

**Course Outline**

**COURSE:** AH 55                      **DIVISION:** 50                      **ALSO LISTED AS:** AH 43

**TERM EFFECTIVE:** Spring 2015                      **CURRICULUM APPROVAL DATE:** 09/22/2014

**SHORT TITLE:** INT/MENT HEALTH NSG

**LONG TITLE:** Interactive and Mental Health Nursing

<u>Units</u>	<u>Number of Weeks</u>	<u>Type</u>	<u>Contact Hours/Week</u>	<u>Total Contact Hours</u>
10	18	Lecture:	5.5	99
		Lab:	13.5	243
		Other:	0	0
		Total:	19	342

**COURSE DESCRIPTION:**

The dynamics of leadership and management in nursing, including concepts of basic mental health. Progresses from basic mental health knowledge and skills to the refinements involved in psychiatric nursing practice as it relates to all age groups. Incorporates nursing concepts and nursing experiences relative to human sexuality, child abuse and cultural and ethnic diversity. \$100 course material fee, payable at registration. **PREREQUISITE:** Admission to advanced standing / RN program and California IV Certification and successful completion of AH 51, 52, 53 and 54 or equivalent.

**PREREQUISITES:**

- (Completion of AH 51, as UG, with a grade of C or better.
- OR
- Completion of AH 61, as UG, with a grade of C or better.)
- AND (Completion of AH 52, as UG, with a grade of C or better.
- OR
- Completion of AH 62, as UG, with a grade of C or better.)
- AND (Completion of AH 53, as UG, with a grade of C or better.
- OR
- Completion of AH 63, as UG, with a grade of C or better.)
- AND (Completion of AH 54, as UG, with a grade of C or better.
- OR
- Completion of AH 64, as UG, with a grade of C or better.)

**COREQUISITES:**

**CREDIT STATUS:** D - Credit - Degree Applicable

## GRADING MODES

L - Standard Letter Grade

REPEATABILITY: N - Course may not be repeated

## SCHEDULE TYPES:

02 - Lecture and/or discussion

03 - Lecture/Laboratory

04 - Laboratory/Studio/Activity

## STUDENT LEARNING OUTCOMES:

1. Students will communicate clearly, verbally and in writing using appropriate grammar, vocabulary and word usage with patients, peers, facility staff and instructors representing diverse populations and viewpoints.

Measure: Written careplans Clinical evaluations

PLO: 1,2,3,4,5,6

ILO: 2, 1, 3, 4, 6, 7

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

2. Students will use principles of college-level mathematical concepts to correctly calculate medication dosages and intravenous solution flow rates.

Measure: Clinical evaluation Clinical calculation exams

PLO: 1,2,3,4,5,6

ILO: 2,3

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

3. Students will demonstrate appropriate active listening skills using techniques of therapeutic communication to verify that communication has been accurately interpreted. Students will use language interpreters at appropriate times in the clinical settings.

Measure: Classroom presentations

Role play with instructor evaluation

Clinical evaluations

PLO: 1,2,3,4,5,6

ILO: 2, 1, 3, 4, 6

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

4. Students will interact effectively with people of all ages, many cultures and ethnicities demonstrating awareness of the students' own values and opinions, as well as awareness and respect of the opinions and values of others

Measure: Clinical evaluations Classroom participation in discussions regarding ethical dilemmas of patient care process recordings

PLO: 1,2,3,4,5,6

ILO: 4.6

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

5. Students will critically analyze data from textbooks, patient charts including electronic charts, dictionaries, reference books, and the internet. Apply theoretical concepts and facts to real life situations, with computer simulated patient situations and exams.

Measure: Written course work

Clinical evaluations

Exams

PLO: 1,2,3,4,5,6

ILO: 2, 1, 3, 4, 6

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

6. Students will analyze pre-written patient plans of care and will individualize the plan to a specific patient.

Measure: Written careplans

Clinical evaluations

PLO: 1,2,3,4,5,6

ILO: 2,1,3,4,6,7

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

7. Student will reflect creative and critical thinking skills. Creative and critical thinking is characterized by openness of inquiry, ability to ask pertinent questions, production of new ideas, flexible problem solving, examination of underlying assumptions, and an ability to present diverse perspectives.

Measure: Written coursework Classroom presentations Case studies

Exams

PLO: 1,2,3,4,5,6

ILO: 2,1,3,4,6

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

8. Students will use therapeutic nursing interventions which reflect the standard of nursing practice. This will be exhibited by the student's ability to use psychomotor and psychosocial interventions which promote health; and prevent, minimize, or resolve problems as identified by the nurse and patient. Therapeutic interventions are independent actions grouped in theory-based research and experiences.

Measure: Clinical evaluations

Actual careplans

Licensure exam

PLO: 1,2,3,4,5,6

ILO: 2,1,3,4,6

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

9. Students will utilize nursing process to prioritize and organize nursing care and to problem solve. Nursing process includes:

a. Assessment of objective and subjective patient data

b. Analysis of data using the information to develop patient outcomes in planning patient care

c. Identify and implement appropriate nursing interventions to meet expected

outcomes

d. Revise the plan of care as needed based on the information from the evaluation

Measure: Written care plans

Active care plans in the clinical setting

Clinical evaluations

Case studies using actual patients

PLO: 1,2,3,4,5,6

ILO: 2,1,3,4,6

GE-LO:

Year assessed or anticipated year of assessment: 2014-2015

#### PROGRAM LEARNING OUTCOMES:

1. Apply principles of oral, written and verbal communication to convey relevant, accurate and complete information
2. Apply the nursing process by assessing, planning, implementing and evaluating nursing care and teaching the maintenance of health and prevention of disease.
3. Practice within professional and legal standards and ethical principles and demonstrate sensitivity to the cultural differences of clients.
4. Demonstrate an ability to practice safely.
5. Function within the scope of practice for designated licensure.
6. Take and pass the licensure exam.

#### **CONTENT, STUDENT PERFORMANCE OBJECTIVES, OUT-OF-CLASS ASSIGNMENTS**

Curriculum Approval Date: 09/22/2014

(See attached Addendum for complete course outline.)

Topics include:

1. Critical Thinking in the Nursing Process
2. Culturally Competent Care
3. Health History and Physical Examination
4. Patient and Family Teaching
5. Older Adults
6. Community-Based Nursing and Home Care
7. Complementary and Alternative Therapies
8. Stress
9. Pain
10. End-of-Life Care
11. Addictive Behaviors
12. Inflammation, Infection, and Healing
13. Peripheral Nerve and Spinal Cord Problems
14. Genetics and Altered Immune Responses including Human Immunodeficiency Virus Infection
15. Cancer
16. Fluid, Electrolyte, and Acid-Base Imbalances
17. Preoperative Care
18. Intraoperative Care
19. Postoperative Care
20. Visual and Auditory Systems
21. Visual and Auditory Problems

22. Integumentary System
23. Integumentary Problems
24. Burns
25. Respiratory System
26. Upper Respiratory Problems
27. Lower Respiratory Problems
28. Obstructive Pulmonary Diseases
29. Foundations of Psychiatric Mental Health Nursing
30. Clinical Experiences: Rewards, Challenges, and Solutions
31. Psychobiology
32. Legal and Ethical Implications in Clinical Practice
33. Cultural and Spiritual Issues
34. The Nursing Process
35. Principles of Communication
36. Growth and Development Across the Life Span
37. Anxiety and Related Disorders
38. Mood Disorders: Depression and Mania
39. The Schizophrenias
40. Personality Disorders
41. Substance-Related Disorders
42. Delirium, Dementia, and Amnesic and Other Cognitive Disorders
43. Disorders of Childhood and Adolescence
44. Eating Disorders
45. Sexual Disorders
46. Adjustment Disorders
47. Interactive, Activity, and Electroconvulsive Therapies
48. Psychopharmacology
49. Complementary and Alternative Therapies
50. Crisis: Concepts and Interventions
51. Violence: Abuse, Neglect, and Rape
52. Suicide
53. Grief and Loss
54. Persons with HIV/AIDS
55. Community Psychiatric Mental Health Nursing
56. Persons with Severe and Persistent Mental Illness

**METHODS OF INSTRUCTION:**

Lecture, lab, skills demonstration, return demonstration

**METHODS OF EVALUATION:**

CATEGORY 1 - The types of writing assignments required:

Percent range of total grade: 15 % to 25 %

Written Homework

Reading Reports

Lab Reports

Essay Exams

Term or Other Papers

Other: Classroom presentations, internet assignments

CATEGORY 2 - The problem-solving assignments required:

Percent range of total grade: % to %

Homework Problems

Quizzes

Exams

Other: Minimum 90% competency level pass/fail only

CATEGORY 3 - The types of skill demonstrations required:

Percent range of total grade: 5 % to 15 %

Class Performance/s

Performance Exams

CATEGORY 4 - The types of objective examinations used in the course:

Percent range of total grade: 80 % to 90 %

Multiple Choice

True/False

Matching Items

Completion

Other: Calculations

CATEGORY 5 - Any other methods of evaluation:

Clinical evaluation is pass/fail

### **REPRESENTATIVE TEXTBOOKS:**

Required Texts:

American Psychological Association. (2009). Publication manual of the American Psychological Association. 6th ed. Washington, DC: American Psychological Association.

Billings, D. M. (2013). Lippincott's Q & A review for the NCLEX-RN. 11th ed. Philadelphia, PA: Lippincott, Williams & Wilkins.

Claywell, L. (2013). LPN to RN Transitions. St. Louis, MO: Elsevier.

Fortinash, K., & Holoday-Worret, P. (2012). Psychiatric mental health nursing. 5th ed. St. Louis, MO: Mosby.

HESI. (2013). Comprehensive review for the NCLEX-RN examination. 4th ed. St. Louis, MO: Elsevier.

Nettina, K. (2013) Lippincott manual of nursing practice. 10th ed. New York, NY: Lippincott, Williams & Wilkins.

Potter, P., & Perry, A. (2013) Mosby's nursing video skills DVD: Basic, Intermediate & Advanced Skills. 4th ed. St. Louis, MO: Mosby.

Silvestri, L. (2013). Saunders comprehensive review for the NCLEX-RN examination. 6th ed. St. Louis, MO: Elsevier.

Required Software:

Deglin, J., & Summers, S. (2013). Nursing central for PDA, web & wireless. Philadelphia, PA: F.A. Davis.

Epocrates. (2013). Epocrates for the health professional. Free download. San Mateo, CA: Athenahealth.

HESI. (2014). Patient Reviews. St. Louis, MO: Elsevier.

Elsevier. (2014) Adaptive quizzing for the NCLEX-RN exam. St. Louis, MO: Elsevier.

Recommended Texts:

Deglin, J., & Vallerand, A. (2014). Davis's drug guide for nurses. 14th ed. Philadelphia, PA: F.A. Davis.

Lacharritty, L., Kumagai, C., Bartz, B. (2011). Prioritization, delegation and assignment. 2nd ed. St. Louis, MO: Elsevier.

Irwin, B., & Burchhardt, J. (2013). NCLEX-RN, strategies, practice and review. 2013-2014 ed. New York, NY: Kaplan.

Pagana, K., & Pagana, T. (2012). Diagnostic lab test reference. 11th ed. St. Louis, MO: Elsevier.

Van Meter, K., & Hubert, R. (2010). Gould's Pathophysiology for the health professions. 5th ed. St. Louis, MO: Mosby.

**ARTICULATION and CERTIFICATE INFORMATION**

Associate Degree:

CSU GE:

IGETC:

CSU TRANSFER:

Transferable CSU, effective 200970

UC TRANSFER:

Not Transferable

**SUPPLEMENTAL DATA:**

Basic Skills: N

Classification: I

Noncredit Category: Y

Cooperative Education:

Program Status: 1 Program Applicable

Special Class Status: N

CAN:

CAN Sequence:

CSU Crosswalk Course Department: AH

CSU Crosswalk Course Number: 55

Prior to College Level: Y

Non Credit Enhanced Funding: N

Funding Agency Code: Y

In-Service: N

Occupational Course: C

Maximum Hours:

Minimum Hours:

Course Control Number: CCC000506203

Sports/Physical Education Course: N

Taxonomy of Program: 123010

## ADDENDUM

### GAVILAN COLLEGE Allied Health Program

**Course:** AH 55 – Medical-Surgical / Mental Health Nursing  
10 Units

**Prerequisite:** Admission to advanced standing / RN program and California IV Certification and successful completion of AH 51, 52, 53, 54 or equivalent.

**Description:** The dynamics of leadership and management in nursing, including concepts of basic mental health. Progresses from basic mental health knowledge and skills to the refinements involved in psychiatric nursing practice as it relates to all age groups. Incorporates nursing concepts and nursing experiences relative to human sexuality, child abuse and cultural and ethnic diversity.

#### 1. Critical Thinking in the Nursing Process

##### Objectives

1. Describe the basic focus of the domain of nursing.
2. Describe what constitutes evidence-based practice.
3. Identify the benefits of using standardized nursing languages.
4. Describe the five phases of the nursing process.
5. Distinguish among the independent, dependent, and collaborative functions of nursing practice.
6. Differentiate between the process of making a nursing diagnosis and a nursing diagnosis as a form of diagnostic nomenclature.
7. Describe the process of writing and selecting patient outcomes.
8. Identify the criteria for selecting nursing interventions.
9. Describe how standardized nursing languages for nursing diagnoses, patient outcomes, and nursing interventions can be linked to plan patient care.
10. Identify the places in the nursing process where evaluation is appropriate.
11. Describe how computerized documentation can enhance nursing practice and improve patient care.

##### Outline

###### A. Nursing Yesterday, Today, and Tomorrow

1. Definitions of Nursing
2. Nursing's View of Humanity
3. Advanced Practice Nursing
4. Delivery of Nursing Care
5. Expanding Knowledge and Technology
6. Federal Initiatives
7. Evidence-Based Practice
8. Nursing Languages

###### B. Nursing Process

1. Phases of the Nursing Process
2. Interrelatedness of Phases
3. Independent and Collaborative Functions



- C. Assessment Phase
  - 1. Data Collection
- D. Diagnosis Phase
  - 1. Data Analysis and Problem Identification
  - 2. Nursing Diagnosis
  - 3. Diagnostic Process
  - 4. Collaborative Problems

- E. Planning Phase
  - 1. Priority Setting
  - 2. Identifying Outcomes
  - 3. Determining Interventions

F. NANDA

G. Implementation Phase

H. Evaluation Phase

- I. Nursing Care Plans
  - 1. Clinical (Critical) Pathways

- J. Documentation
  - 1. Problem Lists
  - 2. SOAP Charting
  - 3. Computerized Documentation

K. Future Challenges of Nursing

## 2. Culturally Competent Care

### Objectives

1. Define the terms culture, subculture, acculturation, assimilation, ethnicity, race, ethnocentrism, cultural imposition, values, transcultural nursing, culture-bound syndrome, explanatory model, and cultural competency.
2. Describe the potential effects of immigration on an individual's health.
3. Explain aspects of culture and ethnicity that may affect a person's health.
4. Describe strategies for successfully communicating with a person who speaks a language that the nurse does not understand.
5. Identify physiologic aspects of culture and ethnicity to consider when providing nursing care.
6. Identify ways that the nurse's own cultural background may influence nursing care when working with patients from different cultural and ethnic groups.
7. Identify strategies for incorporating cultural information in the nursing process when providing care for patients from different cultural and ethnic groups.

### Outline

#### A. Culture and Cultural Competence

1. Cultural Awareness
2. Cultural Knowledge
3. Cultural Skills
4. Cultural Encounter

B. Cultural Factors Affecting Health and Health Care

1. Spirituality/Religion
2. Communication
3. Family Roles and Relationships
4. Personal Space
5. Touch
6. Nutrition
  - a. Disease Occurrence and Susceptibility
  - b. Immigration
  - c. Medications
  - d. Psychologic Factors
  - e. Dermatologic Variations
  - f. Pain

C. Nursing Management: Culturally Competent Care

1. Nurse's Self-Assessment
2. Patient Assessment
3. Nursing Implementation

**3. Health History and Physical Examination**

Objectives

1. Explain the purpose, components, and techniques related to a patient history and physical examination.
2. Obtain a nursing history using a functional health pattern format.
3. Describe the appropriate use and techniques of inspection, palpation, percussion, and auscultation.
4. Identify the equipment needed to perform a physical examination.
5. Describe the indications, purposes, and components of the branching or regional examination.
6. Record a nursing history and physical examination using a standard format.

Outline

A. Data Collection

1. Medical Focus
2. Nursing Focus
3. Types of Data
4. Interviewing Considerations
5. Symptom Investigation

B. Nursing History: Subjective Data

1. Important Health Information
2. Functional Health Patterns

C. Physical Examination: Objective Data

1. General Survey
2. Physical Examination

## D. Problem Identification and Nursing Diagnoses

### 4. Patient and Family Teaching

#### Objectives

1. Identify four specific goals of patient and family teaching.
2. Describe teaching implications related to adult learning principles.
3. Describe specific skills that enhance the nurse's role as teacher.
4. Identify strategies to manage the stresses of the nurse-teacher.
5. Discuss the role of the family in patient teaching.
6. Explain the basic steps in the teaching-learning process.
7. Identify physical, psychologic, and sociocultural characteristics of the patient that affect the teaching-learning process.
8. Describe the components of a correctly written learning objective.
9. Identify the advantages, disadvantages, and uses of various teaching strategies.
10. Describe common methods of short- and long-term evaluation.

#### Outline

##### A. Role of Patient and Family Teaching

##### B. Teaching-Learning Process

1. Adult Learner
2. Nurse as Teacher
3. Family and Social Support

##### C. Process of Patient Education

1. Assessment
2. Diagnosis
3. Planning
4. Implementation
5. Evaluation

### 5. Older Adults

#### Objectives

1. Describe the impact of older adults on the health care system.
2. Describe the effects of ageism on care of older adults.
3. List the major concepts in adult developmental theories proposed by Erikson, Peck, Havighurst, and Levinson.
4. List the major biologic theories of aging, and describe clinical manifestations related to specific age-related physiologic changes.
5. Describe the needs of special populations of older adults.
6. Identify differences in health status and disease manifestation between older and younger adults.
7. Identify the role of the nurse in health screening and promotion and disease prevention for older adults.
8. Describe nursing interventions to assist chronically ill older adults.
9. Describe common problems of older adults related to hospitalization and acute illness and the role of the nurse in assisting them with selected care problems.
10. Describe the challenges and concerns related to the caregiving role.
11. Identify care alternatives to meet patient-specific needs of older adults.

12. Identify the legal and ethical issues related to older adults.

#### Outline

##### A. Demographics of Aging

##### B. Attitudes Toward Aging

##### C. Adult Development

1. Erikson's Theory: Psychosocial Developmental Conflicts
2. Peck's Theory: Developmental Tasks
3. Havighurst's Theory:
4. Developmental Tasks
5. Levinson's Theory: Evolution of Life Structures
6. Other Theories of Adult Development

##### D. Biologic Aging Theories

1. Stochastic Theories
2. Nonstochastic Theories

##### E. Age-Related Physiologic Changes

##### F. Special Older Adult Populations

1. Older Adult Women
2. Cognitively Impaired Older Adults
3. Rural Older Adults
4. Homeless Older Adults
5. Frail Older Adults
6. Chronically Ill Older Adults
7. Culturally Competent Care: Older Adults

##### G. Nursing Management: Older Adults

1. Nursing Assessment
2. Nursing Diagnoses
3. Planning
4. Nursing Implementation
5. Evaluation

##### H. Social Support and The Older Adult

1. Caregivers
2. Elder Abuse

##### I. Social Services For The Older Adult

##### J. Medicare

##### K. Care Alternatives For Older Adults

1. Housing
2. Community-Based Older Adults with Special Needs
3. Long-Term Care Facilities
4. Case Management

## L. Legal and Ethical Issues

### **6. Community-Based Nursing and Home Care**

#### Objectives

1. Describe how the factors changing the health care delivery system are influencing the shift of patient care from hospitals to community-based and home care settings.
2. Differentiate community-based nursing from community-oriented nursing.
3. Compare community-based patient care settings and the services provided in these settings.
4. Describe the roles and challenges of nurses working in community-based and home care settings.

#### Outline

- A. Changing Health Care System
  1. Factors Influencing Change
  2. Case Management
- B. Community-Based Care
  1. Continuum of Patient Care
  2. Community-Based Nurses
  3. Ambulatory Care
  4. Transitional Care
  5. Long-Term Care
- C. Home Health Care
  1. Patient Care in the Home
  2. Home Health Care Team
  3. Home Health Nursing Roles
  4. Hospice

### **7. Complementary and Alternative Therapies**

#### Objectives

1. Define complementary and alternative therapies.
2. Describe the National Center for Complementary and Alternative Medicine classification system for types of complementary and alternative therapies.
3. Discuss ways in which traditional Chinese medicine (TCM) differs from the practice of conventional medicine in North America.
4. Identify the types, principles, and effectiveness of mind-body interventions.
5. Discuss the general types of herbal therapy.
6. Describe the process of therapeutic touch.
7. Explain the scope of practice of chiropractic therapy.
8. Identify roles of the nurse regarding complementary and alternative therapies.
9. Describe a process for assessing patients' use of complementary and alternative therapies.

#### Outline

- A. Alternative Medical Systems
  1. Traditional Chinese Medicine

- B. Mind-Body Interventions
  - 1. Tai Chi
  - 2. Spirituality
- C. Biologic-Based Therapies
  - 1. Herbal Therapies
- D. Manipulative and Body-Based Methods
  - 1. Chiropractic Therapy
- E. Energy Therapies
  - 1. Therapeutic Touch
  - 2. Bioelectromagnetic-Based
  - 3. Therapies
- F. Nursing Management: Complementary and Alternative Therapies
  - 1. Assessment
  - 2. Serving as a Resource
  - 3. Serving as a Provider
  - 4. Involvement in Research

## 8. Stress

### Objectives

1. Define the terms *stressor*, *stress*, *demands*, *primary appraisal*, *secondary appraisal*, *coping*, *adaptation*, and *allostasis*.
2. Describe the three stages of Selye's general adaptation syndrome.
3. Understand the role of cognitive appraisal and coping in the stress process.
4. Describe the role of the nervous and endocrine systems in the stress process.
5. Describe the effects of stress on the immune system.
6. Describe the effects of stress on health and illness.
7. Describe the coping strategies that can be used by a patient experiencing stress.
8. List the variables that may influence an individual's response to stress.
9. Describe the nursing assessment and management of a patient experiencing stress.

### Outline

- A. Theories of Stress
- B. Stress As A Response
  - 1. Stage of Alarm Reaction
  - 2. Stage of Resistance
  - 3. Stage of Exhaustion
  - 4. Refinements in Selye's Stress
  - 5. Theory
- C. Stress As A Stimulus
  - 1. Life Events
  - 2. Refinements in the Stress as a Stimulus Theory
- D. Stress As A Transaction

1. Appraisal
2. Theoretic Summary

#### E. Physiologic Response To Stress

1. Nervous System
2. Endocrine System
3. Immune System
4. Effects of Chronic Stress on Brain Structure and Function
5. Allostasis and Allostatic Load
6. Stress, Health, and Illness

#### F. Identifying Stressors Or Demands

1. Work-Related Stressors
2. Illness-Related Stressors

#### G. Coping

#### H. Nursing Management: Stress

1. Nursing Assessment
2. Nursing Diagnoses
3. Nursing Implementation

### **9. Pain**

#### Objectives

1. Define pain.
2. Describe the neural mechanisms of pain and pain modulation.
3. Differentiate between nociceptive and neuropathic types of pain.
4. Explain the physical and psychologic effects of unrelieved pain.
5. Interpret the subjective and objective data that are obtained from a comprehensive pain assessment.
6. Describe effective multidisciplinary pain management techniques.
7. Describe pharmacologic and nonpharmacologic methods of pain relief.
8. Explain the nurse's role and responsibility in pain management.
9. Discuss ethical and legal issues related to pain and pain management.
10. Evaluate the influence of one's own knowledge, beliefs, and attitudes about pain assessment and management.

#### Outline

##### A. Pain

##### B. Magnitude of The Pain Problem

##### C. Definitions of Pain

##### D. Dimensions of Pain and The Pain Process

1. Physiologic Dimension of Pain
2. Sensory, Affective, Behavioral, Cognitive, and Sociocultural Dimensions of Pain

##### E. Etiology and Types of Pain

1. Nociceptive Pain
  2. Neuropathic Pain
- F. Pain Assessment
1. Sensory Component
  2. Affective, Behavioral, Cognitive, and Sociocultural Components
- G. Pain Treatment
1. Basic Principles
- H. Drug Therapy For Pain
1. Equianalgesic Dose
  2. Scheduling Analgesics
  3. Analgesic Ladder
- I. Surgical Therapy
1. Nerve Blocks
  2. Surgical Interventions
- J. Nonpharmacologic Therapy For Pain
1. Physical Pain Relief Strategies
  2. Cognitive Therapies
- K. Nursing and Collaborative Management: Pain
1. Effective Communication
  2. Barriers to Effective Pain
  3. Management
- L. Institutionalizing Pain Education and Management
- M. Ethical Issues In Pain Management
1. Fear of Hastening Death by Administering Analgesics
  2. Requests for Assisted Suicide
  3. Use of Placebos in Pain
  4. Assessment and Treatment
  5. Gerontologic Considerations: Pain
- N. Special Populations
1. Cognitively Impaired Individuals
  2. Patients with Substance Abuse Problems

## **10. End-of-Life Care**

### Objectives

1. Describe the physical manifestations at the end of life.
2. Relate the common psychological manifestations at the end of life.
3. Explain the process of grief at the end of life.
4. Examine the cultural and spiritual issues related to end-of-life care.
5. Discuss ethical and legal issues in end-of-life care.
6. Discuss the purpose of palliative care and hospice.



7. Describe the nursing management for the dying patient.
8. Explore the special needs of family caregivers in end-of-life care.
9. Discuss the special needs of the nurse who cares for dying patients and their families.

#### Outline

- A. Physical Manifestations At End of Life
  1. Sensory Changes
  2. Circulatory and Respiratory Changes
  3. Loss of Muscle Tone
  4. Brain Death
- B. Psychosocial Manifestations At End of Life
- C. Grief
- D. Variables Affecting End-Of-Life Care
- E. Legal and Ethical Issues Affecting End-Of-Life Care
  1. Legal Documents Used in End-of-Life Care
- F. Palliative Care and Hospice
- G. Nursing Management: End of Life
  1. Nursing Assessment
  2. Nursing Diagnoses
  3. Planning
  4. Nursing Implementation
  5. Physical Care
- H. Special Needs of Caregivers In End-Of-Life Care
  1. Special Needs of Family Caregivers
  2. Special Needs of Nurses

### **11. Addictive Behaviors**

#### Objectives

1. Define addiction, addictive behavior, substance misuse, substance abuse, dependence, tolerance, withdrawal, craving, abstinence, and detoxification.
2. Describe the neurophysiology of addiction.
3. Identify the major health complications of substance abuse.
4. Recognize the effects of the use of stimulants, depressants, hallucinogens, and inhalants.
5. Identify nursing interventions for tobacco and smoking cessation.
6. Describe the nursing management of patients who experience intoxication, overdose, or withdrawal from stimulants, depressants, or hallucinogens.
7. Describe nursing management of the surgical patient who abuses drugs.
8. Discuss the nursing management of pain in the patient who is dependent on central nervous system depressants.
9. Describe the use of motivational interviewing to initiate behavior change in patients with addictions.
10. Discuss substance abuse problems of the older adult.

## Outline

- A. Overview of Addictive Behaviors
  - 1. Terminology of Addictive Behavior
  - 2. Neurophysiology of Addiction
  - 3. Contributing Factors to Addiction
  - 4. Health Complications of Substance Abuse
  
- B. Stimulants & Nicotine
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care
  
- C. Cocaine
  - 1. Characteristics
  - 2. Effect of Use
  - 3. Complications
  - 4. Collaborative Care
  
- D. Amphetamines
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care
  
- E. Caffeine
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care
  
- F. Depressants & Alcohol
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care
  
- G. Sedative-Hypnotics
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care
  
- H. Opioids
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care

- I. Hallucinogenscannabis
  - 1. Characteristics
  - 2. Effects of Use
  - 3. Complications
  - 4. Collaborative Care
- J. Inhalants
- K. Nursing Management: Addictive Behaviors
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning
  - 4. Nursing Implementation
  - 5. Gerontologic Considerations: Addictive Behaviors

## **12. Inflammation, Infection, and Healing**

### Objectives

1. Explain the cellular adaptive mechanisms to sublethal injury.
2. Describe the causes and mechanisms of lethal cell injury.
3. Differentiate among types of cell necrosis.
4. Describe the components and functions of the mononuclear phagocyte system.
5. Describe the inflammatory response, including vascular and cellular responses and exudate formation.
6. Explain local and systemic manifestations of inflammation and their physiologic basis.
7. Describe the pharmacologic, dietary, and nursing management of inflammation.
8. Differentiate among healing by primary, secondary, and tertiary intention.
9. Describe the factors that delay wound healing and common complications of wound healing.
10. Describe a patient risk assessment for pressure ulcers.
11. Discuss measures to prevent the development of pressure ulcers.
12. Explain the etiology and clinical manifestations of pressure ulcers.
13. Discuss collaborative and nursing management of a patient with pressure ulcers.

### Outline

- A. Cell Injury
  - 1. Cell Adaptation to Sublethal Injury
  - 2. Causes of Lethal Cell Injury
  - 3. Cell Necrosis
- B. Defense Against Injury
  - 1. Mononuclear Phagocyte System
  - 2. Inflammatory Response
- C. Healing Process
  - 1. Regeneration
  - 2. Repair
  - 3. Delay of Healing
  - 4. Complications of Healing
  - 5. Collaborative Care

- D. Nursing Management: Inflammation, Infection, and Healing
  - 1. Nursing Implementation
- E. Pressure Ulcers
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
- F. Nursing and Collaborative Management: Pressure Ulcers
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning
  - 4. Nursing Implementation
  - 5. Evaluation

### 13. Peripheral Nerve and Spinal Cord Problems

#### Objectives

1. Explain the etiology, clinical manifestations, collaborative care, and nursing management of trigeminal neuralgia and Bell's palsy.
  2. Explain the etiology, clinical manifestations, collaborative care, and nursing management of Guillain-Barré syndrome, botulism, tetanus, and neurosyphilis.
  3. Describe the classification of spinal cord injuries and associated clinical manifestations.
  4. Describe the clinical manifestations, collaborative care, and nursing management of spinal cord shock.
  5. Correlate the clinical manifestations of spinal cord injury with the level of disruption and rehabilitation potential.
  6. Describe the nursing management of the major physical and psychologic problems of the patient with a spinal cord injury.
  7. Describe the effects of spinal cord injury on the older adult population.
  8. Explain the types, clinical manifestations, collaborative care, and nursing management of spinal cord tumors.
- A. Cranial Nerve Disorders
  - B. Trigeminal Neuralgia
    1. Etiology and Pathophysiology
    2. Clinical Manifestations
    3. Diagnostic Studies
    4. Collaborative Care
  - C. Nursing Management: Trigeminal Neuralgia
    1. Nursing Assessment
    2. Nursing Diagnoses
    3. Planning
    4. Nursing Implementation
    5. Evaluation
  - D. Bell's Palsy
    1. Etiology and Pathophysiology
    2. Clinical Manifestations
    3. Diagnostic Studies
    4. Collaborative Care

- E. Nursing Management: Bell's Palsy
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning
  - 4. Nursing Implementation
  - 5. Evaluation
  
- F. Polyneuropathies
  
- G. Guillain-Barré Syndrome
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Diagnostic Studies
  - 4. Collaborative Care
  
- H. Nursing Management: Guillain-Barré Syndrome
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning
  - 4. Nursing Implementation
  - 5. Evaluation
  
- I. Botulism
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Diagnostic Studies and
  - 4. Collaborative Care
  
- J. Nursing Management: Botulism
  - 1. Nursing Implementation
  
- K. Tetanus
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Collaborative Care
  
- L. Nursing Management: Tetanus
  - 1. Nursing Implementation
  
- M. Neurosyphilis
  
- N. Spinal Cord Problems
  
  
- O. Spinal Cord Trauma
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Diagnostic Studies
  - 4. Collaborative Care
  
- P. Nursing Management: Spinal Cord Trauma
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning

4. Nursing Implementation
5. Evaluation
6. Gerontologic Considerations: Spinal Cord Injury

Q. Spinal Cord Tumors

1. Etiology and Pathophysiology
2. Clinical Manifestations
3. Nursing and Collaborative Management: Spinal Cord Tumors

**14. Genetics and Altered Immune Responses including Human Immunodeficiency Virus Infection**

Objectives

1. Define common terms related to genetics and genetic disorders: autosome, carrier, heterozygous, homozygous, mutation, recessive, and sex-linked.
2. Compare and contrast the most common classifications of genetic disorders.
3. Describe the functions and components of the immune system.
4. Compare and contrast humoral and cell-mediated immunity regarding lymphocytes involved, types of reactions, and effects on antigens.
5. Identify the five types of immunoglobulins and their characteristics.
6. Differentiate among the four types of hypersensitivity reactions in terms of immunologic mechanisms and resulting alterations.
7. Identify the clinical manifestations and emergency treatment of a systemic anaphylactic reaction.
8. Describe the assessment and collaborative care of a patient with chronic allergies.
9. Describe the etiologic factors, clinical manifestations, and treatment modalities of autoimmune diseases.
10. Explain the relationship between the human leukocyte antigen system and certain diseases.
11. Describe the etiologic factors and categories of immunodeficiency disorders.
12. Identify the types and side effects of immunosuppressive therapy.
13. Describe new technologies in immunology, including hybridoma technology, recombinant DNA technology, and gene therapy.
14. List the modes and variables involved in the transmission of the human immunodeficiency virus (HIV).
15. Describe the pathophysiology of HIV infection.
16. Outline HIV disease progression in the spectrum of untreated HIV infection.
17. List the diagnostic criteria for acquired immunodeficiency syndrome (AIDS).
18. Explain the methods of testing for HIV infection.
19. Discuss the collaborative management of HIV infection.
20. Explain the characteristics of opportunistic diseases associated with AIDS.
21. Discuss the long-term consequences of HIV infection and/or treatment of HIV infection.
22. Compare and contrast the methods of HIV prevention that eliminate risk and those that decrease risk.
23. Describe the nursing management of HIV-infected patients and HIV-at-risk patients.

Outline

Genetics

1. Basic Principles of Genetics
2. Inheritance Patterns
3. Genetic Testing

- 4. Genetic Therapy
- B. Nursing Management: Genetics
- C. Normal Immune Response
  - 1. Types of Immunity
  - 2. Antigens
  - 3. Lymphoid Organs
  - 4. Cells Involved in Immune Response
  - 5. Cytokines
  - 6. Comparison of Humoral and
  - 7. Cell-Mediated Immunity
  - 8. Gerontologic Considerations: Effects of Aging on the Immune System
- D. Altered Immune Response
  - 1. Hypersensitivity Reactions
- E. Allergic Disorders
  - 1. Assessment
  - 2. Diagnostic Studies
  - 3. Collaborative Care
- F. Nursing Management: Immunotherapy
  - 1. Latex Allergies
- G. Nursing and Collaborative Management: Latex Allergies
  - 1. Multiple Chemical Sensitivities
- H. Autoimmunity
  - 1. Theories of Causation
  - 2. Autoimmune Diseases
  - 3. Apheresis
- I. Histocompatibility
  - 1. Human Leukocyte Antigen System
  - 2. Human Leukocyte Antigen and Disease Associations
  - 3. Histocompatibility Studies
- J. Immunodeficiency Disorders
  - 1. Primary Immunodeficiency
  - 2. Disorders
  - 3. Secondary Immunodeficiency
  - 4. Disorders
  - 5. Graft-versus-Host Disease
- K. Immunosuppressive Therapy
  - 1. Calcineurin Inhibitors
  - 2. Sirolimus
  - 3. Mycophenolate Mofetil
  - 4. Polyclonal Antibodies (Antithymocyte Globulin and Antilymphocyte Globulin)
  - 5. Monoclonal Antibodies
  - 6. New Immunosuppressive Therapy
- L. New Technologies In Immunology
  - 1. Hybridoma Technology: Monoclonal Antibodies

2. Recombinant DNA Technology
  3. Polymerase Chain Reaction
- A. Human Immunodeficiency Virus: Infection
    1. Significance of Problem
    2. Transmission of HIV
    3. Pathophysiology
    4. Clinical Manifestations and
    5. Complications
    6. Diagnostic Studies
    7. Collaborative Care
  - B. Nursing Management: HIV Infection
    1. Nursing Assessment
    2. Nursing Diagnoses
    3. Planning
    4. Nursing Implementation
    5. Evaluation

## 15. Cancer

### Objectives

1. Describe the prevalence, incidence, and death rates of cancer in the United States.
2. Describe the processes involved in the biology of cancer.
3. Differentiate the three phases of cancer development.
4. Describe the role of the immune system related to cancer.
5. Describe the use of the classification systems for cancer.
6. Explain the role of the nurse in the prevention and detection of cancer.
7. Explain the use of surgery, radiation therapy, chemotherapy, and biologic therapy in the treatment of cancer.
8. Differentiate between external beam radiation and brachytherapy.
9. Identify the classifications of chemotherapeutic agents and methods of administration.
10. Describe the effects of radiation therapy and chemotherapy on normal tissues.
11. Identify the types and effects of biologic therapy agents.
12. Describe the nursing management for the patient receiving radiation therapy, chemotherapy, and biologic therapy.
13. Describe the nutritional therapy for patients with cancer.
14. Describe the complications that can occur in advanced cancer.
15. Describe the appropriate psychologic support of the patient with cancer and the patient's family.

### Outline

- A. Biology of Cancer
  1. Defect in Cellular Proliferation
  2. Defect in Cellular Differentiation
  3. Development of Cancer
  4. Role of the Immune System
- B. Classification of Cancer
  1. Anatomic Site Classification
  2. Histologic Analysis Classification
  3. Extent of Disease Classification



- C. Prevention and Detection of Cancer
  - 1. Diagnosis of Cancer
  
- D. Collaborative Care
  - 1. Goals and Modalities
  - 2. Clinical Trials
  
- E. Surgical Therapy
  - 1. Cure and Control
  - 2. Supportive Care
  - 3. Palliation of Symptoms
  - 1. Rehabilitative Management
  
- F. Radiation Therapy
  - 1. Effects of Radiation
  - 2. Simulation and Treatment
  - 3. Measurement of Radiation
  - 4. Goals of Radiation Therapy
  
- G. Nursing Management: Radiation Therapy
  - 1. Nursing Implementation
  
- H. Chemotherapy
  - 1. Effect on Cells
  - 2. Classification of Chemotherapeutic Drugs
  - 3. Preparation and Administration of Chemotherapy
  - 4. Methods of Administration
  - 5. Regional Chemotherapy Administration
  - 6. Effects of Chemotherapy on
  - 7. Normal Tissue
  - 8. Treatment Plan
  
- I. Nursing Management: Chemotherapy
  - 1. Nursing Implementation
  
- J. Late Effects of Radiation and Chemotherapy
  
- K. Biologic Therapy
  - 1. Interferons
  - 2. Interleukins
  - 3. Monoclonal Antibodies
  - 4. Hematopoietic Growth Factors
  - 5. Toxic and Side Effects of Biologic Agents
  
- L. Nursing Management: Biologic Therapy
  
- M. Bone Marrow and Stem Cell Transplantation
  - 1. Types of Bone Marrow Transplants
  - 2. Procedures
  - 3. Peripheral Stem Cell Transplantation
  - 4. Cord Blood Stem Cells
  
- N. Gene Therapy

- O. Complications Resulting From Cancer
  - 1. Nutritional Problems
  - 2. Infection
  - 3. Oncologic Emergencies
  
- P. Management of Cancer Pain
  
- Q. Psychologic Support
  - 1. Gerontologic Considerations

## 16. Fluid, Electrolyte, and Acid-Base Imbalances

### Objectives

1. Describe the composition of the major body fluid compartments.
2. Define the following processes involved in the regulation of movement of water and electrolytes between the body fluid compartments: diffusion, osmosis, filtration, hydrostatic pressure, oncotic pressure, and osmotic pressure.
3. Describe the etiology, laboratory diagnostic findings, clinical manifestations, and nursing and collaborative management of the following disorders:
  - a. Water excess and deficit
  - b. Sodium and volume imbalances: hypernatremia and hyponatremia
  - c. Potassium imbalance: hyperkalemia and hypokalemia
  - d. Magnesium imbalance: hypermagnesemia and hypomagnesemia
  - e. Calcium imbalance: hypercalcemia and hypocalcemia
  - f. Phosphate imbalance: hyperphosphatemia and hypophosphatemia
4. Identify the processes of acid-base regulation.
5. Discuss the etiology, laboratory diagnostic findings, clinical manifestations, and nursing and collaborative management of the following acid-base imbalances: metabolic acidosis, metabolic alkalosis, respiratory acidosis, and respiratory alkalosis.
6. Describe the composition and indications of common intravenous fluid solutions.

### Outline

- A. Homeostasis
  
- B. Water Content of The Body
  1. Body Fluid Compartments
  2. Functions of Body Water
  3. Calculation of Fluid Gain or Loss
  
- C. Electrolytes
  1. Measurement of Electrolytes
  2. Electrolyte Composition of Fluid Compartments
  
- D. Mechanisms Controlling Fluid and Electrolyte Movement
  1. Diffusion
  2. Facilitated Diffusion
  3. Active Transport
  4. Osmosis
  5. Hydrostatic Pressure
  6. Oncotic Pressure
  
- E. Fluid Movement In Capillaries

1. Fluid Shifts
- F. Fluid Movement Between Extracellular Fluid and Intracellular Fluid
- G. Fluid Spacing
- H. Regulation of Water Balance
  1. Hypothalamic Regulation
  2. Pituitary Regulation
  3. Adrenal Cortical Regulation
  4. Renal Regulation
  5. Cardiac Regulation
  6. Gastrointestinal Regulation
7. Insensible Water Loss
- I. Fluid and Electrolyte Imbalances
- J. Sodium and Volume Imbalances
  1. Hyponatremia
  2. Hyponatremia
- K. Extracellular Fluid Volume Imbalances
- L. Nursing Management: Sodium and Volume Imbalances
  1. Nursing Diagnoses
  2. Nursing Implementation
- M. Potassium Imbalances
  1. Hyperkalemia
- N. Nursing and Collaborative Management: Hyperkalemia
  1. Nursing Implementation
  2. Hypokalemia
- O. Nursing and Collaborative Management: Hypokalemia
  1. Nursing Diagnoses
  2. Nursing Implementation
- P. Calcium Imbalances
  1. Hypercalcemia
- Q. Nursing and Collaborative Management: Hypercalcemia
  1. Nursing Diagnoses
  2. Nursing Implementation
  3. Hypocalcemia
- R. Nursing and Collaborative Management: Hypocalcemia
  1. Nursing Diagnoses
  2. Nursing Implementation
- S. Phosphate Imbalances
  1. Hyperphosphatemia
  2. Hypophosphatemia
- T. Magnesium Imbalances

1. Hypermagnesemia
2. Hypomagnesemia

U. Protein Imbalances

V. Acid-Base Imbalances

1. pH and Hydrogen Ion Concentration
2. Acid-Base Regulation
3. Alterations in Acid-Base Balance
4. Clinical Manifestations
5. Assessment of Fluid, Electrolyte, and
6. Acid-Base Imbalances
7. Subjective Data
8. Objective Data

W. Oral Fluid and Electrolyte Replacement

X. Intravenous Fluid and Electrolyte Replacement

1. Solutions

## 17. Preoperative Care

### Objectives

1. Identify the common purposes and settings of surgery.
2. Describe the purpose and components of a preoperative nursing assessment.
3. Interpret the significance of data related to the preoperative patient's health status and operative risk.
4. Explain the components and purpose of informed consent for surgery.
5. Describe the nursing role in the physical, psychologic, and educational preparation of the surgical patient.
6. Discuss the day-of-surgery preparation for the surgical patient.
7. Identify the purposes and types of preoperative medications.
8. Identify the special considerations of preoperative preparation for the older adult surgical patient.

### Outline

- A. Surgical Settings
- B. Patient Interview
- C. Nursing Assessment of The Preoperative Patient
  1. Subjective Data
  2. Objective Data
- D. Nursing Management: Preoperative Patient
  1. Preoperative Teaching
  2. Legal Preparation for Surgery
  3. Day-of-Surgery Preparation
  4. Transportation to the Operating Room
  5. Culturally Competent Care: Preoperative Patient
  6. Gerontologic Considerations: Preoperative Patient

## 18. Intraoperative Care

### Objectives

1. Describe the three different areas of the surgery department and the proper attire for each area.
2. Describe the physical environment of the operating room and the holding area.
3. Describe the functions of the members of the surgical team.
4. Identify needs experienced by the patient undergoing surgical procedures.
5. Discuss the role of the perioperative nurse when managing the care of the patient undergoing surgery.
6. Describe basic principles of aseptic technique used in the operating room.
7. Discuss the importance of safety in the positioning of patients.
8. Differentiate between general and regional or local anesthesia, including advantages, disadvantages, and rationale for choice of the anesthetic technique.
9. Identify the basic techniques used to induce and maintain general anesthesia.
10. Discuss techniques for administering local and regional anesthesia.

### Outline

- A. Physical Environment
  1. Department Layout
  2. Holding Area
  3. Operating Room
- B. Surgical Team
  1. Registered Nurse
  2. Licensed Practical Nurse and Surgical Technician
  3. Surgeon and Assistant
  4. Registered Nurse First Assistant
  5. Anesthesia Care Provider
- C. Nursing Management: Patient Before Surgery
  1. Psychosocial Assessment
  2. Physical Assessment
  3. Chart Review
  4. Admitting the Patient
- D. Nursing Management: Patient During Surgery
  1. Room Preparation
  2. Transferring the Patient
  3. Scrubbing, Gowning, and Gloving
  4. Basic Aseptic Technique
  5. Assisting the Anesthesia Care Provider
  6. Positioning the Patient
  7. Preparing the Surgical Suite
  8. Safety Considerations
  9. Patient After Surgery
- E. Classification of Anesthesia
  1. General Anesthesia
  2. Local Anesthesia
  3. Additional Anesthetic Considerations
  4. Gerontologic Considerations: Patient During Surgery

- F. Catastrophic Events In The Operating Room
  - 1. Anaphylactic Reactions
  - 2. Malignant Hyperthermia
- G. New and Future Considerations

## **19. Postoperative Care**

### Objectives

1. Identify the components of an initial postanesthesia assessment.
2. Identify the nursing responsibilities in admitting patients to the postanesthesia care unit (PACU).
3. Explain the etiology and nursing assessment and management of potential problems of patients in the PACU.
4. Describe the initial nursing assessment and management after transfer from the PACU to the general care unit.
5. Explain the etiology and nursing assessment and management of potential problems during the postoperative period.
6. Identify the information needed by the postoperative patient in preparation for discharge.

### Outline

- A. Postoperative Care in The Postanesthesia Care Unit
  - 1. Postanesthesia Care Unit Admission
- B. Potential Alterations in Respiratory Function
- C. Nursing Management: Respiratory Complications
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- D. Potential Alterations in Cardiovascular Function
- E. Nursing Management: Cardiovascular Complications
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- F. Potential Alterations in Neurologic Function
- G. Nursing Management: Neurologic Complications
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- H. Pain and Discomfort
- I. Nursing Management: Pain
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation

- J. Hypothermia
- K. Nursing Management: Hypothermia
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- L. Nausea and Vomiting
- M. Nursing Management: Nausea and Vomiting
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
  - 4. Surgical-Specific Care of the Patient in the Postanesthesia Care Unit
  - 5. Discharge from the Postanesthesia Care Unit
- N. Care of the Postoperative Patient on the Clinical Unit
- O. Potential Alterations in Respiratory Function
- P. Nursing Management: Respiratory Complications
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- Q. Potential Alterations in Cardiovascular Function and Shock
- R. Nursing Management: Cardiovascular Complications and Shock
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- S. Potential Alterations in Urinary Function
- T. Nursing Management: Urinary Complications
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- U. Potential Alterations in Gastrointestinal Function
- V. Nursing Management: Gastrointestinal Complications
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- W. Potential Alterations of the Integument
- X. Nursing Management: Surgical Wounds
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
- Y. Pain and Discomfort

- Z. Nursing Management: Pain
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
  
- AA. Potential Alterations In Temperature
  
- BB. Nursing Management: Altered Temperature
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Nursing Implementation
  
- CC. Potential Alterations In Psychologic Function
  
- DD. Nursing Management: Psychologic Function
  - 1. Nursing Diagnoses
  - 2. Nursing Implementation
  - 3. Planning for Discharge and
  - 4. Follow-up Care
  - 5. Gerontologic Considerations:
  - 6. Postoperative Patient

## **20. Visual and Auditory Systems**

### Objectives

1. Describe the structures and functions of the visual and auditory systems.
2. Describe the physiologic processes involved in normal vision and hearing.
3. Identify the significant subjective and objective assessment data related to the visual and auditory systems that should be obtained from the patient.
4. Describe the appropriate techniques used in the physical assessment of the visual and auditory systems.
5. Differentiate normal findings from common abnormal findings of a physical assessment of the visual and auditory systems.
6. Describe age-related changes in the visual and auditory systems and differences in assessment findings.
7. Describe the purpose, significance of results, and nursing responsibilities related to diagnostic studies of the visual and auditory systems.

### Outline

- A. Structures and Functions of The Visual System
  - 1. Structures and Functions of Vision
  - 2. External Structures and Functions
  - 3. Internal Structures and Functions
  - 4. Gerontologic Considerations: Effects of Aging on the Visual System
  
- B. Assessment of The Visual System
  - 1. Subjective Data
  - 2. Objective Data
  
- C. Diagnostic Studies of The Visual System
  
- D. Structures and Functions of The Auditory System



1. External Ear
  2. Middle Ear
  3. Inner Ear
  4. Gerontologic Considerations: Effects of Aging on the Auditory System
- E. Assessment of The Auditory System
1. Subjective Data
  2. Objective Data
- F. Diagnostic Studies of The Auditory System
1. Tests for Hearing Acuity
  2. Specialized Tests
  3. Test for Vestibular Function

## **21. Visual and Auditory Problems**

### Objectives

1. Describe the types of refractive errors and appropriate corrections.
2. Describe the etiology and collaborative care of extraocular disorders.
3. Explain the pathophysiology, clinical manifestations, and nursing management and collaborative care of the patient with selected intraocular disorders.
4. Describe the nursing measures that promote the health of the eyes and ears.
5. Explain the general preoperative and postoperative care of the patient undergoing surgery of the eye or ear.
6. Describe the action and uses of drug therapy used in treating problems of the eyes and ears.
7. Explain the pathophysiology, clinical manifestations, and nursing management and collaborative care of common ear problems.
8. Compare the causes, management, and rehabilitative potential of conductive and sensorineural hearing loss.
9. Explain the use, care, and patient teaching related to assistive devices for eye and ear problems.
10. Describe the common causes and assistive measures for uncorrectable visual impairment and deafness.
11. Describe the measures used to assist the patient in adapting psychologically to decreased vision and hearing.

### Outline

- A. Visual Problems
- B. Correctable Refractive Errors
  1. Myopia
  2. Hyperopia
  3. Presbyopia
  4. Astigmatism
  5. Aphakia
  6. Nonsurgical Corrections
  7. Surgical Therapy
- C. Uncorrectable Visual Impairment
  1. Levels of Visual Impairment
- D. Nursing Management: Visual Impairment

1. Nursing Assessment
  2. Nursing Diagnoses
  3. Planning
  4. Nursing Implementation
  5. Evaluation
  6. Gerontologic Considerations: Visual Impairment
- E. Eye Trauma
- F. Extraocular Disorders
- G. Inflammation and Infection
1. Hordeolum
  2. Chalazion
  3. Blepharitis
  4. Conjunctivitis
  5. Keratitis
- H. Nursing Management: Inflammation and Infection
1. Nursing Assessment
  2. Nursing Diagnoses
  3. Planning
  4. Nursing Implementation
  5. Evaluation
- I. Dry Eye Disorders
- J. Strabismus
- K. Corneal Disorders
1. Corneal Scars and Opacities
  2. Keratoconus
- L. Intraocular Disorders
- M. Cataracts
1. Etiology and Pathophysiology
  2. Clinical Manifestations
  3. Diagnostic Studies
  4. Collaborative Care
- N. Nursing Management: Cataracts
1. Nursing Assessment
  2. Nursing Diagnoses
  3. Planning
  4. Nursing Implementation
  5. Evaluation
  6. Gerontologic Considerations: Cataracts
- O. Retinal Detachment
1. Etiology and Pathophysiology
  2. Clinical Manifestations
  3. Diagnostic Studies
  4. Collaborative Care

- P. Age-Related Macular Degeneration
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Diagnostic Studies
  - 4. Collaborative Care
  
- Q. Glaucoma
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Diagnostic Studies
  - 4. Collaborative Care
  
- R. Nursing Management: Glaucoma
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning
  - 4. Nursing Implementation
  - 5. Evaluation
  - 6. Gerontologic Considerations: Glaucoma
  
- S. Intraocular Inflammation and Infection
  
- T. Enucleation
  
- U. Ocular Manifestations of Systemic Diseases
  
- V. Hearing Problems
  
- W. External Ear and Canal Trauma
  
- X. External Otitis
  - 1. Etiology
  - 2. Clinical Manifestations and Complications
  
- Y. Nursing Management: External Otitis
  
- Z. Cerumen and Foreign Bodies In The External Ear Canal
  
- AA. Malignancy of The External Ear
  
- BB. Middle Ear and Mastoid
  
- CC. Acute Otitis Media
  
- DD. Chronic Otitis Media and Mastoiditis
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Complications
  - 4. Diagnostic Studies
  - 5. Collaborative Care
  
- EE. Nursing Management: Acute Otitis Media
  - 1. Following Tympanoplasty
  
- FF. Chronic Otitis Media With Effusion

- GG. Otosclerosis
  - 1. Collaborative Care
- HH. Nursing Management: Otosclerosis
- II. Inner Ear Problems
- JJ. Ménière's Disease
- KK. Nursing and Collaborative Management: Ménière's Disease
- LL. Labyrinthitis
- MM. Acoustic Neuroma
- NN. Hearing Loss and Deafness
  - 1. Types of Hearing Loss
  - 2. Clinical Manifestations
- OO. Collaborative Management: Hearing Loss and Deafness
  - 1. Gerontologic Considerations: Hearing Loss

## 22. Integumentary System

### Objectives

1. Describe the structures and functions of the integumentary system.
2. Describe age-related changes in the integumentary system and differences in assessment findings.
3. Describe the significant subjective and objective data related to the integumentary system that should be obtained from a patient.
4. Describe specific assessments to be made during the physical examination of the skin and appendages.
5. Explain the critical components for describing a lesion.
6. Describe the appropriate techniques used in the physical assessment of the integumentary system.
7. Explain the structural and assessment differences in dark skin color.
8. Differentiate normal from common abnormal findings in a physical assessment of the integumentary system.
9. Describe the purpose, significance of results, and nursing responsibilities related to diagnostic studies of the integumentary system.

### Outline

- A. Structures and Functions of The Skin and Appendages
  - 1. Structures
  - 2. Functions of the Integumentary System
  - 3. Gerontologic Considerations: Effects of Aging on the Integumentary System
- B. Assessment of The Integumentary System
  - 1. Subjective Data
  - 2. Objective Data
  - 3. Assessment of Dark Skin Color

## C. Diagnostic Studies of The Integumentary System

### 23. Integumentary Problems

#### Objectives

1. Describe health promotion practices related to the integumentary system.
2. Explain the etiology, clinical manifestations, and nursing and collaborative care of common acute dermatologic problems.
3. Describe the psychologic and pathophysiologic effects of chronic dermatologic conditions.
4. Explain the etiology, clinical manifestations, and collaborative care of malignant dermatologic disorders.
5. Explain the etiology, clinical manifestations, and collaborative care of bacterial, viral, and fungal infections of the integument.
6. Explain the etiology, clinical manifestations, and collaborative care of infestations and insect bites.
7. Explain the etiology, clinical manifestations, and collaborative care of dermatologic disorders related to allergies.
8. Explain the etiology, clinical manifestations, and collaborative care related to benign dermatologic disorders.
9. Describe the dermatologic manifestations of common systemic diseases.
10. Explain the indications and nursing management related to plastic surgery and skin grafts.

#### Outline

- A. Health Promotion
  1. Environmental Hazards
  2. Rest and Sleep
  3. Exercise
  4. Hygiene
  5. Nutrition
  6. Self-Treatment
- B. Malignant Skin Neoplasms
  1. Risk Factors
  2. Nonmelanoma Skin
  3. Cancers
  4. Actinic Keratosis
  5. Basal Cell Carcinoma
  6. Squamous Cell Carcinoma
  7. Malignant Melanoma
  8. Types of Melanoma
  9. Clinical Manifestations
  10. Collaborative Care
  11. Dysplastic Nevus Syndrome
- C. Skin Infections and Infestations
  1. Bacterial Infections
  2. Viral Infections
  3. Fungal Infections
  4. Infestations and Insect Bites
- D. Allergic Dermatologic Problems

- E. General Measures To Treat Acute Dermatologic Problems
  - 1. Diagnostic Studies
  - 2. Collaborative Care
  - 3. Diagnostic and Surgical Therapy
- F. Nursing Management: Dermatologic Problems
  - 1. Ambulatory and Home Care
- G. Benign Dermatologic Problems
- H. Diseases With Dermatologic Manifestations
- I. Plastic Surgery
  - 1. Elective Cosmetic Surgery
- J. Nursing Management: Cosmetic Surgery
  - 1. Preoperative Management
  - 2. Postoperative Management
- K. Skin Grafts
  - 1. Uses
  - 2. Types

## **24. Burns**

### Objectives

1. Describe the causes and prevention of burn injuries.
2. Describe the burn injury classification system.
3. Describe the relationship between the involved structures and the clinical appearance of partial- and full-thickness burns.
4. Identify the parameters used to determine the severity of burns.
5. Describe the pathophysiology, clinical manifestations, complications, and nursing and collaborative management of the three burn phases.
6. Explain fluid and electrolyte shifts during the emergent and acute burn phases.
7. Describe the nutritional therapy of the burn patient during the three burn phases.
8. Describe the interventions that the nurse may use in the management of pain in the burn patient.
9. Explain the physiologic and psychosocial aspects of burn rehabilitation.
10. Describe the nursing management of the emotional needs of the burn patient and family.
11. Discuss the issues involved and rationale for preparing the burn patient to return home.

### Outline

- A. Types of Burn Injury
  - 1. Thermal Burns
  - 2. Chemical Burns
  - 3. Smoke and Inhalation Injury
  - 4. Electrical Burns
  - 5. Cold Thermal Injury
- B. Classification of Burn Injury
  - 1. Depth of Burn

2. Extent of Burn
  3. Location of Burn
  4. Patient Risk Factors
- C. Phases of Burn Management
- D. Pre-hospital Care
- E. Emergent Phase
1. Pathophysiology
  2. Clinical Manifestations
  3. Complications
- F. Nursing and Collaborative Management: Emergent Phase
1. Airway Management
  2. Fluid Therapy
  3. Wound Care
  4. Other Care Measures
  5. Drug Therapy
  6. Nutritional Therapy
- G. Acute Phase
1. Pathophysiology
  2. Clinical Manifestations
  3. Laboratory Values
  4. Complications
- H. Nursing and Collaborative Management: Acute Phase
1. Wound Care
  2. Excision and Grafting
  3. Pain Management
  4. Physical and Occupational Therapy
  5. Nutritional Therapy
  6. Psychosocial Care
- I. Rehabilitation Phase
1. Pathophysiologic Changes and Clinical Manifestations
  2. Complications
- J. Nursing and Collaborative Management: Rehabilitation Phase
1. Gerontologic Considerations: Burns
- K. Emotional Needs of The Patient and Family
- L. Special Needs of The Nursing Staff

## 25. Respiratory System

### Objectives

1. Describe the structures and functions of the upper respiratory tract, the lower respiratory tract, and the chest wall.
2. Describe the process that initiates and controls inspiration and expiration.
3. Describe the process of gas diffusion within the lungs.
4. Identify the respiratory defense mechanisms.

5. Describe the significance of arterial blood gas values and the oxyhemoglobin dissociation curve in relation to respiratory function.
6. Identify the signs and symptoms of inadequate oxygenation and the implications of these findings.
7. Describe age-related changes in the respiratory system and differences in assessment findings.
8. Identify the significant subjective and objective assessment data related to the respiratory system that should be obtained from a patient.
9. Describe the techniques used in physical assessment of the respiratory system.
10. Differentiate normal from common abnormal findings in a physical assessment of the respiratory system.
11. Describe the purpose, significance of results, and nursing responsibilities related to diagnostic studies of the respiratory system.

#### Outline

- A. Structures and Functions of The Respiratory System
  1. Upper Respiratory Tract
  2. Lower Respiratory Tract
  3. Chest Wall
  4. Physiology of Respiration
  5. Control of Respiration
  6. Respiratory Defense Mechanisms
  7. Gerontologic Considerations: Effects of Aging on the
  8. Respiratory System
  
- B. Assessment of The Respiratory System
  1. Subjective Data
  2. Objective Data
  
- C. Diagnostic Studies of The Respiratory System
  1. Blood Studies
  2. Oximetry
  3. Sputum Studies
  4. Skin Tests
  5. Radiologic Studies
  6. Endoscopic Examinations
  7. Lung Biopsy
  8. Thoracentesis
  9. Pulmonary Function Tests
  10. Exercise Testing

## 26. Upper Respiratory Problems

#### Objectives

1. Describe the clinical manifestations and nursing management of problems of the nose.
2. Describe the clinical manifestations and nursing management of problems of the paranasal sinuses.
3. Describe the clinical manifestations and nursing management of problems of the pharynx and larynx.
4. Discuss the nursing management of the patient who requires a tracheostomy.
5. Identify the steps involved in performing tracheostomy care and suctioning an airway.
6. Describe the risk factors and warning symptoms associated with head and neck cancer.
7. Discuss the nursing management of the patient with a laryngectomy.
8. Describe the methods used in voice restoration for the patient with temporary or permanent loss of speech.



## Outline

- A. Structural and Traumatic Disorders of The Nose
  - 1. Deviated Septum
  - 2. Nasal Fracture
  - 3. Rhinoplasty
  - 4. Collaborative Care
- B. Nursing Management: Nasal Surgery
- C. Nursing and Collaborative Management:
- D. Epistaxis
- E. Inflammation and Infection of The Nose and Paranasal Sinuses
  - 1. Allergic Rhinitis
  - 2. Clinical Manifestations
- F. Nursing and Collaborative Management: Allergic Rhinitis
- G. Nursing and Collaborative Management: Acute Viral Rhinitis
  - 1. Influenza
  - 2. Clinical Manifestations
- H. Nursing and Collaborative Management: Influenza
  - 1. Sinusitis
  - 2. Clinical Manifestations
- I. Nursing and Collaborative Management: Sinusitis  
Obstruction of The Nose and Paranasal Sinuses
  - 1. Polyps
  - 2. Foreign Bodies
- J. Problems Related To The Pharynx
  - 1. Acute Pharyngitis
  - 2. Clinical Manifestations
- K. Nursing and Collaborative Management: Acute Pharyngitis
  - 1. Peritonsillar Abscess
- L. Obstructive Sleep Apnea
  - 1. Clinical Manifestations
  - 2. Diagnostic Studies
- M. Nursing and Collaborative Management: Sleep Apnea
- N. Problems Related To The Trachea and Larynx
- O. Airway Obstruction
- P. Nursing Management: Tracheostomy
  - 1. Providing Tracheostomy Care
  - 2. Swallowing Dysfunction
  - 3. Speech with a Tracheostomy Tube
  - 4. Decannulation

- Q. Laryngeal Polyps
- R. Head and Neck Cancer
  - 1. Clinical Manifestations
  - 2. Diagnostic Studies
  - 3. Collaborative Care
- S. Nursing Management: Head and Neck Cancer
  - 1. Nursing Assessment
  - 2. Nursing Diagnoses
  - 3. Planning
  - 4. Nursing Implementation
  - 5. Evaluation

## 27. Lower Respiratory Problems

### Objectives

1. Describe the pathophysiology, types, clinical manifestations, and collaborative care of pneumonia.
2. Explain the nursing management of the patient with pneumonia.
3. Describe the pathogenesis, classification, clinical manifestations, complications, diagnostic abnormalities, and nursing and collaborative management of tuberculosis.
4. Identify the causes, clinical manifestations, and nursing and collaborative management of pulmonary fungal infections.
5. Explain the pathophysiology, clinical manifestations, and nursing and collaborative management of bronchiectasis and lung abscess.
6. Identify the causative factors, clinical features, and management of environmental lung diseases.
7. Describe the causes, risk factors, pathogenesis, clinical manifestations, and nursing and collaborative management of lung cancer.
8. Identify the mechanisms involved and the clinical manifestations of pneumothorax, fractured ribs, and flail chest.
9. Describe the purpose, methods, and nursing responsibilities related to chest tubes.
10. Explain the types of chest surgery and appropriate preoperative and postoperative care.
11. Compare and contrast extrapulmonary and intrapulmonary restrictive lung disorders in terms of causes, clinical manifestations, and collaborative management.
12. Describe the pathophysiology, clinical manifestations, and management of pulmonary hypertension and cor pulmonale.
13. Discuss the use of lung transplantation as a treatment for pulmonary disorders.

### Outline

- A. Acute Bronchitis and Pneumonia
  1. Etiology
  2. Types of Pneumonia
  3. Pathophysiology
  4. Clinical Manifestations
  5. Complications
  6. Diagnostic Studies
  7. Collaborative Care
  8. Nursing Management
    - a. Nursing Assessment
    - b. Nursing Diagnoses
    - c. Planning
    - d. Nursing Implementation
    - e. Evaluation

- B. Tuberculosis
  - 1. Etiology
  - 2. Pathophysiology
  - 3. Classification
  - 4. Clinical Manifestations
  - 5. Complications
  - 6. Diagnostic Studies
  - 7. Collaborative Care
  - 8. Nursing Management
  
- C. Atypical Mycobacteria / Pulmonary Fungal Infections
  - 1. Collaborative Care
  
- D. Bronchiectasis
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Diagnostic Studies
  - 4. Collaborative Care
  
- E. Nursing Management: Bronchiectasis
  
- F. Lung Abscess
  - 1. Etiology and Pathophysiology
  - 2. Clinical Manifestations
  - 3. Complications
  - 4. Diagnostic Studies
  
- G. Nursing and Collaborative Management: Lung Abscess
  
- H. Environmental Lung Diseases
  - 1. Clinical Manifestations
  - 2. Collaborative Care
  
- I. Lung Cancer
  - 1. Etiology
  - 2. Pathophysiology
  - 3. Clinical Manifestations
  - 4. Diagnostic Studies
  - 5. Collaborative Care
  - 6. Nursing Management: Lung Cancer
  
- J. Other Types of Lung Tumors / Chest Trauma and Thoracic Injuries
  - 1. Pneumothorax
  - 2. Types of Pneumothorax
  - 3. Clinical Manifestations
  - 4. Collaborative Care
  - 5. Fractured Ribs
  - 6. Flail Chest
  
- K. Chest Tubes and Pleural Drainage
  - 1. Chest Tube Insertion
  - 2. Pleural Drainage
  
- L. Nursing Management: Chest Drainage

1. Complications
  2. Chest Tube Removal
- M. Chest Surgery
1. Preoperative Care
  2. Surgical Therapy
  3. Postoperative Care
- N. Restrictive Respiratory Disorders
- O. Pleural Effusion
1. Types
  2. Clinical Manifestations
  3. Thoracentesis
  4. Collaborative Care
- P. Pleurisy
- Q. Atelectasis
- R. Interstitial Lung Disease
- S. Idiopathic Pulmonary Fibrosis
- T. Sarcoidosis
- U. Vascular Lung Disorders
1. Pulmonary Edema
  2. Pulmonary Embolism
- V. Pulmonary Hypertension - Primary
1. Etiology and Pathophysiology
  2. Clinical Manifestations
  3. Collaborative Care
- W. Secondary Pulmonary Hypertension
- X. Cor Pulmonale
1. Clinical Manifestations
  2. Collaborative Care
- Y. Lung Transplantation

## **28. Obstructive Pulmonary Diseases**

### Objectives

1. Describe the etiology, pathophysiology, clinical manifestations, and collaborative care of asthma.
2. Describe the nursing management of the patient with asthma.
3. Differentiate between the etiology, pathophysiology, clinical manifestations, and collaborative care of the patient with chronic bronchitis and emphysema.
4. Describe the effects of cigarette smoking on the lungs.
5. Explain the nursing management of the patient with chronic bronchitis and emphysema.
6. Identify the indications for O<sub>2</sub> therapy, methods of delivery, and complications of O<sub>2</sub> administration.

7. Describe the pathophysiology, clinical manifestations, collaborative care, and nursing management of the patient with cystic fibrosis.

#### Outline

- A. Asthma
  1. Triggers of Asthma Attacks
  2. Pathophysiology
  3. Clinical Manifestations
  4. Classification of Asthma
  5. Complications
  6. Diagnostic Studies
  7. Collaborative Care
  8. Drug Therapy
- B. Nursing Management: Asthma
  1. Nursing Assessment
  2. Nursing Diagnoses
  3. Planning
  4. Nursing Implementation
  5. Evaluation
- C. Emphysema and Chronic Bronchitis
  1. Etiology
  2. Pathophysiology
  3. Clinical Manifestations
  4. Complications
  5. Diagnostic Studies
  6. Collaborative Care
- D. Nursing Management: Emphysema and Chronic Bronchitis
  1. Nursing Assessment
  2. Nursing Diagnoses
  3. Planning
  4. Nursing Implementation
  5. Evaluation
- E. Cystic Fibrosis
  1. Etiology and Pathophysiology
  2. Clinical Manifestations
  3. Complications
  4. Diagnostic Studies
  5. Collaborative Care
  6. Nursing Management: Cystic Fibrosis

## **29. Foundations of Psychiatric Mental Health Nursing**

### Objectives

1. Discuss the projected statistical increase for psychiatric disorders by 2020.
2. Discuss mental and emotional effects of terrorism on the general population after September 11, 2001.
3. Describe the ongoing threat of mental disorders to individuals, families, and the community.
4. Identify factors that contribute to stigmatization of mental illness and ways to decrease stigma, judgment, and stereotyping of this population.
5. Describe four specific reasons for diagnoses of mental disorders.
6. Identify levels of prevention of mental illness.

7. Identify similarities and differences of risk factors and protective factors associated with mental illness.
8. Discuss the role of the nurse in psychiatric mental health nursing.
9. Discuss the art and science of nursing as related to psychiatric mental health.
10. Describe six possible reasons for entering a helping profession.

#### Outline

- A. Threats to Security
  1. Violence and Terrorism
  2. Incidental vs. Ongoing Threats to Security
  3. Stigma
    - a. Resources for Reduction of Stigma
    - b.
- B. Mental Health and Mental Disorder
  1. Nursing Perspective
  2. What is Mental Health?
  3. What is Mental Disorder?
- C. Diagnoses: Pros and Cons
  1. Importance of Diagnoses
    - a. Communication
    - b. Treatment
    - c. Prognosis
    - d. Funding
    - e. Research
- D. Prevention of Mental Disorders
  1. Levels of Prevention
    - a. Primary Prevention
    - b. Secondary Prevention
    - c. Tertiary Prevention
  2. Risk Factors and Protective Factors
  3. Defense Modes
- E. Role of the Nurse
  1. Preparation of the Nurse
    - a. Theoretical Background
    - b. Practice Standards
  2. The Art and the Science of Nursing
    - a. Principles of the Nurse-Client Relationship
      - i. Therapeutic versus Social
      - ii. Client Focus
      - iii. Goal Direction
      - iv. Objective versus Subjective
      - v. Time-limited Interactions
    - b. Stages of the Nurse-Client Relationship
      - i. Preorientation Stage
      - ii. Orientation Stage
      - iii. The Contract
      - iv. Working Stage
      - v. Termination Stage
    - c. Motives for Helping
      - i. Outcomes of Helping
- F. Treatment
  1. Historical Overview

2. Treatment Systems
3. Reasons for Treatment
4. Therapeutic Modalities

G. Significance for Nursing

H. Nurse Advocates

### **30. Clinical Experiences: Rewards, Challenges, and Solutions**

Objectives

1. Identify rewards and challenges that occur when working with clients in the psychiatric mental health setting.
2. List solutions for challenges that arise in the psychiatric mental health setting.
3. Discuss the necessity for synthesizing versus compartmentalizing knowledge and skills in the psychiatric mental health area.
4. State the importance for the nurse to prioritize all aspects of activity when working with clients who have mental disorders.
5. Describe how the characteristics of adaptability and flexibility serve the nurse when working in any psychiatric setting.
6. Describe the necessity for overcoming fears of the psychiatric mental health area.
7. Describe the outcome of keeping secrets with or making promises to psychiatric clients.
8. State ways to reinforce strengths of clients and families.
9. State benefits to individuals, families, and the community from reinforcing strengths and offering support.

Outline

- A. Rewards
- B. Challenges and Solutions
  1. Synthesize Knowledge and Skills
  2. Determine Priorities
  3. Practice Dynamic vs. Static Prioritization
  4. Overcoming Fear of the Psychiatric Setting
  5. Keep No Secrets and Avoid Making Promises
  6. Emphasizing Client and Family Strengths
  7. Expect Variations of Change vs. Dramatic Change
  8. Avoid Evaluative Responses
  9. Make Observations vs. Inferences
  10. Offer Alternatives vs. Resolutions
  11. Address the Nurse's Frustration

### **31. Psychobiology**

Objectives

1. Identify the basic anatomic structures of the central nervous system.
2. Describe the physiologic functions of the central nervous system.
3. Describe normal functioning of neurons.
4. Discuss the role of common neurotransmitters in the functioning of the central nervous system.
5. Describe the electrochemical mechanism of the central nervous system.
6. Identify common client care concerns for clients having neuroimaging testing.
7. Identify the common behavioral symptoms demonstrated by clients with brain-based abnormalities who are diagnosed with psychiatric disorders.

8. Understand uses for new neurobiologic knowledge in planning care for clients with a psychiatric disorder
9. Review potential areas for further nursing research related to neurobiology.

#### Outline

- A. Understanding Neurobiologic Functions
  1. Neuroanatomy and Neurophysiology of the Human Nervous System
    - a. Neuroanatomy
      - i. Cerebrum
      - ii. Basal Ganglia
      - iii. Limbic System
    - b. Neurophysiology
      - ii. Nerve Cell Electrical Functioning
      - iii. Neurotransmitters: Nerve Cell Chemical Functioning
- B. Emerging Concepts in Psychobiology
  2. The Role of Genetics
- C. Interrelated Systems
  1. Psychoneuroimmunology
  2. Neuroendocrinology
  3. Chronobiology
- D. Diagnostic and Evaluation Procedures
  1. Neuroimaging
    - a. Anatomic Imaging
      - i. Computed Tomography
      - ii. Magnetic Resonance Imaging
    - b. Functional Imaging
      - i. Positron Emission Tomography
        - a. Single Photon Emission Computed Tomography and Other Advances in Neuroimaging
- E. Neurobiology and Psychiatric Nursing

### **32. Legal and Ethical Implications in Clinical Practice**

#### Objectives

1. Review key events in the history of mental illness and its legal treatment.
2. Describe and discuss the various forms of admissions to mental health facilities.
3. Explain the difference between confidentiality and privileged communication.
4. Relate the impact of federal legislation on patient privacy
5. Identify situations in which the duty to warn should be invoked.
6. List the rights of mental health clients and identify how these rights apply in practice.
7. Distinguish between the concepts of competency to stand trial and insanity defense.
8. Apply the elements of malpractice to a current practice situation.

#### Outline

- A. Historical Review
- B. Commitment
  1. Voluntary Commitment
  2. Emergency Commitment



- 3. Civil or Judicial Commitment
- C. Confidentiality
  - 1. Nursing Implications
  - 2. Privileged Communication
  - 3. Duty to Warn and Protection: Tarasoff
    - a. Nursing Implications
- D. Rights of Clients
  - 1. Seclusion and Restraints
    - a. Nursing Implications
  - 2. Right to Treatment
  - 3. Right to Refuse Treatment
    - a. Nursing Implications
  - 4. Electroconvulsive Therapy
  - 5. Research
    - a. Nursing Implications
- E. The Americans with Disabilities Act
  - 1. Advocacy
    - a. Nursing Implications
- F. Forensic Evaluations
  - 1. Competency to Stand Trial
  - 2. Criminal Responsibility (Insanity Defense)
  - 3. Guilty but Mentally Ill
  - 4. Nursing Responsibilities in the Criminal Justice System
- G. Malpractice
  - 1. Elements of a Malpractice Suit Based on Negligence
  - 2. Documentation
  - 3. Sexual Misconduct
  - 4. Suicide and Homicide
- H. Ethical Issues
  - 1. Autonomy
  - 2. Beneficence
    - a. Fidelity
  - 3. Distributive Justice

### **33. Cultural and Spiritual Issues**

#### Objectives

1. Discuss the need for a nurse's self-evaluation when providing care to patients from other sociocultural backgrounds.
2. Analyze socialization issues—acculturation, assimilation, ethnocentrism, and xenophobia—as they interrelate with heritage and mental health.
3. Compare and contrast cultural issues that define mental health perspectives.
4. Differentiate general examples of both health and illness and mental health beliefs and practices of various ethnic and cultural groups.
5. Identify selected social issues that interface with mental health beliefs and practices.
6. Perform a cultural assessment using the Heritage Assessment Tool.
7. Discuss the concept of spirituality in mental health nursing.
8. Formulate potential nursing diagnoses related to a client's cultural or ethnic orientation.

9. Discuss ways in which planning and implementation of nursing interventions can be adapted to a client's cultural or ethnic orientation.
10. Compare and contrast the meanings of spirituality, religion, and faith.
11. Develop a spiritual assessment that can be conducted by nurses when pastoral care is not available.

## Outline

- A. Understanding Culture
- B. Ethnicity vs. Culture
- C. Culture and Mental Health
- D. Cultural Competence
  1. Considering Self in Cultural Competence
- E. Communication
  1. Low-Context and High-Context Cultures
  2. Obtaining Translation Services
  3. Meeting Spiritual Needs
- F. Cross-Cultural Perspectives of Mental Health
  1. African-Americans
  2. Asian Americans
  3. European Origin
  4. Hispanics
  5. Native American Indians
- G. Outcomes of Health Care for Minority Populations
- H. Spirituality in Mental Health
  1. Major Spiritual Issues
  2. Intervention Tools
  3. Spiritual Assessment
    - a. Belief and Meaning
    - b. Vocation and Obligation
    - c. Experience and Emotion
    - d. Courage and Growth
    - e. Ritual and Practice
    - f. Community
    - g. Authority and Guidance
- I. Stages of Faith
- J. Stages of Moral Development
  1. Impartial Spirituality
  2. Institutional Spirituality
  3. Individual Spirituality
  4. Integrated Spirituality
- K. Selected Cases of Clinical Spiritual Interventions
  - A. Pain
  - B. Spiritual Torment

- C. Punishment
- D. Voices
- E. Guilt
- F. Hyperreligiosity

### **34. The Nursing Process**

#### Objectives

1. Define the nursing process and describe its cyclic nature.
2. Identify the six steps of the nursing process and explain the nursing actions for each step.
3. Discuss the roles of intuition, expertise, and critical thinking and how they apply to the nursing process.
4. Describe the North American Nursing Diagnosis Association (NANDA) taxonomy and explain its effect on nursing and other disciplines.
5. Compare and contrast nursing and medical assessment frameworks, with specific focus on the NANDA taxonomy.
6. Explain the meaning of actual, risk, and health promotion/wellness diagnoses; and give an example of each one using current NANDA labels, etiologies, risk factors, and defining characteristics.
7. Develop outcomes that accurately measure clients' achievable behaviors based on their nursing diagnoses.
8. Describe nursing-sensitive outcomes and the Nursing Outcomes Classification (NOC) and their influence on NANDA diagnoses and the nursing process.
9. Formulate nursing interventions that are prescriptive and directive, for both actual and risk diagnoses.
10. Define the Nursing Interventions Classification (NIC) and its relationship to NANDA diagnoses and the nursing process.
11. Construct rationale statements for each proposed nursing intervention.
12. Develop evaluations for outcomes that effectively measure client progress within an appropriate time frame.

#### Outline

- A. History and Perspectives of the Nursing Process
  1. Mental Status Examination
  2. Multisystem Assessment
  3. Intuition and the Nursing Process
  4. Expertise and the Nursing Process
  5. The Nurse's Role in the Nursing Process
  6. Critical Thinking and the Nursing Process
  
- B. Assessment
  1. The Nurse-Client Interview
  2. Assessment Frameworks
    - a. Functional Health Pattern Framework
    - b. NANDA Taxonomy II – Human Response Patterns
  
- C. Nursing Diagnosis
  1. Diagnostic Reasoning
  2. Definitions of Health Problems
  3. Qualifying Statements
  4. Guidelines for Defining Characteristics
  5. Risk Diagnoses

- 6. Guidelines for Promotion/Wellness Diagnoses
- D. Outcome Identification
  - 1. Nursing Outcomes Classification
- E. Planning
  - 1. Interdisciplinary Treatment Team Planning
  - 2. Standardized Care Planning
  - 3. Clinical Pathways
    - a. Variances
  - 4. Electronic Methods of Documentation
- F. Implementation
  - 1. Nursing Interventions
  - 2. Impact of Interventions on Etiologies
  - 3. Interventions and Medical Actions
  - 4. Rationale Statements
- G. Evaluation
- H. The Nursing Process in Community and Home Settings
  - 1. Psychiatric Home Health Care Case Management System

### **35. Principles of Communication**

#### Objectives

1. Analyze the components of communication.
2. Discuss factors that influence communication.
3. Differentiate among social, intimate, collegial, and therapeutic communication.
4. Describe the characteristics of effective helpers.
5. Discuss the core qualities of the nurse and the various roles the nurse plays in interacting therapeutically with clients.
6. Explain the principles of therapeutic communication.
7. Compare and contrast the communication techniques that enhance and hinder therapeutic communication.
8. Examine therapeutic communication in the context of the nursing process.
9. Discuss three special communication challenges and their implications for the future.

#### Outline

- A. Components of Communication
- B. Factors that Influence Communication
- C. Modes of Communication
  - 1. Written Communication
  - 2. Verbal Communication
  - 3. Nonverbal Communication
    - a. Body Cues
    - b. Space
    - c. Touch
    - d. Appearance
- D. Types of Communication
  - 1. Intrapersonal Communication

2. Interpersonal Communication
  - a. Social Communication
  - b. Collegial Communication
  - c. Therapeutic Communication
- E. Principles of Therapeutic Communication
  1. Personal Elements Important for Therapeutic Communication
  2. Roles of the Nurse in Therapeutic Communication
  3. Traits of Therapeutic Communication
    - a. Genuineness
    - b. Positive Regard
    - c. Empathy
    - d. Trustworthiness
    - e. Clarity
    - f. Responsibility
    - g. Assertiveness
- F. Responding Techniques that Enhance Therapeutic Communication
  1. Special Communication Techniques
    - a. Self-Disclosure
    - b. Touch
    - c. Humor
  2. Obstacles to Therapeutic Communication
    - a. Resistance
    - b. Transference
    - c. Countertransference
    - d. Boundary Violations
  3. Responding Techniques that Hinder Therapeutic Communication
- G. Communication and the Nursing Process
- H. Challenges in Communication
  1. Legal Issues
  2. Length of Stay
  3. Physical Impairments
  4. Communicating with Children and Adolescents
  5. Language and Cultural Differences
  6. Difficult Clients
  7. Difficult Co-workers

### **36. Growth and Development Across the Life Span**

#### Objectives

1. Identify factors that impact development across the life span.
2. Compare and contrast developmental theories and the driving forces that influence human development.
3. Describe the development theories that take a life span perspective.
4. Discuss life span transitions and their biologic, psychologic, and social aspects.
5. Distinguish between normal and abnormal physical and psychosocial processes of aging.
6. Explore the meaning of health and wellness for older adults.
7. Compare the developmental tasks of aging with tasks of younger cohorts.

#### Outline

- A. Overview of Development Across the Life Span

1. Child and Adolescent Development
- B. Psychosexual Theory
- C. Psychosocial Theory
- D. Interpersonal Theory
- E. Cognitive Theory
  1. Attachment Theory
- F. Behavioral Theories
  1. Classical and Operant Conditioning
  2. Social Learning Theory
- G. Moral Development
  1. Adult Development
- H. Life Stages Theories
  1. Human Motivation and Development Theory
- I. Contemporary Theorists
- J. Life Span Transitions
  1. Midlife Transitions
    - a. Role Stress in Adult Development
    - b. Gender Differences in Adult Development
  2. Life Events Framework
  3. Optimum Growth
- K. Adult Development in Later Life
  1. Overview of the Older Adult Population
    - a. Demographics
    - b. Health Status
- L. A Life Span Perspective of Aging
  1. Biologic Theories of Aging
    - a. Genetic Theory
    - b. Immunologic Theory
    - c. Cross-Linkage Theory
    - d. Free Radical Theory
  2. Sociologic Theories of Aging
    - a. Disengagement Theory
    - b. Continuity Theory
    - c. Activity Theory
  3. Psychologic Theories of Aging
  4. New Theories of Aging
- M. Process of Aging
  1. Physiologic Aging
    - a. Musculoskeletal System
    - b. Cardiovascular System
    - c. Respiratory System
    - d. Gastrointestinal System
    - e. Integumentary System

- f. Immune System
  - g. Renal System
  - h. Nervous System
  - i. Reproductive System
  - j. Endocrine System
  - k. Sensory System
  - 2. Functional Assessment
    - a. Activities of Daily Living
    - b. Instrumental Activities of Daily Living
  - 3. Psychosocial Aging
    - a. Cognition and Memory
    - b. Personality
    - c. Social Support and Interactions
    - d. Sexuality and Intimacy
    - e. Role Transitions
      - i. Retirement
      - ii. Loss of Spouse
      - iii. Grandparent Role
      - iv. Role Reversal
  - 4. Mental Assessment
- N. Human Development in the Twenty-First Century
- 1. Images of Aging
  - 2. Cultural Impact
  - 3. Refocusing on Healthy Aging
  - 4. Refocusing on Learning and Aging
  - 5. Refocusing on Creativity and Aging

### **37. Anxiety and Related Disorders**

#### Objectives

1. Discuss two etiologic paradigms to explain the four stages of anxiety.
2. Describe the defining characteristics of anxiety in the NANDA classification to differentiate between circumscribed and pervasive anxiety disorders.
3. Design a teaching plan for family members of clients with agoraphobia.
4. Appraise the coping mechanisms of trauma victims to evaluate risk for posttraumatic stress disorder.
5. Apply a cost-benefit approach to weigh the advantages of inpatient and outpatient treatment of dissociative identity disorder (formerly multiple personality disorder).
6. Apply the nursing process in managing clients with anxiety disorders.
7. Evaluate the advantages of the humanistic nursing model in providing care to clients experiencing varying levels of anxiety.
8. Discuss the usefulness of clinical rating scales in evaluating collaborative treatment outcomes of inpatients with anxiety disorders and obsessive-compulsive disorder.
9. Relate the biologic paradigm to target symptoms and therapeutic agents for psychopharmacologic intervention in anxiety and related disorders.

#### Outline

- A. Historical and Theoretic Perspectives
  1. Anxiety in the Context of Psychiatric Mental Health Nursing
  2. Influence of Hildegard Peplau
    - a. Humanistic Nursing Theory
    - b. Anxiety in Psychiatric Practice

- c. Philosophic Roots of Anxiety
- B. Etiology
  - 1. Biologic Model
    - a. Psychodynamic Model
    - b. Interpersonal Model
    - c. Environmental Model: Social Psychiatry
    - d. Behavioral Model
- C. Epidemiology
  - 1. Age of Onset
  - 2. Cultural Variance
  - 3. Comorbidity
- D. Clinical Descriptions
  - 1. Anxiety Disorders
    - a. Panic
      - i. Panic Attack
      - ii. Panic Disorder
    - b. Phobias
      - i. Agoraphobia
      - ii. Specific Phobias
      - iii. Social Phobia
    - c. Posttraumatic Stress Disorder
      - i. Acute Stress Disorder
      - ii. Generalized Anxiety Disorder
    - d. Obsessive-Compulsive Disorder
  - 2. Somatoform Disorders
    - a. Body Dysmorphic Disorder
    - b. Pain Disorder
    - c. Somatization Disorder
    - d. Conversion Disorder
    - e. Hypochondriasis
  - 3. Dissociative Disorders
    - a. Dissociative Amnesia
    - b. Dissociative Fugue
    - c. Dissociative Identity Disorder
- E. Prognosis
- F. Discharge Criteria
  - 1. The Nursing Process
- G. Assessment
- H. Nursing Diagnosis
  - 1. Nursing Diagnoses for Anxiety and Related Disorders
- I. Outcome Identification
  - 1. Generalized Anxiety Disorder
  - 2. Obsessive-Compulsive Disorder
  - 3. Posttraumatic Stress Disorder
  - 4. Somatization Disorder
  - 5. Dissociative Identity Disorder



- J. Planning
- K. Implementation
  - 1. Nursing Interventions
  - 2. Additional Treatment Modalities
    - a. Biologic Interventions
      - i. Pharmacologic Interventions
      - ii. Electroconvulsive Therapy
    - b. Psychotherapy
      - i. Behavioral Therapy
      - ii. Cognitive Behavioral Therapy

### **38. Mood Disorders: Depression and Mania**

#### Objectives

1. Describe neurobiologic, ethologic, and psychosocial theories about the etiology of mood disorders.
2. Compare and contrast the DSM-IV-TR groupings of depressive disorders and bipolar disorders.
3. Discuss the epidemiology and life course of depressive and bipolar disorders.
4. Apply the nursing process for clients with mood disorders.
5. Describe independent and collaborative interventions used by nurses and other mental health professionals for clients with mood disorders.
6. Examine personal feelings, thoughts, and reactions to clients with mood disorders that may affect the therapeutic relationship and management of client care.
7. Examine issues in the health care system that affect the care of persons with mood disorders.

#### Outline

- A. Historical and Theoretic Perspectives
- B. Etiology
  1. Neurobiological Factors
  2. Neurotransmission
    - a. Neuroendocrine Dysregulation
    - b. Chronobiology
    - c. Genetic Transmission
  3. Ethological Factors
    - a. Evolutionary Psychology/Biology
  4. Psychosocial Factors
    - a. Psychoanalytic Theory
    - b. Cognitive Theory
    - c. Hopelessness/Learned Hopelessness Theory
    - d. Life Events and Stress Theory
    - e. Personality Theory
- C. Epidemiology
  1. Mood Disorders Across the Lifespan
    - a. Mood Disorders in the Young
    - b. Mood Disorders in the Elderly
- D. Clinical Description
  1. Depressive Disorders
    - a. Major Depressive Episode, Single or Recurrent
      - i. Emotional Symptoms
      - ii. Cognitive Symptoms
      - iii. Behavioral Symptoms

- iv. Social Symptoms
    - b. Dysthymic Disorder
      - i. Emotional Symptoms
      - ii. Cognitive Symptoms
      - iii. Behavioral Symptoms
      - iv. Social Symptoms
    - c. Depressive Disorders Not Otherwise Specified
  - 2. Bipolar Disorders
    - a. Manic Episode
      - i. Emotional Symptoms
      - ii. Cognitive Symptoms
      - iii. Behavioral Symptoms
      - iv. Social Symptoms
      - v. Perceptual Symptoms
    - b. Hypomanic Episode
    - c. Cyclothymic Disorder
  - 3. Additional Types of Mood Disorders
    - a. Medical Conditions and Mood Disorders
    - b. Comorbidity
  - 4. Additional Symptom Features of Mood Disorders
- E. Prognosis and Clinical Course
- F. Discharge Criteria
- 1. Hospital Discharge Criteria
    - a. Realistic
    - b. Ideal
  - 2. Outpatient Discharge Criteria
    - a. Realistic
    - b. Ideal

### **39. The Schizophrenias**

#### Objectives

1. Analyze the various theories and models explaining schizophrenia that have evolved over time.
2. Relate the significance of the biologic theory and its current role in the development of schizophrenia.
3. Discuss the role of heredity/genetics in the development of schizophrenia according to twin studies and other familial research.
4. Explain the dopamine hypothesis and the research that distinguishes dopamine as a critical neurotransmitter in the development of schizophrenia.
5. Describe the effects of typical antipsychotics (haloperidol) on the dopamine receptors in the brain in treating positive symptoms of acute schizophrenia (hallucinations, delusions).
6. Explain the effects of atypical antipsychotics (clozapine, risperidol) on the negative symptoms of chronic schizophrenia such as apathy, impaired social skills, avolition, and decreased motivation.
7. Define dopamine (D2) and serotonin (5-HT2) receptors, and how they are impacted by typical and atypical antipsychotics.
8. Describe the assessment tools and data currently available for medical and nursing diagnoses of schizophrenia.
9. Apply the nursing process to clients experiencing the positive and negative symptoms of schizophrenia.
10. Differentiate the nursing responsibilities and approaches in caring for clients with schizophrenia from those of other disciplines.
11. Assess the situation of persons with schizophrenia and their families in the community, developing nursing care plans for prevention, aftercare, and education.

12. Compare and contrast the course of illness, symptoms, and nursing interventions for the subtypes of schizophrenia and for associated disorders such as schizoaffective disorder.
13. Evaluate the effectiveness of the various treatment modalities for schizophrenia in the clinical setting.

## Outline

- A. Historical and Theoretic Perspectives
- B. Etiology
  1. Genetic/Hereditary Factors
    - a. Stress-Diathesis Model and Genetic Influences
  2. Dopamine Hypothesis
    - a. Dopamine Hypothesis and Typical Antipsychotic Effect
    - b. Dopamine Hypothesis and Illicit Drugs
  3. Other Neurotransmitters Associated with Schizophrenia
    - a. New Research on Atypical Effect on Serotonin
    - b. Atypical Effect on N-Methyl-D-Aspartate, Glutamate, and Acetylcholine
      - i. Impact on Cognition, Mood Symptoms, and Dyskinesias
  4. Other Biologic Research
    - a. Hans Selye (Medical Model)
    - b. Callista Roy (Nursing Model)
    - c. Neuroanatomic and Neurochemical Factors
    - d. Neurotransmitter-Endocrine Interactions
    - e. Immunologic Factors
    - f. Structural and Functional Factors
      - i. Magnetic Resonance Imaging
      - ii. Electroencephalogram
      - iii. Positron Emission Tomography
  5. Stress, Disease, Trauma, and Drug Abuse
  6. Psychodynamic Theories
    - a. Psychoanalytic and Developmental Theories
    - b. Family Theory Model
  7. Cultural and Environmental Theories
  8. Learning Theory
- C. Epidemiology
  1. Later Onset, Premorbid Functioning, and Outcomes
    - a. Age, Gender, and Outcomes
      - i. Older-Adult Onset
      - ii. Fetal Exposure to Disease and Trauma
  2. Marital Status, Rates of Reproduction, and Mortality
  3. Relapse Prevention and Research
  4. Socioeconomic Class
  5. Culture, Geography, and Seasonal Influences
- D. Clinical Description
  1. Paranoid Schizophrenia
  2. Disorganized Schizophrenia
  3. Catatonic Schizophrenia
  4. Undifferentiated Schizophrenia
  5. Residual Schizophrenia
  6. Schizophreniform Disorder
  7. Schizoaffective Disorder
  8. Symptom Profiles of the Schizophrenias
    - a. Perceptual Disturbances
    - b. Thought Disturbances
    - c. Emotional Disturbances

- d. Behavioral Disturbances
- 9. Social Competence Profiles
  - a. Biologic Profiles
- E. Prognosis
- F. Discharge Criteria
- G. Nursing Process
- H. Treatment Modalities
  - 1. Psychopharmacology
    - a. Atypical Antipsychotic Effect on Serotonin and Dopamine
    - b. Atypical Impact on Anticholinergic Effects
    - c. Clinical Trials Comparing Typical and Atypical Emergency
    - d. Medication
    - e. The Role of the Nurse in Pharmacotherapy
    - f. Interventions for Agitation Symptoms
  - 2. Somatic Therapy
  - 3. Milieu Therapy
  - 4. Psychosocial Rehabilitation
  - 5. Individual Psychotherapy
  - 6. Group Therapy
  - 7. Family Therapy
  - 8. Behavior Modification
  - 9. Cognitive-Behavioral Therapy
  - 10. Guided Imagery
  - 11. Assertiveness Training
  - 12. Exercise, Movement Therapy, and Dance Therapy
  - 13. Occupational and Recreational Therapy
  - 14. Community Client-Family Programs
  - 15. Therapeutic Methods to Prevent and Manage Violence

## **40. Personality Disorders**

### Objectives

1. Identify three elements of personality development as described by Freud in the psychosexual stages of development.
2. Discuss two contributions made by Margaret Mahler and Otto Kernberg to object relations theory.
3. Name two biologic indices that are often abnormal in clients with a personality disorder.
4. Explain one behavior, in one or two words, that differentiates between Clusters A, B, and C of Axis II in the DSM-IV-TR
5. Recognize two nursing diagnoses for each cluster of the personality disorders.
6. Define splitting behaviors, and list two nursing interventions that effectively challenge the client's "black or white" view of the world.
7. Apply the nursing process in managing clients with personality disorders.
8. Identify a plan of care for two different personality disorders, including two treatment modalities that are collaborative and two outcome criteria relevant to the client's DSM-IV-TR diagnosis.

### Outline

- A. Definition of Personality Disorders
  - 1. Definition of Axis II in DSM-IV-TR
- B. Theories of Personality Development
  - 1. Freudian Theories
  - 2. Object Relations
    - a. Separation-Individuation Phase
    - b. Kernberg's Theories
- C. Biologic Contributions to Personality Disorders
- D. Clinical Description and Epidemiology
  - 1. Cluster A Personality Disorders
  - 2. Cluster B Personality Disorders
  - 3. Cluster C Personality Disorders
  - 4. Unspecified Personality Disorders
- E. Prognosis
- F. Discharge Criteria
  - 1. The Nursing Process
- G. Assessment
  - 1. Nursing Diagnosis
    - a. Nursing Diagnoses for Paranoid, Schizoid, and Schizotypal Personality Disorders (Cluster A)
    - b. Nursing Diagnoses for Antisocial, Borderline, Histrionic, and Narcissistic Personality Disorders (Cluster B)
    - c. Nursing Diagnoses for Avoidant, Dependent, and Obsessive-Compulsive Personality Disorders (Cluster C)
- H. Outcome Identification
- I. Planning
- J. Implementation
  - 1. Nursing Interventions
  - 2. Additional Treatment Modalities
    - a. Occupational Therapy
    - b. Art Therapy
    - c. Music Therapy
    - d. Movement Therapy
    - e. Recreational Therapy
    - f. Medication Therapy
    - g. Individual Therapy
    - h. Group Therapy
    - i. Family Therapy
    - j. Milieu Therapy

#### **41. Substance-Related Disorders**

##### Objectives

- 1. Trace the historical evolution of substance use and abuse.
- 2. Identify major theories and research findings related to substance abuse and dependence.

3. Compare and contrast the etiologic factors related to substance abuse and dependence.
4. Describe the effects of alcohol and other drugs on biologic, psychosocial, cultural, cognitive, and spiritual dimensions of clients across the life span.
5. Discuss disease concepts specific to substance abuse and addiction (substance dependence).
6. Apply the nursing process for clients with substance-related disorders.
7. Identify community resources used in rehabilitating clients with substance-related disorders.
8. Describe the current treatment modalities in managing the care of clients with substance-related disorders.

## Outline

- A. Historical and Theoretic Perspectives
- B. Etiology
  1. Biologic Theories
  2. Psychologic Theories
  3. Family Theories
  4. Learning Theories
- C. Epidemiology
  1. Demographic Variables
  2. Age
  3. Gender Differences
  4. Race/Ethnicity
  5. Education
  6. Employment
  7. Discussion
- D. Substance Abuse in Special Populations
  1. Perinatal Concerns
  2. Adolescent Substance Abuse
  3. Impaired Professionals
- E. Dual Diagnosis
  1. Persons with HIV Disease and/or Hepatitis
- F. Clinical Description
  1. Alcohol Abuse
    - a. Alcohol Intoxication
    - b. Effects on the Neurological System
    - c. Effects on the Liver
    - d. Effects on the Gastrointestinal Tract
    - e. Effect on the Cardiovascular System
    - f. Other Effects
      - i. Blood Cells/Immune System
      - ii. Cancer
      - iii. Sleep
      - iv. Muscles/Bones
      - v. Hormones
      - vi. Nutrition
      - vii. Accidents
  2. Abuse of Other Drugs
    - a. Prescription Drug Abuse
    - b. Sedative-, Hypnotic-, or Anxiolytic-Related Drugs
    - c. Stimulants
    - d. Opioids

- e. Nondependence-Producing Drugs of Abuse
  - f. Anabolic-Androgenic Steroids
  - g. Cocaine
  - h. Hallucinogens
  - i. Phencyclidine and Ketamine
  - j. Nicotine
  - k. Cannabis
  - l. Inhalants
  - m. Club Drugs
  - 3. Multidrug Abuse and Dependence
- G. Prognosis
- H. Discharge Criteria
- 1. The Nursing Process
- I. Assessment
- 1. Physical Examination
  - 2. Screening Instruments
  - 3. Laboratory Tests
- J. Nursing Diagnosis
- 1. Nursing Diagnoses for Substance-Related Disorders
- K. Outcome Identification
- L. Planning
- M. Implementation
- 1. Withdrawal/Detoxification Treatment
    - a. CNS Depressants
    - b. Alcohol
    - c. Opioids
    - d. Stimulants
    - e. Caffeine
    - f. Nicotine
  - 2. Nursing Interventions
  - 3. Additional Treatment Modalities
    - a. Psychotherapy
    - b. Individual Therapy
    - c. Group Therapy
    - d. Family Therapy
    - e. Behavioral Therapy
    - f. Naltrexone Antagonist Pharmacotherapy
    - g. Relapse Prevention
    - h. Harm Reduction
    - i. Twelve-Step Support Groups
    - j. Inpatient Care
  - 4. Outpatient Care
    - a. Halfway Houses
    - b. Day or Night Hospitalization
    - c. Medications
    - d. Methadone and LAAM Treatment Programs
  - 5. Community Based Organizations and Faith and Spiritual Communities

## 42. Delirium, Dementia, and Amnestic and Other Cognitive Disorders

### Objectives

1. Analyze the various theories of the nature and development of Alzheimer's disease and discuss rationale of the most currently accepted theories.
2. Describe the pathophysiologic changes in the brain related to Alzheimer's disease.
3. Classify the progressive symptoms of Alzheimer's disease into three stages (mild, moderate, severe).
4. Differentiate between the different types of dementia (reversible/irreversible).
5. Apply the nursing process in managing clients with cognitive disorders.
6. Explain and plan therapeutic activities for clients experiencing dementia.

### Outline

- A. Historical and Theoretic Perspectives
- B. Etiology
  1. The Irreversible Dementias
    - a. Angiopathy and Blood-Brain Barrier Incompetence
    - b. Neurotransmitter Deficiencies
    - c. Abnormal Proteins and their Products
    - d. Genetic Defects
    - e. Nature of Alzheimer's Disease
    - f. Vascular Dementia (Multi-infarct Dementia)
    - g. Parkinson's Dementia
    - h. Pick's Disease
    - i. Creutzfeldt-Jakob Disease
    - j. Diffuse Lewy Body Disease
    - k. Progressive Supranuclear Palsy
    - l. Down Syndrome Dementia
  2. Cerebrovascular Accidents
- C. The Reversible Dementias
  1. Disorders Often Confused with Dementia
    - a. Delirium
    - b. Amnestic Disorders
- D. Epidemiology
- E. Clinical Description
  1. Alzheimer's Disease
    - a. Stages of Alzheimer's Disease
      - i. Stage 1: Mild
      - ii. Stage 2: Moderate
      - iii. Stage 3: Severe
- F. Prognosis
- G. Discharge Criteria
  1. Caregivers
    - a. The Nursing Process
- H. Assessment
  1. Assessment Environment
  2. Cognitive Assessment Tools
    - a. Mini-Mental Status Examination
    - b. Dementia Severity Rating Scale



- c. Geriatric Depression Scale
  - 3. Neurologic Deficits
    - a. Perception and Organization
    - b. Attention Span
    - c. Language
    - d. Memory
    - e. Emotional Control
    - f. Reasoning and Judgment
  - 4. Emotional Status
    - a. Mood and State of Mind
    - b. Depression
    - c. Functional Ability
    - d. Behavior
  - 5. Physical Manifestations
  - 6. Physical and Laboratory Examination
- I. Nursing Diagnosis
  - 1. Nursing Diagnoses for Delirium, Dementia, and Amnestic and Other Cognitive Disorders
- J. Outcome Identification
- K. Planning
  - 1. Short-Term and Long-Term Goals
  - 2. Flexibility and Change
  - 3. Collaboration
- L. Implementation
  - 1. Nursing Interventions
  - 2. Additional Treatment Modalities
    - a. Interdisciplinary Team
    - b. Pharmacologic Interventions
      - i. Experimental Drugs in the Therapy of Alzheimer's Disease
    - c. Therapeutic Activity Program

### **43. Disorders of Childhood and Adolescence**

#### Objectives

1. Describe child/adolescent developmental disorders such as pervasive developmental disorders, Asperger's disorder, and mental retardation.
2. Identify attention deficit/hyperactivity disorders in children and adolescents.
3. Distinguish between oppositional defiant disorder and conduct disorder.
4. Describe tic disorders, separation anxiety, and elimination disorders.
5. Learn the components of a thorough nursing assessment and application of the nursing process for children or adolescents.

#### Outline

- A. Historical and Theoretic Perspectives of Mental Disorders
  - 1. Mental Retardation
    - a. Etiology and Epidemiology
    - b. Clinical Description and Prognosis
    - c. Types of Mental Retardation

- i. Mild
    - ii. Moderate
    - iii. Severe
    - iv. Profound
  - 2. Associated Features
- B. Elimination Disorders
  - 1. Encopresis
    - a. Etiology and Epidemiology
    - b. Clinical Description
    - c. Associated Features
      - i. Prognosis
  - 2. Enuresis
    - a. Etiology and Epidemiology
    - b. Clinical Description and Associated Features
    - c. Prognosis
- C. Pervasive Developmental Disorders
  - 1. Autistic Disorder
    - a. Epidemiology
    - b. Clinical Description
      - i. Behavioral Manifestations
      - ii. Emotional Manifestations
      - iii. Cognitive Manifestations
      - iv. Perceptual Manifestations
      - v. Social Manifestations
    - c. Prognosis
  - 2. Asperger's Disorder
  - 3. Rett's and Childhood Disintegrative Disorders
- D. Attention Deficit/Hyperactivity Disorder
  - 1. Epidemiology
  - 2. Etiology
  - 3. Clinical Description
    - a. Behavioral Manifestations
    - b. Emotional Manifestations
    - c. Cognitive Manifestations
    - d. Perceptual Manifestations
    - e. Social Manifestations
  - 4. Prognosis
- E. Developmental Disorders
  - 1. Etiology
  - 2. Epidemiology
  - 3. Clinical Description
    - a. Learning Disorders
    - b. Coordination Disorders
    - c. Communication Disorders
  - 4. Prognosis
- F. Separation Anxiety Disorder
  - 1. Etiology and Epidemiology
  - 2. Clinical Description
    - a. Behavioral Manifestations
    - b. Emotional Manifestations

- c. Cognitive Manifestations
    - d. Perceptual Manifestations
    - e. Social Manifestations
  - 3. Prognosis
- G. Tic Disorders
  - 1. Tourette's Disorder
    - a. Etiology and Epidemiology
    - b. Clinical Description
      - i. Behavioral Manifestations
      - ii. Emotional Manifestations
      - iii. Cognitive Manifestations
      - iv. Perceptual Manifestations
      - v. Social Manifestations
    - c. Prognosis
  - 2. Other Tic Disorders
    - a. Chronic Motor or Vocal Tic Disorder
    - b. Transient Tic Disorder
    - c. Tic Disorder Not Otherwise Specified
- H. Disruptive Behavior Disorders
  - 1. Conduct Disorder
    - a. Etiology
    - b. Epidemiology
    - c. Clinical Description
      - i. Behavioral Manifestations
      - ii. Emotional Manifestations
      - iii. Perceptual Manifestations
      - iv. Cognitive Manifestations
      - v. Social Manifestations
    - d. Prognosis
  - 2. Oppositional Defiant Disorder
    - a. Etiology
    - b. Epidemiology
    - c. Clinical Description
      - i. Behavioral Manifestations
      - ii. Emotional Manifestations
      - iii. Cognitive and Perceptual Manifestations
      - iv. Social Manifestations
    - d. Prognosis
- I. Discharge Criteria
- J. Other Problem Areas
  - 1. Adolescent Suicide
  - 2. Youth Violence
- K. Adult Disorders in Children and Adolescents
  - 1. Substance Abuse
  - 2. Depression
  - 3. Bipolar Disorder
  - 4. Psychosis
  - 5. Anxiety Disorders
- L. The Nursing Process

- M. Assessment
  - 1. Developmental Stage
  - 2. Physical Assessment
  - 3. Family Life
  - 4. Activities of Daily Living
- N. Nursing Diagnosis
- O. Outcome Identification
- P. Planning
- Q. Implementation
  - 1. Therapeutic Play
  - 2. The Adolescent
  - 3. Behavior Modification Programs
  - 4. Nursing Interventions
  - 5. Additional Treatment Modalities

#### **44. Eating Disorders**

##### Objectives

1. Identify the behavioral and psychologic symptoms of anorexia nervosa and bulimia nervosa.
2. Compare and contrast the medical complications of anorexic and bulimic behavior.
3. Analyze the complex interplay of biologic, sociocultural, familial, and psychologic factors that contribute to the etiology of eating disorders.
4. Explain the "vicious cycle" of eating disorder behavior.
5. Discuss the psychologic issues that underlie eating disorder behavior.
6. Describe the type of therapeutic relationship that is most effective with clients with eating disorders, including the approach and attitude the nurse should demonstrate to achieve this relationship.
7. Apply the nursing process for clients with eating disorders.

##### Outline

- A. Historical and Theoretic Perspectives
  - 1. Incidence in History
- B. Etiology
  - 1. Biologic Factors
  - 2. Sociocultural Factors
  - 3. Psychologic Factors
  - 4. Familial Factors
- C. Epidemiology
  - 1. Sex Ratio
  - 2. Age of Onset
  - 3. Cross-Cultural Studies
  - 4. Mortality
  - 5. Comorbidity

- D. Clinical Description
- E. Prognosis
- F. Discharge Criteria
- G. The Nursing Process
- H. Treatment Modalities
  - 1. Biologic Modalities
  - 2. Pharmacologic Modalities
  - 3. Psychotherapeutic Modalities
  - 4. Individual Psychotherapy
  - 5. Behavioral Therapy
  - 6. Cognitive Therapy
  - 7. Family Therapy
  - 8. Group Therapy
  - 9. Expressive Therapies
  - 10. Adjunctive Therapy
  - 11. Occupational Therapy
  - 12. Nutrition Education and Counseling
  - 13. Interdisciplinary Treatment Team
  - 14. Community Support Groups

#### **45. Sexual Disorders**

##### Objectives

1. Discuss possible etiologies for the origins of sexual dysfunctions.
2. Provide rationales for the incidence of sexual dysfunctions.
3. Describe the clinical picture of various sexual dysfunctions using the DSM-IV-TR and NANDA diagnoses.
4. Analyze the efficacy of various treatment modalities.
5. Apply the nursing process in caring for clients with sexual dysfunctions.
6. Describe the different diagnoses of the sex offender (paraphilic) population.
7. Discuss the focus of treatment for paraphilic disorders.
8. Explain at least two types of treatment and effects on illness symptomatology.
9. Analyze the relationship between treatment and recidivism.
10. Apply the nursing process in caring for clients with sexual (paraphilic) disorders.

##### Outline

- A. Historical and Theoretic Perspectives
- B. Etiology
  - 1. Physical/Biological Factors
  - 2. Psychological/Behavioral Factors
  - 3. Couple-Oriented Factors
- C. On the Horizon
- D. Epidemiology

- E. Clinical Description
- F. Prognosis
- G. Discharge Criteria
- H. Paraphilias
  - 1. Historical and Theoretic Perspectives
  - 2. Legal Implications
  - 3. Forensic Psychiatry and Paraphilias
  - 4. The Sexually Violent Predator Act
  - 5. Etiology
  - 6. Biologic Factors
  - 7. Hereditary/Environmental Factors
  - 8. Epidemiology
  - 9. Clinical Description
  - 10. Prognosis
  - 11. Discharge Criteria
  - 12. The Nursing Process
  - 13. Selective Serotonin Reuptake Inhibitors
  - 14. Psychotherapy/Psychoeducation Groups

## **46. Adjustment Disorders**

### Objectives

1. Describe five major criteria for an adjustment disorder.
2. Analyze the relationship of life events to adjustment disorders.
3. Discuss the implications of the diagnosis of adjustment disorder with depressed mood for the nonpsychiatric hospitalized client.
4. Apply the nursing process to clients who exhibit symptoms of adjustment disorders. Explain the major therapeutic goals for clients who have a diagnosis of adjustment disorder.

### Outline

- A. Historical and Theoretic Perspectives
- B. Etiology
  - 1. Crisis and Stress Models
    - a. Precipitating Factors
    - b. Loss
  - 2. Developmental Influences
  - 3. Cultural, Social, and Psychologic Influences
  - 4. Contributions of Nursing Research
- C. Epidemiology
- D. Clinical Description
- E. Prognosis
- F. Discharge Criteria

- G. The Nursing Process
- H. Treatment Modalities

#### **47. Interactive, Activity, and Electroconvulsive Therapies**

##### Objectives

1. Analyze the concepts of boundary, safety, and trust development as they relate to individual, milieu, and group therapy.
2. Discuss the foundation that supports the various phases of therapies.
3. Identify individual characteristics and attitudes that affect one's ability to function as a psychiatric mental health nurse.
4. Describe the appropriate tasks for individual, milieu and group therapies and how the nurse promotes these tasks.
5. Define transference and countertransference and their impact on the therapeutic relationship.
6. Distinguish between occupational, recreational, art, music, psychodrama, and movement/dance therapies.
7. Identify the goals, objectives and expected client outcomes for therapeutic activities.
8. Describe the effectiveness of the nurse's role for each therapeutic activity.
9. Discuss the significance of a multidisciplinary approach to therapeutic activities.
10. Describe electroconvulsive therapy (ECT) as a biologic therapy.
11. Compare and contrast modern ECT with its early use.
12. Discuss the current role of ECT as a treatment for clients with depression and other disorders.

##### Outline

###### Interactive Therapy

- A. The Therapeutic Relationship
  1. Social vs. Therapeutic Relationships
  2. Roles in the Therapeutic Relationship
  3. Aspects of the Therapeutic Relationship
  4. Personal Qualities of Effective Helpers
- B. Preparation for Interactive Therapy
  1. Self-Awareness
  2. Areas for Self-Assessment
    - a. Need to Be Liked
    - b. Being Judgmental
    - c. Responsibility
    - d. Potential for Human Growth
- C. Concerns Experienced by the Nurse
- D. Development of a Therapeutic Relationship
  1. Boundary Development and Maintenance
  2. Safety Development
  3. Trust Development
- E. Phases of the Therapeutic Relationship

1. Orientation Phase
    - a. Application to Short-Term Psychiatric Hospitalization
    - b. Work of the Orientation Phase
    - c. Patient Responses to Orientation
    - d. Assessment
      - i. Themes
      - ii. Observations
      - iii. Strengths
      - iv. Nursing Care Plan
  2. Working Phase
    - a. Identifying and Clarifying the Problem
    - b. Safety Development
    - c. Translating Understanding into Action
    - d. Roles
    - e. Trust Development
  3. Termination Phase
    - a. Before Termination
    - b. Client Responses to Termination
    - c. Nurse's Role in Termination
- F. Therapeutic Milieu
1. Historical Development
  2. Principles of Milieu Therapy
  3. Boundary, Safety, and Trust Development in a Milieu
    - a. Boundary
    - b. Safety
    - c. Trust
- G. Group Therapy
1. The Group as a Microcosm
  2. Roles
  3. Norms
  4. Universal Tasks
  5. Types of Groups
  6. Aspects of Group Therapy
    - a. Cohesiveness
    - b. Therapeutic Factors
  7. Inpatient Groups
  8. Group Boundaries
    - a. Safety and Trust
- H. Family Therapy
1. Theoretic Perspective
    - a. Family Therapy and Systems Theory
  2. Goals
  3. Settings for Family Therapy
  4. Family Role and Task Confusion
- I. Activity Therapies
- J. Occupational Therapy
- K. Recreational Therapy
- L. Electroconvulsive Therapy



1. Historical Perspective
2. Statistics
3. Modern Electroconvulsive Therapy
4. Informed Consent
5. Preparation for Electroconvulsive Therapy
6. Electroconvulsive Therapy Procedure
7. Post-Electroconvulsive Therapy Procedure
8. The Nurse's Role in Electroconvulsive Therapy

## **48. Psychopharmacology**

### Objectives

1. Describe and discuss the pharmacologic issues related to antipsychotic medication therapy.
2. Describe and discuss the pharmacologic issues related to antidepressant therapy.
3. Describe and discuss the pharmacologic issues related to mood stabilization therapy.
4. Describe and discuss the pharmacologic issues related to anxiolytic and hypnotic medication therapy.
5. Describe and discuss the pharmacologic issues related to stimulant medication therapy.
6. Explain nonpharmacologic modalities related to the treatment of individuals with mood disorders.
7. Explain the nursing issues related to psychopharmacology and nonpharmacologic treatment and modalities.

### Outline

- A. Mode and Mechanism of Drug Action
  1. Neurotransmitters
    - a. Acetylcholine
    - b. Dopamine
    - c. Serotonin
    - d. Glutamate
  2. Psychotropic Pharmacotherapy Assessment
  3. Variables Affecting Drug Therapy
- B. Antipsychotic Medications
  1. Psychosis
  2. The Dopamine Hypothesis of Psychosis
    - a. Positive Symptoms
    - b. Negative Symptoms
    - c. Cognitive Function Impairments
    - d. Aggressive Symptoms
    - e. Depressive/Anxious Symptoms
  3. Indications
  4. Goals of Therapy
  5. Absorption, Distribution, Metabolism and Excretion
  6. Drug Level Monitoring
  7. Clinical Use and Efficacy
  8. Treatment Therapy for Acute Episodes
- C. Adverse Effects of Antipsychotics and Nursing Management
  1. Extrapyramidal Side Effects

2. Dystonias
3. Pseudoparkinsonism
4. Akathisia
5. Tardive Dyskinesia
6. Anticholinergic Side Effects
7. Cardiovascular Side Effects
  - a. Postural Hypotension
  - b. Arrhythmias, Palpations (Changes in Heart Rhythm)
  - c. Changes in QT Intervals
8. Weight Gain
9. Neuroleptic Malignant Syndrome
10. Photosensitivity
11. Poikilothermia
12. Galactorrhea and Gynecomastia

D. Depot Antipsychotics

1. Clinical Use and Dosage Regimen
2. Fluphenazine Decanoate Injection
  - a. Dosage Conversion
3. Haloperidol Decanoate Injection
  - a. Dosage Conversion
4. Administration of Depot Injections

E. Atypical Antipsychotics

1. Clozapine
  - a. Mechanism of Action
  - b. Clinical Use
  - c. Risks
  - d. Side Effects
    - i. Agranulocytosis
    - ii. Sedation
    - iii. Anticholinergic Side Effects
    - iv. Extrapyramidal Side Effects
    - v. Neuroleptic Malignant Syndrome
    - vi. Cardiovascular Effects
    - vii. Weight Gain
    - viii. Hypersalivation
    - ix. Fever
    - x. Seizures
2. Risperidone
  - a. Clinical Use
  - b. Side Effects
    - i. Extrapyramidal Side Effects
    - ii. Tardive Dyskinesia
    - iii. Cardiovascular Effects
    - iv. Weight Gain
    - v. Hyperprolactinemia
3. Olanzapine
  - a. Clinical Use
  - b. Side Effects
    - i. Sedation and Anticholinergic Side Effects
    - ii. Weight Gain
    - iii. Seizures
    - iv. Hyperprolactinemia

4. Quetiapine
    - a. Clinical Use
    - b. Side Effects
      - i. Sedation
      - ii. Cardiovascular Effects
      - iii. Cataracts
      - iv. Weight Gain
      - v. Cholesterol and Triglycerides Elevations
  5. Ziprasidone
    - a. Clinical Use
    - b. New Products
      - i. Ziprasidone Injection
    - c. Preparation of Administration
    - d. Risks and Contraindications
    - e. Side Effects
  6. Inappropriate Use of Atypical Antipsychotics
- F. Antidepressants
1. Indications
  2. Biologic Theory
  3. Major Classes of Antidepressants
    - a. 1. Selective Serotonin Reuptake Inhibitors
  4. Efficacy
  5. Half-Lives
  6. Cost
  7. Serotonin Syndrome
  8. Adverse Effects of Selective Serotonin Reuptake Inhibitors
  9. Discontinuation of Therapy
  - 10.
- G. Tricyclic Antidepressants
1. Anticholinergic Side Effects
  2. Monitoring Parameters
  3. Discontinuation of Therapy
- H. Monoamine Oxidase Inhibitors
1. Mode of Action
  2. Clinical Use and Efficacy
  3. Side Effects
  4. Drug-Drug and Drug-Food Interactions
  5. Client Education
  6. Monoamine Oxidase Inhibitor Withdrawal Syndrome
- I. Other Antidepressants
1. Venlafaxine
    - a. Formulations and Dosage
    - b. Side Effects
    - c. Nefazodone
    - d. Half-life
    - e. Dosage
    - f. Side Effects
    - g. Drug Interactions
  2. Trazodone
    - a. Mechanism of Action
    - b. Therapeutic Use
    - c. Dosage

- d. Side Effects
- e. Client Education
- 3. Bupropion
  - a. Mechanism of Action
  - b. Half-Life and Dosing Schedule
  - c. Side Effects
  - d. Other Therapeutic Uses
- 4. Mirtazapine
  - a. Mechanism of Action
  - b. Dosage
  - c. Other Uses
  - d. Side Effects
- J. Augmentation Therapy in Treatment of Major Depressive Disorder
  - 1. Psychostimulants
    - a. Dextroamphetamine and Methylphenidate
  - 2. Lithium
  - 3. Thyroid Therapy
  - 4. Herbal Supplements
  - 5. Nonpharmacologic Intervention
    - a. Electroconvulsive Therapy
- K. Bipolar Disorders
  - 1. Lithium
    - a. Therapeutic Dose Regimen
    - b. Pharmacokinetics
    - c. Side Effects and Toxicity
      - i. Strategies for Management of Side Effects
      - ii. Strategies for Managing Severe Toxicity and Overdose
    - d. Clinical Use
      - i. Acute Treatment
    - e. Other Uses of Lithium
    - f. Client Education
  - 2. Valproate
    - a. Absorption, Distribution, Metabolism and Excretion
    - b. Dosage and Titration Regimen
    - c. Side Effects
      - i. Hepatotoxicity
      - ii. Persistent GI Distress
      - iii. Tremor
      - iv. Sedation
      - v. Hematological Effects
      - vi. Serious Adverse Effects
    - d. Potential Drug-Drug Interactions
    - e. Client Education
    - f. Other Uses
  - 3. Carbamazepine
    - a. Mechanism of Action
    - b. Absorption, Distribution, Metabolism, and Excretion
    - c. Dose Regimen and Monitoring Parameters
    - d. Side Effects and Toxicity
      - i. Management of Side Effects
    - e. Client Education
    - f. Drug-Drug Interactions

4. Oxcarbazepine
    - a. Mechanism of Action
    - b. Risks
    - c. Side Effects
  5. Lamotrigine
    - a. Dosage Titration and Risk
    - b. Side Effects
    - c. Drug Interactions
  6. Gabapentin
    - a. Absorption, Distribution, Metabolism and Excretion
    - b. Dosage
    - c. Risks
    - d. Side Effects
  7. Topiramate
    - a. Absorption, Distribution, Metabolism and Excretion
    - b. Dosage
    - c. Risks
    - d. Side Effects
- L. New Drug Therapy in the Treatment of Bipolar Disorders
1. Tiagabine
    - a. Absorption, Distribution, Metabolism, and Excretion
    - b. Dosage
    - c. Risks
    - d. Side Effects
    - e. Drug Interactions
  2. Zonisamide
    - a. Mode of Action
    - b. Indications and Clinical Uses
  3. Levetiracetam
- M. Treatment of Mania
1. Atypical Antipsychotics for Mania
  2. Combination of Mood Stabilizers
  3. Bipolar Depression
- N. Maintenance Therapy and Lifelong Interventions
- M. Anxiety Disorders and Generalized Anxiety Disorder
1. Antidepressants
  2. Benzodiazepines
  3. Buspirone
- N. Panic Disorder
1. Antidepressants
  2. Benzodiazepines
  3. Anticonvulsants
  4. Beta Blockers
- O. Obsessive-Compulsive Disorder
1. Antidepressants
    - a. Drug Interactions
    - b. Tricyclic Antidepressants
  2. Augmentation Therapy
    - a. Dopamine Blocking Agents

- b. Buspirone
- P. Posttraumatic Stress Disorder
- 1. Antidepressants
  - 2. Benzodiazepines
  - 3. Mood Stabilizers
- Q. Generalized Social Phobia (Social Anxiety Disorder)
- 1. Antidepressants
  - 2. Benzodiazepines
  - 3. Gabapentin
- R. Herbal Therapy
- 1. Kava
    - a. Side Effects
    - b. Herb Drug Interactions
  - 2. Valerian
    - a. Side Effects
- S. Client Education
- T. Hypnotics / Benzodiazepines
- 1. Triazolam
    - a. Pharmacokinetics
    - b. Temazepam
      - i. Pharmacokinetics
    - c. Flurazepam
      - i. Pharmacokinetics
  - 2. Nonbenzodiazepine Hypnotics
    - a. Zolpidem
      - i. Pharmacokinetics
      - ii. Dose
      - iii. Side Effects
      - iv. Drug Interactions
    - b. Zaleplon
      - i. Pharmacokinetics
      - ii. Dose
      - iii. Side Effects
  - 3. Other Agents Used for Sleep
    - a. Trazodone
      - i. Mechanism of Action
      - ii. Pharmacokinetics
    - b. Chloral Hydrate
      - i. Mechanism of Action
      - ii. Pharmacokinetics
      - iii. Dose
      - iv. Side Effects
    - c. Diphenhydramine
      - i. Pharmacokinetics
      - ii. Dose
      - iii. Side Effects
    - d. Melatonin
    - e. Herbal Products
      - i. Kava
      - ii. Valerian

f. Barbiturates

- U. Drug Treatment in Aggressive and Violent Behaviors
- V. Factors Influencing the Choice of Medications Used
- W. Acute Agitation and Aggression
  - 1. Antipsychotics
    - a. Haloperidol
  - 2. Benzodiazepines
- X. Chronic Aggression
  - 1. Antipsychotics
    - a. Buspirone
  - 2. Anticonvulsants
  - 3. Antidepressants
  - 4. Antihypertensive Medications
- Y. Special Considerations for Children

#### **49. Complementary and Alternative Therapies**

##### Objectives

1. Describe the philosophic differences between alternative and traditional (conventional, allopathic therapies).
2. Discuss the influence of mind-body interrelationships on wellness and health promotion.
3. Identify the current alternative therapies used in treatment of physiologic and psychologic health problems, particularly chronic disease management.
4. Discuss the nurse's role in providing holistic nursing care.
5. Discuss the challenges for nurses in providing care to an ever-increasing diversity of cultural groups entering the Western health care system.
6. Discuss the impact of alternative therapies on the nurse's role in applying therapeutic interventions.
7. Describe incorporation of alternative therapies in the plan of care.
8. Discuss client education concerning concurrent use of alternative therapies and traditional (conventional, allopathic) therapies.
9. Discuss the impact of alternative therapies on nursing practice, education, and research.

##### Outline

- A. Alternative Therapy Fields
- B. Historical Overview
  - 1. Ancient Cultural Beliefs
  - 2. Biomedicine Model Concepts
  - 3. Holistic Model Concepts
  - 4. Rise in Dominance of the Biomedical Model
  - 5. Merging Philosophies
- C. Current Issues

1. The Changing Complexion of Health Care
  2. Barriers to Acceptance of Alternative Therapies
  3. Impact of the *Healthy People 2000* Report
- D. Exploring Effectiveness of Alternative Therapies
1. The Informed Client
  2. The Nurse's Role
- E. Application of Selected Alternative Therapies: An Overview
1. Mind-Body Interventions
    - a. Meditation
    - b. Prayer
    - c. Yoga
    - d. Biofeedback
    - e. Use of the Arts
    - f. Humor
    - g. Exercise
    - h. Animal-Assisted Therapy
    - i. Psychotherapy and Hypnosis
  2. Bioelectromagnetics
  3. Alternative Systems of Medical Practice
    - a. Traditional Chinese Medicine
      - i. Acupuncture
    - b. Ayurveda/Ayurvedic Medicine
    - c. Homeopathic Medicine
    - d. Naturopathy
    - e. Environmental Medicine
    - f. Culture-Based Community Medicines
    - g. Manual Healing Methods
      - i. Osteopathy and Chiropractic Medicines
      - ii. Massage
      - iii. Acupressure
      - iv. Foot Reflexology
      - v. Therapeutic Touch
  4. Pharmacologic and Biologic Treatments
    - a. Herbal Medicine
  5. Diet and Nutrition

## 50. Crisis: Concepts and Interventions

### Objectives

1. Describe the historical context of crisis intervention and new directions in the field.
2. Describe individual crisis triggers (external and internal).
3. Discuss the potential psychologic effects of disasters and terrorism.
4. Describe approaches to treating disaster threats and disaster victims.
5. Discuss crisis assessment, intervention, planning and prevention strategies, including assessment "in the field" and "in the office."
6. Describe barriers to effective crisis intervention.

### Outline

- A. Historical Context



- B. Crisis
  - 1. Definitions and Description
    - a. External (Situational) Crises
    - b. Internal (Subjective) Crises
    - c. Disasters
- C. Methods of Crisis Intervention
  - 1. Principles
  - 2. Components
  - 3. Assessment in the Field
  - 4. Assessment in the Office
- D. Planning and Executing Therapeutic Intervention
  - 1. General Approach to Crisis Intervention
- E. Resolution of the Crisis
  - 1. The Summary
  - 2. The Open Connection
  - 3. Anticipatory Planning
- F. Barriers to Effective Crisis Intervention
  - 1. Failures to Learn From Experience
  - 2. Existing Mental Disorder
  - 3. Secondary Gain
  - 4. Therapist-Client Boundary Problems
- G. Demands on the Psychiatric Nurse Working in Crisis Intervention

## **51. Violence: Abuse, Neglect, and Rape**

### Objectives

1. Consider various theories of family violence for application to nursing practice.
2. Discuss conditions that discourage a battered woman from leaving her violent situation.
3. Discuss the role of "control" in the etiology of domestic violence.
4. Compare the child physical offender with the child sexual offender.
5. Describe the common characteristics of victims of family violence.
6. Construct examples of how women who are raped are revictimized by society.
7. Apply the nursing process in the care of victims of family violence.

### Outline

- A. Definitions of Violence and Abuse
- B. Theories of Family Violence
  - 1. The Psychiatric Mental Illness Model
  - 2. Social Learning Theory
  - 3. Sociologic Theory
  - 4. Anthropologic Theory
  - 5. Feminist Theory
- C. The Battered Woman

- D. The Batterer
- E. Child Abuse
  - 1. Definitions of Child Abuse and Neglect
  - 2. Theoretic Frameworks of Child Abuse
  - 3. The Abused Child
  - 4. The Child Physical Abuser
  - 5. The Nurse's Attitude in Child Abuse
- F. Intrafamilial Sexual Abuse of Children
- G. Historical and Theoretic Perspectives on Incest
- H. Characteristics of the Incestual Family
  - 1. Offenders
  - 2. Characteristics of the Nonoffending Parent
  - 3. Sexually Abused Children
    - a. Effects of Sexual Abuse on Children
    - b. Long-Term Effects of Childhood Sexual Abuse
- I. Elder Abuse
  - 1. The Abused Elders
  - 2. The Abuser
  - 3. Theories on Elder Abuse
- J. Rape
  - 1. Definition of Rape
  - 2. Characteristics of a Rapist
  - 3. Effects of Rape on the Victim

## 52. Suicide

### Objectives

1. Analyze the scope of suicide by age, gender, ethnicity, socioeconomic status, and familial factors.
2. Compare and contrast biologic, psychologic, and sociologic theories regarding the etiology of suicide.
3. Distinguish between suicidal ideation, gesture, threat, attempt, and successful suicide.
4. Discuss key elements in the assessment of suicide risk.
5. Apply the nursing process for suicidal clients and their families.
6. Construct a nursing care plan for a client admitted to the psychiatric care unit with depression and suicidal ideation.
7. Describe the responsibility of mental health professionals in protecting clients from self-harm.
8. Discuss the role of parents and significant adults in observing self-destructive clues in youth and in offering guidance and assistance.

### Outline

- A. Historical and Theoretic Perspectives
  - 1. Sociologic Theory
  - 2. Psychoanalytic Theory
  - 3. Interpersonal Theory
  
- B. Etiology
  - 1. Biologic Factors
  - 2. Psychologic Factors
  - 3. Sociologic Factors
  
- C. Epidemiology
  - 1. Prevalence
    - a. Age
      - i. Older Adults
      - ii. Youth
    - b. Gender and Ethnicity
    - c. Socioeconomic Status
    - d. Familial Influences
  - 2. Co-occurrence with Related Health Issues
    - a. Psychiatric Disorders
      - i. Depression
      - ii. Schizophrenia
      - iii. Panic Disorder
      - iv. Borderline Personality Disorder
    - b. Alcohol and Other Drugs
    - c. Medical Illnesses
  - 3. Erroneous Beliefs About Suicide
  
- D. Clinical Description
  - 1. Risk Factors for Suicide
  - 2. Lethality Assessment Factors
    - a. Imminence versus Nonimminence
    - b. Ideation versus Intent
    - c. Chosen Method and Accessibility
  
- E. Prognosis
  
- F. Discharge Criteria

### **53. Grief and Loss**

#### Objectives

1. Discuss four major categories for symptoms of grief.
2. Describe three components of the normal grief process.
3. Distinguish between symptoms/behaviors of grief and those of depression.
4. Analyze the risk for dysfunctional grief reactions in selected high-risk clients.
5. Discuss the major goals for intervention in acute grief.
6. Evaluate the points of intervention with respect to intervention efficacy.
7. Compare and contrast chronic sorrow with other types of grief, and list persons at risk for chronic sorrow.
8. Explain how posttraumatic stress disorder can be a feature of dysfunctional grief.
9. Apply the nursing process in managing clients experiencing grief.

## Outline

- A. Responses
  - 1. Physical Manifestations
  - 2. Cognitive Manifestations
  - 3. Behavioral and Relating Manifestations
  - 4. Affective Manifestations
  
- B. Stages and Process of Grief
  - 1. Stages
  - 2. Process
    - a. Characteristics
    - b. Grief Work
    - c. Tasks in Grief
    - d. Complicating Factors
  
- C. Types of Grief
  - 1. Anticipatory Grief
  - 2. Acute Grief
  - 3. Dysfunctional Grief
  - 4. Chronic Sorrow
  - 5. Grief and Depression
  
- D. Bereavement Care Across the Life Span
  - 1. Prevention
    - a. Before Loss
    - b. When Loss is Impending
    - c. After the Loss
  - 2. Problem-Oriented Grief Therapy
  - 3. Interventions in Dysfunctional Grief
  
- E. Spirituality and Grief

## **54. Persons with HIV/AIDS**

### Objectives

- 1. Discuss the prevalence of HIV/AIDS, particularly in vulnerable populations.
- 2. Discuss the prevalence of psychiatric disorders that sometimes predate HIV infection.
- 3. Examine the risk of psychiatric and psychological morbidity for those coping with HIV/AIDS.
- 4. Distinguish between adjustment disorders and Axis I mood disorders in persons with HIV/AIDS using the criteria of severity of symptoms, treatment, and prognosis.
- 5. Examine potential interactions between behavioral characteristics of persons coping with HIV/AIDS and treatment adherence management.
- 6. Discuss why persons practicing high-risk behaviors may have difficulty changing these behaviors.
- 7. Apply the nursing process for persons with HIV/AIDS.

## Outline

- A. Epidemiology
  - 1. Cultural Considerations
- B. Etiology of Psychological Distress in HIV/AIDS
  - 1. Biological/Neuropsychiatric Factors
  - 2. Psychosocial Factors
- C. Clinical Description
- D. Prognosis
- E. Persons with AIDS Experiencing Adjustment Disorders with Depressed or Anxious Mood

## **55. Community Psychiatric Mental Health Nursing**

### Objectives

1. Discuss the factors that influenced the deinstitutionalization movement.
2. Describe the components of community mental health nursing.
3. List outpatient treatment options commonly available in community settings.
4. Compare and contrast therapy and rehabilitation.
5. Discuss the components of case management.
6. Explain the impact of managed care on community psychiatric rehabilitation.
7. Analyze the key elements of psychiatric home health care.
8. Identify factors that contribute to homelessness of people with severe and persistent mental illness.
9. Describe the cultural needs of community residents.
10. Explore the factors contributing to the incarceration of mentally ill persons.
11. Identify the predictors of violence in the mentally ill.
12. Apply the nursing process to clients in the community and in the home.

### Outline

- A. Role of the Nurse
- B. Historical Perspective
  - 1. Deinstitutionalization
    - a. Psychotropic Medications
    - b. Legal Influences
- C. Current Community Psychiatric Treatment Systems
  - 1. Community Mental Health Centers
  - 2. Funding
  - 3. Philosophy
    - a. Freedom of Choice
    - b. Continuity of Care
  - 4. Managed Care
- D. Cultural Considerations in Community Mental Health Nursing
- E. Components of Community Psychiatric Care
  - 1. Community Psychiatric Programs

- a. Partial Hospitalization Programs
  - b. Psychosocial Rehabilitation/Skills Training Programs
- 2. Case Management
- F. Levels of Assisted Living
- G. Home Visits
  - 1. Safety
  - 2. Categories of Home Visits
- H. Homeless Mentally Ill
- I. Violence and the Mentally Ill
- J. Mentally Ill Persons in Jail
- K. Other Components of Community Psychiatric Mental Health Nursing

## **56. Persons with Severe and Persistent Mental Illness**

### Objectives

1. Describe manifestations of severe and persistent mental illness across the life span.
2. Discuss psychologic problems of persons with severe and persistent mental illness and their impact on the client and family.
3. Explain how behavioral manifestations of severe and persistent mental illness and how they affect a person's ability to function independently.
4. State risk factors for persons with severe and persistent mental illness.
5. Examine the relationship between poverty, severe and persistent mental illness, and homelessness.
6. Explore the relationship between culture and severe and persistent mental illness.
7. Distinguish between the behaviors of institutionalized persons with severe and persistent mental illness and the behaviors of young people with severe and persistent mental illness who have had few experiences with mental health treatment.
8. Describe nursing interventions appropriate for individuals with severe and persistent mental illness.
9. Apply the nursing process to clients with severe and persistent mental illness.

### Outline

- A. Development of Severe and Persistent Mental Illness
  1. Diagnostic Features
  2. Young Adults with Severe and Persistent Mental Illness
- B. Psychologic Manifestations of Severe and Persistent Mental Illness
  1. Disturbed Thought Processes
  2. Chronic Low Self-Esteem
  3. Loneliness
  4. Worthlessness and Hopelessness
  5. Depression
  6. Suicide

- C. Cultural Implications Associated with Severe and Persistent Mental Illness
- D. Behavioral Manifestations of Severe and Persistent Mental Illness
  - 1. Activities of Daily Living
  - 2. Independent Living
  - 3. Adherence to Medications
  - 4. Medical Illness in Those with Severe and Persistent Mental Illness
  - 5. Employment
  - 6. Dependent Living with Family
    - a. Mentally Ill Parents
    - b. Parents of Adult Mentally Ill Children
    - c. Siblings
  - 7. Sexuality
    - a. Pregnancy
  - 8. Violent and Criminal Behavior
- E. Persons with Severe and Persistent Mental Illness Who Have Special Problems
  - 1. Mentally Retarded Persons with Severe and Persistent Mental Illness
  - 2. Persons with Sensory and Communication Impairments
  - 3. Older Adults with Severe and Persistent Mental Illness
  - 4. Substance Abuse
- F. Children and Adolescents with Severe and Persistent Mental Illness
  - 1. Children with Severe and Persistent Mental Illness
  - 2. Adolescents with Severe and Persistent Mental Illness
- G. Homeless Persons with Severe and Persistent Mental Illness
- H. Providers of Care for Persons with Severe and Persistent Mental Illness
  - 1. Psychiatric Institutions
  - 2. General Hospitals
  - 3. Aftercare
  - 4. Homeless Shelters
  - 5. Foster Care
  - 6. Prisons and Jails
  - 7. Family
  - 8. Health Promotion Activities
    - a. Activities of Daily Living
    - b. Medication Education
    - c. Family Education
    - d. Sex Education
    - e. Family Support
    - f. Promotion Programs for the Community
- I. Public Policy Issues
- J. Additional Treatment Modalities
  - 1. Psychotropic Medications
  - 2. Group, Occupational, and Other Therapies