

**N431 Adult Health II
TEACHING PLAN INSTRUCTIONS AND EVALUATION**

STUDENT NAME: _____ 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: _____ Molly Streff _____
Storms _____

Subject: _____ Brain

Nursing Diagnosis: Deficient knowledge related to new diagnosis as evidenced by no previous brain injuries.

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>Patient is a 19-year-old female presenting following a motor vehicle accident (MVA) with loss of consciousness and damage to the brain stem. This patient spent five days in the critical care unit (CCU) and has transitioned to a lower level of care. Client currently remains in an altered state of consciousness with a Glasgow Coma Scale (GCS) score of 7. The patient currently suffers from intermittent brainstorms. The family currently has no knowledge of brainstorms. These parents appear very motivated to learn about this condition to better understand what their daughter is experiencing. The family does not have any specific beliefs about healthcare. The family's main concern is for their daughter to heal and be comfortable. The</p>	<p>Cognitive Objective: Family will understand the cause of the brainstorms their daughter is experiencing. Cognitive Outcome: The family expresses understanding that the cause of her brainstorms is rooted in a traumatic brain injury to her brainstem.</p> <p>Affective Objective: Family will be capable of accepting the current state of their daughter's health. Affective Outcome: The family continues to struggle with accepting their daughter may never be herself again. However, the family is grateful for every milestone met during her current condition.</p> <p>Psychomotor Objective: Family will be capable of identifying and notifying nursing staff of signs and symptoms of a</p>	<p>The causes of brainstorms include:</p> <ul style="list-style-type: none"> -Traumatic brain injury -Damage to the thalamus, hypothalamus, cerebellum, and brain stem <p>The signs and symptoms of an impending or occurring brainstorm include:</p> <ul style="list-style-type: none"> -Altered level of consciousness (Glasgow Coma Scale 3-8) -Posturing (decerebrate, decorticate) -Dystonia -Hypertension, Hyperthermia -Tachycardia, Tachypnea -Diaphoresis -Agitation <p>The treatment options for brainstorms include:</p> <ul style="list-style-type: none"> -Beta blockers to lower heart rate and blood pressure -Tylenol to reduce fever -Opioids to relax smooth muscles 	<p>Family has received education verbally multiple times throughout their daughter's time in the hospital. This nursing student also provided detailed handouts for the family to reference when nursing staff is not available and when answering questions from friends and other family members. Family is also consistently encouraged to ask questions if they do not understand a procedure, reasoning, or symptom.</p>	<p>This nursing student believes this family has been competent in trying to learn the cause, signs and symptoms, and treatment of their daughter's current condition. They are not afraid to ask questions if they do not understand what the nursing staff is doing or saying while they are in the room. They are also very consistent with writing down questions they think of while nursing staff is not available. The family has shown they are willing to learn certain parts of care procedures that they can perform to assist their daughter in hope's she can go home with home care instead of to a facility. The family expresses appreciation for the written information and says they refer to the handouts often. This nursing student believes the family has been successful in learning more about the condition of their daughter. This nursing student believes the strengths of this teaching plan include the</p>

<p>patient is in a comatose state and is cognitively unaware of her current state. The family currently takes shifts rotating visitors due to COVID-19. The family is adjusting to her current condition and is thankful to see each improvement. The family is very compliant with protocols and is not hesitant to ask for help for their daughter. The patient is currently unable to communicate or show understanding of any teaching. The client's family consists of middle-age adults with minimal college educations. They are fluent in English and have proficient literacy capabilities. The family is able to learn the signs, symptoms, cause, and treatments of brainstorms properly.</p>	<p>brainstorm. Psychomotor Outcome: The family members have learned the signs of a brainstorm and have demonstrated the ability to notify nursing staff of the symptoms if they are not already present.</p>	<p>-Anticonvulsants for brain irritability</p>		<p>encouragement of questions and the written handouts for recurrent use by the family. This nursing student believes the weaknesses of this teaching plan include her own lack of proficient knowledge on this topic. A way to improve this would be to gain education prior to entering this patient's room to provide answers more quickly to questions from the family.</p>
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Reference(s):

Hinkle, J. L., & Cheever, K. H. (2014). *Brunner & Suddarth's Textbook of Medical-Surgical Nursing* (13th ed.). Philadelphia, PA: Lippincott Williams & Wilkins.

Meyfroidt, G., Baguley, I., & Menon, D. (2017). Paroxysmal sympathetic hyperactivity: the storm after acute brain injury. *Traumatic Brain Injury*, 3.