

Name of Department:	Nursing					
Instructor Name:	Mary Moser-Gautreaux EdD MSN CNS					
Office Location:	Nursing Education Rm112A					
Office Hours:	Monday 0800-1300 or by appointment					
E-mail:	mmosergautreaux@unm.edu					
Telephone:	(505) 925-8873					
Class Meeting Days/Times:	Tuesday and Wednesday 0830-1250 Room Nursing Education 111					
Lab/Clinical Days/Times	Labs will be on Tuesday from1330-1630 and Wednesdays 1330-1630					
	Clinical will be on Saturdays and Sundays per schedule or Thursday and Fridays per schedule					
	Simulations will be per schedule					
	NURS 110, NURS 115, HCHS 125, NURS 130, NURS 131, NURS 230, NURS 232, NURS 234; NURS 242, NURS					
pre-requisites:	245					
co-requisites:						
	Syllabus					
Title of Course:	NURS 243 Medical-Surgical Nursing III Spring 2017					
Course Description:	The nursing process is applied in the care of the adult client with complex acute, life-threatening, multi-					
	system health problems. Clinical learning may take place in outpatient and inpatient acute care settings and					
	simulation labs.					
Credit Hours and Contact	Classroom Hours: 8 hours/week theory (6 credits)					
Hours:	Clinical Hours: 144 hours/semester (3 clinical credits) Total: 9 credits					
Charlenski zamaina	1. Destining to be preferring practice that is national contained and culturally appropriate for individuals, families					
Student Learning	1. Participate in professional nursing practice that is patient-centered and culturally appropriate for individuals, families, and communities. (G.O1)					
Outcomes:	2. Functions effectively as a member of the inter-professional healthcare team for the delivery of healthcare for quality					
	patient outcomes.(G.O2)					
	3. Deliver nursing care that is evidence based in a variety of healthcare settings.(G.O3)					
	4. Apply the principles of quality improvement to nursing practice within a variety of healthcare settings.(G.O4)					
	5. Integrate principles of safe nursing care into nursing practice (G.O5)					
	6. Utilize technologies for the management of information and in the delivery of patient care.(G.O6)					

Required Text(s) and Supporting Materials:	 Lewis, Diirksen, Heitkemper, Butcher (2014) 9th Ed Medical Surgical Nursing Assessment and Management of Clinical Problems.
Supporting Materials:	 Clinical Problems. Pagana, T.J.; Pagana, D.P. (2012). Mosby's Diagnostic and Laboratory Test Reference. (11th ed). St. Louis: Elsevier/Mosby. (or other current manual) Potter, P.A., Perry, A.G. (2015) Essentials of Nursing practice (8th ed.). St. Louis: Elsevier/Mosby Morris, D.G. (2009) Calculate with Confidence. (5th ed.). St. Louis: Elsevier/Mosby Deglin, Vallerand, Davis's Drug Guide for Nurses, latest edition, F. A. Davis (or other current drug handbook) Kaplan resources Blackboard Learn® Contents
	Liability and needle stick insurance, uniform, stethoscope, penlight, proper identification

Disabilities Policy:	In accordance with University Policy 2310 and the Americans with Disabilities Act (ADA), any student needing academic accommodations should first contact Equal Access Services at 925-8560 (Student Services Bldg.) It is also imperative that you take the initiative to bring such needs to the instructor's attention, as your instructor is not legally permitted to inquire. Students who may require assistance in emergency evacuations should contact the instructor as to the most appropriate procedures to follow.
Student Handbook Policies	Students are expected to read and be familiar with the policies as stated in the student handbook. Students need to pay close attention to the following policies: • Attendance Theory/lab/clinical • Cell Phone use • Uniform policy • Medication math exam
	Students may wear casual professional for theory class. Lab/clinical uniforms are to be worn on lab/clinical or outings.

Course Matrix	Exam 1 18.75%	187.5 points
	Exam 2 18.75%	187.5 points
	Exam 3 18.75%	187.5 points
	Exam 4 18.75%	187.5 points
	Pharmacology Exam with remediation	
	Simulation 10% total	100 points
	Kaplan Exam w remediation 5% total	100 points
	Evidenced Based Paper and Presentation 10%	100 points
	TOTAL 100%	1000 points

Evaluation/Grading Policies:

- Theory Grading Policy: There will be four(4) theory tests in NURS 243
- The theory unit tests must achieve a minimum cumulative grade of 75%, which will constitute 75% of the student's final grade. Each theory examination will contain five (5) dosage/calculation problems.
- Course average must achieve a minimum cumulative grade of 75%
- There are no exam retakes, dropping of the lowest grade or extra credit.
- Other methods of evaluation will amount to 25% of a student's total grade and will not substitute for a passing grade in the testing component of the grade calculation.
- A failing grade will not be rounded to a passing grade (example: 74.99% does not round to 75%.
- A passing score in the clinical portion will not be considered until the 75% test average and the 75% course average requirements are met.

<u>Clinical Grading Policy:</u> All clinical/lab rotations will be graded with a "Pass/Fail." To pass, a student must successfully complete all required clinical hours, assignment work, and Meet the following performance evaluation criteria:

- Student is expected to *Meet Expectations* for Clinical Evaluation Competencies (CEC) in order to pass the course.
- It is understood student MAY NOT meet all of the CECs in the beginning weeks of the course. It is expected the student will be meet all of the CECs within the last weeks of the clinical experience.
- If student *Meet Expectations* in all CECs, it is optional for the course instructor of record to write a narrative note.
- If student DOES NOT *Meet Expectations* in one competency, the course instructor of record is required to write narrative note.
- If a student DOES NOT *Meet Expectations* in one competency two weeks in a row, the course instructor of record will discuss with student options for improvement.

• If a student DOES NOT *Meet Expectations* in one competency three weeks in row, the student will be placed on Clinical Probation and a written improvement plan developed by the course instructor of record and signed by both that instructor, the program director, and the student.

Mathematics Grading Policy: To insure the safety of the clients, at the beginning of the FOURTH (4TH) SEMESTER the student must pass a dosage/calculation test with a minimum of 90% after maximum of three (3) attempts before they are permitted to enter the clinical setting. The inability to successfully pass the dosage/calculation test in the maximum attempts will result in failure of the clinical portion of the course and requires remediation prior to applying for readmission. Remediation consists of successfully passing an approved nursing dosage/calculation course. There will be dosage and calculation math questions on all theory examinations.

Kaplan Policy

The UNM-Valencia Nursing Program has adopted a comprehensive assessment and review program from Kaplan Nursing. The intent of this program is to provide students with the tools they need to be successful in the nursing program and on the NCLEX-RN. The Kaplan program is a component (5%) of the student's grade in all nursing classes.

Kaplan also provides both online practice and proctored tests. The practice tests are designed for student self-assessment and provide students with immediate question feedback and rationales. Instructors provide the students with the practice test directions as needed. In order for the student to take the Kaplan proctored test, each student must have completed the online practice test. Grade points for practice tests are awarded based on the score achieved. The 5% of each course grade allotted to Kaplan will be derived from three sources and totaled for a possible 100 points.

Focused Review (practice) Test in Content Area	Points
80-100%	25
60-79.9%	20
40-59.9%	15
Less than 39.9%	0
Integrated (proctored) Test in Content Area	
>60 th percentile	25
50–59.9 th percentile	20
40–49.9 th percentile	15
<39.9 th percentile	0
Remediation of Integrated Test	
Remediates all questions minimum of 45 seconds	50
Remediates only wrong questions minimum of 45 seconds	40
Remediates >50% minimum of 45 seconds	30
Does not remediate	0
Total points	:

This Syllabus, including the Course Schedule, is subject to change at the discretion of the Instructor in accordance with UNM Valencia Academic Policies

Unit Exams -75% of total grade- 150	<u>Unit Exam Points</u> (must equal a	<u>Unit Exam Percentage</u> (must equal
points/	minimum of 562.5 total)	75% average)
	Exam 1	Exam 1%
	Exam 2	Exam 2%
	Exam 3	Exam 3%
	Exam 4	Exam 4%
	 Exam 5	Exam 5
	Total	Average%
Evidenced Based Paper and Presentation	EB Paper	EB Paper%
10% of Total Grade 75points paper	EB Presentation	EB Presentation%
25 Points presentation	Total	Total
Total 100 points		
Kaplan -5% of grade- 100 points possible		
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Total – 100% (1000 points)	Total Points	Total Percentage	%
Clinical Evaluations Clinical grade is	<u>Clinical Points</u>	Clinical Percentage	
pass/fail and is not considered until	Clinical Eval 1	Clinical Eval 1%	
theory requirements are met.)	Clinical Eval 2	Clinical Eval 2%	
	Clinical Eval 3	Clinical Eval 3%	
	Clinical Eval 4	Clinical Eval 4%	
	Clinical Eval 5	Clinical Eval 5%	
	Clinical Eval 6	Clinical Eval 6%	
	Clinical Eval 7	Clinical Eval 7%	
Pass Fail	Total Points	Total Percentage%	5
		Course Schedule	

	Fall 2016			
WK	Date	Objectives	Topic/Content	Prep
1	1/17/2017	 Syllabus/Course Review Medication Math review Describe the pathophysiology, clinical manifestations, and collaborative care of prostate cancer. (SLO2) Explain the nursing management of prostate cancer(SLO2) Specify the pathophysiology, clinical manifestations, and nursing and collaborative management of prostatitis and problems of the penis and scrotum. (SLO 2,3) Explain the clinical manifestations and collaborative care of testicular cancer. (SLO2) Describe the pathophysiology, clinical manifestations, and current nursing and collaborative management of problems related to male sexual function. (SLO 2,3) Summarize the psychological and emotional implications related to male reproductive problems. (SLO5) 	Nursing assessment and care of patients with selected endocrine problems Lewis Chapter 55	
1	1/18/2017	 Differentiate the etiology, clinical manifestations, diagnostic studies, collaborative care, and nursing management of seizure disorders, multiple sclerosis, Parkinson's disease, and myasthenia gravis. (SLO2,3) Describe the clinical manifestations and nursing and collaborative management of restless legs syndrome, amyotrophic lateral sclerosis, and Huntington's disease. (SLO2,3) Explain the potential impact of chronic neurologic disease on physical and psychologic well-being. (SLO1) Outline the major goals of treatment for the patient with a chronic, progressive neurologic disease. (SLO1) 	Lewis Chapter 56, 59 Nursing care of patients with chronic neurosensory alterations 1. Seizure disorders 2. Parkinsons disease 3. Myasthena Gravis 4. Multiple sclerosis 5. Restless leg syndrome 6. Amyotropic Lateral Sclerosis 7. Huntington's disease	Review A&P of Nervous system
2	1/24/2017	 Explain the physiologic mechanisms that maintain normal intracranial pressure. Describe the common etiologies, clinical manifestations, and collaborative care of the patient with increased intracranial pressure. 	Lewis Chapter 57 Nursing Management of Acute Intracranial Problems Stroke	Glascow Coma scale NCLEX Review Questions Pre-Test Case Studies Patient with Head Injury

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		 Describe the collaborative and nursing management of the patient with increased intracranial pressure. (SLO2,3,4) Differentiate types of head injury by mechanism of injury and clinical manifestations. (SLO1,5) Describe the collaborative care and nursing management of the patient with a head injury.(SLO 1,2,6) Compare the types, clinical manifestations, and collaborative care of patients with brain tumors.(SLO 1,2) Discuss the nursing management of the patient with a brain tumor.(SLO1) Describe the nursing management of the patient undergoing cranial surgery.(SLO1) Differentiate among the primary causes, collaborative care, and nursing management of brain abscess, meningitis, and encephalitis.(SLO3) 		O Patient with Meningitis
2	1/25/2017	Describe the incidence of and risk factors for stroke. (SLO3)	• Lewis	NIH stroke scale
2	1/25/2017	 Explain mechanisms that affect cerebral blood flow. (SLO1) Compare and contrast the etiology and pathophysiology of ischemic and hemorrhagic strokes. (SLO 1,4) Correlate the clinical manifestations of stroke with the underlying pathophysiology. (SLO1) Identify diagnostic studies performed for patients with strokes. (SLO3) Differentiate among the collaborative care, drug therapy, and surgical therapy for patients with ischemic strokes and hemorrhagic strokes. (SLO1,5) Describe the acute nursing management of a patient with a stroke. (SLO5) 	Chapter 58 Nursing Management of Acute stroke	Read - Textbook (Chapter 58, pp. 1388-1412) Review - Evolve Resources NCLEX Review Questions Pre-Test Answer Guidelines for Case Study Rationales for Bridge to NCLEX Examination Questio Case Studies Patient with Hypertension and Stroke Patient with Stroke Table 58-7 - Emergency Management: Stroke
3	1/31/2017	 Explain the etiology, clinical manifestations, collaborative care, and nursing management of Guillain-Barré syndrome, botulism, tetanus, and neurosyphilis. (SLO1) Describe the classification of spinal cord injuries and associated clinical manifestations. (SLO 1,2,3) Describe the clinical manifestations, collaborative care, and nursing management of neurogenic and spinal shock. (SLO 1,3,4) Relate the clinical manifestations of spinal cord injury to the level of disruption and rehabilitation potential. (SLO 1,5) Describe the nursing management of the major physical and psychologic problems of the patient with a spinal cord injury. (SLO 2,3,4) 	Lewis Chapter 61 Nursing Management of Peripheral and Spinal cord Problems	Review - Clinical Companion Bell's Palsy Carpal Tunnel Syndrome Guillain-Barre Syndrome Spinal Cord Injury Spinal Cord Tumors NCLEX Review Questions Pre-Test Case Study Patient with Spinal Cord Injury

		Describe the effects of spinal cord injury on the older adult population. (SLO1,2) The state of the effects of spinal cord injury on the older adult population.		
		 Explain the types, clinical manifestations, collaborative care, and nursing management of spinal cord tumors.(SLO1,2) 		
3	2/1/2017	 Differentiate the pathophysiology, clinical manifestations, and collaborative care of different types of aortic aneurysms. (SLO1,2,3) Select appropriate nursing interventions for a patient undergoing an aortic aneurysm repair. (SLO 1,4) Describe the pathophysiology, clinical manifestations, collaborative care, and nursing management of aortic dissection. (SLO1,3,5) Describe the etiology, pathophysiology, and clinical manifestations of infective endocarditis and pericarditis. (SLO 1,3,4) Describe the collaborative care and nursing management of the patient with infective endocarditis and pericarditis. (SLO 2,4) Differentiate the etiology, pathophysiology, and clinical manifestations of myocarditis. (SLO1,2) Describe the collaborative care and nursing management of a patient with myocarditis. (SLO1,2) Differentiate the etiology, pathophysiology, and clinical manifestations of rheumatic fever and rheumatic heart disease. (SLO1,3) Describe the collaborative care and nursing management of the patient with rheumatic fever and rheumatic heart disease. (SLO1,2) Relate the pathophysiology to the clinical manifestations and diagnostic studies for the various types of valvular heart disease. (SLO1,6) Describe the collaborative care and nursing management of the patient with valvular heart disease. (SLO2,4) Relate the pathophysiology to the clinical manifestations and diagnostic studies for the different types of cardiomyopathy. (SLO1,6) Compare the nursing and collaborative management of patients with different types of cardiomyopathy. (SLO 1,2) 	Lewis Chapters 37,38 Care of Patients with Vascular Problems Care of Patients with Inflammatory and Structural Heart Disorders	Review - Clinical Companion Cardiomyopathy Endocarditis, Infective Myocarditis Pericarditis, Acute Rheumatic Fever and Heart Disease Valvular Heart Disease NCLEX Review Questions Pre-Test Case Study Patient With Rheumatic Fever and Heart Disease
4	2/7/2017	 Exam 1 (Chapter 55,56,57,58,59,61) Relate the etiology and pathophysiology of coronary artery disease (CAD), angina, and acute coronary syndrome (ACS) to the clinical manifestations of each disorder. (SLO 1, 	Lewis Chapter 34, 36	REVIEW - Clinical Companion Acute Coronary Syndrome

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			 Describe the nursing role in the promotion of therapeutic lifestyle changes in patients at risk for CAD.(SLO 3,2) Differentiate the precipitating factors, clinical manifestations, collaborative care, and nursing management of the patient with CAD and chronic stable angina.(SLO1,2,4,5) Explain the clinical manifestations, complications, diagnostic study results, and collaborative care of the patient with ACS. (SLO 1,6) 	Care of Patients with Acute Coronary Syndrome	 Angina, Chronic Stable Coronary Artery Disease Myocardial Infarction Dysrhythmias Pacemakers Characteristics of Common Dysrhythmias Review - Evolve Resources
			 Evaluate commonly used drug therapy in treating patients with CAD and ACS.(SLO3,5) Prioritize key components to include in the rehabilitation of patients recovering from ACS and coronary revascularization procedures. (SLO2,3) Differentiate the precipitating factors, clinical presentation, and collaborative care of patients who are at risk for or have experienced sudden cardiac death.(SLO 1,2,3) 		 NCLEX Review Questions Case Study Patient with Coronary Artery Disease and A Coronary Syndrome
	4	2/8/2017	• Cont. from 2/7/2017		
	5	2/14/2017	 Differentiate between acute kidney injury and chronic kidney disease.(SLO1,3) Identify criteria used in the classification of acute kidney injury using the acronym RIFLE (risk, injury, failure, loss, end-stage kidney disease).(SLO1,5) Describe the clinical course of acute kidney injury.(SLO1,3) Explain the collaborative care and nursing management of a patient with acute kidney injury.(SLO 2,4) Define chronic kidney disease and delineate the five stages of chronic kidney disease based on the glomerular filtration rate. (SLO 1,3) Differentiate among renal replacement therapy options for individuals with end-stage kidney disease. (SLO 1,3) Compare and contrast nursing interventions for individuals on peritoneal dialysis and hemodialysis.(SLO 1,3) Discuss the role of nurses in the management of individuals that receive a kidney transplant.(SLO 1,3) 	Lewis Chapter 47 Care of Patients with Renal Disorders & Care of Patients with Acute Kidney Injury and Chronic Kidney Disease	 Kidney Disease, Chronic Kidney Injury, Acute Dialysis Review - Evolve Resources NCLEX Review Questions Pre-Test Case Studies Patient With Glomerulonephritis and Disease Patient With Kidney Transplant eTable 47-1: Manifestations of Acute Kidney eTable 47-2: Case Study: Intrarenal Cause of Acute K Following Surgery

5	2/15/2017	 Differentiate among the types of viral hepatitis, including etiology, pathophysiology, clinical manifestations, complications, and collaborative care. (SLO1) Describe the nursing management of the patient with viral hepatitis.(SLO1,2) Describe the pathophysiology, clinical manifestations, complications, and collaborative care of the patient with nonalcoholic fatty liver disease. (SLO 1,2,3) Explain the etiology, pathophysiology, clinical manifestations, complications, collaborative care, and nursing management of the patient with cirrhosis of the liver.(SLO 1,2,3) Describe the clinical manifestations and management of liver cancer.(SLO 1,4) Differentiate between acute and chronic pancreatitis related to pathophysiology, clinical manifestations, complications, collaborative care, and nursing management.(SLO 1,2,4,5) Explain the clinical manifestations and collaborative care of the patient with pancreatic cancer.(SLO 1,2) Describe the pathophysiology, clinical manifestations, complications, and collaborative care of gallbladder disorders.(SLO 1,2) Describe the nursing management of the patient undergoing surgical treatment of cholecystitis and cholelithiasis.(SLO1,2,3) Relate the pathophysiology of acute and chronic complications of diabetes mellitus to the clinical manifestations. (SLO1,2) Explain the collaborative care and nursing management of the patient with acute and chronic complications of diabetes mellitus (SLO 2) 	Lewis Chapter 44 Nursing Management: Liver, Pancreas, and Biliary Tract Problems Lewis Chapter 50 Nursing Management: Endocrine Problems	Cholelithiasis/Cholecystitis Cirrhosis Hepatitis, Viral Liver Cancer Pancreatic Cancer Pancreatitis, Acute Pancreatitis, Chronic Diabetes Mellitus Metabolic Syndrome Review - Evolve Resources NCLEX Review Questions Case Studies Patient with Acute Pancreatitis Septic Shock Patient With Cholelithiasis/Cholecystitis Patient with Hepatitis Patient With Diabetes Ketoacidosis
6	2/21/2017	exam 2 (CH 34,36,37,38,47)continuation of previous week		
6	2/22/2017	 Relate the causes of and prevention strategies for burn injuries.(SLO1,3,5) Differentiate between partial-thickness and full-thickness burns.(SLO1) Apply the tools used to determine the severity of burns.(SLO3,6) Compare the pathophysiology, clinical manifestations, complications, and collaborative management throughout the three burn phases.(SLO1,2) 	Lewis: Chapter 25 Nursing Management: Burns	Practice - Clinical Companion Burns Review - Evolve Resources NCLEX Review Questions Case Study

	 Compare the fluid and electrolyte shifts during the emergent and acute burn phases.(SLO 1) Differentiate the nutritional needs of the burn patient throughout the three burn phases.(SLO1.2) Compare the various burn wound care techniques and surgical options for partial-thickness versus full-thickness burn wounds.(SLO1,3,4) Prioritize nursing interventions in the management of the physiologic and psychosocial needs of the burn patient.(SLO 1,2) Examine the various physiologic and psychosocial aspects of burn rehabilitation.(SLO1,4) Design a plan of care to prepare the burn patient and caregiver for discharge.(SLO1,4) 		O Patient With Burns
7 2/28/2017	 Compare the pathophysiologic mechanisms and clinical manifestations that result in hypoxemic and hypercapnic respiratory failure. (SLO1,3,6) Differentiate between the nursing and collaborative management of the patient with hypoxemic or hypercapnic respiratory failure. (SLO 1,2,3) Relate the pathophysiologic mechanisms and the clinical manifestations associated with acute lung injury and acute respiratory distress syndrome (ARDS). (SLO1,3) Select appropriate nursing and collaborative management strategies for the patient with ARDS. (SLO1,2) Prioritize measures to prevent or reverse complications that may result from acute respiratory failure or ARDS. (SLO1,5) Select appropriate nursing interventions to manage common problems and needs of critically ill patients. (SLO1,2,4) Develop strategies to manage issues related to caregivers of critically ill patients. (SLO1,4) Apply the principles of hemodynamic monitoring to the collaborative care and nursing management of patients receiving this intervention. (SLO 1,2,4) Differentiate the purpose of, indications for, and function of circulatory assist devices and related collaborative care and nursing management. (SLO1,2) Differentiate the indications for and modes of mechanical ventilation. (SLO1) Select appropriate nursing interventions related to the care of an intubated patient. (SLO1,5) 	Lewis Chapter 68 Nursing Management: Respiratory Failure and Acute Respiratory Distress Syndrome Lewis Chapter 66 Nursing Management: Critical Care	Review - Clinical Companion Acute Respiratory Distress Syndrome Respiratory Failure, Acute Oxygen Therapy Artificial Airways: Endotracheal Tubes Mechanical Ventilation Tracheostomy Review - Evolve Resources NCLEX Review Questions Case Studies Patient with Acute Respiratory Failure and Management Patient with Pulmonary Embolism and Research

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		 Relate the principles of mechanical ventilation to the collaborative care and nursing management of patients receiving this intervention. (SLO1,3,5) 		
7	3/1/2017	Continuation of above		
8	3/7/2017	 Relate the pathophysiology to the clinical manifestations of the different types of shock: Cardiogenic, hypovolemic, distributive, and obstructive. (SLO 1.3) Compare the effects of shock, systemic inflammatory response syndrome, and multiple organ dysfunction syndrome on the major body systems.(SLO 1,5) Compare the collaborative care, drug therapy, and nursing management of patients experiencing different types of shock.(SLO1,3,5) Describe the nursing management of a patient experiencing multiple organ dysfunction syndrome.(SLO1,2,4) 	Lewis: Chapter 67 Nursing Management: Shock, Systemic Inflammatory Response Syndrome, and Multiple Organ Dysfunction Syndrome	 Shock Systemic Inflammatory Response Syndrome (SIRS) Multiple Organ Dysfunction Syndrome (MODS) Review - Evolve Resources NCLEX Review Questions Case Studies Patient with Acute Pancreatitis and Septic S Patient with Cardiogenic Shock Patient with Sepsis
8	3/8/2017	 Exam 3 (CH 44,50,25) Apply the steps in triage, the primary survey, and the secondary survey to a patient experiencing a medical, surgical, or traumatic emergency.(SLO1,2,4,6) Relate the pathophysiology to the assessment and collaborative care of select environmental emergencies (e.g., hyperthermia, hypothermia, submersion injury, bites).(SLO1) Relate the pathophysiology to the assessment and collaborative care of select toxicologic emergencies.(SLO1,2) Select appropriate nursing interventions for victims of violence.(SLO1,2,4) Differentiate among the responsibilities of health care providers, the community, and select federal agencies in emergency and mass casualty incident preparedness.(SLO2,4,5) 	Lewis Chapter 69 Nursing Management: Emergency, Terrorism, and Disaster Nursing	 Emergency Patient: Primary and Secondary Survey eTable 69-1: Trauma Verification Levels eTable 69-2: Biologic Agents of Terrorism eTable 69-3: Chemical Agents of Terrorism by Target Organ or Effect Review - Evolve Resources NCLEX Review Questions Case Study Patient with Musculoskeletal Trauma
	3/12- 18/2017	Spring Break		
9	3/20/2017	• Exam 4 (Ch. 66,67,68,69)	1	
		Evidenced Based Paper/ presentation due		

9	3/22/2017	Kaplan Integrated MS comprehensive exam 0930	
10	3/27-	Kaplan Live review via webinar 0800-1600	
	3/30/2017		
11		Kaplan Remediation	
11		Kaplan Remediation	
12		Kaplan Remediation	
12		Kaplan Remediation	
13		Kaplan Remediation	
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