## Course Description

This course is a health-related, work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Clinical education is an unpaid learning experience.

- **Prerequisite:** Approval of the Program Director.
- **Corequisite:** RNSG 2341, RNSG 2207, RNSG 2130, RNSG 1110

## Text, References, and Supplies

### Textbooks:
- All previously required text books and supplies.
- Drug guide for nurses; diagnostic and laboratory text reference; intravenous medications reference; medical-surgical text; obstetrical nursing text, pharmacological text, nutrition text, and pediatric text.

- **Basic Arrhythmias, 6th Ed** by Gail Walraven

- RNSG 2560 Student Learning Packet is on Blackboard

- Additional handouts will be provided

### Supplies
- E.C.G. Calipers (to be used the first day of class)
- Stethoscope (Student's Own)
- Sphygmomanometer with appropriate-sized adult cuff
- Watch with second hand
- Calculator

## Course Goals/Objectives

This is the clinical component of the “Capstone” course for the program. Upon completion of the course, the student will demonstrate those behaviors in the Differentiated Entry Level Competencies roles of Provider of Care, Coordinator of Care and Member of a Profession. Upon successful completion of this experience, the student will:

1. Utilize advanced technical skills, pharmacological principles, critical thinking skills and current literature/research findings in the nursing process when providing safe care for clients with complex health care problems. (POC - 1,2,3,4,5,6,7. COC - 1,2,3,4. MOP - 1,2,3)

2. Assume accountability for incorporating cultural background, developmental level, and religious/spiritual practices into the nursing care of adults clients with complex health care problems. (POC-14. MOP-1)

3. Adapt therapeutic and professional communication techniques to develop and maintain effective collaborative relationships with adult clients with complex health care problems and members of the interdisciplinary health care team. (POC 1,2,3,4,5,7. COC – 1,2,3,4. MOP – 1,2,3)

4. Create and implement individualized health teaching plans for adult clients with complex health care problems. (POC – 2,4. COC – 1,2,3. MOP – 1)

5. Manage the client care environment by coordinating human and material resources to provide care to clients with complex health care problems with emphasis on safety, cost effectiveness, and collaboration. (POC – 1,2,3. COC – 1,2,3,4. MOP – 1)
6. Assume accountability and responsibility for nursing care by: (A) practicing according to legal/ethical guidelines and professional standards; (B) supporting the client’s right to self determination; and (C) adapting to technological advances within the health care setting. (POC – 1,2,3,4,7. COC – 2,3,4. MOP – 1,2,3)

7. Refine previously learned cognitive, psychomotor and interpersonal skills and acquire additional skill needed to provide nursing care to clients with complex health care problems. (POC – 1,2,3,4,5,6,7. COC – 2,3,4. MOP – 1,2,3.)

8. Accept responsibility for self-directed clinical learning activities related to the nursing care of adults with complex health care problems. (POC – 2,3,7. MOP – 1,2,3.)

### Student Contributions and Class Policies

1. As fourth semester nursing students, it is expected that students are able to demonstrate the ability to utilize critical thinking skills in order to care for their client(s). It is for this reason that the student will not select their client(s) the day prior to clinical. The student must demonstrate the ability to function as a competent student nurse in the clinical setting on a daily basis. The student must be knowledgeable about their client's pathophysiology and condition in order to competently plan and administer nursing care. The clinical instructor and Preceptor will expect the student to be able to discuss the client's diagnosis, treatments, and medications during the clinical experience. Therefore, it is recommended that the student bring a med/surg book, a lab manual, and a medication book to clinical each day. Students may also use a personal digital assistive device if it is loaded with current pharmacy and diagnostic information.

2. In addition, the student is responsible for being thoroughly prepared to perform any and all previously learned nursing procedures. Faculty and Preceptors expect the fourth semester student nurse to function at the advanced student level. Preceptors do not teach basic nursing skills and procedures. The list of skills and procedures the student is expected to know and bring forth from previous semesters is in the Learning Packet for RNSG 2560 Clinical V.

3. Cell phone use in the clinical setting is strictly prohibited. Students may not have or use cell phones in the clinical setting for any reason. If a student has a cell phone in their purse or backpack, it must be kept in the purse or backpack for the entire time the student is in the clinical setting. This includes ALL clinical activities, there are no exceptions. Students may not make calls/text messages or receive calls/text messages on a cell phone while in the clinical setting. **THERE ARE NO EXCEPTIONS.** Any form of cell phone use in the clinical setting is grounds for immediate failure of this clinical course. If a student must make a phone call while in the clinical setting, the student must notify their Preceptor that they will be using a hospital phone for a personal call. This call must be limited to 3 minutes.

4. Various clinical settings will be used and assignments will be made at the discretion of the instructor. Clinical assignments may occur on any day of the week (Tuesday through Sunday) and on any shift. These shifts include (but are not limited to) 0545 - 1415, 0645 – 1515, 1445 - 2315, 2245 - 0715, 0645 - 1915, and 1856 - 0715. Students may not be in the clinical setting on Mondays; Tuesdays before 1845; or Sundays after 1915. When clinical assignments are made, consideration may be give to unique student needs. However, because of limited preceptors and clinical sites, not all needs can be accommodated.

5. The student nurse will demonstrate professional behavior by accomplishing all of the assignments given by the clinical instructor/preceptor.

4. The Midland College scrub uniform (green scrub clothes) including the Midland College A D N Student name badge is to be worn at all clinical activities and on all
units. Please refer to the Student Handbook regarding the dress code and policies of
the Midland College A.D.N. program, as this will be strictly enforced. Students are
reminded that gum is not to be chewed in the clinical areas.

6. ATTENDANCE for ALL CLINICAL EXPERIENCES is the expectation for all
students. If it is necessary for the student to be absent, it is the responsibility of the
student to call the assigned unit 1 HOUR prior to change of shift report and inform the
unit of the absence. The student must also notify the instructor on call by beeper and the
Midland College Health Science Division at 685-4600 of the absence one hour prior to
the absence. It is recommended that the student and preceptor exchange phone numbers
and keep each other informed of potential absences. The Absence / Tardy Policy in the
Midland College A.D.N Student Handbook will be strictly followed.

7. If a student needs to make up a clinical absence, the student is responsible for
contacting their assigned Preceptor and coordinating the make-up day with the assigned
Preceptor’s schedule. This make-up day must be preapproved by the clinical instructor.

6. The student may be scheduled for computer training at MMH, Alliance Hospital and
other facilities as the need arises. Students will be trained to use Care Maps or other
forms of documentation such as PIE charting to facilitate participation at those
institutions. The preceptor will note the student's participation in planning the care of
the assigned patients.

Evaluation of
Students

The course grade will be determined as follows with the final grade for the course being a
Pass or Fail:

<table>
<thead>
<tr>
<th>Clinical Competencies</th>
<th>Pass/Fail</th>
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</table>

Clinical evaluation: At the time of the final clinical evaluation ALL objectives must be met
at the level of competency defined in RNSG 2560 in order to receive a “Passing” clinical
performance grade.

1. Clinical competencies are a guide to the application of information studied in theory
and from previous courses and/or experiences. Please refer to the Clinical Evaluation
Tool for the required clinical competencies for RNSG 2560. ALL clinical competencies
must be successfully achieved at the required level in order to pass the clinical course.

2. Formal evaluation periods will be held at scheduled times throughout the clinical
course for the formative evaluation and at the end of the course a summative
evaluation will be scheduled. An evaluation may be performed any time the student's
performance is unsatisfactory. The student may also call for a formal or informal
evaluation session.

3. Preceptor daily evaluations will be considered in the formative and summative
evaluations. Preceptors are experts in their field and their professional expertise and
experience as a Preceptor are major components in the evaluation process of student
performance in the clinical setting.

5. The student is directed to the specific learning objectives for each clinical learning
experience. The student is expected to develop personal learning objectives and to
share these with the instructor and preceptor.

6. Med Math competency must be established at the 90% level before students are
allowed to pass medications in the clinical setting. A med-math test will be given prior
to the first day of clinical. Students must pass this test at the 90% level. Should the
student fail to achieve a 90%, subsequent tests will be given in accordance with the
Med Math Policy. Students who do not pass the med math test may go to clinical, but
they may not administer any medications to any patients. The Medication Math
7. SIM man learning experiences are considered part of the required clinical hours for this course. The time spent preparing for the Sim man learning experience and the time in the Sim man lab are not a part of the required clinical hours in the clinical setting, (i.e., the 2 week cycle of 36 hours in the clinical setting.) Sim man learning experiences are graded as Pass/Fail. Four (4) Sim man learning experiences are required for this course and the student must receive a Passing grade (P) on three of the four Sim Man experiences to receive a Passing grade (P) for this course. Refer to the Learning Packet for RNSG 2560 for specific instructions. Sim man learning experiences are due at the time and date listed on the RNSG 2560 Course Calendar. Late work is not accepted. A grade of Failing (F) will be given for Sim man learning experiences that are not turned in by the due time and date. Due to the limited time slots for these Sim man simulation experiences, assignments may only be completed during the designated dates. Failure to complete and turn in these clinical hours at the time and date assigned will result in Failure (F) of RNSG 2560 unless prior arrangements have been made with the course instructor.

8. Students are expected to prepare in advance for the Sim man learning experience. Preparatory work is outlined on Blackboard. Students who are not prepared for the Sim man experience will be sent home. The student will receive a Failing grade (F) for the Sim man experience. This will also count as a clinical absence and the student will be required to make up 12 hours of clinical time in the clinical setting with their assigned Preceptor. The 12 hours of clinical make-up time will NOT change the grade of Failing (F) to a Passing grade (P) on the Sim man experience. The student is responsible for contacting their assigned Preceptor and coordinating the make-up day with the assigned Preceptor’s schedule. This make-up day must be preapproved by the clinical instructor. The Tardy Absence policy will be strictly followed.

9. Skill labs conducted during the first week of the semester, all post conferences, scheduled clinical observations, Sim man learning experiences, ATI exams, graduate luncheons, recruitment activities, and the NCLEX review are ALL considered clinical hours and they are mandatory. Absences from any of these required clinical activities will constitute the student not successfully meeting the required number of clinical hours and the clinical objectives of this course. All required clinical hours and clinical objectives must be fully met in order to receive a passing grade for this course

Guidelines for 4th Semester Clinical Experiences

1. In order to satisfy state requirements, each student must complete 21 clinical hours each week for 16 weeks. This is a total of 336 hours for the semester. Clinical hours will be counted in two week cycles for a total of 42 hours every two weeks. Thirty-six (36) of the 42 hours must be completed in the assigned clinical or lab setting. The remaining six hours of each two week cycle will be spent in Post Conference and Sim man experiences. Post Conference and Sim man lab experiences are required clinical hours that must be completed to pass RNSG 2560 Clinical V. The Absence / Tardy policy will be strictly enforced.

2. The required 36 hours in the assigned clinical setting are scheduled with the assigned preceptor at times that do not conflict with class or post conference. Students may not “work ahead” and put in extra clinical hours (to count for clinical hours in future 2-week cycles). If a student has to make-up any clinical hours, these must be made up in the current 2-week cycle, unless special arrangements have been approved by the clinical instructor.

3. The student is responsible for turning in their clinical schedule on the assigned date and time. These schedules are due at 0830 on the assigned Mondays. Schedules turned
in after 0830 on the assigned Monday will be considered late. If a schedule is turned in late, the student will be required to make-up an additional 12 hours of clinical within 2 weeks of the absence. The dates and times the schedules are due are printed on the course calendar for RNSG 2560 and on the Weekly Clinical Schedule.

4. Students must remain with their assigned preceptor throughout the semester. Only an instructor can make preceptor changes.

5. In the event of an unavoidable absence, the instructor must be notified immediately. In addition, the assigned clinical nursing unit must be notified at least one hour prior to the beginning of the shift, and the Midland College Health Science Division office must be notified immediately. All notifications are the responsibility of the student.

6. In the event of a preceptor absence, the student must notify the instructor immediately for reassignment. Only an instructor can make preceptor changes. Alternative student assignments to Preceptors may not be made by Nurse Managers, Charge Nurses or other staff members THERE ARE NO EXCEPTIONS.

7. The Midland College A D N Absence / Tardy policy will be followed. All clinical absences must be made up before the last day that clinical time may be scheduled in the clinical setting. Clinical absences may not be made up during class time, post conference time, school holidays, the week of recruitment activities, NCLEX review week or finals week.

8. If a student has a clinical absence that has been approved for a make-up clinical day by the faculty and is unable to make up this absence prior to the last day that clinical time may be scheduled in the clinical setting, the student will receive an “I” Incomplete for RNSG 2560. The make-up clinical time will be scheduled: after the next semester begins; at the discretion of faculty; and only if clinical space is available. Once the student has successfully met all of the requirements for the course, this grade may be changed to a “P” Passing grade.

9. It is the student’s responsibility to meet with the instructor to reschedule missed clinical time.

10. Clinical absences are to be made up within two (2) weeks of the absence.

**Unprofessional Conduct**

According to the Nursing Practice Act of the Texas Board of Nurse Examiners, “good professional character is the integrated pattern of personal, academic and occupational behaviors which, in the judgment of the Board, indicates that an individual is able to consistently conform his or her conduct to the requirements of the Nursing Practice Act, the Board’s Rules and Regulations, and generally accepted standards of nursing practice including, but not limited to, behaviors indicating: honesty, accountability, trustworthiness, reliability and integrity.”

Demonstrating unprofessional conduct as a student in the Midland College A.D.N. program is consequently grounds for immediate dismissal from the program. Therefore, the faculty at Midland College have defined unprofessional conduct as the following:

1. The use of profanity or vulgarity
2. Inaccurate recording, falsifying or altering records
3. Administering medications and/or treatments in a negligent manner or without permission of the instructor
4. Violating the confidentiality of information or knowledge concerning the patient
5. Discriminating in the rendering of nursing services as it relates to human rights and dignity of the individual
6. Possession of guns or other weapons in the school or clinical areas
7. Exhibiting unethical, immoral conduct
8. Insubordination: A willful or intentional disregard of the lawful and reasonable instructions of the supervisor
9. Any activity that would jeopardize the health and welfare of a client, the hospital
staff, faculty, or self.
Clinical Evaluation

Clinical performance is evaluated as being “Pass” or “Fail”. An evaluation of “Pass” indicates the student met the clinical objectives at the defined level of competency. An evaluation of “Fail” indicates the student did not meet the stated clinical objectives at the defined level of competency. Failure to meet any clinical objective at the defined level will result in a clinical course failure.

Defining behavior is listed under each clinical objective for that particular course. The level at which each objective must be met is indicated on each clinical evaluation tool and will include the following levels:

I - Independent  
S - Supervised  
A - Assisted  
P - Provisional  
D - Dependent

Definitions for these competency levels are included in each course syllabus and are attached to this policy.

At least one formative evaluation will be done for each student using the evaluation tool. The timing and frequency of formative evaluations will be scheduled at the discretion of each instructor. At the end of the clinical course a final clinical evaluation conference will be held. Both the formative and the summative evaluations will be retained in the student's file.
Competency Level Definitions

Student criterion-referenced performance standards are defined as follows for clinical evaluations. Read the standard for each level of competency carefully.

Independent
- Performs safely and accurately each time behavior is observed without supportive cues from instructor.
- Demonstrated dexterity.
- Spends minimal time on task.
- Appears relaxed and confident during performance of task.
- Applies theoretical knowledge accurately each time. Focuses on client while giving care.

Supervised
- Performs safely and accurately each time behavior is observed.
- Required supportive or directive cue occasionally during performance of task.
- Demonstrates coordination, but uses some unnecessary energy to complete behavior/activity. Spends reasonable time on task.
- Appears generally relaxed and confident; occasional anxiety may be noticeable.
- Applies theoretical knowledge accurately with occasional cues.
- Focuses on client initially; as complexity increases, focuses on task.

Assisted
- Performs safely and accurately each time observed.
- Requires frequent supportive and occasional directive cues.
- Demonstrates partial lack of skill and/or dexterity in part of activity; awkward.
- Takes longer time to complete task; occasionally late.
- Appears to waste energy due to poor planning.
- Identifies principles, but needs direction to identify application.
- Focuses primarily on task or own behavior, not on client.

Provisional
- Performs safely under supervision not always accurate.
- Requires continuous supportive and directive cues.
- Demonstrates lack of skill; uncoordinated in majority of behavior.
- Performs task with considerable delay; activities are disrupted or omitted.
- Identifies fragments of principles; applies principles inappropriately.
- Focuses entirely on task or own behavior.

Dependent
- Performs in an unsafe manner; unable to demonstrate behavior.
- Requires continuous supportive and directive cues.
- Performs in an unskilled manner; lacks organization.
- Appears frozen, unable to move, non-productive.
- Unable to identify principles or apply them.
- Attempts activity or behavior, yet is unable to complete.
- Focuses entirely on task or own behavior.
At the time of the final clinical evaluation ALL objectives must be met at the level of competency defined for RNSG 2560 in order to receive a “Pass” clinical performance grade. The student must achieve the competence level in clinical performance for RNSG 2560, Clinical V as follows:

<table>
<thead>
<tr>
<th>Objective</th>
<th>Level Required</th>
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<tbody>
<tr>
<td><strong>Provider of Care</strong></td>
<td></td>
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</table>
| 1 | Utilize advanced technical skills, pharmacological principles, critical thinking skills, and current literature/research findings in the nursing process when providing safe care for clients with complex health care problems. *(Obj. 1)*  
- Demonstrate advanced physical assessment skills.  
- Use critical thinking as a basis for decision making throughout the implementation of the nursing process.  
- Use current technology and evidence based information to formulate and modify the plan of care.  
- Contribute to the interdisciplinary plan of care.  
- Promote a safe, effective environment conducive to the optimal health and dignity of the client.  
- Perform therapeutic and preventive nursing measures and administer treatments and medications as authorized by law and determined by the BNE. | I S A P D |
| 2 | Assume accountability for incorporating cultural background, developmental level, and Religious/spiritual practices into the nursing care of adult client’s with complex health care needs. *(Obj. 2)*  
- Adapt the plan of care and teaching plans to accommodate the individual’s culture and religious/spiritual practices.  
- Adapt the plan of care and teaching plans to accommodate the individual’s developmental level.  
- Deliver care in a nonjudgmental and nondiscriminating manner. | I S A P D |
| 3 | Adapt therapeutic and professional communication techniques to develop and maintain effective collaborative relationships with adult clients with complex health care problems and other members of the interdisciplinary health care team. *(Obj. 3)*  
- Apply principles and concepts presented in previous nursing and non-nursing courses to new settings with adult clients.  
- Collaborate effectively with adult clients to plan and implement health-promoting behaviors.  
- Demonstrate professional interactions when collaborating with members of the interdisciplinary health care team.  
- Validate, report and document client care using accurate terminology and reporting procedures, including responses to treatments and medications.  
- Communicate plan of care to nurses and other interdisciplinary health care team members. | I S A P D |
| 4 | Create and implement individualized health teaching plans for adult clients with complex health care problems. *(Obj. 4)*  
- Written evidence of interdisciplinary discharge teaching plans.  
- Identify learning needs of clients.  
- Individualize and implement teaching plans.  
- Evaluate the success of teaching and reintervene if needed. | I S A P D |
- Critique own teaching skills

5 Refine previously learned cognitive, psychosocial and interpersonal skills, and acquire additional skills needed to provide nursing care to clients with complex health care problems. *(Obj. 7)*
- Plan and implement safe and organized planned nursing actions.
- Reassess intervention for appropriateness or need.
- Apply advanced nursing knowledge and principles in anticipation of client needs.
- Inform clients of their health care rights and support their decisions.
- Identify priorities and make judgments to organize care of clients.
- Use basic leadership and management skills, act as a team leader, supervise and delegate care and contribute to shared goals.

### Coordinator of Care

1 Manage the client care environment by coordinating human and material resources to provide care to clients with complex health care problems with emphasis upon safety, cost effectiveness and collaboration. *(Obj. 5)*
- Implement cost of effective client care.
- Consult with, utilize and make referrals to community agencies and other health care resources.
- Involve the client in health care planning.
- Participate in evaluation of client care with the client and the members of the interdisciplinary health care team.
- Organize assigned tasks and resources for optimal time and cost management.

### Member of the Profession

1 Assume accountability and responsibility for nursing care by:
   a. practicing according to legal/ethical guidelines and professional standard.
   b. acting as a client advocate.
   c. adapting to technological advances within the health care setting. *(Obj. 6)*
   - Follow guidelines in Midland College and A.D.N. Student Handbooks, course materials, and clinical agency policies and procedures.
   - Support the client’s right to self determination.
   - Accept constructive correction and demonstrate improvement in specified areas.
   - Provide nursing care within limits of professional nursing knowledge, education, experience and ethical/legal standards of care, and R.N. role/scope of practice.
   - Maintain professional boundaries between clients and members of the interdisciplinary health care team.
   - Promote collegiality among members of the interdisciplinary health care team.

2 Accept responsibility for self-directed clinical learning activities related to the nursing care of adults with complex health care problems. *(Obj. 8).*
   - Seek opportunities to learn or practice new skills.
   - Identify areas of needed improvement and initiate individual plan for improvement.

<table>
<thead>
<tr>
<th>I = Independent</th>
<th>S = Supervised</th>
<th>A = Assisted</th>
<th>P = Provisional</th>
<th>D = Dependent</th>
</tr>
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Student Comments
Final Clinical Grade

My signature acknowledges that I have seen and discussed the clinical evaluation with the responsible instructor, although I may not agree with the evaluation.

Student Signature

Faculty Signature

Date
<table>
<thead>
<tr>
<th>Course Schedule</th>
<th>A class calendar will be distributed to the class by the instructor.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SCANS Information</strong></td>
<td>The following SCANS skills are taught and/or reinforced in this course:</td>
</tr>
<tr>
<td><strong>Information</strong></td>
<td>Acquires and uses information. Students will evaluate course material, interpret pertinent client data and apply these to caring for adult clients with complex health care problems.</td>
</tr>
<tr>
<td><strong>Reading</strong></td>
<td>Locates, understands and interprets written information. Student will demonstrate the ability to read and comprehend the textbook, physician orders, monitoring equipment, laboratory and X-ray results, pharmacological information, and other written information.</td>
</tr>
<tr>
<td><strong>Technology</strong></td>
<td>Chooses procedures or equipment including computers and related technologies. Understands overall intent and proper procedures for setup and operations of equipment. Prevents, identifies, or solve problems with equipment, including computers and other technologies. Students will meet this objective by the following:</td>
</tr>
<tr>
<td></td>
<td>- utilize the monitoring equipment in the Critical Care Units at the hospital.</td>
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<tr>
<td></td>
<td>- discuss various monitoring devices employed by the Registered Nurse to care for the adult client in structured health care settings.</td>
</tr>
<tr>
<td><strong>Thinking Skills</strong></td>
<td>Creative thinking, decision making and problem solving. Students will analyze client data and apply standard nursing principles to the care of adult clients with complex health care problems.</td>
</tr>
<tr>
<td><strong>Math</strong></td>
<td>Students will demonstrate math competencies in written medication math quizzes and in the clinical setting when administering medications to adult clients with complex health care problems.</td>
</tr>
<tr>
<td><strong>Safety Training</strong></td>
<td>Students receive annual training in the following: blood and air borne pathogens, electrical safety, back safety, hazardous chemicals, latex allergies, fire and disaster procedures, security and personal safety procedures and safety requirements of clinical facilities. Students must maintain CPR, immunizations and health insurance during all clinical courses.</td>
</tr>
</tbody>
</table>
| Instructor’s Information | Name: Heather Hutson RN MSN  
Office Location: 213 Health Sciences Building  
Office Telephone: 685-4597  
Beeper Number: 499-2448  
E Mail: hhutson@midland.edu |
|--------------------------|--------------------------------------------------|
|                          | Name: Susan Jones RN MS  
Office Location: 212 Health Sciences Building  
Office Telephone: 685-4602  
Cell Phone: 352-0662  
Beeper Number: 742-0231  
E Mail: sjones@midland.edu |
|                          | Division Chairman: Dr Becky Hammack  
Program Director: Kim Bezinque  
Division Secretary: Kay Floyd  
Division Office Location and Telephone: 209B HS, 685-4600 |
|                          | Students are encouraged to contact the instructor at any time; however |