

- **Assignment, Delegation and Supervision -**

- o Assignment

- the routine care, activities and procedures that are within the authorized scope of practice of the RN or LPN/VN or part of the routine functions of the AP

- o Delegation

- The process of transferring performance of a task to another member of the healthcare teams while retaining accountability for the outcome.
 - RN's can delegate to other RN's, PN's, and AP.
 - Nurses can only delegate tasks appropriate for the skill and education level of the individual who is receiving the assignment.

- o Supervision

- The process of directing, monitoring, and evaluating the performance of tasks by another team member
 - Nurses are responsible for supervising the performance of the tasks that are delegated to others.

- **Client Rights -**

- o Recognize that the client has the right to refuse procedures or care

- o Ethical Responsibilities: The ethical principles that nurses must adhere to are the principles of **justice, beneficence, nonmaleficence, accountability, fidelity, autonomy, and veracity**. Justice is fairness. Nurses must be fair when they distribute care, for example, among the patients in the group of patients that they are taking care of

- o Responding to a Client's Need for Information About Treatment
 - Clients have the right to be fully informed about the risks and outcomes of any and all procedures

- **Continuity of Care -**
 - o Patients who receive continuity of care have better outcomes, higher satisfaction rates, and the healthcare they receive is more effective
 - o Continuity of care refers to health care professionals and patients cooperating in care management to achieve the goal of consistent, high-quality care
 - o Continuity is a benefit in healthcare and is an important part of patient-centric care, the goal of which is to provide healthcare that is responsive to a patient's needs and respectful of his or her preferences and values.

- **Establishing Priorities -**
 - o Critical Thinking- the nursing process helps nurses integrate critical thinking creatively to base nursing judgement on reason
 - o Clinical Judgment: the nurse must employ clinical judgement to accurately recognize when to collect assessment data
 - o Caring for a Client Who Has Nausea- when caring for a client who is post operative with nausea
 - - Orthostatic hypotension indicates fluid volume deficit.
 - Flat neck vein indicates fluid volume deficit.
 - Cool extremities can indicate fluid volume deficit.

- **Standard Precautions/Transmission-Based Precautions/Surgical Asepsis -**

- o Use appropriate technique to set up sterile field/ maintains asepsis
 - The outer wrapping and 1 inch edges of packaging are not sterile. Inner surfaces are sterile.
 - Touch sterile items with other sterile items
 - Do not reach across or above sterile field
 - Hold items to add to a sterile field at a minimum of 6 inches above the field.
- o 3 essential components to hand hygiene
 - Soap
 - Water
 - Friction
- o Modes of transmission
 - Contact: direct physical contact, person to person
 - Droplet: sneezing, coughing, and talking
 - Airborne: sneezing and coughing
 - Vector borne: animals or insects as intermediaries

- **Use of Restraints/Safety Devices**

- o Some clients require seclusion rooms and or restraints
- o Use restraints only when necessary, and for the shortest duration necessary to, and only if less restrictive measures are not sufficient
- o Restraints can be either physical devices such as belts, vests, mitts, or limb as well as chemical such as sedatives, neuroleptic or psychotropic medications

- o It is inappropriate for restraints to be used for convenience of staff, punishment of the client, used on clients who are extremely physically or mentally unstable, or clients who cannot tolerate the decreased stimulation of a seclusion room

- **Developmental Stages and Transitions -**

- o Stage 1: Trust vs. Mistrust: (0-1 years) Children develop a sense of trust when caregivers provide reliability, care, and affection. A lack of this will lead to mistrust.
- o Stage 2: Autonomy vs. Shame and Doubt: (1-3 years) Children need to develop a sense of personal control over physical skills and a sense of independence. Success leads to feelings of autonomy, failure results in feelings of shame and doubt.
- o Stage 3: Initiative vs. Guilt: (3-5 years) Children need to begin asserting control and power over the environment. Success in this stage leads to a sense of purpose. Children who try to exert too much power experience disapproval, resulting in a sense of guilt
- o Stage 4: Industry vs. Inferiority: (6 to 11 years) Children need to cope with new social and academic demands. Success leads to a sense of competence, while failure results in feelings of inferiority.
- o Stage 5: Identity vs. Confusion: (12-18 years) Teens need to develop a sense of self and personal identity. Success leads to an ability to stay true to yourself, while failure leads to role confusion and a weak sense of self.
- o Stage 6: Intimacy vs. Isolation: (19-40 years) Young adults need to form intimate, loving relationships with other people. Success leads to strong relationships, while failure results in loneliness and isolation.
- o Stage 7: Generativity vs. Stagnation: (40 – 65 years) Adults need to create or nurture things that will outlast them, often by having children or creating a positive change that

benefits other people. Success leads to feelings of usefulness and accomplishment, while failure results in shallow involvement in the world.

- o Stage 8: Integrity vs. Despair: (65 and older) Older adults need to look back on life and feel a sense of fulfillment. Success at this
- o stage leads to feelings of wisdom, while failure results in regret, bitterness, and despair.

- **Health Promotion/Disease Prevention -**

- o Health promotion: includes activities to improve general health (exercise and good nutrition)
- o Disease prevention: activities aimed at preventing specific disorders (ex: flu vaccines)
- o Nurses may also use complementary therapies (ex: guided imagery, massage, and music) to help promote health and prevent disease

- **Health Screening -**

- o Testing visual acuity: Age 40 and under should be tested every 3-5 years. Ages 40 to 64 should be tested every 2 years. Those 65 and older, every year.
- o Routine physical exams: Generally, every 1 to 3 years for females and every 5 years for males from age 20 to 40, then more often over 40.
- o Colorectal screening: Every year between the age of 50 and 75 for high sensitivity fecal occult blood testing, or flexible sigmoidoscopy every 5 years, or a colonoscopy every 10 years. Consult with the provider if a screen should continue after age 76.

- **Techniques of Physical Assessment -**

- o Therapeutic communication:

- Introduce yourself and all the various parts of the assessment
 - Determine what the client wants you to call them
 - Make sure client is comfortable
 - Reduce environmental noises
 - Ensure understanding by providing interpreters when necessary
 - Avoid medical jargon, giving advice, or ignoring feelings
- o Active listening: show clients they have your undivided attention
 - o Open ended questions: use to encourage clients to give more information

- **Coping Mechanisms -**

- o Negative coping: denial, can cause nonadherence
- o Positive coping: can increase adherence
- o Stress can contribute to how a client copes with illness or information

- **End-of-Life Care -**

- o Palliative care: specialized medical care for people living with a serious illness, such as cancer or heart failure. Patients in palliative care may receive medical care for their symptoms, or palliative care, along with treatment intended to cure their serious illness
- o Hospice care: care for clients who are nearing the end of life (6 months or less until death)
- o Long term care: involves a variety of services designed to meet a person's health or personal care needs during a short or long period of time. These services help people live as independently and safely as possible when they can no longer perform everyday activities on their own.

- **Grief and Loss -**

- o Necessary loss: This is a loss related to a change that is part of the cycle of life that is anticipated but still may be intensely felt. This type of loss can be replaced by something different or better
- o Actual loss: This is any loss of a valued person, item, or status, such as loss of a job
- o Perceived loss: This is any loss defined by the client that is not obvious or verifiable to others
- o Maturation or developmental loss: This is any loss normally expected due to the developmental processing of life. These losses are associated with normal life transitions and help to develop coping skills

- **Assistive Devices -**

- o Eyeglasses or contacts: visual acuity
- o Hearing aids: hearing acuity
- o Dentures: assist in chewing when dentition was compromised
- o Walkers/canes/ wheelchairs: used to assist gait or immobility

- **Mobility/Immobility -**

- o Immobility:
 - Temporary: following a knee surgery
 - Permanent: paraplegia
 - Sudden onset: fractures arm or leg following a motor vehicle crash
 - Slow onset: Multiple Sclerosis
- o Factors that affect mobility:
 - Alterations in muscles

- Injury to the musculoskeletal system
- Impaired CNS
- Poor posture
- Health status and age

o Every body system can be affected by immobility

- **Rest and Sleep -**

o Stage 1: very light sleep, only a few minutes long, muscle relaxation

o Stage 2: deeper sleep, 10- 20 minutes long, vitals and metabolism slow

o Stage 3: slow wave sleep or delta sleep, more difficult to awaken, reduced sympathetic activity

o REM: vivid dreaming, about 90 minutes after falling asleep, average length 20 minutes, cognitive restoration

- **Medication Administration -**

o Components of a prescription

- Client's full name
- The date and time of prescription
- The name of medication
- The strength and dosage
- The route of transmission
- The quantity to dispense
- Signature of the provider

o Common medication errors

- Wrong medication or IV fluid
- Incorrect dose

- Wrong client, wrong route
- Omission of a dose or extra doses

o If a medication mistake is made, assess the client first!

- **Parenteral/Intravenous Therapies -**

o Half life: the time it takes the medication in the body to drop by 50%. Liver and kidney function can affect half life.

o Complications include:

- infection.
- Infiltration.
- Extravasation with vesicant medications.
- Hematoma.
- Phlebitis.
- Embolus formation.
- Fluid overload

o Routes of transmission

- Intramuscular at 90 degrees (left), subcutaneous at 45 degrees (center), and intradermal at 15 degrees (right).

- **Changes/Abnormalities in Vital Signs -**

o Tachycardia: heart rate greater than 100/min

o Bradycardia: heart rate less than 60/min

o Pyrexia: fever

o Temperature can be measured: rectal, oral, temporal, and tympanic

- **Potential for Complications of Diagnostic Tests/Treatments/Procedures -**

o Cardiovascular complications can include

- Thrombosis
- Hemorrhage
- Hypovolemic shock
- Cardiogenic shock
- Anaphylactic shock

- o Pharmacokinetics: refers to how the medication travel through the body. Medications undergo a variety of biochemical processes that result in absorption, distribution, metabolism, and excretion.
- o Therapeutic index: medications with a high TI have a wide safety margin; therefore, there is no need for routine blood medication level monitoring. Medications with a low TI require close monitoring of levels. Nurses should consider the route of transmission when monitoring peak levels.

- **Alterations in Body Systems -**

- o Primary intention
 - Little or no tissue loss
 - Edges approximated
 - Heals rapidly
 - Low risk of infection
- o Secondary intentions
 - Loss of tissue
 - Wound edges widely separated
 - Longer healing time
 - Increased risk of infection
 - Scarring

- Heals by granulation

o Tertiary intentions

- Widely separated
- Deep
- Spontaneous opening of a previously closed wound
- Closure of wounds occurs when they are free from infection and edema
- Risk of infection
- Extensive drainage and tissue debris
- Closed later
- Longest healing time