

N431 Adult Health II
TEACHING PLAN INSTRUCTIONS AND EVALUATION

STUDENT NAME: Zachariah Bovard Date: 11/2/20

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: Zachariah Bovard

Subject: Pneumothorax, Chest Tube, and Smoking Cessation

Nursing Diagnosis: Deficient knowledge related to pathophysiology and risk factors of pneumothorax as evidenced by patient request for teaching; Readiness for enhanced health management related to smoking cessation as evidenced by patient request for information about strategies to quit smoking.

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>The patient is a 33-year-old male with a 16 pack-year smoking history. C.M. additionally reports regularly smoking marijuana. He was admitted to SBLHC on 11/2/20 with a diagnosis of pneumothorax to the left lung. He received a chest tube placement while in the emergency department. He was initially received O2 at 4L/NC but now maintains an O2 saturation of 98% on room air. He is yet to consult with the surgeon regarding how long he will require a chest tube and his aftercare regimen.</p> <p>The client states that he believes it is important to try and stay healthy. He works to get exercise and maintain a healthy weight. The client is compliant with care and displays appropriate strength and AROM in all extremities. He does have complaints of pain with movement but explains that it is at a tolerable level. The client has completed high school, seems to be at an appropriate developmental level for his age. He speaks and understands English.</p> <p>Interview with this client reveals that he understands his condition as a "collapsed lung." He is surprised that this has happened to him; states, "I thought this was something that only happened to people who were shot or stabbed."</p> <p>The patient has expressed eagerness to learn about why he might have developed a pneumothorax, what he can do to prevent a recurrence, how long he may need his chest tube, and to receive information about smoking cessation and related strategies.</p>	<p align="center">Cognitive</p> <p>Objective: This student's cognitive objective is to improve the client's knowledge of their condition and strategies to quit smoking.</p> <p>Outcome: The client will verbalize an understanding of pneumothorax, its risk factors, and smoking cessation methods by the end of the teaching session.</p> <p align="center">Affective</p> <p>Objective: The affective objective for this client is to evoke optimism about smoking cessation.</p> <p>Outcome: The client will express confidence in his ability to quit smoking by the end of the teaching session.</p> <p align="center">Psychomotor</p> <p>Objective: The psychomotor objective for this client is to help them achieve the ability to use deep breathing.</p> <p>Outcome: The client will demonstrate proper deep breathing by the end of the teaching session.</p>	<p><u>Subject I: Pneumothorax</u></p> <ol style="list-style-type: none"> Pneumothorax refers to the collapse of a lung due to a disruption in negative pressure in the pleural cavity by air leak (Sarah Bush Lincoln, 2020a; Hinkle & Cheever, 2018) Pneumothorax is often associated with trauma or underlying pathology, but in some cases, the cause is unknown (Sarah Bush Lincoln, 2020a) Smoking is a known risk factor for pneumothorax (Sarah Bush Lincoln, 2020a). Pneumothorax is also be associated with interstitial lung pathology and severe emphysema (Hinkle & Cheever, 2018). <p><u>Subject II: Chest Tubes</u></p> <ol style="list-style-type: none"> The purpose of the chest tube is to facilitate the expansion of the collapsed lung by restoring negative pressure (Sarah Bush Lincoln, 2020b; Hinkle & Cheever, 2018) While the chest tube is in place, patients must remain in the hospital (Sarah Bush Lincoln, 2020b) The chest tube is usually required for several days. Once confident that the patient can adequately expand their lung, the surgeon can remove the chest tube (Sarah Bush Lincoln, 2020b) The surgeon that removes the chest tube will determine appropriate aftercare instructions, including dressing changes (Sarah Bush Lincoln, 2020b). <p><u>Subject III: Smoking Cessation.</u></p> <ol style="list-style-type: none"> While quitting smoking is difficult and may require several attempts, there are resources available to assist patients with cessation (Sarah Bush Lincoln, 2020c) Studies suggest that smokers that attempt to quit "cold turkey" have the highest success rate (Sarah Bush Lincoln, 2020c). If unable to quit "cold turkey," medications and nicotine replacement therapy can help (Sarah Bush Lincoln, 2020c). Picking a quit date to stick to and discussing your desire to quit with friends and family may be useful (Sarah Bush Lincoln, 2020c) Techniques to manage stress, including meditation and biofeedback, can help smokers get through withdrawal (Sarah Bush Lincoln, 2020c). 	<p><u>Discussion</u></p> <p>During and after presenting information to the client, this student and the client participated in a free-flow discussion.</p> <p><u>Question and Answer</u></p> <p>After this student covered each subject, the client was encouraged to ask questions about the material.</p> <p><u>Demonstration and Return Demonstration</u></p> <p>This nurse narrated and demonstrated deep breathing for the client. In return, the client verbalizes understanding and demonstrates appropriate deep breathing.</p> <p><u>Materials</u></p> <p>Teaching materials included educational handouts on pneumothorax, chest tubes, and smoking cessation obtained from Sarah Bush Lincoln's Cerner database. The client was received copies of these handouts after the teaching session.</p>	<p><u>Evaluation of Cognitive Objective and Outcome</u></p> <p>The desired outcome is complete. The client explains that pneumothorax results from a disruption of the negative pressure in the pleural cavity. He identifies smoking as a risk factor for his condition and understands that more testing is needed to rule out underlying problems. This patient explains the principles of meditation and biofeedback techniques for stress management.</p> <p>This teaching area's strengths included a solid explanation of pneumothorax and highlighting smoking as a risk factor.</p> <p>This student nurse feels that he could have done a better job clarifying that while pneumothorax can happen in otherwise healthy people, it is unusual and merits further investigation.</p> <p>A modification this nurse would make to teaching in this domain is the inclusion of anatomical drawings or models so the client can visualize the relevant areas.</p> <p><u>Evaluation of Affective Objective and Outcome</u></p> <p>This desired outcome is partially complete. While the client is optimistic about using stress management techniques and desires to quit, he also believes it will be difficult and may require medication or nicotine replacement therapy.</p> <p>This student feels he did a good job helping the client understand that quitting smoking helps decrease his recurrence risk.</p> <p>One identified weakness is that this nurse used anecdotal experience while discussing methods of quitting.</p> <p>The student could improve this teaching by going into greater depth regarding nicotine</p>

				<p>replacement therapy, which the client believes he may need to quit smoking.</p> <p><u>Evaluation of Psychomotor Objective and Outcome</u></p> <p>The desired outcome is complete. The client explained to this student the steps of deep breathing and demonstrated by taking several breaths.</p> <p>This student felt he did a good job framing discussion about meditation as a legitimate tool for stress management by connecting it to the client's previous experience with controlled breathing.</p> <p>One weakness was that this student failed to stress that deep breathing has the additional benefit of preventing pneumonia secondary to his condition.</p> <p>A modification this student would make to the teaching plan would be including instruction on incentive spirometry if ordered for the client.</p>
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Reference(s):

Hinkle, J. L., & Cheever, K. H. (2018). *Brunner & Suddarth's textbook of medical-surgical nursing* (14th ed.). Wolters Kluwer.

Sarah Bush Lincoln (2020a). Pneumothorax patient education handout. *Cerner PowerChart*. Cerner.

Sarah Bush Lincoln (2020b). Chest Tube patient education handout. *Cerner PowerChart*. Cerner.

Sarah Bush Lincoln (2020c). Smoking cessation patient education handout. *Cerner PowerChart*. Cerner.