

## Instructional Module 4 – Adult M/S 2

Competency	Outcomes	Secondary Outcomes	Give examples of how you met each outcome
<b>Assessment &amp; Intervention</b>	Implement a plan of care that integrates adult patient-related data and evidence-based practice.	<ul style="list-style-type: none"> <li>- Define plan of care for specific health impairment</li> <li>- Identify signs/symptoms of health impairment</li> <li>- Select &amp; implement proper interventions for specific health impairment</li> <li>- Evaluate effectiveness of interventions</li> </ul>	<p>1. My patient had just come back from surgery on her hip. My nurse and I knew we would have to be getting vitals every 15 minutes. We knew we needed to see the patient every 15 minutes to make sure she was stable after all the anesthesia and make sure her incision site was ok. Each 15 minutes that has passed her vital signs improved each time.</p> <p>2. My patient who was a diabetic had a diabetic foot ulcer. We had to put non-skid socks on her but she warned us about her diabetic foot ulcer. We had to assess her foot and change the dressings that she had had previously on her foot. During the assessment we noticed she needed her dressing changed. She was still able to move her toes, she had minimal redness to the site, and no drainage.</p>
<b>Communication</b>	Communicate effectively with members of the healthcare team.	<ul style="list-style-type: none"> <li>- Identify health care team members &amp; their purpose</li> <li>- Interact appropriately with health care team.</li> <li>- Utilize proper SBAR, TEAM Steps, etc.</li> <li>- Evaluate outcomes of communication process</li> </ul>	<p>1. Me, my classmate and the nurse we were with for the day had to change the dressing on some pins on an external fixation device. She was instructing us on how to do the pin site care. We then had to reexplain what we were doing to the patient. We then preformed the pin site care and shared with what we need from one another.</p> <p>2. A time I had to use communication with a healthcare team member was when it took me and three other people to change a patient bedding, briefs and give him a bath. This man was very tall, and not light at all, so it took some teamwork to make it all happen. The patient couldn't turn very well and was incontinent of his bowel habits. So, it took all of us to turn and wipe him down. It also was about making sure the patient didn't get hurt in the process.</p>
<b>Critical Thinking</b>	Apply evidence based research in nursing interventions.	<ul style="list-style-type: none"> <li>- Analyze pertinent data (subjective, objective)</li> <li>- Identify evidence based practice (EBP) resources</li> <li>- Distinguish EBP nursing interventions</li> <li>- Apply EBP nursing interventions</li> <li>- Document resources &amp; interventions</li> </ul>	<p>1. I had a patient who said he was having pain at his IV site. Me and my nurse had to make sure that it wasn't infiltrated. We had to problem solve and critical think after we knew it wasn't infiltrated. So we stopped giving the medication and assessed the IV site again like we did previously before administering the medication. We just had to troubleshoot with the IV and the patient was no longer in any pain.</p> <p>2. A time I had to use critical thinking was when a patient already had a low blood pressure and she had medications due already. She had a scheduled medication that was to lower her blood pressure. Well since her blood pressure was already low me and my nurse thought and had to critical think if she needed this medication or not. Overall the nurse made the decision to not give the medication at the time.</p>
<b>Caring and Human Relationships</b>	Incorporate nursing and healthcare standards with dignity and respect when providing nursing care.	<ul style="list-style-type: none"> <li>- Explain need for nursing &amp; health care standards</li> <li>- Apply standards to patient care (HIPAA, QSEN, NPSG)</li> <li>- Communicate concerns regarding hazards/errors in patient care</li> </ul>	<p>1. A patient who I had was not in her best state of mind. She was often confused and not very oriented to where she was or really who she was but still enjoyed visiting. As her nurse or just anyone seeing her could tell she was bored. The patient asked if she could read to me even though I was very busy I still let her read to me til she got sleepy.</p> <p>2. A patient who I had was suffering bad from severe anxiety. I had to use patient care by doing interventions that did not require medical treatment because he had already taken his scheduled Xanax. I told him to take some deep breaths and</p>

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			rubbed his back to me while he vented to me about his fears of not being able to breath when he is sent home to his nursing home. I tried to educate him on some things that would help when he was sent home.
<b>Management</b>	Recommend resources most relevant in the care of patients with health impairments.	<ul style="list-style-type: none"> <li>- Assess patient needs during acute care to promote positive outcomes.</li> <li>- Assimilate co-morbidities into plan of care</li> <li>- Identify appropriate resources</li> <li>- Initiate discharge plan</li> </ul>	<ol style="list-style-type: none"> <li>1. I was with a nurse who had 6 different patients. We had to see them in the order that that mattered most. So, we had to manage our patients who were in pain, which ones needed medication or had different complications going on with them. We were able to prioritize them.</li> <li>2. A time I had use management was when I had a patient who was in pain and her wound site was bleeding. Which she had just gotten out of surgery so that was not a good thing at all. We knew we had to assess the surgical site first before the pain medication could be administered because we didn't want to risk the patient bleeding out.</li> </ol>
<b>Leadership</b>	Participate in the development of interprofessional plans of care.	<ul style="list-style-type: none"> <li>- Identify/define interprofessional plan of care</li> <li>- Integrate contributions of health care team to achieve goals</li> <li>- Implement interprofessional plan of care</li> </ul>	<ol style="list-style-type: none"> <li>1. A time I felt like I showed leadership was when I took initiative to help a patient who almost fell. The nurse was not paying attention to her having the bed rails down because she was giving medication. I recognized the patient was falling and was able to help her before she was hurt. I felt like I was being observant and a leader.</li> <li>2. I was able to show leadership at sim one day when a classmate wasn't sure how to start a secondary IV medication. I was able to teach her the steps of starting the second IVPB. From showing her how to channel select going to the actual IVPB medication and setting the rate and volume. I also was able to remind her how we prime the tubing before we set up the IV so we don't have any air in it.</li> </ol>
<b>Teaching</b>	Evaluate the effectiveness of teaching plans implemented during patient care.	<ul style="list-style-type: none"> <li>- Identify/define teaching plan</li> <li>- Implement teaching plan</li> <li>- Identify appropriate evaluation tools</li> <li>- Appraise patient outcomes</li> </ul>	<ol style="list-style-type: none"> <li>1. A patient who had a stroke was on my floor. Him and his wife who were not very old had many questions. Since he was not very old he wanted to know all the why/how's of his stroke. I was able to educate the patient on things like his eating habits, stress, the dangers of smoking and controlling his hypertension.</li> <li>2. I had a patient who complained about difficulty breathing, and his O2 sat was at 87% with a nasal cannula. His wife told me that he was a smoker. So I had to educate the patient about the side effects of smoking and the more potential damage that it could do to his lungs. I was able to educate him on the risk that smoking puts him at for further diseases as well. I also taught him the benefits of quitting.</li> </ol>
<b>Knowledge Integration</b>	Deliver effective nursing care to patients with multiple healthcare deficits.	<ul style="list-style-type: none"> <li>- Identify patient health deficits</li> <li>- Prioritize care appropriately</li> <li>- Adjust plan of care based on patient need</li> <li>- Identify system barriers</li> <li>- Modify health care deficits identified</li> </ul>	<ol style="list-style-type: none"> <li>1. When I was with one of my nurses during clinicals he told us he wasn't going to answer questions for us. An example was that we were in a patient room who had just had a stroke and he had questions. His questions were like "When will I get better, how did this happen etc." I was able to use my previous knowledge from previous lectures to educate the patient on some risk factors.</li> <li>2. This time I had patient who was just out of surgery wanted to eat. I wasn't sure yet what her diet restrictions were, so I had to talk to her nurse to see how long or if she had to wait to eat. I soon found out that she could eat, but I wanted to be sure and make sure she was fully awake and able to swallow. I did not want her to choke because she had hip surgery which only allowed her to sit up so far. So I had to use knowledge integration with my other nurse to figure out a way to get her comfortable but also safe.</li> </ol>