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School of Social Work
Department of Nursing

NURS 505
Summer 2019

Clinical Practicum: Management of Adult Patients
3 Units

I.   Course Prerequisites or Co-Requisites

NURS 503: Theory: Clinical Management of Adult Patients (Prerequisite)

NURS 504: Clinical Pharmacology for Advanced Practice Nursing (Prerequisite/Co-Requisite)

II.   Catalogue Description

This clinical practicum course is intended to prepare family nurse practitioner (FNP) students to provide primary health care to patients throughout the life span with a focus on the prevention of disease, health maintenance, and the diagnosis and management of patients with common illness.

III. Course Description

This course provides advanced practice nursing students in the FNP track with a clinical experience to apply the theoretical concepts studied in Theory: Clinical Management of Adult Patients course. **The focus of this clinical experience is on the assessment of adult health status incorporating health promotion, health maintenance, and delivery of care strategies.** In addition, the clinical experience will foster skills in the planning and implementation of care for adults with an altered health status. The clinical experience may take place in a variety of practice settings.

IV. Course Objectives

In this clinical practicum, the student will perform histories and physical examinations. The students will focus on the health prevention, health promotion, and diagnosis and management of patients with illnesses commonly seen in primary care. This clinical practicum will allow the student to integrate the theoretical knowledge obtained in their didactic courses with clinical practice in preparation to deliver high-quality, evidence-based primary care. Upon completion of this clinical practicum the FNP student will be able to:

Objective	Objectives
1	Perform an efficient health history and a relevant, orderly, and complete physical examination for the adult patient, as well as analyze data from the history and physical to prioritize interventions based on the severity and complexity of the health problems presented.
2	Diagnose medical alterations of the patient based on an understanding of pathophysiology, as well as an accurate interpretation of data from the history, physical exam, laboratory, and diagnostic tests.
3	Communicate and record accurate and concise findings related to patient care management while maintaining patient confidentiality throughout all aspects of the relationship.
4	Develop a comprehensive management plan, in partnership with the patient or the family, based on medical alterations of the adult patient, and evaluate plans of care.
5	Provide health promotion and disease management for patients, families, and communities while taking into consideration culture, race, gender, spiritual beliefs, sexual orientation, social class, economic situations, and alternative healthcare practices using current guidelines.
6	Implement safe, accessible, cost-effective, quality, evidence-based care utilizing the current healthcare system which includes interprofessional collaboration, referral, and co-management of patients where appropriate to provide effective care.

7	Identify community and family support resources available to assist patients and their families while promoting self-advocacy.
8	Evaluate their own performance, strengths, and weaknesses through written self-evaluation, preceptors' evaluations, and meetings with faculty while maintaining professional standards including responsibility, ethical practice, and accountability to the patient and their family.

V.   Course Format/Instructional Methods

This is a challenging and exciting online course, using both asynchronous and synchronous approaches. Students will be expected to be prepared, fully present, and actively involved during all phases of the course. It is also the expectation that students will either possess or have access to the necessary computer equipment (desktop computer with audio/video capability), software (Microsoft Word and Adobe Acrobat), and a reliable **hard-wired** Internet connection.

A primary care setting is the clinical practicum site. On-site preceptors utilize their clinical expertise to assist students with the integration of content and the development of clinical judgment as well as other relevant skills. Attendance and active participation during all phases of this course is mandatory. Students may start their clinical rotation in Week 1 and may end no earlier than Week 12. All students must complete an average of 16 hours of clinical per week. A total of 196 clinical hours AND a favorable clinical practicum evaluation is required for successful completion of this course.

VI.   Student Learning Outcomes

Student learning for this course relates to one or more of the following nine nursing core competencies:

	Nursing Core Competencies	NURS 505	Course Objective
1	Scientific Foundation Competencies	*	6
2	Leadership	*	3,6
3	Quality	*	4, 6
4	Practice Inquiry	*	6
5	Technology and Information Literacy	*	5, 6, 7
6	Policy	*	6, 7, 8
7	Health Delivery System	*	5, 6, 7
8	Ethics	*	8
9	Independent Practice	*	1–7

*Highlighted in this course

The following table explains the highlighted competencies for this course, the related student learning outcomes, and the method of assessment.

SCIENTIFIC FOUNDATION COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
Family Nurse Practitioner competent in Scientific Foundation Competencies: ▪ Integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual	Critically analyzes data and evidence for improving advanced nursing practice.	Comprehensive Clinical Write Up Episodic Clinical Write Ups: Low and Moderate/High Complexity Group Project Clinical Evaluation Tool
	Integrates knowledge from the humanities and sciences within the context of nursing science.	
	Translates research and other forms of knowledge to improve practice processes and outcomes.	

improvement of nursing care across diverse settings.	Develops new practice approaches based on the integration of research, theory, and practice knowledge.	

LEADERSHIP COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
Family Nurse Practitioner competent in Leadership Competencies: ■ Applies concepts of organizational and systems leadership critical to the promotion of high quality and safe patient care and has leadership skills needed to make ethical and critical decisions, working effectively within a systems perspective.	Assumes complex and advanced leadership roles to initiate and guide change.	Clinical Evaluation Tool
	Provides leadership to foster collaboration with multiple stakeholders to improve health care.	
	Demonstrates leadership that uses critical and reflective thinking.	
	Advances practice through the development and implementation of innovations incorporating principles of change.	
	Advocates for improved access, quality and cost effective health care.	
	Communicates practice knowledge effectively, both orally and in writing.	
	Works with individuals of other professions to maintain a climate of mutual respect and shared values.	
	Engages diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs.	
	Engages in continuous professional and interprofessional development to enhance team performance.	
	Assumes leadership in interprofessional groups to facilitate the development, implementation and evaluation of care provided in complex systems.	

QUALITY COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
Family Nurse Practitioner competent in Quality Competencies: ■ Discusses methods, tools, performance measures, and standards related to quality, and	Uses best available evidence to continuously improve quality of clinical practice.	Comprehensive Clinical Write Up Episodic Clinical Write Ups: Low and Moderate/High Complexity Group Project Clinical Evaluation Tool
	Evaluates the relationships among access, cost, quality, and safety and their influence on health care.	

applies quality principles within an organization.	Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.	
	Applies skills in peer review to promote a culture of excellence.	
	Anticipates variations in practice and is proactive in implementing interventions to ensure quality.	

PRACTICE INQUIRY COMPETENCIES

Competencies/Knowledge, Values, Skills	Student Learning Outcomes	Method of Assessment
Family Nurse Practitioner competent in Practice Inquiry Competencies: • Applies scholarship for evidence-based practices within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	Provides leadership in the translation of new knowledge into practice.	Comprehensive Clinical Write Up Episodic Clinical Write Ups: Low and Moderate/High Complexity Group Project Clinical Evaluation Tool
	Generates knowledge from clinical practice to improve practice and patient outcomes.	
	Applies clinical investigative skills to improve health outcomes.	
	Leads practice inquiry, individually or in partnership with others.	
	Disseminates evidence from inquiry to diverse audiences using multiple modalities.	

TECHNOLOGY AND INFORMATION LITERACY COMPETENCIES

Competencies/Knowledge, Values, Skills	Student Learning Outcomes	Method of Assessment
Family Nurse Practitioner competent in Technology and Information Literacy Competencies: ▪ Integrates and incorporates advances in technology within the practice setting, resolves practice problems, works as a change agent, and disseminates results.	Integrates appropriate technologies for knowledge management to improve health care.	Clinical Evaluation Tool
	Translates technical and scientific health information appropriate for various users' needs. ▪ Assesses the patient's and caregiver's educational needs to provide effective, personalized health care. ▪ Coaches the patient and caregiver for positive behavioral change.	
	Demonstrates information literacy skills in complex decision making.	
	Contributes to the design of clinical information systems that promote safe, quality and cost effective care.	
	Uses technology systems that capture data on variables for the evaluation of nursing care.	

POLICY COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
Family Nurse Practitioner competent in Policy Competencies: ▪ Defends the ability of the advanced practice nurse to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.	Recognize and manage personal values in a way that allows professional values to guide practice.	Clinical Evaluation Tool
	Advocates for ethical policies that promote access, equity, quality, and cost.	
	Analyzes ethical, legal, and social factors influencing policy development.	
	Contributes in the development of health policy.	
	Analyzes the implications of health policy across disciplines.	
	Evaluates the impact of globalization on health care policy development	

HEALTH DELIVERY SYSTEM COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
Family Nurse Practitioners competent in Health Delivery System Competencies: ▪ Explains how the advanced practice nurse applies and integrates broad, organizational, client centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations. As a member and leader of interprofessional health care system, the advanced practice nurse communicates, collaborates, and consults with other health professionals to manage and coordinate care.	Applies knowledge of organizational practices and complex systems to improve health care delivery.	Clinical Evaluation Tool
	Effects health care change using broad based skills including negotiating, consensus-building, and partnering.	
	Minimizes risk to patients and providers at the individual and systems level.	
	Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.	
	Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.	
	Analyzes organizational structure, functions and resources to improve the delivery of care.	

ETHICS COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
	Integrates ethical principles in decision making.	Clinical Evaluation Tool
	Evaluates the ethical consequences of decisions.	

| Family Nurse Practitioner competent in Ethics Competencies:
 ▪ Includes matters involving moral principles and social policy including professional guidelines for advanced practice nursing when providing care. | Applies ethically sound solutions to complex issues related to individuals, populations and systems of care. | |

INDEPENDENT PRACTICE COMPETENCIES		
Competencies/Knowledge, Values, Skills	**Student Learning Outcomes**	**Method of Assessment**
Family Nurse Practitioner competent in Independent Practice Competencies: ▪ Demonstrates how nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Advanced practice nurses must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care.	Functions as a licensed independent practitioner.	Clinical Evaluation Tool
	Demonstrates the highest level of accountability for professional practice.	
	Practices independently managing previously diagnosed and undiagnosed patients. ▪ Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care. ▪ Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings. ▪ Employs screening and diagnostic strategies in the development of diagnoses. ▪ Prescribes medications within scope of practice. ▪ Manages the health/illness status of patients and families over time.	
	Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making. ▪ Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration. ▪ Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.	

	▪ Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care. ▪ Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care.
	Obtains and accurately documents a relevant health history and comprehensive or symptom-focused physical examinations for patients of all ages and in all phases of the individual and family life cycle using collateral information, as needed.
	Identifies health and psychosocial risk factors and plans interventions to promote health of patients of all ages and families in all stages of the family life cycle, facilitating family decision-making about health.
	Assesses the impact of an acute, and/or chronic illness, or common injuries on the family as a whole.
	Assesses decision-making ability and consults and refers, appropriately.
	Distinguishes between normal and abnormal change across the lifespan and synthesizes data from a variety of sources to make clinical decisions regarding appropriate management, consultation, or referral.
	Plans diagnostic strategies and makes appropriate use of diagnostic tools for screening and prevention, with consideration of the costs, risks, and benefits to individuals.
	Formulates comprehensive differential diagnoses.
	Manages common acute and chronic physical and mental illnesses, including acute exacerbations and injuries across the lifespan to minimize the development of complications, and promote function and quality of living.
	Prescribes therapeutic devices and medications with knowledge of altered pharmacodynamics and pharmacokinetics with special populations, such as infants and children, pregnant and lactating women, and older adults.

	Adapts interventions to meet the complex needs of individuals and families arising from aging, developmental/life transitions, co-morbidities, psychosocial, and financial issues.	
	Assesses and promotes self-care in patients with disabilities.	
	Plans and orders palliative care and end-of-life care, as appropriate.	
	Performs primary care procedures safely.	
	Uses knowledge of family theories and development stages to individualize care provided to individuals and families.	
	Analyzes the impact of aging and age-and disease-related changes in sensory/perceptual function, cognition, confidence with technology, and health literacy and numeracy on the ability and readiness to learn and tailor interventions accordingly.	
	Demonstrates knowledge of the similarities and differences in roles of various health professionals proving mental health services, e.g., psychotherapists, psychologist, psychiatric social worker, psychiatrist, and advanced practice psychiatric nurse.	
	Evaluates the impact of life transitions on the health/illness status of patients and the impact of health and illness on patients (individuals, families, and communities).	
	Applies principles of self-efficacy/empowerment in promoting behavior change.	
	Develops patient-appropriate educational materials that address the language and cultural beliefs of the patient.	
	Monitors specialized care coordination to enhance effectiveness of outcomes for individuals and families.	

VII. Course Assignments, Due Dates, and Grading

Assignment	Due Date	% of Final Grade
Honor Pledge	Week 1	C/NC
Physical Exam Video	Week 1	C/NC
Learning Agreement	Week 1	C/NC
Comprehensive Clinical Write Up	Week 4	5%
Clinical Evaluation Tool	Week 6 &12	50%
Episodic Clinical Write Up: Low Complexity	Week 7	10%
Group Project	Weeks 10	5%
Episodic Clinical Write Up: Moderate/High Complexity	Week 12	10%
Asynchronous and Synchronous Class Participation	Weekly	20%
Typhon	Weekly	C/NC

Each of the major assignments is described below. The case should be deidentified of any patient, preceptor, or clinical site information; cases must be Health Insurance Portability and Accountability Act (HIPAA) complaint.

Physical Exam Video (credit/no credit)

Please submit a head-to-toe physical exam video prior to starting your clinical experience. There is no rubric for this assignment. *You may not use your physical exam from 502.*

Learning Agreement (credit/no credit)

Preceptor signed learning agreements with completed schedule must be uploaded to the LMS PRIOR to starting your clinical experience.
This assignment relates to student outcome 4.

Comprehensive Clinical Write Up

The comprehensive written clinical write up from the student's clinical practicum should use the clinical write up guideline and rubric as the organizing framework for this assignment. Appropriate appointment types include: new patients, annual physical, pre-operative exam, well woman visit, etc.
This assignment relates to student outcomes 1, 3, 7, and 8.

Episodic Clinical Write Ups: Low and Moderate/High Complexity

Two written clinical write ups from the student's clinical practicum will be due at Weeks 7 and 12 of this course. Students will identify a patient who came into their clinical site for an **episodic visit**. **Students will use the clinical write up guideline and rubric as the organizing framework for this assignment.** Low complexity cases include BUT are not limited to symptoms such as ear pain, sore throat, dysuria and epigastric pain. While moderate and high complexity cases include symptoms such as headache, fever, abdominal pain, and chest pain.
This assignment relates to student outcomes 1 and 3.

Group Project

Groups (two to three students per group) will be determined during the first few weeks of the course. Each group will be given a mystery case which they are expected to work up by creating a comprehensive list of differential diagnoses. Each group member should contribute at minimum of 2-3 diagnoses. This is a group project, however, your grade will reflect your contributions and may not be the same grade assigned to others in the group.
This assignment relates to student outcomes 1 and 3.

Clinical Practicum and Evaluation

Students are expected to complete 196 clinical hours over the course of the semester. This averages to approximately 16 hours per week. Students MUST log ALL patient encounters (including observation) and clinical hours in the Typhon tracking system weekly. There is a ONE week window for entry. Documentation includes completing clinical log daily with preceptor signature which is uploaded into the LMS, and case log and time sheet entries in Typhon. If the student misses this documentation period, he/she will not be able to use the clinical hours for the case logs that were not documented. Specific information regarding the Typhon system has been posted to the course documents. **Students should have a minimum of 80 hours completed by midterm (Week 6). Students may <u>not</u> start their clinical rotation until their Learning Agreement AND physical exam video have been submitted via the LMS. However, students should begin corresponding and planning their clinical rotation with their preceptor as soon as placements are made.** Please note you may complete up to 8 hours of non-direct patient care by attending Grand Rounds, Lunch and Learns, Case Conferences or Continuing Medical Education. These hours must be documented in the Typhon system as well.

Between Weeks 1 and 3, at Week 6 and Week 12 course faculty will reach out to each preceptor with the intent of obtaining formative feedback about each student's current clinical performance. If there are adjustments or issues that need to be addressed regarding student performance, students will be notified and a faculty-student (preceptor if needed) conference will be scheduled. The preceptor, student, and course faculty may meet at another time during the semester regardless of student performance as an additional opportunity for evaluation and feedback.

The clinical evaluation tool contains a grading system. This tool will be used to determine if the student meets or exceeds each clinical objective. All students/preceptors/faculty must complete the approved clinical practicum tool. A copy of this tool is located in the course documents. **The student and his/her preceptor are required to complete an evaluation at midterm (due Week 6) and a final evaluation upon completion of 196 clinical hours (due Week 12). Please note, you are expected to attend clinical weekly through Week 12 even if this means you go over the required 196 hours.**

The grading for clinical courses is pass (credit)/fail (no credit). A grade of 100 will be recorded if the final grade is pass (credit). A grade of 0 will be recorded if the final grade is fail (no credit). Regardless of overall course grades, students must successfully pass the clinical practicum in order to successfully complete the course. An unfavorable/failing practicum evaluation will result in failure of the course. Course FNP faculty are a crucial part of the evaluative process and will make all final student decisions related to course/clinical progress, evaluation, and final course grading.

This assignment relates to student outcomes 1, 3, 5, 7, 8, and 9.

Synchronous and Asynchronous Class Participation

In preparation for weekly synchronous class sessions, students are expected to complete and submit weekly class preparation assignments. These weekly asynchronous assignments/reflections/questions must be completed and submitted prior to class in order to receive credit. **In order to receive credit for your asynchronous course work, the module must be completed in its entirety prior to class.**

A significant amount of time (online, synchronous) will be spent in groups discussing core course content. A variety of techniques will be used to assist in stimulating a more meaningful learning environment. In order to get the full benefit of the learning experience, it is the expectation that every student will fully prepare and participate. Active presence in class (synchronous sessions), along with preparation by having read and completed the assignments, and full participation in discussion and activities are essential for a quality student learning experience.

Class participation is based on attendance and participation in both asynchronous work and synchronous sessions and discussions. Class attendance is mandatory. The presence (and absence) of students greatly affects the learning experience of others. If a student anticipates missing a class or is ill, he/she is expected to notify the instructor within 24 hours of the missed deadline or synchronous class session.

Grading: Assignments are due on the day and time specified by the faculty and will be graded according to a rubric. An extension for papers or other assignments will be granted only for serious extenuating circumstances with the permission of the faculty prior to the original due date. If the paper or other assignment is turned in late without prior permission, there will be an automatic deduction of 10% per day up to 5 days (i.e. 3 days late results in an automatic 30% deduction from the grade). After the 5th day, the late paper or assignnment will receive an automatic 0. If a student receives a numerical grade of less than 75 on the assignment, the paper (without initial clinical faculty comments or student name) will be graded by one of the lead faculty. If the lead faculty assigns a numerical grade within five points of the grade by the initial faculty, the grade from the initial faculty will be the final grade. The student will not have access to the other grade or the associated comments. If there is more than a five-point difference between the lead faculty and the initial faculty grade, the two will meet to discuss differences. The agreed-upon grade will then be the final grade, and the student will receive the comments associated with the final grade.

Plagiarism and cheating of any kind on an examination, quiz, or assignment will result at least in an F for that assignment (and may, depending on the severity of the case, lead to an F for the entire course) and may be subject to appropriate referral for further action. It is assumed that for this course all students will adhere to the academic creed of this University and will maintain the highest standards of academic integrity. In other words, don't cheat by giving answers to others or taking them from anyone else. Course faculty will also adhere to the highest standards of academic integrity, so do not ask faculty to change your grade illegitimately or to bend or break rules for one person that will not apply to everyone.

Academic Dishonesty and Honor Code: In this class, students are permitted to work in groups only for designated group projects, which will be submitted for a group grade. All other assignments and exams are to be prepared individually.

Academic dishonesty is defined as a student's use of unauthorized assistance with intent to deceive an instructor or other such person who may be assigned to evaluate the student's work in meeting course and degree requirements. Familiarize yourself with the University Student Conduct Code, which applies to this course. Students are expected to be independently familiar with the Code and to recognize that their work in the course is to be their own original work that truthfully represents the time and effort applied. Violations of the Code are most serious and will be handled in a manner that fully represents the extent of the Code and that befits the seriousness of its violation.

Pacific Standard Time (PST) will be used for this course (example: assignments, exams, synchronous class sessions). Each student will be expected to adjust his/her time zone accordingly. Accommodations or exceptions will not be granted for conflicts caused by differing time zones.

Note: Faculty reserve the right to modify content and/or date for assignments.

Class grades will be based on the following:

*CR (Credit) Passing mark for **non-letter-graded** courses. Equivalent to C minus quality or better for undergraduate courses and **B quality or better for graduate courses**; no effect on GPA. Refer to Grading Options and Enrollment Status.*

*NC (No Credit) Less than the equivalent of C minus for an undergraduate course and **less than equivalent of B quality for a graduate, non-letter-graded course***; *no effect on GPA.*

Class Grades		Final Grade	
3.85 – 4.00	A	93 – 100	A
3.60 – 3.84	A-	90 – 92	A-
3.25 – 3.59	B+	87 – 89	B+
2.90 – 3.24	B	**83 – 86**	**B**
2.60 – 2.89	B-	80 – 82	B-
2.25 – 2.59	C+	77 – 79	C+
1.90 – 2.24	C	73 – 76	C
		70 – 72	C-

Within the School of Social Work, grades are determined in each class based on the following standards which have been established by the faculty of the School: (1) Grades of A or A- are reserved for student work which not only demonstrates very good mastery of content but which also shows that the student has undertaken a complex task, has applied critical thinking skills to the assignment, and/or has demonstrated creativity in her or his approach to the assignment. The difference between these two grades would be determined by the degree to which these skills have been demonstrated by the student. (2) A grade of B+ will be given to work which is judged to be very good. This grade denotes that a student has demonstrated a more-than-competent understanding of the material being tested in the assignment. (3) A grade of B will be given to student work which meets the basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets basic course expectations. (4) A grade of B- will denote that a student's performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations. (5) A grade of C would reflect a minimal grasp of the assignments, poor organization of ideas and/or several significant areas requiring improvement. (6) Grades between C- and F will be applied to denote a failure to meet minimum standards, reflecting serious deficiencies in all aspects of a student's performance on the assignment.

VII.   Required and Supplementary Instructional Materials and Resources

Recommended Textbooks:

Title: Current Medical Diagnosis & Treatment 2019
Author(s): Papadakis, M.A, & McPhee, S.J
Edition: 58th
ISBN number: 9781260117431

Title: Primary care: Art and Science of Advanced Practice Nursing – An Interprofessional Approach
Author(s): Dunphy, L. M., Winland-Brown, J., Porter, B., & Thomas, D.
Edition: 5th
ISBN 13: 9780803667181

Title: Contraceptive Technology
Author(s): Hatcher, R., Trusell, J., Nelson, A., Cates, W., Stewart, F., & Kowal, D.
Edition: 21st
ISBN 13: 978-1732055605

Title: Clinical Guidelines in Primary Care
Author(s): Amelie Hollier
Edition: 3rd
ISBN: 9781892418258

Title: Seidel's guide to physical examination
Author(s): Ball, Dains, Flynn, Solomon, Stewart
Edition: 9th
ISBN number: 9780323481953

Title: Pharmacotherapeutics for Advanced Practice: A Practical Approach
Author(s): Virginia Poole Arcangelo, Andrew M. Peterson, Veronica Wilbur, Jennifer A. Reinhold
Edition: 4th
ISBN number: 9781496319968

Title: Porth's Pathophysiology: Concepts of Altered Health States
Author(s): Norris, T.L.
Edition: 10th
ISBN number: 9781496377555

Title: Publication manual of the American Psychological Association
Author(s): American Psychological Association (2009)
Edition: 6th
ISBN 9781433805615

All textbooks from previous courses

Course Overview

Week	Content	Assignments
1	**Module 1: Course Introduction** This module covers an introduction to the course including course expectations, orientation to clinical, and the use of the clinical tracking system. Patient and preceptor etiquette will be discussed.	**Module 1:** Physical Exam Video Learning Agreement Clinical Practicum Typhon
1	**Module 2: Coding and Documentation** This module summarizes documentation requirements for basic/common outpatient visits and prepares the family nurse practitioner student to recognize and identify common CPT and ICD-10 codes.	**Module 2:** Clinical Practicum Typhon
2	**Module 3: Health Promotion, Disease Prevention, and Treatment Guidelines (Part 1)** This module will review the importance of health promotion and disease prevention. Recommendations regarding services and management options that should routinely be incorporated into primary care for select populations and conditions will be covered.	**Module 3:** Clinical Practicum Typhon
3	**Module 4: Health Promotion, Disease Prevention, and Treatment Guidelines (Part 2)** This module will review the importance of health promotion and disease prevention. Recommendations regarding services and management options that should be routinely incorporated into primary care for select populations and conditions will be covered.	**Module 4:** Clinical Practicum Typhon
4	**Module 5: Social Determinants of Health** This module provides the family nurse practitioner student with an overview of the social determinants of health; the social, physical, economical, and environmental factors that influence the health of the individual, the family, and the community.	**Module 5:** Comprehensive Clinical Write Up Clinical Practicum Typhon

4	**Module 6: Ethics and Ethical Decision-Making** This module will review the bioethical principles and apply them to ethical dilemmas that the family nurse practitioner may encounter in clinical practice.	**Module 6:** Clinical Practicum Typhon
5	**Module 7: The Difficult Encounter** This module will evaluate various factors that contribute to a difficult encounter and what the family nurse practitioner can do to effectively manage these challenging patient/encounters.	**Module 7:** Clinical Practicum Typhon
6	**Module 8: Prioritization and Time Management** This module will provide the family nurse practitioner student with a way to conduct a health history that is time efficient, builds patient rapport, and helps determine the patient's true agenda. How to manage patients with multiple comorbidities and prioritize patient complaints and preventive care will also be discussed.	**Module 8:** Midterm Clinical Evaluation Tool Clinical Practicum Typhon
7	**Module 9: Interprofessional Collaboration** This module will provide the family nurse practitioner student with an understanding of the key principles, benefits, and challenges to working as part of an interprofessional team.	**Module 9:** Episodic Clinical Write Up: Low Complexity Clinical Practicum Typhon
8	**Module 10: Cost-Conscious Care** This module will discuss considerations necessary to formulate a cost-conscious treatment plan. Emphasis will be placed on Choosing Wisely recommendations.	**Module 10:** Clinical Practicum Typhon
9	**Module 11: Screening, Brief Intervention, and Referral to Treatment (SBIRT)** This module will equip the family nurse practitioner student with the skills necessary to screen patients with and at risk for substance use disorders, to recognize strategies for brief interventions, and when to make referrals to substance use treatment services.	**Module 11:** Clinical Practicum Typhon
10	**Module 12: Radiology** This module provides the family nurse practitioner student with an overview of diagnostic testing for certain disorders. The criteria for ordering diagnostic scans of specific complaints and conditions covered in NURS 503 Theory: Clinical Management of the Adult Patient is reviewed.	**Module 12:** Group Project Clinical Practicum Typhon
11	**Module 13: Complementary Alternative Medicine** This module will be aimed at providing primary care nurse practitioners with the knowledge and resources to provide safe recommendations to their patients in regards to Complementary Alternative Medicine.	**Module 13:** Clinical Practicum Typhon
11	**Module 14: International Travel** This module is intended to provide the family nurse practitioner student with the knowledge necessary to safely prepare their patients for international travel.	**Module 14:** Clinical Practicum Typhon
12	**Module 15: Course Conclusion** This module is intended to wrap-up the course and cover content of the class's choosing.	**Module 15:** Episodic Clinical Write Up: Moderate/High Complexity Final Clinical Evaluation Tool Clinical Practicum Typhon
	Study Days / No Classes	
	Final Examinations	

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Course Schedule—Detailed Description

Module 1: Course Introduction	
Topics	
• Course introduction • Clinical tracking systems (Typhon) orientation • Library orientation and resources • Orientation to clinical including patient and preceptor etiquette	

This module relates to Course Objectives 1 through 8.

Module 2: Coding and Documentation	
Topics	
• General principles of medical record documentation • International Classification of Diseases, 10th edition (ICD-10) • Evaluation and management services • Current Procedural Terminology (CPT) coding	

This module relates to Course Objective 3.

Recommended Resources

Centers for Medicare & Medicaid Services (n.d.). *Centers for Medicare and Medicaid Services.* Retrieved from https://www.cms.gov/

Find-A-Code. (2015). *Medical coding & billing made easy*. Retrieved from https://www.findacode.com/

ICD10Data.com (n.d.). *ICD10data.com.* Retrieved from http://www.icd10data.com/

Module 3: Health Promotion, Disease Prevention, and Treatment Guidelines (Part 1)	
Topics	
• United States Preventive Services Task Force recommendations • Advisory Committee on Immunization Practices adult immunization schedule • Treatment guidelines for commonly seen primary care chronic disorders • Behavioral change theories	

This module relates to Course Objectives 4, 5, and 6.

Recommended Resources

Centers for Disease Control and Prevention. (2016). *Adult immunization schedule.* Retrieved from http://www.cdc.gov/vaccines/schedules/hcp/adult.html

U.S. Preventive Services Task Force. (2016). *Recommendations for primary care providers.* Retrieved from http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations

Module 4: Health Promotion, Disease Prevention, and Treatment Guidelines (Part 2)	
Topics	
• United States Preventive Services Task Force recommendations • Advisory Committee on Immunization Practices adult immunization schedule	

• Treatment guidelines for commonly seen primary care chronic disorders
• Behavioral change theories

This module relates to Course Objectives 4, 5, and 6.

Recommended Resources

Centers for Disease Control and Prevention. (2016). *Adult immunization schedule.* Retrieved
from http://www.cdc.gov/vaccines/schedules/hcp/adult.html

U.S. Preventive Services Task Force. (2016). *Recommendations for primary care providers.* Retrieved
from http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations

Module 5: Social Determinants of Health	
Topics	

• Social determinants of health review including:
     o Neighborhood conditions
     o Working conditions
     o Education
     o Income and wealth
     o Race and ethnicity
     o Stress
     o Life course
     o Homelessness
     o Incarceration
     o Adverse childhood experiences	

This module relates to Course Objectives 5 and 7.

Module 6: Ethics and Ethical Decision Making	
Topics	
• Brief history of bioethics • Advance directives • Ethical principles • Ethical decision-making	

This module relates to Course Objective 8.

Module 7: The Difficult Encounter	
Topics	
• Difficult patient and provider characteristics • Situational issues that lead to a challenging encounter • Tips for how to manage difficult patients/encounters	

This module relates to Course Objective 8.

Module 8: Prioritization and Time Management	
Topics	
• How to uncover and negotiate the patient agenda • Prioritization of multiple complaints • Managing multiple comorbidities	

This module relates to Course Objectives 1, 4, 5, and 7.

Module 9: Interprofessional Collaboration	
Topics	

- Key principles of interprofessional healthcare
- Advantages and benefits of interprofessional collaboration
- Limitations and challenges of interprofessional collaboration
- Role clarification of other healthcare professionals

This module relates to Course Objectives 6 and 7.

Module 10: Cost-Conscious Care	
Topics	

- U.S. healthcare expenditures
- Defining overuse, overtesting, overdiagnosis, underuse, misuse, and misdiagnosis
- Shared decision-making
- Choosing Wisely recommendations
- Cost-effective treatment

This module relates to Course Objectives 5 and 6.

Recommended Resources

The ABIM Foundation. (2016). *Choosing wisely.* Retrieved from http://www.choosingwisely.org/

Module 11: Screening, Brief Intervention, and Referral to Treatment (SBIRT)	
Topics	
• SBIRT training	

This module relates to Course Objectives 1, 4, 6, and 7.

Recommended Resources

Substance Abuse and Mental Health Services Administration. (2016). *Screening, brief intervention, and referral to treatment (SBIRT).* Retrieved from http://www.samhsa.gov/sbirt

Module 12: Radiology	
Topics	

- Review of diagnostic imaging tests: X-rays, MRIs, and CT scans
- Radiation-related risks
- ACR guidelines for headaches, low back pain, acute trauma to ankle/foot, and acute trauma to hand/wrist

This module relates to Course Objectives 2, 4, and 6.

Recommended Resources

American College of Radiology. (n.d.). *American College of Radiology: Quality is our image.* Retrieved from http://www.acr.org/

Module 13: Complementary Alternative Medicine	
Topics	

- Definition of *complementary alternative medicine* (CAM)
- Historical perspective and proposed policy recommendations
- Categories of CAM per the National Institutes of Health and the National Center for Complementary and Alternative Medicine (NCCAM)
- Evaluating the evidence
- Integrative health approaches
  - Commonly used supplements and other interventions
  - Risks/harms

- o Efficacy and safety considerations
- o Benefits and existing evidence
- o Toxicity and interactions
  - ▪ Specific populations
- o Cost and other considerations (reimbursement issues)

This module relates to Course Objectives 4, 5, and 6.

Recommended Resources

National Institutes of Health. (2016). *Dietary Supplement Database.* Retrieved from http://www.dsld.nlm.nih.gov/dsld/

National Institutes of Health. (2016). National center for complementary and integrative health. *U.S. Department of Health and Human Services.* Retrieved from https://nccih.nih.gov/

Therapeutic Research Faculty. (2016). *National Medicines Comprehensive Database.* Retrieved from http://naturaldatabase.therapeuticresearch.com/home.aspx?cs=cepda&s=ND

U.S. Food and Drug Administration. (2016). Dietary supplements. *U.S. Department of Health and Human Services.* Retrieved from http://www.fda.gov/Food/DietarySupplements/default.htm

Module 14: International Travel	
Topics	
• Components of a pretravel evaluation • Vaccine-preventable diseases • Nonvaccine-preventable diseases • Taking a travel history • Special populations • Traveler's diarrhea • Altitude sickness	

This module relates to Course Objectives 1, 2, 4, 5, and 6.

Recommended Resources

Centers for Disease Control and Prevention. (2016). *Morbidity and mortality weekly report (MMWR).* Retrieved from http://www.cdc.gov/mmwr/index.html

Centers for Disease Control and Prevention. (2016). *Travelers' health.* Retrieved from http://wwwnc.cdc.gov/travel/destinations/list

Gideon. (2016). *Gideon: The world's premier global infectious disease database.* Retrieved from http://www.gideononline.com/

International Society of Travel Medicine. (n.d.). *International Society of Travel Medicine: Promoting healthy travel worldwide.* Retrieved from www.istm.org

U.S. Department of State, Bureau of Consular Affairs. (n.d.). Retrieved from https://travel.state.gov/content/travel/en.html

Module 15: Course Conclusion	
Topics	
• Course conclusion	

This module relates to Course Objectives 1 through 8.

Study Days / No Classes	

Final Examinations	

University Policies and Guidelines

IX. ATTENDANCE POLICY

Students are expected to attend every class and to remain in class for the duration of the unit. Failure to attend class or arriving late may impact your ability to achieve course objectives which could affect your course grade. Students are expected to notify the section faculty by email of any anticipated absence or reason for tardiness.

University of Southern California policy permits students to be excused from class for the observance of religious holy days. This policy also covers scheduled final examinations which conflict with students' observance of a holy day. Students must make arrangements *in advance* to complete class work which will be missed, or to reschedule an examination, due to holy days observance.

Please refer to Scampus and to the USC School of Social Work Student Handbook for additional information on attendance policies.

X. ACADEMIC CONDUCT

Plagiarism – presenting someone else's ideas as your own, either verbatim or recast in your own words – is a serious academic offense with serious consequences. Please familiarize yourself with the discussion of plagiarism in *SCampus* in Part B, Section 11, "Behavior Violating University Standards" https://policy.usc.edu/scampus-part-b/. Other forms of academic dishonesty are equally unacceptable. See additional information in *SCampus* and university policies on scientific misconduct, http://policy.usc.edu/scientific-misconduct.

XI. SUPPORT SYSTEMS

Student Counseling Services (SCS) – (213) 740-7711 – 24/7 on call
Free and confidential mental health treatment for students, including short-term psychotherapy, group counseling, stress fitness workshops, and crisis intervention. engemannshc.usc.edu/counseling

National Suicide Prevention Lifeline – 1 (800) 273-8255
Provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. www.suicidepreventionlifeline.org

Relationship and Sexual Violence Prevention Services (RSVP) – (213) 740-4900 – 24/7 on call
Free and confidential therapy services, workshops, and training for situations related to gender-based harm. engemannshc.usc.edu/rsvp

Sexual Assault Resource Center
For more information about how to get help or help a survivor, rights, reporting options, and additional resources, visit the website: sarc.usc.edu

Office of Equity and Diversity (OED)/Title IX Compliance – (213) 740-5086
Works with faculty, staff, visitors, applicants, and students around issues of protected class. equity.usc.edu

Bias Assessment Response and Support
Incidents of bias, hate crimes and micro aggressions need to be reported allowing for appropriate investigation and response. studentaffairs.usc.edu/bias-assessment-response-support

The Office of Disability Services and Programs
Provides certification for students with disabilities and helps arrange relevant accommodations. dsp.usc.edu

USC Support and Advocacy (USCSA) – (213) 821-4710
Assists students and families in resolving complex issues adversely affecting their success as a student EX: personal, financial, and academic. studentaffairs.usc.edu/ssa

Diversity at USC
Information on events, programs and training, the Diversity Task Force (including representatives for each school), chronology, participation, and various resources for students. diversity.usc.edu

USC Emergency Information
Provides safety and other updates, including ways in which instruction will be continued if an officially declared emergency makes travel to campus infeasible. emergency.usc.edu

USC Department of Public Safety – UPC: (213) 740-4321 – HSC: (323) 442-1000 – 24-hour emergency or to report a crime.
Provides overall safety to USC community. dps.usc.edu

XII.   ADDITIONAL RESOURCES

Students enrolled in the Virtual Academic Center can access support services for themselves and their families by contacting Perspectives, Ltd., an independent student assistance program offering crisis services, short-term counseling, and referral 24/7. To access Perspectives, Ltd., call 800-456-6327.

XIII.   STATEMENT ABOUT INCOMPLETES

The Grade of Incomplete (IN) can be assigned only if there is work not completed because of a documented illness or some other emergency occurring after the 12th week of the semester. Students must NOT assume that the instructor will agree to the grade of IN. Removal of the grade of IN must be instituted by the student and agreed to be the instructor and reported on the official "Incomplete Completion Form."

XIV.   POLICY ON LATE OR MAKE-UP WORK
Assignments are due on the day and time specified by the faculty. An extension for papers or other assignments will be granted only for serious extenuating circumstances with the permission of the faculty prior to the original due date. If the paper or other assignment is turned in late without prior permission, there will be an automatic deduction of 10% per day up to 5 days (i.e. 3 days late results in an automatic 30% deduction from the grade). After the 5th day, the late paper or assignnment will receive an automatic 0.

XV.   POLICY ON CHANGES TO THE SYLLABUS AND/OR COURSE REQUIREMENTS
It may be necessary to make some adjustments in the syllabus during the semester in order to respond to unforeseen or extenuating circumstances. Adjustments that are made will be communicated to students both verbally and in writing.

XVI.   CODE OF ETHICS OF THE NATIONAL ASSOCIATION OF SOCIAL WORKERS (OPTIONAL)
Approved by the 1996 NASW Delegate Assembly and revised by the 2017 NASW Delegate Assembly
https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English

Preamble

The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty. A historic and defining feature of social work is the profession's focus on individual well-being in a social context and the well-being of society. Fundamental to social work is attention to the environmental forces that create, contribute to, and address problems in living.

Social workers promote social justice and social change with and on behalf of clients. "Clients" is used inclusively to refer to individuals, families, groups, organizations, and communities. .Social workers are sensitive to cultural and ethnic diversity and strive to end discrimination, oppression, poverty, and other forms of social injustice. These activities may be in the form of direct practice, community organizing, supervision, consultation**,** administration, advocacy, social and political action, policy development and implementation, education, and research and evaluation. Social workers seek to enhance the capacity of people to address their own needs. Social workers also seek to promote the responsiveness of organizations, communities, and other social institutions to individuals' needs and social problems.

The mission of the social work profession is rooted in a set of core values. These core values, embraced by social workers throughout the profession's history, are the foundation of social work's unique purpose and perspective:

- Service
- Social justice
- Dignity and worth of the person
- Importance of human relationships
- Integrity
- Competence

This constellation of core values reflects what is unique to the social work profession. Core values, and the principles that flow from them, must be balanced within the context and complexity of the human experience.

Code of Ethics for Nurses

Ethics is an integral part of the foundation of nursing. Nursing has a distinguished history of concern for the welfare of the sick, injured, and vulnerable and for social justice. This concern is embodied in the provision of nursing care to individuals and the community. Nursing encompasses the prevention of illness, the alleviation of suffering, and the protection, promotion, and restoration of health in the care of individuals, families, groups, and communities. Nurses act to change those aspects of social structures that detract from health and well-being. Individuals who become nurses are expected not only to adhere to the ideals and moral norms of the profession but also to embrace them as a part of what it means to be a nurse. The ethical tradition of nursing is self-reflective, enduring, and distinctive. A code of ethics makes explicit the primary goals, values, and obligations of the profession.

The Code of Ethics for Nurses serves the following purposes:

- It is a succinct statement of the ethical obligations and duties of every individual who enters the nursing profession.
- It is the profession's nonnegotiable ethical standard.
- It is an expression of nursing's own understanding of its commitment to society.

There are numerous approaches for addressing ethics; these include adopting or subscribing to ethical theories, including humanist, feminist, and social ethics, adhering to ethical principles, and cultivating virtues. The Code of Ethics for Nurses reflects all of these approaches. The words *ethical* and *moral* are used throughout the Code

of Ethics. "Ethical" is used to refer to reasons for decisions about how one ought to act, using the abovementioned approaches. In general, the word *moral* overlaps with *ethical* but is more aligned with personal belief and cultural values. Statements that describe activities and attributes of nurses in this Code of Ethics are to be understood as normative or prescriptive statements expressing expectations of ethical behavior.

The Code of Ethics for Nurses uses the term *patient* to refer to recipients of nursing care. The derivation of this word refers to "one who suffers," reflecting a universal aspect of human existence. Nonetheless, it is recognized that nurses also provide services to those seeking health as well as those responding to illness, to students and to staff, in health care facilities as well as in communities. Similarly, the term *practice* refers to the actions of the nurse in whatever role the nurse fulfills, including direct patient care provider, educator, administrator, researcher, policy developer, or other. Thus, the values and obligations expressed in this Code of Ethics apply to nurses in all roles and settings.

The Code of Ethics for Nurses is a dynamic document. As nursing and its social context change, changes to the Code of Ethics are also necessary. The Code of Ethics consists of two components: the provisions and the accompanying interpretive statements. There are nine provisions. The first three describe the most fundamental values and commitments of the nurse; the next three address boundaries of duty and loyalty, and the last three address aspects of duties beyond individual patient encounters. For each provision, there are interpretive statements that provide greater specificity for practice and are responsive to the contemporary context of nursing. Consequently, the interpretive statements are subject to more frequent revision than are the provisions.

Additional ethical guidance and detail can be found in ANA or constituent member association position statements that address clinical, research, administrative, educational, or public policy issues.

Code of Ethics for Nurses with Interpretive Statements provides a framework for nurses to use in ethical analysis and decision-making. The Code of Ethics establishes the ethical standard for the profession. It is not negotiable in any setting nor is it subject to revision or amendment except by formal process of the House of Delegates of the ANA. The Code of Ethics for Nurses is a reflection of the proud ethical heritage of nursing, a guide for nurses now and in the future.

XVII. ACADEMIC DISHONESTY SANCTION GUIDELINES

Some lecture slides, notes, or exercises used in this course may be the property of the textbook publisher or other third parties. All other course material, including but not limited to slides developed by the instructor(s), the syllabus, assignments, course notes, course recordings (whether audio or video) and examinations or quizzes are the property of the University or of the individual instructor who developed them. Students are free to use this material for study and learning, and for discussion with others, including those who may not be in this class, unless the instructor imposes more stringent requirements. Republishing or redistributing this material, including uploading it to web sites or linking to it through services like iTunes, violates the rights of the copyright holder and is prohibited. There are civil and criminal penalties for copyright violation. Publishing or redistributing this material in a way that might give others an unfair advantage in this or future courses may subject you to penalties for academic misconduct.

XVIII. COMPLAINTS

If you have a complaint or concern about the course or the instructor, please discuss it first with the instructor. If you feel cannot discuss it with the instructor, contact the chair of the Department of Nursing. If you do not receive a satisfactory response or solution, contact your advisor and/or Associate Dean and MSW Chair Dr. Leslie Wind for further guidance.

XIX. Tips for Maximizing Your Learning Experience in this Course (Optional)
- ✓ Be mindful of getting proper nutrition, exercise, rest and sleep!
- ✓ Come to class.
- ✓ Complete Required Readings: and assignments BEFORE coming to class.
- ✓ BEFORE coming to class, review the materials from the previous module AND the current module, AND scan the topics to be covered in the next module.

- ✓ Come to class prepared to ask any questions you might have.
- ✓ Participate in class discussions.
- ✓ AFTER you leave class, review the materials assigned for that Unit again, along with your notes from that Unit.
- ✓ If you don't understand something, ask questions! Ask questions in class, during office hours, and/or through email!
- ✓ Keep up with the assigned readings.

Don't procrastinate or postpone working on assignments.