

- **Client Rights - (1)**
 - Legal Responsibilities: Nursing Role While Observing Client Care (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 4 Legal Responsibilities)
 - Notify the provider if the client has more questions or appears not to understand any of the information.
 - Document questions the client has, notification of the provider, reinforcement of teaching, and use of an interpreter.
 - Understand the aspects of care to be active in the decision-making process
- **Concepts of Management - (1)**
 - The Interprofessional Team: Coordinating Client Care Among the Health Care Team (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 2 The Interprofessional Team)
 - Assessed personnel work under the direct supervision of an RN or PN.
 - Position description in the employment facility outlines specific tasks.
 - Tasks can include feeding clients, preparing nutritional supplements, lifting, basic care (grooming, bathing, transferring, toileting, positioning), measuring and recording vital signs, and ambulating clients.
- **Continuity of Care - (1)**
 - Information Technology: Commonly Used Abbreviations (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 5 Information Technology)
 - Do not use U,u as units, this is mistaken for 0 and the number 4.
 - Do not use QD. It is a mistake for each other.
 - Do not use the QOD mistake for “I” or “O”, write every day.
- **Ethical Practice - (1)**
 - Ethical Responsibilities: Recognizing an Ethical Dilemma (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 3 Ethical Responsibilities)
 - Discussing options with a parent who has to decide whether to consent to a blood transfusion for a child when his religion prohibits such treatment.
 - State the ethical dilemma, including all surrounding issues and the individuals it involves.
 - Select the option that is in concert with the ethical principle that applies to this situation, the decision makers values and beliefs, and the professions values for client care.
- **Legal Rights and Responsibilities - (2)**
 - Admissions, Transfers, and Discharge: Dispossession of Valuables (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 9 Admissions, Transfers, and Discharge)
 - Discourage keeping valuable at the bedside
 - Document communication with clients related to items left within the room, valuables locked in the facilities safe.
 - Examples of valuables include clothing, jewelry, money, credit cards, assistive devices (eyeglasses, contacts, hearing aids, cane, dentures),

medications, cell phones and other technology devices, and religious articles.

- Legal Responsibilities: Identifying Negligence (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 4 Legal Responsibilities)
 - Professional negligence is the failure of a person who has personal training to act in a reasonable and prudent manner.
 - If a student harms a client, then the student, instructor, educational institution, and facility share liability for the wrong action or inaction.
 - Nurses can avoid liability for negligence by being familiar with and following a facility's policies and procedures.
- **Accident/Error/Injury Prevention - (3)**
 - Head and Neck: Performing the Weber's Test (Active Learning Template - Diagnostic Procedure, RM Fund 10.0 Chp 28 Head and Neck)
 - Place a vibrating tuning fork on top of the client's head
 - The client hears sounds equally in both ears.
 - Ask whether the client can hear the sound best in the right ear, the left ear, or both ears equally.
 - Medical and Surgical Asepsis: Planning Care for a Client Who Has a Latex Allergy (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 10 Medical and Surgical Asepsis)
 - If the client or any member of the team has a latex allergy, the team must use latex-free gloves, equipment, and supplies.
 - Most facilities use non-latex (nitrile) gloves.
 - However, it is the health care team's responsibility to identify latex allergies and use items that are latex-free.
 - Nursing Process: Priority Action Following a Missed Provider Prescription (Active Learning Template - Nursing Skill, RM Fund 10.0 Chp 7 Nursing Process)
 - Documentation of the assessment data must be thorough, concise, and accurate.
 - Nurses use critical thinking skills to identify clients' health statuses or problems, interpret or monitor the collected database, reach an appropriate nursing judgment about health status and coping mechanisms, and provide direction for nursing care.
 - As with the assessment/data collection step, complete and accurate documentation is essential.
- **Standard Precautions/Transmission-Based Precautions/Surgical Asepsis - (1)**
 - Infection Control: Caring for a Client Who Is Immunocompromised (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 11 Infection Control)
 - Educate the client and ask for a return demonstration of good hand hygiene.
 - Encourage the client to consume an adequate amount of fluids.

- Turning the head when coughing and staying a minimum of 3 feet away from others, especially in common waiting areas.
- **Mobility/Immobility - (2)**
 - Ergonomic Principles: Safely Transferring a Client From the Bed to a Chair (Active Learning Template - Nursing Skill, RM Fund 10.0 Chp 14 Ergonomic Principles and Client Positioning)
 - Determine the client's ability to help with transfers.
 - Evaluate the need for additional staff or assistive devices (transfer belt, hydraulic lift, sliding board).
 - Include assistance for mobility aids in the plan of care for safe transfers and ambulation.
 - Mobility and Immobility: Teaching About Reducing the Adverse Effects of Immobility (Active Learning Template - Basic Concept, RM Fund 10.0 Chp 40 Mobility and Immobility)
 - Limit sitting in a chair to 1 hour. Instruct clients to shift their weight every 15 minutes.
 - Consume at least 2,000 milliliters of fluid per day, unless intake is restricted.
 - Make sure clients change position in bed at least every 2 hours and perform weight shifts in the wheelchair every 15 minutes.
- **Nutrition and Oral Hydration - (2)**
 - Fluid Imbalances: Assessment Findings of Extracellular Fluid Volume Deficit (Active Learning Template - System Disorder, RM Fund 10.0 Chp 57 Fluid Imbalances)
 - Hypovolemia, or isotonic dehydration, is a lack of both water and electrolytes, causing a decrease in circulating blood volume.
 - Older adults have an increased risk for dehydration due to multiple physiological factors including a decrease in total body mass, which includes total body water content and a decrease in the ability to detect thirst.
 - Rapid or severe dehydration can induce seizures.
 - Fluid Imbalances: Calculating a Client's Net Fluid Intake (Active Learning Template - Nursing Skill, RM Fund 10.0 Chp 57 Fluid Imbalances)
 - Set 1 to 2 hours short term goals for the fluid restriction to promote client control and understanding.
 - Causes of hypervolemia can include chronic stimulus to the kidney to conserve sodium and water (heart failure, cirrhosis, increased glucocorticosteroids).
 - Severe fluid volume excess can lead to pulmonary edema and heart failure.
- **Medication Administration - (1)**
 - Intravenous Therapy: Medication Administration (Active Learning Template - Nursing Skill, RM Fund 10.0 Chp 49 Intravenous Therapy)

- Never administer IV medication through tubing that is infusing blood, blood products, or parenteral nutrition solutions.
- Verify the compatibility of medications with IV solutions before infusing a medication through tubing that is infusing another medication or IV fluid.
- Use an infusion pump to administer medications that can cause serious adverse reactions (potassium chloride).
- **Parenteral/Intravenous Therapies - (1)**
 - Intravenous Therapy: Selection of an Intravenous Site (Active Learning Template - Nursing Skill, RM Fund 10.0 Chp 49 Intravenous Therapy)
 - Distal veins first on the nondominant hand.
 - Veins in the inner wrist with bifurcations, in flexion areas, near valves (appearing as bumps), in lower extremities, and in the antecubital fossa.
 - Veins in an extremity with impaired sensitivity (scar tissue, paralysis), lymph nodes removed, recent infiltration, a PICC line, or an arteriovenous fistula or graft.
- **Therapeutic Procedures - (1)**
 - Bowel Elimination: Discharge Teaching About Ostomy Care (Active Learning Template - Nursing Skill, RM Fund 10.0 Chp 43 Bowel Elimination)
 - Use mild soap and water to cleanse the skin, then dry it gently and completely. Moisturizing soaps can interfere with adherence of the pouch.
 - Cut the opening $\frac{1}{8}$ larger allowing only the stoma to appear through the opening.
 - The stoma should appear moist, shiny, and pink.
- **Alterations in Body Systems - (1)**
 - Airway Management: Performing Chest Physiotherapy (Active Learning Template - Therapeutic Procedure, RM Fund 10.0 Chp 53 Airway Management)
 - The use of a set techniques that loosen respiratory secretions and move them into the central airways where coughing or suctioning can remove them.
 - Schedule treatments 1 hour before or 2 hours after meals, and at bedtime to decrease the likelihood of vomiting or aspirating.
 - Administer bronchodilator medication or nebulizer treatment 30 minutes to 1 hour prior to postural drainage.