Gonzaga University Department of Nursing Master of Science in Nursing Family Nurse Practitioner Fall 2014

Course Title: NURS 635 Primary Care Concepts I

Credits: Credits

Place/Time: Online Course

On-Campus Dates:

Saturday and Sunday: 10/4 & 10/5 Saturday & Sunday: 11/22 & 11/23

Prerequisites: NURS 600, 523 & 524

Faculty: Denise Ogorek MSN, ARNP

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Telephone or Skype appointments by request

24/7 Help Desk

Blackboard and Technical Support

1-866-748-1155

Department of Nursing

800-793-1715 or 509-313-5542

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Course Description:

Introductory course for MSN students enrolled in the Family Nurse Practitioner Option. Focus of the course is on the development of knowledge about the Family Nurse Practitioner Role. Emphasis is on the role of the FNP in the care of individuals throughout the lifespan who present with select common and acute health problems in the primary care setting. The importance of performing comprehensive advanced-level health assessments, use of diagnostic reasoning, and the selection of appropriate diagnostic tests and pharmacologic and non-pharmacologic therapies is stressed. Incorporates content related to health promotion, family health, and practice management.

Prerequisites: NURS 600, 523 and 524

Course Objectives:

At the completion of the course, students will be able to:

Students will be able to obtain a focused history, conduct a focused physical exam, develop a differential diagnosis provide and plan current, evidence-based care for commonly seen acute health care problems in the HEENT, Pulmonary, Genitourinary, Musculoskeletal systems. Students will be able to select therapeutic agents and anticipate potential side effects or adherence issues for each of these systems.

Students will be discuss appropriate well child exam, immunization needs and health screening needs identified for a pediatric or adolescent patient seen in the clinical setting and discuss recommended preventative implications for this patient. The recommendations should be reconciled with patient preferences.

Students will be able to obtain and analyze a family history to determine if the family should be referred for genetic services.

Students will be able to discuss unusual characteristics that suggest a genetic abnormality.

Students will be able to discuss what observations a FNP might make during the course of a person's life that would lead them to conclude that a genetic consultation is appropriate.

Students will be able to describe the basis for, and significance of genetic tests that may be used in a primary care setting (ie PKU, congenital hypothyroid testing).

Course Requirements & Grade Computation:

Assignment	Point Value	Due Dates see course calendar
Discussion Board	10 points each,	Weekly
Activities (9)	90 points total	
Study	20 points each,	See calendar for due dates
Assignment/Quizzes (5)	100 points total	
Individual Quiz (6)	5 points each,	See calendar for due dates
	30 pts total	
Exam 1	50 points	First required campus visit
Exam 2	50 points	Second required campus visit
Professional	35 points	Ongoing
Performance		
Total points	355 points	

All Assignments must be completed and meet grade requirement that is expected of a graduate student to pass the course. Failure to complete assignments will result in an F for the course.

Grading Scale:

The following scale will be used to assign letter grades for this course:

95 – 100%	= A	= 4.0	
92 – 94.99%	= A-	= 3.7	
89 – 91.99%	= B+	= 3.3	
85 – 88.99%	= B	= 3.0	
82 - 84.99%	= B-	= 2.7	
79 – 81.99%	= C+	= 2.3	
75 – 78.99%	= C	= 2.0	
72 – 74.99%	= C-	= 0.0	Accomplishment below that expected of a graduate student. Student must repeat any Nursing course with an earned grade less than a C Graduate students must maintain a cumulative GPA of 3.0 or higher in order to graduate.
69 – 71.99% 65 – 68.99% Below 65%	= D+ = D = F	= 0.0 = 0.0 = 0.0	

All Department of Nursing and University academic standards apply. These are detailed in the DNP Student Handbook and the university graduate catalogue.

Required Texts and Readings:

	N605/635 Texts REQUIRED	
Title, Date	Foley Library?	Author(s)
Pediatric Primary Care, 4th Ed., 2008 Elsevier Health Sciences ISBN-13: 9781416040873	Mosby's Nursing Consult	Burns, C., Brady, M., Blosser, C., Starr, N. B., Dunn, A.
Primary Care: A Collaborative Approach, 3rd Ed, (2008) Elsevier Health Sciences ISBN-13: 9780323047425	Mosby's Nursing Consult	Buttaro, T., Trybulski, J., Bailey, P., & Sandberg-Cook, J.
Clinical Gynecologic Endocrinology and Infertility, 8th Ed. (2011). Lippincott Williams and Wilkins ISBN-13: 9780781779685	No. (Will need in 606)	Speroff, L & Fritz, M.
Color Atlas & Synopsis of Clinical Dermatology 6 th ed. (2009) McGraw-Hill Professional Publishing ISBN-13: 9780071599757	No.	Fitzpatrick & Wolff
Essentials of Musculoskeletal Care, 4 rd ed.	No.	Sarwark, J.F.

(2010) American Academy of Orthopaedic	
Surgeons	
ISBN-13:9780892035793	

RECOMMENDED TEXTS/PDA DOWNLOADS/RESOURCES: (some of these are not available through the Foley Library, and need alternative access routes).

Title, Date	Author(s)	Access
EMRA antibiotic guide	EMRA	http://www.emra.org/emra_bookstor
		<u>e.aspx?id=34270</u>
Netter's Concise Atlas of Orthopedic	Thompson, J.C.	
Anatomy (2001)		
Elsevier Health Sciences		
ISBN-13: 9781416059875		
Any Laboratory Medicine and Diagnostic	No	
Imaging resource		
Epocrates.com	Epocrates, Inc.	http://www.epocrates.com/
Tarascon Pocket Pharmacopoeia		Tarascon Publishing: Loma Linda, CA
		Pocket size and palm formats also
		available
		http://www.tarascon.com/index.php

A few of the useful texts in this course can be found in the Foley Library, which you have full access to during your program and after you graduate. Therefore, you do not need to purchase unless you desire a copy.

Basically, you need a solid differential diagnosis reference in the following areas:

Pediatrics, Primary Care, Dermatology, Musculoskeletal. Those listed below are highly recommended.

To find the texts at Foley Library, please follow these steps:

- 1. Sign into Foley Library: http://www.gonzaga.edu/Academics/Libraries/Foley-Library
- 2. Under Research Guides, choose Nursing & Medicine under the heading Research Guides.
- 3. Choose Mosby's Nursing Consult,
- 4. Choose Books from the Left Upper corner Search screen, and then free text the name of the book.

There are web-based, evidenced-based resources available to you. Please access these from the BB Course.

UP to Date Online

MD Consult

Topical Outline:

There are 8 modules that cover course content through review of the most current clinical guidelines and information available for the content area and may include power point slides/outlines, DVDs, webcasting and tutorials. See individual modules.

- For modules 1-7, there are study assignments and a brief quiz to complete on Blackboard.
- For Modules 1-8 there are discussion board activities to complete.

Module: Role Transition
Module: Acute HEENT
Module: Acute Pulmonary
Module: Acute Genitourinary

Module: Acute and Chronic Dermatological

Module: Acute Musculoskeletal:

Module: Well Child and Adolescent screening, prevention and family issues. Module: Review of genetic issues encountered in the primary care setting.

Teaching Methods:

Throughout the course, students will complete learning activities included within structured modules. Successful completion of modules involves various activities as described below.

Students will consider content from required texts and provided articles to enhance their understanding of the concepts presented in each module. A variety of activities will be used to evaluate students' understanding of the content in each module. Additional detail will be available about all modules on Blackboard.

Study Assignments:

There are required **study assignments** to complete for modules. These activities have been designed to facilitate your understanding of the material and to stimulate your critical thinking ability. To complete these, download the study assignment and work on the answers as you study the material. These are open book...and you can work with your classmates if you desire.

Once you are satisfied with your answers, you will access the quiz section on Blackboard and input your answers. You can take the quiz any time prior to the due date, with one attempt only. Quiz grades and answers will be available after the due date.

Quizzes:

Most weeks there will also be an individual case study **quiz**, where you will work on your own. Each week will cover the content for the week. This brief (15 minute timed) quiz will ask you management questions on the particular case. The caveat is that you will have a time limit. The object is to think quickly and to answer questions that may arise just like in real practice. You will be allowed to access your texts, your palm pilot, or any references you would like, just like you would in clinic. However, you are timed in your responses, so that you won't have all day to work on just one patient, similar to when you are working as an NP and the next patient is waiting to be seen.

One of the best things I can teach you is how to find your resources quickly so you can function efficiently in the clinical setting.

Discussion Board:

Discussions are graded by your participation. Directions for each discussion will be posted in each module. Some discussions are group based, where you work with your group over the week. Some discussions are individually based, where you will work independently. Some discussions require that you post also in discussions other than your own. Please review the instructions for each module for specifics.

All discussion posts are graded on substantial input and involvement. Your substantial posts to another group should demonstrate your review of that group's discussion, with a question or feedback that prompts further input or another viewpoint on that group's post.

Grading of these discussion activities will be based on your attentiveness and participation throughout each case study. (posting something only at the end of the week does NOT reflect active participation, and will graded appropriately!)

I expect your involvement, as well as substantive discussion. Work with each other to politely question whether a certain diagnosis is truly indicated, or whether the management of the patient should be done differently. Remember that the goal is to learn in a respectful manner, and although debate is healthy, do so in a professional and courteous manner. As well, I will be looking for your posts to include the rationale for your decisions. Include guidelines or references that you used as you explain our decision making process. I'm looking for evidenced based practice.

Please be aware that to meet participation credit for your discussions, you must discuss the case within the discussion forum. No outside discussions (skype, phone calls or virtual conferences) are allowed for group discussions. This allows me to see what your thinking is for the case, allows me to interject thoughts and feedback, and allows other groups to post a reply to you in your group.

Grading Criteria for Blackboard Postings

Timeliness		
1 Point	0.5 Points	0 Points
Posts both original contribution and response(s) to peers by the required deadlines or has requested an extension at least 24 hours in advance of the deadline (unless there is a true emergency).	Posts either the initial contribution or the response(s) to peers after the deadline.	Is late posting both the initial contribution and the response(s) to peers.
Integration of Module Content in	Posting	
4 Points	2-3 Points	
Integrates and applies module content to the discussion and cites appropriate sources to indicate which readings informed your thinking. Addresses all discussion	Somewhat integrates and applies module content to the discussion. May fail to cite sources that informed your thinking. May only address some of the questions in posting.	States an opinion, but there is minimal integration and application of module content to the discussion. Does not cite appropriate references. May only address some of the
questions in posting. Posting	Posting shows some evidence of	questions in posting. Posting
shows evidence of critical	critical analysis.	lacks critical analysis and depth.

analysis.		
Response to Peers Shows Evidence	e of Critical Thinking	
2 Points	1 Point	0 Points
Response shows evidence of critical thinking and reflection. Adds depth to the conversation by raising relevant questions, offering a new perspective, or appropriately redirecting the dialogue.	Response reflects some critical thinking and reflection. Extends the conversation to some extent by raising relevant questions, offering a new perspective, or redirecting the dialogue.	Response reflects minimal critical thinking or reflection. May agree with a peer's posting but does not extend the conversation or add any new insights.
Respectful Interaction 1 Point		0 Points
Interacts appropriately, professionally, and respectfully. May disagree with a peer (actually this is encouraged), but does so in a respectful and thoughtful manner using evidence to support comments.		Posting and/or response is inappropriate, unprofessional, or disrespectful. Becomes defensive when position is challenged or questions are raised about posting.
Scholarly Presentation 2 Points	1-1.5 Points	075 Points
Posting and response are presented in a scholarly manner with no more than three mistakes in spelling, punctuation, grammar, choice of words and/or APA format. In general, there are complete sentences, ideas flow, and there is a logical sequence to the posting, i.e., does not just "ramble" on without a clear purpose. Generally cites source(s) correctly in the body of the posting. A listing of references cited in the posting are listed at the end in APA format (similar to a reference page)all required elements (author, year of publication, title, location and name of publisher) must be included and in the correct order. It is obvious that student has utilized the APA Manual (6 th ed.) in preparing his or her posting.	There are a few mistakes (4 to 5) in spelling, punctuation, grammar, choice of words, and/or APA format in posting and/or response. There may be some issues related to incomplete sentences, flow of ideas, or logical sequence to the posting, i.e., may "ramble" on without a clear purpose or exceed the allowed number of paragraphs.	There are several mistakes (6 or more) in spelling, punctuation, grammar, choice of words, and/or APA format in posting and/or response. There are either incomplete sentences, problems with the flow of ideas or logical sequence to the posting, i.e., may "ramble" on without a clear purpose or exceed the allowed number of paragraphs.

Exams:

There will be two closed book exams, administered during the on-campus sessions. The examination will cover the material reviewed preceding the campus visit. These can consist of multiple choice, short answer, and essay type questions.

Professional Performance

Cooperation, collaboration, and teambuilding are building blocks of professional behavior, development and clinical survival. For that reason, professional performance is an essential component of the grade in every clinical course at GU. The professional performance grade can mean the difference between a higher grade and a lower letter grade for the overall course. Performance grades are not earned merely by having participated &/or attended all classes in a timely manner; although these are important components of the grade, there is much more to consider in terms of professional performance. In the professional work place, professionalism factors critically in terms of retention and promotion. The following criteria are considered when points are earned for this component of the final grade.

Preparedness:

It is best to be prepared in order to engage fully in the learning process. This means reading the materials and supplementary readings and demonstrating what you have learned in your activities. It is recommended that you read beyond the required text(s) and that you consider outside readings from current journals and textbooks used for previous courses. Students who access related articles and websites expand their own learning and contribute to the learning of the class community. Citation of these readings in postings and written assignments can contribute to improved performance grades.

Courtesy: It is always advisable to

It is always advisable to let the professor know ahead of time or immediately following an emergency when a student is unable to attend class and offering an explanation is polite. Do not ask the professor to make special make up arrangements for the missed class. Students should advise the professor regarding the plan to make up the missed information and ask if the professor anything additional is needed.

Communication:

As in any profession, communication skills are essential aspects of performance that can enhance an individual's professional career. Giving feedback is expected but it is a skill that must be practiced in order to be developed and refined. Common courtesy and professional etiquette should always be employed in all forms of communication. Use a spell checker and employ appropriate grammar (upper and lower case even when using email). Do not use inflammatory or unprofessional language when using email as a form of communication.

Disruptive Behavior:

Disrupting the learning needs of the class community is not considered appropriate, especially during a class. During our on campus sessions, take care that if lateness is unavoidable that you enter the class as quietly as possible. Further, cell phones, emails, disruptive machines should be on quiet mode. Coming into class late or in the middle of the presentation is disruptive to the presenters and to the students participating; it steals from class time. Interrupting a presentation for personal reasons and/or unmet needs (other than learning needs) is not considered professional behavior. If there is an advisory or personal concern, it is best to address this with the professor at an individual appointment meeting rather than in a public forum such as the classroom. Cohort issues should be presented to the professor

outside of class time so that the professor can address these needs and come up with a plan that meets the needs of the students.

Respect:

Students should demonstrate empathic understanding of others when communicating with University employees, classmates, the professor, and classroom guests. Clinicians from the field and experts are sometimes invited to contribute to class discussions and content. These presenters are invited only after considerable thought and planning. Typically they make their services available without reimbursement of any kind. Their presence is a gift that should be respected by demonstrating preparedness, engagement, listening, and asking thoughtful interaction. Respect for the different opinions and world views as expressed by others are expected. Students should at all times refrain from checking email, phone messages/texts or doing other projects during class time.

Consideration:

Individuals learn and participate in many different ways for we are all products of our generational and cultural upbringing. Further, we all have different ways of learning. Some are technologically competent, others hesitant many falling somewhere in-between. Students are encouraged to consider that individuals have varying learning styles. Keeping interruptions and techno-noise at a minimum is essential. Keyboarding noise, cell phone, beepers, video alarms, computer gaming, email checking and web surfing can interrupt the concentration of others.

Closing Remarks:

As in all class grades but particularly in the area of the Professional Performance component of the grade, the grade is evaluated by the professor and is made based on professional judgment. Students who receive full points for this category do so because they have demonstrated the utmost and highest level of professionalism during the entire course sequence of classes, including email and other forms of class discussion and participation.

Academic Honesty:

The following statement is taken from the Gonzaga University Academic Honesty Policy (2002): "Without honesty the humanist, Catholic and Jesuit traditions could not continue; knowledge would be neither taught nor learned. Even the less obvious ethical and educational principles in our Mission Statement require honesty. Creativity without honesty becomes self-indulgence, intelligence without honesty degenerates into mere mental power. Self-knowledge without honesty cannot rise above self-deception, and the desire for truth becomes a craving for the rewards of those who have honestly found the truth. Without honesty, a concern for others may easily serve as a disguise for manipulation. The commitment to justice requires honesty, for to cheat, to fabricate, or to plagiarize is to act unjustly. Professional expertise requires honesty: cheating or plagiarizing denies the essence of what it means to be a professional in any field.

Because honesty is so essential to the traditions, ideals, and goals that define its kind of education, Gonzaga is committed to protecting academic honesty. This commitment entails practical consequences" (p. 2).

"ACADEMIC HONESTY consists of truth-telling and truthful representations in all academic contexts;

ACADEMIC DISHONESTY consists of any of the following activities, which are defined and illustrated in Section II [of the Academic Honesty Policy, 2002]: cheating, fabrication, plagiarism, and facilitating academic dishonesty" (p. 2).

PENALTIES for academic dishonesty are spelled out in detail in the policy, which can be found on the Gonzaga University web site: http://www.gonzaga.edu/Campus-Resources/Offices-and-Services-A-Z/Academic-Vice-President/AcademicHonestyPolicy2002.pdf

The Nursing Department adheres to the Academic Honesty Policy (2002) in determining appropriate consequences for violations of the policy.

Disability Accommodations:

Gonzaga University, the Department of Nursing, and the course instructor will certainly make reasonable accommodations for persons with documented disabilities. Students should notify Disability Resources, Education, & Access Management (DREAM) located at Foley 203B (509-313-4134) and the instructor of any special needs during the first week of class.

Course Policies

Please be timely in submitting your assignments. If you know you're going to be away on a day an assignment is due, know that I will ALWAYS accept work early (without a penalty!), so send it on in a day or two ahead of time. Blackboard postings and other written assignments are to be submitted on or before midnight Pacific Time on the specified due date. If you are unable to complete an assignment by the required due date, but have a reasonable explanation and have renegotiated a new due date with us in advance of the original deadline (at least 24 hours in advance unless it is an emergency situation), points will not be deducted for the assignment as long as it is submitted by the renegotiated due date. Late assignments, if accepted, are subject to:

Late assignment within the first 24 hours = 10% deduction from earned grade; Late assignment within the first 24-48 hours = 20% deduction from earned grade; Late assignment within the first 48-72 hours = 30% deduction from earned grade; Late assignments over 72 hours will NOT be accepted.

Overall GPA must remain above 3.0 to satisfactorily progress in the graduate program. Attendance at all on-campus sessions is mandatory. Students are expected to arrange travel schedules that will allow them to be on time for class and able to stay until the conclusion of each class. Students may not bring guests, including children, to class.

Students needing special accommodation for any reason should contact the professor. All Department of Nursing and Gonzaga University academic standards apply.

GONZAGA UNIVERSITY

Department of Nursing Master of Science in Nursing Course Syllabus NURS 605 Fall 2014

Course Title: NURS 605 P - Advanced Nursing Practice I

Assessment and Management of Clients with Acute and

Common Health Problems

Credits: 2-3 semester credits – supervised clinical practice

120-180 clinical clock hours (60 hours per credit)

Place/Time: Clinical rotations arranged by individual students, plus

On-campus sessions (schedule below)

Course Faculty: Denise Ogorek, MSN, ARNP

Email [best way to contact]: ogorek@gonzaga.edu

Office Tilford 112 Phone: 509-313-5759 Fax: 509-313-5827

Clinical Faculty: See clinical faculty list for assignment

Prerequisites: All 500-level courses, NURS 600

Concurrent: Nursing 635P

Course description:

This course is the first in a series of clinical courses designed to allow Family Nurse Practitioner students to apply concepts of Advanced Practice Nursing. Students must complete 120 clinical clock hours in an approved clinical setting while supervised by a nurse practitioner, physician's assistant, or physician. The focus of this clinical experience is on the development of skills in caring for adults and children with acute health problems. Students are evaluated in the clinical setting by a nurse practitioner who is a member of the GU faculty. A letter grade is assigned for the course by the Course Faculty.

Course objectives:

1. Integrate knowledge of physiology, pathophysiology and pharmacology into the evaluation and management of the client with commonly seen acute health care problems.

- 2. Develop and perform evaluative skills including data collection, physical assessment and use of diagnostic tools in the care of the client with acute health care problems in the primary care setting.
- 3. Develop and perform diagnostic and treatment planning skills including differential diagnosis, development of appropriate plan of care, communication, education, collaboration, and evaluation of the plan of care in clients with acute health care problems in the primary care setting.
- 4. Implement effective strategies needed by the family nurse practitioner to maximize client adherence to a short-term plan of care.
- 5. Demonstrate a philosophy of practice that respects client responsibility in health care choices.
- 6. Articulate a sound basis for evaluation and management of clients in primary care through case discussion with faculty and preceptors.
- 7. Demonstrate legally acceptable prescription writing in the implementation of prescriptive authority including the ability to articulate a sound basis for selection of therapeutic agents and management of side effects.
- 8. Demonstrate familiarity with the laws of prescriptive authority in the state where the student is gaining clinical experience.
- 9. Increase and improve skills in health history taking and physical assessment; use of additional diagnostic instrumentation; & ordering, obtaining and analyzing laboratory and diagnostic tests.
- 10. Apply newly learned information and skills of the advanced nurse practitioner within a clinical practice setting that allows for interaction with the patient experiencing acute health problems.

Course Meeting Dates

See Department of Nursing calendar for meeting dates, times, and locations. Attendance at all on-campus sessions is mandatory.

ON CAMPUS I	10/4 & 10/5
ON CAMPUS II	11/22 & 11/23

Department of Nursing grade scale:

A = 4.0 = 100 % - 95 %	B- = 2.7 = 84% - 82%
A-= 3.7 = 94 % - 92 %	C+ = 2.3 = 81% - 79%
B+ = 3.3 = 91 % - 89 %	C = 2.0 = 78% - 75%
B = 3.0 = 88 % - 85%	<75% = see student handbook

- An overall grade of "B" or better is required to progress to NURS 606P.
- Blackboard postings and other written assignments are to be submitted on or before midnight Pacific Time on the specified due date. If you are unable to complete an assignment by the required due date, but have a reasonable explanation and have

renegotiated a new due date with the professor *in advance of the original deadline* (at least 24 hours in advance unless it is an emergency situation), points will not be deducted for the assignment as long as it is submitted by the renegotiated due date.

- Late assignments, *if accepted*, are subject to:
- Late assignment within the first 24 hours = 10% deduction from earned grade;
- Late assignment within the first 24-48 hours = 20% deduction from earned grade;
- Late assignment within the first 48-72 hours = 30% deduction from earned grade;
- Late assignments over 72 hours will NOT be accepted.
- Attendance at all on-campus activities is mandatory. Students are expected to arrange travel schedules which will allow for both being on time for class and for staying until the conclusion of the class.
- All Department of Nursing and Gonzaga University academic standards apply. While still
 passing, grades less than B, are considered less than expected for graduate studies.
 Overall GPA must remain above 3.0 to satisfactorily progress in the graduate program.

Course Requirements and Grade Computation:

The grade students receive in clinical is compiled by the Course Faculty from information received from clinical faculty members and from those experiences supervised directly. Grades for NURS 605P will be based on the completion of the following:

	Due Date	%	Responsible
			Faculty
Expanded SOAP note #1	TBD	5%	Clinical faculty
Expanded SOAP note #2	TBD	5%	Clinical faculty
Expanded SOAP note #3	TBD	5%	Clinical faculty
OSCE #1	On Campus	20%	Course Faculty
OSCE #1 SOAP note	On Campus	5%	Course Faculty
OSCE #1 Self (2.5pts)/Peer Eval	TBA	5%	Course Faculty
(2.5pts)			
OSCE #2	On Campus	25%	Course Faculty
OSCE #2 SOAP	On Campus	5%	Course Faculty
OSCE #2 Self (2.5%)/Peer Eval		5%	
(2.5%)			
Clinical Faculty On-Site Evaluation	As arranged	20%	Clinical Faculty
	by Clinical		
	Faculty		
Typhoon Clinical Log	-	P/F*	Course Faculty
Student Self-Evaluation		P/F*	Course Faculty
Clinical Site Evaluation		N/A	Course Faculty

Additional course grading parameters:

• OSCEs must be successfully completed and passed to progress to Nursing 606.

- Failure to receive summation of clinical hours, the student self eval, clinical site eval, and a hard copy of the preceptor evaluation will result in an incomplete in the course. We may need to represent your work for certifying bodies and wish to do this well. It is important that you attend to this course requirement.
- Objective Structured Clinical Examination (OSCE)

The Objective Structured Clinical Exam (OSCE) is a clinical competency examination. The student will complete learning activities designed to test basic knowledge and understanding of history taking, physical examination, and communication skills at a level expected for students completing NURS 606P. Students may encounter a simulated or actual patient in each of the stations. Faculty members will evaluate student performance individually. The clinical evaluation will take place the first and last oncampus session. Per academic honesty policy students may not to discuss OSCE content until all students have completed/charted their OSCE.

It is expected that students will demonstrate higher levels of clinical competence as they progress through clinical courses 605, 606 and 607. Therefore, a lower total score in 605 versus 606 or 607 will constitute an "A" grade. Since the same scoring instrument is used for students in all clinical courses, leveling of the scoring is as follows:

Clinical Evaluation Grade Leveling by Course

605: 15 = C 16 = B 17 or greater = A 606: 16 = C 17 = B 18 or greater = A 607: 17 = C 18 = B 19 or greater = A

You must successfully complete both OSCEs to pass NURS 605P.

You must pass your clinical site visit by demonstrating safe practice and receive a satisfactory grade ($\geq 15/20$) to pass NURS 605.

Class participation

Class participation grades will take into consideration:

- Quality of preparation for and participation during on-campus sessions and clinical
- Attendance at and quality of participation in clinical conferences and clinical seminars
- Prompt arrival for, and attendance in class and clinical
- Respectful communication with faculty and peers
- Level of responsibility assumed for own learning

Expanded SOAP Notes

- Members of the clinical faculty grade will grade written assignments and submit those grades to course faculty for inclusion in the course grade.
- Assignment instructions and grading guidelines will be posted on Blackboard.
- Patients selected for written assignments should have health problems that are appropriate to the didactic coursework which students are taking concurrently.

 Students must submit three written assignments to Clinical Faculty by dates posted above.

Precepted Clinical Experience

Students will receive a numerical grade for this experience, and must receive a passing grade to pass NURS 605P. Requirements for precepted clinical include:

- Completion of a minimum of 120 hours (2 credits) of clinical practicum in keeping with the objectives of NURS 635P.
- **A maximum of** 5% of a student's clinical hours may be professional development hours, to include advanced-practice level conferences (pre-approval by Course Faculty required), observation of a working physician and/or other related activities.
- Submission of preceptor evaluations
- Completion and submission of Typhon Log
- Completion and submission of student self-evaluation
- Completion and submission of Clinical Site Evaluation
- Completion of Class Evaluation on Zagweb

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Requirements for precepted clinical include:

- 1. Approved clinical site by faculty in either N 600 or N 605.
- 2. Completion of a minimum of 120 hours of clinical practicum in keeping with the objectives of NURS 635P.
- By 7/26/14 you must send via mail, hand delivery or e-mail the following:

The forms are found in NURS 605 Blackboard under the "Assignments" tab, Clinical Evaluation forms.

- 1. Submission of preceptor evaluations
- 2. Completion and submission of a summary of your clinical precepted hours totaled and signed, either electronically or by hand.
- 3. Completion and submission of student self-evaluation
- 4. Completion and submission of Clinical Site Evaluation
- 5. Completion and submission of Class evaluation

It is the student's responsibility to make contact with the clinical faculty person within the first two weeks of the semester to:

- Introduce yourself and present your goals for the semester
- Share your course calendar and syllabus for N 635/605 with your preceptor
- Arrange for site visits with your clinical faculty. Be prepared to be respectful and flexible in scheduling, as all of our clinical faculty practice as well as teach.
- Determine arrangements for submission of Expanded SOAP notes

Clinical Site Selections

Students are required to check with their State Board of Nursing for requirements of students in Clinical Practice. Comply with all Nurse Practitioner Student regulations within your state BEFORE you begin precepted clinical practice and send a completed copy of any forms your state requires to your course instructor. Please attend to this prior to the beginning of your course work, as it may take the State Board of Nursing some time to process your application. You will continue to need to complete this form with each preceptor and with each course.

Clinical Faculty Evaluation

Students in the NP Family Nurse Practitioner have a minimum of one clinical evaluation per semester. The goal is evaluation of student competency, which includes direct observation of student performance. Additional goals include gathering data from preceptors working with the student and evaluation of the goodness of fit of the clinical site and student learning needs.

<u>It is the student's responsibility to make contact with the clinical faculty person within the first</u> two weeks of the semester to:

- Introduce yourself and present your goals for the semester
- Arrange for site visits
- Determine arrangements for submission of expanded SOAP notes

By 7/26/14 you must send either by snail mail, hand delivery [last on-campus] or e-mail to your COURSE FACULTY the following:

The forms are found in NURS 605 Blackboard under the Assignments tab, Clinical Evaluation forms.

- 6. Submission of preceptor evaluations
- 7. Completion and submission of Typhon Log with semester hours totaled and signed, either electronically or by hand.
- 8. Completion and submission of student self-evaluation
- 9. Completion and submission of Clinical Site Evaluation
- 10. Completion and submission of Class evaluation

GONZAGA UNIVERSITY
Department of Nursing
Master of Science in Nursing
Family Nurse Practitioner Option
Nursing 605P
Diagnostic Reasoning/Documentation Assignment
("Expanded SOAP Note")

This assignment provides the student with an opportunity to think through the diagnostic reasoning process and to improve clinical documentation utilizing an expanded problem-oriented progress note format (SOAP). The focus of mastery for this assignment in NURS 605P is for the student to develop complete, concise, and accurate subjective and objective sections. It is hoped that through this process, problem-oriented charting will improve, will be applied to different patient populations, and will enhance written communication in the clinical setting. An additional focus for the evaluation of this assignment will include the ability to establish a plan of care that reflects the practice of a family nurse practitioner.

Instructions to the student:

- 1. Select a patient whom you have evaluated in your clinical setting, with a problem that relates well to the content of your current clinical course (for example, students in Nursing 605P would select a patient requiring help with an acute, common health care problem in one of the following systems: HEENT, respiratory, genitourinary, derm, musculoskeletal.
- 2. Research the patient's complaint, the diagnosis selected, and the differential diagnoses that should be considered for the patient's complaint. Read from a *minimum* of 3 sources, such as current textbooks, current national guidelines, current journal articles, etc. Be sure to save the bibliographical information, as this will be documented at the end of the assignment.
- 3. Write an "expanded" SOAP note, clearly delineating the headings and subheadings as directed below. Much of the information to be included in this note should be in the original SOAP that was written by the student in the clinic area for the selected patient. However, the note for this assignment will include some things that may be elsewhere in the patient's chart and therefore not in the original note, such as medications, allergies, etc. This note will also differ from the original in that information may be reorganized, added, or deleted in order to *improve upon the original*. If after researching the patient's problem it becomes clear that additional information should have been solicited during the history and physical, then add it or make it up. Underline the additions or changes made which differ from the original. The note should be succinct but thorough. Avoid use of unnecessary words. *Remember, take this opportunity to change the original note in any way that improves it.*

EXPANDED SOAP NOTE

Subjective:

Chief complaint: Need not be the patient's complete statement – may be a brief summary of reason patient wanted to be seen for this visit

HPI: Complete subjective description of problem, including "OLDCARTS" findings or similar, including location, quality severity, duration, timing, context, modifying factors, associated signs/symptoms, relieving and aggravating factors, related systems. Also include "NEEWS" *Pertinent PMHX (as appropriate for the patient/chief complaint/presenting problem):*

Illness

Injuries

Surgeries

Hospitalizations

Allergies

Current medications, including over-the-counter and herbal preparations

Pregnancy status, if appropriate

Immunization status

Pertinent family medical history

Psychosocial:

Relevant past hx – lifestyle, health, medical care, etc

Family situation (including assessment of client's safety in home,

relationships, living arrangement)

Occupation

ROS:

Review and document a review of those systems which are pertinent to the patient's problem, and which have not been addressed in the HPI.

Objective:

Vital signs, including temperature, pulse, respirations, BP (document size of cuff used), height and weight.

General:

Specific systems as appropriate

Assessment:

Most likely diagnosis: (if more than one diagnosis, number each in order of priority)

Differential diagnoses: List the other diagnoses that should be considered in light of the history and physical findings.

Rationale: Articulate a rationale for the most likely diagnosis and for each differential diagnosis. In this discussion, include pertinent positives and pertinent negatives which help to rule out or rule in each diagnosis. This section should clearly illustrate the

student's diagnostic reasoning process for the reader, should be based on current literature/guidelines, etc, and should be organized and succinct.

Plan:

Write the plan in a numbered list format, which includes diagnostics (lab, x-ray, etc), treatment, education, follow-up, referrals, and goals.

A pneumonic that can be used to remember what to include in the plan is:

"Do Everything That Feels Right and Good"

Provide a rationale for each item, based on current literature and scientific principals.

Discuss what other treatment options could be considered, if any, and whether or not any of those options would be better choices than the ones actually selected. Explain your rationale.

4. Sign the note as follows:

Signature FNP Student, Gonzaga University

- 4. Attach a photocopy of the original SOAP note that you wrote in the clinical setting to this assignment. MAKE SURE THAT THERE IS ABSOLUTELY NO PATIENT

 INDENTIFICATION INFORMATION ON ANY OF THE PAGES!!!!!! This includes

 name, social security number, address, etc. Inclusion of patient identification information is a violation of federal HIPAA regulations.
- 5. Attach a list of the bibliographic information for the references used for this assignment. Be sure to include page numbers.
- 6. Turn assignment in to your clinical faculty by the posted due dates.

GONZAGA UNIVERSITY Department of Nursing Master of Science in Nursing Family Nurse Practitioner Option Expanded SOAP Note Grading Form

Nursing 605P

Student				Name:	Date:	
Course/Semes	ster:				Clinical	Faculty
Assignment:	#1	#2	#3			

EVALUATE THE FOLLOWING:	Total points possible	Student Score
Complete and appropriate subjective findings, including PMH, HPI (OLDCART), ROS, PFSH, relevant to chief complaint	15	
Description of general presentation; complete and appropriate focused exam, relevant to chief complaint	15	
Diagnosis that is consistent with subjective and objective information	10	
Differential diagnosis list appropriate to chief complaint and collected	10	
data		
Appropriate rationale for the most likely diagnosis(es) and differential	10	
diagnoses		
Plan that provides diagnostics, education, treatment, follow-up, and	10	
referral as appropriate		
Appropriate rationale for plan	10	
Consideration of alternative to preceptor-provided treatment plan	5	
Evidence of consultation of appropriate sources to improve care and	5	
documentation		
Quality and organization of original SOAP note	10	
	100	
TOTAL		

:		
Comments:		
Total score for SOAP note:		