BERGEN COMMUNITY COLLEGE
DIVISION OF HEALTH PROFESSIONS
DEPARTMENT OF NURSING

NUR 282
LEVEL II
ADULT HEALTH NURSING - B
COURSE OUTLINE
4 CREDITS

LECTURE: 4 HOURS PER WEEK

CLINICAL: 10 HOURS PER WEEK
CLINICAL CONFERENCE: 2 HOURS PER WEEK

FOR USE DURING THE FALL 2016 and SPRING 2017 SEMESTERS ONLY
# TABLE OF CONTENTS

**NUR 282**

**ADULT HEALTH NURSING**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Description</td>
<td>4</td>
</tr>
<tr>
<td>Course Learning Outcomes</td>
<td>4</td>
</tr>
<tr>
<td>Level Requirements</td>
<td>4</td>
</tr>
<tr>
<td>Teaching Learning Activities</td>
<td>4</td>
</tr>
<tr>
<td>Course Requirements</td>
<td>5</td>
</tr>
<tr>
<td>Course Evaluation</td>
<td>5</td>
</tr>
<tr>
<td>Required Texts</td>
<td>6</td>
</tr>
<tr>
<td>Related WEB Resources</td>
<td>6</td>
</tr>
<tr>
<td>CAI</td>
<td>7-8</td>
</tr>
<tr>
<td>Evolve Learning System for NUR 282</td>
<td>9</td>
</tr>
<tr>
<td>Course Outline</td>
<td>10-17</td>
</tr>
<tr>
<td>Skills for Nursing Practice / General Guidelines</td>
<td>18</td>
</tr>
<tr>
<td>Foley Catheterization – Female or Male</td>
<td>19-22</td>
</tr>
</tbody>
</table>
ALL POLICIES AND COURSE REQUIREMENTS ARE SUBJECT TO REVISION ON A SEMESTER BY SEMESTER BASIS. STUDENTS WILL BE NOTIFIED OF ANY REVISION(S) AT THE BEGINNING OF THE SEMESTER IN WHICH THE POLICY OF REQUIREMENTS IS/ARE TO BE IMPLEMENTED DURING THE FIRST MEETING OF THE APPROPRIATE NURSING CLASS.
COURSE DESCRIPTION

This course is a second level course in the nursing sequence which focuses on the health care of individuals and families who have needs related to nutrition and elimination. Students will use the nursing process in a variety of health care settings to assist individuals and families achieve optimum health. This course runs for half the semester concurrently with NUR 281. Students may elect to take either course before the other.

4 lec., 12 lab., 7.5 weeks, 4 credits

PREREQUISITES: NUR 181, NUR 182, NUR 183, BIO 109, AND PSY 101
CO-REQUISITES: BIO 209, PSY 106, AND NUR 281

Course Learning Outcomes

1. Provides nursing care based on Orem’s self-care model to one or two clients with deficits in USCRs – Food/Fluid and Elimination.
2. Applies nursing care that reflects the developmental capabilities of adults and aged clients.
3. Employs therapeutic communication techniques when interacting with individuals, families and other health care professionals.
4. Provides nursing care based on biological, psychological, sociological, cultural, spiritual and economic factors that influence the health of adults.
5. Selects nursing activities that support personal, professional and educational development.
6. Behaves in an ethical manner and adheres to legal and ethical standards when providing patient care.
7. Applies additional skills in nursing care through the use of a variety of technological resources.
8. Demonstrates critical thinking by analyzing and evaluating information in clinical situations in relation to care of adults with deficits in Food/Fluid and Elimination.
9. Utilizes pharmacological concepts in the clinical and classroom setting to correctly calculate drug and solution problems. Passes the Level II Pharmacological Math Computation Exam (PMCE) with a score of 80% or higher.
10. Creates and implements a teaching plan based which meets the educational needs of an individual.

LEVEL REQUIREMENT

Passing a Pharmacological Math Computation Exam (PMCE) with a score of 90% is a level requirement. The PMCE is comprise of 10 questions and will be given in the first course of each level. If the student does not attain the required 90% passing grade, he/she will be provided two retake opportunities within the confines of that course. Failure to achieve an 90% in the PMCE will result in an “F” for the course in which the test was administered. Calculators may be used at Level II.

TEACHING AND LEARNING ACTIVITIES

Lecture
Audio visuals
Clinical practice: acute/extended care facilities
Judy Miller tapes
NCLEX review questions
Clinical conference
Simulation
Online learning modules

Case studies (classroom and computer)
Readings
PowerPoint presentations
The Point tutorials
ATI tutorials
Evolve tutorials
Nursing tutorial Apps
COURSE REQUIREMENTS

A. 14 Case Studies on Evolve Learning System (see page 6)

B. The following course requirements are submitted to your clinical instructor:
   - 2 Nursing Care Plans each with 1 Assessment of Basic Conditioning Factors and 1 Nursing Diagnoses. OR
   - 1 Nursing Care Plan with 1 Assessment of Basic Conditioning Factors and 2 Nursing Diagnoses.
   - The nursing diagnosis in each nursing care plan will address Orem's Universal Self Care Requisite of FOOD or ELIMINATION (due dates to be determined by clinical instructor).
   - 1 Process Recording (due date to be determined by clinical instructor).
   - 1 Teaching Plan (topic, methodology and due date to be determined by clinical instructor).

COURSE EVALUATION

A. Theory grade:
   - Three unit tests worth 80%
   - One cumulative exam worth 20%
   - Total 100%

   A grade of C+ is required for passing theory portion of course (see grading scale on page 3). Only answers on scantron card will be accepted.

B. Clinical and Clinical Conference Attendance and Absence Policy
   - All students will be reminded at the beginning of each clinical experience that they are required to attend ALL clinical laboratory AND clinical conference meetings or be in jeopardy of receiving a failing clinical grade.
   - In order to pass clinical, the final grade must reflect a Satisfactory in all areas of the clinical evaluation. A student who receives an Unsatisfactory in any area will not pass the clinical component and will receive a final grade of "F" in the clinical nursing course regardless of the theory grade. Attendance is a part of the scoring of the clinical grade. In the category regarding professional behaviors, the following rules apply:
     - Two absences = a make-up assignment which will be developed by the clinical instructor and be equivalent to the clinical hours missed
     - Three absences = failure of course

   Exceptional circumstances for clinical absences may be reviewed by the clinical instructor, team and Program Director at the request of the student.

   A student should not call the College to report an absence. Faculty will inform students of the procedure to report an absence for clinical laboratory or conference.

C. Satisfactory demonstration on Foley catheterization skill validation. This includes insertion, removal, and obtaining a closed specimen.

D. Adherence to Nursing Program attendance policy (see Nursing Student Handbook).
E. In order to pass the course, the student must receive:
- Theory grade of C+
- Pass the Evaluation of Clinical Performance
- Pass the Foley Skill Validation
- Pass with 90% or greater the Pharmacology Math Computation Exam (PMCE)

A = 89.45 – 100
B+ = 85.45 – 89.44
B = 81.45 – 85.44
C+ = 77.45 – 81.44
C = 73.45 – 77.44
D = 69.45 – 73.44
F = 69.44 and below

(Refer to Student Handbook)

REQUIRED TEXTS

All textbooks from previous courses: NUR 181, NUR 182, and NUR 183.

NUR 281/282

Brunner & Sudarth, Textbook of Medical-Surgical Nursing, Lippincott, 13th edition
(2 volume)

Several e books can be found at the following BCC library link:
http://0-online.statref.com.sslopa.bergen.edu/Splash.aspx?SessionId=1CF9324RITWFMJMW
1. Click on Start (bottom left of screen)
2. Click on All Programs
3. Click on Level 2
4. Click on NUR 282

**Adult Health Nursing Concepts and Skills**

Hematologic
- Mrs. Byrd – Iron Deficiency Anemia

Gastrointestinal
- Mr. Lewis – Peptic ulcer and gastrectomy
- Mrs. Banks – Pancreatitis
- Mr. Gold – Intestinal obstruction

Endocrine
- Susan Smith – Diabetic ketoacidosis

Hepatic Biliary
- Mrs. Bella – Cirrhosis of the liver
- Mr. Reyes – Hepatitis
- Mrs. Winter – Gallbladder and cholecystectomy

Genitourinary
- Mr. Sumo – Prostatic hyperplasia
- Sara – Urinary tract infection
- Mr. Young – Renal colic and nephroliathiasis

**Critical Care Concepts and Skills**

PDS Nursing Scenarios

Adult Health Nursing Concepts and Skills

Gastrointestinal
- Marge Thompson – Liver transplant
- Mr. Stone – Cirrhosis and esophageal varices

Endocrine
- Mrs. Wilson – HHNK - cardiac
- Joseph Selim – Hypoglycemia
- Louise Wilkins – Diabetic ketoacidosis

**Clinical Nursing Concepts (review these sections)**

Pharmacodynamics – non parenteral routes
Pharmacodynamics – parenteral routes
Peri operative care
Inflammation, infection and wound healing

**MSM—MED-SURG**

Gastrointestinal
Genitourinary
Hepatic Biliary

**Gastrointestinal disorders**

The Accessory Organs of the GI System
The Gastrointestinal System
Ulcers
Genitourinary disorders
The Renal System

NCLEX Review 3500
Gastrointestinal
Genitourinary

Nursing Tutorial (NT) are available in the Library. These NCLEX-RN (Judy Miller tapes) Review DVD discs are available on the following topics:

NCLEX RN Review on the following tapes:
Test Taking Skills
Gastrointestinal System
Genitourinary System
Endocrine/Diabetes

Nursing Tutorial Apps on Ipads in the nursing office B 302.

Reading and Understanding the New Food Label (DVD – 18 minutes)
TP 374.5 .R433 2005

Diabetes
7 DVDs located in Library Reserve = RC660.D5 D532 2004
1. Physiology of glucose regulation
2. Pathology of diabetes
3. Nutrition therapy, exercise, and sick day management
4. Insulin and oral antidiabetic agents
5. Hypoglycemia and monitoring
6. Neuropathy, nephropathy and retinography
7. Cardiovascular disease and the diabetic foot

NUR 282 Moodle
Quicktime movies on:
1. Foley catheter insertion
2. Foley catheter removal
3. Specimen collection closed technique from a Foley catheter

ATI Tutorials on line - pending
COURSE OUTLINE

**Theoretical Content**

**PART I: THE USCR FOR FOOD**

**UNIT I: THE GASTROINTESTINAL SYSTEM**

I. Definition of USCR for food

II. Assessment of the Gastrointestinal system
   A. Health history
   B. Physical exam
   C. Diagnostic studies and related nursing responsibilities (i.e. consents, Supportive Educative Nursing Systems for test preparations, etc.) *(SENS)*
      1. radiological
      2. endoscopy
      3. liver biopsy/function
      4. blood chemistry

III. Normal Nutrition
   A. Components of the basic food groups
      1. proteins
      2. CHO
      3. fats
      4. minerals
      5. vitamins
   B. Nutritional Needs of Adults
   C. Nutrient imbalances

IV. Malnutrition
   A. Review assessment
   B. Identification of self-care deficits and related nursing diagnoses
   C. Nursing interventions
   D. Gerent logical considerations
   E. Iron Deficiency Anemia
   F. Pernicious Anemia
   G. Supplemental nutrition
      1. oral feeding
      2. enteral feeding
      3. TPN
      4. surgery

**Teaching/Learning Activities**

Prior to the start of this unit, review the anatomy and physiology of the gastrointestinal system.

Read: Assessment course text - Chapter on Nutritional Assessment

Read: Fundamental Text – Chapter on Nutrition

Read: Brunner – Unit: Digestive and Gastrointestinal Function
   Chapters 44-47

Read: Lutz – Chapters 1 – 9, 12, 13, 14 and 15

Read: Pharmacology course text – Chapter on Drugs Affecting the Gastrointestinal System

CAI: Gastrointestinal System
   (Room B-307 & Library)

NCLEX Review – Gastrointestinal

NCLEX RN Review: Nutrition

NCLEX RN Review: Gastrointestinal System

CAI: Mrs. Boyd – Iron Deficiency Anemia

Read: Lutz, Chapter 15
UNIT I: THE GASTROINTESTINAL SYSTEM

V. Bariatric (Obesity)
   A. Review Pathophysiology, Clinical Manifestations, Diagnostic Studies
   B. Therapeutic/nursing management
      1. calorie-restricted diets
      2. exercise
      3. behavior modification
      4. surgery

UNIT II: PROBLEMS OF INGESTION

I. Dental problems

II. Mandibular fractures

III. Gastroesophageal reflux disease (GERD)
   A. Clinical manifestations
   B. Therapeutic management
      1. diet
      2. drugs
   C. Nursing Management

IV. Hiatal hernia
   A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
   B. Types
   C. Therapeutic and nursing management

V. Esophageal disorders

VI. Gastrostomy
   A. Types of tubes
   B. Feeding
   C. Skin care

VII. Food poisoning

UNIT III: PROBLEMS OF DIGESTION

I. Nausea and vomiting
   A. Therapeutic management
   B. Nutritional management
   C. Nursing management

II. Acute gastritis
   A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
   B. Therapeutic management
   C. Nursing management
## Theoretical Content

### UNIT II: PROBLEMS OF INGESTION (Continued)

### III. Upper GI bleeding
- **A. Origins**
  1. esophageal
  2. stomach/duodenum
  3. systemic diseases
- **B. Therapeutic management**
  1. drugs
  2. surgery
- **C. Nursing assessment**
- **D. Identification of self-care deficits and related nursing diagnoses**
- **E. Nursing interventions**

### IV. Peptic ulcers – gastric and duodenal
- **A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies**
- **B. Complications**
  1. perforation
  2. gastric outlet obstruction
- **C. Therapeutic management**
  1. drugs
    a) antacids
    b) H2 receptor antagonists
    c) anticholinergics
  2. surgical management
- **D. Nursing assessment**
- **E. Nursing interventions**
  1. relieve discomfort
  2. recognize complications
    a) dumping syndrome
    b) postprandial hypoglycemia
  3. diet

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## Teaching/Learning Activities

<table>
<thead>
<tr>
<th>CAI:</th>
<th>Gastrointestinal (B-307 &amp; Library)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCLEX Review – Gastrointestinal</td>
<td></td>
</tr>
<tr>
<td>Mr. Lewis: Peptic ulcer</td>
<td></td>
</tr>
</tbody>
</table>

### UNIT IV: PROBLEMS OF THE LIVER, BILIARY TRACT AND PANCREAS

### I. Jaundice

### II. Hepatitis
- **A. Types**
- **B. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies**
- **C. Therapeutic management**
  1. drugs
  2. diet
- **D. Nursing assessment**
- **E. Identification of SCD and related NDs**

### Read:
- Brunner – Unit: Metabolic and Endocrine Function
  Chapter 49-51
Theoretical Content

UNIT IV: PROBLEMS OF THE LIVER, BILIARY TRACT AND PANCREAS

II. Hepatitis (continued)
   F. Nursing interventions
      1. relieve discomfort
      2. skin care
      3. rest

III. Cirrhosis of the liver
   A. Review of Pathophysiology, Clinical Manifestation, Diagnostic Studies
   B. Complications
      1. ascites
      2. esophageal varices
      3. hepatic encephalopathy
   C. Therapeutic management
      1. peritoneovenous shunts
      2. endoscopic sclerotherapy
      3. shunts
      4. drugs
      5. diet
      6. noncompliance
   D. Nursing assessment
   E. Identification of SCD and related NDs
   F. Nursing interventions
      1. relieve discomfort
      2. promote rest
      3. observe for complications

IV. Pancreatitis
   A. Review Etiology, Pathophysiology, Clinical Manifestation, Diagnostic Studies
   B. Complications
      1. pseudocyst
      2. abscess
   C. Therapeutic management
   D. Nursing assessment
   E. Identification of SCD and related NDs
   F. Nursing interventions
      1. relieve pain
      2. promote fluid and electrolyte balance
      3. observe for complications
      4. SENS to prevent recurrence

Teaching/Learning Activities

CAI: Gastrointestinal (B-307 & Library)
NCLEX Review – Gastrointestinal
Mrs. Banks – Pancreatitis
Mrs. Bella – Cirrhosis of the Liver
Mr. Reyes – Hepatitis
Margie Thompson – Liver Transplant
Mr. Stone – Cirrhosis and Esophageal Varices

Classroom Case Study Assignments
   Cirrhosis and Hepatic Encephalopathy

Classroom Case Study Assignments
   Pancreatitis
UNIT V: PROBLEMS OF THE LIVER, BILIARY TRACT AND PANCREAS

V. Disorders of the Biliary Tract
   A. Gallbladder disease
      1. review Pathophysiology, Clinical Manifestation, Diagnostic Studies
      2. complications
   B. Therapeutic management
   C. Nursing assessment
   D. Identification of SCD and related NDs
   E. Nursing intervention

UNIT V: DIABETES
   A. Review Pathophysiology, Clinical Manifestation, Diagnostic Studies
   B. Classification
      1. type I
      2. type II
   C. Complications
      1. acute
      2. chronic
   D. Therapeutic management
      1. diet
      2. drugs
      3. exercise
      4. glucose monitoring
      5. foot care
   E. Nursing interventions
   F. Identification of SCD and related NDs
   G. Nursing interventions
      1. prevent acute/chronic complications
      2. SENS to manage disease

PART II: THE USC FOR ELIMINATION

UNIT I: PROBLEMS OF BOWEL ELIMINATION
   I. Definition of the USC for bowel elimination
   II. Diarrhea and constipation
      A. Constipation
      B. Diagnostic studies and related nursing responsibilities (i.e. consents, SENS for test preparations, etc.)
         1. x-rays
         2. barium enema
         3. colonoscopy
         4. sigmoidoscopy

Teaching/Learning Activities

CAI: Gastrointestinal (B-307 & Library)
NCLEX Review – Gastrointestinal
Mrs. Winter – Gallbladder and Cholecystectomy

Classroom Case Study Assignments
Cholecystectomy

Read: Brunner – Chapter 51
Read: Lutz – Chapter 17

Read: Pharmacology course text – Drugs affecting the Endocrine System: Diabetic Medications

CAI: Susan Smith – Diabetic Ketoacidosis
Mrs. Wilson – HHNK
Joseph Selim – Hypoglycemia
Louise Wilkins – Diabetic Ketoacidosis

7 DVDs located in Library Reserve
RC660.D5 D532 2004
1. Physiology of Glucose Regulation
2. Pathology of Diabetes
3. Nutrition Therapy, Exercise and Sick Day Management
4. Insulin and Oral Antidiabetic Agents
5. Hypoglycemia and Monitoring
6. Neuropathy, Nephropathy and Retinopathy
7. CVD and the Diabetic Foot

Read: Brunner – Patients with Intestinal and Rectal Disorders Chapter 48
Read: Lutz – Chapter 20

Read: Pharmacology course text – Drugs Affecting the Gastrointestinal System
## Theoretical Content

<table>
<thead>
<tr>
<th>II. Diarrhea and constipation (continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. Therapeutic management</td>
</tr>
<tr>
<td>1. drug therapy</td>
</tr>
<tr>
<td>2. diet</td>
</tr>
<tr>
<td>D. Nursing assessment</td>
</tr>
<tr>
<td>E. Identification of SCD and related NDs</td>
</tr>
<tr>
<td>F. Interventions</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>III. Noninflammatory intestinal disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Hernias</td>
</tr>
<tr>
<td>B. Intestinal obstruction</td>
</tr>
<tr>
<td>1. mechanical</td>
</tr>
<tr>
<td>2. nonmechanical</td>
</tr>
<tr>
<td>C. Abdominal trauma</td>
</tr>
<tr>
<td>D. Polyps</td>
</tr>
<tr>
<td>E. Hemorrhoids</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IV. Inflammatory intestinal disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Appendicitis</td>
</tr>
<tr>
<td>B. Peritonitis</td>
</tr>
<tr>
<td>C. Ulcerative colitis</td>
</tr>
<tr>
<td>D. Crohn's disease</td>
</tr>
<tr>
<td>E. Diverticular disease</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>V. Anal disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>VI. Therapeutic management</td>
</tr>
<tr>
<td>A. Diet</td>
</tr>
<tr>
<td>B. Drug therapy</td>
</tr>
<tr>
<td>C. Surgery</td>
</tr>
<tr>
<td>1. colostomy, ileostomy</td>
</tr>
<tr>
<td>2. colon resection</td>
</tr>
<tr>
<td>D. Nursing assessment</td>
</tr>
<tr>
<td>E. Identification of SCD and related NDs</td>
</tr>
<tr>
<td>F. Nursing interventions</td>
</tr>
</tbody>
</table>

## Teaching/Learning Activities

<table>
<thead>
<tr>
<th>Classroom Case Study Assignments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendicitis</td>
</tr>
<tr>
<td>GI Bleed</td>
</tr>
<tr>
<td>ileostomy</td>
</tr>
<tr>
<td>Small bowel obstruction</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CAI: Gastrointestinal (Room B307 &amp; Library)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCLEX Review – Gastrointestinal</td>
</tr>
<tr>
<td>Mr. Gold – Internal Obstruction</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Case Study: Care of the Client with ileostomy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Study: Care of the Client with Small Bowel Obstruction</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UNIT II: PROBLEMS OF URINARY ELIMINATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Definition of the USCR for urinary elimination</td>
</tr>
</tbody>
</table>

| II. Assessment                         |
| A. Health history                      |
| B. Physical exam                       |
| C. Diagnostic studies and related nursing responsibilities (i.e. consents, SENS for test preparations, etc.) |
|   1. urine studies                     |
|   2. blood chemistries                 |
|   3. radiologic studies                |
|   4. renal scans                       |
|   5. endoscopies                       |
|   6. renal biopsy                      |

<table>
<thead>
<tr>
<th>CAI: Genitourinary (B-307 &amp; Library)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCLEX Review – Genitourinary</td>
</tr>
<tr>
<td>Sara – UTI</td>
</tr>
<tr>
<td>Mr. Young – Renal Colic &amp; Nephroliathias</td>
</tr>
</tbody>
</table>

| Read: Brunner Unit: Kidney and Urinary Function |
| Read: Lutz – Chapter 19                      |
| Read: Pharmacology course text – Drugs Affecting the Renal System; Drugs Used to Treat Infections - Urinary Antiseptic Agents |

<table>
<thead>
<tr>
<th>CAI: Smoke-free environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCLEX Review – Smoke-free environment</td>
</tr>
<tr>
<td>Sara – UTI</td>
</tr>
<tr>
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</tr>
</tbody>
</table>
### Theoretical Content

#### III. Infections (UTI)
- **A. Upper**
  1. Pylelonephritis
  2. Pyelitis
  3. Ureteritis
- **B. Lower**
  1. Cystitis
  2. Urethritis
- **C. Sources**
- **D. Clinical manifestations**
- **E. Therapeutic management**

#### IV. Glomerulonephritis

#### V. Obstructive uropathies-urinary and renal calculi

#### VI. Urinary incontinence

#### VII. Problems of the prostate gland
- **A. Benign prostatic hypertrophy**
- **B. Prostatitis**
  1. review Pathophysiology, Clinical Manifestation, Diagnostic Studies
  2. drug therapy

#### VIII. Surgery of the urinary tract
- **A. Ileo-conduit**
- **B. Prostatic surgery**
- **C. Pre and postoperative care**

#### IX. Nursing assessment

#### X. Identification SCD and related NDs

#### XI. Nursing interventions

### Teaching/Learning Strategies

- Classroom Case Study Assignments
  - Kidney Stones
  - BPH

- CAI: Genitourinary (Room B-307 & Library)
  - NCLEX Review – Genitourinary
  - Mr. Sumo – Prostatic hyperplasia

### UNIT III: RENAL INJURY/FAILURE

#### A. Acute
  1. pathophysiology
  2. clinical course
    a) oliguric phase
    b) diuretic phase
    c) recovery phase
  3. diagnostic studies

#### B. Chronic
<table>
<thead>
<tr>
<th>Theoretical Content</th>
<th>Teaching/Learning Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. Dialysis</td>
<td></td>
</tr>
<tr>
<td>1. peritoneal</td>
<td></td>
</tr>
<tr>
<td>2. hemodialysis</td>
<td></td>
</tr>
<tr>
<td>D. Nursing assessment</td>
<td></td>
</tr>
<tr>
<td>E. Identification of SCD and related NDs</td>
<td></td>
</tr>
<tr>
<td>F. Nursing interventions and effect of deficit on other USCR's</td>
<td></td>
</tr>
<tr>
<td>G. Therapeutic/nursing management</td>
<td></td>
</tr>
<tr>
<td>1. drug therapy</td>
<td></td>
</tr>
<tr>
<td>2. diet</td>
<td></td>
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<tr>
<td>H. Transplantation</td>
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SKILLS FOR NURSING PRACTICE

GENERAL GUIDELINES PRIOR TO STARTING ANY PROCEDURE

* 1. Check physician/health care provider orders
* 2. Wash your hands.
  3. Organize your equipment.
* 4. Identify patient.
* 5. Introduce yourself
* 6. Explain procedure to patient.
* 7. Provide for privacy.
  8. Raise the bed to a working level.
  9. Position patient as needed.
 10. Maintain safety.
 11. Perform procedure.
 12. Observe patient's response.
 13. Wash your hands.

* Must be stated prior to starting validation procedure

See Foley Skill Demonstrations on Moodle NUR 282
  1. Foley catheter insertion
  2. Foley catheter removal
  3. Specimen collection closed technique from a foley catheter

Your nursing uniform must be worn on the day of foley validation.
### INSERTION OF FOLEY CATHETER CONNECTED TO STRAIGHT DRAINAGE - FEMALE OR MALE URINARY CATHETERIZATION

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<tr>
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<th>SATISFACTORY</th>
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<tr>
<td>1.</td>
<td>Check physician's order.</td>
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<td>2.</td>
<td>Collect Foley catheter set (usually #16 French for adult) and light source.</td>
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<td>3.</td>
<td>Wash hands.</td>
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<td>4.</td>
<td>Identify patient and provide privacy.</td>
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<td>5.</td>
<td>Prepare patient: Explain procedure; position patient for maximal exposure of urinary meatus; drape patient so that feet, legs, abdomen and chest are covered for warmth and modesty; adjust lighting for good visualization of the urinary meatus.</td>
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<td>6.</td>
<td>Remove outer wrapper from set. Fold the bag to form a cuff at the opening. Place the bag alongside the patient, above the waist level, on the opposite side of the bed. Use this bag as a discard receptacle.</td>
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<td>7.</td>
<td>Open the catheterization set, maintaining asepsis. Remove the waterproof absorbent underpad from the set without contaminating the other contents in the set.</td>
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<td>8.</td>
<td>Place this absorbent underpad beneath the patient's buttocks.</td>
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<td>9.</td>
<td>Position the catheterization set by touching only the 1&quot; outside edge of the sterile barrier (wrapper) field so as to insure the establishment of a complete sterile working field between the patient and the equipment.</td>
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<td>10.</td>
<td>Don sterile gloves.</td>
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<td>11.</td>
<td>Position the two trays.</td>
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<td>12.</td>
<td><strong>FEMALE:</strong> Protecting your sterile gloves hands, place the fenestrated drape over the perineum in such a manner as to complete the sterile working field. Place this drape so as to insure the establishment of a complete sterile working field between the patient and the equipment. <strong>MALE:</strong> Protecting your sterile gloved hands, place the fenestrated drape over the penis and pubic area, exposing only the penis. Place this drape so as to insure the establishment of a complete sterile working field between</td>
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<td>13. Attach water filled syringe to balloon outlet of catheter.</td>
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<td>14. Spread lubricant (from syringe) onto the tray and lubricate the catheter. (Position the tray so that lubricant and catheter are now in the side of the tray farthest from the perineum or penis.)</td>
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<td>15. Pour antiseptic solution over cotton balls.</td>
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<td>16. <strong>FEMALE:</strong> Hold labia minora apart with non-dominant hand, and leave hand there until the catheter is in place. <strong>MALE:</strong> Grasp the penis firmly behind the glans (with non-dominant hand), and spread the meatus between the thumb and forefinger. Leave hand there until the catheter is in place.</td>
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<td>17. <strong>FEMALE:</strong> With the dominant hand, use sterile forceps to pick up a cotton ball. Cleanse the labia (farthest from you first) and then the meatus. Visualize the meatal opening while cleansing. Discard each cotton ball after only one wipe. Use all cotton balls. <strong>MALE:</strong> Retract the foreskin of an uncircumcised male. With the dominant hand, use sterile forceps to pick up a cotton ball. Clean the meatus first and then wipe the tissue surrounding the meatus in a circular fashion. Discard each cotton ball after only one wipe. Use all cotton balls.</td>
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<td>18. To obtain patient relaxation, suggest they breathe slowly and deeply during catheter insertion.</td>
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<td>19. Pick up the insertion end of the catheter with the uncontaminated, sterile, gloved hand, holding it close to the insertion tip.</td>
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<td>20. <strong>FEMALE:</strong> Insert catheter steadily into the urethra about 3 inches with dominant sterile hand; when urine begins to flow through catheter, insert another inch or two into bladder. (Allow no more than 800 cc of urine to drain at this time.) Hold catheter in place with non-dominant hand until balloon is inflated. <strong>MALE:</strong> Lift penis to a position perpendicular to the body and exert slight traction. Insert catheter steadily about 8 inches into the urethra with dominant sterile hand; when urine begins to flow through catheter, insert another inch or two into bladder. To bypass slight resistance at sphincters, twist the catheter or wait until the sphincter relaxes. Have client take deep breaths or try to void. (If resistance is still met, discontinue procedure and report to nurse in charge.) (Allow no more than 800 cc to drain at this time.) Gently lower penis while holding catheter in place about 1-1/2 inches from meatus.</td>
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<td>21. Inflated balloon with sterile water. Do not release syringe plunger until syringe has been disconnected from balloon lumen.</td>
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<td>22. If catheter is secure, disconnect the syringe from the balloon lumen.</td>
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<td>23. <strong>MALE:</strong> In an uncircumcized male, replace the foreskin to its normal position.</td>
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<td>24. Remove fenestrated drape and underpad.</td>
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<td>25. Remove gloves.</td>
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<td>27. Position drainage bag to bed frame.</td>
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<td>28. Remove receptacle bag and catheterization set (except urine specimen container and label if needed).</td>
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<td>29. Cover patient with bed coverings, remove bath blanket and return patient to a comfortable position.</td>
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<td>30. If ordered, obtain urine specimen from drainage bag, wearing clean gloves.</td>
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<td>31. Discard equipment in appropriate receptacle. (According to hospital policy.)</td>
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| 32. Record procedure and observations accurately on patient's chart. Include:  
  - date and time  
  - size of foley  
  - amount, color, consistency of urine  
  - patient's response to procedure |              |                |          |