**School of Nursing**

**Level II – Semester 3**

**GENERIC**

**NUR2420: Obstetrical Nursing Theory Syllabus**

**Lecturer: Annette Tomlinson\_**

**Reference** *# 10592*

****

**Belongs To:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Student’s Name)**

**NUR 2420 Obstetrical Nursing**

**Accelerated/Generic Option**

**Course Number: NUR 2420**

**Course Reference Number:** NUR 2420-10592

**Meeting Days/Time:** Monday’s and Thursday’s 4:30 pm -7:50 pm

July 7th-July 28th, 2022

In-person Room 3408

**Instructor’s Name:** Annette Tomlinson

**E-mail Address:**  atomlin1@mdc.edu

**Office Phone:** 305-237-418 Office 954-588-7090 Cell (preferred)

Office Hours: by appointment

**Course Description:** This course provides a family centered approach to the nursing care of obstetrical clients and their families. Students will learn to assess the pregnant client, to implement caring behaviors for the laboring client, educate the postpartum client, and manage the care of the newborn and collaboration of care for the high-risk client.

**Course Credits: 2 Credits**

**Pre-requisites:** NUR 1025, NUR 1025C, NUR 1025L, NUR 1060C, NUR 1141, NUR 1211, NUR 1211L, NUR 1214C, NUR 1002, NUR 1002L, NUR1142

**Co-requisites:** NUR 2310, NUR 2310L, NUR 2520, NUR 2520L, NUR 2680L, NUR 2420L

**MDC Learning Outcomes:**

1. Communicate effectively using listening, speaking, reading, and writing skills
2. Use quantitative analytical skills to evaluate and process numerical data
3. Solve problems using critical and creative thinking and scientific reasoning
4. Formulate strategies to locate, evaluate, and apply information
5. Demonstrate knowledge of diverse cultures, including global and historical perspectives
6. Create strategies that can be used to fulfill personal, civic, and social responsibilities
7. Demonstrate knowledge of ethical thinking and its application to issues in society
8. Use computer and emerging technologies effectively
9. Demonstrate an appreciation for aesthetics and creative activities
10. Describe how natural systems function and recognize the impact of humans on the environment

**End-of-Program Student Learning Outcomes:**

1. Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing.
2. Implement safety and quality initiatives in the delivery of holistic patient-centered care.
3. Utilize technological resources to effectively deliver care which enhances positive patient outcomes.
4. Deliver compassionate care to diverse populations with respect to individuality and clients’ needs.
5. Uses relevant evidence to improve clients’ outcomes within a dynamic environment.

**Course Student Learning Outcomes:**

At the end of the course the student will be able to:

1. Perform a comprehensive health assessment of childbearing women and newborns that identifies deviations from normal as well as health risks. (Meets Unit Objectives/ Competencies 1,2,3,4,5,6,7 & 8)
2. Develop an individualized, evidence-based plan of care that demonstrates an appreciation of the diverse backgrounds and educational and developmental variations of childbearing women and newborns while making recommendations for the adoption of health-promoting behaviors. (Meets Unit Objectives/ Competencies 1,2,3,4,5,6,7 &8)
3. Act as a patient advocate when collaborating with members of the inter-professional healthcare team in the provision of safe, quality care for childbearing women and newborns. (Meets Unit Objectives/ Competencies 1,3,5 & 7)
4. Demonstrate clinical judgment when managing the care of childbearing women and newborns. (Meets Unit Objectives/ Competencies 1,3,5 & 7)
5. Integrate knowledge of pharmacology, pathophysiology, nutrition, established evidence-based practices, and concepts from previous nursing courses when caring for childbearing women and newborns. (Meets Unit Objectives/ Complications 1,2,3,4,5,6,7 & 8)
6. Use verbal and nonverbal communication that promotes caring, therapeutic relationships with childbearing women and newborns as well as professional relationships with members of the health care team. (Meets Unit Objectives/ Complications 1,3,5 & 7)
7. Use healthcare information systems and patient care technology to manage the care of childbearing women and newborns, mitigate error, and communicate relevant patient information with members of the healthcare team. (Meets Unit Objectives/ Competencies 1,2,3,4,5,6,7 & 8)

**Unit Course Competencies/Objectives/EPSOL/MDC Learning Outcomes/Core Components**

|  |  |
| --- | --- |
| **Course Content** | **Learning Outcomes** |
| **Unit 1: Antepartum care** | * Critical/creative thinking * Formulate strategies * Ethics |
| **Unit 1 Competencies**   1. Identify maternal hormones produced during pregnancy, their target organs and their major effects on pregnancy. 2. Discuss common discomforts in pregnancy with nursing interventions. 3. Describe danger signals in pregnancy 4. Identify community resources for the childbearing family 5. Describe the components of initial and subsequent prenatal visits. 6. Calculate the estimated date of delivery 7. Describe the gravity and parity with four- and five-digit system 8. Differentiate assessment techniques for fetal well-being and maturity 9. Analyze the effects of different life situations on nutritional patterns and ways nutritional health can be improved. |  |
| **Unit 1 Content** |  |
| 1. Physical assessment 2. Maternal hormones 3. Trimester milestones 4. Danger signs 5. Due date 6. Nursing interventions 7. Diagnostics and lab 8. Documentation 9. Fetal assessment 10. Gravity and parity |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6*  *EPSLO 3: Utilize technological resources to effectively deliver care which enhances positive client outcomes. (MDC Learning Outcomes 4, 8 & 9) (Core Component 4)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a general health assessment including physiological, psychological, sociological, and spiritual needs of patients and families across the lifespan experiencing (common) (uncomplicated acute and chronic) (stable and unstable acute conditions) health alterations in a variety of settings. Use the nursing process to guide the delivery of patient care to achieve optimal outcomes. * Provide culturally sensitive care to patients and families from diverse backgrounds. * Use clinical decision making when providing nursing care based on evaluation of patient needs. * Advocate for patients and families regarding nursing care issues. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with patients and families. * Identify reliable sources for locating best current evidence and clinical practice guidelines. * Use best practice resources when developing individualized patient-centered plans of care. |  |
| **Unit 2 – Antepartum Complications** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 2 Competencies**  .   1. Define and identify factors that make a pregnancy high risk. 2. Identify common illness that can result in complications when they exit during pregnancy. 3. Analyze ways that nursing care can remain family centered. 4. Analyze ways that nurses can help prevent complications of pregnancy. |  |
| **Unit 2 Content** |  |
| 1. High risk 2. complications 3. Interpreting assessment data 4. Nursing interventions 5. Documentation |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6*  *EPSLO 3: Utilize technological resources to effectively deliver care which enhances positive client outcomes. (MDC Learning Outcomes 4, 8 & 9) (Core Component 4)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing complex (unstable acute conditions) health alterations in a variety of settings. * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient-centered care. * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |
| **Unit 3 – Intrapartum** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 3 Competencies**   1. Describe the physical, psychological, family, and cultural   assessment factors that affect childbirth.   1. Define the normal progress of each stage of the labor   process   1. Determine the use of electronic fetal monitors. 2. Distinguish different methods of pain relief comfort   measures.   1. Identify elective and operative procedures. 2. Describe the immediate nursing care of the newborn in the   delivery room.   1. Collaborate with other members of the health care team to   meet the laboring client needs.   |  | | --- | | **Unit 3 Content** | |  |
| 1. Pregnancy and culture 2. Stages of labor 3. Scope of Practice 4. Fetal monitor 5. Documentation 6. Pain control – medication and non-pharmacological 7. Surgical intervention 8. Nursing intervention |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6*  *EPSLO3: Utilize technological resources to effectively deliver care which enhances positive client outcomes. (MDC Learning Outcomes 4, 8 & 9) (Core Component 4)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing   complex (unstable acute conditions) health alterations in a variety of settings.   * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient-centered care. * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |
| **Unit 4 – Intrapartum Complications** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 4 Competencies**   1. Discuss high-risk fetal and maternal conditions that are   apparent at the onset of labor.   1. Describe maternal complications that occur during the   stages of labor.   1. Recognize high risk-fetal complications that occur during   labor.   1. Identify psychological issues and family coping behaviors   that arise from complications during childbirth.   1. Explain the role of the nurse during obstetrical   emergencies   1. Identify community health referrals as needed for home   management for the high-risk client.   |  | | --- | | **Unit 4 Content** | |  |
| 1. High-risk conditions 2. Complications of labor 3. Obstetrical emergency 4. Nursing interventions 5. Community support |  |

|  |  |
| --- | --- |
| **Course Objective – EPSLO- Competency Unit 4**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6)*  *EPSLO 2: Implement safety and quality initiatives in the delivery of holistic client-centered care. (MDC Learning Outcomes 3) (Core Component 5 & 7)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing complex (unstable acute conditions) health alterations in a variety of settings. * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient-centered care. * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |
| **Unit 5 – Postpartum Care** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 5 Competencies**   1. Differentiate the basic physiological and psychological changes that occur in the postpartum period as a woman’s body return to its pre-pregnant state. 2. Identify organs that will not return completely to a pre-pregnant state following childbirth. 3. Explain the role transition to parenthood for both men and women. 4. Identify nutritional needs of the postpartum client. 5. Explain pain management needs of the postpartum client 6. Evaluate and determining the teaching and learning needs of the postpartum client 7. Generate community and home health referrals as needed. 8. Discuss the collaborative care of the client needed during the postpartum period. |  |
| **Unit 5 Content** |  |
| 1. Physical changes 2. Nursing interventions 3. Body image 4. Bonding 5. Teaching 6. Pain control 7. Role change to parenthood |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6)*  *EPSLO 2: Implement safety and quality initiatives in the delivery of holistic client-centered care. (MDC Learning Outcomes 3) (Core Component 5 & 7)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing complex (unstable acute conditions) health alterations in a variety of settings. * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient-centered care.   *EPSLO 3: Utilize technological resources to effectively deliver care which enhances positive client outcomes. (MDC Learning Outcomes 4, 8 & 9) (Core Component 4)*   * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |
| **Unit 6 – Postpartum Complications** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 6 Competencies**   1. Describe thromboembolic disorders that occur during the postpartum period. 2. Differentiate early and late postpartum hemorrhage and selecting the appropriate plan of care. 3. Describe reproductive and non-reproductive organs that are prone to postpartum infections and selecting the appropriate plan of care. 4. Identify childbirth trauma injuries. 5. Discuss postpartum psychological complications and their management. 6. Plan home health discharge teaching needs. 7. Determine available community health resources. |  |
| **Unit 6 Content** |  |
| 1. Complications –trauma, hemorrhage, infection etc 2. Postpartum depression 3. Family support 4. Nursing interventions 5. Community support |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6)*  *EPSLO 2: Implement safety and quality initiatives in the delivery of holistic client-centered care. (MDC Learning Outcomes 3) (Core Component 5 & 7)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing complex (unstable acute conditions) health alterations in a variety of settings. * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient- centered care. * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |
| **Unit 7- Newborn Care** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 7 Competencies**   1. Prioritize nursing responsibilities for the neonate during the transition from intrauterine to extra-uterine life. 2. Differentiate normal variations in newborn characteristics from abnormal findings including implications of care. 3. Analyze the nutritional requirements for the neonate 4. Discuss an assessment tool for determining gestational age 5. Describe the effects of medications administered during the neonatal period. |  |
| **Unit 7 Content** |  |
| 1. Physiological needs 2. Apgar scores 3. Gestational age 4. Feeding methods 5. Bonding 6. Medications |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6)*  *EPSLO 2: Implement safety and quality initiatives in the delivery of holistic client-centered care. (MDC Learning Outcomes 3) (Core Component 5 & 7)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing complex (unstable acute conditions) health alterations in a variety of settings. * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient-centered care. * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |
| **Unit 8 – Newborn with complications** | * Quantitative analytical * Critical/creative thinking * Formulate strategies |
| **Unit 8 Competencies** |  |
| 1. Identify the impact of the high-risk neonate on the family unit. 2. Identify nursing measures related to the pathophysiology of respiratory distress syndrome 3. Discuss with nursing implications. 4. Discuss common complications of the newborn. |  |
| **Unit 8 Content** |  |
| 1. SIDS 2. Asphyxia 3. RDS 4. Failure to thrive |  |
| **EPSLO**  *EPSLO 1: Develop a professional identity that demonstrates teamwork, collaboration, effective communication and adhere to standards of practice for nursing. (MDC Learning Outcomes 1,6) (Core Components 3, 4 & 6)*  *EPSLO 2: Implement safety and quality initiatives in the delivery of holistic client-centered care. (MDC Learning Outcomes 3) (Core Component 5 & 7)*  *EPSLO 4: Deliver compassionate care to diverse populations with respect to individuality and client needs. (MDC Learning Outcomes 1, 2) (Core Components 1, 2, & 7)*  *EPSLO 5: Uses relevant evidence to improve client outcomes within a dynamic environment. (MDC Learning Outcomes 2,4,9,10) (Core Components 5 & 7)*   * Perform a comprehensive health assessment including physiological, psychological, sociological, and spiritual needs of patients, families, groups, populations, and communities across the lifespan experiencing complex (unstable acute conditions) health alterations in a variety of settings. * Use the nursing process to prioritize the delivery of patient care, with two or more patients, to achieve optimal outcomes. * Model culturally sensitive care for patients, families, and groups from diverse backgrounds. * Use clinical reasoning and clinical judgment when evaluating nursing care to improve patient outcomes. * Advocate for patients, families, and groups regarding nursing care issues and health care decisions. * Use verbal and nonverbal communication that promotes caring, therapeutic relationships with individuals, families, and groups. * Analyze best current evidence for its application to practice when providing and managing patient-centered care. * Integrate best current evidence into clinical judgments that indicate the need to modify clinical practice |  |

**STANDARDIZED EXAM**

**PRACTICE ASSESSMENT AND REMEDIATION**

1. At designated times during the course, the student will take two Practice Assessment tests from home.
2. The results of the Practice Assessment A will generate a remediation plan.
3. The student must complete the assigned ATI Remediation Plan prior to taking the Practice Assessment B.
4. At the completion of the assigned ATI Remediation Plan, the student will complete Practice Assessment B.
5. In order to receive the full points, the student must complete all areas of the 2 Practice Assessments and the remediation Plan.

|  |  |  |
| --- | --- | --- |
|  | | |
| **2 POINTS** | **2 POINTS** | **2 POINTS** |
| *Practice Assessment A* | *Remediation Plan* | *Practice Assessment B* |
| Complete Practice Assessment A. | * Complete ATI Assigned Remediation Plan. * ***For each topic listed complete:***   + An active learning template   + Identify three critical points to remember | Complete Practice Assessment B |

|  |
| --- |
| STANDARDIZED PROCTORED ASSESSMENT |
| Level 3 = 4 points |
| Level 2 = 3 points |
| Level 1 = 1 point |
| Below Level 1 = 0 points |

The Standardized Proctored Assessment is mandatory and is given towards the end of the course (*courses include Fundamentals, Pharmacology, Obstetrics, Pediatrics, Psychiatrics, Medical Surgical, and Advanced Medical Surgical*). The student can earn up to a total of 4 points based on the level achieved on the Standardized Proctored Assessment. The following scale will be used for the Standardized Proctored Assessment:

**Means of ouTCOME Assessment**

**Tests 1 & 2 = 60% (30% each)**

**Final Exam = 30%**

**STANDARDIZED EXAM = 10%**

**TOTAL = 100%**

Each test will contain pharmacology and/or pharmacology math questions

**Evaluation/Grading Scale**

The course grade scale is outlined below:

|  |  |
| --- | --- |
| **GRADE** | **PERCENTAGE** |
| A | 93 – 100 |
| B | 85 - 92 |
| C | 77 - 84 |
| D | 60 – 76 |
| F | 59 and Below |

* A grade of “A” indicates clearly superior work in every area of evaluation.
* A grade of “B” indicates competency in all areas of evaluation plus superior work in some areas of evaluation.
* A grade of “C” indicates competency in all areas of evaluation.
* A grade of “D” indicates clear problems in several areas of evaluation.
* A grade of “F” indicates clear problems in most or all areas of evaluation.

**Method of Communicating Grades:**

Grades for each test will be distributed within one week of taking the test.

**COURSE/DEPARTAMENTAL POLICIES**

**MAKE UP TEST:**

There are no make-up tests in this course. If a student is unable to attend class on the day a test is scheduled, the weight of the final exam will be increased by the weight of each missed test. If more than one test is missed, the student may be asked to withdraw*.*

**REQUIRED TEXTBOOKS**

Scott Ricci, S., Kyle, T., Carman, S., (2021). Maternity and Pediatric Nursing (4th ed.)., Philadelphia, Wolters Kluwer

Faculty, Miami-Dade Community College (2001). Associate Degree Nursing Curriculum. Level 2. Miami.

Recommended Textbooks

ATI Content Mastery Series Review Module

**SIMULATION VIDEOS**

Please remember that the Simulation videos are private and you need a password to see it. The password is **simulation.**

Obstetrics: [https://vimeo.com/130318612](https://email.mdc.edu/owa/redir.aspx?C=MSmqf_INFk6CLTmBWWELhtuMX6wXe9IIwnmbGctyt39sTEFCEXEYJmQ7kzcAH_R39YVxBU07HwA.&URL=https%3a%2f%2fvimeo.com%2f130318612)

Newborn: [https://vimeo.com/129821930](https://email.mdc.edu/owa/redir.aspx?C=MSmqf_INFk6CLTmBWWELhtuMX6wXe9IIwnmbGctyt39sTEFCEXEYJmQ7kzcAH_R39YVxBU07HwA.&URL=https%3a%2f%2fvimeo.com%2f129821930)

*If the site asks for a username, you did not follow directions*.

|  |  |  |  |
| --- | --- | --- | --- |
| **Week/**  **Date** | **Topic and Disorders** | **Reading Assignments** | **Learning Activities and Exams** |
| Unit Objectives: Unit 1: 1, 2, 3, 4, 5, 6, 7, 8, 9; **4 WEEK SCHEDULE (SUMMER)**  Course SLO 1, 2, 3, 4, 5, 6, 7,  (EPSLO) | | | |
| **Week 1**  **Monday**  **July4th, 2022**  **Thursday**  **July7th, 2022** | **HOLIDAY**  **Orientation to course**  Normal Antepartum  Fetal development  Nutrition  Fetal Monitoring  Fetal Assessment  OB Math | Please review the pre-recorded tape so you will be ready for day1 of class. It is important you do this as I will only be reviewing the material.  Chapter 10  Fetal Development and Genetics  Chapter 11 maternal Adaptation During Pregnancy  Chapter 12: Nursing Management During Pregnancy | Watch the simulation video **BEFORE** class. Link on page14 above.  Define all Vocabulary Words by Monday July 4th, 2022 |
| Unit Objectives: Unit 3: 1, 2, 3, 4, 6, 7; Unit 5: 1, 2, 3, 4, 5, 6, 7, 8  Course SLO: 1, 2, 3, 4, 5, 6, 7,  (EPSLO) | | | |
| **Week 2**  **Monday**  **July11th, 2022**  **Thursday**  **July14th, 2022** | OB Math  Labor and Delivery (intrapartum)  Intrapartum pain management  Normal post-partum  Normal  Newborn | * Chapter 13 Labor and Birth Process   Chapter 14th: Nursing Management During Labor and Delivery   * Chapter 15: Postpartum Adaptation   Chapter 16: Nursing Management During the Postpartum Period  Chapter 17: Newborn Transitioning  Chapter 18: Nursing Management of the Newborn | Test #1 Thursday 4/14/22 All material covered to this point.  ATI Practice “A” opens July 11th Closes July 20th at 11:30pm |
| Unit 3: 1,2,3,4: Unit 5: 1; Unit 6: 1, 2, 3, 4, 5, 6, 7; Unit 7: 1, 2, 3, 4, 5; Unit 8:1, 2, 3, 4  Course SLO: 1, 2, 3, 4, 5, 6, 7,  (EPSLO) | | | |
| **Week 3**  **Monday**  **July18th, 2022**  **Thursday**  **July21st, 2022** | Antepartum Complications  Intrapartum Complications  Postpartum Complications | Chapter 19: Nursing Management of Pregnancy t Risk: Pregnancy -Related Complications  Chapter 20 Nursing Management of the Pregnancy at Risk: Selected Health Conditions and Vulnerable Populations  Chapter 21: Nursing Management of Labor and Birth at Risk  Chapter 22: Nursing Management of the Postpartum women at Risk | Completion of 100 ATI adaptive questions In Board Vitals, scoring level 1 or above Pick questions that are related to the topics already covered. Upload to Blackboard  Test #2  ATI Practice “B: opens Feb 25th closes Feb 27th at 11:30pm |
| Unit Objectives: Unit 2: 1, 2, 3, 4; Unit 4:1, 2, 3, 4, 5, 6  Course SLO: 1, 2, 3, 4, 5, 6, 7,  (EPSLO) | | | |
| **Week 4**  **Monday**  **July25th, 2022**  **Thursday**  **July28th, 2022** | Newborn complications  Review for Comprehensive Final Exam  Final Time TBA  OB ATI Proctored Exam TBA at medical campus testing arrive 15 minutes before the exam  Student ID | Chapter 23: Nursing Care pd the Newborn with Special Needs  Chapter 24: Nursing Management of the Newborn at Risk: Acquired and Congenital Newborn Conditions | One on one review of test #2 with professor prior to Final Exam  Completion of 100 ATI adaptive questions in Board Vitals, scoring level 2 or above (in addition to the required questions for clinical) |

**\*\*Course/lecture content is subject to change based on course/student needs.**

**BlackBoard (SAMPLE)**

All assignments will be administered via blackboard. Students are expected to adhere to the instructions provided along with assigned due dates.

**Academic Honesty**

This procedure establishes a process for addressing charges of academic dishonesty in a manner that preserves the professional integrity of the faculty member as well as the due process rights of the student. Academic dishonesty includes the following actions, and those that are similar in nature, with respect to a student’s academic performance.

A. Cheating on an examination including unauthorized sharing of information

B. Collaborating with others in work to be submitted, if contrary to the stated rules of the course

C. Plagiarizing, taking and claiming as one’s own the ideas, writings, or work of another, without citing the sources

D. Submitting, work from another course unless permitted by the instructor

Some related actions of academic dishonesty, such as stealing examinations or course material and falsifying records, may be directly addressed through Procedure 4030 Student Disciplinary Procedures. A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter4/4035.pdf>

**STUDENT DISCIPLINARY ACTIONS**

All alleged student violations of the Code of Conduct of the College are referred to the Office of the Student Dean at the respective campus. A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter4/4030.pdf>

**sTANDARDS OF ACADEMIC PROGRESS (SOAP)**

The main purpose for the Standards of Academic Progress (SOAP) Procedure is to establish a formal process through which the faculty, staff, and administration at Miami Dade College may identify and provide support to students who experience academic difficulty and fall below a Combined Cumulative Grade Point Average (GPA) of 2.0 (Calculated from the combined graded units for GPA). The combined Cumulative GPA includes computation of grades for both MDC and posted transfer courses. Good Academic Standing is defined as 2.0 or higher for the Combined Cumulative GPA.A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter4/4010.pdf>

**Guidelines for Appeal of the Standards of Academic Progress**

To establish a procedure for review and consideration regarding adjustment to students’ academic standing of suspension or dismissal as outlined in College Procedure 4010 Standards of Academic Progress (SOAP). A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter4/4015.pdf>

**Services Provided For Students With Disabilities**

To provide general information and guidelines concerning services available for students with disabilities, including the granting of auxiliary aids, substitutions, modifications, academic adjustments or waivers of requirements for admission to the College, its programs of study, its entry requirements to the upper division, or graduation for students with disabilities. To provide the College with procedures relating to students that may pose a direct threat to the health and safety of others. A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter4/4055.pdf>

**Student Appeal of Grades**

This College procedure for the student appeal of grades ensures that both students and faculty will be aware of the processes that are to be followed when a course grade is challenged. The responsibility for academic evaluation and the assignment of grades is that of the faculty member who has been assigned responsibility for a course. When a student believes that he/she has not been evaluated as prescribed in the course syllabus, an avenue of appeal must be provided. A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter8/8301.pdf>

**INCOMPLETE GRADES**

An incomplete grade is submitted when the student's work in a course is incomplete, and the student has obtained the instructor's permission to finish the course. An Incomplete is normally given only where extenuating circumstances exist, or where research or performance needs to be extended beyond the normal limits of the term. If a grade of B-D is possible, this grade may be granted, even though the student and instructor may agree that a higher grade is possible with further effort on the part of the student.

Student may request a grade of Incomplete only after the drop/withdraw date has passed. The decision to grant such a request will rest with the individual course instructor. The students have an opportunity to appeal the course instructor's decision, if it is negative, to the immediate supervisor of the course instructor. This would be a one-step final appeal process.

If the decision is reached by the course instructor to grant an Incomplete, this must be accompanied by a written and signed agreement between the course instructor and the student. The Agreement Form will contain the following points:

1. The time period in which the course requirements must be completed. As a standard rule, this work should be completed by the last day of the next major term (Fall or Winter). An extension of this time limit may be granted by the appropriate Department Head after consultation with the instructor, if the reasons are determined to be beyond the control of the student – severe illness, accident, etc. (In the event the Incomplete grade is carried past the next major term, faculty must maintain course records for the student up until the next major term from the time at which the grade is recorded on the student transcript.)

2. The specific requirements that must be completed and the manner in which they are to be completed.

(This might include some reference to grading criteria).

3. A provision that if the requirements have not been met by the end of the next major term, a Failure will be recorded as the grade for the course. A student does not remove an Incomplete by registering in a subsequent term to re-take the course.

**WITHDRAWLS**

If you are thinking of withdrawing from a class, speak first with your professor. If you still choose to withdraw, please keep the following in mind:

• A course withdrawal is not an automatic process; you need to withdraw either online or at the registration office.

• If you withdraw from a course after the 100 percent refund date, it counts as an attempt and it will remain on your transcript.

• You may withdraw with a grade of “W” up to the withdrawal date. Withdrawals after that date would be considered only through the petition process. Check with your advisor for more information.

• Withdrawals are not official until processed online or at the Registrar’s Office. Get a copy of your schedule to confirm this transaction.

• Withdrawal deadlines are published in the official College calendar.

• Dropping a course may jeopardize your athletic eligibility, financial aid, veteran benefits, student visa status or participation in student activities.

**Student Complaints**

Prospective or enrolled students may voice a complaint about a College rule/regulation, procedure, or experience. The complaint may also be raised by a group of students or student government. Students must first voice their complaint to front-line staff and/or their supervisors. If the complaint cannot be resolved at that level, then the supervisors will communicate it to the next leadership level and notify the student(s). Students are expected to follow this chain of command within the complaint process and not elevate their complaint to the senior executive level of the College. Students who are unable to resolve their concerns/issues with the front-line staff and/or their supervisors may file a complaint in writing to the appropriate division head as listed in the table in this procedure. If the complaint is against a first or second level individual in the chain of command, the student should present the concern to the next level. A detailed review of the procedure can be viewed at <https://www.mdc.edu/procedures/Chapter4/4032.pdf>

**Veterans Affairs**

Our Veterans Affairs offices are available to assist all eligible U.S. veteran students and dependents who are using their V.A. educational benefits to further their education. You can get information about entitlements, filing claims to the Department of Veterans Affairs (DVA) and certifying enrollment at MDC. Connect to MDC staff/contacts, specialized services, and certification information and processing. For more information, please contact Veterans Information at 305-237-2790.

**Accessibility and Disability Services**

ACCESS (A Comprehensive Center for Exceptional Student Services) Disability Services provide and coordinate accommodations for students with documented disabilities. Federal and state laws and regulations guarantee students with disabilities equal access and equal opportunity in post-secondary education. The College has developed special support services and accommodations to assist students with disabilities in achieving equal opportunities.

**Tutoring**

To support the college's transition to remote-learning, we will be providing tutoring through Blackboard Collaborate Ultra.

**How to access a virtual tutor:**

1. Select the campus where you typically meet with a tutor
2. Select the discipline you are requesting tutoring from
3. You will be connected to a Collaborate Ultra room and a staff member will further direct you

**Need a tutor outside of the scheduled hours?** Check to see if your professor has activated Smarthinking virtual tutoring in their Blackboard course. Smarthinking will pair you with a subject specific tutor 24/7.

**SMART PLAN POLICY:**

The Benjamin Leon School of Nursing’s goal is for every student to be successful throughout the nursing program. Nursing students are only allowed to repeat a course one time, if failed the second time, the student will be dismissed from the program. To avoid this from happening, and to remediate the student, a SMART Action Plan for Remediation has been developed for each nursing course. Each SMART Plan is specific for the failed course and focuses on student preparation and success. It is mandatory in the School of Nursing that any student who is unsuccessful in a course the first time must complete a Smart Plan before being allowed to re-take/re-register for the course. To initiate the SMART Plan, students must:

a. Be advised and referred by their course instructor.

b. Meet with a Retention Specialist who will initiate the SMART Action Plan.

c. Complete all assignments with the Retention Specialist, who will verify your work and send a completion release to the student’s program Department Chairperson.

d. The Chairperson will be responsible for re-enrolling the student into courses and notifying the student’s instructor of your completion status.

e. Please see your Department Chairperson for more information.

**For more information concerning labs by campus, please visit**

<https://libraryguides.mdc.edu/c.php?g=636897&p=4456609>

**Title IX: Discrimination, Harassment, and Sexual Misconduct Reporting**:

Miami Dade College is committed to providing an institutional environment where all persons may pursue their

studies, careers, duties, and activities in an atmosphere free of threat of unwelcome and unwanted sexual

offenses and violence. The College prohibits offenses of Sexual Assault, Domestic Violence, Dating Violence

and Stalking on its campuses and has developed policies and procedures to be followed once it has been

determined that a sexual offense has occurred.

A list of resources is available at <https://www.mdc.edu/preventsexualviolence/know-your-rights.aspx>.

If you wish to report misconduct or have questions about school policies and procedures regarding Sexual Assault, Dating Violence, Domestic Violence and Stalking, please refer to MDC’s Title IX Coordinator and/or for more information, please review the procedure with contact listing information at

<https://www.mdc.edu/policy/Chapter1/01-I-20-Non-Substantive-Revised-8-17-16.pdf>