



JAN 29 1999

BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

Course Outline **Part A**

School of Health Sciences

Program: Nursing

Option:

**NURS 2000****Nursing and Health Issues 2**

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<b>Hours/Week:</b>	3	<b>Total Hours:</b>	51	<b>Term/Level:</b>	2
<b>Group Work:</b>	3	<b>Total Weeks:</b>	17	<b>Credits:</b>	3.5
<b>Independent Work:</b>					
<b>Other:</b>					

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**Prerequisites**

Course No.	Course Name
NURS 1000	Nursing and Health Issues 1

**NURS 2000 is a Prerequisite for:**

Course No.	Course Name
NURS 3000	Nursing and Health Issues 3
NURS 3030	Nursing Practicum 3

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**Course Goals**

Nursing 2000 fosters students ability to explore health situations from a professional nursing perspective by working collaboratively in small groups.

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**Course Description**

Students will explore selected common health experiences in order to understand the impact it has on the individual, family, society, and health care system. While developing their understanding, students will access information from a variety of sources including professionals in hospitals and in the community. A thorough exploration of the health situation will assist students in developing a professional context from which they can plan nursing care. The health situations discussed in this course are related to rheumatoid arthritis and lung cancer.

The teaching/learning strategy used in this course is problem based learning.

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**Course Format**

Students will meet for three hours each week with a tutor to explore the situation and to identify learning needs. Students will do research independently then work to apply the knowledge to the situation when the group reconvenes. The group is required to function effectively so students will focus on both developing group process skills and learning content relevant to the situation. Students will complete 2 situations during the term. A simulated patient may be associated with the health situation.

## Evaluation

- Group skills —  
**Satisfactory ability to function effectively in the problem-based group is required for satisfactory course completion.**
  - A paper that discusses one of the central concepts of the Level 1 or Level 2 courses — 30% of mark.
  - A written test — 50% of mark.
  - Two (2) multiple choice quizzes — 20% of mark
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## Course Outcomes

The student will:

1. Develop a theoretical knowledge base related to nursing and specifically nursing's role in relation to selected common health experiences.
  2. Develop ability to accept a variety of perspectives related to the situation.
  3. Recognize contextual influences as relevant to the situation.
  4. Actively work in the group to develop a planned approach towards understanding the situation.
  5. Apply independent study material to the situation as planned and share information in the group that is clear, focused on the situation and defensible.
  6. Participate actively in the group so that the group functions productively.
  7. Develop ability to give feedback to other members of the group in a manner that facilitates the group goal.
  8. Establish relationships with group members that achieve the tasks of the group.
  9. Develop ability to monitor group process.
  10. Reflect on own growth in developing effective group skills.
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## Course Content

Students will work in learning partnerships to explore the following situations in this level:

- Lung cancer. This situation will also present palliative care.
- Rheumatoid arthritis. This situation includes preoperative, intraoperative and postoperative care.

When exploring the above situations, students will consider the following concepts:

- Health/Illness
  - ▶ \*Chronic Illness
  - ▶ \*Palliation
- \*Pain
- \*Loss and Grief
- \*Dying
- Stress

## Course Content (cont'd.)

- Health Promotion
  - Determinants of Health
    - \*Poverty
  - Community Resources
  - Nutrition
  - \*Patient Teaching
- Growth and Development
- Culture
- Group Process
- Context
  - Spiritual
  - \*Social/Economic

\*New in Level 2

In analyzing a situation the students may identify many other relevant content areas. These will be discussed within the context of the situation as time and group interest permits.

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## Process Threads Relevant to this Course

- Professionalism — Students will develop an understanding of nursing care that is required for safe practice. Also, they will need to be accountable and responsible to follow through with the work they have agreed to do and develop a knowledge base that is useful in practice.
- Communication — Working effectively in teams is a focus of this course. This includes establishing relationships with members, sharing ideas, clarifying thoughts, giving feedback and monitoring group functioning. Students are expected to improve the abilities they developed in the first level course. The group will facilitate students' development of clear thinking and in communicating that thinking.
- Learning — Students will be required to take responsibility for their learning and for preparing material for their fellow classmates that is accurate and relevant.
- Leadership — Students will be assertive as the group works on the health situation. They will develop skills of group problem solving and consensus decision making as well as other group process skills.
- Systematic Inquiry — Research or evidence that is brought to bear on the health situation may be questioned by the group and the student will be helped to critique the data in the group situation.

The process of working in groups and bringing information to bear on a health situation for the purpose of understanding the situation more clearly promotes the development of a professional nurse. The purpose of understanding the situation may lead to developing a plan for approaching a simulated patient to try out some aspect of the professional role in nursing.

## Course Record

This course outline is current and accurate and complies with BCIT Policy 5013 – Course Outlines.

Developed by: Lynn Field  
Instructor Name and Department (signature)

Date: November 22, 1996

Revised by: Debbie Zabawski  
Instructor Name and Department (signature)

Date: June 24, 1998

Approved by: M. Desautel Ratsay  
Associate Dean / Program Head (signature)

Start Date: \_\_\_\_\_



BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

School of Health Sciences

Program: Nursing

Option:

Course Outline **Part B**

**NURS 2000**

**Nursing and Health Issues 2**

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### Effective Date

August, 1998

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### Tutors

	Phone	Office No: SE12-418 (In Charge)	Office Hrs.: as posted
Pauline Zabawski	451-6957		
Karen Driol	451-6946		
Ann Kenney-Lee	432-8791		
Fairleth McCuaig	451-6956		

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### Text(s) and Equipment

#### Required:

1. Canadian Nurses Association. (1997). *Code of ethics for Registered Nurses*. Ottawa: Author.
2. Registered Nurses Association of British Columbia. (1998). *Standards of nursing practice in British Columbia*. Vancouver: Author.
3. Sims, L.K., D'Amico, D., Stiesmeyer, J.K., & Webster, J.A. (1995). *Health assessment in nursing*. Menlo Park, CA: Addison Wesley.
4. Snyder, M. (1992). *Independent nursing interventions* (2<sup>nd</sup> ed.). Albany, NY: Delmar.
5. **A fundamentals text is required.** One of the following fundamentals texts is suggested:
  - Craven, R.F., & Hirnle, C.J. (1996). *Fundamentals of nursing: Human health and function* (2<sup>nd</sup> ed.). Philadelphia: Lippincott.
  - DuGas, B.W., & Knor, E.R. (1995). *Nursing foundations: A Canadian perspective*. Scarborough, ON: Appleton & Lange Canada.
6. **A medical-surgical text is required.** One of the following texts is suggested:
  - LeMone, P., & Burke, L.M. (1996). *Medical-surgical nursing: Critical thinking in client care*. Menlo Park, CA: Addison Wesley.
  - Smeltzer, S.C., & Bare, B.C. (1996). *Brunner & Suddarth's textbook of medical-surgical nursing* (8<sup>th</sup> ed.). Philadelphia: Lippincott.

### Text(s) and Equipment (cont'd.)

7. **A nursing/medical dictionary is required.** One of the following two texts is suggested:
  - Anderson, K.N., Anderson, L.E., & Glanze, W.D. (1994). *Mosby's medical nursing and allied health dictionary* (4th ed.). St.Louis: Mosby.
  - Miller, B.F., & Keane, C.B. (1992). *Encyclopedia and dictionary of medicine, nursing and allied health* (5th. ed.). Philadelphia: Saunders.
8. **A diagnostic tests handbook is required.** One of the following two texts is suggested:
  - Fischbach, F. (1996). *A manual of laboratory and diagnostic tests* (5th ed.). Philadelphia: Lippincott.
  - Malarkey, L.M., & McMorrow, M.E. (1996). *Nurse's manual of laboratory tests & diagnostic procedures*. Philadelphia: Saunders.
9. **A pharmacology handbook is required.**
  - American Psychological Association. (1994). *Publication manual of the American Psychological Association*. (4th. ed.). Washington, DC: Author. This text is in the reference section of the BCIT library.

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### Course Notes (Policies and Procedures)

1. Students are encouraged to identify individual learning needs that may be met in this course. Please talk with the tutor to see how this might be accomplished.
2. During the first class, the evaluation methods will be discussed.
3. Students will participate in a verbal and/or written review of the course at midterm and the end of the term. This review will include a discussion of teaching methods, resources, and course structure. The midterm review is aimed at meeting the needs of the students currently taking the course. The end of term review is aimed at modifying the course for subsequent students.
4. Unforeseeable circumstances may necessitate the alteration of course content, sequencing, timing or evaluation. As much as possible, students will be given adequate notice of changes.

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### Participation/Attendance

We believe that dialogue contributes to both thinking and learning. Therefore:

1. Attendance is required in this course. The different viewpoints and experiences shared during the session will expand the thinking of all participants. Also, students will be doing independent work to share with the group. This work is required for the group to accomplish its task and move on to other tasks. **Therefore, if students are absent for more than 10% of the planned activities without a medical reason, they may be prohibited from completing the course (see BCIT Policy re: attendance).**

## Group Skills

1. **Each student must participate to develop their group skills. Productive group function is a major expectation of this course.**
2. Students are expected to:
  - work actively in each session.
  - give feedback to members so that group goals are achieved.
  - establish working relationships with members.
  - develop the ability to monitor group process.
  - reflect on their own growth in developing effective group skills.

Weekly written or verbal discussions of group function will occur so that tutor and peers can develop their skills. A midterm summary of skills will be done to direct individual learning. A final assessment of each group and the tutor will assess each student's group skills. The three sources of data will be integrated to achieve a final assessment. **All students must be judged satisfactory in this area to receive the earned marks assigned for the paper and the problem-solving exam. If students do not receive a satisfactory for group skills, an unsatisfactory is received for the course.**

3. If there is a major discrepancy between the student's self-assessment and their peers' and the tutor's assessments, the peer and tutor assessments will take priority. In such a case, the student will meet with the tutor to discuss the discrepancy and the final assessment of group skills.
4. It is the tutor's responsibility to make the final recommendation about a student's group skills.

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## Written Assignment

**CONCEPT PAPER — due Monday, October 19, 1998 at 1230 hours.**

### 30% of Final Mark

1. The purpose of the assignment is to provide students with the opportunity to explore and discuss a concept encountered in Level 1 and 2 Nursing and Health Issues. The paper will define and give a clear in-depth exploration of the selected concept reviewed in the research material. The paper will show the reader that the student has studied the concept, done research, and thought about how new knowledge can influence their nursing practice and future practice.
2. A literature review is to be done to gain a variety of perspectives on the chosen concept and to relate the concept to your nursing practice. You will need to scan several pieces of literature to select at least 6 to 8 literature sources to use in your paper. A minimum of 2 sources are to be primary sources. (A primary source is literature written by the person who conducted the research or proposed the theory or model. A secondary source is a description of a study or studies prepared by someone other than the original author.) Your literature review should use primary sources whenever possible. Some secondary sources may be used, **your textbooks are an example of secondary sources but are not appropriate to use for a literature review.** For the purposes of this concept paper, secondary sources such as journal articles that discuss or apply someone's work can be used. The original author should also be consulted. Dictionaries or encyclopedias can be used for definitions, but they are not to be part of the 6 to 8 sources for exploring the concept.
3. **Your paper must follow APA guidelines for format and content.**

4. **It is strongly recommended that students discuss the concept paper with their tutor.** Students may request assistance from the tutor as needed without penalty.
5. **The paper must be submitted to receive a mark for the course.** Submit your paper to your tutor's mail box SE12 418 by 1230 hrs. on the due date. If your paper is late, 15 marks will be deducted for each school day it is late. Extensions are granted in exceptional situations (e.g., illness with a medical note, bereavement, etc.).
6. Marks will be assigned according to three criteria; content, structure or organization and mechanics of writing. The paper will be marked out of 100. See marking criteria on following page.
7. **The text of the paper may not exceed 10 pages in total.**



## **I. CONTENT OF THE PAPER: 100 MARKS**

### **A. The literature review shows analysis of the concept. (50 marks)**

- / 5 defines the concept
- /25 discusses the concept as a whole
- / 5 discusses the similarities within the literature
- / 5 discusses the differences within the literature
- / 5 includes references that provide at least 2 different perspectives on the concept
- / 5 includes at least 6–8 references with a minimum of 2 primary sources

### **B. The concept is applied to your nursing practice (20 marks)**

- / 8 describes your nursing practice
- /12 discusses how your understanding of the concept can or will be applied to your nursing practice

## **II. STRUCTURE OF THE PAPER: 20 MARKS**

### **A. The structure includes the organization and writing style of the paper. (14 marks)**

- / 2 written in a tone or style appropriate for health care professionals
- / 1 includes an abstract (see APA manual abstract requirements)
- / 4 includes an introduction which presents the ideas being discussed and the organization of the paper
- / 4 includes a conclusion that summarizes the paper
- / 3 each paragraph has a topic sentence, discusses one idea, and there is a clear transition between paragraphs

### **B. The paper follows APA guidelines (6 marks)**

- / 2 uses correct format for references list
- / 2 uses correct citation for references in body of paper
- / 2 includes a title cover page, page numbers and headings

## **III. MECHANICS OF WRITING: 10 MARKS**

### **A. The paper is written according to English conventions. (10 marks)**

- / 3 sentence structure
- / 3 grammar
- / 2 spelling
- / 2 punctuation

\_\_\_\_\_ Total marks out of 100

## Examination Details

**PROBLEM SOLVING EXAM — 50 MARKS**, about three hours long, held during the PBL session of Week 15. November 25, 1998.

1. Students will be presented with a health situation.

In **Part A**, they will develop a comprehensive list of ten (10) different concerns/issues/problems that are related to a minimum of five (5) different course concepts. They will identify a method of validating these issues, concerns and/or problems then hand in this part of the exam to the tutor. The student will record on carbonless paper so they may have a copy of this exam for the next part. This part of the exam will count for **10 marks**.

In **Part B**, they will receive additional patient data for the situation.

- They will list five (5) issues/concerns/problems relevant to this data that they should pursue further. They will describe the evidence in the case that supports the inclusion of each additional issue/concern/problem. They may include issues from Part A if they are relevant. This will count for **10 marks**.
- They will identify three (3) issues, concerns and/or problems. They will include a rationale for choosing these three, counting for **6 marks**.
- For each of the three (3) priority issues, concerns and/or problems, they are to list a minimum of three (3) nursing interventions that would be appropriate. They include a rationale for why these interventions are appropriate for this situation. This will count for **24 marks**.

2. The exams will be marked by the tutor and the marks will be posted during Week 17.

3. **All students must complete this exam to achieve credit for the course.**

## Quiz Details

**MULTIPLE CHOICE QUIZZES — 20 MARKS**, two—one-hour long quizzes, held during the PBL sessions of Weeks 7 and 12.

1. Each quiz will be worth **10 Marks**.
2. Quiz #1 — Students will answer multiple choice questions related to the health situation previously discussed.
3. Quiz #2 — Students will answer multiple choice questions related to the content discussed since the first quiz.
4. The quiz will be returned for a brief discussion to students in the next PBL session.
5. Students must complete both quizzes to achieve credit for the course.

OCT 18 2002

BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY  
NURSING PROGRAM

**NURS 2010 - NURSING AND HEALTH ISSUES 2**

**FRANK JESSOP**

Frank is a 57 year old married, retired, First Nations man. His mother is Haida. He was told he had lung cancer seven months ago. He has been in hospital several times during the past months, but two days ago he was admitted to the palliative care unit because of pleural effusion with accompanying severe dyspnea. He thinks it is his time to die and the Oncologist has informed Frank and the family that the end is near.

There is a simulated patient with this situation.

BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY  
NURSING PROGRAM

**RESOURCE LIST FOR FRANK JESSOP**

Your required and optional textbooks have quite a bit of information about a number of the concepts discussed in this course. Please consult them as appropriate. **ALL BOOKS, VIDEOS AND PAMPHLETS ARE ON RESERVE. JOURNAL ARTICLES WHICH ARE NOT IN BCIT PERIODICALS ARE PLACED ON RESERVE. RESOURCES WHICH HAVE BEEN REVIEWED AND ARE RECOMMENDED ARE INDICATED WITH A \***

**I. Illness**

**Books**

Alpha Institute. (1993). The Alpha book on cancer and living: For patients, family and friends. Alameda, CA: Author. RC 263 A45 1993

Altman, R., & Sarg, M. (1992). The cancer dictionary. New York: Facts on File. RC 262 A39 1992

Cameron, R.B. (1994). Practical oncology. Norwalk, CT: Appleton & Lange. RC 254 P73 1994

Dollinger, M., Rosenbaum, E.H., & Cable, G. (1994). Cancer Therapy. Kansas City, KS: Andrews & McMeel. RC 263 D59 1994

\* Dollinger, M., Rosenbaum, E.H., & Cable, G. (1991). Everyone's guide to cancer therapy (2nd ed.). Kansas City, KS: Andrews & McMeel. RC 263 D59 1991

Gale, D., & Charette, J. (1994). Oncology nursing careplans. El Paso, TX: Skidmore-Roth Publishing. RC 266 G35 1994

\* Steen, R.G. (1993) A conspiracy of cells: the basic science of cancer. New York: Plenum Press. RC 268.5 S74

Ward, D.E. (1995). The cancer handbook. Columbus, OH: Ohio State University Press. RC 263 233 1995.

**Articles and Pamphlets**

\* CCS/BCCA Cancer Information Service (1997). Respiratory System - Lung. BC: Author. Please the BCIT Reference Desk for the Call Number.

Dumas, L. (1992). Lung cancer in women: Rising epidemic, preventable disease. Nursing Clinics of North America, 27(4), 859-869. Also available as a reprint PAM 543063.

Entrekin, N.M., & McMillan, S.C. (1993). Nurses' knowledge, beliefs, and practices related to cancer prevention and detection. Cancer Nursing, 16(6), 431-439

\*Nursing Clinics of North America (1992). 27(3). is related to lung cancer and diagnostic tests, etiology, radiation therapy, chemotherapy, surgery, psychosocial implications and nursing care of the terminal patient.

Grey, A. (1995). Breathless. Nursing Times, 91(27), 46-47.

Grey, A. (1995). The nursing management of dyspnoea in palliative care. Nursing Times, 91(46), 31-34.

Held, J.L. (1995, October). Caring for a patient with lung cancer. Nursing, 34-45.

\*Korinko, A., & Yurick, A. (1997). Maintaining Skin Integrity During Radiation Therapy. American Journal of Nursing, 97(2): 40-44.

Langston, W.G. (1992). Surgical resection of lung cancer. PAM 543045

\*Labowich, T.M. (1994). Selected complications in the patient with cancer: Spinal cord compression, malignant bowel obstruction, malignant ascites, and gastrointestinal bleeding. Seminars in Oncology Nursing, 10(3), 189-197. Please check the BCIT Reference Desk for the Call Number.

\*Miaskowski, C. (Ed.). (1990). Advances in oncology nursing. The Nursing Clinics of North America, 25(2).

\* Nelson, D.M. (1992). Interventions related to respiratory care. Nursing Clinics of North America, 27(2), 301-323.

Nally, A.T. (1996). Critical care of the patient with lung cancer. AACN Clinical Issues, 7(1), 79-94.

\*Pate, R.W. (1992). The role of chemotherapy in the treatment of lung cancer. PAM 543048.

Rostad, M. (1990). Advances in nursing management of patients with lung cancer. Nursing Clinics of North America, 25(2), 393-401.

\* Sarna, L. (1993). Fluctuations in physical function: adults with non-small cell lung cancer. Journal of Advanced Nursing, 18, 714-724.

Scanlon, C., & Fleming, C. (1989). Ethical issues in caring for the patient with advanced cancer. Nursing Clinics of North America, 24(4), 977-986.

Seale, D.D., & Beaver, B.M. (1992). Pathophysiology of lung cancer. Nursing Clinics of North America, 27(3), 603-613. Also available as a reprint in PAM 543049.

Smalley, M., Backus, S., & Jackson, M. (1993). Three cancer complications that can't wait. Nursing, 23(10), 34-41.

Stewart, G.S. (1992). Trends in radiation therapy for the treatment of lung cancer. PAM 543043 and 44.

Szaflarski, N.L. (1996). Physiologic effects of normovolemic anemia: Implications for clinical monitoring. AACN Clinical Issues, 7(2), 198-211.

Yeaw, E.M.J. (1992, March). Good lung down? AJN, 27-34.

## Internet

\*CCS/BCCA CANCER INFORMATION SERVICE(H:\VIEWS31\BCCA\CIL.NFO)

## II. Loss/Grief/Death

\*B.C. Hospice/Palliative Care Resource Directory. R726.8 B76 1994

\* Doyle, D. (Ed.) (1996). Oxford Textbook of Palliative Medicine. Oxford University Press.  
R 726.8 09 1996 and Pauline Zabawski has a copy that may be borrowed for a 2 hour period.

### Articles and Pamphlets

Halfe, L.B. (1989). The circle: Death and dying from a Native perspective. Journal of Palliative Care, 5(1), 37-41.

### Videos

Grubin, D. (director). (1994). Healing and the mind: Wounded healers (video). Ambrose Video Publishing. VC 4987

## III. Pain - Acute

### Books

Lang, S.B., & Pratt, R.B. (1994). You don't have to suffer. New York: Oxford University Press.  
RC 262 L27 1994

✓ \*U.S. Department of Health and Human Services(1994). Management of Cancer Pain: Clinical Practice Guidelines. AHCPR Publication No. 94-0592. Rockville, MD: Author. Please check the BCIT Reference Desk for the Call Number.

### Articles and Pamphlets

\*Barkwell, D.P. (1991). Ascribed meaning: A critical factor in coping and pain attenuation in patients with cancer-related pain. Journal of Palliative Care, 7(3), 5-14.

\*McCaffery, M.(1997). Pain Management Handbook. Nursing 97, April, 42-45.

\*U.S. Department of Health and Human Services(1994). Management of Cancer Pain: Adults, Quick Reference Guide for Clinicians. AHCPR Publication No. 94-0593. Rockville, MD: Author. PAM 552831

✓ \*U.S. Department of Health and Human Services(1994). Managing Cancer Pain, Patient, Guide. AHCPR Publication No. 94-0595. Rockville, MD: Author. Please check the BCIT Reference Desk for the Call Number.

Vallerand, A.H., & Ferrell, B.R. (1995). Issues of control in patients with cancer pain. Western Journal of Nursing Research, 17(5), 467-483.

\* Wilkie, D.J. (Ed.). (1995). Relieving cancer pain. Nursing Clinics of North America, 30(4).

Willie, D.J., & Grevstad, P. (1995). Coaching the persons with lung cancer to report sensory pain. Cancer Nursing, 18(1), 7-15.

### Internet

The American Pain Society(<http://www.ampainsoc.org>)  
The Cancer Pain Page(<http://www.mdacc.tmc.edu/-acc>)

## V. Complementary Therapy

### Books

Hodgkinson, L., & Metcalfe, J. (1995). The Bristol experience: A personal assessment of the unique life-enhancing programme for cancer patients and caregivers. London: Vermilion. RC 271 A 62 H63 1995

\* Lerner, M. (1994). Choices in healing: Integrating the best of conventional and complementary approaches to cancer. Cambridge, MA: MIT Press. RC 270.8 L47 1994

## Articles

\*Montbriand, M. (1995). Decision tree model describing Alternate Health Care choices made by oncology patients. Cancer Nursing, 18(2): 104-117.

## VI. Chronicity

### Books

Nessim, S., & Ellis, J. (1991). Cancervive: The challenge of life after cancer. Boston: Houghton Mifflin. RC 262 N476 1991

### Articles

\* Ream, E., & Richardson, A. (1997). Fatigue in patients with cancer and chronic obstructive airways disease: a phenomenological enquiry. International Journal of Nursing Studies, 34(1): 44-53

## VII. Health Promotion

### Books

\* Steen, R.B. (1995). Changing the odds: Cancer prevention through personal choice and public policy. New York: Facts on File. RC 262 J64 1988

### Articles

\*Turton, C.L.R. (1997). Ways of Knowing about Health: An Aboriginal Perspective. Advances in Nursing Sciences, 19,(3):28-36.

## VIII. Coping - Rehabilitation

### Books

Johnson, J., & Klein, L. (1988). I can cope: Staying healthy with cancer. Minneapolis, MI: DCI Publishing. RC 262 J64 1988

Todd, A.D. (1994). Double vision: An east-west collaboration for coping with cancer. Hanover, NH: Wesleyan University Press. RC 280 B7 T63 1994

### Articles

\*Bunston, T., & Mings, D. (1995). Identifying the psychosocial needs of individuals with cancer. Canadian Journal of Nursing Research, 27(2), 59-79.

Graydon, J.E. (1988). Factors that predict patient's functioning following treatment for cancer. International Journal of Nursing Studies, 25(2), 117-124.

Highfield, M.F. (1992). Spiritual health of oncology patients: Nurse and patient perspectives. Cancer Nursing, 15(1), 1-8.

Houston, S.J., & Kendall, J.A. (1992). Psychosocial implications of lung cancer. Nursing Clinics of North America, 27(3), 681-690. Also available in reprint PAM 543047.

Thompson, S C., & Collins, M.A. (1995). Applications of perceived control to cancer: An overview of theory and measurement. Journal of Psychosocial Oncology, 13(1/2), 11-26. B-507

## **IX. Emotional Context**

### **Books**

Hughes, H. (1987). Cancer and emotion: Psychological preludes and reactions to cancer. New York: John Wiley & Sons. RC 262 H834 1987

## **X. Physical Context**

### **Books**

Acheson, D. (1994). Chapter 2. In J. Ashton (Ed.), The Epidemiological Imagination: A reader. Buckingham, UK.: Open University Press. RA 651 E62 1994

Committee on Carcinogenesis. (1991). Carcinogen assessment: A research report to the Department of National Health and Welfare. Ottawa: Author. PAM 540730

## **XI. Culture**

### **Books**

Hanna, D., & Henry, M. (Ed.). (1995). Our telling. Vancouver, BC: UBC Press. E 99 N96097 1995

\* McMillan, A.D. (1995). Native peoples and cultures of Canada (2nd ed.). Vancouver, BC: Douglas & McIntyre. E78 C 2M24 1995

Mercredi, O., & Turpel, M.E. (1993). In the rapids: Navigating the future of First Nations. London: Viking. E 78 C2M47 1993

\*Stevenson, Edward (Ed.). (1995). A Persistent Spirit: towards Understanding Aboriginal Health in BC. R 726.8 09 1993

### **Articles**

\* Black Elk (?), Everything is a Circle, The Medicine Wheel, Sweat Lodge, Sacred Herbs, The Circle of Knowledge. Nicola Valley Institute of Technology, 12, 18 - 25. B-174

Keltner, B.R. (1993). Native American children and adolescents: Cultural distinctiveness and mental health needs. JCPN, 6(4), 18-23. B508

\*George, Leonard(1991). Native Spirituality, Past, Present and Future. BC Studies, n. 89, Spring. 160-168. B-173

\*Turton, C.L.R.(1997). Ways of Knowing about Health: An Aboriginal Perspective. Advances in Nursing Sciences, 19,(3):28-36.

## **Resources**



\*Gerry Oldman, BCIT First Nations Counsellor - 451-7026. Please phone to make an appointment.

## **XII. Community Resources**

\*Chris Emery, Charge Nurse, Ambulatory Care, Fraser Valley Cancer Center. 930- 4005. A small group of up to 4 students (one student from each group) can arrange an interview and tour.

Madelaine Owen, Coordinator, Burnaby Hospice Society. 291-1930

Anne Syme, Patient Care Manager for Palliative Care and Oncology, Burnaby Palliative Care Program. Please talk with the instructor coordinating NURS 2010 to organize a meeting. This manager can meet with a small group of students once during the term.

Tylen Katz, Director of Hospice Program, May Gutteridge Community Home. Please talk with the instructor coordinating NURS 2010 to organize a meeting. This manager can meet with groups of students after January.

\*Cancer Information Service - 1-888-939-3333 or Corina Mathews - The Canadian Cancer Society - 872-4400 Lo. 219. This is a resource available to all patients, students, etc.

David Noble - Librarian - BC Cancer Agency - Library Hours are Monday to Friday - 0800 to 1700 Hrs. This is a Provincial Resource open to all students.

Caroline Brunt, Coordinator, Friends for Life Society. Please talk with the instructor coordinating NURS 2010 to organize a meeting. This manager can meet with a small group of students once during the term.