



MAY - 2 2002

Course Outline

BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

Operating Unit: Health Sciences

Program: Nursing

Option:

NURS 1019**Clinical Techniques — Introduction to Assessment****Start Date:** August 8, 1999**End Date:****Course Credits:** 3.5**Term/Level:** 1**Total Hours:** 50**Total Weeks:** 5

Hours/Week:	Lecture:	Lab:	Shop:	Seminar:	Other:
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Prerequisites**NURS 1019 is a Prerequisite for:**

Course No.	Course Name
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Course No.	Course Name
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NURS 1030	Nursing Practicum 1
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Course Calendar 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.

Course Goals

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

Evaluation

1. Analysis of Assessment Data: Practicum Assignment.	20%
Three written assignments based on assessments done in practicum in Weeks 2, 3 & 4 are required.	
2. Demonstration of Assessment Skills.	30%
3. Multiple Choice Exam.	50%
TOTAL	100%

Course Learning Outcomes/Competencies

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 development and cultural needs.

Course Content Verification

I verify that the content of this course outline is current, accurate, and complies with BCIT Policy.

Gain Verner

Program Head/Chief Instructor

June 4, 1999

Date

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



BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

Operating Unit: Health Sciences

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Option:

NURS 1019

Clinical Techniques — Introduction to Assessment

Instructor(s)

Level 1 Instructors	Office No.: SE 12 418	Office Phone: Cathy Hine	432-8907
	Office Hrs.: See posted hours at instructor's office	Jenifer Bartlett	451-6952
		Lynn Field	451-6954
		Fairleth McCuaig	451-6956
		Selma Whiteside	451-6953
		Susan Rowe-Sleeman	451-6946

Learning Resources

A. Required:

1. Sims, L.K., D'Amico, D., Stiesmeyer, J.K., & Webster, J.A. (1995). *Health Assessment in Nursing*. Meno Park, CA: Addison Wesley.
2. A handbook is also available for the above text. It is handy to have, but not compulsory to purchase.

B. Supplemental:

The following textbooks are compulsory for other courses but will be used as a supplement to NURS 1019.

1. A nursing fundamentals text.

Kerr, J., & Sirotnik, M. (Eds.) (1997). *Canadian Fundamentals of Nursing*. Toronto, ON: Mosby — Yearbook Inc.

OR

DuGas, B.W., Esson, L., & Ronaldson, S.E. (1999). *Nursing Foundations: A Canadian Perspective*, 2nd ed.). Scarborough, ON: Prentice Hall Canada Inc.

2. A medical-surgical nursing text.

Black, J.M., & Matassarin-Jacobs, E. (1997). *Medical-surgical nursing: Clinical management for continuity of care* (5th ed.). Philadelphia: Saunders.

Phipps, W. J., Sands, J. K., & Marek, J. F. (1999). *Medical-surgical nursing: Concepts & clinical practice* (6th ed.) St. Louis: Mosby.

3. A medical dictionary.

Text(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 Schwabach 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	Breasts (view all of tape)	17 mins
VC 5445	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, rebound tenderness and reflexes 13.55–18.10	19 mins
VC 5448	Musculoskeletal System (view all of tape)	28 mins

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 (this may be borrowed from the lab at BCIT)

* 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.*

BCIT Policy Information for Students

1. 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.
2. 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.

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).

Written Assignment Details (Weeks 2, 3 and 4)

Analysis of Assessment Data: Practicum Assignment

Preamble

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 is done weekly in weeks 2, 3 and 4 and is based on assessments completed in assigned practicum areas.

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

1. 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.
3. 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 your final grade for completing the **three** assignments during weeks two, three and four. The third assignment must be satisfactory in order to receive the 20 marks. 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. Assessment finding include: physical and interview data; clustered data; and identification of patient problems.

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?

3. 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.

4. Complete each assignment by reflecting on the process of data collection, analysis and synthesis. Record your thoughts and feelings about the experience and consider what you could do to improve your assessment and analysis skills in practicum.

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.

Demonstration of Assessment Skills

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.



BRITISH COLUMBIA INSTITUTE OF TECHNOLOGY

Health Sciences
Program: Nursing
Option:

Class Schedule

NURS 1019
Clinical Techniques – Introduction to Assessment

Date	Material Covered	Course Site and Rooms
<p>August 17, 1999</p> <p>Common hour</p> <p>Group work</p>	<p>WEEK 1</p> <p>Tuesday</p> <p>Introduction to assessment course</p> <ul style="list-style-type: none">• course delivery methods• course outline• overview of the course <p>Video: The General Survey</p> <p>Health Assessment Process</p> <ul style="list-style-type: none">• purpose of assessment• types of assessment• health assessment and the nursing process• diagnostic reasoning process <p>Establishment of partnerships</p> <p>Reading: Chapters 1 and 2 – see study guide</p> <p>*Please note that your small group in rooms are not the same each week.</p>	<p>BCIT</p> <p>0830–1020</p> <p>SW1–2030</p> <p>1030–1230</p> <p>Gp 1 SW1 3570</p> <p>Gp 2 SW1 2590</p> <p>Gp 3 SW1 3585</p> <p>Gp 4 SW1 2120</p> <p>Gp 5 SE12 418-421</p> <p>Gp 6 SE12 418-422</p> <p>(SE12 421 and 422 are inside SE12 418)</p>
<p>Aug. 18, 1999</p> <p>Common hour</p> <p>Group work</p>	<p>Wednesday</p> <p>Taking a Health History</p> <p>Introduction to Basic Interviewing Skills</p> <p>Holism</p> <p>Health Patterns Assessment</p> <p>Assessment of growth and development (focus on adult stage)</p> <ul style="list-style-type: none">• Assessment of psychosocial health• Assessment of self-care and wellness activities• Assessment of family, culture and environment• Practice and tape an interview <p>Reading: Chapters 4, 5 and 6 – see study guide</p>	<p>BCIT</p> <p>0830–0930</p> <p>SW1 2030</p> <p>0930–1230 and 1330–1530</p> <p>1 SW1 3570</p> <p>2 SW1 2590</p> <p>3 SW1 3585</p> <p>4 SW1 2120</p> <p>5 SE12 418-421</p> <p>6 SE12 418-422</p>

Date	Material Covered	Course Site and Rooms
<p>Aug. 24, 1999</p> <p>Common hour</p> <p>Group work</p>	<p>WEEK 2</p> <p>Tuesday</p> <p>Introduction to physical examination techniques</p> <ul style="list-style-type: none"> • inspection, palpation, percussion, auscultation • video on examination techniques <p>Practice physical examination technique</p> <p>Review guidelines for conducting the general survey</p> <ul style="list-style-type: none"> • documenting findings • measurement of height and weight • omit vital signs (pp. 115–122) • omit gathering equipment (pp. 104–108) <p>Integumentary system (skin, hair and nails)</p> <p>Head (eyes, ears, nose, sinuses, mouth and throat) and neck</p> <p>Mental status exam and focused interview of the neurological system</p>	<p>BCIT</p> <p>0830–0930</p> <p>SW1 2030</p> <p>0930–1130 and 1230–1430</p> <p>Gp 1 SW1 3570</p> <p>Gp 2 SW1 2590</p> <p>Gp 3 SW1 3585</p> <p>Gp 4 SW1 2120</p> <p>Gp 5 SE12 418-421</p> <p>Gp 6 SE12 418-422</p>
<p>Aug. 25, 1999</p>	<p>Wednesday</p> <p>Patient assignment to achieve the following:</p> <ul style="list-style-type: none"> • 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 <p>Hand in a written summary of this assessment</p>	<p>Practicum Placements</p> <p>See Level I Bulletin Board</p>

Date	Material Covered	Course Site and Rooms
<p>Aug. 31, 1999</p> <p>Common hour</p> <p>WEEK 3</p> <p>Tuesday</p> <p>Respiratory and cardiovascular assessment Review location and types of breath sounds</p> <ul style="list-style-type: none">• bronchial, bronchovesicular, vesicular• adventitious sounds (crackles and wheezes) <p>Show video on</p> <ul style="list-style-type: none">• landmarking for breath sounds• listening for breath founds <p>Group work</p> <p>Assessment of respiratory system</p> <ul style="list-style-type: none">• landmarking and listening for breath sounds <p>Assessment of cardiovascular system</p> <ul style="list-style-type: none">• landmarking and listening for apical rate• temperature, pulse, respiration and blood pressure <p>Assessment of the peripheral vascular system (includes the lymphatic system)</p> <p>Skill – T, P, R and blood pressure; auscultate for breath sounds and apical rate</p> <p>Prepare a written guide to assist you in your practice interview</p> <p>Reading: Chapters 7, 10, 11 and 16 – see study guide</p>	<p>BCIT 0830–0930 SW1 2030</p> <p>0930–1130 and 1230–1430 Gp 1 SW1 3570 Gp 2 SW1 2590 Gp 3 SW1 3585 Gp 4 SW1 2120 Gp 5 SE12 418–421 Gp 6 SE12 418–422</p>	
<p>Sept. 1, 1999</p>	<p>Wednesday</p> <p>Patient assignment to achieve the following:</p> <ul style="list-style-type: none">• 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 <p>Hand in a written summary of this assessment</p>	<p>Practicum Placements</p> <p>See Level 1 Bulletin Board</p>

Date	Material Covered	Course Site and Rooms
Sept. 7, 1999	WEEK 4 Tuesday Assessment of the abdomen, urinary system, reproductive system(breast and axilla) and musculoskeletal system <ul style="list-style-type: none"> • landmarking for abdominal sounds • location of bladder for palpation • video on self-breast examination (10 minutes) 	BCIT 0830–0930 TBA
Common hour		
Group work	Assessment of the abdomen <ul style="list-style-type: none"> • auscultate for abdominal sounds Assessment of the urinary system <ul style="list-style-type: none"> • palpate bladder Assessment of the reproductive system <ul style="list-style-type: none"> • focused interview only • practice breast examination on a model Assessment of the musculoskeletal system <ul style="list-style-type: none"> • test muscles and joints for strength, symmetry and ROM 	0930–1130 and 1230–1430 <div style="display: flex; justify-content: space-around;">AMPM</div> Gp 1 SE12 417* TBA Gp 2 SE12 417* TBA Gp 3 SE12 416* TBA Gp 4 TBA SE12 417* Gp 5 TBA SE12 417* Gp 6 TBA SE12 416* *These groups will be working in the lab with the equipment provided.
Sept. 8, 1999	Wednesday Patient assignment to achieve the following: <ul style="list-style-type: none"> • 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
Sept. 14, 1999 Common hour Group work	WEEK 5 Tuesday Tube assessment (general overview) Referral system 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	BCIT 0830–0930 TBA 0930–1130 and 1230–1430 Gp 1 TBA Gp 2 TBA Gp 3 TBA Gp 4 TBA Gp 5 TBA Gp 6 TBA
Sept. 15, 1999	Wednesday Use patient assignment to continue to practice and improve on skills learned in this course	
Sept. 16, 1999	Thursday – Evaluation Day 0830-0920 Multiple Choice Exam 1030-1230 } 1330-1530 } Test demonstration of assessment A schedule for testing will be posted	0830–0920 Town Square A & B SE 12 416/417