

WRIGHT STATE UNIVERSITY  
 MIAMI VALLEY COLLEGE OF NURSING & HEALTH  
**NUR 7802**  
**Fall 2014**

**COURSE NUMBER:** NUR 7802-90

**COURSE TITLE:** Primary Care of Adults

**PLACEMENT IN THE CURRICULUM:** Family Nurse Practitioner Master's Program

**CATALOG DESCRIPTION:** Provides the nurse practitioner with knowledge and skills needed to deliver primary health care to young adults, adults, and older adults through senescence in multiple settings. Emphasizes the application of problem identification and management, health promotion, and client & family counseling. Supervised lab and clinical experiences provide the opportunity to apply classroom and core content.

**PREREQUISITES:** NUR 7801 with minimum grade of C  
 Restrictions: Acceptance to graduate program or permission of instructor

**CREDIT ALLOCATION:** 5 credit hours: 2 hr/week lecture 28 + 168 hrs total clinical

**COURSE LOCATION, CLASS, ASSIGNMENT and EXAM TIMES:**

Date	Time	Activity	Place
August 25-December 5 Internet lectures, power points, DVD, discussion forum, related articles	Asynchronous	Weekly Self-study	PILOT Tegrity
September 19-21, October 17-19, November 7-9, December 5-7	8:00am day1 until 11:00pm day 3	Quiz	Pilot
Case Presentation – Using the Nursing Process ADOPIE as a SOAP note for Critical Thinking	November 14 5:00pm		
December 10th, Wednesday	9:00-11:00	Online Comprehensive Final Exam	Computer lab 009UH
	12:00 - 5:00 PM	Clinical Final exam: Standardized patient (one)	Skills Lab BSOM White Hall WSU Campus

**COURSE FACULTY:**

FACULTY	Office	Phone	Email
<b>Brenda Young DNP RN CNP Course Coordinator Clinical Instructor</b> virtual office hours: Monday 8-9 pm via Pilot Live on campus office hours: by appointment	115 UH	(o) 937-775-3579 (c) 513-257-1575	brenda.young@wright.edu
<b>Trisha Kall MSN, RN, AOCNP Clinical Instructor</b>		(c)937-901-6833 (o)614-293-8912	trisha.kall@wright.edu
<b>Rachelle Richardson, MSN, CNP Clinical Instructor</b>		TBA	
<b>Amy Aguiar MSN, CNP Clinical Instructor</b>		TBA	

CONH Fax

937-775-4571

***Students MUST use their Wright State University email address. You can forward this to your home email. This will be the primary account used for course communication***

**DISABILITY STATEMENT:** Any student with any type of disability (physical, emotional, learning, etc.) is expected to accept responsibility for seeking whatever accommodation is necessary to meet the objectives of the course. *Please see your faculty member at the earliest possible point in the semester to discuss your issues.* Accommodation requests will be discussed among the course faculty, the student, CONH administration, and WSU Disability Services (as needed). Type of accommodation will be determined on an individual basis depending on the nature of the disability and the objectives to be met.

**COURSE OBJECTIVES:**

At the completion of this course, the student will be able to:

1. Establish and maintain professional relationships with faculty, staff, clients, colleagues, and preceptors.
2. Effectively use problem solving skills to address situations & conflicts.
3. Synthesize knowledge of family dynamics and family systems for application to practice with young adults, adults, and older adults.
4. Analyze the major health problems affecting adults.
5. Analyze assessment findings to formulate appropriate differential diagnoses regarding the health of an individual and/or family.
6. Initiate the appropriate health promotion and maintenance strategies for primary, secondary & tertiary prevention of common acute and chronic illnesses of the adult.
7. Analyze the unique concerns of adults and strategies for health maintenance.
8. Explore the Family Nurse Practitioner's role in providing care to adults in nontraditional settings.
9. Analyze ethical, legal, economic, political, social, technological, and environmental issues from a global perspective to influence health care of adults.

10. Apply appropriate research findings in delivery of primary health care with adults.
11. Apply health status, risk reduction, and service and protection objectives targeting young adults, adults, and older adults in clinical practice.
12. Collaborate with other members of the health care team when appropriate.
13. Practice in the role of the nurse practitioner as a member of the health care team.
14. Participate in the management of primary care of adults.
15. Demonstrate responsibility and accountability for maintaining standards in advanced nursing practice with adults.

**TEXTBOOKS:**

**Required:**

Buttaro, T.M., Trybulski, J., Bailey, P.P., Sandberg-Cook, J. (2013). *Primary Care: A Collaborative Approach*, 4<sup>th</sup> ed. Elsevier Mosby, St. Louis.

Ferri, F. (2014). *Ferri's Clinical Advisor 2014*. (2013 edition is acceptable also) Philadelphia, PA: Elsevier. Ferri's is available in print (comes with online access to expert consult.com), e-book (kindle) or can be purchased as an app for Apple, Android or Blackberry at [www.skyscape.com/estore/ProductDetail.aspx?ProductId=2947](http://www.skyscape.com/estore/ProductDetail.aspx?ProductId=2947)

Desai, Samir. (2009). *Clinicians Guide to Laboratory Medicine – Pocket*. 3<sup>rd</sup> ed. MD2B, Houston. (ISBN 9780972556187).

**Optional:**

Chase, S.K. (2004). *Clinical Judgment and Communication in Nurse Practitioner Practice*. Philadelphia, PA: FA Davis.

**TEACHING STRATEGIES:**

Any of the following may be used: email, reading assignments, quizzes, audio-streamed and video-streamed presentations, site visits, and journaling

**COURSE REQUIREMENTS:**

To pass the course, students must:

- Pass both the didactic and clinical components of the course
- Achieve an average of 70% on the written exams

Failure of any of the didactic or clinical components of the course will result in an assignment of an “F” for the course. If the student fails the course and is deemed eligible by the School of Graduate Studies and the College of Nursing and Health to repeat the course, BOTH components must be repeated.

The clinical grade is assigned by the clinical instructor and is earned using these criteria:

Preceptor Evaluation	P/F
Clinical Faculty Evaluation	P/F
Clinical Log	P/F

Clinical Journals	P/F
Submission of all required forms & notes on December 10, 2014	P/F
Verification of Clinical Hours form	P/F

If the student passes the clinical component of the course and achieves a 70% average on the written exams, the grade for the course will be assigned as follows:

Case Presentation	8%	Grading Scale A = 90 - 100% B = 80 – 89.9% C = 70 – 79.9% F = 69.9% and below
Quiz 1	8%	
Quiz 2	8%	
Quiz 3	8%	
Quiz 4	8%	
Final Written Exam- comprehensive	40%	
Final Standardized Patient Exams	<u>20%</u>	
<b>Total</b>	<b>100%</b>	

## COURSE POLICIES

**Students may not begin clinical practice experiences until they have received a clinical clearance pass: please contact:**

**Mrs. Judy Carol Kennedy B.S.N.**

Title: Clinical Coordinator

Type: Staff

Department: College of Nursing & Health Admin

Address: University Hall 109, 3640 Colonel Glenn Hwy

Phone: 937-775-2482

Email: [judy.kennedy@wright.edu](mailto:judy.kennedy@wright.edu)

Or

**Ms. Josie Vicar B.A.**

Title: Program Coordinator

Type: Staff

Department: College of Nursing & Health Admin

Class: Undergraduate Student

Major: Psychology

Address: University Hall 121, 3640 Colonel Glenn Hwy

Phone: 937-775-3954

Email: [josie.vicar@wright.edu](mailto:josie.vicar@wright.edu)

1. The Wright State University policy on academic integrity applies to all work completed for the course. Students are responsible for knowing the university policies on cheating, plagiarism, and all other parts of the Code of Conduct. Assignments are to be completed as an individual effort unless otherwise specified. Cheating on exams or falsifying documents may result in a failure of the assignment or the course. Emails and journal entries are considered legal documents.
2. Tests and assignments will be expected on the date identified unless prior arrangement is made with instructors. Missed tests and late assignments may be graded as “zero,” or a percentage of points may be subtracted for each late day, at the discretion of the faculty member grading the assignment. Make-up tests may be offered at the discretion of the faculty but may be in a different format than the scheduled exam.
3. INSTRUCTOR’S POLICY ON DUE DATES: While no penalty is listed in the syllabus of late assignments/quiz submission, you need to know that these dates are set with a workload management plan. When students run late, it trickles over on to the instructor’s ability to get things done in a timely fashion. You are asked that if you are unable to make a due date that you discuss this with me via email and that it will remain the instructor’s prerogative to give a zero grade for a late assignment/quiz. Email is checked every day Monday-Friday. Do not panic if you do not hear back from your faculty immediately. Consideration will be given based on the date your email is sent to faculty when considering specific situations.
4. Communication
  - a. The course coordinator, Brenda Young, may be contacted through email **brenda.young@wright.edu**, or by cell phone at **513-257-1575**. Please note messages left on **office voicemail** will only be checked on Mondays and Wednesdays and so is not a preferred method of communication. Emails will be returned promptly (within 24 hrs) during business hours (8:00-5:00pm Monday – Friday). Generally emails are not addressed on weekends or holidays.
  - b. Because students will be working at many sites in the community, and because situations in the community change on an hourly basis, contact information for students is crucial. Students will provide current personal contact information (phone & address, next of kin, etc., as requested) to their clinical instructors and are expected to notify their clinical faculty of any changes in phone numbers or addresses. This is a requirement of clinical professional behavior.
  - c. A Pilot course has been set up for NUR 7802. All students registered for the course will have access. Course announcements, emails, grades, handouts, links to references, and notes for clarification of class material will be found in this course.
5. Clinical Policies
  - a. **Students will keep their clinical instructor informed of their clinical schedule at all times.**
    - a. **Students who are unable to be at their clinical site as scheduled must notify BOTH their clinical instructor and the clinical site.**
    - b. **Students may not discontinue the use of their clinical site or add a clinical site without the knowledge and consent of their clinical instructor.** When students need to make rapid decisions about clinical changes, they should email their instructor and label the email as “priority” communication. This type of

communication should never be attached to the end of a journal entry as instructors do not read journal entries on a priority basis.

- b. Students sign their charts at the clinical site with their first initial and last name, RN, WSU FNP student. Students should document information in medical records in accord with the policies and procedures of the agency and only as directed by their preceptor.
- c. Students wear their WSU ID badge which identifies them as a student and a registered nurse at their clinical sites.
- d. Professional dress is expected for clinical experiences. Closed toes shoes are an OSHA requirement in clinical areas.
- e. Students are in their clinical sites as “guests” of the practice, and as representatives of Wright State University. Students are expected to be prompt, to abide by all rules and regulations of the practice site, and to meet the expectations of the practice for clinical care, including staying until the practice closes or working over lunch. They may also be expected to attend presentations, read articles, or present information for a group. It is part of the professional role to embrace these opportunities.
- f. Confidentiality applies to both patient information and practice site information. Under no circumstances will a student discuss any confidential information with anyone other than the clinical instructor.
- g. Students should have their clinical instructor contact information with them in the clinical setting for use in emergencies. If students encounter problems or concerns in the clinical setting, they should contact the clinical instructor to discuss the situation.
- h. Students are expected to gain skills in critical thinking and decision-making in the clinical area. While significant learning can be acquired through observation, students should spend most of their time making assessments and determining an appropriate plan of care.
- i. Students are not expected to provide care without the input of their preceptor. At a minimum, every patient should be presented to the preceptor for advice or consensus regarding the assessment and therapeutic plan.
- j. Students may be asked for additional clarification of either their clinical journals. Students must respond to the faculty within one week of the request. Failure to provide the faculty with the information requested will result in no credit for either the journal for that week.
- k. Students document their clinical hours on the **Verification of Clinical Hours Form**, and have their preceptor sign as indicated. **These forms must be legible and completed fully to receive a pass for Clinical.**
- l. The **Preceptor Evaluation of Student Form** must be completed and signed by the preceptor for the student to receive a grade for the course. Have your preceptor evaluate you, sign the form, place in sealed envelope.

**THESE TWO FORMS MUST BE HAND DELIVERED IN AN ENVELOPE TO BRENDA YOUNG, COURSE COORDINATOR ON FINAL EXAM DAY DECEMBER 10, 2014. DO NOT MAIL, FAX, SCAN OR EMAIL THESE FORMS.**

### **PROGRESSION & GRADUATION POLICIES**

1. Students must apply for graduation using the form available in the School of Graduate Studies in E344 Student Union or online. The application requires a \$35 fee, which may be paid over the phone by credit card. The deadlines for graduation application are:

<b>Graduation Date</b>	<b>Application Deadline</b>
May (Spring Semester)	January 23
August (Summer Semester)	May 22

Note: If the final deadline of any application filing period falls on a weekend, the following Monday will be the actual deadline date. You can access application on the registrar's web page: <http://www.wright.edu/graduate-school/academics/graduating-student#tab=graduate-student-services>.

### **INCOMPLETE CLINICAL POLICY**

Students who are unable to complete the required clinical hours within the semester that they have registered for the class (168 hours for NUR 7802) may – at faculty discretion - be offered the opportunity to complete these hours the following semester. A contract must be drawn up and signed by the student and the course coordinator for this arrangement.

For incomplete clinical hours, the course coordinator is the person who will determine whether the student fails the course or receives permission to finish in the following semester. If the student is progressing satisfactorily and is permitted to complete clinical hours in the following semester, he/she will receive an "M" grade (satisfactory progress) for NUR 7802 until the required clinical hours are completed. After all the clinical hours are completed and if the student meets all the clinical requirements for the course, the "M" will be changed to the letter grade earned. If the clinical hours are not earned in the following semester, the grade earned for the course will be "F" except by prior faculty permission.

### **ASSIGNMENTS:**

#### **1. Case Presentation 8%**

Integration of didactic learning into clinical thinking and decision making is a critical component of an FNP student's education. It is important for both the faculty and the student to be able to objectively evaluate the progression of this integration. Each student will be responsible to write one original case study, written in ADOPIE format (see syllabus page 18) (using only patient initials – no names or identifying information contained). The case should be an actual case that you have come across in your clinicals from which you learned something. Students are to submit the case study on our **Discussion Forum**. **Each student must read all submitted case studies and**

**give constructive, evidence based feedback and comments on at least two case studies.**

Case studies must be ORIGINAL and come from what you have observed in practice. Grading for the assignment will be based on the quality, not simply the quantity. The assignment grading rubric will be available on the Discussion Forum.

## **2. Written Exams – 72%**

Four unproctored, timed quizzes (32%) will be given via Pilot. A Comprehensive timed multiple choice final exam (40%) will be taken in the computer lab (proctored) Students may not access any materials or persons while they are taking any quiz or exam. Students should review the university policy on academic integrity. Cheating on a quiz or exam will result in a zero for that assignment.

## **3. Standardized Patient Exams –20%**

A standardized patient exam takes place over 90 minutes. **You may spend 5 minutes in the hall reviewing the chart.** During the next 25 minutes (30 minutes total), the student interacts with a patient. During the following hour, the student moves to another location, views the DVD of the encounter, completes a student review (of guideline completed on the grading rubric) and writes a traditional SOAP note for the encounter. The SOAP note, student review, and DVD are submitted at the end of the 90 minutes. Each student will perform **one** standardized patient exam at the final exam.

### **Encounter**

- a. The exams are video recorded. The furniture in the room has been arranged for maximum viewing of the encounter and should not be moved.
- b. One standardized patient will be examined during the course of the final exam. The patient is encountered as though “new” to the student even if the student has met the individual portraying the patient in previous exams.
- c. During the 30 minute encounter (includes a maximum of 5 minutes in the hall reviewing the chart), the student is expected to;
  - i. obtain a health history,
  - ii. perform a physical exam,
  - iii. provide appropriate health promotion & health maintenance activities,
  - iv. make a diagnosis,
  - v. develop a management plan for the identified health issue(s), and
  - vi. explain both the diagnosis and plan to the patient.
- d. The management plan should include, as appropriate
  - i. lab & imaging tests,
  - ii. medications,
  - iii. patient education,
  - iv. instructions to ancillary staff, and
  - v. referrals.
- e. A blank prescription pad will be placed on a table outside of the exam room for students to write prescriptions & orders. The signed prescription, if any, should be submitted with the client documentation (SOAP note) at the end of the exam.



- f. If the patient has been instructed about an abnormal finding and the student examines that body system, the patient will give the student a card with information about the abnormal finding. The card will not be provided unless the student examines the body system correctly.
- g. The 30-minute time period begins when the student receives the patient's chart for review. A digital timer placed on the table outside the exam room will reflect the number of minutes remaining. When the timer sounds the end of the exam period, the student must leave the exam room.
- h. Students may leave the room during the exam period, but the clock is not stopped.
- i. Students may bring any books or materials that they think will be helpful but these materials must be left outside the room. Students may take one index card with notes into the room, if they wish to do so.
- j. Communication with the patient - such as introductions, asking one question at a time, focusing on the patient's concerns & questions, and terminating the encounter – is evaluated as part of the grade for the exam. Specifically, these are the criteria being evaluated:
  - i. Interviewer introduces self and defines roles (lab coat and good grooming suggested).
  - ii. Open-ended questions are used appropriately
  - iii. Direct questions are used appropriately
  - iv. Seating, distances & body language of interviewer is culturally appropriate
  - v. Interviewer responds to client's nonverbal cues appropriately
  - vi. Appropriate clarification is sought when answers are unclear or imprecise or when client uses medical terminology
  - vii. Interviewer uses silence, facilitation, confrontation, etc., appropriately to encourage client responses.
  - viii. Interviewer demonstrates listening skills by reflecting and responding to patient's verbal communication
  - ix. Interviewer avoids using:
    - Multiple questions at one time
    - "Why" questions
    - Suggestive or leading questions
    - Medical terminology unless appropriate for the patient
  - x. Interviewer maintains primary control of the interview
  - xi. Interview is concluded by asking if there are any questions or if there is anything else the client would like to say.
- k. At the end of the 30 minute time period, the student exits the exam room area and picks up the DVD of the encounter (along with a self critique form).

### **Video Review/SOAP Note**

The student moves to an assigned area to view the DVD, complete the student review (grading rubric) form, and write the SOAP note. Students may use any materials accessible to them in that assigned area but may not consult with other students or any other person/patient. Internet access is not permitted. Students may use the computer lab to type the note, and print the note. Accessing the Internet or receiving/requesting assistance from a person is considered cheating. The SOAP note, all papers/forms, and the DVD must be returned to the faculty outside the video room within 60 minutes. One point is deducted for each five minutes (or any portion of five minutes) that the materials are late.

The SOAP note provides documentation of the student's findings and decisions, and should not include references to actions not taken (except as part of the plan to perform this activity at a subsequent visit). The SOAP note should include a list of prioritized patient problems and information about anticipatory guidance given or planned.

Attached to your SOAP note you may identify errors or areas of improvement related to the Standardized patient exam. These may include communication issues misdiagnoses assessment omissions treatment plans and patient education information.

### **Evaluation by faculty**

The exam DVD's, the SOAP notes, and any supporting documentation are reviewed by faculty, who evaluate the student's performance in communication, assessment, and management according to a rubric that will be posted to our PILOT website.

## **4. Clinical Assignments – Pass/Fail**

Students complete 168 hours of clinical experience with an assigned preceptor. This semester the deadline for completing clinical hours is **Friday, December 5** unless other arrangements have been made with the faculty.

Each student is assigned a WSU clinical instructor to supervise the clinical experience. The clinical instructor evaluates the student's practice through student journal entries, clinical records, phone appointments and site visits.

### **Journal and Log:**

The journal and log are two accounts of learning during the semester and are submitted by dropbox in excel chart and/or word document form. The journal and log forms are available on the course website. Each student will submit TEN (10) clinical journal entries over the term of the course. The journal and log are ongoing documents, with each week's information added to the previous entries in the charts. The student must submit each journal and log entry by Monday in the week following the clinical experience. Late journal entries are accepted only by permission of the clinical faculty. Failure to submit journals on time may result in failing the course. The first journal entry is due **no later than Monday, September 15**.

The **Log** gives an objective account of hours & progress. The **Journal** provides subjective documentation of reflection on clinical experiences that illustrate clinical decision-making and professionalism.

### **Log**

Document in the log for every patient encounter on all clinical days, even if observation. In the column for types of encounters enter a "1" if that description is applicable to your experience. So you will have many columns blank if they do not pertain to that particular patient. At the end of the quarter you can total these columns so you will know not just how many different patients you were able to see but the specific type of management situation was involved.

This does not have to be exact – i.e. if you miss a patient or to in your entries but this information while not only providing feedback to your clinical instructor on the quality of your experience will allow you to have quantitative information for your portfolio related to your overall clinical experience. For example, when be interviewed for a position, it is nice to be able to say, yes, during my experience I saw over X number of patients per day and this was the type of situations seen.

DATE STUDENT NAME: Terry FNP

Age	Gender	Diagnosis(es)  ICD (code and dx)	Client Complexity					Student Complexity					Clinical records- total # entered	Observation hours this week #	Clinical hours this week #	Total Clinical hours including observation #
			Wellness/ Health Promotion	Episodic (Acute)	Single Chronic/ Controlled	Single Chronic/ Uncontrolled	Multiple Chronic -Controlled	Multiple Chronic - uncontrolled	All Student	Mostly student	Joint Care	Much Help				
2-Sep	1 F		1										1	1	2	3
5-Sep	7 M				1			1					1		3	3
<b>TOTAL</b>			<b>1</b>	<b>1</b>			<b>1</b>						<b>1</b>	<b>1</b>	<b>5</b>	<b>6</b>

**Journal**

Document in the journal columns specific to the headings. These entries must be submitted 8 times during the semester.

Week No.	Give an example of your patient interaction from this week's clinical	Explain what your primary focus has been this week in the clinical setting	Give an example of your interaction with your preceptor from this week's clinical	Discuss a <b>health care concern</b> that you worked with at your clinical site	List a website that offers evidence-based practice information that addresses this health concern
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**Health concerns** for analysis may include legal, ethical, or medical issues. The website provided by the student should be one that provides evidence-based information for the patient and/or provider.

**Site Visits**

Site visits are scheduled once or twice per student per semester, depending on individual circumstances. For the site visit, the clinical instructor will be at the clinical site and will need to observe the student with **two patients**. Students are responsible for notifying the preceptor of the instructor's planned visit. When the faculty arrives, the student should introduce the clinical instructor to the preceptor and orient the faculty member briefly to the site. Prior to leaving the site visit, the clinical instructor will try to take a few minutes with the preceptor to discuss the student's progress. The student's ability to establish patient rapport, maintain infection control measures, use therapeutic communication skills, collaborate with the preceptor, gather the patient history, perform the patient's physical examination, formulate diagnosis and plan, accurately document the patient encounter, and provide patient education are all noted during the site visit.

Site visits will most often be made on a date and time arranged in advance by the student and the clinical faculty. However, site visits without prior notification of the student sometimes occur due to schedule changes or circumstances not known in advance.

### **Clinical Evaluation**

Students are required to discuss their clinical progress with their preceptor and their clinical instructor at midterm using the same criteria the preceptor and faculty will use for the final evaluation (see Faculty and Preceptor Evaluation Tool).

Students must be successful in both didactic and clinical to pass the course. To successfully pass clinical the student must do the following:

1. achieve an average of a 80% on the standardized patient exam;
2. receive a satisfactory evaluation from the preceptor;
3. receive a satisfactory evaluation from the clinical faculty;
4. input patient data into the Clinical Log;
5. submit all 10 clinical journal entries; and
6. submit the "Verification form for Student Clinical Hours"

Students are required to document all of their clinical hours on the clinical hours verification form. The preceptor should initial the form at the end of each week and sign the back of the form at the end of the quarter. Misrepresentation of clinical hours or falsification of patient encounters will result in automatic failure of NUR 7802 and review by the Office of Judicial Affairs for determination of continuation in the College of Nursing & Health.

## COURSE SCHEDULE: NUR 7802 PRIMARY HEALTH CARE OF YOUNG ADULTS, ADULTS, & OLDER ADULTS

These reading assignments are given as a beginning point for students in their study of the assigned topics. Additional reading may be suggested by faculty during presentations, and students are expected to access updated evidence-based practice guidelines on the Internet, or by using Ferri or another EBP tool.

DATE	TOPIC	READING
Week 1 August 25	ORIENTATION, REVIEW OF SYLLABUS BILLING & CODING PRINCIPLES OF PRIMARY CARE  ACCESS TEGRITY FOR AUDIO	<p><b>Required:</b></p> <p><b>Buttaro et al. (2013). Part 1 Introduction p. 1-48. Part 3 Health Maintenance p. 105-183.</b></p> <p><b>Posted in PILOT:</b></p> <p><b>Buppert.</b> Legal Considerations, Red Flags DO NOT MISS, 10 habits to avoid prescribing errors</p> <p><b>Frakes &amp; Evans.</b> An overview of Medicare reimbursement regulations for advanced practice nurses.</p> <p><b>Hannigan.</b> Blowing the whistle on healthcare fraud.</p> <p><b>Sullivan-Marx.</b> Lessons Learned From Advanced Practice Nursing Payment</p> <p><b>Miller, W.</b> Motivational Interviewing IV: Some parallels with Horse Whispering</p> <p><b>Video: In Sickness and Wealth</b></p>
Week 2 September 1	RESPIRATORY PROBLEMS  ACCESS TEGRITY FOR AUDIO	<p><b>Required:</b></p> <p><b>Buttaro et al. (2013): Part 10 Evaluation and Management of Pulmonary Disorders p. 404- 486.</b></p> <p>Optional Readings Posted in PILOT: Uniformed Services University of the Health Sciences. <a href="http://rad.usuhs.mil/rad/chest_review/index.html">http://rad.usuhs.mil/rad/chest_review/index.html</a></p> <p>National Guideline Clearinghouse- TB <a href="http://www.guideline.gov/content.aspx?id=8993">http://www.guideline.gov/content.aspx?id=8993</a></p> <p>National Guideline Clearinghouse- COPD <a href="http://www.guideline.gov/content.aspx?id=15494">http://www.guideline.gov/content.aspx?id=15494</a></p> <p>COPD Diagnosis and Management at a glance- GOLD initiative <a href="http://www.goldcopd.org/guidelines-copd-diagnosis-and-management.html">http://www.goldcopd.org/guidelines-copd-diagnosis-and-management.html</a></p> <p>COPD Foundation <a href="http://www.copdfoundation.org/MedicalProfessionals/ManagementGuidelines/tabid/95/language/en-US/Default.aspx">http://www.copdfoundation.org/MedicalProfessionals/ManagementGuidelines/tabid/95/language/en-US/Default.aspx</a></p> <hr/> <p><b>Adult Treatment Guidelines: Upper Respiratory Tract Infections</b> <a href="http://www.cdc.gov/getsmart/campaign-materials/adult-treatment.html#b">http://www.cdc.gov/getsmart/campaign-materials/adult-treatment.html#b</a></p> <hr/> <p>Antibiotic prescribing for discoloured sputum in acute cough/lower respiratory tract infection. <a href="http://erj.ersjournals.com/content/38/1/119.full.pdf+html">http://erj.ersjournals.com/content/38/1/119.full.pdf+html</a></p>

<p>WEEK 3 SEPTEMBER 8</p>	<p>CARDIOVASCULAR PROBLEMS</p> <p>ACCESS TEGRITY FOR AUDIO</p>	<p><b>Required:</b> <b>Buttaro et al (2013). Part 11 Evaluation and Management of Cardiovascular Disorders p. 487-611.</b></p> <p><b>Scordo, K.S., Pickett, K.A. (2014). Hypertension in 2014: Making sense of the guidelines. <i>The Nurse Practitioner</i> 39 (6), 18-28.</b></p> <p>Optional Readings Posted in PILOT: McCannon. Evaluation of heart murmurs in the elderly. Martensson et al. Patients with heart failure in primary health care. Frost &amp; Topp. A physical activity RX for the hypertensive patient. Onusko. Diagnosing secondary hypertension. Appel et al. Central obesity &amp; the metabolic syndrome.</p>
<p>WEEK 4 SEPTEMBER 15</p>	<p>GASTROINTESTINAL PROBLEMS</p> <p>ACCESS TEGRITY FOR AUDIO</p>	<p><b>Required:</b> <b>Buttaro et al (2013). Part 12 Evaluation and Management of Gastrointestinal Disorders p. 612-722.</b></p> <p>Optional Readings Posted in PILOT</p>
<p>FRIDAY- SATURDAY- SUNDAY SEPTEMBER 19-20-21</p>	<p><b>QUIZ 1</b></p>	<p><b>8:00am day 1 – 11:00pm day 3</b></p>
<p>WEEK 5 SEPTEMBER 22</p>	<p>HEMATOLOGIC AND ONCOLOGIC PROBLEMS</p> <p>ACCESS TEGRITY FOR AUDIO</p>	<p><b>Required:</b> <b>Buttaro et al (2013). Part 18 Evaluation and Management of Hematologic Disorders p. 1139-1181, Part 21 Evaluation and Management of Oncologic Disorders p. 1298-1322.</b></p> <p><b>Optional:</b> Optional Readings Posted in PILOT</p> <p>Anemia <a href="http://www.cdc.gov/nutrition/everyone/basics/vitamins/iron.html">http://www.cdc.gov/nutrition/everyone/basics/vitamins/iron.html</a></p> <p>Sickle Cell disease <a href="http://www.cdc.gov/ncbddd/sicklecell/index.html">http://www.cdc.gov/ncbddd/sicklecell/index.html</a></p> <p>Sickle Cell Anemia <a href="http://www.nlm.nih.gov/medlineplus/ency/article/000527.htm">http://www.nlm.nih.gov/medlineplus/ency/article/000527.htm</a></p>
<p>WEEK 6 SEPTEMBER 29</p>	<p>ENDROCRINOLOGIC PROBLEMS</p> <p>ACCESS TEGRITY FOR AUDIO</p>	<p><b>Required:</b> <b>Buttaro et al (2013). Part 17 Evaluation and Management of Endocrine and Metabolic Disorders p. 1055-1138.</b></p> <p><b>Cofer-Chase, L. (2014). Implementing New Guidelines: Changing Paradigms for the Prevention of Cardiovascular Events. <i>The Journal for Nurse Practitioners</i>, 10 (5). P 293-301.</b></p> <p>Optional Readings Posted in PILOT</p>

WEEK 7 OCTOBER 6	GENITOURINARY PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 13 Evaluation and Management of Genitourinary Disorders p. 723-793.</b>  Optional Readings Posted in PILOT
WEEK 8 OCTOBER 13	MUSCULOSKELETAL PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 15 Evaluation and Management of Musculoskeletal and Arthritic Disorders p. 887-983.</b>  <b>Optional:</b> Optional Readings Posted in PILOT  National Institutes of Health, Osteoporosis and Related Bone Diseases National Resource Center webpage at <a href="http://www.osteoporosis.gov">http://www.osteoporosis.gov</a>  National Osteoporosis Foundation webpage at <a href="http://www.nof.org">http://www.nof.org</a>  Management of Osteoporosis <a href="http://www.guideline.gov/content.aspx?id=3876">http://www.guideline.gov/content.aspx?id=3876</a>  Clinical Practice Guideline for Osteoporosis screening and treatment <a href="http://www.mahealthcare.com/practice_guidelines/Osteoporosis.pdf">http://www.mahealthcare.com/practice_guidelines/Osteoporosis.pdf</a>
FRIDAY – SATURDAY – SUNDAY OCTOBER 17- 18 -19	<b>QUIZ 2</b>	<b>8:00am day 1– 11:00pm day 3</b>
WEEK 9 OCTOBER 20	NEUROLOGICAL PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 16 Evaluation and Management of Neurologic Disorders p. 984-1054.</b>  Optional Readings Posted in PILOT
WEEK 10 OCTOBER 27	DERMATOLOGIC PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 5 Evaluation and Management of Skin Disorders p. 227-312.</b>  Optional Readings Posted in PILOT

WEEK 11 NOVEMBER 3	RHEUMATIC AND MULTISYSTEM DISORDERS, INFECTIOUS DISEASE PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 19 Evaluation and Management of Rheumatic and Multisystem Disorders</b> <b>Part 20 Evaluation and Management of Infectious Diseases</b> <b>p. 1182-1297</b>  Optional Readings Posted in PILOT
FRIDAY – SATURDAY – SUNDAY NOVEMBER 7- 8 - 9	<b>QUIZ 3</b>	<b>8:00am day 1 – 11:00pm day 3</b>
WEEK 12 NOVEMBER 10	OPHTHALMOLOGIC, EAR, NOSE, THROAT PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 6 Evaluation and Management of Eye Disorders,</b> <b>Part 7 Evaluation and Management of Ear Disorders</b> <b>Part 8 Evaluation and Management of Nose Disorders</b> <b>Part 9 Evaluation and Management of Oropharynx Disorders</b> <b>p. 313-403.</b>  Optional Readings Posted in PILOT
WEEK 13 NOVEMBER 17	PSYCHIATRIC PROBLEMS  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Buttaro et al (2013). Part 22 Evaluation and Management of Mental Health Disorders p. 1323-1365</b>  Optional Readings Posted in PILOT  <b>Feinstein. Personality disorders in the primary care setting. CR</b> <b>USPSTF. Screening for depression. CR</b>
WEEK 14 NOVEMBER 24	HAPPY THANKSGIVING	Count your blessings one by one – count your blessings til the day is done! See Tribute to NPs worldwide posted in PILOT Content
WEEK 15 DECEMBER 1	COURSE WRAP UP HERBAL SUPPLEMENTS AND COMPLEMENTARY THERAPY APPROACH TO FRAILTY IN OLDER ADULTS LIFESPAN ISSUES OFFICE EMERGENCIES  ACCESS TEGRITY FOR AUDIO	<b>Required:</b> <b>Required:</b> <b>Buttaro et al (2013). Part 2 Primary Care: Adolescence Through Adulthood p. 49-104</b> <b>Part 4 Office Emergencies p. 184-226</b>  Optional Readings Posted in PILOT  Lawhorne. Care of the older adult in the office setting. Robertson & Montagnini. Geriatric failure to thrive. Tinetti et al. Potential pitfalls of disease-specific guidelines for patients with



		<p>multiple conditions.</p> <p>Office Management of Chronic Pain in the Elderly.  <a href="http://journals.ohiolink.edu/ejc/pdf.cgi/Weiner_Debra_K.pdf?issn=00029343&amp;issue=v120i0004&amp;article=306_omocpote">http://journals.ohiolink.edu/ejc/pdf.cgi/Weiner_Debra_K.pdf?issn=00029343&amp;issue=v120i0004&amp;article=306_omocpote</a></p> <p>CDC- Older Drivers  <a href="http://www.cdc.gov/Features/OlderDrivers/">http://www.cdc.gov/Features/OlderDrivers/</a></p> <p>Older Drivers, Elderly Driving, Seniors at the Wheel.  <a href="http://www.smartmotorist.com/traffic-and-safety-guideline/older-drivers-elderly-driving-seniors-at-the-wheel.html">http://www.smartmotorist.com/traffic-and-safety-guideline/older-drivers-elderly-driving-seniors-at-the-wheel.html</a></p> <p>Senior Driving- Safety tips, warning signs, and knowing when to stop.  <a href="http://www.helpguide.org/elder/senior_citizen_driving.htm">http://www.helpguide.org/elder/senior_citizen_driving.htm</a></p>
FRIDAY – SATURDAY – SUNDAY DECEMBER 5- 6 - 7	QUIZ 4	<b>8:00am day 1 – 11:00pm day 3</b>
WEEK 16 WEDNESDAY DECEMBER 10	Comprehensive Final exam 9:00am- 11:00am Standardized patients 12:00-5:00pm	Have a Wonderful Holiday Season! Enjoy your family and friends!

Using The Nursing Process – ADOPIE - as a SOAP NOTE in  
 Critical Thinking and Management of the Young Adult, Adult, or Older Adult

Assessment <ul style="list-style-type: none"> <li>• Subjective</li> <li>• Objective</li> </ul>	
Diagnosis <ul style="list-style-type: none"> <li>• Problem list</li> <li>• Differentials</li> <li>• Diagnosis with ICD 9 codes</li> </ul>	
Outcome Identification <ul style="list-style-type: none"> <li>• What is the desired outcome (include population level)?</li> <li>• Goal?</li> <li>• What does the evidence say?</li> </ul>	
Plan <ul style="list-style-type: none"> <li>• Management</li> </ul>	
Implement <ul style="list-style-type: none"> <li>• Put the plan into action</li> </ul>	
Rationale <ul style="list-style-type: none"> <li>• State the scientific reason(s) for your plan and implementation (include citations)</li> </ul>	
Evaluation <ul style="list-style-type: none"> <li>• Formative? Summative?</li> <li>• Was the outcome reached (include population level)?</li> <li>• Did the plan work?</li> </ul>	

Due in Dropbox November 14<sup>th</sup> 5:00pm 8% of grade. Use this form to guide your critical thinking.



## VERIFICATION FORM FOR STUDENT CLINICAL HOURS

Course: NUR						Qtr:				
Name of Student:						Clinical Instructor:				
Wk	Week/Date	Mon Hrs	Tue Hrs	Wed Hrs	Thu Hrs	Fri Hrs	Sat Hrs	Wk Total	Preceptor Signature	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
<b>TOTAL HOURS</b>						Observation hrs: 8 allowed (attendance at professional meeting or clinical observation)			GRAND TOTAL: _____	

**Please print!**

Preceptor Name:	Total Hours
Site Name:	Site Address:
Preceptor Signature:	Date:
Preceptor Name:	Total Hours
Site Name:	Site Address:
Preceptor Signature:	Date:
Preceptor Name:	Total Hours
Site Name:	Site Address:
Preceptor Signature:	Date:
Preceptor Name:	Total Hours
Site Name:	Site Address:
Preceptor Signature:	Date:
Preceptor Name:	Total Hours
Site Name:	Site Address:
Preceptor Signature:	Date:
Preceptor Name:	Total Hours
Site Name:	Site Address:
Preceptor Signature:	Date:

**STUDENT: Please return ORIGINAL to Brenda Young on Final Exam day**



## FACULTY AND PRECEPTOR EVALUATION OF STUDENT

Student's Name		Course				
Preceptor's Name		Date				
<b>Select the descriptor at right that best describes your thoughts</b>		Superior	Above Average	Average	Below Average	Not able to Evaluate
<b>This student:</b>		1	2	3	4	5
1	Elicits a meaningful health history					
2	Performs an accurate and methodical physical examination					
3	Select portions of the physical exam are appropriate and flow from the patient history					
4	Synthesizes objective and subjective data to arrive at differential diagnoses/hypotheses					
5	Employs appropriate diagnostic/laboratory studies to complete the data base and/or confirm hypotheses					
6	Appropriately interprets results of diagnostic tests					
7	Appropriately formulates/updates patient progress notes					
8	Distinguishes and prioritizes patient care between immediate needs and less immediate needs					
9	Establishes rapport with patients					
10	Introduces self to patient					
11	Uses therapeutic communication techniques					
12	Takes appropriate infection control precautions					
13	Selects appropriate management regimen					
14	Selects appropriate medications					
15	Distinguishes indications / contraindications for procedures					
16	Initiates appropriate health maintenance therapy (nutrition, skin care, OT, PT, etc.)					
17	Makes appropriate referrals / consultations					
18	Initiates health teaching to promote, maintain or restore health					
19	Interprets results of therapeutic efforts and continues and/or modifies therapeutic regimen as required					
20	Uses the medical record system to record concise, relevant, complete data					
21	Effectively works as a member of the health care team					
22	Assumes a collaborative role with preceptor					
23	Assumes accountability of actions					
24	Legally protects self and patients in the delivery of health care and in problem-oriented medical record keeping					
25	Maintains ethical standards					
26	Assumes responsibility for defining the NP role for patients, physicians, nurses & other health team members					
27	Formulates and functions within an appropriate scope of practice					
28	Appropriately utilizes preceptor consultation and seeks additional consultation as needed					
29	Integrates research findings into plan of care and shares findings with other health team members					
30	Practices self evaluation in order to identify areas for improvement					
31	Wisely selects and seeks learning experiences in an effort to increase skills and improve areas of weakness					
<b>OVERALL: I would rate this student's performance</b>						
Comments may be written below or on the back of this form						
Preceptor Signature					Date	