



#### *?ITISH COLUMBIA INSTITUTE OF TECHNOLOGY*

Health Sciences Program: Nursing

Option:

Course Outline Part A

NURS 1019 Clinical Techniques -Introduction to Assessment

Hours/Week:

10

**Total Hours:** 

50

Term/Level:

1

Lecture:

Other:

Lab:

**Total Weeks:** 

5

Credits:

3.5

**Prerequisites** 

NURS 1019 is a Prerequisite for:

Course No.

Course Name

Course No.

**Course Name** 

**NURS 1030** 

**Nursing Practicum 1** 

#### **Course Goals**

NURS 1019 provides a basis for understanding and conducting a health assessment. The aim is to develop the dent's beginning ability to take a health history and conduct psychosocial and physical assessments.

### **Course Description**

This course presents essential behaviors for conducting psychosocial and physical assessment. It includes techniques for taking a health history in order to identify health needs. Opportunity for practice and demonstration of learned skills is provided.

#### **Evaluation**

1.	Completion of three satisfactory written assignments based	20%
	on analysis of assessments done in practicum (Weeks 2, 3, 4)	
2.	Multiple Choice Exam	50%
3.	Return demonstration of Assessment Skills	<u>30%</u>
	TOTAL	100%

### urse Outcomes and Sub-Outcomes

- 1. Recognize the difference between a comprehensive and focused assessment and when these are used.
- 2. Demonstrate correct assessment techniques during physical and psychosocial assessment with the aim of recognizing normal findings.
- 3. Begin to recognize significant patterns in assessed data.
- 4. Begin to relate assessment findings to nursing action.
- 5. Demonstrate ability to communicate assessment findings in a professional manner.
- 6. Begin to recognize how to individualize health status assessment based on developmental and cultural needs.

Course Record		
Developed by:	Luida Barratt	Date: May 25, 1998
	Instructor Name and Department (signature)	• 0
Revised by:	Kich Negri	Date: May 1948
	Instructor Name and Department (signature)	
roved by:	Mr. Dernaut / day	Start Date: My 1998
-	Associate Dean / Program Head (signature)	



### RITISH COLUMBIA INSTITUTE OF TECHNOLOGY

Course Outline Part B

Health Sciences Program: Nursing Option:

NURS 1019 Clinical Techniques – Introduction to Assessment

#### **Effective Date**

January 4, 1999

### Instructor(s)

Level 1 Instructors

Office No.:

SE 12 418

Phone:

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Office Hrs.: See posted hours

Karen Driol
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**451-6946** 451-6952

at instructor's office

Lynn Field 451-6954

Fairleth McCuaig

451-6956

Anne Trory Selma Whiteside 451-8954

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## rext(s) and Equipment

### Required:

Text:

Sims, L.K., D'Amico, D., Stiesmeyer, J.K., & Webster, J.A. (1995). Health Assessment in Nursing. Meno Park, CA: Addison Wesley.

A handbook is also available for the above text. It is handy to have, but not compulsory to purchase.

Supplemental:

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

NURS 1019.

Kerr, J., & Sirotnik, M. (1997). Canadian Fundamentals of Nursing. Potter and Perry. Mosby, Toronto.

#### OR

DuGas, B.W., & Knor, E.R. (1995). Nursing Foundations: A Canadian Perspective. Scarborough, ON: Appleton & Lange Canada.

LeMone, P., & Burke, K.M. (1996). Medical-Surgical Nursing: Critical Thinking in Client Care. Menlo Park, CA: Addison Wesley.

or

Smeltzer, S.C., & Bare, B.C. (1996). Brunner & Suddarth's Textbook of Medical-Surgical Nursing (8th ed.). "iladelphia, PA: Lippincott.

A medical dictionary

# -ext(s) and Equipment (continued)

# Video Tapes:

The numbers in the omit sections refer to the approximate time, in minutes and seconds, these sections appear on the tape. The numbers on the far right refer to the total running time of the tape.

VC 5433	Examination Techniques — (will be shown in class)	15 mins
VC 5434	The General Survey — (will be shown in class)	10 mins
VC 5435	Skin, Hair and Nails — (view all of tape)	15 mins
VC 5437	Head and Neck Omit: Salivary glands 1.40–2.03; Trachea and thyroid position 3.02–3.27; Palpating the thyroid 4.25–5.57	10 mins
VC 5438	Eyes Omit: Cranial nerves 6.24-7.01; Cardinal fields of gaze, cornea reflex, cover and uncover test and use of ophthalmoscope 7.55 to end	14 mins
VC 5439	Ears Omit: Use of otoscope 3.07-5.10; Weber, Rinne and Schwabash tests 6.56 to end	11 mins
VC 5440	Nose, Mouth and Pharynx Omit: View nasal cavity 4.05-4.55	11 mins
VC 5450	Neurological System: Mental Status, etc. View the Mental Status section only	18 mins
VC 3507	*Physical Assessment Heart and Lungs; Part 2 This is lung assessment only. (view all of tape) *Not necessary at this time. May be viewed in later terms. A simpler video will be used.	28 mins
VC 5442	Heart Omit: Palpation of chest and cardiac border 3.34–6.09. Auscultating Chest S2, unexpected splitting 10.42–12.00. Pathological S3 and S4 12.50–15.00	21 mins
VC 5443	Vascular System Omit: Jugular veins and Bruits 7.50–11.10	16 mins
VC 5434		
	The General Survey (view vitals signs only)	
VC 5444	The General Survey (view vitals signs only)  Breasts (view all of tape)	17 mins
VC 5444 VC 5445		17 mins 19 mins
	Breasts (view all of tape)  Abdomen  Omit: Vascular sounds and friction rub 7.20–9.40; Percuss liver, spleen and air bubble 11.10–12.40; Palpate liver, spleen, kidney, pulsations,	

### **Text(s) and Equipment** (continued)

Equipment:

1 watch with second hand

1 good quality stethoscope\*

pen light

1 good quality hand held audio tape recorder and tapes (if you can borrow one, it is not necessary that you purchase one)

\* a good quality stethoscope will have the following characteristics:

- Diaphragm and bell are heavy enough to lie firmly on the body surface.
- Tubing is thick, stiff and heavy.
- Length of tubing is between 12 to 18 inches.
- Ear pieces fit snugly and comfortably.
- Angled binaurals point the ear pieces toward the nose.
- \* Try different stethoscopes before you purchase one.

### **Course Notes (Policies and Procedures)**

- This course has been designed to develop your ability to talk with (interview) patients about their health and health concerns and to conduct an effective but very basic physical examination of body systems. Emphasis will be placed on developing assessment skills while establishing partnerships with patients. Attention to the communication aspect of the nurse's role will be continually reinforced and form part of the evaluation process.
- This course will be delivered in both the classroom and practicum setting (Acute Medicine and Extended Care Units). In these settings, students will work in small groups (approximately 8 students with 1 nursing instructor).
- 3. In the classroom students will participate in a variety of structured learning activities aimed at developing assessment knowledge and skills. During practicum experiences students will be assigned patients to interview and to conduct basic physical examinations. It is expected that students will actively participate in both the classroom and the practicum setting.
- 4. This course is of short duration. Therefore, students must complete aspects of this course independently. You will receive a schedule for all required independent study. Independent learning activities include reading, viewing videos and completing written assignments.
- 5. 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 class or practicum experience is missed the student is responsible for the missed content.

#### Evaluation of Assessment Skills: Return Demonstration

Return demonstration of assessment skill is worth 30% of your final grade. You must pass this component to pass the course. Your demonstration of specific skills will be graded satisfactory/unsatisfactory according to criteria on a checklist which you will see prior to the test. If you meet all criteria, you will receive a satisfactory and be granted 30 marks (30%) of your final grade. If you do not meet all the criteria you will receive an unsatisfactory and no numerical grade will be given. You will be given a provisional pass into NURS 1030 and the assessment skill will be retested by your instructor. This will be done in the clinical area and must be completed by Week 5.

For all skills demonstration tests, you will be asked to perform a focused interview and physical exam of one body system, e.g., respiratory. You will also conduct an interview of one section of the nursing history or a health pattern, e.g., psychosocial health.

### **Clinical Techniques-Assessment: Course Failure**

A student who is unsuccessful in the assessment course goes on to the Nursing Practicum 1 – NURS 1030 on a **provisional pass**. This provisional pass must be cleared by Week 5 of the clinical practicum (NURS 1030).

### **Assignment Details**

### **Practicum Assignment: Analysis of Assessment Data**

#### \_ reamble

The assessment process involves the simultaneous enactment of two interrelated processes: data gathering and diagnostic reasoning. In other words, before, during and following the process of data collection nurses engage in the critical thinking process of diagnostic reasoning (analysis and synthesis of data). This process is crucial to the accurate identification of patient concerns, problems, issues, evaluation of outcomes and in the making of appropriate clinical judgements. It is also part of the assessment phase of the nursing process. This assignment begins in week 2 when you go to your assigned clinical area.

### Purpose of this Assignment

The purpose of the assignment is to assist students to develop knowledge and skill in the analysis and synthesis of assessment data by analyzing and synthesizing assessment data collected during their practicum experience with assigned patients.

### How to do this Assignment

- The process of analysis and synthesis (diagnostic reasoning) may be a new experience for you or a familiar
  one but in a new context. To accommodate for these differences in experience this assignment is set up as a
  walk through the process. You will analyze patient data by responding to a series of questions. Answer these
  questions thoroughly and to the best of your ability.
- 2. The analysis of data is a recurring, ongoing process during the assessment phase and therefore should be repeated many times during the data collection process. In this assignment you will analyze data before, during and following collection of assessment data during weeks two, three and four of your practicum experiences.

- These assignments are to help you *develop* knowledge and skill in the analysis and synthesis of assessment data. They are not a test of your ability to enact these processes. You are therefore encouraged to work in collaboration with classmates, instructors and other health care professionals to assist you in this learning process.
- 4. You will not be graded on these assignments. You will be awarded 20 marks (20%) toward you final grade for completing the *three* assignments during weeks two, three and four. Because this is an ongoing learning process marks will *not* be granted for the completion of only one or two of these assignments. These assignments are due on the day stated by your clinical instructor. You may ask for an extension, but a specific date for the submission of the assignment must be set. Late assignments or those submitted past the negotiated date will not receive a grade.
- 5. Practicum instructors may ask you to answer additional questions to assist you in the analysis process. Try not to think of these as extra work but as helping you to more fully develop your reasoning skills so that you will make more appropriate and accurate nursing judgements about a patient's health status.
- 6. Be sure to hand in your assessment findings with your analysis.

### Analysis of Assessment Data: Questions

1. Before you even met with your patient did you receive information from your instructor or other health care professionals that you thought was a \* cue? If so, what was that cue(s) and what action did you initiate as a result of this cue?

Did you make any inferences about your assigned patient when you received this information? If so, what were those inferences? How did they influence how you proceeded with your assessment of the patient?

- \* A cue is a piece of information that signals the nurse to take some action in the assessment process. For example actions taken could be: a decision to collect more data, a decision to compare data collected with existing norms, a decision to do more research, a decision to seek assistance or immediate help because the "cue" alerts you to an existing or pending emergency situation.
- \* An *inference* is a step of the mind, an intellectual act by which one concludes that something is so in light of something else's being so, or seeming to be so (Paul, 1992, p. 651).
- 2. It is suggested you answer the following questions immediately after you have assessed your patient's health status.

While you conducted your health assessments were you aware of any information "cues" that signaled you to take a course of action? If so, describe the course of action you took. What were those pieces of information? Did some of these pieces of information seem to fit together (as in a pattern)? What inferences about your patient's health status did you make, based on those emerging patterns? Did you discover if your inferences were correct? If so, briefly describe how you validated your inferences. If you did not validate them (in some way) what do you think stopped you or interfered with this process? Lack of confidence? Lack of knowledge? Did you not know how you were to do it?

Now that you have collected a substantial amount of assessment data it is suggested you review all of the data to get a sense of the "whole" and any patterns emerging.

Answer the following questions when you have collected a substantial amount of assessment data, e.g., when you get home from your practicum experiences.

What pieces of information seem to fit together now? Write these down organizing them into clusters of information. What inferences can you make about these clusters of information? Are these inferences different from your initial inferences you made while you were actually involved in the assessment process with your patient? If they are different, how do you account for these differences? How will you find out if your current inferences are correct? If your current inferences do not seem valid, what do you think you need to do? What data seems to be missing? How will you gain additional data?

If you are confident your inferences are correct or valid, formulate some tentative conclusions. These conclusions can be expressed as a patient concern, a patient issue, a clinical judgement, a nursing diagnosis or a positive outcome.

Now that you have worked through this diagnostic reasoning process and have arrived at some conclusions you may be ready to proceed to the next step in the nursing process which is to decide on appropriate nursing interventions. During your practicum experiences you may be expected to use this process in the planning of nursing care.



### RITISH COLUMBIA INSTITUTE OF TECHNOLOGY

Schedule

Health Sciences Program: Nursing Option:

NURS 1019 Clinical Techniques -Introduction to Assessment

Date	Material Covered	Course Site and Rooms
	WEEK 1	
Jan. 5, 1999	Tuesday	
Common hour	Introduction to assessment course	BCIT 0830–1020 SW3–1710
Group work	<ul> <li>Health Assessment Process</li> <li>purpose of assessment</li> <li>types of assessment</li> <li>health assessment and the nursing process</li> <li>diagnostic reasoning process</li> <li>Establishment of partnerships</li> <li>Reading: Chapters 1 and 2 – see study guide</li> <li>*Please note that your small group in rooms are not the same each week.</li> </ul>	1030-1230 Gp 1 SE12 413B Gp 2 SE14 111 Gp 3 SE14 113 Gp 4 SE14 121 Gp 5 SE12 418-421 Gp 6 SE12 418-422 (SE12 421 and 422 are inside SE12 418)
Jan. 6, 1999	Wednesday	BCIT
Common hour	Taking a Health History Introduction to Basic Interviewing Skills	0830–0930 NE1 334
Group work	Holism  Health Patterns Assessment  Assessment of growth and development (focus on adult stage)  Assessment of psychosocial health  Assessment of self-care and wellness activities  Assessment of family, culture and environment  Practice and tape an interview  Reading: Chapters 4, 5 and 6 – see study guide	0930–1230 and 1330–1530 1 SE12 413A 2 SE14 114 3 SE14 122 4 SE12 413B 5 SE12 418-421 6 SE12 418-422

Date	Material Covered	Course Site and Rooms
	WEEK 2	
Jan. 12, 1999 Common hour	Tuesday  Introduction to physical examination techniques  inspection, palpation, percussion, auscultation  video on examination techniques	BCIT 0830-0930 SW3-1710
Group work	Practice physical examination technique Review guidelines for conducting the general survey  documenting findings  measurement of height and weight  omit vital signs (pp. 115-122)  omit gathering equipment (pp. 104-108) Integumentary system (skin, hair and nails) Head (eyes, ears, nose, sinuses, mouth and throat) and neck Mental status exam and focused interview of the neurological system	0930-1130 and 1230-1430 Gp 1 SE12 413A Gp 2 SE14 114 Gp 3 SE14 121 Gp 4 SE12 413B Gp 5 SE12 418-421 Gp 6 SE12 418-422
Jan. 13, 1999	Wednesday	
	Patient assignment to achieve the following:  establishment of a partnership with patient  initiation of an interview and completion of a nursing health history  assessment of psychosocial health, self-care and wellness activities, family, culture and environment  completion of a general survey  assessment integumentary system (skin, hair and nails)  assessment of head (eyes, ears, nose, sinuses, mouth and throat) and neck  focused interview of neurological system and mental status exam  Hand in a written summary of this assessment	Practicum Placements  See Level I Bulletin Board

****Date	Material Covered	Course Site and Rooms
Jan. 19, 1999 Common hour Group work	WEEK 3  Tuesday  Respiratory and cardiovascular assessment Review location and types of breath sounds  bronchial, bronchovesicular, vesicular  adventitious sounds (crackles and wheezes) Show video on  landmarking for breath sounds  listening for breath founds  Assessment of respiratory system  landmarking and listening for breath sounds Assessment of cardiovascular system  landmarking and listening for apical rate  temperature, pulse, respiration and blood pressure Assessment of the peripheral vascular system (includes the lymphatic system)  Skill – T, P, R and blood pressure; auscultate for breath sounds and apical rate Prepare a written guide to assist you in your practice interview	BCIT 0830–0930 SW3 1710 0930–1130 and 1230–1430 Gp 1 SE12 413A Gp 2 SE14 114 Gp 3 SE14 121 Gp 4 SE12 413B Gp 5 SE 6 418–421 Gp 6 SE 6 418–422
Jan. 20, 1999	Reading: Chapters 7, 10, 11 and 16 – see study guide  Wednesday  Patient assignment to achieve the following:  establishment of a partnership with patient  expanding and improving accuracy of last week's assessment  assessment of respiratory system  assessment of neck vessels and cardiovascular system  assessment of peripheral vascular system  Hand in a written summary of this assessment	Practicum Placements  See Level 1 Bulletin Board .

Date	Material Covered	Course Site and Rooms
Jan. 26, 1999 Common hour	WEEK 4  Tuesday  Assessment of the abdomen, urinary system, reproductive system(breast and axilla) and musculoskeletal system  Iandmarking for abdominal sounds  location of bladder for palpation  video on self-breast examination (10 minutes)	BCIT 0830–0930 SW# 1710
Group work	Assessment of the abdomen  auscultate for abdominal sounds Assessment of the urinary system  palpate bladder Assessment of the reproductive system  focused interview only  practice breast examination on a model Assessment of the musculoskeletal system  test muscles and joints for strength, symmetry and ROM	O930-1130 and 1230-1430  AM PM  Gp 1 SE12 417* SE12 416  Gp 2 SE12 417* SE14 114  Gp 3 SE12 416* SE14 111  Gp 4 SE12 416 SE12 417*  Gp 5 SE14 414 SE12 417*  Gp 6 SE14 111 SE12 416*  *These groups will be working in the lab with the equipment provided.
Jan. 27, 1999	Wednesday  Patient assignment to achieve the following:  establishment of a partnership with patient  expanding and improving accuracy of last week's assessments  assessment of abdomen  assessment of urinary system  assessment of musculoskeletal system  assessment of vital signs  Hand in a written summary of this assessment	Practicum Placements  See Level 1 Bulletin Board

Date	Material Covered	Course Site and Rooms
	WEEK 5 Tuesday	
Feb. 2, 1999	Tube assessment (general overview)	BCIT
Common hour	Referral system	0830-0930 SW3 1710
Group work	Emergency assessments Observe doll with tube attachments Preparation for evaluation of assessment skills Practice interviews Conduct selected return demonstration of assessment skills Final review of course; come prepared with suggestions Course evaluation	0930–1130 and 1230–1430 Gp 1 SE12 413A Gp 2 SE14 114 Gp 3 SE14 111 Gp 4 SE12 413B Gp 5 SE12 418–421 Gp 6 SE12 418–422
Feb. 3, 1999	Wednesday  Use patient assignment to continue to practice and improve on skills learned in this course	
Feb. 11, 1999	Thursday – Evaluation Day  0930-1020 Multiple Choice Exam 1030-1230 Test demonstration of assessment	0930–1020 SE 14 121
	A schedule for testing will be posted	1030–1230 SE14 121 - 1330–1530
		SE 12 416 and 417