NUR 168.01: Nursing Care of Children

Wendy Haller

Let us know how access to this document benefits you.

Follow this and additional works at: https://scholarworks.umt.edu/syllabi

Recommended Citation
https://scholarworks.umt.edu/syllabi/10009

This Syllabus is brought to you for free and open access by the Course Syllabi at ScholarWorks at University of Montana. It has been accepted for inclusion in Syllabi by an authorized administrator of ScholarWorks at University of Montana. For more information, please contact scholarworks@mso.umt.edu.
Nursing 168
University of Montana College of Technology
Nursing Care of Children  
Nursing 168

Credit Allotment:

Credits: 4 total credit hours  
Theory: 2 credits (2 hrs/week) Clinical: 2 credits (12 hrs/week)  
Classroom: Wednesday 10:00 – 12:00  
Clinical: 12 hrs/wk on Mondays

Prerequisite Course:

All first and second semester nursing courses

Course Description:

Theories and principles for meeting the basic human needs of children from the neonate to the adolescent. Using the nursing process and growth and development theories as a framework, the student provides supervised individualized care to children in order to help them attain or maintain wellness. The clinical and classroom portions must both be satisfactorily completed in order to pass the course.

Instructor: Wendy Haller, BSN, R.N.,C  
Office: Room 164  
Phone: 721-1539 (H), 360-4573 (cell)  
Office Hrs: Wednesdays 12:00 – 1:00, or by appointment

Course Objectives:

At the completion of this course, the student will be able to:

1. Discuss historical highlights, progress, current trends and issues, including ethical-legal and cultural needs, related to the care of children.
2. Identify the basic physical, emotional, and educational needs of the child and family during hospitalization, and provide appropriate care.
3. Use the nursing process to describe the delivery of care to pediatric patients.
4. Describe the normal growth and development process, and describe how it affects both well and ill children of all age groups.
5. Describe preventative healthcare and safety measures from infancy to adolescence.
6. Identify the role of the practical nurse as a member of the pediatric health care team.
<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 31</td>
<td>Review syllabus, Chapter 21, Assign growth and development presentations</td>
</tr>
<tr>
<td>September 7</td>
<td>Chapter 22, Quiz #1 Chapter on 21, Chapter 21 homework due</td>
</tr>
<tr>
<td>September 14</td>
<td>Chapter 23</td>
</tr>
<tr>
<td>September 21</td>
<td>Chapter 24, Assign Growth and Development take-home test, Quiz #2 on Chapter 22 and 23, Homework due for Chapter 22 and 23</td>
</tr>
<tr>
<td>September 28</td>
<td>Chapter 25</td>
</tr>
<tr>
<td>October 5</td>
<td>Chapter 26, Quiz #3 on Chapter 24 and 25, Homework due for Chapter 24 and 25, Class time to work as a group on growth and development presentations</td>
</tr>
<tr>
<td>October 12</td>
<td>Growth and development presentations, Take-home test due</td>
</tr>
<tr>
<td>October 19</td>
<td>Midterm Exam on Chapters 21 – 26, Homework for Chapter 26 is due</td>
</tr>
<tr>
<td>October 26</td>
<td>Chapter 27</td>
</tr>
<tr>
<td>November 2</td>
<td>Chapter 28</td>
</tr>
<tr>
<td>November 9</td>
<td>Chapter 29, Quiz #4 on Chapters 27 and 28, Homework due for Chapters 27 and 28</td>
</tr>
<tr>
<td>November 16</td>
<td>Chapter 30 and 31</td>
</tr>
<tr>
<td>November 23</td>
<td>No School!</td>
</tr>
<tr>
<td>November 30</td>
<td>Chapter 32 and 33, Quiz #5 on Chapter 29, 30 and 31, Homework due for chapter 29, 30 and 31</td>
</tr>
<tr>
<td>December 7</td>
<td>Quiz #6 on Chapters 32 and 33, Homework due for Chapters 32 and 33, Final exam review</td>
</tr>
<tr>
<td>December 14</td>
<td>Final exam (sometime this week)</td>
</tr>
</tbody>
</table>
Attendance and Participation

Attendance and participation in lecture is considered important, and part of your final grade; it is an indication of your commitment to the profession. More than three absences will result in a drop of one letter grade from your final grade. You are expected to sign in daily for your attendance in lecture. If course work is due on the day of an unexcused absence, prior arrangements must be made to turn the work in, otherwise a zero will result for that assignment. Family emergencies will be handled on a case by case basis.

Cell Phones and Pagers

If the cell phone/pager is not emergency related, please turn it off. Do not set it on tone – use the vibrate option. Leave the room quietly to take the message. **Cell phones and pagers MUST be turned off during exams and clinical.**

Written Work

Late written work will not be accepted unless prior arrangements have been made. All written work will be typed and double-spaced. Papers containing grammatical errors are unacceptable. Assignments must be thorough and complete, including clinical logs.

Workbooks

Students are required to do the review questions **only**, at the end of each chapter in the workbook. They are checked for completion only, and you are given full credit for turning them in. If you would like to check your answers, an answer key is available. Workbooks are due the day on which the quiz for those chapters is given.

Quizzes and Tests

There are 6 quizzes, 1 take home test, a mid-term, and a comprehensive final.
Growth and Development Project

Students will be divided into groups: Infants, toddlers, preschoolers, school-age, and adolescents. Each group will present one of the five developmental levels. Material should be covered in enough detail so that each person in the class has a clear idea of the main characteristics of each pediatric age group. Presentations should take approximately 20 minutes.

The presentations will be graded on thoroughness, visual aids, group participation, references, and professionalism.

At least one hand out is required per group and should be given to each member of the class to be used as a future study guide. Handouts should be professional and organized. If an overhead projector or other equipment is needed, be sure to have it reserved.

You should use at least two current references along with your book. References should be listed in A.P.A. format at the end of your handout.

You will be graded as a group. Participation and professionalism will be graded by the flow and lack of repetition of the presentation.

Guidelines:

*Content –

Infants (4 weeks – 1 y.o.):
- Physical and motor milestones
- Psychosocial development
- Safety issues and accident prevention
- Communication

Toddlers (1 y.o. – 3 y.o.):
- Physical and motor milestones
- Psychosocial development
- Common characteristics
- Speech development
- Safety issues and accident prevention

Preschoolers (3 y.o.- 6 y.o.):
- Physical and motor milestones
- Psychosocial development
- Common characteristics
- Speech development / common problems
- Safety issues and accident prevention

School – Age ( 6 y.o. – 12 y.o.):
- Physical development
- Psychosocial development
- Safety issues and accident prevention
- Unique issues to this age group

Adolescents (12 y.o. – 18 y.o.):
- Physical development and puberty
- Psychosocial development
- Safety issues and accident prevention
- Unique issues to this age group
Grading Criteria

If a student has any questions about any of the assignments or grading, the student should contact the instructor and review the grade or the expectations of the assignment. No class time will be taken discussing individual grades. The University of Montana, College of Technology, uses the following grading scale: Students must attain an average of 80% in all core-nursing classes.

- 90%-100% A
- 80%-89% B
- 70%-79% C
- 60%-69% D
- Below 59% Fail

Weighting for Pediatrics

- Growth and Development Presentations: 15% (180 pts.)
- Weekly Workbook Assignments (12): 10% (120 pts.)
- Quizzes (6): 15% (180 pts.)
- Growth and Dev. Test (Take-home): 15% (180 pts.)
- Mid-term Exam: 20% (240 pts.)
- Final Exam: 20% (240 pts.)
- Clinical Logs (6): 5% (60 pts.)
Clinical Policy

Please keep in mind that we are guests in these facilities. They are not required to take students, but do this to provide students the opportunity for a more complete learning experience. If you have questions about professional dress or behavior at the clinical site, please see your instructor or review your nursing handbook.

Keep in mind the rules of confidentiality. This is a no tolerance issue. The first time you breach this you will be warned through a contract. The second time, you will not pass clinical. This is a serious issue, and should not be taken lightly. If you have a question, please see me.

Attendance in clinical is mandatory. Any clinical day missed will be made up in an appropriate manner. You only have six clinical days in pediatrics, so they are all very important. Please call your instructor at home at least one hour prior to your expected absence. Leave a message on her voice mail if you are unable to reach her. In addition, please notify the facility where you had planned to be. Failure to comply with these guidelines will result in an unexcused absence and possibly a failure of your clinical rotation. A tardy in any clinical site of more than 30 minutes will be considered an absence.

During your 12 hour clinical, you may have two 10 minute breaks, and 30 minute lunch break. Please keep in mind that the flow of patient care is more important than getting your break; experiences come and go quickly. Let your instructor, and staff nurse know when you will be off the floor.

Evaluations of clinical expertise are difficult in pediatrics because you will be working with nurses in the community and not directly with your instructor (except in the hospital). You will be given evaluation sheets to be taken with you to the clinical setting. These should be given to your preceptor, and will be picked up at the end of the semester.
Clinical Orientation Agenda

- Attire: Uniforms, Community Hospital picture name tags, stethoscope
- Selecting patient assignments
- Report
- Preparation:
  - Medication card – what the drug is, how and when it should be given, why it is being given, drug class, drug calculation, possible side effects.
  - Patient history, and how they presented.
  - Pathophysiology of the disease
  - Be ready to do a thorough pediatric assessment
- Charting:
  - Pain scales
  - Legal document
- Attitudes
- Flexibility – baths, meals …
- Machinery:
  - IV pump
  - Oxymeter
  - Glucometer
  - Blood pressure machines
  - Thermometers
  - Scales
- Medication administration
- Review pediatric assessment with video
- Safety
- Clinical logs
- Tour of the unit
  - Code number (4237)
  - Lounge
  - References
  - Restroom

First day of clinical is September 12
Clinical Rotations

Pediatric Unit at Community Hospital (728-4100) – 3rd floor. Wear your uniform and name tag, and bring your stethoscope. You will need to sign in at Community by 6:45, so that you can be on the floor and ready by 7:00 a.m. Clinical will last until approximately 6:15, with a post clinical conference from 6:15 – 7:00.

Adolescent Partial Psych (728-0858) – Contact person is Sue Hansky. It is located in the Providence Medical Center, level 1, to the right of the cafeteria. You are expected to be there from 7:30 – 3:00. Your uniform and name tag should be worn.

Dr. Harper’s pediatric office (721-0858) – Located at Community Hospital, building 1, 2nd floor at the end of the hall. You are expected to be there from b/w 9:00 – 4:30. Wear your uniform and name tag, bring your stethoscope. Your contact person is Sandra.

Dr. Schlesinger's Rheumatology Clinic (327-4329) - Located at Northgate Plaza (2280 N. Reserve), in the First Care building. Wear professional clothing, and bring your stethoscope. You are expected to be there at 9:00 until 5 or 6:00. The R.N. in charge is Ellen Carey.

Western Montana Clinic (721-5600) – Located at Community Hospital, Building 3, 2nd floor, suite 200. Wear your uniform and name tag, bring your stethoscope. There are 4 LPN’s that work there.

Missoula Pediatrics (327-3800) – Located at Community Hospital, Building 3, 2nd floor, suite 205. Wear your uniform and name tag, bring your stethoscope. The nurse you will work with is Paula. Plan on being there from b/w 8-8:30 to 5:30.

Florence School with Pam Martens (273-6741) – From Missoula head to Florence on Hwy 93, turn right on Long Avenue (by Glen’s Café). Wear professional clothing and your name tag. Plan on being there at 8:30.

Big Sky High School (728-2400 ext 8048) – Take South Avenue, west of Reserve, turn right on 33rd. Holly Loftus does specialized care for a medically fragile child, LeeAnne is the school nurse. Your time will be split between these two people. Report to LeeAnne’s office at 7:30, and plan on staying until 4:00. You may park in the faculty lot and get a parking pass from the office. Professional clothing and your name tag should be worn.

Head Start (7285460) – Located at Whittier School. Take Orange Street north until you see Providence Hospital. Turn left at the Ole’s, there is a jog in the road, stay left and go 3 blocks. Check in at Holly’s office on the 3rd floor. You will be expected to be there from 8:30 – 3:30. There will be a short, and simple teaching project associated with this clinical. Call the Thursday before your clinical, and talk to Holly about your teaching project. Professional clothing and your name tag should be worn.
Clinical Logs

Community Hospital:

*Patient history
*Brief pathophysiology, and how the patient with the diagnosis
*Pertinent labs
*Review of medications used – include name, dose and calculation, route, why it is being given, what class of drug it is in, side effects, and any special precautions needed.
*Full head to toe assessment using the discussed format
*Educational needs – brainstorm 10 needs, don’t forget safety; and the rationale for each.
*Personal feelings regarding your overall experience (the patient, family, staff, care given, etc.)

Head Start:

Give a summary of your teaching project. Include:
*What you taught.
*How you taught the information (i.e. book, circle, demonstration…).
*How you geared your presentation toward this age group in consideration of their growth and development.
*Evaluation of your project. Did they learn anything?
*Your personal feeling about this setting, the staff, the children, and the care given.

Other Clinical Sites:

*Summarize the duties of the nurse in that particular setting.
*Pick a common problem that you observed and summarize the pathophysiology, the signs and symptoms, and some recommended treatment options.
*Your personal feelings regarding the staff, patients, care given, and the overall learning experience.

Grading

Each clinical log is worth 10 points. Roughly, 4 points are allotted for the pathophysiology, 3 points for the role of the nurse, and 3 points for stating your personal feelings regarding that particular clinical site.
Pediatric Medication Administration

*Remember the 5 Rights: Right patient, drug, dose (!), route, and time.
*Always place a “0” before a decimal point (i.e. 0.6mg)
*Never abbreviate a medication
*Review your calculations
*If you are having trouble reading something, clarify it

Giving Medications

Take a firm and honest, but positive approach when giving medicine to a child.

**Oral Meds**
* Hold an infant’s head higher than shoulders, and give slowly to prevent choking. It can help to aim the syringe to the side and back of the mouth.
* You can use a nipple, syringe, spoon, medicine cup – whatever you think will give you the best results. Never mix in a bottle or cup.
* You cannot crush all pills, be sure to check with the PDR or pharmacy.
* 5cc = 1tsp.
* Always stay until the medicine is gone.

**Injections**
* Vastus Lateralis is the site of choice for I.M. injections in young children. Pull skin tight, stabilize the knee and hip, and insert needle at a 90 degree angle.
* Upper arm or abdomen are the sites of choice for SQ injections. Pinch skin, and insert needle at a 45 degree angle.
* Typically not more than 1 cc/site.
* Aspirate to make sure the needle is not in a vein.

**Ear Drops**
* Place the child supine with head turned to one side.
* If child is less than 3 y.o. pull pinnae down and back, if older, pull up and back to straighten the auditory canal.
* Massage the area immediately anterior to the ear.
* Maintain the position for a few minutes so that drop is absorbed.

**Eye Drops**
* Warm the eye drops in your hand or under warm water.
* Gently separate the eye lids with thumb and index finger or pull down lower eyelid with index finger. Instill the number of drops ordered into the conjunctival sac.
* Wipe excess medication from inner canthus outward to prevent contamination of the other eye.
* For an infant with tightly closed eyes you may place drop in nasal corner, when they open their eye the drop will fall in.
* OU = both eyes, OD = right eye, OU = left eye

**Rectal**
* Suppositories are more long and thin. Insert lubricated suppository well beyond the sphincter and hold buttocks closed.

**Nose Drops**
* Tip head back over a pillow, and leave in place for 1 minute.