Stephen F. Austin State University  
DeWitt School of Nursing  
NURSING CARE OF WOMEN AND CHILDREN II  
Course Number:  NURS 4407  
Section Number(s):  001 - 006  
Clinical Section(s):  010 – 017  
Fall 2023  
Course Instructors  
Ms. Cassie Barr, MSN, RN, CNE (Course Coordinator)  
Ms. Sherrie Fontenot, MSN, RN  
Ms. Morgan Showman, MSN, RN  
Dr. Katy Trotty, Ed.D., MSN, RN, IBCLC, CNE (Clinical Instructor)

ALL INFORMATION IN THIS SYLLABUS IS SUBJECT TO THE WRITTEN POLICIES AND PROCEDURES OF THE SCHOOL OF NURSING, STEPHEN F. AUSTIN STATE UNIVERSITY, NACOGDOCHES, TEXAS.

IN THE CASE OF COMMISSION, OMISSION, AMBIGUITY, VAGUENESS, OR CONFLICT, THE POLICIES AND PROCEDURES OF THE SCHOOL OF NURSING SHALL CONTROL.

EACH STUDENT SHALL BE RESPONSIBLE FOR ACTUAL AND/OR CONSTRUCTIVE KNOWLEDGE OF THE POLICIES AND PROCEDURES OF THE SCHOOL OF NURSING AND FOR COMPLIANCE THEREWITH.

THE STUDENT IS RESPONSIBLE FOR ALL INFORMATION IN THIS SYLLABUS.

This syllabus is provided for information purposes only.
Faculty Contact Information

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Other times, call for an appointment.

Class meeting time and place
See Course Calendar for time, location, and course assignments.

Required Textbooks and Materials
DocuCare 6-month Access Code ISBN: 9781451182477
vSim Access if you didn’t purchase in 2nd semester

Recommended:
HESI Comprehensive Review for the NCLEX-RN Examination 6th edition
Any Drug Book

**Technology Requirements**
All students are required to have access to a laptop or desktop computer for academic and testing purposes. Please find the complete list of technology requirements here: https://www.sfasu.edu/docs/nursing/technology-requirements.pdf

For questions regarding laptop hardware or software, please contact The SFA Help Desk at https://help.sfasu.edu/TDClient/2027/Portal/Home/ or 936-468-HELP.

**Course Description**
This course builds upon Women and Children I and previous, concurrent, and prerequisite courses. This course provides students the opportunity for critical thinking and the acquisition and application of nursing theory, research, and practice with clients from birth to adolescence, and women and their families in the intrapartum and postpartum periods. Acute and complex health needs of the perinatal period, neonates, and children will be explored. Issues related to care of the high-risk family, as well as those experiencing uncomplicated labor and birth, will be discussed. The role of the nurse as an integral part of the interdisciplinary health care team and the rich opportunities for client and family teaching are highlighted. Students will use the nursing process when providing holistic care of women, children, and their families of diverse spiritual, ethnocultural, and socioeconomic backgrounds.

**Credit Hour Justification**
(4 credits; 2 hours didactic and 6 hours clinical per week) This course typically meets once a week in 2-hour segments for 15 weeks and has an additional final week. Students have significant weekly reading assignments and are required to take major exams and a comprehensive final examination. The didactic preparation and activities average a minimum of 6 hours a week outside of classroom hours.

The clinical component is composed of a total of 90 hours of inpatient clinical with associated documentation. Clinical hours are also comprised of simulations, skills practice and checkoffs, virtual simulation, and other various clinical experiences. Students are required to successfully pass the clinical component to pass the course.

**Prerequisites and Co-requisites**
**Prerequisites:** NURS 3630/3030, NURS 3431/3031, NURS 3232/3032
**Co-requisites:** NURS 4007, NURS 4606/4006, NURS 4208/4008

**End of Program Student Learning Outcomes**
Graduates of the program will:
1. Apply knowledge of the physical, social, and behavioral sciences in the provision of nursing care based on theory and evidence-based practice.
2. Deliver nursing care within established legal and ethical parameters in collaboration with clients and members of the interdisciplinary health care team.
3. Provide holistic nursing care to clients while respecting individual and cultural diversity.
4. Demonstrate effective leadership that fosters independent thinking, use of informatics, and collaborative communication in the management of nursing care.
5. Assure responsibility and accountability for quality improvement and delivery of safe and effective nursing care.
6. Serve as an advocate for clients and for the profession of nursing.
7. Value continuing competence, growth, and development in the profession of nursing.

**General Education Core Curriculum Objectives/Outcomes**
None

**Course Student Learning Outcomes**
The student will:
1. Relate concepts and principles of the arts, sciences, humanities, and nursing as a source for making nursing practice decisions with clients and families.
2. Demonstrate responsibility and accountability using consistent behavior patterns and professional communication.
3. Evaluate research for applicability of findings to nursing practice of women and children with complex health needs.
4. Incorporate the nursing process as a template to formulate and implement individualized plans of care for clients and families.
5. Incorporate moral, ethical, economic, and legal issues in provision of nursing care to clients and families.
6. Assess the relationship between growth and development and other health issues.
7. Collaborate with families experiencing health stressors surrounding acute and complex needs of women and children as well as the normal processes of labor, birth, and the postpartum period.
8. Relate risks, health seeking behaviors, pharmacology, family situations, morbidity and mortality, and end of life issues to neonates, children, adolescents, and women with complex health needs.
9. Implement developmentally appropriate teaching strategies for women and children.
10. Collaborate with the interdisciplinary healthcare team respecting holistic, socio-economic, spiritual, and ethno-culturally diverse characteristics of women, children, and families with complex health needs.

**Differentiated Essential Competencies (DEC’s)**
The Richard and Lucille DeWitt School of Nursing prepares graduates to demonstrate the *Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments, and Behaviors (DECs)*. The competencies are based upon the preparation in the program of study. In nursing education, the DEC’s serve as a guideline and tool for curriculum development and revision, a tool for benchmarking and evaluation of the program, and statewide standard to ensure graduates will enter practice as safe and competent nurses. The DECs are incorporated into every course in the SON to ensure uniformity and continuity of standards.

Please refer to the Texas BON website for additional information
[https://www.bon.texas.gov/pdfs/differentiated_essential_competencies-2010.pdf](https://www.bon.texas.gov/pdfs/differentiated_essential_competencies-2010.pdf)

**Unit Objectives**
All course content will give consideration to the care of women and children by the nurse in collaboration with other members of the healthcare team.

1. Incorporate cultural considerations in the nursing care of women and children.
2. Explore the ethical and legal dilemmas arising in women and children’s health in nursing practice.
3. Practice communication techniques that facilitate the group process and Nursing Process.
4. Apply teaching-learning principles to the care of the client and family.
5. Utilize the Nursing Process.
6. Examine research findings that improve women and children’s health in nursing practice.
7. Incorporate growth parameters and developmental characteristics in the nursing process of women and children.
8. Apply principles of pharmacotherapeutics in women and children’s health populations.
9. Demonstrate nutritional considerations specific for women and children’s health populations.
10. Examine the relationship among mind, body, and spirit in the client and family.
11. Explore the phenomena of interdisciplinary care of the client and family in women and children’s health populations.

UNIT I
Labor and Birth Processes, Gestational Conditions, Pain Management, and Fetal Assessment in Labor

Labor and Birth Processes Objectives
1. Gather an accurate history of the pregnant patient.
2. Identify the phases and stages of labor and guide the patient and family through each one.
3. Demonstrate components of a systematic intrapartum assessment.
4. Recognize expected values for vital signs and blood pressure, deviations from normal findings, and probable causes of the deviations in the intrapartum period.
5. Prioritize care needs in the first, second, and third stages of labor for the laboring client and support person.
6. Predict expected physiologic and anatomic changes and nursing interventions for the laboring client.
7. Analyze fetal positions that would be favorable or unfavorable for normal progression through labor and delivery.
8. Identify and interpret the findings upon vaginal exam.
9. Compare and contrast true and false labor.
10. Prepare a plan for intrapartum teaching relating to the labor process.
11. Calculate and safely administer medications to the patient in labor.

Gestational Conditions Objectives
1. Identify risk factors for gestational conditions that place the pregnant woman and fetus at risk.
2. Explain how common gestational conditions affect the fetus and pregnant woman.
3. Recognize signs and symptoms of gestational conditions affecting the pregnant woman or fetus.
4. Plan appropriate nursing care of the pregnant patient with a gestational condition in effort to decrease risk of mortality of pregnant patient and fetus.
5. Implement appropriate nursing interventions and care to treat the gestational condition identified.
6. Prepare a plan to teach patients about gestational conditions that affect the pregnant woman and her fetus.
7. Explain planning of surgical procedures during pregnancy to prevent harm to the pregnant woman or fetus.
8. Explain how trauma during pregnancy can affect the fetus.
9. Discuss the effect of domestic violence on pregnant women.

Pain Management Objectives
1. Assess the patient’s pain level and ability to cope with pain in labor.
2. Compare and contrast nonpharmacologic and pharmacologic pain management.
3. Employ nonpharmacologic nursing interventions for the patient declining pharmacologic interventions.
4. Demonstrate positions conducive to decreasing the patient’s pain level and enhancing labor progression.
5. Differentiate between intravenous analgesia and anesthesia and the associated patient care.
6. Identify the therapeutic effects, side effects, and adverse effects of analgesia and anesthesia related to the laboring patient and fetus/neonate.
7. Intervene appropriately for a patient with physiologic side effects of epidural or spinal anesthesia.
9. Develop a teaching plan for the patient receiving epidural or spinal anesthesia.

Fetal Assessment in Labor Objectives
1. Discuss the different methods of fetal monitoring and the associated advantages and disadvantages of each.
2. Interpret the fetal heart rate tracing including baseline, accelerations, decelerations, variability, and category.
3. Recognize expected values for fetal heart rate baseline, deviations from normal findings, probable causes of the deviations, and intervene appropriately.
4. Differentiate between the appearance and cause of early, late, and variable decelerations in the first and second stage of labor and intervene appropriately.
5. Differentiate between the appearance and cause of absent, minimal, moderate, and marked variability and intervene appropriately.
6. Implement appropriate interventions for uterine tachysystole, category two, and category three fetal heart rate tracings.
7. Interpret the contraction pattern on the fetal monitor including frequency, duration, intensity, and resting tone.
8. Compare and contrast the care of the patient with external and internal monitors.
9. Develop a teaching plan for the patient and family regarding fetal monitoring.
10. Document the fetal heart rate and contraction pattern thoroughly and accurately.

UNIT II
Labor and Birth Complications, Postpartum, and Newborn Nutrition

Labor and Birth Complications Objectives
1. Recognize unexpected findings and deviations from normal in the pregnant patient and intervene appropriately.
2. Prioritize care of patients in labor and delivery.
3. Formulate a plan of care for a patient in preterm labor/preterm rupture of membranes.
4. Identify the pharmacologic interventions, rationale behind administration, therapeutic effects, side effects, and signs of toxicity for the woman receiving tocolytics.
5. Calculate intravenous rates correctly for high alert medications.
6. Predict care for the patient with risk factors that could lead to an obstetric emergency.
7. Discuss nursing interventions for the family experiencing perinatal grief and loss.
8. Advocate for the patient having an obstetric procedure.
9. Discuss the purpose, rationale, nursing interventions, and teaching for obstetric procedures.
10. Communicate therapeutically with a patient that has had an unplanned experience.
Postpartum Objectives
1. Demonstrate components of a systematic postpartum assessment.
2. Prioritize care needs in the fourth stage of labor.
3. Predict expected physiological changes, psychosocial outcomes, and nursing interventions for the postpartum client and family.
4. Use the nursing process to assess, plan, intervene, and evaluate care for potential complications and discomforts in the postpartum patient.
5. Explain causes, signs and symptoms, possible complications, and medical and nursing management of postpartum hemorrhage.
6. Explain the appropriate care for the postpartum patient that had a cesarean section.
7. Describe thromboembolic disorders, including incidence, etiology, signs and symptoms, and management.
8. Differentiate among postpartum psychologic complications, including incidence, risk factors, signs and symptoms, severity, and management.
9. Identify parental and infant behaviors that facilitate and those that inhibit parental attachment and describe ways in which the nurse can help facilitate parent-infant adjustment.
10. Prepare a plan for postpartum teaching for self-management.
11. Calculate and safely administer medications to the postpartum patient.

Newborn Nutrition Objectives
1. List the current recommendations for infant feeding.
2. Explain the nurse’s role in helping families choose an infant feeding method.
3. Discuss benefits of breastfeeding for infants, mothers, families, and society.
4. Summarize nutritional needs of infants.
5. Understand anatomic and physiologic aspects of breastfeeding.
7. Identify maternal and infant indicators of effective breastfeeding.
8. Implement nursing interventions to facilitate and promote successful breastfeeding.
9. Explain common problems associated with breastfeeding and interventions to help resolve them.
10. Develop a teaching plan for the formula-feeding family.

UNIT III
Assessment and Care of Normal Newborn and High-Risk Newborns, and Hospitalized or Long-term Care Pediatric Clients with Respiratory and Gastrointestinal Disorders

Newborn Objectives
1. Appropriately perform a head-to-toe assessment on the newborn.
2. Differentiate normal physiological newborn findings from abnormal pathological findings in a newborn.
3. Plan appropriate nursing care of the newborn.
4. Perform nursing interventions to facilitate the newborn’s transition to extrauterine life.
5. Assess for bonding and psychosocial issues that may affect the care of the newborn.
6. Develop teaching plan for caregivers to care for the newborn during the hospital stay and after discharge.
7. Calculate and safely administer medications to the newborn.

High-Risk Newborn Objectives
1. Identify common high-risk newborn disorders.
2. Identify signs and symptoms of high-risk newborn disorders during a head to toe assessment.
3. Plan appropriate nursing care of the high-risk newborn.
4. Perform nursing interventions to prevent and treat high-risk newborn disorders.
5. Identify bonding and psychosocial issues that may affect the health of the high-risk newborn.
6. Develop individualized teaching plans for care of the high-risk newborns.

Hospitalized Child Objectives
1. Identify the stressors of illness and hospitalization for children during each developmental stage.
2. Demonstrate nursing interventions that support parents, siblings, and family and minimize stress during a child’s illness and hospitalization.
3. Plan nursing interventions for children that are admitted to special units such as the ICU, day surgery, or emergency department.
4. Implement play in therapeutic procedures.
5. List various types of pain assessment tools for use with children and pain management strategies to reduce pain in children.
6. Design a care plan for the child with cognitive impairment that promotes optimal development, including during hospitalization.
7. Revise care for children with visual and/or hearing impairment, including during hospitalization.
8. Discuss nursing interventions that promote the family’s optimal adjustment to the child’s chronic disorder.
9. Support the family during the events surrounding and time of pediatric death.
10. Calculate and safely administer medications to the hospitalized child.

Respiratory Objectives
1. Describe common conditions affecting the respiratory system that require hospitalization in children.
2. Interpret normal and abnormal assessment findings in the child with respiratory illness.
3. List the major signs of respiratory distress in infants and children.
4. Formulate a care plan for a child hospitalized with a respiratory illness.
5. Implement appropriate nursing interventions for children with respiratory illness.
7. Explain appropriate technique for oxygen use in children.
8. Teach families about care of the child with respiratory illness.

Gastrointestinal Objectives
1. Describe common conditions affecting the gastrointestinal system that require hospitalization in children.
2. Interpret normal and abnormal assessment findings in the child with gastrointestinal illness.
3. Formulate a care plan for a child hospitalized with a gastrointestinal illness.
4. Implement appropriate nursing interventions for a child with gastrointestinal illness.
5. Predict potential complications of gastrointestinal illness in children.
6. Outline preoperative and postoperative care of the child with surgical treatment for gastrointestinal illness.
7. Teach families about care of the child with gastrointestinal illness.
UNIT IV
Assessment and Care of Hospitalized or Long-term Care Pediatric Clients with Cardiac Disorders, Cancer and Hematologic Issues, Immune, Genitourinary, Musculoskeletal, Integumentary, and Neurological Disorders

Cardiac Objectives
1. Describe cardiac structures present in the fetus and the problems that occur if they persist after birth.
2. Identify risk factors for and conditions associated with congenital heart defects.
3. Differentiate between the categories of congenital heart defects and identify the symptoms associated with them.
4. Illustrate the congenital heart defects and blood flow through them.
5. Categorize the symptoms of heart failure.
6. Formulate a plan of care including pharmacologic interventions for children with cardiovascular disorders.
7. Prioritize nursing interventions for a child with emergent conditions.
10. Communicate therapeutically with the family and child with a congenital heart defect.
11. Develop a teaching plan for families administering medications at home.
12. Calculate and safely administer medications to the hospitalized child.

Cancer, Hematology, Immune Objectives
1. Identify common childhood hematologic, immunologic, or cancer disorders.
2. Describe the etiology of childhood cancer including known risk factors.
3. Formulate a plan of care for the child hospitalized with hematologic, immunologic, or cancer disorders.
4. Construct teaching plans for the hospitalized child with hematologic, immunologic, or cancer disorders.
5. Compare and contrast treatment modalities for childhood cancer.
6. Assess for side effects and potential complications for childhood cancer treatments.
7. Identify psychosocial needs for the parents of a child hospitalized with hematologic, immunologic, or cancer disorders.

Genitourinary Objectives
1. Describe common conditions affecting the genitourinary system that require hospitalization in children.
2. Interpret normal and abnormal assessment findings in the child with genitourinary illness.
3. Formulate a care plan for a child hospitalized with a genitourinary illness.
4. Implement appropriate nursing interventions for a child with genitourinary illness.
5. Predict potential complications of genitourinary illness in children.
6. Outline preoperative and postoperative care of the child with surgical treatment for genitourinary illness.
7. Teach families about care of the child with genitourinary illness.
8. Compare the types of renal dialysis and determine which are most appropriate for the pediatric patient.

Musculoskeletal Objectives
1. Describe common conditions affecting the musculoskeletal system that require hospitalization in children.
2. Interpret normal and abnormal assessment findings in the child with musculoskeletal illness.
3. Formulate a care plan for a child hospitalized with a musculoskeletal illness.
4. Implement appropriate nursing interventions for a child with musculoskeletal illness.
5. Predict potential complications of musculoskeletal illness in children.
6. Outline preoperative and postoperative care of the child with surgical treatment for musculoskeletal illness.
7. Teach families about care of the child with musculoskeletal illness.
8. Explain techniques to care for a child immobilized with an injury or a debilitating condition.
9. Explain the functions of the various types of traction and appropriate nursing care of the child in traction.

**Integumentary Objectives**
1. Interpret normal and abnormal assessment findings in the child with burn injuries.
2. Predict potential complications in children with burn injuries.
3. Formulate a plan of care for children with burn injuries.
4. Explain the rehabilitation process for children with burn injuries.

**Neurological Objectives**
1. Describe the various modalities for assessment of cerebral function.
2. Differentiate among the stages of consciousness.
3. Describe common conditions affecting the neurological system that require hospitalization in children.
4. Interpret normal and abnormal assessment findings in the child with neurological illness.
5. Formulate a care plan for a child hospitalized with a neurological illness.
6. Implement appropriate nursing interventions for a child with neurological illness.
7. Predict potential complications of neurological illness in children.
8. Teach families about care of the child with neurological illness.

**COURSE REQUIREMENTS**

**Grading Policy**

**EVALUATION and GRADING CRITERIA**
It is necessary to obtain a weighted mean test score of 75 in the class exam grades to pass this course. A weighted mean test score below 75 or a class average below 75 constitutes failure and will result in a grade of “F” on the transcript.

**Policy 1.7:**
1. Rounding is confined to the final course grade. Grades on individual exams (including comprehensive or HESI), assignments, quizzes, and projects are recorded in the gradebook in their original form without rounding.
2. Final course grades are rounded to the closest whole number using the 0.5 math rule and using one decimal point to the right of the whole number. If the final course grade is not a whole number, the following rounding rules apply:
   a. If the decimal attached to a whole number is 0.5 or greater, then round up to the next whole number (equal to or greater than 85.50 = 86)
b. If the decimal attached to a whole number is less than 0.5, then round down to the previous whole number (equal to or less than 85.49 = 85).

BSN and RN-BSN GRADING SCALE:
90-100 = A
80-89 = B
75-79 = C
Less than 75 = F

Clinical will be graded as a Pass/Fail. You must pass both the class and clinical in order to pass NURS 4407.

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<td>Exam 1</td>
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Exams
Exams will be composed of 50 questions (multiple formats) and possible additional pilot questions over specified material. All tests will be computerized. If computerized testing is not feasible, a paper and pencil test may be substituted. Students will have 2 minutes per question (NCLEX allotment). Students will be able to review any incorrect questions and rationales at the conclusion of the test. Students arriving late will not be allowed to begin the exam if any student has left the testing room. Late arrival after a student has left the testing room will be considered an unexcused absence. Students that begin the exam late will complete the exam with only the remaining time available. No time extensions will be given. At the discretion of the instructor, students may be excused from attendance for reasons such as health, family emergencies, or student participation in an approved university-sponsored event(s). However, students are responsible for notifying their instructors in advance, when possible, for excusable absences. If so directed by the instructor, the student must bring a written excuse from the professional healthcare provider. If the absence is not excused, the maximum grade is 75. To calculate the grade, the ratio/proportion method will be used (i.e., 90 on unexcused absence makeup exam would be 90/100 : x/75, where x= 67.5). Make up exams may be alternate format and/or include a different number of items at the faculty discretion. Students are responsible for contacting faculty to schedule make up exams. Make up exams will be scheduled in accordance with faculty and student availability.

Testing Expectations
1. Please leave your belongings in your car. Students will only be allowed to bring a pencil and/or earplugs to their desk. Keys and other personal items will be left at the front of the room. A scratch piece of paper will be given.
2. Students may not wear hats, caps, hoods, sunglasses, or watches.
3. No food or drink will be allowed in the testing room.
4. Students should not magnify the font on the computer screen. Students needing accommodations should have prior arrangements with disability services.
5. During the exam, faculty will only answer questions regarding technical issues. No content questions will be answered.
6. After leaving the exam, please be courteous of those still taking the exam. Noise in the hallway outside of the exam room should be minimal.

**Exam Remediation Policy**
Students that make less than 75 on any exam are required to make an appointment for exam remediation with their clinical instructor prior to the next exam.

**Final Exam**
The final exam for this class is comprehensive. See calendar for review and exam date.

**Classroom Attendance**
Refer to SON Policies. Students are adult learners. Therefore, it is up to the student to make the decision to attend class or not. However, we recommend that students attend class regularly. Students are responsible for all materials assigned and/or presented in each class, any information presented by your classmates, and all announcements (verbal and email/Brightspace). Active and informed participation in classroom discussion is expected.

**Resume Workshop and Critique**
Students will attend a Resume Construction 101 presentation by the Center for Career and Professional Development (CCPD) to prepare them to begin the job application process after third semester. Students should submit their resume for critique to the CCPD when it is complete.

**Acceptable Student Behavior**
Classroom behavior should not interfere with the instructor’s ability to conduct the class or the ability of other students to learn from the instructional program. Students are expected to abide by the SFASU Student Code of Conduct (https://www.sfasu.edu/docs/policies/10.4.pdf). The door will remain locked during class to promote safety. You are encouraged to arrive to class on time. Please silence all devices prior to the beginning of class. It is expected that technology during class time will be used for educational purposes only. Content will be delivered in a variety of methods, including face-to-face lecture, pre-recorded lecture, synchronous zoom sessions, and face-to-face active learning activities. Please check Brightspace regularly for course updates. Students who do not attend class regularly or who perform poorly on class projects/exams may be referred to the Early Alert Program. This program provides students with recommendations for resources or other assistance that is available to help SFA students succeed.

**Academic Integrity**
The Code of Student Conduct and Academic Integrity outlines the prohibited conduct by any student enrolled in a course at SFA. It is the responsibility of all members of all faculty, staff, and students to adhere to and uphold this policy.

Articles IV, VI, and VII of the new Code of Student Conduct and Academic Integrity outline the violations and procedures concerning academic conduct, including cheating, plagiarism, collusion, and misrepresentation. Cheating includes, but is not limited to: (1) Copying from the test paper (or other assignment) of another student, (2) Possession and/or use during a test of materials that are not authorized by the person giving the test, (3) Using, obtaining, or attempting to obtain by any means the whole or any part of a non-administered test, test key, homework solution, or computer program, or using a test that has been administered in prior classes or semesters without permission of the Faculty member, (4) Substituting for another person, or permitting another person to substitute for one’s self, to take a test, (5) Falsifying research data,
laboratory reports, and/or other records or academic work offered for credit, (6) Using any sort of unauthorized resources or technology in completion of educational activities.

Plagiarism is the appropriation of material that is attributable in whole or in part to another source or the use of one’s own previous work in another context without citing that it was used previously, without any indication of the original source, including words, ideas, illustrations, structure, computer code, and other expression or media, and presenting that material as one’s own academic work being offered for credit or in conjunction with a program course or degree requirements.

Collusion is the unauthorized collaboration with another person in preparing academic assignments offered for credit or collaboration with another person to commit a violation of any provision of the rules on academic dishonesty, including disclosing and/or distributing the contents of an exam.

Misrepresentation is providing false grades or résumés; providing false or misleading information in an effort to receive a postponement or an extension on a test, quiz, or other assignment for the purpose of obtaining an academic or financial benefit for oneself or another individual or to injure another student academically or financially.

**Evaluations**
At the end of the semester, please complete the Student Evaluation of Course, Course Instructors, and SFA Clinical Instructors. You should also complete evaluations of clinical sites and/or preceptors after you finish those experiences. Please follow instructions from emails received regarding evaluations. Your feedback is very valuable to us and for quality improvement.

**Brightspace**
Students must have the required computer access and programs to support the on-line course through SFASU Brightspace.

Logging in: To access Brightspace, visit the following URL, and log in using your mySFA username and password
http://d2l.sfasu.edu

*What are the technical requirements to use the system?*
You can use any web browser you wish, but Google Chrome or Mozilla Firefox are recommended. Internet Explorer will no longer be supported.

*How do I get technical help?*
Help for students is available online through http://www.sfasu.edu/sfoonline/ just look for the tab called “Tech Support & Resources.” Students can also get help by phone by calling 468-1919 or by emailing d2l@sfasu.edu

**Withheld Grades Semester Grades Policy (5.5)**
Ordinarily, at the discretion of the instructor of record and with the approval of the academic chair/director, a grade of WH will be assigned only if the student cannot complete the coursework because of unavoidable circumstances. Students must complete the work within one calendar year from the end of the semester in which they receive a WH, or the grade automatically becomes an F. If students register for the same course in future terms the WH will
automatically become an F and will be counted as a repeated course to compute the grade point average. For additional information, go to https://www.sfasu.edu/policies/course-grades-5.5.pdf.

Students with Disabilities
To obtain disability-related accommodations, alternate formats, and/or auxiliary aids, students with disabilities must contact the Office of Disability Services (ODS), Human Services Building, and Room 325, 468-3004 / 468-1004 (TDD) as early as possible in the semester. Once verified, ODS will notify the course instructor and outline the accommodation and/or auxiliary aids to be provided. Failure to request services promptly may delay your accommodations. For additional information, go to http://www.sfasu.edu/disabilityservices/.

DeWitt School of Nursing Policies
To access the SON’s student policies, follow this link: http://www.sfasu.edu/academics/colleges/sciences-math/nursing/student-resources/student-policies

Student Wellness and Well-Being
SFA values students’ overall well-being, mental health and the role it plays in academic and overall student success. Students may experience stressors that can impact both their academic experience and their personal well-being. These may include academic pressure and challenges associated with relationships, emotional well-being, alcohol and other drugs, identities, finances, etc.

If you are experiencing concerns, seeking help, SFA provides a variety of resources to support students’ mental health and wellness. Many of these resources are free, and all of them are confidential.

On-campus Resources:
The Dean of Students Office (Rusk Building, 3rd floor lobby)
www.sfasu.edu/deanofstudents
936.468.7249
dos@sfasu.edu

SFA Human Services Counseling Clinic Human Services, Room 202
www.sfasu.edu/humanservices/139.asp
936.468.1041

The Health and Wellness Hub “The Hub”
Location: corner of E. College and Raguet St.

To support the health and well-being of every Lumberjack, the Health and Wellness Hub offers comprehensive services that treat the whole person – mind, body and spirit. Services include:
- Health Services
- Counseling Services
- Student Outreach and Support
- Food Pantry
- Wellness Coaching
- Alcohol and Other Drug Education

www.sfasu.edu/thehub
Crisis Resources:
- Burke 24-hour crisis line: 1.800.392.8343
- National Suicide Crisis Prevention: 9-8-8
- Suicide Prevention Lifeline: 1.800.273.TALK (8255)
- Crisis Text Line: Text HELLO to 741-741

CLINICAL REQUIREMENTS

In order to pass the course, you must also pass clinically. Passing clinically means meeting clinical expectations, outcomes, hours, and points as outlined below.

Clinical Attendance

Attendance is mandatory for all clinical hours. Clinical hours are those hours spent with clients assessing, planning, implementing, and evaluating in the health-care setting and simulation lab, those in case studies, and all other assignments given clinical credit. Unexcused absence from clinical will result in a clinical F-day. Failure to call the clinical instructor prior to the start of clinical is considered an unexcused absence from clinical. All clinical absences must be made up. Course instructors reserve the right to give alternate clinical experiences to make up clinical hours. Failure to complete all clinical hours may result in clinical course failure.

Clinical Points & Hours

You must receive 900 out of a possible 1200 points (75%) to pass clinically. Points will be deducted in full unless otherwise specified on grading rubric.

<table>
<thead>
<tr>
<th>Clinical Experiences &amp; Assignments</th>
<th>Hours</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temple Clinical Day</td>
<td>9</td>
<td>100</td>
</tr>
<tr>
<td>Local Clinical Day 1</td>
<td>8</td>
<td>100</td>
</tr>
<tr>
<td>Local Clinical Documentation (30) and Assignments (20) Day 1</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>Local Clinical Day 2</td>
<td>8</td>
<td>100</td>
</tr>
<tr>
<td>Local Clinical Documentation (30) and Assignments (20) Day 2</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>Local Clinical Day 3</td>
<td>8</td>
<td>100</td>
</tr>
<tr>
<td>Local Clinical Documentation (30) and Assignments (20) Day 3</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>Longview Clinical Day</td>
<td>12</td>
<td>100</td>
</tr>
<tr>
<td>Preclinical Conference</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Skills Practice Day</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>PP Practice Documentation</td>
<td>1</td>
<td>50</td>
</tr>
<tr>
<td>OB-EFM and OB-Labor Simulation</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>NRP Lab Practice</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>OB-Emergency Simulation</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>OB-Emergency Simulation Ticket</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>Pedi Simulation</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Longview Preceptor Evaluation</td>
<td></td>
<td>25</td>
</tr>
<tr>
<td>Longview Clinical Reflection</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>Temple Clinical Reflection</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>OB Layered Learning</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>--------------------</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Pedi Layered Learning</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Clinical on Campus</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>EBP Clinical Analysis</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>vSim – Sabina Vasquez</td>
<td>2</td>
<td>100</td>
</tr>
<tr>
<td>vSim – Eva Madison</td>
<td>2</td>
<td>100</td>
</tr>
<tr>
<td>vSim – Brittany Long</td>
<td>2</td>
<td>100</td>
</tr>
<tr>
<td>vSim – Jackson Webber</td>
<td>2</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total Hours/Points</strong></td>
<td><strong>90</strong></td>
<td><strong>1200</strong></td>
</tr>
</tbody>
</table>

See course calendar for specific dates of clinical rotations, simulations, and assignment due dates.

**Clinical Expectations**

Failure to meet any clinical expectation may result in a clinical F-day. More than two (2) failed clinical days (2 “Clinical F” days) will result in failing clinical.

- Follow all DeWitt School of Nursing policies.
- Provide care for clients in accordance with the DeWitt School of Nursing BSN Student Handbook, Texas Standards of Nursing Practice Act, the ANA Code of Ethics, and Student Handbook for Undergraduate Programs.
- Ensure safe nursing practice.
- Accurately report and/or document nursing interventions, patients’ symptoms, responses, and progress in an effort to maintain patient safety and welfare.
- Ensure accurate entries in records pertaining to the giving of medications, treatments, or nursing care.
- Follow the policy and procedure for wastage of medications at the facility in which you are receiving clinical instruction.
- Ensure that no medications or supplies are misappropriated during clinical experiences.
- Administer nursing care, medications, and treatments in a timely and safe manner.
- Perform nursing techniques or procedures only within expected competencies and scope of practice.
- Ensure that all nursing interventions and procedures are performed under the supervision of clinical faculty and/or licensed preceptors.
- Notify the primary nurse and the instructor in the event of an emergency or change in patient condition.
- Maintain patient confidentiality.
- Ensure that you follow the School of Nursing dress code at all times, including having all necessary supplies for clinical.
- Report off to appropriate personnel before leaving the unit at any time.
- Receive satisfactory remarks from clinical sites. In the event of precepted clinical, receive 75% satisfactory on observed criteria on preceptor evaluations.
- Abstain from tobacco and alcohol use of any kind during clinical and/or in uniform.
- Abstain from gum chewing, eating, or drinking in client areas.
- Keep cell phones in bag and on silent. Cell phones are not permitted in the patient care area or in uniform pockets unless otherwise approved by clinical faculty under extenuating circumstances.
- Actively pursue skills, opportunities, and experiences at clinical sites.
- Demonstrate professional behavior at all times.
• Demonstrate continual development of critical thinking and clinical judgment, in-depth application of nursing process, and clinical expertise.
• Arrange conferences with the instructor to discuss progression, processes, and clinical experiences as needed.
• Use instructor feedback to improve performance throughout the semester.

**Direct Patient Care Clinical Experiences**
Direct patient care clinical experiences include a clinical rotation in Nacogdoches, Lufkin, Longview, and Temple and associated patient documentation for each applicable experience. Students will arrive to assigned clinical site prepared and on time. Students will be given feedback after each clinical day on clinical performance. See attached Clinical Evaluation Tool.

A Skills Checklist will be available in Brightspace under Content. The checklist is to be updated each clinical day and turned in at the end of the semester during clinical evaluations.

You have been given a list of medications for NURS 4407. This list can also be found in Brightspace under Clinical Info. You are responsible for knowing about these medications and should be able to discuss them when asked. Inability to do so may incur a clinical F-day.

**Longview Clinical Day**
Students will have one precepted clinical in Longview, Texas. Refer to Brightspace → Content → Clinical Information → Longview Clinical for guidelines. Students will represent the DeWitt School of Nursing to the highest standard. The student will be responsible for turning appropriate post-clinical assignments in to the instructor as directed. The preceptor in Longview will complete an evaluation of student performance. Remind the preceptor to enclose the student evaluation in the envelope provided, seal it, and sign over the seal. **The preceptor evaluations are to be turned in at the beginning of class or simulation on the date listed on the course calendar.** Please also complete evaluations in Typhon of your preceptors and clinical sites and any paper hospital evaluations of your preceptor after completion of your clinical rotation. If preceptor’s name does not appear in Typhon, please let course coordinator know. Failure to submit Longview Preceptor Evaluations as directed may result in loss of clinical points. Do not leave the clinical site during clinical hours.

**Temple Clinical Day**
Students will have one pediatric clinical experience in Temple, Texas. Refer to Brightspace → Content → Clinical Information → Temple Clinical for guidelines. Students will represent the DeWitt School of Nursing to the highest standard. The student will be responsible for turning appropriate post-clinical assignments into the instructor as directed. Please also complete evaluations in Typhon of the clinical site.

**Dress Code**
Students are expected to adhere to the DeWitt School of Nursing Dress Code Policy. On the first violation of the policy, students will be given a written warning. Any subsequent violations of the dress code policy will result in a clinical F-Day.

**Arriving Late to Clinical Experiences**
Students are expected to arrive at all clinical experiences, including simulation and/or classroom experiences that count for clinical hours, on time and prepared to learn. A student is considered late if they arrive more than 5 minutes after the designated clinical start time. On the first late arrival, students will receive a written warning (tardy). Any subsequent late arrival to clinical
experiences will result in a clinical F-Day. A situation in which the student misses the majority of the clinical experience or arrives more than one hour after the designated start time will be considered an unexcused clinical absence and receive an immediate clinical F-day. Students are expected to complete all clinical hours. See Clinical Attendance section for additional details.

Late Submission of Clinical Assignments
Points may be deducted for clinical assignments submitted late. Students are expected to turn in assignments by the due date and time. If submitted within 24 hours, the maximum score will be 50% of the original points available. To calculate the grade, the ratio/proportion method will be used (i.e., 90 on late assignment would be 90/100 : x/50 x= 45). If not submitted within 24 hours, students will receive zero points for the assignment. Students are expected to complete all clinical hours. See Clinical Attendance section for additional details.

DocuCare Postpartum Practice Documentation
Students are required to complete a DocuCare documentation using a postpartum patient scenario before entering the clinical setting. The assignment instructions and information can be found in Brightspace. It will be submitted via DocuCare by 0800. See the course calendar for the due date.

DocuCare Clinical Documentation
Documentation will be completed after each local (Nacogdoches/Lufkin) hospital clinical. It will be submitted via DocuCare by the Monday following the clinical day by 0800. See Brightspace for documentation instructions and grading rubric.

It is unacceptable to turn in any portion of someone else’s work without crediting the author. It is also unacceptable to write for or with another student on any course assignment, even if you shared the same patient.

Clinical Reflections
Clinical reflections will be completed after each travel clinical experience (Longview and Temple). Using Dropbox in Brightspace, students will be expected to give a brief report on their patient using the report examples in Brightspace and following HIPAA guidelines. Students will also need to share the most significant take away from the clinical day. Clinical reflections are due to the Dropbox by 0800. Please see the calendar for due dates.

It is unacceptable to turn in any portion of someone else’s work without crediting the author. It is also unacceptable to write for or with another student on any course assignment, even if you shared the same patient.

Hospital Orientation(s)
Orientation is mandatory for each clinical facility that you are assigned. See Brightspace for instructions. See calendar for due date. Failure to submit hospital orientations by the due date and time may result in inability to attend clinical and unexcused absence.

Preclinical Conference
Students will meet with clinical instructor to discuss clinical logistics and expectations. Uniforms are not required. See calendar for date and time.

Simulations, Layered Learning, Skills Practice Day, NRP Lab Practice
Student groups will complete skills and simulations in the lab setting. Wear uniforms. Groups and dates will be assigned by the instructors. Check Brightspace for schedule, how to prepare, and instructions. Information concerning preparation for the labs will be given prior to the lab dates. Failure to complete pre-simulation assignments may result in the inability to participate in simulation, and/or loss of clinical points. Please complete evaluations in Typhon after completion of each simulation and layered learning.

**vSim**
Students will complete four vSims outside of class/clinical time. See Brightspace and course calendar for further instructions. The vSim score will be entered into the gradebook as clinical points for the experience.

**Clinical on Campus**
Wear comfortable clothes. We will be discussing care of the laboring, newborn, postpartum, and pediatric patients.

**Evidence Based Practice (EBP) Clinical Analysis**
Students will attend the EBP Clinical Analysis. Discussion of evidence-based practice, barriers in the clinical setting toward the EBP, and suggestions on how to overcome these barriers based on research will occur. The goal of this analysis is for students to compare current practices with current evidence. Detailed instructions for EBP Day will be posted in Brightspace.

**Clinical Evaluation Tool**
Expected behaviors are based on professional standards. These behaviors are detailed on the Nursing 4407 Clinical Evaluation Tool below. Students must meet all clinical outcomes to pass clinical.
Stephen F. Austin State University  
Richard and Lucille DeWitt School of Nursing  
Clinical Evaluation Tool  
NURS 4407: Care of Women and Children II  

Student: __________________________ Date Fall/Spring: ________  
Instructor(s): ____________________________________________

Evaluation Criteria: S = Satisfactory   U= Unsatisfactory

Ongoing clinical feedback will be provided in individual student-faculty conferences throughout the clinical rotation and will be documented weekly.

Clinical objectives for evaluation are listed on page 2.

By the end of the clinical rotation, the student must satisfactorily demonstrate all behaviors described in the clinical objectives to pass the clinical portion of the course.

<table>
<thead>
<tr>
<th>Final Clinical Grade:</th>
<th>Final Instructor Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Pass or Fail)</td>
<td></td>
</tr>
</tbody>
</table>

Instructor Signature: ____________________________________________

Final Instructor Comments: ____________________________

<table>
<thead>
<tr>
<th>Student Signature:</th>
<th>Final Student Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date: __________________________
### Clinical Outcomes

**The student will:**

<table>
<thead>
<tr>
<th>Clinical Outcomes</th>
<th>DEC</th>
<th>C. PATIENT SAFETY ADVOCATE</th>
<th>DEC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. MEMBER OF THE PROFESSION</strong></td>
<td></td>
<td>IIB</td>
<td></td>
</tr>
<tr>
<td>1. Adhere to legal and ethical standards of the profession. Abides by laws, standards, and policies, of SFASU, Texas BON, facility, and Nursing Code of Ethics.</td>
<td>IA IIA IIIA</td>
<td>1. Maintain strict infection control measures in clinical settings.</td>
<td>IIB</td>
</tr>
<tr>
<td>2. Assess own strengths and weaknesses and utilize feedback for professional growth.</td>
<td>ID</td>
<td>2. Administer medications safely</td>
<td>IID</td>
</tr>
<tr>
<td>3. Assume accountability and responsibility for providing safe, effective, quality nursing care to individuals, families, and groups.</td>
<td>IB</td>
<td>3. Maintain safety of client, including proper identification, use of side rails, not leaving pediatric patients unattended</td>
<td>IIIB IIC</td>
</tr>
<tr>
<td>4. Arrive to clinical assignments on time and is appropriately attired</td>
<td>IA</td>
<td>4. Maintain a safe practice utilizing facility guidelines</td>
<td>IIIB</td>
</tr>
<tr>
<td>5. Protect confidentiality of clients, families, and facility.</td>
<td>IA</td>
<td>5. Apply teaching-learning theories that optimize the childbearing family’s potential for wellness with overall consideration of individual(s), families, and groups</td>
<td>IIIC</td>
</tr>
<tr>
<td>6. Assess changing roles and functions of the professional nurse as the facilitator for the client within the organization and environmental structure.</td>
<td>ID</td>
<td>6. Perform skills safely and efficiently.</td>
<td>IID</td>
</tr>
<tr>
<td>7. Participate in activities which promote consumer awareness of nursing’s contribution to society.</td>
<td>IC</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B. PROVIDER OF PATIENT-CENTERED CARE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Relate applicable knowledge, concepts, and theories to clinical practice.</td>
<td>IIA</td>
<td>A. Implement care for individuals, families, and groups in collaboration with clients and the interdisciplinary health care team.</td>
<td>IVA</td>
</tr>
<tr>
<td>2. Utilize nursing process in provision of care to (clients).</td>
<td>IIC</td>
<td>B. Refer individuals, families, and groups to the interdisciplinary health care team and community resources for necessary services.</td>
<td>IVC IID</td>
</tr>
<tr>
<td>A. Perform holistic nursing assessment on assigned client(s).</td>
<td>IIB</td>
<td>2. Appraise community resources/referrals in the provision of care.</td>
<td>IVC</td>
</tr>
<tr>
<td>B. Formulate and prioritize applicable nursing diagnosis based on assessment data.</td>
<td>IIC IID</td>
<td>3. Establish effective working relationships with clients, faculty, staff, and peers.</td>
<td>IVA</td>
</tr>
<tr>
<td>C. Formulate individualized nursing interventions for clients and families, including cultural awareness</td>
<td>IIB IID</td>
<td>4. Use appropriate verbal and nonverbal interactions with clients, families, community, and interdisciplinary health care team.</td>
<td>IVA</td>
</tr>
<tr>
<td>D. Implement the nursing interventions in a timely, organized fashion prioritizing client needs.</td>
<td>IIE</td>
<td>5. Compare methods of care in a variety of acute care settings</td>
<td>IVC</td>
</tr>
<tr>
<td>E. Perform client teaching to clients, families, and community based on evidenced based practice and the nursing process.</td>
<td>IIG</td>
<td>6. Manage resources in the delivery of care to clients and groups.</td>
<td>IVC</td>
</tr>
<tr>
<td>3. Demonstrate insight and understanding of interventions.</td>
<td>IIE</td>
<td>7. Contribute to group development as a member and a leader.</td>
<td>IVA</td>
</tr>
<tr>
<td>4. Communicate therapeutically maintaining professional boundaries.</td>
<td>IIE</td>
<td>8. Formulate reports for staff and faculty on clinical status of client.</td>
<td>IVD IVE</td>
</tr>
<tr>
<td>A. Document care in organized, clearly stated fashion both on paper and electronically</td>
<td>IIF IIG</td>
<td>9. Critique own and other’s participation in intra/interpersonal communication with individual(s), families and groups</td>
<td>IVD</td>
</tr>
<tr>
<td>B. Complete accurate detailed correlation maps that include plans for development and implementation.</td>
<td>IIE</td>
<td>10. Analyze problems in delivering health care and act as an advocate for individuals, families, and groups using research based nursing knowledge.</td>
<td>IVB</td>
</tr>
<tr>
<td>5. Provide legal, ethical, and collaborative care to individuals, families, and communities in the acute setting.</td>
<td>IIE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Act as a resource for health education and information for individual clients and their families.</td>
<td>IIH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Analyze, evaluate, and modify the plan of care for culturally diverse individuals and families.</td>
<td>IIB IIG</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Prioritize nursing care of multiple clients and families.</td>
<td>IIC</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Beginning (0%)</td>
<td>Developing (50%)</td>
<td>Accomplished (90%)</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Preparedness &amp; Professionalism</strong></td>
<td>Not prepared with the appropriate paperwork, books, clinical tools to be an effective member of the nursing profession. Abandons standards and policies of the SON and the facility policies (3 or more). Does not assume patient assignment.</td>
<td>Prepared for the clinical day missing some necessary paperwork, books, or clinical tools to be an effective member of the nursing profession. Student struggles to adhere to standards and policies of the SON and facility policies (not more than 2 elements missing) Complains about assignment and/or makes unprofessional comments. Talks about patient/family in unprofessional manner or confidentiality is questionable.</td>
<td>Prepared for the clinical day with all the necessary paperwork, books, clinical tools to be an effective member of the nursing profession. Adheres to majority (Missing 1 element) of standards and policies of the SON and facility policies. Assumes responsibility for patient assignment. Protects patient/family confidentiality and the facility.</td>
</tr>
<tr>
<td><strong>Initiative &amp; Time Management</strong></td>
<td>Lacks initiative or demonstrates disinterest in the clinical setting. Does not assist staff or peers. Tasks and/or clinical requirements are not completed.</td>
<td>Displays interest in the clinical setting, but remains focused on own behavior or task. Occasionally assists staff or peers. Tasks and clinical requirements not completed on time or completed with frequent prompting by instructor.</td>
<td>Displays interest in the clinical setting. Assists peers and staff. Completes tasks and clinical requirements on time and with minimal prompting by instructor.</td>
</tr>
<tr>
<td><strong>Critical Thinking &amp; Clinical Judgement</strong></td>
<td>Demonstrates gaps in applicable knowledge, concepts, and theories in relationship to the clinical experience and patient care. Has difficulty connecting patient data and patient information to nursing care and patient diagnoses. Unable to prioritize patient care. Has difficulty recognizing changes in patient status/condition. Unable to implement appropriate interventions and individual client needs. Has difficulty evaluating effectiveness of nursing interventions.</td>
<td>Attempts to relate applicable knowledge, concepts, and theories to current clinical experience and patient care. Makes an effort to recognize important patient data, but also attends to less important patient data. Needs cues/assistance in prioritizing patient care. Requires advice/assistance to recognize changes in patient status/condition. Needs advice/assistance with implementing interventions. Requires advice/assistance in evaluating effectiveness of nursing interventions.</td>
<td>Relates and applies applicable knowledge, concepts, and theories to familiar clinical experience and patient care with few supportive cues. In most situations, focuses on important patient data and relevant patient information. Prioritizes patient care with few supportive cues. Recognizes changes in patient status/condition and implements interventions based on assessment and individual client needs with few supportive cues. Evaluates effectiveness of nursing interventions with few supportive cues.</td>
</tr>
<tr>
<td>Communication (Verbal &amp; Non-Verbal)</td>
<td>Unable to communicate therapeutically maintaining professional boundaries. Appears frozen and unable to communicate with patients/families, healthcare team and/or instructor verbally. Improper use correct language/terminology to discuss healthcare topics with instructor, patient/families, and/or healthcare team verbally.</td>
<td>Able to communicate therapeutically maintaining professional boundaries with assistance. Appears nervous, shaky, or disinterested when communicating with patients/families, healthcare team and/or instructor. Heavy prompting of language/terminology to discuss healthcare topics with instructor, patients/families and/or healthcare team verbally.</td>
<td>Able to communicate therapeutically maintaining professional boundaries. Communicates with patients/families, healthcare team and instructor without visible nervousness. Needs minimal guidance on using appropriate language/terminology to discuss healthcare topics with instructor, patients/families and/or healthcare team verbally.</td>
</tr>
<tr>
<td>Safety &amp; Skills Performance</td>
<td>Unable to perform skills or nursing care safely despite continuous cues/prompting from instructor/nursing staff. May appear frozen and/or instructor must complete task. Performs care without supervision/permission or performs skills that fall outside current skill parameters. Fails to recognize and report changes in client condition related to safety issues. Consistently does not maintain strict infection control measures, including isolation precautions when applicable and standard precautions for all clients. Does not safely administer medications according to the rights of medication administration (including name, DOB, and allergies).</td>
<td>Performs skills and nursing care safely requiring frequent cues, assistance, or instruction from instructor/nursing staff. Needs frequent prompting from instructor to identify safety hazards in the healthcare setting and to plan/implement interventions to preserve patient safety. Needs instructor cues to maintain infection control measures, including isolation precautions when applicable and standard precautions for all clients. Needs frequent supportive cues to administer medications safely.</td>
<td>Performs skills and nursing care safely with minimal assistance, instruction, or supervision. Able to identify safety hazards in the healthcare setting and able to plan/implement interventions to preserve patient safety with minimal cues. Maintains strict infection control measures, adhering to isolation precautions when applicable and standard precautions for all clients. Safely administers medications according to the rights of medication administration (including name, DOB, and allergies).</td>
</tr>
</tbody>
</table>