

**N321 Medical/Surgical
TEACHING PLAN INSTRUCTIONS AND EVALUATION
Spring 2021**

STUDENT NAME: Janet Song Date: April 16, 2021

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/class	(3 points)	_____
<ul style="list-style-type: none"> Prior knowledge of subject to be taught Determine patient's motivation to learn content Health beliefs/values (Taylor pgs 70 & 513) 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)	_____
<ul style="list-style-type: none"> State objectives and outcomes: Include at least one from each learning domain: Cognitive, Affective & Psychomotor 		
Interventions	(2 points)	_____
<ul style="list-style-type: none"> List the content to be included in instruction. Be specific and accurate. Logical sequence. Simple to complex. Organized 		
Methods/Teaching Tools	(2 points)	_____
<ul style="list-style-type: none"> Instructional methods to be used: Examples are: Discussion <li style="padding-left: 20px;">Question & Answer <li style="padding-left: 20px;">Demonstration/Return Demonstration <li style="padding-left: 20px;">Strategies to keep patient's attention <li style="padding-left: 20px;">Methods to include patient in teaching/participation 		
Evaluation	(3 points)	_____
<ul style="list-style-type: none"> 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
<ul style="list-style-type: none"> 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: April 16, 2021

Total points _____/25

**N 321Nursing the Adult Client
TEACHING PLAN**

Student Name: _____Janet Song_____

Subject: _____Wound Care_____

Nursing Diagnosis:

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>WR is an 86-year-old male patient admitted for a small bowel obstruction. He has not had the same pain and symptoms before. He is married and has three children, and family members support him well during the hospital stay. He is not a drug, alcohol, and tobacco user. He seems a little confused, but he is accommodating and willing to talk with the student nurse and listen carefully. He does not have any learning disability. WR's speech was clear, eye contact well, and he has a cooperative attitude. He knows post-operated rules such as NPO and follows the NPO restriction well right now. He has a master's degree and used to teach English and math to 6,7-grade students. The patient had surgery and remembered when he got his surgery and when the gauze has been changed. The wound was covered with gauze, but according to the chart, it has staples. The patient does not have pain, and he said he feels refresh after taking a bath and a short nap. A nursing student decides it is an excellent time to educate the patient about wound care. Also, WR willing to learn wound care.</p>	<p>Cognitive objective: To remember, understand, and apply the information taught to the patient about wound care of worsening symptoms related to infection and when to seek providers. Cognitive outcome: The patient verbalized understanding all the information presented to him.</p> <p>Affective objective: The patient will respect the information taught to him, and he will be willing to receive the information. He will be motivated to learn. Affective outcome: The patient understands the importance of wound care. When I teach the material, he engaged in our conversation. He also knows and explains what he knows about his wound.</p> <p>Psychomotor objective: The patient will be able to keep the wound clean and dry. Also, the patient should not take off the gauze by himself to prevent infection. Psychomotor outcome: The patient believes the doctor's treatment and trying to keep it clean and dry. Also, to have a regular bowel movement, he takes a positive attitude for walking.</p>	<p>After you leave the hospital, you should follow up with your health care provider as directed.</p> <p>If you have questions or concerns, write down those and ask the question during the visits.</p> <p>It is important to keep the wound, medical tape, and bandage clean and dry.</p> <p>Even if the tapes and bandage are falling, do not try to pull them off.</p> <p>Do not remove the bandage unless your healthcare provides says it is okay.</p> <p>To prevent infection, you should keep your hands clean when you touch the wound.</p> <p>Discuss the signs and symptoms of infection such as swelling, redness, bleeding, swollen, rash, sweating, and fever (Wound care, n.d.).</p> <p>Visit the healthcare professionals as soon as possible when you have a foul odor, blood coming out from the wound. If you have chest pain or hard to breathe.</p>	<p>The patient was given a handout about wound care. He said that he would show the handout to their family for additional information. The patient likes to verbalize what he has understood, so we discussed his wound related to the materials.</p>	<p>I believe the patient achieved the goals of my teaching objectives. He seemed to understand the material and wound care. He made good eye contact, and when he did not understand, he asks the materials again. When I talked about keeping the wound clean, he repeated what I said and added his opinion. He was very open-minded, and our discussion went through very well. After I talked about the signs and symptoms of infections and when the patient has to contact the healthcare provider, he states his clean wound status that he saw in the morning. Also, he promises to contact the provider when he has questions. He responses clearly and states that "I will ask for help when I have those symptoms". The weakness of my teaching plan is I did not have lots of resources to explain inadequate wound care. The patients were old and using glasses, so it takes time to read the materials. If I prepared the visual materials for the patient, it would be easier for the patient to understand bad signs and symptoms of wound care.</p>

Reference(s):

Wound Care (n.d.). *Acute Wound Care (Discharge Care) - What You Need to Know*. Drugs.com <https://www.drugs.com/cg/acute-wound-care-discharge-care.html>.