



## NURSING ACROSS THE LIFE SPAN II

Revised 08/07/09  
GGC

C - L - CR  
2 - 6 - 4

**COURSE NUMBER:** NUR 263  
**PREREQUISITE(S):** NUR 106; NUR 107 or BIO 240; NUR 120; BIO 210; ENG 101  
**CO-REQUISITE(S):** None

**COURSE DESCRIPTIONS** This course is a study of basic concepts utilizing the nursing process and critical thinking skills in the care of women across the life span as well as child-bearing families with acute and chronic health problems. The course includes the study of complex aspects of care, growth and development.

**REQUIRED TEXTBOOK(S) AND OTHER SUPPLIES:** Lowdermilk, D. L., & Perry, S. E. (2007). *Maternity & women's health care* (9<sup>th</sup> ed.). St. Louis, MO: Mosby, Inc. <sup>1</sup>  
ISBN 978-0323-04367-0  
*Mosby's Nursing Video Skills (DVD): Maternal-Newborn & Women's Health*. St. Louis, MO: Elsevier  
ISBN 0-323-04569-3  
Pregnancy Calculator Wheel

**REQUIRED REFERENCES:** *Publication manual of the American Psychological Association* (6<sup>th</sup> ed.) (2010). Washington, DC: APA.  
ISBN-13 978-1-4338-0561-5  
Spartanburg Community College Student Planner and Handbook 2007-2008 (A copy can be obtained in the Student Admissions and Records offices).  
Spartanburg Community College Associate Degree of Nursing Handbook

**REFERENCE(S):** Ackley, B. J., & Ladwig, G. B. (2008). *Nursing diagnosis handbook: A guide to planning care* (8<sup>th</sup> ed.). St. Louis, MO: Mosby, Inc. <sup>4</sup>  
ISBN-13 978-0-323-04826-2  
Blackburn, S. T. (2007). *Maternal, fetal, & neonatal physiology: A clinical perspective* (3<sup>rd</sup> ed.) St. Louis, MO: Saunders. <sup>5</sup>  
ISBN 978-1-4160-2944-1  
Burrow, G. N., Duffy, T. P., & Copel, J. A. (2004). *Medical complications during pregnancy* (6<sup>th</sup> ed.). Philadelphia: Elsevier Saunders. <sup>6</sup>  
ISBN 0-7216-0435-8  
Davidson, M. R., London, M. L., & Wiedland Ladewig, P. A. (2008). *Old's maternal-newborn nursing & women's health across the*

- lifespan* (8<sup>th</sup> ed.) Upper Saddle River, NJ: Pearson. <sup>8</sup>  
ISBN-13: 978-0-13-220873-4
- Deglin, J. H., & Vallerand, A. H. (2006). *Davis's drug guide for nurses (book with CD-ROM)* (10<sup>th</sup> ed.) Philadelphia: F. A. Davis, Co. <sup>9</sup>  
ISBN-13 978-0-8036-1454-3
- Gabbe, S. G., Niebyl, J. R., & Simpson, J. L. (2007). *Obstetrics: Normal and problem pregnancies* (5<sup>th</sup> ed.) New York: Churchill Livingstone. <sup>10</sup>  
ISBN 978-0-443-06930-7
- Grodner, M., Long Roth, S., & Walkingshaw, B. C. (2007). *Foundations and clinical applications of nutrition* (4<sup>th</sup> ed.) St. Louis, MO: Elsevier. <sup>11</sup>  
ISBN 0-323-30452-94
- Hatcher, R. A., Trussell, J., Stewart, F., Nelson, A. L., Cates, W., Jr., Guest, F., & Kowal, D. (2004). *Contraceptive technology* (18<sup>th</sup> ed.). New York: Ardent Media, Inc. <sup>12</sup>  
ISBN 0-966-49026-6
- Littleton, L. Y., & Engebretson, J. C. (2005). *Maternity nursing care*. Clifton Park, NY: Tomson Delmar Learning. <sup>13</sup>  
ISBN 1-4018-1192-2
- Moore, K. L., & Persaud, T. V. N. (2003). *The developing human: Clinically oriented embryology* (7<sup>th</sup> ed.). St. Louis, MO: Elsevier. <sup>14</sup>  
ISBN 0-721-69412-8
- Mosby's dictionary of medicine, nursing, & health professions* (7<sup>th</sup> ed.). (2006). St. Louis, MO: Mosby, Inc. <sup>15</sup>  
ISBN 0-323-03562-0
- NCLEX-RN 250 new questions format* (2<sup>nd</sup> ed.). (2007). Philadelphia: Lippincott Williams & Wilkins. <sup>16</sup>  
ISBN 1-58255-473-0
- Oxorn, H. (1986). *Oxorn-Foote: Human labor & birth* (5<sup>th</sup> ed.) Norwalk, CT: Appleton & Lange. <sup>17</sup>  
ISBN 0-8385-7665-6
- Riordan, J. (2005). *Breastfeeding and human lactation* (3<sup>rd</sup> ed.) Sudbury, MA: Jones and Bartlett Publishers. <sup>18</sup>  
ISBN 0-7637-4585-5
- Silvestri, L. A. (2005). *Saunders comprehensive review for the NCLEX-RN examination* (3<sup>rd</sup> ed.). St. Louis, MO: Elsevier. <sup>19</sup>  
ISBN 1-4160-3199-5  
ISBN-13 978-1-4160-3199-4
- Smeltzer, S. C., Bare, B. G., Hinkle, J. L., & Cheever, K. H. (2008). *Brunner & Suddarth's textbook of medical- surgical nursing* (11<sup>th</sup> ed.) Philadelphia: Lippincott Williams & Wilkins. <sup>3</sup>  
ISBN-13 978-0-7817-6695-1 Van Leeuwen, A. M., Kranpitz, T. R., &
- Smith, L. (2006). *Davis's comprehensive handbook of laboratory and diagnostic tests with nursing implications* (2<sup>nd</sup> ed.). Philadelphia: F. A. Davis, Co. <sup>20</sup>  
ISBN-13 978-0-8036-1464-2
- Varney, H., Kriebs, J. M., & Gegor, C. L. (2004). *Varney's*

*midwifery* (4<sup>th</sup> ed.) Sudbury, MA: Jones and Bartlett Publishers. <sup>21</sup>  
ISBN 0-7637-1856-4

All textbooks used in previous nursing coursework.

**OTHER REQUIRED MATERIALS, TOOLS, AND EQUIPMENT:**

- SCC ADN (Nursing) Packet (purchased in first semester)
  - Available at the Book Inn (SCC bookstore)
- Nursing uniform as outlined in the current SCC ADN Student Handbook
- Drug Reference Journal (to be developed by each student using guidelines that will be distributed during class)
- ATI materials

**METHOD OF INSTRUCTION:**

Lecture / Discussion  
Case studies  
Audiovisuals  
Class  
On reserve at the SCC Library  
Journal articles  
Accessible via the SCC Library website  
On reserve at the SCC Library  
Lab Simulations / Case Studies / Group Discussions  
Supplemental Writing Assignments  
Participation in or observation of nursing care of women and child-bearing families in a variety of health care settings.

**GRADING SYSTEM:**

In order to pass NUR 263, the student must receive a grade of  $\geq 80\%$  for the classroom component of the course AND a grade of  $\geq 85\%$  for the clinical/practicum component of the course.

Failure to achieve passing grades in one or both of the course components will result in a failing grade for the entire course.

Grades are not rounded off (up or down). A grade of 79.90 – 79.99% will be recorded as 79.9%.

**CLASSROOM GRADING SYSTEM:**

94	-	100	=	A
85	-	93	=	B
80	-	84	=	C
70	-	79	=	D
Below	-	70	=	F

**CLASSROOM AND CLINICAL GRADE CALCULATION METHOD:**

**CLASSROOM:**

Module Tests	=	70%
Family-Centered Maternity Care Paper	=	5%
Annotated Bibliography	=	5%
Proctored ATI Final Exam	=	20%

Total = 100%

**CLINICAL:**

Clinical Performance = 90%  
 Care Plan = 10%  
 Mini-Care Plans (2) Will not receive a letter grade but  
 will be considered in total clinical  
 grade

Total = 100%

A letter grade of D or F constitutes one (1) attempt in a nursing course.

**TESTING:**

Per the instructor's choice, testing may either be computerized or paper/pencil. The proctored ATI final will definitely be on computer.

Please bring a #2 pencil to all tests. #2 pencils will not be provided by the course instructor.

Academic dishonesty policies apply to online testing.

Students using notes, taking tests together, or watching other students take tests will be subject to disciplinary action.

No partial credit will be given on multiple multiple-choice-type questions.

**Test Content:**

80% of the test questions will be taken from lectures  
 20% of the test questions will be taken from any or all of  
 following: reading assignments (textbook, journal  
 articles, Web articles, etc.) and library assignments  
 (listening to/watching audiovisuals). Reading/AV  
 assignments not discussed during class may be included  
 on tests.

**The lowest test grade WILL NOT BE DROPPED.**

**MAKE-UP TESTS:**

If a student is absent on the day a test is given or an assignment is due, the student is expected to call the faculty member teaching the course prior to the test/assignment submission time to arrange for a make up test date or submission time. If a student has been absent from clinical on the day a test is given, s/he will not be allowed to take the test on that day. Each student should be prepared to take the test in the testing lab within 48 hours of the original test date and time. Extenuating circumstances in reference to this time frame must be approved by the nursing faculty/department head and may require a

medical excuse.

**The course instructor will determine the date, time and location of the make-up test.**

Make-up test format will be determined by the course instructor and may include (but is not limited to) short answer, fill-in-the-blank, essay, matching and/or multiple-choice questions.

Students who fail to take a make-up test at the arranged-for time will receive a test grade of zero (0).

**FAMILY-CENTERED  
MATERNITY CARE  
PAPER**

Students will write a paper on the philosophy of family-centered maternity care (FCMC). This assignment will count 5% toward the overall classroom grade.

Guidelines for completion of the assignment will be distributed to the students as a separate form.

**ANNOTATED  
BIBLIOGRAPHIES:**

Students will complete one annotated bibliography. This will be a graded assignment. This assignment will count 5% toward the overall classroom grade.

Guidelines for completion of the assignment will be distributed to the students as a separate form.

**MEDICATION  
REFERENCE JOURNAL:**

Working together as a class, students will complete a Medication Reference Journal in its entirety prior to attending his/her first clinical assignment.

Although this assignment carries no grade weight, the student who has not completed this assignment by the date announced in class during orientation will have 5 points deducted from his/her clinical grade.

**APA FORMATTING:**

Assigned formal papers will be written according to the publication guidelines set forth by the American Psychological Association.

A brief introduction to APA formatting will be provided in class, but the task of learning how to apply APA formatting is up to each, individual student (self-study).

Each assigned paper will, in part, be graded on use of APA formatting.

Students are expected to locate and utilize resources which clearly describe APA formatting style. The *Publication Manual of the American Psychological Association* (6<sup>th</sup> ed.) is the definitive resource for APA formatting.

**CLASSROOM  
ATTENDANCE POLICY:**

The student is responsible for punctual and regular attendance in all classes, laboratories, clinical, practica, internships, field trips, and other

required class activities. The College does not grant excused absences; therefore, students are urged to reserve their absences for emergencies. When illness or other emergencies occur, the student is responsible for notifying instructors and completing missed work if approved for late submission by instructors.

The student is tardy if not in class at the time the class is scheduled to begin and is admitted to class at the discretion of the instructor. Class will start promptly at the time scheduled. Students are tardy if not in class at the time the class is scheduled to begin. Any student who is over 5 minutes tardy will not be admitted to class and may enter class at the next scheduled break.

Instructors maintain attendance records. **However, it is the student's responsibility to withdraw from a course.** A student enrolling in and attending at least one course session remains enrolled until the student initiates a withdrawal.

If a student misses a classroom lecture, s/he will still be responsible for all lecture materials covered on the day(s) of absence.

**ABSENCES FOR RELIGIOUS HOLIDAYS:** Students who are absent from class in order to observe religious holidays are responsible for the content of any activities missed and for the completion of assignments occurring during the period of absence. Students who anticipate that their observance of a religious holiday(s) will cause them to be absent from class and do not wish such absences to penalize their status in class should adhere to the following guidelines:

1. Observance of religious holidays resulting in three or fewer consecutive absences: Discuss the situation with the instructor and provide written notice at least one week prior to the absence(s). Develop (in writing) an instructor-approved plan which outlines the make up of activities and assignments.
2. Observances of religious holidays resulting in four or more consecutive absences: Discuss the situation with the instructor and provide the instructor with written notice within the first 10 days of the academic term.
3. Develop an instructor-approved plan which outlines the make up of activities and assignments.

***Please see below under Clinical/Practicum for the clinical attendance policy.***

### **CLASSROOM CONDUCT:**

### **ACADEMIC DISHONESTY:**

All forms of academic dishonesty including, but not limited to, cheating on tests, plagiarism<sup>^</sup>, collusion, and falsification of information\* will be subject to disciplinary action.

Cheating is identified as (but is not limited to):

- Copying another student's work or test
- Using unauthorized materials during a test

- Collaborating with another student during a test
- Knowingly obtaining, using, buying, selling, transporting, or soliciting, in whole or in part, the contents of a test or another person's work
- Bribing another person to obtain the contents of or information about a quiz or test
- Sharing information about a quiz/test with another nursing student who has not yet taken the quiz/test
- Substituting for another student, or permitting another student to substitute for oneself
- Sharing of any passwords assigned by the College or one of the College's collaborating facilities
- Unauthorized printing of computer-administered tests

^Plagiarism is defined as the appropriation of another individual's work and the unacknowledged incorporation of that work into one's on work offered for credit. Students committing plagiarism will be subject to disciplinary action.

\*Falsification of information includes, but is not limited to:

- Forgery; alteration or misuse of college documents, records, or identification
- Destruction of evidence with the intent to deny its presentation during a hearing or to a panel

Proven cases of academic dishonesty will result in disciplinary action up to and including administrative withdrawal from the nursing program.

**ELECTRONIC COMMUNICATIONS DEVICES (ECDs) (INCLUDING BUT NOT LIMITED TO CELL PHONES AND PAGERS/BEEPERS):**

Because ringing and vibrating ECDs can be disruptive to the learning process, all ECDs will be turned off when the student is in the classroom, clinical/observational site or computer lab.

If, during one of the teaching/learning situations listed above, a student's ECD can be heard by the instructor or by another student, the ECD owner will stand and leave the area immediately. The instructor will decide if and when the student may return to the class/clinical/lab situation.

If an ECD is audible during a test or a quiz, the owner of the device will turn in her/his test/quiz (completed or not) to the instructor/proctor immediately and leave the testing site. The student will be given the opportunity to make-up tests s/he has been asked to leave, but will receive a zero (0) for any quiz s/he was in the process of taking.

**CLINICAL/PRACTICUM**

**CLINICAL GRADE:**

To successfully pass NUR 263, the student must receive a minimum clinical grade of 85%.

**CLINICAL/OBSERVATION PRACTICUM ATTENDANCE POLICY:**

Because of the nature of clinical instruction, a student who is absent more than one clinical day per semester (6 hours), cannot satisfactorily meet the course objectives and will be asked to withdraw from the course and its clinical component.

There are no excused absences for clinical days. There are no make-up clinical/observation days. If a student is absent on a clinical/observation day, the absence will be reflected on the final clinical evaluation. In the case of any absences, students are required to provide a statement from a healthcare provider (physician or mid-level practitioner).

**TARDIES AND ABSENCES:**

If a student must be tardy or absent during either a clinical or an observation experience, **the student must follow the procedure outlined below.** Failure to follow this procedure will result in disciplinary action.

**PROCEDURE FOR REPORTING TARDY/ABSENCE TO THE INSTRUCTOR AND CLINICAL SITE:**

1. **Prior to** the time the clinical is scheduled to begin, the student (not a designee) will:
  - 1) phone the clinical site to report that s/he will be tardy/absent
    - a. In order to verify that the student notified the clinical site, the student will obtain the name of the individual with whom s/he spoke.
  - 2) phone and speak to her/his clinical instructor .
2. If the student is unable to contact her/his instructor prior to the time the clinical is scheduled to begin, the student will continue calling the assigned clinical unit every 15 minutes to speak with her/his instructor until the instructor is available by phone.

**DO NOT:**

1. Send a message through another student.
2. Send a message by e-mail.
3. Ask family/friends to call the instructor. Unless the student is currently in the hospital, the student must personally speak with the instructor by phone.

In summary: You are allowed one clinical absence during the clinical portion of the course. You will lose 5 points from your clinical evaluation total score when any of the following occur:

1. you miss a clinical day in its entirety
2. you leave clinical early
3. you are more than 15 minutes late to clinical
4. you are late to clinical more than three time
5. you fail to notify the unit and the clinical faculty if you are going to be absent/tardy

**DISCIPLINARY ACTION RELATING TO TARDIES/ ABSENCES:**

If the student is more than 15 minutes tardy in reporting to a clinical site, s/he: 1. will not be allowed to stay 2. will be counted absent for the day

Attendance at both pre- and post-conferences is required.



Students are responsible for finding transportation to and from assigned clinical sites.

Attendance at faculty/student conferences scheduled to address faculty concerns about a student's performance (classroom or clinical) is mandatory.

Faculty reserve the right to refuse clinical access to students demonstrating unsafe and/or unprofessional behavior.

**ELECTRONIC COMMUNICATIONS DEVICES (ECDs) (INCLUDING BUT NOT LIMITED TO CELL PHONES AND PAGERS/BEEPERS):**

Students will not carry electronic communications devices to clinical/observation sites. If someone (e.g., family, friends) needs to contact you during a clinical/observational experience, please have him/her call the SCC ADN department at (592-4638 or 592-4865). The ADN department staff will contact the student (or instructor) at the student's assigned clinical site.

**ADDITIONAL CLINICAL EXPECTATIONS:**

Students are expected to review nursing skills learned during previous coursework – especially NUR 120 (Fundamentals). Some classroom time will be spent in the nursing lab learning and practicing new skills specific to maternal/child/women's health.

Due to the nature of obstetrical care, the student will receive her/his client/patient assignment the day of her/his clinical rotation.

Prior to beginning the clinical portion of NUR 263, students will have completed a drug reference journal which they will carry with them to each clinical assignment. Students asked to administer medications but who do not have the medication journal with them will have 2 points deducted from their *overall* clinical grade.

In the clinical area. The student is expected to carry a ***stethoscope and the pregnancy wheel.***

Students are expected to actively participate in pre- and post-clinical conferences.

Under the supervision of an approved clinical nursing instructor, students are expected to provide their assigned client(s) with safe and effective nursing care.

Students are responsible for all didactic information previously received from nursing classes up to and including the time of the current clinical experience.

Students are expected to appropriately use critical thinking skills to apply previously obtained nursing knowledge to the patient-care setting.

Please refer to the SCC Associate Degree in Nursing Student Handbook for the policy regarding unsafe/unethical student practice in

the clinical setting.

All Spartanburg Community College nursing students are subject to all policies and procedures set forth by the SCC school of nursing and by the cooperating agencies in which the students practice.

**UNSAFE/UNETHICAL  
STUDENT PRACTICE IN  
THE CLINICAL SETTING:**

A student found not following SCC and/or agency policies and procedures in the care of assigned clients will be subject to disciplinary action.

Students will follow standard precautions during all clinical assignments.

**MINI-CARE PLANS:**

Students will complete a **Mini-Care Plan** on a total of two clients prior to selecting a client on which to complete the graded **Care Plan**. The purpose of mini-care plan assignments is to provide the student with opportunities to “perfect” their nursing process skills prior to handing in the formal Care Plan assignment.

- 1) The student will follow written guidelines in the completion of the Mini-Care Plan.
- 2) Although Mini-Care Plans will not be assigned a numeric or a letter grade, they will be carefully reviewed by the course instructors and will, along with other assignments, be used to determine the student’s final **clinical** grade
- 3) Mini-Care Plan clients must be chosen from the student’s clinical sites (i.e., SRMC 2 Tower, SRMC 5 Tower and MBMH)
- 4) Mini-Care Plans may be done on any of the following client categories:
  - a. Intrapartum client
  - b. Postpartum client
  - c. **Normal** newborn client

Guidelines for completion of Mini-Care Plans will be distributed to students at a later date.

Students will complete one formal Client Care Plan. The care plan grade will contribute 10% to the student’s final **clinical** grade.

**CARE PLAN  
ASSIGNMENT:**

- 1) This assignment is to be turned in by a date and time determined by the course instructor.
- 2) All papers received after the specified date and time will receive a grade of zero (0) for the care plan.
- 3) Last-minute excuses are considered invalid and will not be given consideration if a paper is handed in after the date and time it is due.
- 4) Students who fail to turn in the care plan assignment within 48 hours after it is due will receive a grade of “F” for NUR 263.
- 5) Care Plans may be done on any of the following client categories:
  - a. Intrapartum client
  - b. Postpartum client
  - c. **Normal** newborn client
- 6) Only one care plan may be written per mother-baby couplet.

Complete guidelines for completion of the Care Plan assignment will be distributed to the students at a later date.

The student will follow the dress code set forth by the ADN program of Spartanburg Community College.

**DRESS CODE IN THE CLINICAL AREA:**

The SCC dress code for student nurses will be followed *whenever* the student reports to a patient care area.

A student who does not adhere to the SCC dress code may, at the discretion of the instructor, be dismissed from the clinical area. The student will be considered absent from this clinical experience.

**STUDENT ASSISTANCE:**

Your course instructors are available to assist you with both classroom and clinical work/assignments.

Please contact Ms. Cates if you need time in the nursing lab reviewing additional previously-learned nursing skills. She will be happy to work with you to make older skills once again come alive.

In order to be available to students, all full-time instructors have arranged to spend a set amount of time in their offices each week. To speak/meet with an instructor, please phone or e-mail her/him to make an appointment.

The student Learning Center is another valuable resource if you need additional assistance with class work.

**CHANGES TO THE COURSE SYLLABUS AND/OR CALENDAR:**

The content and/or the dates of the course syllabi and calendar are subject to change.

**ASSIGNMENTS SCHEDULED OUTSIDE POSTED CLASSROOM/CLINICAL TIME:**

With sufficient notice, students may be asked to attend educational opportunities outside of their scheduled classroom and/or clinical time. Students who are unable to attend these educational opportunities will notify Ms. Cates of their anticipated absence and will be held responsible for the information presented.

**INCLEMENT WEATHER MAKE-UP DAYS:**

Classes missed due to inclement weather may, with sufficient notice to students, be rescheduled for another time. It is likely that make-up classes will be scheduled for days and times outside of regularly scheduled classroom and/or clinical time.

**ACCOMMODATIONS:**

Students who need special accommodations in this class because of a documented disability should *notify* Student Disability Services prior to their 3<sup>rd</sup> day of their NUR 263 class.

You may contact Student Disability Services by phone (864) 592-4811 (or toll-free

at 1-800-922-3679); by e-mail through the Spartanburg Community College web site: [www.sccsc.edu/SDS/](http://www.sccsc.edu/SDS/); or by visiting the office located in the Dan Lee Terhune Student Services Building, room 112 on the Spartanburg Community College campus. By contacting Student Disability Services early in the semester, students with disabilities give the College an opportunity to provide necessary support services and appropriate accommodations.

Per SCC procedure V-40.8:

**WITHDRAWAL FROM A TERM OR A COURSE:**

- “During the first 75% of the course, students may initiate withdrawal from a term or from specific courses through personal contract with Student Records” (in person or electronically). A grade of W will be awarded.
- Students are responsible for withdrawing from classes. Class instructors will not be responsible for initiating or completing student withdrawals from his/her course. This includes situations in which students “abandon” a course.
- Students who “abandon” a course (i.e., cease attending and no longer sit for exams, turn in assignments, etc.) will receive a zero (0) for each assignment not completed and the final course grade will be calculated accordingly.
- Students do not have to obtain instructor permission or signature to withdraw from that instructor’s course.
- Students withdrawing from one nursing course must also withdraw from all other nursing courses for which s/he has registered.

**NUR 263  
Instructors**

Ms. Gibby Cates, CNM, MS  
(CNM = Certified Nurse-Midwife)  
HSB 237  
[catesg@sccsc.edu](mailto:catesg@sccsc.edu)  
(864) 592-4889 (O)  
(864) 237-2727 (C)

I am providing you with my cell phone number for your convenience. Please respect my privacy - DO NOT CALL ME on my cell phone after 5:00 pm unless it is to report that you will be tardy or absent from clinical the following day.

Mrs. Bunny Smith, RN, MSN  
HHS 235  
[smithb@sccsc.edu](mailto:smithb@sccsc.edu)  
(864) 592-4635 (O)

Ms. Keesha Hatcher, RN, BSN  
[Khatcher1024@yahoo.com](mailto:Khatcher1024@yahoo.com)  
(864) 270-7373

**Spartanburg Community College**

ADN Program Core Competencies:

- Assessment
- Critical thinking
- Managing care
- Teaching and learning
- Communication
- Caring
- Collaboration
- Professional behavior

**COURSE OBJECTIVES AND OUTCOMES: Upon satisfactory completion of this course, the student will :**

Assessment:

1. Obtain vital signs of the female client:  
Non-pregnant  
Pregnant  
Describe correct method of obtaining BP in the pregnant client.
2. List the components of a basic gynecologic examination.
3. Under supervision, obtain historical information from the pregnant, laboring and postpartum client.
4. Under supervision, perform basic physical assessment of the pregnant and non-pregnant female client.
5. Under supervision, perform psycho/social/spiritual/cultural assessment of female client.
6. Recognize abnormal assessment findings.
7. Under supervision, auscultate fetal heart tones using a fetoscope, hand-held Doppler and electronic fetal monitor.
8. Recognize and identify:  
FHT baseline rate  
FHT accelerations  
FHT decelerations
9. Identify fetal lie and presentation using the 4 maneuvers of Leopold.
10. Identify contraction frequency, duration and strength via palpation of the laboring uterus.
11. List and recognize signs/symptoms of “false” labor and “true” labor.
12. List and recognize signs/symptoms of preterm labor.
13. Under supervision, palpate the postpartum uterus and identify location and consistency.
14. Quantify and describe lochial discharge.
15. Identify/recognize common variations and/or complications of the postpartum course.
16. Identify client’s cultural beliefs about pregnancy and childbirth.

17. Describe normal physiologic changes seen during pregnancy, labor and the postpartum period.  
Include expected changes in laboratory values.
18. Under supervision, obtain vital signs of the newborn client.
19. Describe the normal newborn physiologic and behavioral adaptations to extrauterine life.
20. Under supervision, perform a head-to-toe normal newborn assessment.  
Document findings.  
Identify variations from normal.
21. Identify physical, psychological, educational and/or cultural barriers to effective breastfeeding.
22. Identify the client's/family's learning needs.

Critical Thinking:

1. Apply didactic concepts/principles to clinical practice.
2. Continue to develop and practice personal and professional flexibility.
3. Understand the concepts of ethno- and egocentricity.
4. Develop a personal plan for overcoming tendencies toward ethno- and egocentricity.
5. Develop and maintain an open-minded attitude toward new information.
6. Develop and maintain an accepting and non-judgmental attitude toward clients and their belief systems.
7. Continue honing cultural competency skills.
8. Develop and practice intellectual humility.
9. Understand the concept of nursing research.
10. Evaluate the credibility of sources of information.
11. Critique a published nursing study.
12. Provide evidence-based nursing care.
13. Utilize a variety of resources to enhance nursing knowledge and to improve obstetric/women's health/newborn nursing skills.
14. Develop comprehensive OB/Gyn/Newborn vocabulary.
15. Develop an OB/Gyn/Newborn medication journal.
16. Utilize information obtained during assessment to provide appropriate nursing care to the gynecologic, pregnant, laboring, postpartum, lactating, and/or newborn client.
17. Identify alterations from normal and report these to the appropriate personnel (instructor, charge nurse)
18. Utilize assessment data to identify appropriate nursing diagnoses, outcome goals, and nursing interventions.
19. Distinguish relevant from irrelevant client data.
20. Document relevant client data.
21. Report relevant client data to nursing instructor and/or clinical preceptor.
22. Distinguish between safe and unsafe nursing practice.
23. Provide safe and ethical nursing care in accord with the ANA Code of Ethics and the South Carolina Nurse Practice Act.
24. Develop/enhance the ability to accept and utilize constructive criticism to improve nursing skills.

Managing Care:

1. Continue to develop care planning skills:  
Perform a physical/psycho/social/spiritual/cultural assessment on select OB and newborn clients.  
Using assessment data, develop appropriate nursing diagnoses for select OB and newborn clients.

Plan evidence-based nursing care:

- 1) formulate and write outcome statements
- 2) determine appropriate nursing interventions
- 3) prioritize nursing diagnoses and interventions

Implement safe, appropriate evidence-based nursing care to women and newborns.

Evaluate nursing care that was provided and revise nursing plan of care accordingly.

2. Write mini-care plans for select obstetrics/newborn clients.
3. Write care plan on one obstetrics/newborn client.
4. Under supervision, perform OB/Gyn/Newborn nursing skills at the beginning level.
5. Under supervision, provide safe, competent, evidence-based and effective nursing care to:
  - Gynecologic clients.
  - Pre-conceptual clients.
  - Pregnant clients and their families
  - Postpartum clients, their newborns and their families.
  - Lactating clients.
  - Bereaved clients and their families.
  - Normal newborn clients and their parents.
6. Continue developing time management skills.  
Function within the student nurse's scope of practice.

#### Teaching and Learning:

1. See him/herself as a life-long learner.
2. Assume responsibility for identifying his/her own learning needs.
3. Formulate a plan to enhance his/her own learning.
4. Identify learning deficits and, working with his/her course instructor(s), formulate a plan for remediation.
5. Identify principles of adult learning.
6. Utilize adult learning principles when providing client education.
7. Identify clients' learning styles.
8. List potential learning needs of the gynecologic, antepartum, intrapartum, postpartum and lactating client.
9. Based on assessment data r/t client's/family's learning needs, develop an education plan for the client and her family.
10. Under supervision, provide client education that takes into account the client's preferred learning style.
11. Under supervision, identify and address continued client/family learning needs.
12. Under supervision, provide educational remediation to client/family as needed.
13. Under supervision, document client/family learning and need for follow-up.

#### Communication:

1. Recall and describe therapeutic communication techniques learned in previous courses.
2. Continue to develop personal therapeutic communication skills.
3. Identify potential and actual barriers to effective communication with clients and their families.
4. Use therapeutic communication techniques when providing nursing care (to clients and their significant others).
5. Use therapeutic communication techniques with instructors, fellow students,

- nursing supervisors, healthcare providers and other healthcare facility staff.
6. Evaluate his/her on therapeutic communication strengths and weaknesses.
7. Seek feedback from instructor re: own identified communication learning needs.
8. Accept and utilize constructive instructor feedback to improve therapeutic communication style.
9. Recognize the need to modify communication techniques with pregnant women experiencing new, painful and/or frightening events (e.g., medical procedures, labor, emergency C-Section, etc.)
10. Identify effective communication techniques useful with the client in labor.
11. Compare and contrast communication techniques effective in crisis situations.

#### Caring:

1. Recognize the importance of caring behavior in the provision of effective nursing care.
2. Identify caring nursing behaviors important in the care of the female client.
3. Identify potential and/or actual personal barriers to providing caring care.
4. Provide non-judgmental and culturally competent nursing care.
5. Understand that personal prejudice can negatively influence the quality of the nursing care being provided.
6. Actively seek positive role models who integrate “caring” into their own nursing practice.
7. Continue to develop active listening skills.
8. Continue to provide comfort to clients and their significant others using presence and touch to display caring.
9. Integrate safe and ethical nursing care into his/her nursing practice.
10. Develop a plan for improving ability to provide caring nursing care.

#### Collaboration:

1. Recognize that the provision of safe and effective nursing care is a team responsibility.
2. Remember there is “no “I” in T-E-A-M.”\*
3. Identify the members of the healthcare team in the provision of care to gynecologic, pregnant, postpartum, lactating and newborn client.
4. Under supervision, collaborate and consult with other members of the healthcare team.

#### Professional Behavior:

1. Review definition of a profession learned in NUR 120 (Basic Nursing Concepts) and recall ways in which nursing meets this definition.
2. Review the ANA Standards of Professional Performance.
3. Recognize the role of national, state and local organizations in the establishment of client-focused standards of care.
4. Practice nursing in accordance with the policies, procedures and standards of care set forth by collaborating healthcare facilities.
5. Practice nursing in accordance with standards of care set forth by the American College of Obstetricians and Gynecologists (ACOG), the Association of Women’s Health, Obstetric, and Neonatal Nurses (AWHONN), and other leading organizations in women’s healthcare.
6. Provide nursing care in compliance with the Occupational and Safety Health Administration (OSHA) and the South Carolina Department of Health and Environmental Control (DHEC) policies.
7. Complete OSHA and HIPPA educational requirements prior to beginning



- practice at assigned clinical sites.
8. Complete all SCC-mandated requirements (e.g., CPR, PPD, etc.) prior to beginning clinical practice.
  9. Abide by all provisions of the 1996 Health Insurance Portability and Accountability Act (HIPAA).
  10. Seek assistance as needed in matters of client care.
  11. Function within the professional student nurse scope of practice.

\* Glazer, M., & O'Donoghue, M (Screenwriters). (1988). *Scrooged*. [Motion picture]. United States: Paramount Pictures.

**\*PLEASE PRINT AND SIGN. THIS CONTRACT WILL BE DUE ON THE FIRST DAY OF CLASS\***

**Acknowledgement of Responsibility**

As evidenced by my signature below, I acknowledge that I have in my possession the most current copy of the NUR 263 syllabus, the Associate Degree in Nursing Student Handbook, the SCC Catalog, and the SCC Student Planner and Handbook. It has been explained to me that I am held to the rules, regulations, standards of conduct and time frames of all the documents listed above. I understand that I must maintain a current copy of these handbooks throughout my nursing program. I have been further advised that the contents of the NUR 263 syllabus, the Associate Degree in Nursing Student Handbook, the SCC Catalog, and the SCC Student Planner and Handbook may be subject to change when deemed necessary and appropriate by the college, its administrators and/or the course instructor(s). When changes are made, I will receive a copy of these changes in writing.

My signature also acknowledges that the NUR 263 syllabus has been explained to me by the course instructor; that I have personally reviewed the course syllabus; and that I was given the opportunity to ask questions and seek clarification regarding the syllabus and its contents. I fully understand the NUR 263 course requirements as described in the course syllabus.

My signature also acknowledges that the procedure for dropping classes has been reviewed and my responsibility regarding the procedure for dropping classes has been explained to me by my instructor. I have had an opportunity to ask questions, and I understand my role in this process and accept that responsibility.

My signature also acknowledges that I have read, and have had explained to me, the policy statement on confidentiality for client/patient health and financial information. I understand and agree that in the performance of my duties as an Associate Degree Nursing student at Spartanburg Community College, I must, and will, hold in strict confidence all client/patient information. Furthermore, I understand that violation of this policy, whether intentional or unintentional, will result in disciplinary action.

My signature gives permission for Spartanburg Community College to release information about me to prospective employers concerning my academic performance, attitude, appearance, and any otherwise pertinent information while I am an Associate Degree in Nursing student at Spartanburg Community College.

---

(Student name - printed)

---

(Date)

---

(Student signature)

---

(Faculty signature)

---

(Date)

Revised 08/07/09

Often, the child struggles for life in a highly crowded, unhygienic and poorly ventilated environment that facilitates the transmission of respiratory infections and malaria. The tragedy is that most of these deaths in the under-5s could be prevented and the conditions treated within the resources of most, although not all, countries. Neonatal mortality refers to deaths of infants between birth and the seventh day of life – the early neonatal period; and from the 8th to the 28th day of life – the late neonatal period. Perinatal mortality refers to deaths of babies after 22 completed weeks of gestation, during birth and during the first seven days of life – the perinatal period. Health Screening Across the Lifespan.docx. Rasmussen College. NURSING 4259 - Winter 2019. Health Screening Across the Lifespan.docx. 222 pages. Pacific Northwest summer evening temperatures are often below this threshold. Rasmussen College. NURSING NUR257 - Spring 2016. English Comp. 13 pages. This initiated the two stages of the Medicare and Medicaid EHR incentive. Rasmussen College, Ocala.