

N431 Adult Health II
TEACHING PLAN INSTRUCTIONS AND EVALUATION

STUDENT NAME: Kaytlynn Roberts
04/03/20

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: Kaytlynn Roberts

Subject: Turning, Coughing,

and Deep Breathing to client with colon resection

Nursing Diagnosis: Risk for ineffective breathing pattern related to preoperative status as evidence by colon resection.

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>Prior knowledge of subject to be taught?</p> <ul style="list-style-type: none"> - Patient had no prior knowledge of the turning, coughing, and deep breathing regimen. <p>Determine patient's motivation to learn content?</p> <ul style="list-style-type: none"> - Patient is eager to learn if it will help to prevent possible complications R/T surgery. <p>Health beliefs/values</p> <ul style="list-style-type: none"> - Patient has no conflicting health beliefs or values. 	<p>Cognitive:</p> <ul style="list-style-type: none"> - By the end of teaching, the patient will be able to verbalize how to complete the turning, coughing, and deep breathing regimen. <p>Psychomotor:</p> <ul style="list-style-type: none"> - By the end of the teaching the patient will be able to demonstrate how to complete the turning, coughing, and deep breathing regimen. <p>Active:</p> <ul style="list-style-type: none"> - Patient was eager to learn and will express any questions or concerns he has at the end of my teaching. 	<p>In hospital and at home regimen:</p> <ul style="list-style-type: none"> - Patient should move and change positions often. Nurses recommend hourly position changes. - The regimen should be done while the patient head of the bed is elevated to Fowlers position and left lateral Sim's position. - Coughing exercise: Support incision firmly with a splint, breath in deeply, and cough firmly. Repeat coughing if sputum and mucous continue to come out into the tissue. Do not over exhaust yourself, patient should take breaks if necessary. - Deep breathing exercise: Breath in deeply and slowly through your nose, expanding the lower rib cage, and pushing your abdomen forward. Hold this breath for 3 to 5 seconds and then breath out slowly and completely using pursed lips. Do not force the breath out. This exercise should be repeated ten times every hour. If every hour is too exhausting you can rest longer and complete the exercise every two hours. 	<p>-My patient is AOx4 therefore during the teaching I used discussion, question and answer, and methods to include patient in teaching.</p> <p>-Patient was presented the opportunity to ask any questions during the teaching.</p> <p>-Patient was involved in the teaching by demonstrating the regimen back to me and asking questions.</p> <p>-Patient was provided a handout about how to complete</p>	<p>Three general learning objectives:</p> <p>Cognitive:</p> <ul style="list-style-type: none"> - The patient was able to verbalize how to complete the turning, coughing, and deep breathing regimen. This goal was completed. <p>Psychosocial:</p> <ul style="list-style-type: none"> - The patient was able to demonstrate the turning, coughing, and deep breathing regimen. This goal was completed. <p>Affective</p> <ul style="list-style-type: none"> - The patient had complete understanding of the teaching. Patient asked how to preform pursed lipped breathing. This goal was completed.

<p><i>Psychosocial adaptations/adjustment to illness?</i></p> <ul style="list-style-type: none"> - Patient has accepted the psychosocial adaptations/adjustments that are necessary. Patient understands that he will have to allow his body to recover before returning to normal activity. <p><i>Compliance with health care protocols?</i></p> <ul style="list-style-type: none"> - Patient was compliant with health care protocols. Patient presented no issues throughout my shift. <p><i>Assess patient's ability to learn</i></p> <ul style="list-style-type: none"> - Patient is well educated and capable of understanding the information being presented to him. 		<ul style="list-style-type: none"> - Cough and deep breath every hour for the first 2 to 3 days after surgery, and until the pain in your incision has subsided. 	<p>the turning, coughing, and breathing regimen.</p>	
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<p>Developmental level</p> <ul style="list-style-type: none"> - Patient is AO x4 and has no developmental delays. <p>Physical capabilities/health status</p> <ul style="list-style-type: none"> - Patient is a healthy 25-year-old male with no past medical or surgical history. This is the patient's first surgery. <p>Language skills/literacy</p> <ul style="list-style-type: none"> - Patient speaks English as his first language. Patient did not need a translator. <p>Level of education</p> <ul style="list-style-type: none"> - Patient has two associate's degrees and one bachelor's degree. 				
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Reference(s):

Doenges, M. E., Geissler-Murr, A., Moorhouse, M. F. (2010). *Nursing care plans: guidelines for individualizing client care across the life span* (Eight). F.A. Davis Co.

