Class: Video – Medication Error, A Closer Look Practice Activity: Six different clinical scenarios present opportunities to perform focused assessments and prepare and administer oral and topical medications. Come prepared to play the role of both a patient and a nurse.

Week of/ Number	Indicators/Material Covered	Reference/Reading
<p>March 4</p> <p>Week 9</p>	<p>Medications Part 3</p> <ul style="list-style-type: none"> • Anorectal Interventions <ul style="list-style-type: none"> – Enemas <ul style="list-style-type: none"> ▸ Cleansing ▸ Oil retention ▸ Carminative ▸ Micro ▸ Fleet ▸ Medicated ▸ Rectal suppository ▸ Rectal disimpaction ▸ Rectal check ▸ Rectal tube ▸ Preparation of bowel for diagnostic tests • Documentation 	<p>Readings:</p> <ul style="list-style-type: none"> • Nursing Fundamentals text • Henke p. 301 <p>Articles: (Library reserve) Moppet, S. (). Administration of an enema. <i>Nursing Times</i>. Rushing, J. (2003). Administering an enema to an adult. <i>Nursing2003</i>, 33(11), 28.</p> <p>In Class: Lecture</p> <p>Practice Activity: First hour: Different clinical scenarios present opportunities to perform a focused assessment, prepare, administer and document an anorectal intervention to a mannequin.</p> <p>Second hour: Game — “Anorectal Jeopardy”</p> <p>Next Week in Practicum:</p> <ul style="list-style-type: none"> • Locate oxygen therapy equipment. • Observe how nurses and respiratory therapists collaborate to provide care.

Week of/ Number	Indicators/Material Covered	Reference/Reading
<p>March 11</p> <p>Week 10</p>	<p>Medications Part 4</p> <ul style="list-style-type: none"> • Oxygen Therapy <ul style="list-style-type: none"> – Oxygen delivery devices – Cannula – Simple face mask – Venturi – Face tent • Mobilizing pulmonary secretions <ul style="list-style-type: none"> – Humidity therapy – Aerosol-nebulization therapy • Maintaining patent airway <ul style="list-style-type: none"> – Coughing techniques – Oral suctioning (review) • Maintaining patent airway • Oxygen saturation/oximetry • Focused assessments • Documentation 	<p>Readings:</p> <ul style="list-style-type: none"> • Nursing Fundamentals text • Laboratory Diagnostics text <p>Articles: (Library reserve) Calianno, C., Clifford, D., & Titano, K. (1995). Oxygen therapy: Giving your patient breathing room. <i>Nursing95</i>, 25(12), 33–38. Carroll, P. (1977). Pulse oximetry at your fingertips. <i>RN</i>, 60(2), 22–27.</p> <p>In Class: Video – Oxygen Administration Video – Pulse Oximetry</p> <p>Practice Activities: Scenarios present opportunities to perform a focused assessment, administer oxygen therapy, insert an oral airway in a mannequin and perform oxygen oximetry.</p>
<p>March 18</p>	<p>SPRING BREAK</p>	

Week of/ Number	Indicators/Material Covered	Reference/Reading
March 25 Week 11	<p>Intake and Output</p> <ul style="list-style-type: none"> • Monitoring • Measuring • Documenting • Evaluating <ul style="list-style-type: none"> – Problems related to voiding • Promoting voiding <p>Specimen Collection</p> <ul style="list-style-type: none"> • Types <ul style="list-style-type: none"> – Urine <ul style="list-style-type: none"> ▸ Routine urinalysis, 24 hour urine, double voided specimen, C&S – Stool <ul style="list-style-type: none"> ▸ Occult blood, <i>C. difficile</i>, ova and parasite – Sputum – Throat – Vaginal – Eye – Ear • Collection for screening for MRSA (review routine precautions) • Use of reagent strips for testing urine 	<p>Readings:</p> <ul style="list-style-type: none"> • Nursing Fundamentals text • Laboratory Diagnostics text <p>Articles: (Library reserve) Levy, S.B. (1998). The challenge of antibiotic resistance. <i>Scientific American</i>, 278(3), 46–53. Marchiondo, K. (1979). The very fine art of collecting culture specimens. <i>Nursing</i> 79, 9(4), 34–43. McConnell, E. (2002). Measuring fluid intake and output. <i>Nursing</i> 2002, 32(7), 17.</p> <p>In Class: Lecture</p> <p>Practice Activities: In groups, you will rotate through six scenarios which will provide you the opportunity to perform focused assessments and collect a variety of samples.</p>

Week of/ Number	Indicators/Material Covered	Reference/Reading
April 1 Week 12	Research Project Introduction	<p>In Class: Guest speaker</p> <p>Readings:</p> <ul style="list-style-type: none"> • Pages 6-7 course outline • Bring your research article related to a skill in the practice lab. <p>Articles: (Library reserve) Sexton, D. (1984). Presentation of research findings: The poster session. <i>Nursing Research</i>, 33(6), 374-375.</p>
April 8 Week 13	Skill Testing Exam – Part 1 (A schedule for testing will be posted.)	
April 15 Week 14	Skill Testing Exam – Part 2 (A schedule for testing will be posted.)	

Week of/ Number	Indicators/Material Covered	Reference/Reading
<p>April 22</p> <p>Week 15</p>	<p>Therapeutic Touch</p>	<p>Readings: Nursing Fundamentals text</p> <p>Articles: (Library reserve) Montbriand, M.J. (2000). Alternative therapies health professionals' attitudes. <i>The Canadian Nurse</i>, 96(3), 22–26. Muir, J. (2003). Therapeutic Touch. Providence Health Care, St. Paul's Hospital (package includes many articles as prepared by J. Muir with references at the end). The following articles are J. Muir <i>suggested</i> readings: Slater, V. (1995). Toward an understanding of energetic healing. <i>Journal of Holistic Nursing</i>, 13(3), 209–237. Peters, R.M. (1999). The effectiveness of therapeutic touch: A meta-analytic review. <i>Nurse Science Quarterly</i>, 12(1), 52–61.</p> <p>In Class: Guest speaker</p> <p>Practice Activity: In groups of two, you will practice therapeutic touch.</p>
<p>April 29</p> <p>Week 16</p>	<p>Research Project</p>	
<p>Exam Week</p>	<p>Final Multiple Choice Exam (1.5 Hours) Date, time and place TBA</p>	