

Levelland Campus

### Course Syllabus

Courses: VNSG 1400 Nursing in Health and Illness I  
VNSG 1409 Nursing in Health and Illness II  
VNSG 2410 Nursing in Health and Illness III

Semesters: Fall 2020, Spring 2021, Summer 2021

Lab Times: TBA

Instructors: Nicole Holmes BSN, RN: AH 103C 806-716-2471

[gholmes@southplainscollege.edu](mailto:gholmes@southplainscollege.edu)

Janet Hargrove BSN, RN: AH 103A 806-716-2386

[jhargrove@southplainscollege.edu](mailto:jhargrove@southplainscollege.edu)

Kelli Blair LVN: AH 103E 806-716-2520

[kblair@southplainscollege.edu](mailto:kblair@southplainscollege.edu)

*"South Plains College improves each student's life"*

#### GENERAL COURSE INFORMATION

\*It is the responsibility of each student to be familiar with the content and requirements listed in the course syllabus\*

#### FACE COVERING COURSE SYLLABUS STATEMENT

It is the policy of South Plains College for the Fall 2020 semester that as a condition of on-campus enrollment, all students are required to engage in safe behaviors to avoid the spread of COVID-19 in the SPC community. Such behaviors specifically include the requirement that all students properly wear CDC-compliant face coverings while in SPC buildings including in classrooms, labs, hallways, and restrooms. Failure to comply with this policy may result in dismissal

from the current class session. If the student refuses to leave the classroom or lab after being dismissed, the student may be referred to the Dean of Students on the Levelland campus or the Dean/Director of external centers for Student Code of Conduct Violation.

Content Particular to 1409 and 2410 in gray shading

## **COURSE DESCRIPTION (WECM)**

VNSG 1400: Introduction to general principles of growth and development, primary health care needs of the patient across the life span, and therapeutic nursing interventions. VNSG 1409: Introduction to health problems requiring medical and surgical interventions. VNSG 2410: Continuation of Nursing in health and Illness II. Further study of medical-surgical health problems of the patient including concepts of mental illness. Incorporates knowledge necessary to make the transition from student to graduate vocation nurse.

## **STUDENT LEARNING OUTCOMES**

**(DECS Differentiated Essential Competency Skills Vocational Nursing) Texas Board of Nursing**

At the completion of the course, students will:

1. Compare and contrast normal body functions with that of pathological variations.
2. Identify disease process by definition, assessment and diagnostics.
3. Assist in formulation of a plan of care utilizing the nursing process for medical-surgical conditions.
4. Provide patient/family education.
5. Demonstrate use of nursing process in regard to drug therapy.
6. Discuss normal aging, system changes, common disease processes, lifestyle changes, common issues and needs during the aging process.
7. Discuss the principles of nutrition, the digestive process, food nutrients, diet therapy and diet modifications.

**COURSE OBJECTIVES** (C1, C5, C6, C7, C8, C9, C12, C14, C18, C20; F1, F2, F5, F7, F8, F9, F11, F12, F13, F16, F17)

## **EVALUATION METHODS**

Unit exams, written assignments, final examination, quizzes and other projects as assigned.

## **ACADEMIC INTEGRITY**

It is the aim of the faculty of South Plains College to foster a spirit of complete honesty and a high standard of integrity. The attempt of any student to present as his or her own work which he or she has not honestly performed is regarded by the faculty and administration as a most serious offense and renders the offender liable to serious consequences, possibly suspension.

**Cheating:** Dishonesty of any kind on examinations or on written assignments illegal possession of examinations, the use of unauthorized notes during an examination, obtaining information during an examination from the textbook or from the examination paper of another student, assisting others to cheat, alteration of grade records, illegal entry or unauthorized presence in the faculty offices are examples of cheating. Complete honesty is required of the student in the presentation of any and all phases of coursework. This applies to quizzes of whatever length, as well as final examinations, to daily reports and to term papers.

**Plagiarism:** Offering the work of another as one's own, without proper acknowledgment, is plagiarism; therefore, any student who fails to give credit for quotations or essentially identical expression of material taken from books, encyclopedias, magazines and other reference works, or from themes, reports or other writings of a fellow student, is guilty of plagiarism.

## **VERIFICATION OF WORKPLACE COMPETENCIES**

No external learning experiences provided. Successful completion of the DECS competency statements at the level specified by the course (Level Objectives) will allow the student to continue to advance within the program. Upon successful completion of the program, students will be eligible to take the state board exam (NCLEX PN) for vocational nurse licensure.

## **BLACKBOARD**

Blackboard is an e-Education platform designed to enable educational innovations everywhere by connecting people and technology. This educational tool will be used in this course throughout the program.

## **FACEBOOK**

Please see the Facebook page for the nursing program for general information.

## **SCANS AND FOUNDATION SKILLS**

Refer also to Course Objectives. Scans and Foundation Skills attached.

## **ADDITIONAL CLASSROOM ITEMS**

Students should come to class prepared with pens, pencils, and writing material for taking notes, quizzes, or assignments in class. Students should be prepared to take notes over lecture material if they choose. You will also be required to purchase and use pre-printed medication cards. Any other format will not be accepted. Black or blue ink pens must be used for assignments and medication cards. **Purple ink pens should be used for correction as requested by the instructor.** You must have computer, internet and printer. See Vocational Nursing Handbook for dress code for the classroom and skills lab.

The student **MUST** have the most recent edition of the required textbooks and workbooks. Students will **NOT** be allowed to attend unless the newest edition is brought to class. See student handbook for requirements for bringing textbooks to class.

Students will not be allowed to use programmable calculator or phone calculators during testing. Student seating and placement will be at the discretion of the instructor during lecture and testing. Students may not have cell phones, or “smart watches”, or any other electronic device on their person or on the desk during testing.

## **ATTENDANCE POLICY**

### **Class Attendance**

Students are expected to attend all classes in order to be successful in a course. The student may be administratively withdrawn from the course when absences become excessive as defined in the course syllabus.

When an unavoidable reason for class absence arises, such as illness, an official trip authorized by the college or an official activity, the instructor may permit the student to make up work missed. It is the student's responsibility to complete work missed within a reasonable period of time as determined by the instructor.

Students are officially enrolled in all courses for which they pay tuition and fees at the time of registration. Should a student, for any reason, delay in reporting to a class after official enrollment, absences will be attributed to the student from the first class meeting.

Students who enroll in a course but have "Never Attended" by the official census date, as reported by the faculty member, will not be administratively dropped by the Office of Admissions and Records. A student who does not meet the attendance requirements of a class as stated in the course syllabus and does not officially withdraw from that course by the official census date of the semester, may be administratively withdrawn from that course and receive a grade of "X" or "F" as determined by the instructor. Instructors are responsible for clearly stating their administrative drop policy in the course syllabus, and it is the student's responsibility to be aware of that policy.

It is the student's responsibility to verify administrative drops for excessive absences through MySPC using his or her student online account. If it is determined that a student is awarded financial aid for a class or classes in which the student never attended or participated, the financial aid award will be adjusted in accordance with the class in which the student did attend/participate and the student will owe any balance resulting from the adjustment.

Contact hours: 96. See SPC catalogue or Vocational Nursing Student Handbook. Students are expected to attend all classes, arrive on time, and to remain for the entire class period. Attendance will be taken at the beginning of class: a student not present will be marked absent in the attendance record. Students absent more than 12 hours will be removed from the course. Three (3) tardies count as one (1) hours' absence. There are no excused absences.

## **ASSIGNMENT POLICY**

All class assignments are to be turned in by 0800 on the due date announced or the assignment will be considered late. Ten (10) points will be deducted from the paper for each day turned in late. Failure to complete assignments will result in a grade of INCOMPLETE. Please refer to the Student Handbook for Vocational Nursing.

## **COMPUTER USAGE**

As computer technology in the field of health occupations continues to become more popular, computers will be used in this course for several assignments. All students have access to computers and printers on the South Plains College campus. Students will be expected to utilize computers to access assignments and classroom resources. All registered students are supplied with a working email account from South Plains College. In order to take exams, students must have their user name and password.

**ALL STUDENTS ARE EXPECTED TO KNOW THEIR SPC STUDENT USER NAME AND PASSWORD**

## **COMPUTER LAB USAGE**

The computer lab(s) will only be available to students who are testing.

## **EXAMS**

There will be an exam after the completion of each assigned unit, and a comprehensive final examination at the end of the course. Unit exams will not be made up. A grade of 0 (zero) will be given. The lowest test grade will be dropped. Always be prepared for an unannounced pop quiz. Quizzes are not eligible for make-up and a grade of 0 (zero) will be automatically given.

## **GRADING POLICY**

A grade of 77% is required to pass this course.

VNSG 1400

Unit exams	60%
Assignments	20%

Final Examination 20%

#### VNSG 1409

Unit Exams 60%

Assignments 20%

Final Examination 20%

#### VNSG 2410

Unit Exams 60%

Assignments 20%

Final Examination 20%

#### Grading Scale:

A (100-90)

B (89-80)

C (79-77)

D (70-76)

F (69 and below)

Grades are not rounded: 76.9 is a D

The student must receive a minimum of 77% in each course, and meet the specified clinical criteria within a semester in order to qualify for progression to the next semester.

#### **COMMUNICATION POLICY**

Electronic communication between instructor and students in this course will utilize the South Plains College “MySPC” and email systems. The REMIND system will also be used. Do NOT use electronic media, email or texting to communicate ANY patient information. The instructor will not initiate communicate using private email accounts.

## **CAMPUS CARRY**

Campus Concealed Carry - Texas Senate Bill - 11 (Government Code 411.2031, et al.) authorizes the carrying of a concealed handgun in South Plains College buildings only by persons who have been issued and are in possession of a Texas License to Carry a Handgun. Qualified law enforcement officers or those who are otherwise authorized to carry a concealed handgun in the State of Texas are also permitted to do so. Pursuant to Penal Code (PC) 46.035 and South Plains College policy, license holders may not carry a concealed handgun in restricted locations. For a list of locations, please refer to the SPC policy at:

[http://www.southplainscollege.edu/human\\_resources/policy\\_procedure/hhc.php](http://www.southplainscollege.edu/human_resources/policy_procedure/hhc.php)

Pursuant to PC 46.035, the open carrying of handguns is prohibited on all South Plains College campuses. Report violations to the College Police Department at 806-716-2396 or 9-1-1.

## **PREGNANCY ACCOMMODATIONS STATEMENT**

If you are pregnant, or have given birth within six months, Under Title IX you have a right to reasonable accommodations to help continue your education. To activate accommodations you must submit a Title IX pregnancy accommodations request, along with specific medical documentation, to the Director of Health and Wellness. Once approved, notification will be sent to the student and instructors. It is the student’s responsibility to work with the instructor to arrange accommodations. Contact Crystal Gilster, Director of Health and Wellness at 806-716-2362 or email [cgilster@southplainscollege.edu](mailto:cgilster@southplainscollege.edu) for assistance.

## **STUDENT CONDUCT**

Rules and regulations relating to the students at South Plains College are made with the view of protecting the best interests of the individual, the general welfare of the entire student body and the educational objectives of the college. As in any segment of society, a college community must be guided by standards that are stringent enough to prevent disorder, yet moderate enough to provide an atmosphere conducive to intellectual and personal development.

A high standard of conduct is expected of all students. When a student enrolls at South Plains College, it is assumed that the student accepts the obligations of performance and behavior imposed by the college relevant to its lawful missions, processes and functions. Obedience to the law, respect for properly constituted authority, personal honor, integrity and common sense guide the actions of each member of the college community both in and out of the classroom.

Students are subject to federal, state and local laws, as well as South Plains College rules and regulations. A student is not entitled to greater immunities or privileges before the law than those enjoyed by other citizens. Students are subject to such reasonable disciplinary action as the administration of the college may consider appropriate, including suspension and expulsion in appropriate cases for breach of federal, state or local laws, or college rules and regulations. This principle extends to conduct off-campus which is likely to have adverse effects on the college or on the educational process which identifies the offender as an unfit associate for fellow students.

Any student who fails to perform according to expected standards may be asked to withdraw.

Rules and regulations regarding student conduct appear in the current Student Guide.

### **SPECIAL REQUIREMENTS (\*Read Carefully)**

- Recording of lectures, presentation and discussions is not permitted
- Required readings: See text and materials list. It is required that each chapter be read prior to the first lecture hour for the chapter. The student

is responsible for completing the learning objectives and learning the key terms at the beginning of the chapter.

- The assigned medical terminology chapter(s) will be due at 0800 on the morning lecture will begin for that subject. See weekly schedule handout. The workbook must be not written in. The assignment will be graded on completeness and accuracy. Chapters for each unit will be graded, then averaged together for one grade per unit.
- Please see information regarding drug cards.
- Ethical Decision making activity: The student will select a case study from the syllabus and complete the ethical decision making activity. Select a different case study each semester. The due date for VNSG 1400 is 0800 on September 28, 2020. The due date for VNSG 1409 is 0800 on January 18, 2021. See grading criteria. Late papers will have 10 points deducted for each class day late.

- ATI testing policy
  - Students will be required to participate in ATI testing. In 1409, the student will take the Fundamentals test, during mid-semester. In 2410, the student will be required to take the Med/Surg, the Pharmacology portion, and the ATI Comprehensive/Predictor. Students will purchase and receive books at the beginning of the year/semester
  - Each ATI test result, with the exception of the Comprehensive/Predictor, will be recorded to be averaged in with the other test grade as follows:

▪ Score:	Level 3	100%
▪	Level 2	93%
▪	Level 1	77%
▪	Below level 1	70%

- **The ATI test results will NOT be eligible to be the lowest grade removed in the course**

- **ATI testing results will affect overall test average!**

- Practice tests: Printed results of practice tests must be submitted on the date required. A passing score is required on submitted practice tests. Students are urged to fully utilize provided texts, planning, time management techniques, and practice testing opportunities.

To fulfill the graduation requirement:

The NCLEX PN comprehensive/predictor exam will be taken in the third semester.

The student must complete 2 practice tests on the NCLEX PN comprehensive/predictor. For one of the practice tests, the student must use the practice mode that allows review after each question. It is very likely the student will need to devote a great deal of time on this process. REMINDER: THE STUDENT MUST HAVE ACCESS TO A COMPUTER WITH INTERNET ACCESS, AND A PRINTER FOR THESE TESTS.

**BASIC SKILLS—Reads, Writes, Performs Arithmetic and Mathematical Operations, Listens and Speaks**

F-1 Reading—locates, understands, and interprets written information in prose and in documents such as manuals, graphs, and schedules.

F-2 Writing—communicates thoughts, ideas, information and messages in writing and creates documents such as letters, directions, manuals, reports, graphs, and flow charts.

F-3 Arithmetic—performs basic computations; uses basic numerical concepts such as whole numbers, etc.

F-4 Mathematics—approaches practical problems by choosing appropriately from a variety of mathematical techniques.

F-5 Listening—receives, attends to, interprets, and responds to verbal messages and other cues.

F-6 Speaking—organizes ideas and communicates orally.

**THINKING SKILLS—Thinks Creatively, Makes Decisions, Solves Problems, Visualizes and Knows How to Learn and Reason**

F-7 Creative Thinking—generates new ideas.

F-8 Decision-Making—specifies goals and constraints, generates alternatives, considers risks, evaluates and chooses best alternative.

F-9 Problem Solving—recognizes problems, devises and implements plan of action.

F-10 Seeing Things in the Mind's Eye—organizes and processes symbols, pictures, graphs, objects, and other information.

F-11 Knowing How to Learn—uses efficient learning techniques to acquire and apply new knowledge and skills.

F-12 Reasoning—discovers a rule or principle underlying the relationship between two or more objects and applies it when solving a problem.

**PERSONAL QUALITIES—Displays Responsibility, Self-Esteem, Sociability, Self-Management, Integrity and Honesty**

F-13 Responsibility—exerts a high level of effort and perseveres towards goal attainment.

F-14 Self-Esteem—believes in own self-worth and maintains a positive view of self.

F-15 Sociability—demonstrates understanding, friendliness, adaptability, empathy and politeness in group settings.

F-16 Self-Management—assesses self accurately, sets personal goals, monitors progress and exhibits self-control.

F-17 Integrity/Honesty—chooses ethical courses of action.

---

**SCANS COMPETENCIES**

C-1 **TIME** - Selects goal - relevant activities, ranks them, allocates time, prepares and follows schedules.

C-2 **MONEY** - Uses or prepares budgets, makes forecasts, keeps records and makes adjustments to meet objectives.

C-3 **MATERIALS AND FACILITIES** - Acquires, stores, allocates, and uses materials or space efficiently.

C-4 **HUMAN RESOURCES** - Assesses skills and distributes work accordingly, evaluates performances and provides feedback.

### **INFORMATION - Acquires and Uses Information**

C-5 Acquires and evaluates information.

C-6 Organizes and maintains information.

C-7 Interprets and communicates information.

C-8 Uses computers to process information.

### **INTERPERSONAL—Works With Others**

C-9 Participates as a member of a team and contributes to group effort.

C-10 Teaches others new skills.

C-11 Serves Clients/Customers—works to satisfy customer's expectations.

C-12 Exercises Leadership—communicates ideas to justify position, persuades and convinces others, responsibly challenges existing procedures and policies.

C-13 Negotiates—works toward agreements involving exchanges of resources; resolves divergent interests.

C-14 Works With Diversity—works well with men and women from diverse backgrounds.

### **SYSTEMS—Understands Complex Interrelationships**

C-15 Understands Systems—knows how social, organizational, and technological systems work and operates effectively with them.

C-16 Monitors and Corrects Performance—distinguishes trends, predicts impacts on system operations, diagnoses systems performance and corrects malfunctions.

C-17 Improves or Designs Systems—suggests modifications to existing systems and develops new or alternative systems to improve performance.

### **TECHNOLOGY—Works with a Variety of Technologies**

C-18 Selects Technology—chooses procedures, tools, or equipment, including computers and related technologies.

C-19 Applies Technology to Task—understands overall intent and proper procedures for setup and operation of equipment.

C-20 Maintains and Troubleshoots Equipment—prevents, identifies, or solves problems with equipment, including computers and other technologies.

## **ETHICAL DECISION MAKING**

### **VNSG 1400 and 1409**

#### **GRADING CRITERIA**

Possible Points:

- 15     1) What is the issue or problem?
  
- 15     2) Why is this an issue?
  
- 20     3) Which values are involved? (Example: veracity, benevolence, etc)  
          Define and discuss each involved value (use reference) and explain how these are involved with this case.
  
- 25     4) Which two values are in conflict? Give specifics
  
- 25     5) If you were discussing this situation with a colleague, what solutions would you recommend? State your rationale.

The student should select one of these case studies for 1400(due September 28, 2020) and another case study for 1409(due January 18, 2021). It is anticipated this project will be 2-4 pages in length. The paper should be neatly hand-printed or typed. At least 1 full, detailed paragraph should be written on each section. Use the textbook for Professional Concepts/Development as a reference for this assignment. Use APA format for references.

## Ethical Thinking

### Case #1

A 68 year old patient has stage IV prostate cancer with metastasis to his pelvic bones and lower spine. He is alert, and has severe pain in his lower back and pelvic area every time he tries to move, even in bed. As a result, the only comfortable position for him is supine.

He has developed stage 1 decubitus ulcers on his sacrum and on the back of his heels. His nutritional status is poor. The patient has also developed atelectasis in his lower lobes and is unable to cough up his secretions.

Several nurses would like the patient to be turned every 2 hours to prevent further skin breakdown and respiratory distress, which would most likely hasten his death. They feel a decubitus ulcer and respiratory distress would cause pain and discomfort also. Other nurses feel, in view of his prognosis, that turning him would cause unnecessary pain and would not benefit the patient.

### Case #2

A 28 year old patient is 9 weeks pregnant with her first child. She develops fatigue, epistaxis and numerous bruises over her body. A CBC and Bone Marrow Biopsy reveal acute leukemia. Her physician has advised an immediate surgical abortion in order to begin chemotherapy.

Her physician has determined that chemotherapy must begin immediately in order to save the mother's life. The health care team recognizes the mother would only live three to four months without chemotherapy and that the fetus would not have reached viability at that stage. The proposed chemotherapy is highly teratogenic.

Several nurses in the operating room are refusing to assist the surgeon, citing strong religious and moral objection to the procedure. Other nurses feel the mother and the child would die without intervention and feel the OR nurses are abandoning the patient.

### Case #3

A 30 year old patient has contracted AIDS and has been told this is a terminal illness. He is emaciated, has chronic diarrhea and frequent respiratory, mouth and skin infections. His vision is severely impaired due to cytomegalovirus infections. Only home health workers visit him

anymore. His former partner, family and friends have abandoned him. Despite his illness, he is alert.

A visiting nurse discovers a cache of prescribed narcotics in his medicine cabinet, which would likely be sufficient to cause a fatal overdose. One nurse believes he should be allowed to make an autonomous decision to end his life. Another nurse feels obligated to confiscate the narcotics and contact the MD.

#### Case #4

A 70 year old patient has a terminal illness, amyotrophic lateral sclerosis (aka Lou Gehrig's disease). Over the past 3 years, this has caused the muscles of her body to become progressively weaker. She is totally dependent on the nursing staff for every need. Her respiratory muscles have eventually weakened to the point she has needed a tracheotomy and a ventilator for the past 2 months. If she is removed from the ventilator, she could not breathe on her own. She is alert and able to communicate her needs by mouthing words and writing brief notes. For the past several days, she has requested to be taken off the ventilator. A psychiatrist was consulted, who visited at length with the patient to determine mental competency. The consultant found the patient to be completely aware of the consequences of her request. She nods "yes" when her physician asked if she realizes this will cause her to die.

The physician has decided to follow her wishes and take her off the ventilator this evening, after she has said her "good byes" to her family. Her family members, although saddened, agree with her decision.

Several nurses feel they could not assist the physician with removing the ventilator, stating "it would be like assisting suicide". Others feel the illness itself would eventually cause death and that this is allowing the patient to determine her own destiny.

#### Case #5

An 80 year old patient has suffered his third stroke in several years, just after his 60<sup>th</sup> wedding anniversary. His first two strokes resulted in hemiparesis. He has been in a nursing home since his second stroke, unable to eat, walk or bathe independently. With this most recent stroke, he has been unresponsive even to painful stimuli. His wife requests he is not to be resuscitated and that he is not fed or hydrated artificially, either through tube feedings or intravenously. He does not have a living will or a durable power of attorney. His wife states before his first stroke, he verbalized his wishes not to be kept alive artificially.

Several nurses feel he should receive tube feedings and IV hydration and say they cannot "watch someone starve to death". Others believe this patient is unresponsive to pain and therefore would not be suffering any discomfort associated with dehydration or starvation.

Environmental Safety Assessment Due October 5, 2020. Will count as a test grade. Follow instructions for this assignment.

Assignment can be accessed through your med/surg book.

Further instruction as needed.

Reading Assignments VNSG 1400 (Subject to change by faculty)

\*\* All Medical Terminology chapters are due at 0800 the day the lecture topic begins \*\*

TOPIC (hours)	READING ASSIGNMENTS; WORKBOOK ASSIGNMENTS	Test Grade
Nutrition	Skills Text: p. 392, Skills 21-1, 21-2, 21-3; p. 462- 471, Skills 24-1, 24-2, pages 423, Nutrition: Chapters 1, 14	
Nutrition	Nutrition: Chapters 2, 3, 4, 6	
Nutrition	Nutrition: Chapter 7, 8	
Aging part 1	M/S chapter 14- 15, Human Development, chapter 13, power points and lecture **Medical Terminology: 1-2 Study Guide Ch 14-15	
Aging part 2	M/S chapter 16, power points, lecture Study Guide Ch 16	
Care of patient having surgery/infection	M/S Chapter 8,12 Skills Chapter 33 Nutrition: Chapter 22 Study Guide Ch 8,12	
Pain assessment management, rest/sleep	M/S Chapter 10 Pharmacology Chapters 13, 19 Study Guide Ch 10	
Disease causation, prevention and treatment	A/P Chapter 5, 17, Appendix 3 M/S Chapter 18 **Medical Terminology: Chapters 3-4 Study Guide Ch 18	
Antibacterials	Pharmacology Chapter 45, pages 696-714	

Diabetes	M/S Chapter 38-40; Pharmacology Chapter 35 (+Skills lab) Nutrition: Chapter 20 Study Guide Ch 38-40 Medical Terminology Ch 12	
Diagnostics, oncology basics, palliative care	Labs and Diagnostics (bring text to class, various chapters TBA) M/S Chapter 11, 17 Human Development Chapter 14 Study Guide 11, 17	
Fluid and Electrolytes	Nutrition: Chapter 9 M/S Chapter 6 Study Guide 6 Skills chapter 29	
Musculoskeletal	M/S Chapters 45-46; Pharm Ch 44 Study Guide Ch 45-46 **Medical Terminology: Chapter 13	
Upper Respiratory	M/S Chapters 29-30 Study Guide 29-30 Medical Terminology Ch 8 Pharm Ch 29 Skills ch 28 except p 625-627 Skills 28.3 to 28.8	

VNSG 1409 Spring semester Subject to change by faculty

Test

TOPIC	READING ASSIGNMENTS AND WORKBOOK ASSIGNMENTS	Grade
Med admin	Skills: Chapters 35-37	
Lower & Acute Respiratory	M/S: Chapter 31 Pharm: Chapter 30	
Advanced Skills	Chapter 28, 24	
Cardiovascular Part 1	M/S: Chapters 21-22 Study Guide Ch 21-22 Pharm: Chapters 20, 21, 22, 24	
Cardiovascular Part 2	M/S: Chapters 23-24 Study Guide Ch 23-24 Pharm: Chapters 27, 28 Nutrition: Chapter 19	
Cardiovascular Part 3	M/S: Chapter 25-26 Study Guide 25-26 Medical Terminology Ch 6 Pharm: Chapter 23	
	Cardiovascular Comprehensive Review	

Hematology Lymphology	M/S: Chapters 27-28 Study Guide Ch 27-28 Medical Terminology Ch 7 Nutrition: Chapters 7, 8	
GI Part 1 Upper GI	M/S: Chapters 32-33 Study Guide 32-33 Pharm: Chapters 32, 33	
GI part 2 Lower GI	M/S: Chapters 34 Study Guide 34 Pharm: Chapter 34 Skills: Pages 644-659, Skills 30-6, 30-7 (ostomy care) Nutrition: Chapter 5	
GI part 3	M/S: Chapter 35 Study Guide Ch 35 Medical Terminology Ch 9 Nutrition: Chapter 18	
Renal	M/S: Chapters 36-37 Study Guide Ch 36-37 Medical Terminology Ch 10 Pharm: Chapter 41 Skills: Page p 678 Nutrition: Chapters 21	

VNSG 2410 Summer III semester Subject to change by faculty

TOPIC	READING ASSIGNMENTS AND WORKBOOK ASSIGNMENTS	Test Grade
Skin and Burn Care	MS Ch 53-55 Study Guide Ch 53-55	--
Neuro part I	M/S: Chapters 47-48 Study Guide Ch 47-48	
Neuro part 2	M/S: Chapters 49-50 Study Guide Ch 49-50	
Meds for neuro system	Pharm: chapters 12, 14, 18 Medical Terminology Ch 5	
Female Reproductive	M/S: Chapter 41-42 Study Guide Ch 41-42	

	Medical Terminology Ch 11 Pharm: Chapters 38, 39, 40	
Male Reproductive & STI's	M/S: Chapter 43-44 Pharm: 39, 41	
Sensory System	M/S: Ch 51-52 Study Guide Ch 51-52 Medical Terminology Ch 14 Pharm: Chapter 42	
HIV/AIDS Immune Disorders	M/S: Chapters 18-20 Study Guide Ch 18-20 Pharm: Ch. 45 Pages 722-735 Nutrition: Chapter 23	
Emergency Care Disaster Preparation	Disaster Preparation: M/S: Chapter 13 Study Guide Ch 13	

### Medication Cards

A poster in the classroom will indicate when drug cards are due. The student will be required to turn in cards at **0800 each Monday, or as indicated.** Cards must be neatly hand printed, satisfactorily completed or it will be returned for completion. The re-do cards are due the following Monday. Each card must be satisfactorily completed in order to count in the total cards required to meet course and graduation requirements. A grade will be given according to the number of completed cards submitted on time. Late cards aren't counted in for the weekly grade but must be turned in for the total card count. For example, if 4/5 required cards are turned in, the week's grade is 80%. If 7/10 required cards are turned in, the week's grade is 70%. When all the required weekly cards are turned in, the grade is 100%.

If a student has neglected to turn in the required number of cards 2 times per semester, a counseling form will be filed and discussed with the student. The student will be given a formal learning contract if the student has not turned in the required number of cards for 3 weeks during the semester. Further occurrence could result in dismissal from the vocational nursing program due to inability to complete program requirements.

This information should be included on each medication card:

1. Medication names: Brand and generic

2. Classification: BE SPECIFIC. "Anti-infective" is not specific enough. Please state the specific drug category (aminoglycoside, cephalosporin) etc. As another example, a medication for blood pressure control should be listed by its specific category, such as beta-blocker, vasodilator, etc.
3. Route and dosage: List dosage range per route for adults. PO is default route, unless instructions specify route (See med list)
4. Indications: List uses
5. Action: how does medication work in the body?
6. Adverse reactions: List life threatening first in ALL CAPS. Then list most common
7. Contraindications: List conditions which prohibit use of this drug
8. Food/Drug interactions and or incompatibility. List most common
9. Assessment: What should the nurse assess and monitor when giving this med?
10. Implementations: List appropriate measures for safe administration of this drug
11. Patient teaching: list specific measures for patient/family teaching
12. Check any necessary precautions/interventions to avoid repetitive information
13. Include the student's name, reference page number, drug card number
14. VS: which specific VS must be monitored? Why? (correlate with AR's)
15. Labs: Which specific labs must be monitored? Why? (correlate with AR's)
16. Please neatly print, using black or blue ink. Instructor will provide green colored ink pen for neat corrections. Please do not use white out when preparing corrections for re-submission for corrections. You may use the back of the med card. Use rubber band to submit groups of cards. Cards will be re-checked and counted at the end of the semester as well.
17. Be sure all unfamiliar words are defined. **AR's need to also have signs/symptoms discussed and described.**

Use critical thinking to select relevant information needed. ONLY appropriate medical abbreviations may be used. DO NOT COPY THE REFERENCE WORD FOR WORD.

#### Medication Card Requirements

Week 8	2 med cards	Due October 7, 2020
Week 9	3 med cards	
Week 10	4 med cards	
Week 11	5 med cards	
Week 12	7 med cards	
Week 13	9 med cards	
Week 14	10 med cards	
Week 15	10 med cards	
Week 16	10 med cards	
Total of 60 cards will be required in VNSG 1400		

Week 19+++ 10 med cards, until total of 60 cards are submitted for VNSG 1409  
(Some additional med cards will be due for the Mental Health Course)

Policy for med cards:

**Correcting incomplete med cards immediately is an important part of the learning process.**

Students are reminded to submit cards for correction on the next med card due date. For example, corrections from the cards returned week 9 will be due on the Monday of week 10. Failure to turn in corrections will result in a counselling on the first incident. The second incident will result in an appearance before the Academic/Admissions committee for consideration of removal from the program, due to failure to keep up with assignments.

At the end of the first and second semester, the med cards will be counted for accuracy and completion. Students will need to maintain cards to submit for counting and verification at the end of the first and second semesters.

Medications and requirements(order subject to change at faculty discretion): Due for VNSG 1400

1. Aspirin
2. Acetaminophen (PO only)
3. Ibuprofen
4. Meperidine (include reversal and specifics on VS)
5. Morphine “ “ “
6. Hydrocodone “ “ “
7. Fentanyl patch “ “ “
8. tramadol
9. Eszopiclone
10. Temazepam
11. Chloral hydrate (utilize outside ref + specify which ref used)
12. Naloxone
13. Celecoxib
14. Gentamycin (For all antibacterials, list specific antibiotic classification example: cephalosporin, aminoglycoside etc.)
15. ceftriaxone (Use specifics on IM injection for adults)

16. Azithromycin
17. Penicillin v potassium
18. Trimethoprim/Sulfamethoxazole (use combination med), labs, definitions, crystalluria, how to prevent etc.
19. Doxycycline
20. Linezolid
21. Imipenem/silastatin
22. Vancomycin (include peak, trough and lots other labs)
23. Ciprofloxacin
24. Regular insulin (need S/S of hypoglycemia)
25. Insulin glargine
26. Metformin
27. Glipizide
28. Sitagliptin
29. exenatide
30. Pseudoephedrine (PO Sudafed)
31. Diphenhydramine
32. Loratadine
33. Levalbuterol
34. Budesonide (Pulmicort Flexhaler)
35. Dextromethorphan
36. Guaifenesin

---

37. Atrovent
38. Advair Diskus (INCLUDE INFO FROM BOTH MEDS)
39. Singulair
40. Theophylline (will require additional ref.)
41. Niacin (lipid lowering agent, not just vitamin supplement info. )
42. Metoprolol (specific category of antihypertensive med, VS){ex: category beta blocker}
43. Lisinopril ( " " , VS, Labs)
44. Losartan ( " " )
45. Clonidine ( " " )
46. Doxazosin ( " " )
47. Diltiazem ( " " )
48. Nitroglycerine – sublingual use: need specifics on how to use for acute use
49. Nitroglycerine patch: details on patch application
50. Imdur
51. Digoxin: details on VS, digoxin levels, dig toxicity, other labs and antidotes

---

52. Furosemide
53. Chlorthalidone
54. Spironolactone
55. Klor Con (DO NOT USE IV INFO)
56. Clopidogrel

57. Coumadin: specific details on labs, **VERY** specific info on PT/INR and on reversal Need to correlate labs with info found in diagnostics text and pharm text, and other references
58. Enoxaparin: details on injection technique, labs and other references
59. Heparin: specific details on labs, **VERY** specific info on PTT and on reversal Need to correlate labs with info found in diagnostics text and pharm text, and other refs
60. Rivaroxaban

1409

61. Lidocaine IV for arrhythmias; DO NOT INCLUDE IM USE OR LOCAL ANESTHESIA USE
62. Esmolol
63. Amiodarone—**lots** of labs and VS, definitions
64. Adenosine—give specific information on intravenous administration
65. Omeprazole
66. Ranitidine
67. Sucralfate
68. Metoclopramide, with definitions/s/s of ARs
69. Polyethylene glycol (Miralax)
70. Lactulose (Focus on use for liver failure, high ammonia levels)
71. Docusate
72. Promethazine (**lots** of definitions with S/S of ARs, labs and VS)
73. Ondansetron
74. Dramamine
75. Lomotil
76. Bisacodyl
77. Pramipexole
78. Ropinirole
79. Carbidopa/levodopa
80. Selegiline
81. Pregabalin
82. Donepezil
83. Memantine
84. Rivastigmine
85. Phenobarbital for seizures
86. Clonazepam
87. Phenytoin (**Lots** of definitions with S/S of ARs, and labs)
88. Valproic acid
89. Carbamazepine
90. Sumatriptin
91. Lamotrigine
92. Gabapentin
93. Epinephrine IV for emergencies
94. Propranolol

95. Neostigmine IV use
96. Atropine IM preoperative use
97. Levothyroxine
98. Methimazole
99. SSKI- details on how to avoid teeth stains, and specifics on labs
100. Fludrocortisone
101. Prednisone
102. Premarin
103. Depo-Provera
104. Testosterone gel (with specifics on topical application)
105. Dinoprosone cervical application: details on maternal and fetal monitoring
106. Oxytocin: details on maternal and fetal monitoring
107. Metronidazole PO
108. Sildenafil
109. Nystatin vaginal cream
110. Tolterodine
111. Solifenacin
112. Tamsulosin
113. Finasteride
114. Febuxostat
115. Megestrol
116. Tamoxifen
117. Epoetin
118. Alendronate
119. Zanamivir
120. Acyclovir

**Brand Names:** \_\_\_\_\_ **Generic Names:** \_\_\_\_\_

**Classification:** \_\_\_\_\_

**Route** \_\_\_\_\_ **Dosage** \_\_\_\_\_ **Frequency** \_\_\_\_\_

**Indications** \_\_\_\_\_

**Actions:** \_\_\_\_\_

**Adverse Reactions** \_\_\_\_\_

**Contraindications** \_\_\_\_\_

**Food / Drug Interactions / Incompatibility** \_\_\_\_\_

**Nursing Implications:** \_\_\_\_\_

**Assessment** \_\_\_\_\_

---



---

**Implementations** \_\_\_\_\_

---



---

**Patient Teaching** \_\_\_\_\_

---



---

_____ Dizzy / Drowsy / Safety Precautions	_____ I & O / Daily Weight
_____ Postural hypotension precautions	_____ Antidote
_____ Give with meals to decrease GI distress	
_____ Monitor / Report / Treat as prescribed:	
_____ Superinfection	_____ GI Bleeding      _____ Anaphylaxis

---

Monitor \_\_\_\_\_ VS\_ Why? \_\_\_\_\_

---

Monitor \_\_\_\_\_ Lab Why? \_\_\_\_\_

---

Drug Card # \_\_\_\_\_ Student \_\_\_\_\_ Date \_\_\_\_\_

VNSG 1400 Davis Drug Guide Research Assignment (After Completion and grading, will need to bring to clinical) Due date: January 11, 2021

Include a DESCRIPTIVE definition, signs and symptoms and interventions for these adverse drug reactions. On the drugs with \* include an appropriate image. You will need extra pages.

- \* Steven-Johnson syndrome
- \* Angioedema
- \* Tardive dyskinesia
- \* Prolonged QT syndrome (compare with image from normal EKG)
- \* Torsade de pointe (compare with image for Ventricular Tachycardia)
- \* Gingival Hyperplasia

\* Extrapyramidal reaction

Pseudomembranous Colitis

Neuroleptic malignant syndrome

Ataxia

Nystagmus

Serotonin Syndrome

Pruritis

Gynecomastia

Thrombocytopenia

Leukopenia

Hemolytic Anemia

Pancytopenia

Paradoxical bronchospasm

Rhabdomyolysis

**Please make sure your descriptions will be adequate enough for a discussion of medications with an instructor. If you don't know the meaning of a word, look it up!!!**

<b><u>Medication</u></b>	<b><u>K+, e-lytes</u></b>	<b><u>Glucose</u></b>	<b><u>WBC</u></b>	<b><u>RBC H&amp;H</u></b>	<b><u>Platelets</u></b>	<b><u>Other</u></b>	<b><u>VS</u></b>
Digoxin (w Antidote?)	↓K					Dig level	P<60 or >100
Coumadin (w Antidote?)				↓	↓	↑PT, INR	Bleeding P ↑ BP↓
Thiazide, or Loop diuretics	↓K, elytes		↓	↓	↓		BP↓
Potassium Sparing Diuretics	↑K						BP ↓
Insulin, other hypoglycemics		↓					Need S/S of ↓BS

ACE Inhibitor antihypertensive	↑K		↓			↑BUN/Creat	BP↓
ARBS antihypertensive	↑K					↑BUN/Creat ↑AST/ALT	BP↓
Beta Blockers		↑or ↓					P ↓ BP ↓
ALL anti-hypertensive							BP ↓ & P
Narcotics, sedatives (w Antidote?)							↓R, P BP √ pain lvl effect
Acetaminophen (w Antidote?) (Max daily dose)						↑AST/ALT	√ temp and Pain level for effect.
Lovenox, ASA Other ACX				↓	↓		Bleeding P ↑ BP↓
Heparin (w Antidote?)				↓	↓	↑PTT	Bleeding P ↑ BP ↓
Prednisone	↓ K	↑	↓	↓ GI bleeding			GI Bleeding P ↑ BP ↓

BRING THIS SHEET WITH YOU TO CLINICAL

5 power points, 5 minute presentation (No duplicate presentations, each student will have a separate topic to present) Due October 19, 2020

- A. Definition and Incidence (how frequently this happens)
  - B. Risk factors (which patients are most likely to have this disorder)
  - C. Potential complications
  - D. Independent nursing interventions
  - E. Preventative measures
1. Falls and older adults, r/t visual disorders
  2. Falls and older adults, r/t impaired mobility
  3. Falls and older adults, r/t medications
  4. Physical abuse of older adult by family members/friend
  5. Emotional abuse of older adult by family members/friend
  6. Financial abuse of older adult by family members/friend
  7. Sexual abuse of the older adult by family members/friend

8. Urinary tract infection in the older adult
9. Constipation in the older adult
10. GERD in the older adult
11. Influenza in the older adult
12. Skin tears in the older adult
13. Polypharmacy and the older adult
14. Social Isolation and the older adult
15. Lack of exercise and the older adult
16. Decubitus ulcers and the older adult
17. Joint contractures and the older adult
18. Hypertension and the older adult
19. Visual impairment and the older adult
20. Hearing impairment and the older adult
21. Benign prostatic hypertrophy and the older adult
22. Iron Deficiency Anemia and the older adult
23. Obesity and the older adult
24. Malnutrition (caloric intake less than body requirements) and the older adult
25. Poor dentition and the older adult
26. Osteoporosis and the older adult
27. Osteoarthritis and the older adult
28. Hypothyroidism and the older adult
29. Herpes Zoster in the older adult
30. Hypothermia in the older adult
31. Depression in the older adult
32. Alcoholism in the older adult

Grading Criteria:

Expectation	Possible points	Student's points
Has accurate information	20	
Has sufficient detail	20	
Starts on time, ends on time Expected time frame: no less than 4 and no longer than 5 minutes	10	
Exhibits sufficient knowledge of topic	10	
Has appropriate eye contact with audience	10	
Professional appearance	10	
Utilizes appropriate health care reference, with	10	

information outlined in color, provides to instructor		
Pays attention to other student's presentations	10	

For powerpoints:

Definition and Incidence: Black

Risk factors: Purple

Complications: Red

Independent Nursing Interventions: Yellow

Prevention: Green

Emergency, Disaster, and Terrorism Nursing Due date **TBA**

***This WILL require out of class time and effort for research and preparation.*** Plan on spending 6-8 hours on research and preparation of information to be presented. In addition, plan on at LEAST 2 meetings out of class time. One meeting will likely be to discuss individual assignments. Another VERY long meeting will be necessary once power points and material is gathered for rehearsal of the presentation.

The presentation is recorded as a test grade in AH3. A unit exam will also be given over the material.

Power points must be submitted by 0800 July 1<sup>st</sup> to: [@southplainscollege.edu](mailto:@southplainscollege.edu). Make VERY SURE there is no conflicting or overlapping or missing information. The latest NCLEX PN blueprint does include emergency, disaster and terrorism nursing.

***Group 1 (5 students)***

Triage and Disaster Planning

Shock: hypovolemic, cardiogenic, septic, anaphylactic

Discuss cause, pathophysiology, complications, S/S and treatment

**Group 2 (5 students)**

Radiation Release

Nerve agents: Sarin, Cyanide

Vesicant agents

Discuss possible methods of release, associated pathophysiology/complications, signs and symptoms, and treatments

Cold related illness and injuries, with cause, pathophysiology, complications, S/S and treatment

**Group 3 (5 students)**

Anthrax

Small pox (need to compare to S/S of chicken pox)

Bubonic/Pneumonic plague

Ebola Virus

Discuss possible methods of release, associated pathophysiology/complications, signs and symptoms, and treatments

Heat related illness and injuries, with cause, pathophysiology, complications, S/S and treatment

Grading Criteria Emergency Care and Bioterrorism Presentation

Presentation length 30 – 45 minutes. Must be organized and ready to present

	Possible Points	Earned Points
Accuracy	40	
Details, adherence to outline	30	
Use of Audio/Visual Aid, Powerpoint, handouts	10	
Professional Appearance	5	
Presentation, eye contact with audience, confidence	5	
Teamwork, cooperation within group, attention during all Presentations, congruent information presented, no missing or overlapping information	10	

Student's score: \_\_\_\_\_

Please contact Mrs. Holmes immediately if a group member is not attending agreed upon meetings, not returning phone calls or otherwise not cooperating. Group members must have 24 hours' notice of meetings. Students will be expected to attend the agreed upon meetings and to log times on own portions of the assignment.

Meeting Dates/Time	Initials of all group members in attendance

Student's own assignments

Topics:

Log dates and times of assignments

Individual assignments date/time	Topic

Power points must be submitted to Mrs. Holmes by 0800 July 1. The power points must be matching in font, style etc, and must be compatible with the computer in the classroom (specifically NOT a Mac).

Student Signature \_\_\_\_\_ (1 copy to student; 1 copy to file)

### Grading Criteria Emergency Care and Bioterrorism Presentation

Presentation length 30 – 45 minutes. Must be organized and ready to present

	Possible Points	Earned Points
Accuracy	40	
Details, adherence to outline	30	
Use of Audio/Visual Aid, Powerpoint, handouts	10	
Professional Appearance	5	
Presentation, eye contact with audience, confidence	5	
Teamwork, cooperation within group, attention during all Presentations, congruent information presented, no missing or overlapping information	10	

Student's score: \_\_\_\_\_

Please contact Mrs.Holmes immediately if a group member is not attending agreed upon meetings, not returning phone calls or otherwise not cooperating. Group members must have 24 hours' notice of meetings. Students will be expected to attend the agreed upon meetings and to log times on own portions of the assignment.

Meeting Dates/Time	Initials of all group members in attendance

Student's own assignments

Topics:

Log dates and times of assignments

Individual assignments date/time	Topic

Power points must be submitted to Mrs. Holmes by 0800 July 1. The power points must be matching in font, style etc, and must be compatible with the computer in the classroom (specifically NOT a Mac).

Student Signature \_\_\_\_\_ (1 copy to student; 1 copy to file)

### Dropping a class

Students should submit a [Student Initiated Drop Form](#) online.

**Students will not be required to obtain an instructor signature to drop**, however, we do encourage students to communicate with instructors or advisors prior to dropping a course when they are able. **There will be no charge for drops for the fall or spring semesters.**

### Withdrawing from all classes

If a student wishes to withdraw from all courses, they should initiate that process with the Advising Office. They can schedule an appointment with an advisor by

visiting <http://www.southplainscollege.edu/admission-aid/advising/spcadvisors.php> or by calling 806-716-2366.

### **Schedule Change (after late registration and before census date)**

To make a schedule change after late registration (August 28) and before the census date (September 9), students should submit a **Schedule Change Form.**

After late registration, adding a class requires instructor approval. If a student is requesting to be added to one of your courses and you approve, please email [registrar@southplainscollege.edu](mailto:registrar@southplainscollege.edu) with your approval. This can take the place of signature on the Schedule Change Form that we have required in the past.

### **Plagiarism Declaration Department of Nursing South Plains College**

By signing this plagiarism declaration I acknowledge that I have received a copy of the honesty policy and been made aware that the penalty for plagiarism is dismissal from the program.

#### Examples of student plagiarism<sup>1</sup>

- Copying material without quotes, in-text citations, and/or referencing
- Paraphrasing content without in-text citation and/or referencing
- Copying ideas, words, answers, exams, or shared work from others when individual work is required
- Using another's paper in whole or in part
- Allowing another student to use one's work
- Claiming someone else's work is one's own
- Resubmitting one's own coursework, when original work is required (self-plagiarism)
- Falsifying references or bibliographies
- Getting help from another person without faculty knowledge or approval
- Purchasing, borrowing, or selling content with the intent of meeting an academic requirement for oneself or others

---

Printed Name

---

Signature

---

Date

**Plagiarism Declaration  
Department of Nursing  
South Plains College**

By signing this plagiarism declaration I acknowledge that I have received a copy of the honesty policy and been made aware that the penalty for plagiarism is dismissal from the program.

Examples of student plagiarism<sup>1</sup>

- Copying material without quotes, in-text citations, and/or referencing
- Paraphrasing content without in-text citation and/or referencing
- Copying ideas, words, answers, exams, or shared work from others when individual work is required
- Using another's paper in whole or in part
- Allowing another student to use one's work
- Claiming someone else's work is one's own
- Resubmitting one's own coursework, when original work is required (self-plagiarism)
- Falsifying references or bibliographies
- Getting help from another person without faculty knowledge or approval
- Purchasing, borrowing, or selling content with the intent of meeting an academic requirement for oneself or others

---

Printed Name

---

Signature/ Date

## **TEXTS AND MATERIALS**

VNSG 1400/1409/1410

Nursing

Adult Health I/II/III

VNSG 1171

IV Therapy

VNSG 1301

Mental Health and Mental Illness

Understanding Medical-Surgical Nursing with Access Code 6<sup>th</sup> Edition  
Williams/Hopper.

F.A. Davis ISBN 978-0-8036-6898-0

Understanding Medical-Surgical Nursing STUDY GUIDE 6<sup>th</sup> Edition  
Williams/Hopper.

F.A. Davis ISBN 978-0-8036-6900-0

Medical Terminology in a Flash with Access Code 4<sup>th</sup> Edition Finnegan.

F.A. Davis ISBN 978-0-8036-8953-4

Clayton's Basic Pharmacology for Nurses 18<sup>th</sup> Edition Willihnganz.

Elsevier ISBN 978-0-3235-5061-1

Davis Drug Guide NEWEST EDITION AS OF AUGUST 2020

ISBN 978-0-8036-6945-1

Taber's Cyclopedic Medical Dictionary NEWEST EDITION AS OF AUGUST  
2020

ISBN 978-0-8036-5904-9

Curren's Math for Meds, Dosages, and Solutions 11<sup>th</sup> Edition

Curren/Delmar.

Cengage ISBN 978-1-1115-4091-3

Manual of Diagnostic and Laboratory Tests 6<sup>th</sup> Edition Pagana.

Elsevier ISBN 978-0-3234-4663-1

Basic Nutrition and Diet Therapy 15<sup>th</sup> Edition Nix.

Elsevier ISBN 978-0-3233-7731-7

Journey Across the Life Span 6<sup>th</sup> Edition Polan.

F.A. Davis ISBN 978-0-8036-7487-5

The Human Body in Health and Disease

(Text from prerequisite course Anatomy and Physiology)

Fundamentals of Nursing Care 3<sup>rd</sup> Edition Burton.

Elsevier ISBN 978-0-8036-6906-2

Fundamentals of Nursing Care 3<sup>rd</sup> Edition STUDY GUIDE Burton.

Elsevier ISBN 978-0-8036-6907-9

SPRING 2021

Infusion Therapy Made Incredibly Easy 5<sup>th</sup> Edition

Lippincott ISBN 978-1-4963-5501-0

SUMMER 2021

Introductory Mental Health Nursing with Access 4<sup>th</sup> Edition Womble.

Lippincott ISBN 978-1-9751-0378-1

BOOKS MAY NOT HAVE BEEN WRITTEN IN AND MUST BE NEWEST  
EDITION OR EDITION LISTED