

NURS 507 Master Syllabus **Section #xxx**

Theory: Clinical Management of Childbearing and Childrearing Families **3 Units** *Fall 2019*

Instructor: Xxx
Email: Xxx
Telephone: Xxx
Office: Xxx
Office Hours: Xxx

Course Days:
Course Time:
Course Location

I. Course Prerequisites or Co-Requisites

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

NURS 504: Clinical Pharmacology for Advanced Practice Nursing (Prerequisite may be taken concurrently)

NURS 505: Clinical Practicum: Management of Adult Patients (Prerequisite may be taken concurrently)

II. Catalogue Description

This course provides the family nurse practitioner student with the necessary knowledge to diagnose and manage childbearing women from preconception through uncomplicated pregnancy and postpartum periods and to provide primary care and anticipatory guidance of children and their families from newborn through adolescence periods.

III. Course Description

This course is designed to provide the family nurse practitioner student with the necessary knowledge to diagnose and manage the childbearing/childrearing families with common health problems, including acute episodic illness. Emphasis is placed on assisting the childrearing families to reach or maintain the highest level of health and functioning, with a focus on health promotion, health maintenance, and primary care management of common health problems. This includes the care of children from birth through adolescents.

IV. Course Objectives

Upon completion of this course, the student will be able to apply normal process related to birth and physiology, a systematic approach to the diagnosis and management of complex health problems in childbearing women, infants, children and adolescents. At the completion of the course, the student will be able to:

Objective #	Objectives
1	Demonstrate the ability to take and analyze environmental, historical, psychosocial, physical and diagnostic findings in order to arrive at a differential diagnosis.
2	Develop and evaluate a plan of care that takes into consideration the biophysical, psychosocial, and cultural demands of the individual patient and family.
3	Identify safe, ethical, culturally aware, evidence-based care for patients who have acute, chronic, and complex illness in order to integrate theoretical knowledge of current evidence-based medicine and interventions into practice.
4	Determine interventions that optimize health, minimize harm and enhance quality of life while promoting patient self-determination.
5	Delineate the role of the family nurse practitioner in illness management specific to the patient, family and community.
6	Determine appropriate interprofessional collaboration, utilizing community resources and specialists in order to optimize the health and wellness of the patient and family.

V. Course Format/Instructional Methods

The format of the course will be online, using both synchronous and asynchronous approaches. This may include the use of didactic lectures by webcast, use of required reading, viewing online resources, active group discussions, presentations, case studies role-play, and structured small group exercises will be used to enhance the students' learning. Material from a variety of clinical sources will be used to illustrate class content and to provide reinforcement of concepts and information regarding the diagnosis and management of primary care issues in the childbearing woman, infants, children and adolescents. As class discussion is an integral part of the learning process, students are expected to come to class ready to discuss required and pre-class preparation.

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

*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
<i>Family Nurse Practitioner competent in Scientific Foundation Competencies:</i> Integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings	Critically analyzes data and evidence for improving advanced nursing practice	Asynchronous work Case studies Exams Group Project
	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.	
	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
<p>Family Nurse Practitioner competent in Leadership Competencies:</p> <p>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.</p>	Assumes complex and advanced leadership roles to initiate and guide change.	Group project
	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
<p>Family Nurse Practitioner competent in Quality Competencies:</p> <p>Discusses methods, tools, performance measures, and standards related to quality, and applies quality principles within an organization.</p>	Uses best available evidence to continuously improve quality of clinical practice.	Asynchronous work Case studies Exams Group Project
	Evaluates the relationships among access, cost, quality, and safety and their influence on health care.	
	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.	

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.	Asynchronous work Case studies Exams Group Project
	Translates technical and scientific health information appropriate for various users' needs.	
	<ul style="list-style-type: none"> Assesses the patient 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.	Case study Group project
	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	

ETHICS COMPETENCIES

Competencies/Knowledge, Values, Skills	Student Learning Outcomes	Method of Assessment
Family Nurse Practitioner competent in Ethics Competencies: Integrates the highest level of moral principles and social policy when applying professional guidelines in the practice environment	Integrates ethical principles in decision-making.	Homework Assignments Group Project
	Evaluates the ethical consequences of decisions.	
	Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.	

VII. Course Assignments, Due Dates, and Grading

Assignment	Due Date	% of Final Grade
Asynchronous work	Weekly	5.5%
Class participation	Weekly	5.5%
Weekly Case Studies (submit prior to class)	Weekly	14%
Exam 1 (Modules 1-7) units 1-4 9/20 12 noon to 9/23 12 noon	Week 4	15%
Exam 2 (Modules 8-13) units 5-7 10/11 12 noon to 10/14 12 noon	Week 7	15%
Exam 3 (Modules 14-17) units 8-11 11/08 12 noon to 11/11 12 noon	Week 11	15%
Exam 4 (Modules 18-23) units 12-14 12/06 12 noon to 12/09 12 noon	Week 14	15%
Group project (4 groups: 3-4 students/group max of 4 per group)	Week 15	15%

Each of the major assignments is described below.

Assignment: Asynchronous questions and discussion boards (5.5% of Course Grade)

Students work on asynchronous material including questions and discussion board in the modules covered in a given week of class. The purpose of the asynchronous questions and discussion boards is to prepare the students for the weekly-synchronized class session. The asynchronous material will use a variety of formats including case study, clinical questions, and problem solving. **Students who do not submit asynchronous work by the start of class each week receive a score of zero (0). If your class starts at 11:00 am and you submit any BLTs at 11:01 am, you will receive a grade of zero.**

Do not attempt to complete asynchronous BLTs on a phone or on a tablet device, as these will not proper load your work to the site. Missing work will result in a decrease grade or zero (0) if no work is found on the site by the course section faculty. You must complete all BLTs to get a grade as there is no partial credit for incomplete work.

Due: Weekly

This assignment relates to student learning outcomes 1, 3, and 8.

Class Participation (5.5% of course grade)

Students' active involvement in the class is considered essential to their growth as practitioners. Their presence in class, along with preparation by having read and considered the assignments and participation in discussion and activities are essential. Class participation is based on attendance and participation in online and in class discussions. Class attendance is mandatory; if a student anticipates missing a class or is ill, notify the instructor or teaching assistant as soon as possible. You must attend class to get a participation grade. Sitting in class does not count as participation. You must be an active learner engaging in the class discussion, break out rooms and asking question of faculty and student during the student lead presentation.

Weekly Case Study (14%)

Students will review and submit answers to a weekly case study that will be posted by the faculty one week prior to class. Students must submit their response to the case study prior to the start of class. Failure to submit the case study prior to the start of class will result in a grade of zero. **If your class starts at 11:00 am and you submit the case at 11:01 am, you will receive a grade of zero.**

You must complete all questions on the case study to get a grade as there is no partial credit for incomplete work. Case studies are submitted to Turn It In. If you fail to properly site, you will receive a zero and can be brought on an academic

Due: Weekly

This assignment relates to student learning outcomes 1, 3, and 8.

Assignment: Group Project (15%)

Students will develop and present an interactive case study from a list of clinical topics. Students self-select and post to the wall the names of the members of their group prior to the start of class in week 2. If a member of the group does not participate, that individual will receive a zero (0) on the assignment.

The length of the case study presentation will be 15 minutes. The presentation should include a summary or synopsis of the case and a student lead discussion. In the discussion of the case, each student should include a clinically applicable “clinical pearl” and an article that highlights or supports either the clinical pearl aspect or another interesting related aspect of the case. Students will receive approval from faculty for the case in Week 3. The group submits behavioral learning objectives, an outline of the case, and article for the class 2 weeks (week 13) prior to the case for approval. PowerPoint presentation may be not more than 5 slides plus a title slide and a reference slide.

Group Project Grading Rubric:

<i>Area Graded</i>	<i>Max</i>	<i>Grade</i>
Case study outline (submitted 2 weeks prior to case with objectives)	5%	
Behavioral (measurable) Learning objectives (using Blooms taxonomy)	5%	
Describe a clinical issue and its relevance to FNP's in primary care	10%	
Present current evidence on identified clinical issue	20%	
Identify and discuss ethical issues	20%	
Facilitate class discussion	10%	
PowerPoint (no more than 5 slides or other media)	20%	
References (quality & APA formatting)	10%	
Total	100%	

Due: All groups present in week 15 during class.

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

Assignment: 4 Exams (60% of Course Grade)

Students will be given 4 exams during weeks 4, 7, 11 and 15. Each exam is 15% of the student's course grade. Each exam will have 50 multiple-choice questions. Students will have 75 minutes to take the exam. Failure to complete the exam in the time allotted is an automatic zero (0).

Students who start the exam less than 2 hours prior to the end of the exam period, do so at their own peril. Any questions answered after the 12 noon deadline will receive an automatic zero (0). Students must report all technical problems to 2U and get a case number. The student needs to email the case number to their section faculty. Do not call Proctor Track as proctor track cannot fix your problem.

Exams: All exams open the Friday at 12 noon and close on the following Monday at 12 noon. .

- Exam 1 will be based on module objectives and content from modules 1 through 7 (units 1 to 4).
- Exam 2 will be based on module objectives and content from modules 8 through 13 (units 5 to 7).
- Exam 3 will be based on modules objectives and content material from units 14 through 17 (units 8 to 11)
- Exam 4 will be based on modules objectives and content material from units 18 through 23 (units 12 to 14)

Exam	Units	Module Objective and content from Modules	Opens at 12 noon on Friday	Closes at 12 noon on Monday
1	1 to 4	1 to 7	09/20	09/23
2	5 to 7	8 to 13	10/11	10/13
3	8 to 11	14 to 17	11/08	11/11
4	12 to 14	18 to 23	12/06	12/09

Students are expected to take all examinations as scheduled in the Content Outline. Exams are password protected in 2NUSC and may be opened as early as 12:00 noon Pacific Time the day following the synchronous session of the module. Students will have 72 hours to complete the exam, which must be completed the first time it is opened. The exam clock will be set for 75 minutes. Requests to take an exam on a day different from the stated date will only be granted for serious situations and must be approved by the instructor. We are aware the last exam occurs during Passover for a few students and will follow university guidelines.

All exams in this course will require students to deploy a software called Proctortrack. This is a software system that automatically proctors student exams, verifies student identities throughout the exam, and provides instructors with brief video clips and screenshots if potential testing violations occur. Proctortrack is fully integrated with the Learning Management System; however, students are required to complete a practice exam at the start of the semester to ensure the technology is setup properly on their computers. If students experience issues or have questions with the practice exam or with Proctortrack in general, students should contact student support for help in advance of taking the exam. Failure to contact 2U will be viewed as evidence of cheating.

To ensure a successful testing environment, students must:

- Students must follow the dress requirements for class.
- Students must be sitting at a desk or table in a private location with no distractions
- The computer must be hard wired. Students using Wi-Fi will not be admitted back to the test if they are dropped while taking it. ***This means a wire from your computer to the modem must be in place***
- Have nothing around that could make noise
- Set up proper lighting and ensure his/her face is clearly visible
- Not have food or drink
- Close all browser tabs and other programs
- Have only one keyboard, mouse, and monitor connected
- Leaving the testing area is an automatic failure.
- You will need your phone with face down to call 2U if there are problems. The phone call needs to be recorded.
- You may not take or use notes, use textbooks, or other course material or apps on any device (unless specifically allowed by instructor)
- Not use or have nearby additional technology (other phones, computers, tablets, television, etc.)
- Not have other people in the room
- The faculty reserves the right to question any test result and to review prior tests if they suspect cheating.
- *You must do the proctor track sample exam before taking the test to verify if there are problems with your set up. If you fail to do this, we cannot help you.*
- *Submit the honor code before the test, if you have not already done so.*
- *Please make sure you read the Proctor Track instructions below. If you have any problems during the exam, you must call Student Support at 2U immediately and email your section faculty with nature of the problem and resolution. Failure to do either of these requirements will result in a grade of “F” on the test.*
- *There should be no breaks in your recordings or testing.*
- *Any attempts to look away from the camera (right, left, up or down, hiding your face in with your hands) will be reviewed for possible cheating by more than one course faculty.*
- *Taking the test prior to an announced system update that requires the system to shut down preventing you from completing the test will be considered cheating. You will get a grade of “F”.*

- *We can see your full screen when we review the Proctor track tapes. Your exam should be set to full screen not a part of your screen. Any attempts to do otherwise is considered cheating. There should not be another tab open on you internet access page. You cannot have two screens on or connected to the computer.*
- *Do not wait until 10 am on Monday to take the test. Students who delay taking the test, typically have problems that result in poor test outcomes.*

Procter Track Requirements:

All exams in this course will require students to deploy a software called Proctortrack. This is a software system that automatically proctors student exams, verifies student identities throughout the exam, and provides instructors with brief video clips and screenshots if potential testing violations occur. Proctortrack is fully integrated with the Learning Management System, however, students are required to complete a practice exam at the start of the semester to ensure the technology is setup properly on their computers. If students experience issues or have questions with the practice exam or with Proctortrack in general, students should contact student support for help in advance of taking the exam.

Due: Exam 1: Week 4, Exam 2: Week 7, Exam 3: Week 11 and Week 15.

This assignment relates to student learning outcomes 1 and 3.

Class grades will be based on the following:

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.

VIII. Required and Supplementary Instructional Materials and Resources

Required Textbooks:

Cibulka, N.J. & Barron, M.L. (2017). Guideline for Nurse Practitioners in Ambulatory Obstetric Settings (2nd ed.). New York, NY: Springer Publishing.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Suggested References

Burns, C. E., Dunn, A.M., Brady, M.A., Starr, M.B. & Blosser, C.G. (2017). *Pediatric primary care* (6th Ed.). Philadelphia, PA: Elsevier/Saunders.

Duderstadt, K. (2015). *Pediatric physical assessment: An illustrated handbook*. St. Louis, MO: Elsevier Mosby.

Johns Hopkins Hospital, Kahl, L., & Hughes, H. (Eds.) (2017). *The Harriet Lane Handbook: A Manual for Pediatric House Officers* (21st Ed.). Philadelphia, PA: Mosby Elsevier.

Jordan, R. C., Farley, C. L., & Grace, K.T. (2019). *Prenatal and postnatal care: A woman-centered approach* (2nd ed.). Ames, IA: Wiley Blackwell.

King, T. & Brucker, M.C. (2016). *Pharmacology for Women's Health* (2nd Ed.). Sudbury, MA: Jones & Bartlett.

Zitelli, B., McIntire, S., & Nowalk, A. J. (2018). *Atlas of Pediatric Physical Diagnosis* (7th Ed.). Philadelphia, PA: Saunders Elsevier.

Recommended Guidebook for APA Formatting:

American Psychological Association (2009). *Publication manual of the American Psychological Association* (6th Ed.). Washington, D.C.: American Psychological Association.

Recommended Websites:

American Academy of Pediatrics: www.aap.org

American Association of Women's Health, Obstetric and Neonatal Nurses: www.awhonn.org

American College of Obstetrician and Gynecologists: <https://www.acog.org>

Center for Disease Control and Prevention: www.cdc.gov

March of Dimes: www.marchofdimes.org

Planned Parenthood: <https://www.plannedparenthood.org/>

United States Preventative Task Force: www.uspreventiveservicestaskforce.org

Note: Additional required and recommended readings may be assigned by the instructor throughout the course.

Course Overview

Week	Content	Assignments
1	Module 1: Preconception Care and Pregnancy Diagnosis This module covers: <ul style="list-style-type: none"> • Promoting lifelong health for families and communities • Preconception care • Contraception • Preventing birth defects (Hgb A1c, anemia, substance, blood pressure, seizure meds, dental care) • Infertility • Pregnancy diagnosis • Variations in physical assessment in pregnancy • Social issues in pregnancy <ul style="list-style-type: none"> ○ Poverty ○ Interdisciplinary care ○ Incarceration ○ Domestic Violence Screen ○ Intimate partner violence during pregnancy ○ Interdisciplinary management 	Asynchronous questions and discussion boards Case studies
2	Module 2: Prenatal Care This module covers: <ul style="list-style-type: none"> • Prenatal care <ul style="list-style-type: none"> • Gestational age assessment • Visit schedule (tests, screening, anticipatory guidance, Ultrasound) • Nutrition • Exercise in pregnancy • Vaccinations • Genetic testing • Medication use during pregnancy • Motivational interviewing use in prenatal care • Prenatal care: First trimester • Prenatal care: Second trimester • Prenatal Care: Third trimester 	Asynchronous questions and discussion boards Case studies
3	Module 3: Pregnancy Loss This module covers: <ul style="list-style-type: none"> • Abortion: spontaneous or elective • Fetal demise • Perinatal loss and grief Module 4: Management of Common Discomforts and Health Problems during Prenatal & Postnatal Periods (Part 1) This module covers: <ul style="list-style-type: none"> • Common infections in pregnancy • Musculoskeletal discomforts in pregnancy • Respiratory disorders • Gastrointestinal disorders • Urinary tract disorders • Dermatologic disorders in pregnancy • Hematologic and thromboembolic disorders in pregnancy 	Asynchronous questions and discussion boards Case studies.

Week	Content	Assignments
	<ul style="list-style-type: none"> Bleeding first half of pregnancy <ul style="list-style-type: none"> Ectopic pregnancy Bleeding during the first half of pregnancy Gestational trophoblastic disease Cervical infection Trauma Bleeding second half of pregnancy <ul style="list-style-type: none"> Placenta Previa Placental abruption Trauma 	
4	<p>Module 5: Management of Common Discomforts and Health Problems during Prenatal & Postnatal Periods (Part 2) This module covers:</p> <ul style="list-style-type: none"> Diabetes in pregnancy Hypertensive disorders in pregnancy <ul style="list-style-type: none"> Chronic hypertension Preeclampsia <p>Module 6: Components of Labor and Postnatal Care This module covers:</p> <ul style="list-style-type: none"> Preparation for labor <ul style="list-style-type: none"> Timing contractions Preterm labor Postpartum care <ul style="list-style-type: none"> Postpartum exam and assessment of physical adjustment Contraception planning Nutrition and weight loss Postpartum Complications <ul style="list-style-type: none"> Wound infection Hemorrhage Post-partum Mood <ul style="list-style-type: none"> Assessment of emotional adjustment Substance abuse and impact on mood Mood, depression & psychosis <p>Module 7: Lactation: Breast Feeding 101 This module covers:</p> <ul style="list-style-type: none"> Basics of breastfeeding support and assessment <ul style="list-style-type: none"> Latching Milk supply Sore nipples Care of the breastfeeding mother <ul style="list-style-type: none"> Breast engorgement Plugged ducts Mastitis Abscess 	Asynchronous questions and discussion boards Case studies. Exam 1: weeks 1-4

Week	Content	Assignments
5	Module 8: Pediatric Primary Care This module covers: <ul style="list-style-type: none"> • Roles relationships and cultural perspectives <ul style="list-style-type: none"> ◦ Family relationships and challenges ◦ Circumstances affecting families ◦ Child maltreatment (emotional & physical) • Oral health and nutrition • Sports physical exams and clearance • Growth, development and anticipatory guidance • Oral health and nutrition • Sleep and rest • Developmental screening • Education and discipline • Growth development and guidance • Sexuality • Care of the LBTG child/adolescent 	Asynchronous questions and discussion boards Case studies.
6	Module 9: Care of the Newborn This module covers: <ul style="list-style-type: none"> • Newborn assessment <ul style="list-style-type: none"> ◦ APGAR ◦ Maturation assessment of gestational age ◦ Neuromuscular maturity ◦ Physical maturity • Newborn reflexes <ul style="list-style-type: none"> ◦ Primitive/Newborn reflexes (rooting, sucking, palmer, stepping, Moro, & plantar) ◦ Later reflexes (landau, neck righting [fencing], parachute) • Newborn screening <ul style="list-style-type: none"> ◦ Purpose ◦ Timeline ◦ Screening tests ◦ Genetic testing ◦ Follow-up/patient education • Disturbances in head growth causing skull deformities <ul style="list-style-type: none"> ◦ Microcephaly ◦ Hydrocephaly ◦ Craniosynostosis ◦ Skull deformities associated with single suture synostosis • Genetic disorders • Brachial plexus palsy secondary to birth • Perinatal disorders • Feeding issues • Development Module 10: Atopic disorders and rheumatic disorders This module covers: <ul style="list-style-type: none"> • Clinical pearls in primary care when evaluating children <ul style="list-style-type: none"> ◦ Identify disease process based on CC ◦ Examine pathophysiology 	Asynchronous questions and discussion boards Case studies.

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ Determine HPI ○ PE: examine appropriate systems based on CC, HPI ○ Differential diagnosis ○ Treatment ○ Collaboration, referral, what is next? ○ Atopic Disorders <ul style="list-style-type: none"> ○ Allergic rhinitis (IgE reactions) ○ Asthma (also discussed Module 18) ○ Atopic dermatitis (eczema) <ul style="list-style-type: none"> ○ Acute presentation ○ Chronic presentation ○ Physical features ○ Rheumatic Disorders <ul style="list-style-type: none"> ○ Autoimmune disorders ○ Systemic lupus erythematosus ○ Juvenile idiopathic (rheumatoid) arthritis ○ Lab studies ○ Acute Rheumatic Fever <ul style="list-style-type: none"> ○ Complication of strep ○ Jones criteria (major and minor) ○ Differential diagnosis ○ Henoch-Schonlein Purpura 	
7	<p>Module 11: Hematological Disorders This module covers:</p> <ul style="list-style-type: none"> ○ Red blood cell disorders (Anemia) <ul style="list-style-type: none"> ○ Microcytic anemia ○ Iron deficiency ○ Lead poisoning ○ Thalassemias ○ Sickle cell anemia and trait <ul style="list-style-type: none"> ○ Neonatal screen ○ Clinical manifestations ○ PCN prophylaxis ○ Pneumococcal immunization series ○ Folic acid 1mg/day ○ Blood cancers <ul style="list-style-type: none"> ○ Leukemias ○ Lymphomas; <ul style="list-style-type: none"> ○ Hodgkin Lymphoma ○ Non-Hodgkin disease ○ Platelet and coagulation disorders <ul style="list-style-type: none"> ○ ITP (Immune or idiopathic thrombocytopenia) ○ Hemophilia (A: Factor VIII; B: Factor IX) <p>Module 12: Eye Disorders This module covers: Diagnosis and Management of</p> <ul style="list-style-type: none"> ○ Strabismus ○ Nystagmus ○ Amblyopia ○ Cataracts ○ Retinoblastoma ○ Conjunctivitis 	<p>Asynchronous questions and discussion boards Case studies. Exam 2 weeks 5-7</p>

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ In the newborn (ophthalmia neonatorum) ○ Bacterial (“Pinkeye”) ○ Conjunctivitis-Otitis syndrome ○ Allergic ○ When to Make a referral of Ophthalmologic Management <p>Module 13: Ear Disorders This module covers: Diagnosis and management</p> <ul style="list-style-type: none"> ○ Hearing tests in children ○ Otitis Externa (Swimmer’s ear) ○ Otitis Media ○ Otitis Media with effusion ○ Role of Tympanometry 	
8	<p>Module 14: Neurologic Disorders, ADHD, Autism Spectrum Disorders, Mental Health This module covers:</p> <ul style="list-style-type: none"> ○ Benign paroxysmal vertigo (BPV) ○ Cerebral Palsy ○ Epilepsy and seizure Disorders <ul style="list-style-type: none"> ○ Febrile seizures ○ Generalized seizures ○ Non-epileptic (pseudoseizures) ○ Headaches <ul style="list-style-type: none"> ○ Frontal, and posterior ○ Causes ○ Red flags ○ Types (tension and migraine) ○ Clinical manifestations ○ Treatment <ul style="list-style-type: none"> ○ Symptomatic ○ Abortive ○ Preventive ○ Diagnostic tests ○ Differential Diagnosis ○ Bacterial meningitis ○ Management ○ Attention Deficit/Hyperactivity Disorder (ADHD) <ul style="list-style-type: none"> ○ Core Symptoms ○ Clinical findings ○ Differential diagnosis ○ Management <ul style="list-style-type: none"> ○ Pharmacological ○ Non-pharmacological ○ Autism Spectrum Disorders <ul style="list-style-type: none"> ○ Continuum complex neurobiological and neurodevelopmental disorders ○ Differential ○ Evaluation across developmental stages ○ Early assessment 	Asynchronous questions and discussion boards Case studies

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ Pharmacologic & non-pharmacologic management ○ Mental Health <ul style="list-style-type: none"> ○ Anxiety disorders <ul style="list-style-type: none"> ○ Types ○ Risks ○ Separation Anxiety ○ Clinical Manifestations ○ Differential Diagnosis ○ Management ○ Mood disorders: Depression <ul style="list-style-type: none"> ○ Types ○ Clinical manifestations ○ Screening tests (Depression Scale, CBCL, etc.) ○ Management <ul style="list-style-type: none"> ○ Suicidal risk assessment ○ Pharmacologic & non-pharmacologic ○ PTSD (Posttraumatic Stress Disorder) <ul style="list-style-type: none"> ○ Clinical manifestations ○ Differential diagnosis <ul style="list-style-type: none"> ○ Conduct Disorders: Opposition defiant disorder <p>Mood Disorders: Major depressive disorder Management (refer to psych consult)</p>	
9	<p>Module 15: Endocrine and Metabolic Disorders This module covers:</p> <ul style="list-style-type: none"> ○ Diabetes: Type 1 and Type 2 <ul style="list-style-type: none"> ○ Similarities and Differences ○ Risk factors ○ Insulin therapy (rapid, short and long acting) ○ Management type 2 ○ Congenital adrenal insufficiency ○ Motivational interviewing: Childhood obesity ○ Growth disorders <ul style="list-style-type: none"> ○ Primary: <ul style="list-style-type: none"> ○ skeletal, ○ chromosomal-Turners Syndrome, ○ Hypothyroidism: variations in children <ul style="list-style-type: none"> ○ Congenital & Acquired, genetic short stature, ○ Secondary: Chronic disease, Idiopathic, FTT ○ Constitutional growth delay ○ Pubertal disorders (Early, Precocious, Delayed) ○ Inborn errors of metabolism <ul style="list-style-type: none"> ○ Amino Acid metabolism disorders: Phenylketonuria (PKU) ○ Carbohydrate metabolism 	<p>Asynchronous questions and discussion boards Case studies.</p>
10	<p>Module 16: Cardiovascular Disorders This module covers:</p> <ul style="list-style-type: none"> ○ Murmurs <ul style="list-style-type: none"> ○ Types of murmurs ○ Innocent/functional murmurs 	<p>Asynchronous questions and discussion boards Case studies.</p>

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ Functional murmur of peripheral arterial stenosis ○ Still's murmur ○ Newborn murmur ○ When to refer ○ Congenital Heart Disease <ul style="list-style-type: none"> ○ Atrial Septal Defect (ASD) ○ Ventricular Septal Defect ○ Coarctation of the Aorta ○ Tetralogy of Fallot ○ Patent Ductus Arteriosus (PDA) ○ Pulmonary Stenosis ○ Transposition of the Great Vessels ○ Hypertension ○ Preventing sudden cardiac arrest ○ Kawasaki disease ○ Acute Rheumatic Fever <p>Module 17: Respiratory Disorders (Part 1) This module covers:</p> <ul style="list-style-type: none"> ○ Upper respiratory tract infections <ul style="list-style-type: none"> ○ Common cold ○ Rhinosinusitis ○ Pharyngitis ○ Tonsillitis (viral vs. bacterial) 	
11	<p>Module 17: Respiratory Disorders (Part 2) This module covers:</p> <ul style="list-style-type: none"> ○ Extrathoracic Airway Disorders <ul style="list-style-type: none"> ○ Croup ○ Epiglottitis ○ Intrathoracic Airway Disorders <ul style="list-style-type: none"> ○ Bronchiolitis ○ Pneumonia ○ Asthma ○ Pectus deformity ○ Cystic Fibrosis 	Asynchronous questions and discussion boards Cases Studies Exam 3 weeks 8-11
12	<p>Module 18: Gastrointestinal Disorders This module covers:</p> <ul style="list-style-type: none"> ○ Elimination ○ Upper Gastrointestinal Tract and Lower Gastrointestinal Tract Disorders <ul style="list-style-type: none"> ○ Gastrointestinal Disorders <ul style="list-style-type: none"> ○ Assessment ○ Vomiting and Red flags ○ Dehydration/ Red Flags ○ Gastroesophageal Reflux Disease (GERD) ○ Esophageal disorders ○ Peptic ulcer disease ○ Failure to thrive ○ Acute Diarrhea ○ Probiotics for prevention of Pediatric Antibiotic Associated Diarrhea 	Asynchronous questions and discussion boards Case studies

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ Vomiting and dehydration <ul style="list-style-type: none"> ○ Red flags ○ Encopresis ○ Foreign body ingestion ○ Abdominal Pain <ul style="list-style-type: none"> ○ Foreign body ingestion ○ Appendicitis ○ Infantile colic ○ Foreign body ingestion ○ Intussusception ○ Functional abdominal pain ○ Malabsorption ○ Malabsorption Syndromes <ul style="list-style-type: none"> ○ Celiac disease ○ Lactose intolerance ○ Inflammatory Bowel Disease <ul style="list-style-type: none"> ○ Crohn Disease ○ Ulcerative Colitis <p>Module 19: Genitourinary Disorders & Gynecologic Issues This module covers:</p> <ul style="list-style-type: none"> ○ Enuresis ○ Urinary Tract Infections ○ Vesicoureteral Reflux (VUR) ○ Hematuria <ul style="list-style-type: none"> ○ Microscopic: Persistent /transient ○ Macroscopic: <ul style="list-style-type: none"> ○ Hypercalciuria ○ IgA Nephropathy ○ Glomerulonephritis ○ Nephrotic syndrome ○ Nephritis and Glomerulonephritis ○ Renal Tubular Acidosis ○ Common Genitourinary Conditions in Males <ul style="list-style-type: none"> ○ Hypospadias ○ Cryptorchidism (undescended testes) ○ Inguinal hernia ○ Testicular masses ○ Torsion of the testis ○ Gynecologic Issues <ul style="list-style-type: none"> ○ Contraception ○ Labial adhesions ○ Teen pregnancy 	
13	<p>Module 20: Musculoskeletal Disorders This module covers:</p> <ul style="list-style-type: none"> ○ Clavicle fractures ○ Scoliosis ○ Legg-Calve-Perthes Disease ○ Slipped Capital Femoral Epiphysis ○ Developmental dysplasia of the hip ○ Tibial torsion ○ Knee disorders 	Asynchronous questions and discussion boards Case studies

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ Osgood-Schlatter Disease ○ Genu valgum ○ Genu varum ○ Foot problems <ul style="list-style-type: none"> ○ Pes Planus (flat feet) ○ Metatarsus Adductus (club foot) <p>Module 21: Common Injuries and Suspected Abuse This module covers:</p> <ul style="list-style-type: none"> ○ Injuries and suspected abuse ○ Approach to trauma ○ Common injuries <ul style="list-style-type: none"> ○ Puncture wounds ○ Nail injuries ○ Burns ○ Lacerations ○ Child Abuse <ul style="list-style-type: none"> ○ Physical abuse characteristics ○ Common physical findings ○ Reporting requirements ○ Neglect ○ Red flags: IPV, date rape, run-ways, sex trafficking ○ Foreign bodies removal and neglect <ul style="list-style-type: none"> ○ Body cavities ○ Concussions <ul style="list-style-type: none"> ○ Scan or not to scan ○ 6-step return to play protocol ○ Concussion in sports ○ Sport injuries and fractures <ul style="list-style-type: none"> ○ Overuse/traumatic injuries ○ Knee injuries ○ Ankle injuries ○ Salter-Harris Classification of Growth Plate injuries 	
14	<p>Module 22: Infectious Disease and Immunizations This module covers:</p> <ul style="list-style-type: none"> ○ Infectious mononucleosis (EBV) ○ Diphtheria ○ Hand Foot and Mouth Disease (Coxsackie Virus) ○ Pertussis/Whooping Cough (Bordetella Pertussis) ○ Fever of unknown origin ○ Insect bites <ul style="list-style-type: none"> ○ Ticks ○ Mosquitos ○ Lyme Disease ○ Infectious disorders: <ul style="list-style-type: none"> ○ Rubella (German Measles) ○ Erythema Infectiosum (5th Disease) ○ Tinea and Ring worm ○ Scabies ○ Helminth (worms) ○ Varicella ○ Measles (Rubeola) 	Asynchronous questions and discussion boards Case studies

Week	Content	Assignments
	<ul style="list-style-type: none"> ○ Rubella (German Measles) ○ Immunizations <ul style="list-style-type: none"> ○ DTaP/Tdap ○ Polio ○ Hepatitis A ○ Hepatitis B ○ Hib ○ Pneumococcal vaccines (PCV 13 and PPSV23) ○ MMR ○ Varicella ○ Rotavirus ○ Meningitis (Meningococcal Disease) ○ HPV ○ Influenza <p>Module 23: Dermatology This module covers:</p> <ul style="list-style-type: none"> ○ Special consideration in children with dark skin or diverse cultural groups ○ Impetigo (non-bullous v. bullous) ○ Folliculitis ○ Oral Candidiasis (thrush) ○ Diaper dermatitis (diaper rash) ○ Tinea pedis ○ Lice (pediculosis) – school notification ○ Tinea corporis and capitis ○ Atopic dermatitis ○ Molluscum contagiosum ○ Warts ○ Scabies ○ Pityriasis rosea ○ Pigment nevi ○ Vascular nevi – Hemangiomas 	
15	Group Project Presentations	Readings as assigned by student lead groups. Exam 4 weeks 12-14
Study Days / No Classes		
Final Examinations		

Course Schedule—Detailed Description

Unit 1: Module 1: Preconception Care and Pregnancy Diagnosis	Month Date
Topics Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral, patient and family education, health promotion and disease prevention Ethical, cultural, lifespan, environmental considerations. Content will include: <ul style="list-style-type: none"> • Promoting lifelong health for families and communities • Preconception care • Contraception • Preventing birth defects (Hb A1c, anemia, substance, blood pressure, seizure meds, dental care) • Infertility • Pregnancy diagnosis • Variations in physical assessment in pregnancy • Social issues in pregnancy <ul style="list-style-type: none"> ○ Poverty ○ Interdisciplinary care ○ Incarceration ○ Domestic Violence Screen ○ Intimate partner violence during pregnancy ○ Interdisciplinary management 	

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). *Guideline for Nurse Practitioners in Ambulatory Obstetric Settings* (2nd ed.). New York, NY: Springer Publishing.

Chapter 1: Preconception Counseling and Care, p. 4-9.

Chapter 2: Screening for genetic disorders and genetic counseling-preconception and early pregnancy, p. 14-32

Chapter 3: The first prenatal visit, p. 38-74

Chapter 21: Zika virus and pregnancy, p. 322-327.

Appendix B: Screening tools, p. 333-361.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Promoting lifelong health for families and communities, p. 15-35

Promoting Family Support: Preconception p. 56-57

Nutritional health: p 171.172.

Prenatal visit guidance: Diet and physical Activity for Pregnancy Women. p. 319-320

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 4: Adolescent Contraception, p. 132-139; Adolescent Pregnancy, p. 139-141.

Chapter 37: Perinatal genetics, p. 1122- 1123.

Recommended Readings

Center for Disease Control and Prevention. Preconception Health and Health Care: www.cdc.gov/preconception/

Center for Disease Control and Prevention. Guidelines for Vaccinating Pregnant Women: www.cdc.gov

Recommended Readings

Center for Disease Control and Prevention. Preconception Health and Health Care: www.cdc.gov/preconception/

Center for Disease Control and Prevention. Guidelines for Vaccinating Pregnant Women: www.cdc.gov

Unit 2: Module 2: Prenatal Care	Month Date
<p>Topics</p> <p>Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral, patient and family education, health promotion and disease prevention</p> <p>Content will include:</p> <ul style="list-style-type: none"> • Prenatal care <ul style="list-style-type: none"> • Gestational age assessment • Visit schedule (tests, screening, anticipatory guidance, Ultrasound) • Nutrition • Exercise in pregnancy • Vaccinations • Genetic testing • Medication use during pregnancy • Prenatal care: First trimester • Prenatal care: Second trimester • Prenatal Care: Third trimester • Use of motivational interviewing for smoking cessation 	

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). Guideline for Nurse Practitioners in Ambulatory Obstetric Settings (2nd ed.). New York, NY: Springer Publishing.

Chapter 4: Ongoing prenatal care. P. 80--109

Chapter 5: Medication use in pregnancy, p.111-118

Chapter 6: Antenatal fetal surveillance, p. 120-125

Chapter 9: Oral health and oral health problems in pregnancy, p.174-178.

Chapter 13: Vaginitis and Sexually transmitted infections, p. 212-231.

Chapter 17: Obesity and pregnancy, p.284-289.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Sexually transmitted infections, p. 1364-1371.

Recommended Readings

Dooley, E. K., & Ringler, R. L. (2012). Prenatal care: Touching the future. *Primary Care*. 39(1), 17-37.

Richards, R., Merrill, R. M., & Baksh, L. (2011). Health behaviors and infant health outcomes in homeless pregnant women in the United States. *Pediatrics*, 128(3), 438-446.

Unit 3: Module 3: Pregnancy Loss Module 4: Management of Common Discomforts and Health Problems during Prenatal & Postnatal Periods (Part 1)	Month Date
<p>Topics</p> <p>Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease</p> <p>Module 3: Pregnancy Loss Content will include:</p> <ul style="list-style-type: none"> ○ Abortion: spontaneous or elective ○ Fetal demise ○ Perinatal loss and grief <p>Module 4: Management of Common Discomforts and Health Problems during Prenatal & Postnatal Periods (Part 1) Content will include:</p> <ul style="list-style-type: none"> ● Common infections in pregnancy ● Musculoskeletal discomforts in pregnancy ● Respiratory disorders ● Gastrointestinal disorders ● Urinary tract disorders ● Dermatologic disorders in pregnancy ● Hematologic and thromboembolic disorders in pregnancy ● Bleeding first half of pregnancy <ul style="list-style-type: none"> ○ Ectopic pregnancy ○ Bleeding during the first half of pregnancy ○ Gestational trophoblastic disease ○ Cervical infection ○ Trauma ● Bleeding second half of pregnancy <ul style="list-style-type: none"> ○ Placenta Previa ○ Placental abruption ● Trauma 	

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). *Guideline for Nurse Practitioners in Ambulatory Obstetric Settings* (2nd ed.). New York, NY: Springer Publishing.

Chapter 10: Iron-deficiency anemias in pregnancy, p. 182-186.

Chapter 11: Respiratory illness during pregnancy: Upper respiratory infection. Influenza, and asthma, p. 188-201.

Chapter 12: Asymptomatic bacteriuria and urinary tract infection in pregnancy, p. 204-209.

Chapter 14: Dermatoses of pregnancy, p. 234-243

Recommended Readings

Glaser, A. P., & Schaeffer, A. J. (2015). Urinary tract infection and bacteriuria in pregnancy. *Urology Clinics of North America*, 42(4), 547-560.

Robinson, G. E. (2014). Pregnancy loss. *Clinical Obstetrics & Gynecology*, 28(1), 169-178.

Unit 4: Module 5: Management of Common Discomforts and Health Problems during Prenatal & Postnatal Periods (Part 2) Module 6: Components of labor and Postnatal Care Module 7: Lactation: Breast Feeding 101	Month Date
<p>Topics</p> <p>Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease</p> <p>Module 5: Management of Common Discomforts and Health Problems during Prenatal & Postnatal Periods (Part 2) Content will include:</p> <ul style="list-style-type: none"> • Diabetes in pregnancy • Hypertensive disorders in pregnancy <ul style="list-style-type: none"> ○ Chronic hypertension ○ Preeclampsia <p>Module 6: Components of Labor and Postnatal Care Content will include</p> <ul style="list-style-type: none"> • Preparation for labor <ul style="list-style-type: none"> ○ Timing contractions ○ Preterm labor • Postpartum care <ul style="list-style-type: none"> ○ Postpartum exam and assessment of physical adjustment ○ Contraception planning ○ Nutrition and weight loss • Postpartum Complications <ul style="list-style-type: none"> ○ Wound infection ○ Hemorrhage • Post-partum Mood <ul style="list-style-type: none"> ○ Assessment of emotional adjustment ○ Substance abuse and impact on mood ○ Mood, depression & psychosis <p>Module 7: Lactation: Breast Feeding 101 Content will include</p> <ul style="list-style-type: none"> • Basics of breastfeeding support and assessment <ul style="list-style-type: none"> ○ Latching ○ Milk supply ○ Sore nipples 	

- Care of the breastfeeding mother
 - Breast engorgement
 - Plugged ducts
 - Mastitis
 - Abscess

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). *Guideline for Nurse Practitioners in Ambulatory Obstetric Settings* (2nd ed.). New York, NY: Springer Publishing.

Chapter 7: Postpartum care in an ambulatory care setting, p. 128-145.

Chapter 8: Postpartum complications, p. 150-168.

Chapter 16: Gestational diabetes mellitus, p. 247-268.

Chapter 18: Hypertension disorders in pregnancy, 283-289.

Chapter 19: Preterm labor, p.301-309.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Breast feeding, 174-175, 323-325

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Breast feeding, 288--295

Recommended Readings

Averett, S. L., & Fletcher, E. K., (2015). Prepregnancy obesity and birth outcomes. *Maternal Child Health Journal*, 30 October 2015, 1-10, <http://dx.doi.org/10.1007/s10995-015-1865-0>

Jackson, E., & Glazier, A. (2011). Return of ovulation and menses in postpartum non-lactating women: A systematic review. *Obstetrics and Gynecology*, 117(3), 657-662.

Martis, R., Crowther, C.A., Shepherd, E., Alswiler, J. Downie, M.R., & Brown. (2018). Treatments for women with gestational diabetes mellitus: An overview of Cochrane

Weissgerber, T. L., & Mudd, L. M. (2015). Preeclampsia and diabetes. *Current Diabetes Reports*, 15(9). <http://dx.doi.org/10.1007/s11892-015-0579-4>

Williams, J. F., Smith, V. C., & Committee on Substance Abuse (2015). Fetal alcohol spectrum disorders. *Pediatrics*, 136(5), e1395-1406. <http://dx.doi.org/10.1542/peds.2015-3113>

Unit 5: Module 8: Pediatric Primary Care		Month Date
Topics		
Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease		
Content will include:		

- Roles relationships and cultural perspectives
 - Family relationships and challenges
 - Circumstances affecting families
 - Child maltreatment (emotional & physical)
- Oral health and nutrition
- Sports physical exams and clearance
- Growth, development and anticipatory guidance
- Oral health and nutrition
- Sleep and rest
- Developmental screening
- Education discipline module
- Growth development and guidance
- Sexuality
 - Care of the LBTG child/adolescent

This Module relates to course objectives 1-6.

Required Readings

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Promoting healthy development: p. 77-110.

Promoting Health weight, p. 151-164.

Promoting health nutrition, p. 167-190.

Promoting Physical Activity, p. 193-202

Promoting oral health, p. 205-214

Promoting health sexual development and sexuality, p. 217-225

Introduction to the Bright Futures health supervision visits, p. 259-273.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Child development& Behavior, p. 67-75 (stop at enuresis)

Common developmental concerns, p.77-82 (stop at restless leg syndrome)

Apparent life threatening event, p. 555-559 (stop quality assessment)

Chapter 37: Genetic evaluation of a child with developmental disabilities, p. 1120-1122 (stop at perinatal genetics).

Recommended Readings

Ball, J. W., Dains, J. E., Flynn, J. A., Solomon, B. S., & Stewart, R. W. (2015). *Seidel's guide to physical examination* (8th Ed.). St. Louis, MO: Elsevier-Mosby.

1. Chapter 23: Sports participation evaluation, 581-593.

Coker, T., Tumaini, R., Austin, S. B., & Schuster, M. A. (2010). The health and health care of lesbian, gay and bisexual adolescents. *Annual Review of Public Health*, 31(1), 457-477.

Kilts, R. (2010). Barriers to optimal care between physicians, gay, bisexual, transgender and questioning adolescent patient. *Journal of Homosexuality*, 57(6), 730-747.

Unit 6: Module 9: Care of the Newborn Module 10: Atopic Disorders and Rheumatic Disorders	Month Date
<p>Topics</p> <p>Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease</p> <p>Module 9: Care of the Newborn Content will include</p> <ul style="list-style-type: none"> • Newborn assessment <ul style="list-style-type: none"> ○ APGAR ○ Maturation assessment of gestational age <ul style="list-style-type: none"> ○ Neuromuscular maturity ○ Physical maturity • Newborn reflexes <ul style="list-style-type: none"> ○ Primitive/Newborn reflexes (rooting, sucking, palmer, stepping, Moro, & plantar) ○ Later reflexes (landau, neck righting [fencing], parachute) • Newborn screening <ul style="list-style-type: none"> ○ Purpose ○ Timeline ○ Screening tests ○ Genetic testing ○ Follow-up/patient education • Disturbances in head growth causing skull deformities <ul style="list-style-type: none"> ○ Microcephaly ○ Hydrocephaly ○ Craniosynostosis ○ Skull deformities associated with single suture synostosis • Genetic disorders • Brachial plexus palsy secondary to birth and Klumpke palsy • Perinatal disorders • Feeding issues • Development <p>Module 10: Atopic disorders and rheumatic disorders Content will include</p> <ul style="list-style-type: none"> • Clinical pearls in primary care when evaluating children <ul style="list-style-type: none"> ○ Identify disease process based on CC ○ Examine pathophysiology ○ Determine HPI ○ PE: examine appropriate systems based on CC, HPI ○ Differential diagnosis ○ Treatment ○ Collaboration, referral, what is next? ○ Atopic Disorders <ul style="list-style-type: none"> ○ Allergic rhinitis (IgE reactions) ○ Asthma (also discussed Module 18) ○ Atopic dermatitis (eczema) <ul style="list-style-type: none"> ○ Acute presentation ○ Chronic presentation ○ Physical features 	

- Rheumatic Disorders
 - Autoimmune disorders
 - Systemic lupus erythematosus
 - Juvenile idiopathic (rheumatoid) arthritis
 - Lab studies
- Acute Rheumatic Fever
 - Complication of strep
 - Jones criteria (major and minor)
 - Differential diagnosis
- Henoch-Schonlein Purpura

This Module relates to course objectives 1-6.

Required Readings

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Infancy: Newborn visit, p. 333-381.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 2: The newborn infant, p 10-31 (stop at multiple births)

Chapter 29: Rheumatic Disease, p. 880-889-894 (stop at dermatomyositis)

Recommended Readings

Baby's First Test (2015). Conditions screened by state. www.babysfirsttest.org/newborn-screening/states

Ellis, K. (2005). Management of seasonal allergic rhinitis: Comparative efficacy of the newer-generation prescription Antihistamines. *Journal of the American Academy of Nurse Practitioners*, 17(8), 1745-7599.
<http://dx.doi.org/10.1111/j.1745-7599.2005.0050.x>

March of Dimes (2015). Newborn screening tests. www.marchofdimes.org

Unit 7	
Module 11: Hematologic Disorders	
Module 12: Eye Disorders	
Module 13: Ear Disorders	
Topics	
Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease	
Module 11: Hematological Disorders	
Content will include	
<ul style="list-style-type: none"> ○ Red blood cell disorders (Anemia) <ul style="list-style-type: none"> ○ Microcytic anemia ○ Iron deficiency ○ Lead poisoning ○ Thalassemias ○ Sickle cell anemia and trait <ul style="list-style-type: none"> ○ Neonatal screen 	

- Clinical manifestations
 - PCN prophylaxis
 - Pneumococcal immunization series
 - Folic acid 1mg/day
- Blood cancers
 - Leukemias
 - Lymphomas;
 - Hodgkin Lymphoma
 - Non-Hodgkin disease
- Platelet and coagulation disorders
 - ITP (Immune or idiopathic thrombocytopenia)
 - Hemophilia (A: Factor VIII; B: Factor IX)

Module 12: Eye Disorders

Content will include

- Strabismus
- Nystagmus
- Amblyopia
- Cataracts
- Retinoblastoma
- Conjunctivitis
 - In the newborn (ophthalmia neonatorum)
 - Bacterial (“Pinkeye”)
 - Conjunctivitis-Otitis syndrome
 - Allergic
 - When to Make a referral of Ophthalmologic Management

Module 13: Ear Disorders

Content will include

- Hearing tests in children
- Otitis Externa (Swimmer’s ear)
- Otitis Media
- Otitis Media with effusion
- Role of Tympanometry

This Module relates to course objectives 1-6.

Required Readings

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Infancy: 1 month and 2 month visits, p. 383-432.

Infant: 4 month and 6 month visits, p. 433-480.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 16: Eye, p. 420-421 (stop refractory errors); Start Disorders of the ocular structures p. 433-442 (stop at disorders of the iris), Start disorders of the lens p. 450-454 (stop disorders of the retina).

Chapter 18: Ear, nose, & throat, p. 478-507

Chapter 30, p. 898-916 (stop at polycythemia); Inherited bleeding disorder, p. 331-936 (stop at acquired bleeding disorders).

Chapter 31 Neoplastic disease; p. 953-959 (stop at myeloproliferative disorders); retinoblastoma p. 977-978 (stop at hepatic tumor).

Recommended Readings

- Dowling, M. M., Quinn, C. T., Rogers, Z. R., & Buchanan, G. R. (2010). Acute silent cerebral infarct in children with Sickle Cell anemia. *Pediatric Blood and Cancer*, 54(2), 461-464.
- McCormick, E. (2013). Children uncover eye exam ignorance. *Optometry Today*, 53(4), 8.
- Zumach, A., Gerritis, E. Chenault, M., & Antenus, L. (2010). Long-term effects of early-life otitis media on language development. *Journal of Speech, Language, and Hearing Research*, 53(1), 34-43.

Unit 8 Module 14: Neurologic Disorders, ADHD, Autism Spectrum, Mental Health	Month Date
<p>Topics</p> <p>Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease</p> <p>Content will Include</p> <ul style="list-style-type: none"> ○ Benign paroxysmal vertigo (BPV) ○ Cerebral Palsy <ul style="list-style-type: none"> ○ Causes ○ Care ○ Epilepsy and seizure Disorders <ul style="list-style-type: none"> ○ Febrile seizures ○ Generalized seizures ○ Non-epileptic (pseudoseizures) ○ Headaches <ul style="list-style-type: none"> ○ Frontal, and posterior ○ Causes ○ Red flags ○ Types (tension and migraine) ○ Clinical manifestations ○ Treatment <ul style="list-style-type: none"> ○ Symptomatic ○ Abortive ○ Preventive ○ Diagnostic tests ○ Differential Diagnosis ○ Bacterial meningitis ○ Management ○ Attention Deficit/Hyperactivity Disorder (ADHD) <ul style="list-style-type: none"> ○ Core Symptoms ○ Clinical findings ○ Differential diagnosis ○ Management <ul style="list-style-type: none"> ○ Pharmacological ○ Non-pharmacological ○ Autism Spectrum Disorders <ul style="list-style-type: none"> ○ Continuum complex neurobiological and neurodevelopmental disorders ○ Differential 	

- Evaluation across developmental stages
- Early assessment
- Pharmacologic & non-pharmacologic management
- Mental Health
 - Anxiety disorders
 - Types
 - Risks
 - Separation Anxiety
 - Clinical Manifestations
 - Differential Diagnosis
 - Management
 - Mood disorders: Depression
 - Types
 - Clinical manifestations
 - Screening tests (Depression Scale, CBCL, etc.)
 - Management
 - Suicidal risk assessment
 - Pharmacologic & non-pharmacologic
 - PTSD (Posttraumatic Stress Disorder)
 - Clinical manifestations
 - Differential diagnosis
 - Conduct Disorders: Opposition defiant disorder
 - Mood Disorders: Major depressive disorder Management (refer to psych consult)

This Module relates to course objectives 1-6.

Required Readings

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Promoting mental health: p. 115-145.

Infancy: 6 month, and 9 month, p. 433-480.

Child & adolescent psychiatric disorders, p. 168-212.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 3: Well-child surveillance & screening, p. 85-97.

Chapter 25: Neurologic & Muscular disorders, p. 752-774 (stop at pseudotumor); Abnormal head size p. 785-787 (stop at Neurocutaneous dysplasias); Bacterial meningitis p. 802—803 (stop at brain abscess)

Recommended Readings

Moreno, M.A. (2013). Posttraumatic stress in children. *Journal of the American Medical Association: Pediatrics*, 167(12), 1176.

Solomons, R., Schoeman, J., & Van Toorn, R. (2015) Approaches to headaches in children. *CME: Your SA Journal of CPD*, 30(1), Academic One File.

Victor, S., & Ryan, S. (2014). Drugs for preventing migraine headaches in children. *Cochrane Database of Systematic Reviews*, 29(4), 171-174.

Unit 9 Module 15: Endocrine and Metabolic Disorders	Month Date
Topics	
Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease	
Content will include:	
<ul style="list-style-type: none"> ○ Diabetes: Type 1 and Type 2 ○ Similarities and Differences ○ Risk factors ○ Insulin therapy (rapid, short and long acting) ○ Management type 2 ○ Congenital adrenal insufficiency ○ Motivational interviewing: Childhood obesity ○ Growth disorders ○ Primary: <ul style="list-style-type: none"> ○ skeletal, ○ chromosomal-Turners Syndrome, ○ Hypothyroidism: variations in children <ul style="list-style-type: none"> ○ Congenital & Acquired, genetic short stature, ○ Secondary: Chronic disease, Idiopathic, FTT ○ Constitutional growth delay ○ Pubertal disorders (Early, Precocious, Delayed) ○ Inborn errors of metabolism <ul style="list-style-type: none"> ○ Amino Acid metabolism disorders: Phenylketonuria (PKU) ○ Carbohydrate metabolism 	

This Module relates to course objectives 1-6.

Required Readings

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Infancy: 9 month visit, p 481-499

Early childhood: 12 month visits, p. 503-541.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 34: Endocrine disorders, p. 1016-1025 (stop disorders of pituitary); Thyroid gland, p. 1026-1031 (stop at thyroid cancer); Precocious puberty, p. 1040-1045 (stop at adrenal cortex)

Chapter 35: Diabetes mellitus, p. 1054-1064.

Chapter 36: Inborn errors of metabolism, p. 1065- 1068 (stop at Disorders of carbohydrate metabolism)

Unit 10 Module 16: Cardiovascular Disorders Module 17: Respiratory Disorders (part 1)	Month Date
Topics	
Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease	

Module 16: Cardiovascular Disorders

Content will include:

- Murmurs
 - Types of murmurs
 - Innocent/functional murmurs
 - Functional murmur of peripheral arterial stenosis
 - Still's murmur
 - Newborn murmur
 - When to refer
- Congenital Heart Disease
 - Atrial Septal Defect (ASD)
 - Ventricular Septal Defect
 - Coarctation of the Aorta
 - Tetralogy of Fallot
 - Patent Ductus Arteriosus (PDA)
 - Pulmonary Stenosis
 - Transposition of the Great Vessels
- Hypertension
- Preventing sudden cardiac arrest
- Kawasaki disease
- Acute Rheumatic Fever

Module 17: Respiratory Disorders (Part 1)

Content will include:

- Upper respiratory tract infections
 - Common cold
 - Rhinosinusitis
 - Pharyngitis
 - Tonsillitis (viral vs. bacterial)
 - Strep throat

This Module relates to course objectives 1-6.

Required Readings

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Early childhood: 15 months through 2 years: 525-583.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Cardiac problems in the newborn infant, p. 46-48

Chapter 19: Respiratory tract & mediastinum: p. 509-527 (stop primary ciliary dyskinesia); Atypical pneumonia p.537-540 (stop st pneumonia in the immunocompromised host).

Chapter 20 Cardiovascular diseases, p. 561-568 (stop at MRI); Genetic basis of congenital heart disease p. 573-611 (stop at cardiac transplantation).

Chapter 24: Hypertension p. 742-745 (stop at inherited or developmental defects of the kidney)

Chapter 42: Infections, p. 1246-1253 (stop at strep in fections other than group A and B); Pertussis, p. 1289-1291 (stop at listeriosis)

Recommended Reading

Mesrobian, L., & Sanil, Y. (2016). Innocent heart murmurs from the perspective of the pediatrician, *Pediatric Annals*, 45(8), e306-309. doi: 10.3928/19382359-20160720-09.

Unit 11 Module 17: Respiratory disorders (part 2)	Month Date
Topics	
Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease	
Content will include:	
<ul style="list-style-type: none"> ○ Extrathoracic Airway Disorders <ul style="list-style-type: none"> ▪ Croup ▪ Epiglottitis ○ Intrathoracic Airway Disorders <ul style="list-style-type: none"> ▪ Bronchiolitis ▪ Asthma ▪ Pneumonia ▪ Cystic Fibrosis ▪ Pectus deformity 	

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). Guideline for Nurse Practitioners in Ambulatory Obstetric Settings (2nd ed.). New York, NY: Springer Publishing.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Early childhood: 2-1/2 through 4 year visits, p. 585-647.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 30: Respiratory infections, 1187-1200 (stop at Hand foot and mouth disease)

Recommended Readings

Guilbert, T. W., Bacharier, L. B., & Fitzpatrick, A. M. (2014). Severe asthma in children. *Journal of Allergy and Immunology: In Practice*, 2(5), 489-500.

Itzhak, B. (2013). Acute sinusitis in children. *Pediatric Clinics of North America*, 60(2), 409-424.

Warren, L. (2012). Asthma in children, *Medicine*, 40(2), 238-242.

Unit 12 Module 18: Gastrointestinal Disorders Module 19: Genitourinary Disorders and Gynecological issues.	Month Date
Topics	

Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease

Module 18 Gastrointestinal Disorders

Content will include:

- Elimination
- Upper Gastrointestinal Tract and Lower Gastrointestinal Tract Disorders
 - Gastrointestinal Disorders
 - Assessment
 - Vomiting and Red flags
 - Dehydration/ Red Flags
 - Gastroesophageal Reflux Disease (GERD)
 - Esophageal disorders
 - Peptic ulcer disease
 - Failure to thrive
 - Acute Diarrhea
 - Probiotics for prevention of Pediatric Antibiotic Associated Diarrhea
 - Vomiting and dehydration
 - Red flags
 - Foreign body ingestion
 - Encopresis
 - Abdominal Pain
 - Foreign body ingestion
 - Appendicitis
 - Infantile colic
 - Foreign body ingestion
 - Intussusception
 - Functional abdominal pain
 - Malabsorption
- Malabsorption Syndromes
 - Celiac disease
 - Lactose intolerance
- Inflammatory Bowel Disease
 - Crohn Disease
 - Ulcerative Colitis

Module 19: Genitourinary Disorders & Gynecologic Issues

Content will cover:

- Enuresis
- Urinary Tract Infections
- Vesicoureteral Reflux (VUR)
- Hematuria
 - Microscopic: Persistent /transient
 - Macroscopic:
 - Hypercalciuria
 - IgA Nephropathy
 - Glomerulonephritis
- Nephrotic syndrome
- Nephritis and Glomerulonephritis
- Renal Tubular Acidosis
- Nephroblastoma

- Common Genitourinary Conditions in Males
 - Hypospadias
 - Cryptorchidism (undescended testes)
 - Inguinal hernia
 - Testicular masses
 - Torsion of the testis
- Gynecologic Issues
 - Contraception
 - Labial adhesions
 - Teen pregnancy

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). *Guideline for Nurse Practitioners in Ambulatory Obstetric Settings* (2nd ed.). New York, NY: Springer Publishing.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Middle childhood visits 5 through 7 and 8 year visits, 651-701.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Enuresis & encopresis, p. 75-77

Chapter 21 Gastrointestinal tract, p. 626-635; Intussusception p. 640-641 (stop patent omphalomesenteric duct); Acute appendicitis p. 642-643 (stop at duplications of the gastrointestinal tract); Disorders of the colon p. 643-648 (stop at disorders of the peritoneal cavity); Major gastrointestinal symptoms & signs, p. 652- 668.

Chapter 24: Kidney & Urinary tract, Glomerulonephritis p. 732-734 stop at tubulointerstitial disease); Urinary tract infections p. 749-751.

Chapter 31: Nephroblastoma (Wilms tumor) 972-974 (stop at bone tumors)

Unit 13		Month Date
Module 20: Musculoskeletal Disorders		
Module 21: Common Injuries and Suspected Abuse		
Topics		
Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease		
Module 20: Musculoskeletal Disorder		
Content will cover::		
<ul style="list-style-type: none"> ○ Clavicle fractures ○ Scoliosis ○ Legg-Calve-Perthes Disease ○ Slipped Capital Femoral Epiphysis ○ Developmental dysplasia of the hip ○ Tibial torsion ○ Knee disorders <ul style="list-style-type: none"> ○ Osgood-Schlatter Disease ○ Genu valgum 		

- Genu varum
- Foot problems
 - Pes Planus (flat feet)
 - Metatarsus Adductus (club foot)

Module 21: Common Injuries and Suspected Abuse

This module covers:

- Injuries and suspected abuse
- Approach to trauma
- Common injuries
 - Puncture wounds
 - Nail injuries
 - Burns
 - Lacerations
- Child Abuse
 - Physical abuse characteristics
 - Common physical findings
 - Reporting requirements
 - Neglect
 - Red flags: IPV, date rape, run-ways, sex trafficking
- Foreign bodies removal and neglect
 - Body cavities
- Concussions
 - Scan or not to scan
 - 6-step return to play protocol
 - Concussion in sports
- Sport injuries and fractures
 - Overuse/traumatic injuries
 - Knee injuries
 - Ankle injuries
 - Salter-Harris Classification of Growth Plate injuries

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). *Guideline for Nurse Practitioners in Ambulatory Obstetric Settings* (2nd ed.). New York, NY: Springer Publishing.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Promoting safety and injury prevention, p. 235-252.
Middle childhood: 9 and 10 year visits, p. 703- 730.
Early adolescence 11 through 14 year visits, 733-765.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 8: Child abuse & neglect, 213-221.
Chapter 27: Sports medicine, p.850-888.
Chapter 26: Orthopedics, 824-834 (stop at syndromes of the musculoskeletal involvement); Vascular lesions & avascular necrosis, p. 845-846 (stop at miscellaneous disease of the bone).

Unit 14 Module 22: Infectious Disease and Immunizations Module 23: Dermatology, Common Injuries and Suspected Abuse	Month Date
<p>Topics</p> <p>Module covers: Definition, epidemiology, pathophysiology, clinical presentation, physical examination, diagnostics, differential diagnosis, management, complications, indications for referral or hospitalization, patient and family education, health promotion and disease</p> <p>Content will include:</p> <p>Module 22: Infectious Disease and Immunizations</p> <p>Content will include:</p> <ul style="list-style-type: none"> ○ Infectious mononucleosis (EBV) ○ Diphtheria ○ Hand Foot and Mouth Disease (Coxsackie Virus) ○ Pertussis/Whooping Cough (Bordetella Pertussis) ○ Fever of unknown origin ○ Insect bites <ul style="list-style-type: none"> ○ Ticks ○ Mosquitos ○ Lyme Disease ○ Infectious disorders: <ul style="list-style-type: none"> ○ Rubella (German Measles) ○ Erythema Infectiosum (5th Disease) ○ Tinea and Ring worm ○ Scabies ○ Helminth (worms) ○ Varicella ○ Measles (Rubeola) ○ Rubella (German Measles) ○ Immunizations <ul style="list-style-type: none"> ○ DTaP/Tdap ○ Polio ○ Hepatitis A ○ Hepatitis B ○ Hib ○ Pneumococcal vaccines (PCV 13 and PPSV23) ○ MMR ○ Varicella ○ Rotavirus ○ Meningitis (Meningococcal Disease) ○ HPV ○ Influenza <p>Module 23: Dermatology</p> <p>Content will include:</p> <ul style="list-style-type: none"> ○ Special consideration in children with dark skin or diverse cultural groups ○ Impetigo (non-bullous v. bullous) ○ Folliculitis ○ Oral Candidiasis (thrush) ○ Diaper dermatitis (diaper rash) 	

- Tinea pedis
- Lice (pediculosis) – school notification
- Tinea corporis and capitis
- Atopic dermatitis
- Molluscum contagiosum
- Warts
- Scabies
- Pityriasis rosea
- Pigment nevi
- Vascular nevi – Hemangiomas
- Helminthic zoonoses (worms)

This Module relates to course objectives 1-6.

Required Readings

Cibulka, N.J. & Barron, M.L. (2017). *Guideline for Nurse Practitioners in Ambulatory Obstetric Settings* (2nd ed.). New York, NY: Springer Publishing.

Hagen, J. F., Shaw, J.S., Duncan, P.M. (2017). *Bright Futures: Guidelines* (4th Ed.). Elk Grove Village, IL: American Academy of Pediatrics.

Middle adolescence: 15 through 17 years visits, p 767-797

Late adolescence 18 through 21 year visits, p. 799-821.

Hay, W.W., Levin, M.J., Deterding, R.R., & Abzug, M.J. (2018). *Current Diagnosis & Treatment: Pediatric* (24th ed.). New York, NY: Lange/McGraw Hill.

Chapter 10: immunization, p. 245-274 (stop at vaccinations for special situations)

Chapter 12: Skin, p. 399- 418.

Chapter 40: Infections, rashes p. 1200-1214 (stop at I; Other major viral childhood exanthems, p. 122-127 (stop at rabies).

Chapter 42: Lyme disease, p. 1308-1310

Unit 15 Course Wrap up	Month Date

Study Days / No Classes	Month Date

Final Examinations	Month Date

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 instructor by email (xxx@usc.edu) 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

USC Student Health Sexual Assault & Survivor Support: <https://studenthealth.usc.edu/sexual-assault/>

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

USC Policy Reporting to Title IX: <https://policy.usc.edu/reporting-to-title-ix-student-misconduct/>

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

Papers are due on the day and time specified. Extensions will be granted only for extenuating circumstances. If the paper is late without permission, the grade will be affected.

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

Please direct any concerns about the course with the instructor first. If you are unable to discuss your concerns with the instructor, please contact the faculty course lead. Any concerns unresolved with the course instructor or faculty course lead may be directed to the student's advisor and/or the Chair of your program.

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 Unit AND the current Unit, AND scan the topics to be covered in the next Unit.
- ✓ 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.
