

N431 Adult Health II
TEACHING PLAN INSTRUCTIONS AND EVALUATION

STUDENT NAME: _____ Date: _____

Use the format page included for preparing the written component of the teaching plan. Students will be evaluated on the written plan (15 points) and on the presentation of the teaching plan (10 points). Total Points possible = 25 points.

SCORE

I. Evaluation of the **written component**

Assessment of patient/client

(3 points)

- Prior knowledge of subject to be taught
- Determine patient's motivation to learn content
- Health beliefs/values
- Psychosocial adaptations/adjustment to illness
- Compliance with health care protocols
- Assess patient's ability to learn
- Developmental level
- Physical capabilities/health status
- Language skills/literacy
- Level of education

Nursing Diagnosis Identified

(1 point)

Planning

(3 points)

State objectives and outcomes: Include at least one from each learning domain:
 Cognitive, Affective & Psychomotor

Interventions

(2 points)

- List the content to be included in instruction. Be specific and accurate.
- Logical sequence.
 - Simple to complex.
 - Organized

Methods/Teaching Tools

(2 points)

- Instructional methods to be used:
 Examples are: Discussion
 Question & Answer
 Demonstration/Return Demonstration
 Strategies to keep patient's attention
 Methods to include patient in teaching/participation

Evaluation

(3 points)

Determine achievement of learning objectives based on expected outcomes. Identify strengths/weaknesses, Suggest modifications to plan; i.e. what would have made it better

References Listed in APA format.

(1 point)

TOTAL CONTENT

_____ /15

II. Evaluation of **teaching presentation**

(10 points)

_____ /10

- Introduction of content, Patient put at ease, Eye contact,
- Clear speech and organized presentation, Environment conducive to learning,
- Family included, Accuracy of info, Validation of learning status, Use of teaching aids,
- Appropriate non-verbal body language etc.

Date Submitted: _____

Total points

_____/25

**N431 Adult Health II
TEACHING PLAN**

Student Name: Marranda Steffen

Subject: Bronchitis

Nursing Diagnosis: Deficit knowledge related to new diagnosis as evidence by patient stating not knowing what she was diagnosed with.

Relevant Assessment Data (see instructions)	Patient Outcomes (see instructions re: 3 domains of learning)	Teaching Outline (be specific and use a logical sequence)	Teaching Tools (see instructions)	Evaluation (see instructions)
<p>Patient is lacking knowledge about her new diagnosis of bronchitis. Patient was very happy and eager to learn about it so she could learn new ways to help herself feel better. She had no specific beliefs that would affect the treatment process. She was in compliance with the plan of care that was laid out to her in the teaching process. The patient was made aware of what bronchitis is, treatment, risks, symptoms, and when to seek medical attention. The patient asked questions as she had them. She was compliant with all the information that was given to her and she agrees to follow the plan of care as best as she can. She was also given a handout on Bronchitis, that restate the information that was taught to her, as a reference guide for her when she goes home. The patient had an appropriate developmental level for the information to be taught to her and for her to understand it. She is physically capable to take care of herself and to follow the information that was taught. Her language and literacy skills are at an appropriate level that she does not need someone assisting her during the teaching and</p>	<p>Cognitive Objective: To understand and follow the information that was taught to her about Bronchitis. Also, to understand the importance of drinking plenty of water.</p> <p>Cognitive Outcome: The patient verbalized the understanding of the information that was taught to her. She also understood of the importance of drinking enough fluids to help thin the mucus secretions.</p> <p>Affective Objective: The patient will accept the condition that she was diagnosed with and take the learning seriously. The patient will value the handout that was given to her about bronchitis and be able to use it as a reference guide.</p> <p>Affective Outcome: The patient was accepting of the condition that she was diagnosed with and was eager to learn ways to help control the symptoms that she was experiencing. The patient asked some questions throughout the teaching which means that she was listening and comprehending the information that was being taught to her.</p> <p>Psychomotor Objective: Teach the patient how to do breathing exercise to help keep her lungs expanded.</p> <p>Psychomotor Outcome: The patient understood how to do</p>	<p>What is Bronchitis?</p> <ul style="list-style-type: none"> • Bronchitis is the swelling of the air tubes in the lungs. It causes these tubes to fill with mucus, which makes it harder to breathe and causes coughing and/or wheezing. • Usually goes away within 2 weeks, but the cough may last up to 3 weeks. <p>Treatment:</p> <ul style="list-style-type: none"> • Use an inhaler as directed. • Drink more fluids, because it makes mucus thinner, which makes it easier to clear from the airways. • Take antibiotics as prescribed. • Breathing exercises to open up the lungs. <p>Risks of bronchitis include:</p> <ul style="list-style-type: none"> • Having close contact with someone how has been diagnosed with acute bronchitis. • Exposer to lung irritants, such as tobacco, dust, fumes, and vapors. • Having a weakened immune system. <p>Symptoms include:</p> <ul style="list-style-type: none"> • Cough • Coughing up clear, yellow, or green mucus • Wheezing • Chest congestion • SOB • Fever • Body aches • Chills • Sore throat <p>Get help right away if you experience:</p> <ul style="list-style-type: none"> • Coughing up blood • Chest Pain • Severe SOB 	<p>Before beginning the teaching, the patient's readiness and willingness to learn was evaluated. The patient was given a handout on bronchitis. She asked questions throughout the teaching. When teaching her deep breathing exercises, she returns the demonstration back. The teaching was paced and given at an educational level that the patient would understand.</p>	<p>I feel that the teaching was affective. The patient stated that she understood the all the information about bronchitis that was given. When she didn't understand something, she would ask questions about it. She learned how to do deep breathing exercises and the importance of drinking plenty of water. I felt as if the approach that I chose to go with was very strong and appropriate for this patient. It was an open conversation that allowed my patient to as questions as she felt the need to. A weakness with this teaching plan was that when she asked what the difference between bronchitis and pneumonia was, I didn't have a good response and I looked at the teacher to help me for a response to her. I should have looked up the difference between the two before doing the teaching because it was a question that was going to be expected for her to ask. Before my next teaching plan, I will look through the chart and gather as much information that I can in order to provide the best responses to my patients. I feel like another weakness was that I didn't talk very loud which may have made it harder to understand what was being taught since she asked many questions about the information provided.</p>

<p>treatment process. Her level of education was appropriate for her to be able to learn.</p>	<p>the breathing exercises by return demonstration after teaching them to her.</p>			
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Reference(s): Sarah Bush Lincoln (2020). Bronchitis. Retrieved from sarahbush.org