

STUDENT NAME Olivia CreamerDEVELOPMENTAL STAGE Infancy (Birth to 1 year)

REVIEW MODULE CHAPTER \_\_\_\_\_

**EXPECTED GROWTH AND DEVELOPMENT****Physical Development**

Wt. gain of 1.5lb/ mo.

Increase in ht. 1in./ mo. during the 1st 6 mo.

Increase in ht. 0.5in./ mo. during the 2nd 6 mo.

Post. fontanel closes by 2 mo.  
Ant. fontanel closes by 12-18 mo.

May have asymmetry of head until 6-12 mo.

**Cognitive Development**

0- 6 mo.: Experiments w/ making faces, enjoys watching faces, &amp; watches what goes on around self

6-12 mo.: Separation anxiety that peaks between 10 to 18 mo.  
\* Object permanence  
\* Mental representation**Psychosocial Development**

0- 6 mo.: Loves to be held, talked to, cooed, &amp; smiled at

6- 12 mo.: Primarily solitary play (Plays next to but not w/ other infants). May seem antisocial or anxious when parents leave towards the end of the 1st yr.

**Age-Appropriate Activities**

Solitary play

Birth- 3 mo.: Soft, cuddle toys, plastic mirrors, &amp; rattles. Play music, rock, &amp; take on walks

3- 6 mo.: Squeaky toys, teething rings, pat-a-cake, peek-a-boo, &amp; reading/ looking @ books

6- 9 mo.: Bathtub toys, large, soft blocks, banging toys together, &amp; creeping/ crawling

9- 12 mo.: Push-pull &amp; motion toys, building blocks, &amp; plastic bowls/ containers

**Health Promotion**Approved car seat prior to leaving the hospital  
Re-evaluation within 72hr**Immunizations**

Promote vaccination!

@ Birth: Hep B

2 mo.: DTaP, rotavirus vaccine (RV), inactivated poliovirus (IPV), Hib, pneumococcal vaccine (PCV)

4 mo.: DTaP, RV, IPV, Hib, PCV

6 mo.: DTaP, IPV, PCV, HepB, RV, &amp; Hib

6-12 mo.: Seasonal influenza vaccine

**Health Screening**

@ Birth: Heel stick (Tests for PKU, congenital hypothyroidism, &amp; sickle cell)

Hearing screening

Well-child visits (Developmental screenings)

**Nutrition**

1st year: Human milk or infant formula ONLY

NO solid foods in 1st 6 mo.

1st solid food is typically infant cereal

Introduce one food at a time w/ 4-7d in-between

Pacifier for non-nutritive sucking

**Injury Prevention**Keep sharp objects and plants out of reach  
Anchor heavy objects and furniture to the wall  
Never leave child unattended with animals

High R/V aspiration- if it fits in a toilet paper roll, it can be aspirated

Sleep should be alone, on their back, and in a crib w/ no loose sheets, blankets, or pillows

Rear facing in vehicles (Backseat)  
Infant seats should be placed on the ground or floorAlways check bathwater temp.  
Use sunscreen after 6 mo.  
Cover electrical outlets  
Flame-retardant sleepwear

Supervision around any bodies of water

# Growth and Development

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE Toddler (1- 3 years)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

Physical Development	Cognitive Development	Psychosocial Development	Age-Appropriate Activities
<p>Avg. wt. gain of 4-6lb/ yr.</p> <p>Avg. increase in ht. of 3in./ yr.</p> <p>Elongation of the legs rather than the trunk</p>	<p>Concept of object permanence increases</p> <p>Demonstrate memories of events that relate to them</p> <p>Domestic mimicry (playing house) is evident</p> <p>Able to symbolize objects &amp; imitate previously seen activities</p> <p>Demonstrates simple problem-solving skills</p> <p>Follows two-step instructions</p> <p><i>* Child wants to develop a sense of mastery</i></p>	<p>Negativism as toddlers begin to express independence</p> <p>Ritualism provides a sense of comfort</p> <p>Plays games w/ others</p> <p>Shows affection</p> <p>Can assist w/ putting on clothes at 18 mo.</p> <p>Notices emotions of others &amp; looks for the reaction of others at 24 mo.</p> <p>Parallel play at 30 mo.</p> <p><i>* Major stage of pretend play</i></p>	<p>Parallel play</p> <p>Filling &amp; emptying containers</p> <p>Water toys &amp; clay</p> <p>Playing w/ blocks</p> <p>Looking @ books</p> <p>Push-pull toys</p> <p>Tossing balls</p> <p>Finger paints</p> <p>Large-piece puzzles</p> <p>Thick crayons</p> <p>Stage of temper tantrums</p> <p>Start of toilet training</p> <p>Discipline should be consistent w/ well-defined boundaries</p> <p><i>* Allow to play with a toy medical kit prior to medical procedures</i></p>

## Health Promotion

Focused on safety and injury prevention  
 Vehicle safety  
 Burn, fall, suffocation/ choking, poison, drowning, & animal bite prevention.  
 Promote healthy nutrition, sleep & rest, vaccination, & dental health

Immunizations	Health Screening	Nutrition	Injury Prevention
<p>12- 15 mo.: Inactivated polio virus (3rd dose)</p> <p>12- 23 mo.: Hep A</p> <p>15- 18 mo.: DTaP</p> <p>12- 36 mo.: Annual influenza vaccine                      * May use nasal spray if older than 2</p> <p>Promote, promote, promote!</p>	<p>Annual PE's (Developmental screenings)</p> <p>Vision &amp; hearing screening</p> <p>Autism screening</p> <p>Establish dentist by 1 year</p>	<p>3 meals/ day w/ 2 snacks</p> <p>Well-balanced meals (1 cup of fruit daily)</p> <p>Physiologic anorexia</p> <p>Consuming 16- 24 oz of milk/ day is advised                      * May drink low-fat milk after 2 years</p> <p>Food serving sizes should be 1 tbsp for each yr of age</p> <p>No eating or drinking during play activities or when lying down</p>	<p>Small objects should be avoided</p> <p>Sharp objects are kept out of reach</p> <p>Firearms should be kept in locked boxes or cabinets</p> <p>Should not be left unattended with animals</p> <p>Stranger safety education</p> <p>Thermostats on hot water heaters should be turned down to less than 49C</p> <p>Cover electrical outlets</p> <p>Sunscreen when outside</p> <p>Supervision around bodies of water</p> <p>Crib mattresses in the lowest position</p> <p>Safety gates</p> <p>Rear-facing (In the backseat) unless the toddler has outgrown the recommendations</p> <p>Child-proof containers for medications</p> <p>Crib slats no further apart than 6 cm</p>

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE Preschooler (3- 5 years)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

### Physical Development

Avg. wt. gain of 4.6-6.5 lbs./ yr.

Avg. increase in ht. of 2.5-3.5 in./ yr.

### Cognitive Development

Transition to the phase of intuitive thought at the age of 4

Develops social awareness & the ability to consider the viewpoints of others

Make judgements based on visual appearances

- \* Magical thinking
- \* Animism
- \* Centration
- \* Time

Should be able to pay attention for 5-10 min. during activities by the age of 5

Vocab. of 2100+ words by 5 y/o

### Psychosocial Development

Erickson: Initiative vs. guilt  
\* Energetic learners

Take actions based on satisfying personal needs yet understand the concepts of justice & fairness

Begin to recognize differences in appearances

- \* Acceptable vs. unacceptable

Prolonged separation can cause anxiety

Pretent play allows for preschoolers to determine the difference between reality & fantasy

### Age-Appropriate Activities

Shifts to associative play

- Playing ball
- Puzzles
- Riding tricycles
- Playing pretend
- Dress up activities
- Role playing
- Hand puppetry
- Painting
- Simple sewing
- Reading
- Wading pools
- Skating
- Sand boxes
- Skating
- Computer programming

## Health Promotion

Promote healthy nutrition, physical activity, personal hygiene, routines, and sleep & rest. Educate on injury prevention and the importance of immunizations. Prepare child for school.

### Immunizations

4- 6 years:

- \* DTaP
- \* MMR
- \* Varicella
- \* IPV

3- 6 years

- \* Annual flu vacc.

Promote, promote, promote!

### Health Screening

Regular well-child visits to assess child development

- \* Vision screening
- \* Hearing screening

### Nutrition

Variety of nutrient-dense foods

Energy consumed = Energy expended

Age 4 peaks another period of "picky" eating

More agreeable to trying new foods by age 5

13-19g/ day of protein

700-1000 mg/ day of calcium

19-25 g/ day of fiber

Total fat should be 30% of caloric intake over several days

5-2-1-0 framework

### Injury Prevention

Teach about stranger safety

Protective equipment (Helmets & pads)

Apply sunscreen when child is outside

Supervision around any body of water  
\* Swimming lessons

Proper restraints when in a vehicle (Backseat!)

Teach about pedestrian safety

# Growth and Development

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE School-age (6- 12 years)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

Physical Development	Cognitive Development	Psychosocial Development	Age-Appropriate Activities
<p>Begins w/ shedding of first deciduous (Baby) tooth</p> <p>Avg. wt. gain of 4.5-6.5 lb/ yr.</p> <p>Avg. increase in ht. of 2 in./ yr.</p> <p>Girls tend to surpass boys in ht. &amp; wt. by the end of this stage</p> <p>Prepubescence occurs during this stage</p>	<p>Perceptual thinking transitions to conceptual thinking</p> <p>Children master the concept of observation</p> <p>Learns to tell time</p> <p>Classifies more complex information</p> <p>Able to see the perspective of others</p> <p>Able to problem solve</p> <p>Children should be challenged with tasks that must be accomplished</p>	<p>Erickson: Industry vs. Inferiority</p> <p>Early years: * Judgement is guided by reward &amp; punishment</p> <p>Later years: * Able to judge the intentions of an act * Understands different viewpoints * Treats others how they would like to be treated</p> <p>Develops an awareness of self in relation to others</p> <p>Solidification of body image</p>	<p>Predominance of competitive &amp; cooperative play</p> <p>Early years: * Hopscotch * Jump rope * Ride bicycles * Build simple models * Join organized sports</p> <p>Later years: * Make crafts &amp; build models * Engage in hobbies * Solve jigsaw puzzles * Join organized &amp; competitive sports</p> <p>Interaction with peers !!!!</p>

*\* Ensure privacy*

*\* Highly focused on body image, self-esteem, + peer acceptance*

*\* Promote independence*

*\* Set realistic expectations about outcomes*

**Health Promotion**

Educate on safety and injury prevention.  
 Promote health screenings, immunizations, and healthy eating.  
 Encourage child to interact with peers. Monitor for signs of bullying, stress, or fear.

Immunizations	Health Screening	Nutrition	Injury Prevention
<p>Annual influenza vaccine</p> <p>11- 12 years: * Tdap * HPV * Meningococcal vaccine</p> <p>Promote, promote, promote!</p>	<p>Scoliosis * Should be screened before &amp; during growth spurts</p> <p>Regular dental check-ups</p> <p>Annual check-ups with HCP.</p>	<p>Should eat adult portions of food</p> <p>Avoid using food as a reward</p> <p>Emphasize physical activity</p> <p>Balance!</p> <p>Reinforce healthy food selections</p> <p>Limit eating fast-foods</p> <p>Avoid skipping meals</p> <p>Model healthy behaviors</p>	<p>Identify safe play areas</p> <p>Teach fire safety &amp; potential burn hazards</p> <p>Safety precautions for children while cooking</p> <p>Supervision around any body of water</p> <p>Appropriate seatbelt use when in a booster seat</p> <p>Teach to say "no" to substance use</p> <p>Special attention to "latchkey children"</p>

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE Adolescent (12- 20 years)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

Physical Development	Cognitive Development	Psychosocial Development	Age-Appropriate Activities
<p><b>Females:</b> Stop growing ~ 2-2.5 years after the onset of menarche Avg. increase in ht. of 2-8 in. Avg. wt. gain of 15.5-55 lbs</p> <p>Breast development, pubic hair growth, axillary hair growth, &amp; menstruation</p> <p><b>Males:</b> Stop growing around 18-20 Avg. increase in ht. of 4-12 in. Avg. wt. gain of 15.5-66 lbs</p> <p>Testicular enlargement, pubic/axillary hair growth, penile enlargement, facial hair growth, &amp; voice changes</p>	<p>Piaget: Formal operations</p> <p>Capable of evaluating the quality of their own thinking</p> <p>Able to maintain attention for longer periods of time</p> <p>Highly imaginative &amp; idealistic</p> <p>Capable of using formal logic to make decisions</p> <p>Thinks beyond current circumstances</p> <p>Able to understand how their actions influence others</p>	<p>Erickson: Identity vs. role confusion * Group identity</p> <p>Swings or variations in emotions</p> <p>Introspection is increased during middle adolescence</p> <p>Stability of emotions in late-adolescence</p> <p>Sexual identity &amp; exploration</p> <p>Emotional &amp; behavioral autonomy</p> <p>Feel "invincible" to bad outcomes of risky behaviors</p> <p>Exploration of religion &amp; spirituality</p> <p>Body image changes</p> <p>Peer &amp; intimate relationships develop</p>	<p>Nonviolent videogames</p> <p>Nonviolent music</p> <p>Sports</p> <p>Caring for a pet</p> <p>Career-training programs</p> <p>Reading</p> <p>Social interaction</p> <p>* Movies</p> <p>* School dances</p> <p>* Texting/ calling</p> <p>* Social media</p>

## Health Promotion

Educate on healthy eating and injury prevention.  
Promote immunization and health screenings  
Teach about sexuality (Safety and consent) and act as an outlet for discussion  
Promote adequate sleep & rest

Immunizations	Health Screening	Nutrition	Injury Prevention
<p>Annual influenza vaccine</p> <p>2nd dose of meningococcal vaccine if given between 11 and 12</p>	<p>Scoliosis</p> <p>Annual ht. &amp; wt. for BMI calculations</p> <p>BP checks for HTN screening</p> <p>Hgb &amp; Hct.</p> <p>Universal lipid screenings</p> <p>Screenings for STIs if sexually active</p>	<p>May require additional calcium, iron, protein, &amp; zinc</p> <p>Overeating &amp;/ or undereating is common</p> <p>Avoid using food as a reward</p> <p>Emphasize physical activity</p> <p>Balance!</p> <p>Encourage healthy food selections</p>	<p>Lap &amp; shoulder belts in car</p> <p>Protective gear for sports</p> <p>Learn first aid &amp; CPR</p> <p>Sunscreen SPF &gt;/ 15</p> <p>Ask about substance use &amp; teach about the risks/ short-term effects</p> <p>STI discussion, prevention, &amp; protection</p> <p>Discuss risky sexual behaviors &amp; mutual consent</p> <p>Assess for depression, suicidal ideation, &amp; stressors</p> <p>Teach stress management strategies</p>

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE Young Adult (18- 30 years)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

Physical Development	Cognitive Development	Psychosocial Development	Age-Appropriate Activities
<p>Growth concludes around age 20</p> <p>Physical senses peak</p> <p>Cardiac output &amp; efficiency peaks</p> <p>Muscles function optimally at ages 25 to 30</p> <p>Optimal time for childbearing * Pregnancy related changes occur</p>	<p>Piaget: Formal operations</p> <p>Optimal time for education</p> <p>Critical thinking skills improve</p> <p>Memory peaks in the 20s</p> <p>Ability for creative thought increases</p> <p>Values/ norms of friends are relevant</p> <p>Decision-making skills are flexible with increased openness to change</p>	<p>Erickson: Intimacy vs. Isolation</p> <p>Time of exploration &amp; experimentation</p> <p>Able to personalize values &amp; beliefs</p> <p>Able to base reasoning on ethical fairness principles</p> <p>Leave home &amp; establish independent living situations</p> <p>Experience increased anxiety &amp;/ or depression</p> <p>Avoidance of substance use</p>	<p>Travelling Cycling Swimming Yoga</p> <p>Involvement in activities of children, thoughts about the future, vacation planning, returning to school, etc.</p> <p>Any activity that is safe &amp; contributes positively to one's cognitive and behavioral/ emotional health</p>

## Health Promotion

Promote healthy eating and immunizations.  
 Educate on injury prevention and the importance of having a PCP in monitoring health conditions.  
 Encourage adequate sleep and rest.  
 Provide interventions that assist in forming intense, lasting relationships.

Immunizations	Health Screening	Nutrition	Injury Prevention
<p>Annual influenza vaccination</p> <p>Tdap</p> <p>Vaccines given during this developmental stage are usually to "catch up on" missed immunizations/ series' during childhood/ adolescence</p>	<p>Encourage selecting a PCP for ongoing, routine medical care</p> <p>Provide education on contraception &amp; the importance of physical activity</p> <p>Screening for stress &amp; depression (&amp; other mental health disorders)</p> <p>STIs</p> <p>Substance use disorders</p> <p>Ht., Wt., &amp; other VS's.</p> <p>Dental care twice a year</p>	<p>Monitor for adequate nutrition &amp; proper physical activity</p> <p>Monitor calcium intake in females</p> <p>Balance &amp; healthy food selections!</p>	<p>Avoid alcohol, tobacco products, &amp; illicit drugs</p> <p>Avoid driving a vehicle after consumption of a substance that impairs sensory or motor functioning</p> <p>Wear a seatbelt when operating a vehicle</p> <p>Helmets!</p> <p>Install smoke &amp; carbon monoxide detectors in home</p> <p>Secure firearms in a safe location</p>

# Growth and Development

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE Middle Adult (30- 65 years)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

Physical Development	Cognitive Development	Psychosocial Development	Age-Appropriate Activities
<p>Changes vary from person to person depending on diet, exercise, rest, stress, genetics, &amp; whether health problems or disabilities develop.</p> <p>For the most part, however, everything "slows" &amp; performance decreases</p>	<p>Reaction time &amp; speed of performance slows slightly</p> <p>Memory is intact</p> <p>Crystallized intelligence remains (Stored knowledge)</p> <p>Fluid intelligence (How to learn &amp; process new information) declines slightly</p>	<p>Virtue: Care</p> <p>Erickson: Stagnation vs. Generativity</p> <p>Major developmental task: Achieve the life goals established for oneself while also considering the welfare of future generations</p> <p>Spiritual beliefs &amp; religion take on an added importance</p> <p>Empty nest syndrome Mid-life crisis</p>	<p>Strengthening and maintaining relationships</p> <p>Volunteering Cultural events Traveling Group learning Exercising Mindfulness &amp; meditation Journaling Simple crafts Table games &amp; puzzles</p>

## Health Promotion

Promote and assist in achievement of developmental task(s)

Encourage regular health screenings and healthy eating. Promote rest & sleep, immunizations, and educate on injury prevention.

Immunizations	Health Screening	Nutrition	Injury Prevention
<p>Tdap</p> <p>Herpes zoster vaccination</p> <p>Annual influenza vaccination</p> <p>Pneumococcal vaccination</p> <p>Pertussis vaccination</p> <p>Other vaccines may be given during this stage to "catch up" on missed series'</p>	<p>DXA screening for osteoporosis</p> <p>Eye examination for glaucoma &amp; other disorders q2-3 years or annually</p> <p>Mental health screening for anxiety &amp; depression</p> <p>BP checks</p> <p>Diabetes &amp; high cholesterol screenings</p> <p>Colorectal &amp; breast cancer screenings</p> <p>Infectious disease screening</p> <p>Regular check-ups w/ PCP &amp; dentist</p>	<p>Counseling regarding:</p> <p>Obtaining adequate protein</p> <p>Increasing the consumption of whole grains &amp; fresh fruits/vegetables</p> <p>Limiting fat &amp; cholesterol</p> <p>Increasing vitamin D &amp; calcium supplementation (Especially for females)</p>	<p>Avoid substances (Including alcohol) that could lead to substance use disorders</p> <p>Wear a seatbelt when operating a vehicle</p> <p>Do not drive impaired</p> <p>Wear a helmet!</p> <p>Install smoke &amp; carbon monoxide detectors in the home</p> <p>Secure firearms in a safe location</p>

# Growth and Development

STUDENT NAME Olivia Creamer

DEVELOPMENTAL STAGE Older Adult (65 years to death)

REVIEW MODULE CHAPTER \_\_\_\_\_

## EXPECTED GROWTH AND DEVELOPMENT

Physical Development	Cognitive Development	Psychosocial Development	Age-Appropriate Activities
Loss of bone density & mass  Visual & hearing acuity decreases  Taste & sense of smell decreases  Skin changes (Age spots, wrinkles & jowls, dry & scaly skin)  Decreased cardiopulmonary function  Slowed reaction time	Piaget: Formal operations  Slowed neurotransmission & structural brain changes  Delirium, dementia, & depression are not uncommon  Short-term memory may become less reliable  Factors that can impair cognition: Overall health, # of stressors, & lifelong mental well-being	Erickson: Integrity vs. Despair  Major developmental task: Review one's life and derive meaning from both positive & negative events, while achieving & positive sense of self  Difficulties in the area of self-concept  Find ways to remain socially active Maintain sexual health	Water aerobics or chair yoga Creative pursuits Puzzles Reading books * Book clubs Trivia Volunteering Spending time with loved ones Painting Knitting Photography Online games etc...

## Health Promotion

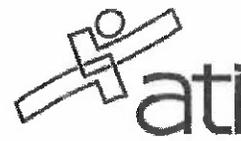
Promote health through immunizations, health screening, healthy eating, and preventing injury  
 Encourage and assist in achieving developmental task(s)  
 Encourage social interaction to prevent isolation

Immunizations	Health Screening	Nutrition	Injury Prevention
Tdap Influenza (Annual) Pneumococcal Herpes zoster Varicella Hep A & B Meningococcal  Haemophilus influenzae type B	Annual: * Hearing * Fecal occult blood test * DRE & PSA * DXA scans for OP * Eye examination for glaucoma & other disorders  Periodic: * Mental health * Cholesterol * BP monitoring * Diabetes screening q3 years	Metabolic rates decline  Decreased digestive enzymes  Decreased intestinal mobility  Increase intake of vitamins D, B12, E, folate, fiber, & calcium  Increase fluid intake  Take a low-dose multivitamin  Limit sodium, fat, refined sugar, & alcohol intake	Install bath rails, grab bars, & handrails on stairways  Remove throw rugs  Eliminate clutter from walkways & hallways  Remove extension & phone cords from walkways & hallways  Properly use mobility aids  Practice safe medication use  Ensure adequate lighting  Wear eyeglasses & hearing aids if needed  Discourage use of substances  Physical activity safet precaut.

\*Tdap @ 10 yr.  
 or more frequently in the event of injury

\*shingles vaccine  
 ↳ 2 doses starting after age 50

\*Fall prevention  
 \*Med management



# Individual Performance Profile N201 Growth and Development 2025

Individual Name: OLIVIA CREAMER      Individual Score: 81.3%

Student Number: 8278407

Institution: Margaret H Rollins SON at  
Beebe Medical Center

Program Type: Diploma

Test Date: 08/28/2025

## Overall Performance

Assessment Name	# Points	Individual Score	Individual Score (% Correct)										
			1	10	20	30	40	50	60	70	80	90	99
N201 Growth and Development 2025	16	81.3%											

# Individual Performance Profile

## N201 Growth and Development 2025



### Outcomes

Acute/Chronic	No of Points	Individual Score	Description
Acute	4	50.0%	A disease, condition or injury characterized by a relatively sudden onset of symptoms that are usually severe. An episode of acute disease results in: recovery to a state comparable to the client's condition of health and activity before the disease; progression into a chronic illness; or death.
Chronic	2	50.0%	A disease or condition that persists for 6 months or more, or in which a cure is not expected. Chronic diseases generally cannot be prevented by vaccines or cured by medication, nor do they just disappear.

Bloom's Taxonomy	No of Points	Individual Score	Description
Apply	7	71.4%	Use information in a variety of situations.
Understand	4	75.0%	Explain the meaning of information.
Remember	5	100.0%	Recall relevant information.

Body Function	No of Points	Individual Score	Description
Cognition and Sensation	10	70.0%	The anatomical structures (brain, central and peripheral nervous systems, eyes and ears) and body functions that support perception, interpretation, and response to internal and external stimuli.
Immunity	1	100.0%	The anatomic structures (spleen, thymus, bone marrow and lymphatic system) and body functions related to inflammation, immunity, and cell growth.
Ingestion, Digestion, Absorption & Elimination	1	100.0%	The anatomical structures (mouth, esophagus, stomach, gall bladder, liver, small and large bowel, rectum, and anus) and body functions that support ingestion, digestion, and absorption of food and elimination of solid wastes from the body.
Reproduction	1	100.0%	The anatomical structures (breasts, ovaries, fallopian tubes, uterus, vagina, vulva, testicles, prostate, scrotum, and penis) and body functions that support reproductive functions.



# Individual Performance Profile N201 Growth and Development 2025

BSN Essentials	No of Points	Individual Score	Description
Information Management and Application of Patient Care Technology	1	100.0%	The need for nurses to be able to use computer-based information management systems and patient care technology in the provision of client care.
Clinical Prevention and Population Health	8	87.5%	The need for nurses to be able to identify health related risk factors and facilitate behaviors that support health promotion, and disease and injury prevention, while providing population-focused care that is based on principles of epidemiology and promotes social justice.
Baccalaureate Generalist Nursing Practice	6	83.3%	The need for nurses to be able to practice as a generalist using clinical reasoning to provide care to patients across the lifespan and healthcare continuum and to individuals, families, groups, communities, and populations.

Clinical Areas	No of Points	Individual Score	Description
Fundamentals	3	66.7%	Ability to apply fundamental nursing principles and skills to basic needs of clients. Topics include foundational client care concepts (ie: medical and surgical asepsis, infection control, physical assessment, therapeutic communication, medication administration, pain management integral to the delivery of safe, ethical, and legal nursing practice.
Pediatric Nursing	12	83.3%	Ability to apply nursing knowledge to clinical problems experienced by children. Topics include basic concepts (e.g., medication administration, physical assessment, nutritional needs), care of children with various system disorders, care of children experiencing pediatric emergencies (e.g., accidental poisoning, respiratory arrest), and care of children with psychosocial disorders.
Nutrition	1	100.0%	Ability to apply nursing knowledge to normal nutrition and diet therapy. Topics include the collection of data regarding nutritional status; implementation of actions to promote normal nutrition or dietary modification in response to illness; and evaluation of the client's response to diet therapy.

NCLEX RN	No of Points	Individual Score	Description
RN Health Promotion and Maintenance	16	81.3%	The nurse directs nursing care to promote prevention and detection of illness and support optimal health.

NLN Competency	No of Points	Individual Score	Description
Human Flourishing	16	81.3%	Human flourishing is reflected in patient care that demonstrates respect for diversity, approaches patients in a holistic and patient-centered manner, and uses advocacy to enhance their health and well-being.



# Individual Performance Profile

## N201 Growth and Development 2025

Nursing Process	No of Points	Individual Score	Description
RN Assessment	1	100.0%	The assessment step of the nursing process involves application of nursing knowledge to the collection, organization, validation and documentation of data about a client's health status. The nurse focuses on the client's response to a specific health problem including the client's health beliefs and practices. The nurse thinks critically to perform a comprehensive assessment of subjective and objective information. Nurses must have excellent communication and assessment skills in order to plan client care.
RN Analysis/Diagnosis	3	100.0%	The analysis step of the nursing process involves the nurse's ability to analyze assessment data to identify health problems/risks and a client's needs for health intervention. The nurse identifies patterns or trends, compares the data with expected standards or reference ranges and draws conclusions to direct nursing care. The nurse then frames nursing diagnoses in order to direct client care.
RN Planning	5	80.0%	The planning step of the nursing process involves the nurse's ability to make decisions and problem solve. The nurse uses a client's assessment data and nursing diagnoses to develop measurable client goals/outcomes and identify nursing interventions. The nurse uses evidenced based practice to set client goals, establish priorities of care, and identify nursing interventions to assist the client to achieve his goals.
RN Implementation/Therapeutic Nursing Intervention	7	71.4%	The implementation step of the nursing process involves the nurse's ability to apply nursing knowledge to implement interventions to assist a client to promote, maintain, or restore his health. The nurse uses problem-solving skills, clinical judgment, and critical thinking when using interpersonal and technical skills to provide client care. During this step the nurse will also delegate and supervise care and document the care and the client's response.

Priority Setting	No of Points	Individual Score	Description
Priority Setting	3	66.7%	Ability to demonstrate nursing judgment in making decisions about priority responses to a client problem. Also includes establishing priorities regarding the sequence of care to be provided to multiple clients.

QSEN	No of Points	Individual Score	Description
Patient-Centered Care	10	80.0%	The provision of caring and compassionate, culturally sensitive care that is based on a patient's physiological, psychological, sociological, spiritual, and cultural needs, preferences, and values.
Evidence Based Practice	6	83.3%	The use of current knowledge from research and other credible sources to make clinical judgments and provide client-centered care.



# Individual Performance Profile

## N201 Growth and Development 2025

Thinking Skills	No of Points	Individual Score	Description
Foundational Thinking	9	88.9%	The ability to comprehend information and concepts. Incorporates Blooms Taxonomy categories of Remembering and Understanding.
Clinical Application	7	71.4%	The ability to apply nursing knowledge to a clinical situation. Incorporates Blooms Taxonomy category of Applying.

### Topics To Review

#### N201 Growth and Development 2025 (3 items)

Diabetes Mellitus: Appropriate Therapeutic Play Activity

Musculoskeletal Congenital Disorders: Response to Scoliosis Surgery

Older Adults (65 Years and Older): Health Promotion Education for Older Adults