NUR 155
Contemporary Nursing Practice I
Summer 2019

Course Description

NUR 155 Contemporary Nursing Practice I
Lec. 4 Lab. 6 Cr. 6
This course provides further development of proficient nursing care of individuals experiencing commonly occurring health problems with predictable outcomes. Prerequisites: NUR 105, NUR 134. Corequisites: BIO 211, PSY 203.
6 Cr (3 lect/pres, 1 lab, clinical as assigned)

Course Focus

This course provides further development of proficient nursing care of individuals experiencing commonly occurring health problems with predictable outcomes

Text and References
*(Required Source)*

*(Recommended source)*

*(Recommended source)*

*(Recommended source)*
Access to online Kaplan products.

The course-appropriate lab kit is also required.

A nursing drug guide (less than 2 years old)

Laboratory/diagnostic reference of student's choice and a Care Plan book of choice. (*The TCL Book Store carries a Care Plan Book*).

**Course Outcomes.** Upon successful completion of the course a student will be able to:

1. Indicate how various functional health patterns may be affected by commonly occurring health problems.
2. Describe nursing standards of care for patients with commonly occurring health problems.
3. Compare the nursing implications of acute and chronic health problems.
4. Describe teaching strategies for individuals with commonly occurring health problems.
   - Determine cultural, spiritual, developmental and psychosocial variables which influence patients and families.

**Clinical Outcomes.** Upon successful completion of the course a student will be able to:

1. Demonstrate professional behavior.
2. Use accepted standards of clinical practice to provide care to individuals with acute or chronic health problems.
3. Anticipate how common health problems affect various functional health patterns.
4. Use effective communication with patients, families, and peers.
5. Teach individuals basic health care related to commonly occurring health problems with predictable outcomes.

**Course Goals**

The following list of course goals will be addressed in the course. (*designates a CRUCIAL goal)

1. report suspected abuse and neglect
2. prioritize nursing care
3. prioritize patient care
4. appraise surgical incisions and wounds
5. evaluate complementary and alternative medicine patient and family use
6. evaluate health care informatics
7. evaluate patient outcomes
8. examine systematic quality improvement process nursing role
9. incorporate complementary and alternative pain management therapies
10. incorporate cultural practices and beliefs
11. verify presurgical checklist
12. appraise patient risk
13. assess lifestyle risks
14. assess patient infusion site
15. assess patient needs
16. delegate nursing tasks
17. demonstrate professional behavior*
18. manage patients’ spiritual distress
19. follow joint commission and federal and state patient restraint standards
20. imitate nursing responsibilities
21. prevent IV administration errors
22. prevent vascular complications
23. reduce family and patient anxiety
24. teach individuals basic health care*
25. teach patient prevention
26. teach patients health promotion and maintenance*
27. anticipate common health problems
28. arrange patient confidentiality
29. display coping skills
30. document pain assessment
31. employ best practices
32. illustrate medical surgical nurse primary roles
33. implement emergency preparedness and response plan
34. maintain safe and effective care environment
35. maintain special needs care
36. make cultural assessment
37. perform pain assessment
38. promote rehabilitation patient and family independence
39. provide end of life care
40. provide individual care
41. provide patient information
42. support patient and family decisions
43. use accepted clinical practice standards*
44. use appropriate safety techniques*
45. use effective communication
46. define key terms and concepts
47. depict quality of care and patient care focus
48. diagnose patient risk
49. diagnose risk factors
50. discuss drug therapy influences
51. employ ethical principles
52. employ infusion therapy nursing considerations
53. identify lesbian gay bisexual and transgender related health issues
54. identify older adult subgroups
55. identify substance abuse symptoms
56. list evidence-based practice process
57. list health team roles and responsibilities
58. recognize commonly occuring health problems*
59. recognize health patterns
60. recognize surgical patient  
61. recommend home modifications  
62. select best practices interventions  
63. characterize pain types  
64. compare and contrast key terms  
65. compare drug administration routes  
66. compare key emergency personnel roles  
67. describe key terms and concepts  
68. describe nursing interventions  
69. differentiate complementary and alternative therapy domains  
70. differentiate training techniques  
71. differentiate vascular access device types  
72. establish care plan*  
73. explain drug effects  
74. explain surgical procedure  
75. apply aseptic technique  
76. collaborate with health care team members  
77. communicate patient issues*  
78. determine patient and family education needs  
79. determine patient care priorities  
80. develop pain management community-based teaching plan  
81. develop personal emergency preparedness plan  
82. develop rehabilitation teaching plan  
83. discuss pain assessment and management attitudes  
84. interpret laboratory results  
85. interpret physical and psychosocial assessment findings  
86. interpret white blood cell count  
87. profile generic and folk medicine examples

**Student Contributions**

Classes are designed to employ a variety of teaching techniques. In order to maximize learning, required readings and Web enhanced sections should be completed prior to class. If a student is falling behind in clinical performance and/or academic achievement, it is imperative to seek immediate assistance from the instructor.

In order to perform at a satisfactory level in the clinical area, students must be prepared, on a daily basis, to do the following:

1. demonstrate a thorough knowledge of patient's condition and related nursing care;  
2. complete clinical assignments (e.g. written assignments, care planning, patient care), on time and in the prescribed manner;  
3. arrive on time and in proper uniform;  
4. give a complete report on all assigned patients to the assigned nurse or charge nurse before leaving the clinical unit each day;  
5. utilize the nursing process in the delivery of safe and competent patient care;  
6. accurately perform nursing skills and procedures learned in campus lab;  
7. correctly apply all previously mastered knowledge, skills, and abilities.
Students not prepared to care for his/her assigned patient(s) will be given an unsatisfactory for the day.

Achievement assessments are given to assist in the evaluation of individual student progress and to support student success. The dates for completion of these tests are posted on the course calendar. Students who do not achieve the required scores are encouraged to meet with the course coordinator and complete the prescribed remediation. The course coordinator determines the date for completion of remediation. Failure to complete testing, tutorials, focused reviews, or required remediation by the dates indicated will result in a grade of Incomplete ("I") for the course and non-progression in the nursing program. Students having difficulty with either the tests, tutorials, focused reviews, or remediation components of this course must speak personally with the course coordinator three (3) business days or more in advance of the published due dates.

Students must receive satisfactory on clinical and laboratory evaluations to pass the course.

**Nursing laboratory.** Nursing skill laboratory hours are a part of the total clinical hours for the course. Learning experiences in the nursing laboratory provide an opportunity for the student to become familiar with equipment and techniques. The student utilizes the nursing laboratory to practice new skills. Skills must be practiced in the laboratory before utilization in the clinical setting. Competence must be demonstrated in the nursing laboratory and clinical setting. Students are responsible for material covered in campus laboratory. In order to progress in the course and program, by the end of the course each student **MUST** achieve a satisfactory skill criterion and demonstrate competence in laboratory skills.

At the conclusion of each laboratory experience, the student’s performance is evaluated. The student is awarded 1 point for each satisfactory performance and 0 points if performance is unsatisfactory. The student’s performance is evaluated based on environmental contribution, attendance, professional attire and preparedness. Expectations include but are not limited to:

1. Contributing to a productive learning environment for self and others by
   a. being prepared for lab activities by reading and watching assigned videos if applicable.
   b. answering questions and identifying steps or processes regarding skills.
   c. demonstrating mastery of skills.
   d. remaining attentive.

2. Arriving and departing on time. Attendance is expected for each scheduled laboratory experience.
3. TCL Nursing Uniforms are to be worn in all laboratory learning sections.

See **Course Evaluation** for point requirements in this course.

**Course Evaluation**

<table>
<thead>
<tr>
<th>Component</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>3 unit exams at 20% each</td>
<td>60%</td>
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<tr>
<td>1 final exam (Comprehensive)</td>
<td>33%</td>
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<tr>
<td>Diabetes Paper</td>
<td>7%</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>100%</strong></td>
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Should a student earn a 74 or below on the Diabetes Paper (written assignment), a second faculty member will grade the paper. The student will receive the average of both scores.

Laboratory must be rated as satisfactory (must earn a minimum of 10 points).

Clinical evaluations must be satisfactory to pass the course.

**Course Schedule**

Lecture: Tuesday and Wednesday 8:30 – 11:30 a.m.
1 hour web-based instruction each week

Clinical: As scheduled
Labs: Tuesday 1.5 hour campus lab as assigned
Course website: http://tclbb.vmc3.com/

**Clinical:** Clinical hours will vary based on the clinical facility’s census, requirements, and designated clinical outcomes within the course. Clinical dates are subject to change and the student may be required to attend during alternate days, nights, and/or weekends as assigned. Clinical hours/days will vary among clinical groups depending on clinical space and availability. Clinical schedules may be either two 8 hour days twice weekly or one 12 hour day once weekly. Students within the Health Sciences Division should not create travel plans while partaking in any Health Sciences program. Health Sciences students must wait until they have reviewed their assigned class schedule/clinical schedule before any travel plans should be completed. **Clinical swaps will not be permitted.** Clinical assignments are considered final and may only be altered by the course coordinator or clinical site. Students may not request changes to their clinical obligations once they are assigned.

**ADA STATEMENT**

The Technical College of the Lowcountry provides access, equal opportunity and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities. To request disability accommodation, contact the counselor for students with disabilities at (843) 525-8219 or (843) 525-8242 during the first ten business days of the academic term.

**ATTENDANCE**

The College’s statement of policy indicates that students must attend ninety percent of total class hours or they will be in violation of the attendance policy.

1. Students not physically attending class during the first ten calendar days from the start of the semester must be dropped from the class for NOT ATTENDING.

2. Students taking an online/internet class must sign in and communicate with the instructor within the first ten calendar days from the start of the semester to indicate attendance in the class. Students not attending class during the first ten calendar days from the start of the semester must be dropped from the class for NOT ATTENDING.
3. Attendance in an online course is defined by; at least once weekly course access and by completion of assignments as required by the instructor. Each student will be expected to access the web class at least once a week and complete weekly assignments on time. Additional access is encouraged and may be necessary for successful completion of classes.

4. Reinstatement requires the signature of the division Dean.
   
   a. In the event it becomes necessary for a student to withdraw from the course OR if a student stops attending class, it is the student’s responsibility to initiate and complete the necessary paperwork. Withdrawing from class may have consequences associated with financial aid and time to completion. Students are strongly encouraged to consult with Financial Aid prior to withdrawing from any class, particularly if the student is currently on a warning or probation status.

   b. When a student exceeds the allowed absences, the student is in violation of the attendance policy. The instructor MUST withdraw the student with a grade of “W”, “WP”, or “WF” depending on the date the student exceeded the allowed absences and the student’s progress up to the last date of attendance. 

   c. Under extenuating circumstances and at the discretion of the faculty member teaching the class, allow the student to continue in the class and make-up the work. This exception must be documented at the time the allowed absences are exceeded.

   d. Absences are counted from the first day of class. There are no "excused" absences. All absences are counted, regardless of the reason for the absence.

5. A student must take the final exam or be excused from the final exam in order to earn a non-withdrawal grade.

6. Students are expected to be in class on time. Arrival to class/clinic after the scheduled start time or leaving class prior to dismissal counts as a tardy. Class, clinical, and lab times are measured by the clock in these teaching areas. Three tardies and/or early departures are considered as one absence unless stated otherwise. Students must notify the clinical unit and leave a message on the administrative assistant’s voice mail PRIOR to their clinical start time and follow proper steps outlined in syllabus addendum and Nursing Student Handbook depending upon student’s tardiness or being absent from the clinical setting. Failure to do so WILL RESULT IN DISMISSAL FROM THE PROGRAM.

7. It is the student’s responsibility to sign the roll/verify attendance with instructor upon entering the classroom. Failure to sign the roll/verify attendance results in a recorded absence. In the event of tardiness, it is the student’s responsibility to ensure that attendance is marked. The student is responsible for all material/announcements presented, whether present or absent.

8. Continuity of classroom and laboratory (which includes clinical experiences) is essential to the student’s progress in providing safe and competent patient care. Students are expected to use appropriate judgment for participating in clinical activities. To evaluate the student’s knowledge and skills, it is necessary for the student to be present for all clinical experiences. If absence does occur, the Clinical Coordinator must be notified via phone message no later than 30 minutes prior to your clinical start time along with Division of Health Sciences Administrative Assistant
also being notified by telephone no later than 30 minutes prior to the start of the clinical experience. The Division of Health Sciences telephone number is (843-525-8267).

9. Absences from the clinical area are strongly discouraged. The attendance policy applies to clinical activities. "NO CALL, NO SHOW" for clinical is unprofessional conduct and THE STUDENT WILL BE WITHDRAWN FROM THE PROGRAM.

*Please refer to the Division Handbook for clarification of the No Call/No Show process.*

A copy of TCL’s STATEMENT OF POLICY NUMBER: 3-1-307 CLASS ATTENDANCE (WITHDRAWAL) is on file in the Division Office and in the Learning Resources Center.

HAZARDOUS WEATHER
In case weather conditions are so severe that operation of the College may clearly pose a hardship on students and staff traveling to the College, notification of closing will be made through the following radio and television stations: WYKZ 98.7, WGCO 98.3, WGZO 103.1, WFXH 106.1, WWVV 106.9, WLOW 107.9, WGZR 104.9, WFXH 1130 AM, WLHV 101.1, WSOK 1230 AM, WAEV 97.3, WTOC TV, WTGS TV, WJWJ TV, and WSAV TV.

Students, faculty and staff are highly encouraged to opt in to the Emergency Text Message Alert System. With TCL’s Text Alerts you can receive immediate notification of emergency events via text messaging on your cell phone. All students are strongly encouraged to register their cell phones with this service. Signing up is easy, just fill out the simple form on the TCL website (https://tcl.regroup.com/signup).

ACADEMIC MISCONDUCT

There is no tolerance at TCL for academic dishonesty and misconduct. The College expects all students to conduct themselves with dignity and to maintain high standards of responsible citizenship.

It is the student’s responsibility to address any questions regarding what might constitute academic misconduct to the course instructor for further clarification.

The College adheres to the Student Code for the South Carolina Technical College System. Copies of the Student Code and Grievance Procedure are provided in the TCL Student Handbook, the Division Office, and the Learning Resources Center.

Health care professionals hold the public trust. Academic misconduct by health science students’ calls that trust into question and academic integrity is expected.

It is a fundamental requirement that any work presented by students will be their own. Examples of academic misconduct include (but are not limited to):

1. copying the work of another student or allowing another student to copy working papers, printed output, electronic files, quizzes, tests, or assignments.
2. completing the work of another student or allowing another student to complete or contribute to working papers, printed output, electronic files, quizzes, tests, or assignments.
3. viewing another student’s computer screen during a quiz or examination.
4. talking or communicating with another student during a test.
5. violating procedures prescribed by the instructor to protect the integrity of a quiz, test, or assignment.
6. plagiarism in any form, including, but not limited to: copying/pasting from a website, textbook, previously submitted student work, or any instructor-prepared class material; obvious violation of any copyright-protected materials.
7. knowingly aiding a person involved in academic misconduct.
8. providing false information to staff and/or faculty.
9. entering an office unaccompanied by faculty or staff.
10. misuse of electronic devices.

GRADING POLICY

<table>
<thead>
<tr>
<th>Grading scale</th>
<th>W  withdraw</th>
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<tbody>
<tr>
<td>90% - 100%</td>
<td>A</td>
</tr>
<tr>
<td>82% - 89%</td>
<td>B</td>
</tr>
<tr>
<td>75% - 81%</td>
<td>C</td>
</tr>
<tr>
<td>70% - 74%</td>
<td>D</td>
</tr>
<tr>
<td>Below 70%</td>
<td>F</td>
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**Grading Methodology.** The final grade must be 75.000 or more in order to pass the course and progress in the program. Students absent from an examination or presentation will receive a “0” grade for the examination unless other arrangements are made with the individual instructor prior to the examination or presentation day or on the examination or presentation day before the test/presentation is scheduled to be given. Arrangements may be completed by telephone. If the instructor is not available, a message should be left on the instructor’s voice mail AND with another member of the faculty or administrative assistant. Messages sent by other students are unacceptable. The student is responsible for notifying the instructor for the reason of the absence. Students who are tardy for an examination will take the examination in the remaining allotted time.

Make up examinations may be offered, at the instructor’s discretion, during the final examination period. Additional options for make-up testing include reweighting the final examination. It is the responsibility of the student to contact the appropriate instructor to arrange to make up the examination. The instructor will decide the method of examination. Grades are posted on Blackboard within one week of administration of tests and examinations.

*During examinations, students must remove watches and hats and they must be placed in the front of the classroom, along with all personal belongings and electronic devices. There is a 10-point penalty on the examination for any noise emitting from an electronic device.*

*During paper examinations, only answers transferred and completed on Scantron sheets will be graded electronically to count towards the test score.*
Students with concerns or questions regarding grades earned should contact the course coordinator within one week of grades being posted. Students who score a 75 or less on exam 1 must create an academic success plan and meet with the course coordinator or instructor to discuss success strategies. Students must meet with the course coordinator within two weeks of taking exam 1.

HONORLOCK ONLINE PROCTORING AND TECHNOLOGY REQUIREMENTS

TCL uses an online test proctoring service called Honorlock to monitor some online tests as an alternative to in-person proctoring. Your instructor may elect to have some of your tests proctored using Honorlock. If so, you will need to make sure that you have access to the necessary equipment in order to take your online-proctored tests:

- A computer with access to a high-speed Internet connection
- A computer with the ability to install the Honorlock extension on Google Chrome.
- A webcam and microphone. A functioning webcam and microphone are required to complete proctored online tests.
- Microsoft Office. (Microsoft Office can be downloaded for free by accessing the Office 365 link in your TCL email account.)

This class is taught in a distance-learning format. Images and words of class participants may be transmitted live or on a delayed basis to other locations. Classes may be rebroadcast due to extenuating circumstances.

COMPUTER REQUIREMENTS. To ensure successful completion of an online course, a student should have an appropriately equipped computer. Use the guidelines included on the TCL website.

USER RESPONSIBILITY ON USE AND DUPLICATION OF COMPUTER SOFTWARE (TCL PROCEDURE 7-1-702.5). Students are responsible for the legal use of computer software and applicable copyright laws and are prohibited from copying software on College computers and from installing personal software.

COURSE POLICIES/PROCEDURES

It is clearly to the advantage of the student to attend class regularly. Test materials are weighted heavily in favor of lecture materials.

All cell phones and pagers must be turned off during class (lecture and laboratory periods). No pagers or phones are allowed in the clinical facility. No exceptions are made to this rule.

Students are held accountable for content in the nursing student handbook.


Instructors will excuse a student from class who disrupts the class.

No course grades are posted in public areas. Grades are available through Web Advisor. The student must go to the college’s website www.tcl.edu Select current student then select TCL Web Advisor and find: (1) the directions and a demonstration on how to log in to Web Advisor, and (2) how to access grades. For questions, contact the TCL Help Desk at 525-8344 or the Registrar’s office at 525-8210.
COMMUNICATION

Instructors will generally respond to voice mail messages and e-mail messages as soon as possible. If there is a problem, the student should remember that a face-to-face meeting with the instructor is best. Student should contact instructor to make an appointment. **Student should check TCL email at least once each day.**

**Students**

Contact information for instructors is listed at *VII Class Information* on the course syllabus. The student is responsible for making sure that the instructor and College has his/her current contact information, including telephone number(s) and e-mail address.

All students are expected to establish a TCL email account. The student is responsible for checking the course Blackboard site and TCL email account regularly (at least 2-3 times a week) for course announcements and email.

**Voice Messages**

Instructors' telephone numbers and the Division Administrative Assistant's telephone number are listed at *VII Class Information* on the course syllabus.

When leaving a voice mail message for the instructor, the student should speak slowly and clearly. He/she should leave accurate information including accurate telephone number(s) where he/she may be reached. It is helpful to repeat the telephone number at the very end of the voice message.

The Division Administrative Assistant is available on class days from 8:00-5:30 pm. A message left with the Administrative Assistant will be received by the instructor when he/she checks the mailbox. The most efficient way to get a voicemail message to an instructor is to leave a voicemail at the instructor's contact number listed at *VII Class Information* on the course syllabus.

If there is a need to call an adjunct instructor, call the Division Office 843-525-8267 from 8:00-5:30 pm Monday – Thursday and 8:00 – 11:30am on Friday. The Administrative Assistant will place a note in the instructor's mailbox. A message left with the Administrative Assistant will be received by the instructor when he/she checks the mailbox.

**E-mail Messages**

The instructor’s e-mail address is listed at *VII Class Information* on the course syllabus. When e-mailing the instructor, the student should identify herself/himself in the body of the message. Identifying information should include name, course, and section in which the student is enrolled, and a telephone number where he/she may be reached. With the tools provided by the browser, it might be helpful to create a "signature" with this information for all e-mails.
E-mails to adjunct instructors may be addressed to the instructor and sent to the Division Administrative Assistant at 525-8267. A copy will be made and placed in the adjunct instructor's mailbox. Students may also email selected adjunct instructors in course websites.

Course Coordinator: Kimberly Headden, RN, MSN, CMSRN  
Office location: Building 2, Room 212  
Telephone number: 843-470-5955  
E-mail: kheadden@tcl.edu

Course Instructor: DeAnne Johnson, RN, MSN, CMSRN  
Office location: Building 2, Room 240  
Telephone number: 843-525-8256  
E-mail: dkjohnson@tcl.edu

Nursing 155 Diabetes Case Study Assignment  
Guidelines with Scoring Rubric

Purpose
The purpose of this assignment is to provide an opportunity for students to research, develop, and write a paper that provides general information about diabetes and specific information related to the patient portrayed in the case study.

Course Outcomes
Through this assignment, the student will demonstrate the ability to:
(CO 2) Describe nursing standards of care for patients with commonly occurring health problems
(CO 3) Compare the nursing implications of chronic health problems
(CO 4) Determine cultural, spiritual, developmental, and psychosocial variable which influence patients and families

Due Date: June 18th at 11:59 p.m.

Total Points Possible: 100  (7% of overall course grade)

Requirements:
1. This paper will be graded upon quality of information, format of paper, use of citations and references, grammar, and organization. Each student will write their paper on the case study they were assigned.
2. The length of paper is to be no greater than 5 pages, excluding title page and reference page. Extra pages will not be read by the instructor and will not count toward the student’s grade.
3. For every day this assignment is late, 5 points will be deducted from the student’s total grade.
4. Submit a digital copy to Blackboard under the “Diabetes Paper” Tab. Electronic copies will be submitted to SafeAssign (a tool used to identify plagiarism) at the discretion of course instructors. Plagiarism is neither tolerated nor acceptable at TCL.

5. APA format (6th edition) is required in this assignment including a title page and reference page.
   a. Use size 12 font, Times New Roman, and 1 inch margins on all sides of the paper.
   b. Double-space all lines of the paper. Do not add extra spaces between sections.
   c. Use APA level 1 and 2 headings for the organizational structure for this assignment. Remember that the introduction does not carry a heading that labels it as a level heading in APA format. The first part of the paper is assumed to be the introduction.
   d. All paragraphs will be at least 3 sentences.
   e. Avoid the use of contractions and first person.
   f. Write out a term prior to abbreviating the first time, followed by the abbreviation in parentheses.

6. Additional Guidelines:
   a. Limit direct quotes to three.
   b. A minimum of 3 scholarly (empirical) references must be cited and referenced. Textbooks may be used and cited but will not be counted as one of the 3 required scholarly references.
   c. References cannot be greater than 5 years old.
   d. All sources cited in the text must appear in the reference list and each entry in the reference list must be cited in the text.

7. Upload for proofreading: https://www.tcl.edu/student-services/tutoring/. To receive the points for this section, documentation must be submitted to Blackboard from the Tutoring Center under the “Diabetes Paper” Tab.

<table>
<thead>
<tr>
<th>Category and Program Outcome</th>
<th>Points</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>5</td>
<td>The introduction should be clear. The introduction should briefly introduce your topic and explain why the topic is important. The end of your introduction should state the paper’s purpose and topics to be covered.</td>
</tr>
<tr>
<td>Pathophysiology/Admitting Diagnosis (Clinical Competence)</td>
<td>15</td>
<td>Briefly describe the pathophysiology and treatment modalities for the type of diabetes identified in your assigned case study.</td>
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<td></td>
<td></td>
<td>a. State the patient’s admitting diagnosis and explain how it relates to diabetes.</td>
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<td></td>
<td>This section should be clear and show an in depth understanding of the patient’s disease process.</td>
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<td></td>
<td></td>
<td>Must include empirical evidence.</td>
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<tr>
<td>Assessment Findings (Clinical Competence)</td>
<td>12</td>
<td>a. Identify 2 assessment findings on the case study patient and explain how those findings correspond to his/her type of diabetes.</td>
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<td></td>
<td>b. List 5 other signs and symptoms that correspond with the type of diabetes your patient has.</td>
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<tr>
<td>Topic</td>
<td>Total</td>
<td>Description</td>
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| Psychosocial Variables *(Holism) (Caring)* | 15 | Identify the psychosocial variables present for your patient and discuss substantively how they may impact diabetes. Focus on the 3 following elements:  
   a. Identify Erickson’s developmental stage your patient is in and describe how this stage may impact diabetes.  
   b. Identify your patient’s cultural beliefs and describe how they may impact diabetes.  
   c. Identify your patient’s spiritual beliefs and describe how they may impact diabetes.  
   Must include empirical evidence. |
| Chronic Complications *(Clinical Competence)* | 12 | Identify 1 macrovascular and 1 microvascular chronic complication of diabetes and describe how your patient is at risk for developing these complications.  
   Must include empirical evidence. |
| Independent Nursing Interventions *(Teaching/Learning)* | 12 | Identify and discuss 3 independent nursing interventions substantively that can be implemented into the case study with rationales.  
   a. 1 intervention must be on a topic that the patient would need to be educated on at discharge  
   Do not duplicate orders or treatments already implemented into the case study.  
   Must include empirical evidence. |
<p>| Interprofessional Collaboration <em>(Communication)</em> | 6 | Identify another healthcare provider, not already involved in the patient’s case study, whose expertise would be beneficial in caring for this patient with rationale. |
| Conclusion | 6 | Concluding content should be concise and summarize the main points of the paper. It should include the writer’s new knowledge gained from writing the paper. The conclusion should not restate what is already written in the paper. |
| Proofreading Documentation | 2 | Documentation is submitted to Blackboard showing that the paper was submitted to the Tutoring Center for proofreading. |
| Paper Format | 5 | Text, title page, citations, and references are consistent with APA format. |
| Adherence to Guidelines <em>(Professionalism)</em> | 5 | A minimum of 3 Evidence Based Practice (EBP) journal articles are cited and referenced. References are no greater than 5 years old. Only 3 direct quotes can be cited throughout paper. All guidelines under Requirement #6 are followed. |
| Grammar <em>(Professionalism)</em> | 5 | Rules of grammar, word usage, and punctuation are followed throughout paper. |</p>
<table>
<thead>
<tr>
<th>Assignment Criteria</th>
<th>Total Points Possible=100</th>
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<tbody>
<tr>
<td><strong>A (90-100%)</strong></td>
<td><strong>B (82-89%)</strong></td>
</tr>
<tr>
<td><strong>Exceptional/Highest Level of Performance</strong></td>
<td><strong>Competent/Very Good</strong></td>
</tr>
<tr>
<td><strong>Introduction</strong></td>
<td>5 points</td>
</tr>
<tr>
<td>- Introduction is clear.</td>
<td>- The topic is briefly introduced and the importance of the topic is explained accurately.</td>
</tr>
<tr>
<td></td>
<td>- States the paper’s purpose and topics to be covered.</td>
</tr>
<tr>
<td><strong>Pathophysiology/Admitting Diagnosis</strong></td>
<td>15 points</td>
</tr>
<tr>
<td>- An exceptional level of knowledge of pathophysiology and treatment modalities is reflected and is clearly related to the assigned case study.</td>
<td>- A competent level of knowledge of pathophysiology and treatment modalities is reflected of the assigned case study with rare inaccuracy.</td>
</tr>
<tr>
<td></td>
<td>- The patient’s admitting diagnosis is clearly stated with accurate rationale of how this diagnosis relates to diabetes.</td>
</tr>
<tr>
<td></td>
<td><em>(This section should show an in depth understanding of the patient’s disease process.)</em></td>
</tr>
<tr>
<td>Assessment Findings</td>
<td>12 points</td>
</tr>
<tr>
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</tr>
<tr>
<td>- Clearly identifies 2 assessment findings and accurately describes how those findings correspond with the patient’s type of diabetes.</td>
<td>- Identifies 2 assessment findings and describes how those findings correspond with the patient’s type of diabetes with rare inaccuracy.</td>
</tr>
<tr>
<td>- Clearly lists 5 other signs and symptoms that correspond with the patient’s type of diabetes accurately.</td>
<td>- Lists 4-5 other signs and symptoms that correspond with the patient’s type of diabetes with rare inaccuracy.</td>
</tr>
<tr>
<td>- Identifies 2 assessment findings and describes how those findings correspond with the patient’s type of diabetes with rare inaccuracy.</td>
<td>- Lists 4-5 other signs and symptoms that correspond with the patient’s type of diabetes with rare inaccuracy.</td>
</tr>
<tr>
<td>- Identifies only 1 assessment finding and describes how those findings correspond with the patient’s type of diabetes with rare inaccuracy. OR - Identifies 1-2 assessment findings and describes how those findings correspond with the patient’s type of diabetes with multiple inaccuracies or with lack of specificity.</td>
<td>- Lists 2-3 other signs and symptoms that correspond with the patient’s type of diabetes accurately. OR - Lists 5 other signs and symptoms that correspond with the patient’s type of diabetes with multiple inaccuracies.</td>
</tr>
<tr>
<td>- Identifies 1-2 assessment findings but does not describe how those findings correspond with the patient’s type of diabetes. OR - Assessment findings are not included.</td>
<td>- Lists 2-3 other signs and symptoms that correspond with the patient’s type of diabetes accurately. OR - Lists 5 other signs and symptoms that correspond with the patient’s type of diabetes with multiple inaccuracies.</td>
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<td>- Identifies 1-2 assessment findings but does not describe how those findings correspond with the patient’s type of diabetes. OR - Assessment findings are not included.</td>
<td>- Lists 2-3 other signs and symptoms that correspond with the patient’s type of diabetes accurately. OR - Lists 5 other signs and symptoms that correspond with the patient’s type of diabetes with multiple inaccuracies.</td>
</tr>
<tr>
<td>- Lists 1 other sign and symptom that corresponds with the patient’s type of diabetes accurately. OR - No other signs and symptoms are listed.</td>
<td>- Lists 2-3 other signs and symptoms that correspond with the patient’s type of diabetes accurately. OR - Lists 5 other signs and symptoms that correspond with the patient’s type of diabetes with multiple inaccuracies.</td>
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<tr>
<td>Psychosocial Variables</td>
<td>15 points</td>
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<td>------------------------</td>
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</tr>
<tr>
<td>- Clearly identifies the patient’s psychosocial variables and explains how they may impact diabetes. All 3 elements are discussed substantively.</td>
<td>- Identifies the patient’s psychosocial variables and explains how they may impact diabetes. Only 2 elements are discussed substantively. OR - Identifies the patient’s psychosocial variables and explains how they may impact diabetes. All 3 elements are partially discussed with rare inaccuracy.</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Chronic Complications</th>
<th>12 points</th>
<th>11-8 points</th>
<th>7-4 points</th>
<th>3-0 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Clearly identifies 1 macrovascular and 1 microvascular chronic complication of diabetes and describes how the patient is at risk for developing these complications.</td>
<td>- Identifies 1 macrovascular and 1 microvascular chronic complication of diabetes and describes how the patient is at risk for developing these complications with rare inaccuracy.</td>
<td>- Identifies 1 macrovascular or 1 microvascular chronic complication (BUT NOT BOTH) and describes how the patient is at risk for developing these complications. OR - Identifies 1 macrovascular and 1 microvascular chronic complication of diabetes and describes how the patient is at risk for developing these complications with multiple inaccuracies or with lack of specificity. OR - Lacks empirical evidence.</td>
<td>- Identifies 1 macrovascular and/or 1 microvascular chronic complication but does not describe how the patient is at risk for developing these complications. OR - Does not identify any chronic complications.</td>
<td></td>
</tr>
<tr>
<td>Independent Nursing Interventions</td>
<td>12 points</td>
<td>11-8 points</td>
<td>7-4 points</td>
<td>3-0 points</td>
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<tr>
<td>-3 independent nursing interventions with rationales are identified and discussed substantively that can be implemented into the case study.</td>
<td>-3 independent nursing interventions with rationales are identified and discussed substantively that can be implemented into the case study with rare inaccuracy. OR -Only 1 independent nursing intervention with rationale is identified and discussed substantively that can be implemented into the case study. OR -3 independent nursing interventions with rationales are identified and discussed partially that can be implemented into the case study with multiple inaccuracies and/or lack of specificity. OR -1 of the 3 independent nursing interventions are duplicated from the case study. -1 of the 3 interventions is not on a diabetic topic that the patient would need to be educated on at discharge. -Lacks empirical evidence.</td>
<td></td>
<td>-1-3 independent nursing interventions are identified but do not include rationales. OR -NO independent nursing interventions are identified. OR -2 or 3 of the 3 independent nursing interventions are duplicated from the case study.</td>
<td></td>
</tr>
<tr>
<td>-1 of the 3 interventions is on a diabetic topic that the patient would need to be educated on at discharge.</td>
<td>-2 independent nursing interventions are identified and discussed substantively that can be implemented into the case study.</td>
<td>-1 independent nursing intervention with rationale is identified and discussed substantively that can be implemented into the case study. OR -2 independent nursing interventions are identified and discussed partially that can be implemented into the case study. OR -1 of the 3 interventions is not on a diabetic topic that the patient would need to be educated on at discharge. -Lacks empirical evidence.</td>
<td></td>
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</tr>
<tr>
<td>-Do not duplicate orders or treatments already implemented into the case study.</td>
<td>-1 independent nursing intervention with rationale is identified and discussed substantively that can be implemented into the case study. OR -1 independent nursing intervention with rationale is identified and discussed partially that can be implemented into the case study. OR -1 of the 3 interventions is not on a diabetic topic that the patient would need to be educated on at discharge. -Lacks empirical evidence.</td>
<td>-Only 1 independent nursing intervention with rationale is identified and discussed substantively that can be implemented into the case study. OR -2 independent nursing interventions are identified and discussed partially that can be implemented into the case study. OR -1 of the 3 interventions is not on a diabetic topic that the patient would need to be educated on at discharge. -Lacks empirical evidence.</td>
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<tr>
<th>Interprofessional Collaboration</th>
<th>6 points</th>
<th>5-4 points</th>
<th>3-2 points</th>
<th>1-0 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify another healthcare provider (HCP) (not already involved in the patient's case study) whose expertise would be beneficial in caring for this patient with rationale.</td>
<td>Identify another HCP whose expertise would be beneficial in caring for this patient with rationale and rare inaccuracy.</td>
<td>Identify another HCP whose expertise would be beneficial in caring for this patient with rationale and multiple inaccuracies.</td>
<td>Identify another HCP whose expertise would be beneficial in caring for this patient with NO rationale OR -Another HCP is not identified.</td>
<td></td>
</tr>
<tr>
<td>Conclusion</td>
<td>6 points</td>
<td>4-1 points</td>
<td>0 points</td>
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<tr>
<td>-Concluding content should be concise and summarize the main points of the paper.</td>
<td>-Concluding content is not concise and does not summarize the main points of the paper.</td>
<td>No conclusion is written.</td>
<td></td>
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</tr>
<tr>
<td>-It should include the writer’s new knowledge gained from writing the paper.</td>
<td>-Lacks clarity.</td>
<td></td>
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<tr>
<td>-The conclusion should not restate what is already written in the paper.</td>
<td>-Does not include the writer’s new knowledge gained from writing the paper.</td>
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<td></td>
<td>-The conclusion restates content already written in the paper.</td>
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<table>
<thead>
<tr>
<th>Proofreading Documentation</th>
<th>2 points</th>
<th>0 points</th>
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<tbody>
<tr>
<td>Documentation is submitted to Blackboard showing that the paper was submitted to the Tutoring Center for proofreading.</td>
<td></td>
<td>No documentation is submitted to Blackboard.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Paper Format</th>
<th>5 points</th>
<th>4-3 points</th>
<th>2-1 points</th>
<th>0 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are 0 APA format errors in text, title page, citations, and references.</td>
<td>There are 1-2 APA format errors in text, title page, citations, and references.</td>
<td>-There are 3-4 APA format errors in text, title page, citations, and references.</td>
<td>There are 5 or more APA format errors in text, title page, citations, and references.</td>
<td></td>
</tr>
<tr>
<td>Adherence to Guidelines</td>
<td>5 points</td>
<td>4-0 points</td>
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<tr>
<td>- At least 3 EBP Journal Articles are cited and referenced.</td>
<td>- Less than 3 EBP Journal Articles were cited and referenced. OR - 1 or more references are greater than 5 years old. OR - 4 or more direct quotes are cited throughout paper. OR - Guidelines under Requirement #6 were not followed.</td>
<td></td>
<td></td>
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<tr>
<td>- References are no greater than 5 years old.</td>
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<td>- 3 or less direct quotes are cited throughout paper.</td>
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<td>- All guidelines under Requirement #6 are followed.</td>
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<thead>
<tr>
<th>Grammar</th>
<th>5 points</th>
<th>4-3 points</th>
<th>2-1 points</th>
<th>0 points</th>
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<tr>
<td>There are no errors in rules of grammar, word usage, and punctuation.</td>
<td>There are 1-2 errors in rules of grammar, word usage, and punctuation.</td>
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<td>There are 5 or more errors in rules of grammar, word usage, and punctuation.</td>
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