Nurs 3481: Psychiatric-Mental Health Nursing of Individuals, Families and Groups

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Section Information: NURS 3481-001 and NURS 3481-002

Time and Place of Class Meetings:
Section 001 – Pickard Hall 212, Wednesday 8:00 - 9:50
Section 002 – Pickard Hall 204, Wednesday 8:00 - 9:50

Description of Course Content:
NURS 3481 PSYCHIATRIC MENTAL HEALTH NURSING OF INDIVIDUALS, FAMILIES, AND GROUPS (2-6) Application of the nursing process with emphasis on critical thinking, therapeutic nursing interventions, and effective communication and interpersonal skills as they relate to persons with psychiatric mental health conditions. Prerequisite: NURS 3632.

Student Learning Outcomes:
Upon Completion of this course, the student is expected to:

1. Apply knowledge from the art and science of nursing and other scientific and humanistic disciplines in the provision of holistic psychiatric-mental health care of individuals, families, and groups.
2. Use analytical and critical reasoning for clinical judgment and nursing decision-making.
3. Relate core professional values and legal/ethical principles in the provision of holistic psychiatric-mental health care of individuals, families, and groups.
4. Use therapeutic communication techniques and effective interpersonal skills in the provision of psychiatric-mental health care of individuals, families, and groups.
5. Demonstrate ethical behaviors and conflict management skills in all professional interactions in order to implement change.
6. Employ collaboration between individuals, families, and others in establishing priorities for the provision of competent and cost-effective psychiatric-mental health care that promotes health and prevents illness.
7. Practice life-long learning, self-reflection and awareness in the provision of psychiatric-mental health care of individuals, families, and groups.
8. Model the standards of nursing practice and promote safety and quality improvement in the provision of psychiatric-mental health care of individuals, families, and groups.
9. Employ informatics in the planning, delivery, and evaluation of psychiatric-mental health care of individuals, families, and groups.

Requirements:

☐Course syllabus and clinical supplement: Available on Blackboard for course N3481 or from UTA Nursing web site. Please print and read before first day of class. Print last page contract, sign, and turn in to your clinical instructor on the clinical orientation day the first class week. You are responsible for all material in the syllabus.

☐All Clinical forms for clinical assignments will be posted on Blackboard and are in the clinical supplement. Students are responsible for printing forms from Blackboard for weekly clinical and as announced.

Descriptions of major assignments and examinations with due dates: Course Schedule and quiz schedule with dates and assignments available on Blackboard and at the end of this document. As the instructor for this course, I reserve the right to adjust the schedule in any way that serves the educational needs of the students enrolled in this course.

Required Textbooks and Other Course Materials:

Varcarolis, E. (2013). *Foundations of psychiatric mental health nursing: A clinical approach.* (7th ed). Mosby. ISBN: 9781455753581

Varcarolis, E. (2011). *Manual of psychiatric nursing care plans: Clinical tools, and psychopharmacology.* (4th ed). New York: Saunders. ISBN 9781437717822

HESI RN Practice Test ISBN 9781455727063

Recommended Textbooks:

HESI. (2013). C*omprehensive review for the NCLEX-RN® examination.* (4th ed). Elsevier. ISBN: 9781455727520

Labbate, L. A., Fava, M, Rosenbaum, J. F., and Arana, G. W. (2010). Handbook of Psychiatric Drug Therapy (6th ed). New York: Lippincott, Wilkins, and Williams. ISBN 9780781774864

McDonald, S. F. (2011) Virtual clinical excursions 3.0 - Psychiatric for Varcarolis and Halter: Foundations of psychiatric mental health nursing (6th ed). W. B. Saunders Company.

Silvestri, L. (2011). Saunders comprehensive review for NCLEX-RN. (5th edition). Philadelphia: W. B. Saunders Company.

Zerwekh, J. & Claborn, J. (2012). *Illustrated study guide for the NCLEX-RN® exam.* (8th ed). St. Louis, MO: Elsevier. ISBN 9780323082327

It is strongly recommended that a comprehensive NCLEX review book with synopsis of content and sample exam items with rationales for answers be used throughout the course.N3481 Psych/Mental Health Nursing BSN Pre-Licensure Essential Skills

ASSESSMENT

1. Mental status exam
2. Psychosocial assessment
3. Suicide ideation/risk assessment
4. Aggressive patient assessment

INFECTION CONTROL PROCEDURES

1. Handwashing/cleansing
2. Standard/universal precautions

MISCELLANEOUS

1. Documentation
2. Therapeutic communication techniques– patients

Grading Policy:
Three exams and a comprehensive HESI final determine Theory Grade. Exams will consist of multiple-choice items. The exams may be given either in the written (paper) format or on a computer at UTA. Exams are given at UTA only and are proctored. Students must bring their UTA ID card for all exams.

Content Exams: (75%)

- There are three content exams. Blueprints for unit exams will be posted on Blackboard in advance of the testing.
- Exam reviews will be available after each Unit Exam at a time to be announced by the lead teacher.

HESI Exam: (15%)

- The HESI exam will be taken at the completion of the course.
- The HESI Exam must be taken at the specified date and time. Individual student printouts of results are available from the HESI Evolve website approximately 24 hours after the exam is taken. These reports should be saved and reviewed for remediation purposes and to assist the student in preparing for the end of program HESI exam.
- The HESI is a computer administered exam, all rules related to exam taking are applied as in other course exams.
- There is no blueprint for the HESI, but since it is comprehensive of the material covered in N381, it is recommended that students use all resources to study for the HESI including: N3481 text; posted class outlines/notes; Evolve/Elsevier resources and psych case studies and psych related HESI and NCLEX study resources.

Discussion questions (10%) (Discussion questions grade only averaged in if proctored exam average is 70% or higher).

- ALL exams count toward the required minimum course grade of 70.00% on proctored exams; In determining the final course grade for N3481, the weighted average on proctored exams will be checked first. If a student achieved a 70.00% with no rounding of weighted average on proctored exams, the course non-proctored quiz grades will count toward the final grade. If the student did not achieve a 70.00% with no rounding of weighted average on proctored exams, the course grade calculation stops and the grade stands as a D or F as determined by the numerical value from the weighted average on proctored exams.
- In addition, there are no opportunities for “make-up” assignments or to earn extra credit in this course.

Quizzes
Ten scheduled quizzes will be given on Blackboard on Wednesday’s through Sunday’s throughout the semester. Quizzes will be available on Wednesday’s from 6:00 PM through Sunday’s 11:59 PM. See posted

schedule. Students will have fifteen (15) minutes to complete each of the ten (10) question quizzes. Once you begin the quiz, you must complete in fifteen (15) minutes. When time expires the quiz will save and submit automatically. Once you have submitted a question, you cannot go back and change the answer. Quiz questions may be multiple choice, fill in the blank, place in correct order, select all that apply, and other approved NCLEX alternate format questions.

Quiz questions may include course content from previous lectures, assigned case studies and/or from assigned readings for that day's lecture. Any student who fails to access the quiz on the day of a quiz will receive a grade of zero for that quiz. An average quiz grade of 90 – 100 will add two (2) points; an average quiz grade of 80 – 89 will add one (1) point to the respective exam grades (exam 1, exam 2, or exam 3).

Each individual student is responsible for ensuring (s)he has browser access to the BLACKBOARD quizzes in order to take the quiz by the due date in the assigned time. No quiz make-ups are available. Individual students not taking the quizzes will receive a zero for their grade.

Computer Requirements:
All computers on campus will access BLACKBOARD. If you choose to access from home you must have a computer and a quality Internet provider such as DSL, Cable, or Satellite (regular telephone is not adequate) Questions about adequate computer hardware should be directed to the UTA help desk at 817-272-2208 or www.helpdesk@uta.edu<http://www.helpdesk@uta.edu; they are open the same hours as the Library. Please do not bring your technical problems to class. Your instructors are not available for technical support please call or contact the helpdesk.

Your home computer's compatibility with BLACKBOARD and quiz access is your responsibility. Neither the helpdesk nor your instructor is responsible for the functionality of your home computer's configuration. If you have doubts about your own equipment you may wish to submit work and take your weekly quizzes at the many UTA Computer Labs on campus.

Word of caution:
Do not rely on employer's computer system to access Blackboard and quizzes. Students have encountered various problems (such as dropping them in the middle of an on-line quiz) due to the special filters, fire walls, program blocking programs, and barriers they put on their systems. In addition, MAC computers are not compatible with Blackboard and quizzes.

It is advised to not take any on-line quizzes on a wireless system as students have also been dropped and used up their time trying to reconnect. Use a more stable system. It is your responsibility to ensure you have the correct browser prior to taking your quizzes.

Software:
Your software (WORD, POWERPOINT, EXCEL and WINDOWS) should be up to date. As a student you may purchase the latest WINDOWS and OFFICE from the Computer Store at the UTA Bookstore for a very nominal fee. Please take advantage of this opportunity.

Grades will be earned based on the following scale; percentage indicates the contribution of each grade to the overall course grade.

Exam I	25%
Exam II	25%
Exam III	25%
Comprehensive HESI Final	15%
Discussion Board	10%
Total	100%

UTA College of Nursing Grading Criteria

In order to successfully complete an undergraduate nursing course at UTA, the following minimum criteria must be met:

- ☐ 70% weighted average on proctored exams. (discussion board grade only averaged in if proctored exam average is 70% or higher)
- ☐ 70% weighted average on major written assignments (Not applicable in NURS 3481).
- ☐ 90% on math test (Not applicable in NURS 3481).
- ☐ 90% on practicum check off (Not applicable in NURS 3481).

In undergraduate nursing courses, all grade calculations will be carried out to two decimal places and there will be no rounding of final grades. Letter grades for exams, written assignments, and end of course grades, etc. shall be:

A = 90.00 –100.00
B = 80.00 – 89.99
C = 70.00 – 79.99
D = 60.00 – 69.99

The existing rule of C or better to progress remains in effect; therefore, to successfully complete a nursing course, students shall have a course grade of 70.00 or greater. Students are reminded that any student, who fails two nursing courses, is no longer eligible to continue coursework toward a BSN from UTA CON.

**SCHOLASTIC DISHONESTY (CHEATING AND/OR COLLUSION) ON EXAMINATIONS/QUIZZES WILL RESULT IN A N3481 COURSE FAILURE ("F" FOR COURSE). YOU WILL ALSO BE REFERRED TO THE UTA OFFICE OF STUDENT CONDUCT.

70% Weighted Exam Average

In order to successfully complete an undergraduate nursing course at UTA, a student must achieve a minimum 70% weighted average on proctored exams. In this course, that includes the four exams that compile the 90% of the final grade. None of the additional course work (10%) is figured into the grade unless the 70% weighted average is reached. If bonus points were available for exams or quizzes, the points will not be added to the exams until after the weighted exam average is figured for the semester. A student must have the 70% weighted average without the bonus points being counted.

Unit and Comprehensive Exams	Weight
Exam 1	25%
Exam 2	25%
Exam 3	25%
HESI	15%
Total for Weighted Average	90%

Figuring out your Exam Grade with Weighted Averages Example: This student made 100% on all exams:

	Weight of exam	Student grade	How to figure
Exam 1	25%	100	x 0.25 = 25
Exam 2	25%	100	x 0.25 = 25
Exam 3	25%	100	x 0.25 = 25
HESI	15%	100	x 0.15 = 15
Total	90%		Total= 90

Last step: If you divide the 90 by 0.90 (90%—the weight of total exams) you will know what the average weighted score is on exams, in this case 100.00.

Example: This is the student who makes 70% on everything.

	Weight of exam	Student grade	How to figure
Exam 1	25%	70	x 0.25 = 17.5
Exam 2	25%	70	x 0.25= 17.5
Exam 3	25%	70	x 0.25= 17.5
HESI	15%	70	x 0.15 = 10.5
Total	90%		Total = 63

Last step: If you divide the 63 by 0.90 (90%-the weight of total exams) you will know what the average weighted score is on exams, in this case 70.00.

Grid for your Grades in Psychiatric Mental Health (figure YOUR weighted average...

Exams	Weight of exam	Your grade	How to figure
Exam 1	25%		x 0.25 =
Exam 2	25%		x 0.25 =
Exam 3	25%		x 0.25 =
HESI	15%		x 0.15 =
Total	90%		Total

Last step: If you divide the total of the fourth column by 90% (the total weight of your exams) you will know your weighted average score. This is the sum total of the 90% of your grade. You must have 63 or more in column 4 to move to the next step of adding in your additional course work/grades. If the 70% weighted average is not achieved, a letter grade commensurate with the weighted average will be awarded as the class grade. Less than a C signifies a non-passing grade.

Attendance Policy:

Class: Students enrolled in the course are expected to attend all lectures, be on time and ready for class at the scheduled time. Professional behavior is expected at all times. Classroom doors may be locked 10 minutes past the beginning of class at which time students are not to enter the class in session until the next break. No children are allowed in class. Adult visitors may attend class with permission of the instructor teaching the class.

Clinical: Clinical time is defined as all experiences contributing to clinical hours including but not limited to hospital assignments, outpatient facilities, support group meetings, simulation labs, and other designated activities.

Attendance and completion at/of all clinical activities is required. Each clinical instructor will have specific clinical guidelines that the student is expected to follow. Students are expected to arrive at clinical prepared and ready to begin at the assigned time. If you have an emergency the day of a clinical assignment, you are to call both your assigned instructor and the clinical facility. A single excused absence may be made-up as specified by each faculty member. More than one absence from clinical may result in failure to meet clinical objectives, and thus a course failure.

Clinical orientation is mandatory and cannot be made up.

Grade Grievances: Any appeal of a grade in this course must follow the procedures and deadlines for grade-related grievances as published in the current undergraduate catalog.
http://wweb.uta.edu/catalog/content/general/academic_regulations.aspx#10

Drop Policy:
Students may drop or swap (adding and dropping a class concurrently) classes through self-service in MyMav from the beginning of the registration period through the late registration period. After the late registration period, students must see their academic advisor to drop a class or withdraw. Undeclared students must see an advisor in the University Advising Center. Drops can continue through a point two-thirds of the way through the term or session. It is the student's responsibility to officially

withdraw if they do not plan to attend after registering. Students will not be automatically dropped for non-attendance. Repayment of certain types of financial aid administered through the University may be required as the result of dropping classes or withdrawing. For more information, contact the Office of Financial Aid and Scholarships (http://wweb.uta.edu/aao/fao/).

Americans with Disabilities Act:

The University of Texas at Arlington is on record as being committed to both the spirit and letter of all federal equal opportunity legislation, including the Americans with Disabilities Act (ADA). All instructors at UT Arlington are required by law to provide "reasonable accommodations" to students with disabilities, so as not to discriminate on the basis of that disability. Any student requiring an accommodation for this course must provide the instructor with official documentation in the form of a letter certified by the staff in the Office for Students with Disabilities, University Hall 102. Only those students who have officially documented a need for an accommodation will have their request honored. Information regarding diagnostic criteria and policies for obtaining disability-based academic accommodations can be found at www.uta.edu/disability or by calling the Office for Students with Disabilities at (817) 272-3364.

Academic Integrity:

All students enrolled in this course are expected to adhere to the UT Arlington Honor Code:

I pledge, on my honor, to uphold UT Arlington's tradition of academic integrity, a tradition that values hard work and honest effort in the pursuit of academic excellence.

I promise that I will submit only work that I personally create or contribute to group collaborations, and I will appropriately reference any work from other sources. I will follow the highest standards of integrity and uphold the spirit of the Honor Code.

UT Arlington faculty members may employ the Honor Code as they see fit in their courses, including (but not limited to) having students acknowledge the honor code as part of an examination or requiring students to incorporate the honor code into any work submitted. Per UT System Regents' Rule 50101, §2.2, suspected violations of university's standards for academic integrity (including the Honor Code) will be referred to the Office of Student Conduct. Violators will be disciplined in accordance with University policy, which may result in the student's suspension or expulsion from the University. "Scholastic dishonesty includes but is not limited to cheating, plagiarism, collusion, the submission for credit of any work or materials that are attributable in whole or in part to another person, taking an examination for another person, any act designed to give unfair advantage to a student or the attempt to commit such acts."

PLAGIARISM: Copying another student's paper or any portion of it is plagiarism. Additionally, copying a portion of published material (e.g., books or journals) without adequately documenting the source is plagiarism. If five or more words in sequence are taken from a source, those words must be placed in quotes and the source referenced with author's name, date of publication, and page number of publication. If the author's ideas are rephrased, by transposing words or expressing the same idea using different words, the idea must be attributed to the author by proper referencing, giving the author's name and date of publication. If a single author's ideas are discussed in more than one paragraph, the author must be referenced at the end of each paragraph. Authors whose words or ideas have been used in the preparation of a paper must be listed in the references cited at the end of the paper. Students are encouraged to review the plagiarism module from the UT Arlington Central Library via http://library.uta.edu/plagiarism/index.html. Papers are now checked for plagiarism and stored in Blackboard.

Student Support Services Available:

UT Arlington provides a variety of resources and programs designed to help students develop academic skills, deal with personal situations, and better understand concepts and information related to their

courses. Resources include tutoring, major-based learning centers, developmental education, advising and mentoring, personal counseling, and federally funded programs. For individualized referrals, students may visit the reception desk at University College (Ransom Hall), call the Maverick Resource Hotline at 817-272-6107, send a message to resources@uta.edu, or view the information at www.uta.edu/resources.

Electronic Communication Policy:
The University of Texas at Arlington has adopted the University "MavMail" address as the sole official means of communication with students. MavMail is used to remind students of important deadlines, advertise events and activities, and permit the University to conduct official transactions exclusively by electronic means. For example, important information concerning registration, financial aid, payment of bills, and graduation are now sent to students through the MavMail system. All students are assigned a MavMail account. Students are responsible for checking their MavMail regularly. Information about activating and using MavMail is available at http://www.uta.edu/oit/cs/email/mavmail.php.There is no additional charge to students for using this account, and it remains active even after they graduate from UT Arlington.

To obtain your NetID or for logon assistance, visit: https://webapps.uta.edu/oit/selfservice/. If you are unable to resolve your issue from the Self-Service website, contact the Helpdesk at helpdesk@uta.edu.

Student Feedback Survey: At the end of each term, students enrolled in classes categorized as lecture, seminar, or laboratory shall be directed to complete a Student Feedback Survey (SFS). Instructions on how to access the SFS for this course will be sent directly to each student through MavMail approximately 10 days before the end of the term. Each student's feedback enters the SFS database anonymously and is aggregated with that of other students enrolled in the course. UT Arlington's effort to solicit, gather, tabulate, and publish student feedback is required by state law; students are strongly urged to participate. For more information, visit http://www.uta.edu/sfs.

Final Review Week: A period of five class days prior to the first day of final examinations in the long sessions shall be designated as Final Review Week. The purpose of this week is to allow students sufficient time to prepare for final examinations. During this week, there shall be no scheduled activities such as required field trips or performances; and no instructor shall assign any themes, research problems or exercises of similar scope that have a completion date during or following this week unless specified in the class syllabus. During Final Review Week, an instructor shall not give any examinations constituting 10% or more of the final grade, except makeup exams and laboratory examinations. In addition, no instructor shall give any portion of the final examination during Final Review Week. During this week, classes are held as scheduled. In addition, instructors are not required to limit content to topics that have been previously covered; they may introduce new concepts as appropriate.

Emergency Exit Procedures**:** Should we experience an emergency event that requires us to vacate the building, students should exit the room and move toward the nearest stairwell. When exiting the building during an emergency, one should never take an elevator but should use the stairwells. Faculty members and instructional staff will assist students in selecting the safest route for evacuation and will make arrangements to assist handicapped individuals.

LIBRARY INFORMATION**:**

Peace Williamson
Stem Librarian, Central library
702 Planetarium Place, Office #216
Arlington, TX 76019
http://www.uta.edu/library/ | peace@uta.edu
Research information on nursing:
http://libguides.uta.edu/nursing

Undergraduate Support Staff:

Holly Woods, Administrative Assistant I, Pre-nursing & Senior II
644 Pickard Hall, (817) 272-4811
Email hwoods@uta.edu

Suzanne Kyle, Administrative Assistant I, Junior I through Senior I
645 Pickard Hall, (817) 272-0237
Email skyle@uta.edu

Make-up Exam Policy:

Absences - The lead teacher must be notified in advance of any potential for missing any exam. Written verification for an excused absence is required.

Approved make-up exams will be given within seven days of the exam date unless other arrangements are made with lead teacher. Format for makeup exams may differ from regularly scheduled exam. (This may be short answer, case study, discussion, alternative question format, online, etc.).

Tardy - A student who is late for a proctored exam may enter the testing area quietly and begin testing. No extra time will be allowed. However, if another student has completed the exam and left the exam room by the time the student arrives, the late student will not be allowed to test that day and will be required to take an alternative format exam and a penalty of 20 points will be subtracted from the make-up exam grade.

We highly recommend that students utilize all of the EVOLVE helps. There are practice questions, pre/post exams, chapter review and critical thinking questions, seven (7) topic related computer-based Evolve Apply Case Studies and fifteen (15) Virtual Clinical Excursions (VCE). Case studies include: Alcoholism, Major Depressive Disorder (with anxiety), Depression (with psychosis), Schizophrenia, Psychosis, Alzheimer's, and Attention Deficit Disorder. Instructions on accessing the Evolve Apply Case Studies are in the N3481 Clinical Syllabus. Grades will not be recorded for these Case Studies and VCE, but they are excellent preparation for lectures and exams, including the final HESI.

Clinical Experiences may be in psychiatric settings in public and private local and state hospitals, mental health clinics, community facilities, and with medical-surgical hospital client with psychiatric concerns. Clinical conferences are related to class content and to the student clinical experiences. Students are expected to participate fully and professionally.

In order to pass NURS 3481, both class and clinical components must be successfully completed. Failure to pass either component will result in course failure.

Required Clinical Assignments:

Guidelines for completion of the Clinical Assignments will be provided the first day of class. Students will be expected to use the nursing process in assessing, planning, implementing and evaluating the care of selected clients in the clinical area. Guidelines may be revised during the semester and students will be provided with revisions.

1. One Clinical Orientation: To be completed Week 1 on your regularly scheduled clinical day (unless it falls on a holiday) for Thursday/Friday clinicals. Those students in Monday psych clinical may be scheduled on Thursday or Friday (dependant on other scheduled clinicals). At UTA, Rooms/DatesTBA.
2. Two communication simulations: This requires prior preparation (see video directions in Clinical Supplement). To be completed Week 2 and Week 3 on your regularly scheduled clinical day (unless it falls on a holiday) for Thursday/Friday clinicals. Those students in Monday psych clinical may be scheduled on Thursday or Friday (dependant on other scheduled clinicals).

At UTA, Rooms/DatesTBA.

3. One Medication Simulation: This requires prior preparation (see Medication Lab Simulation directions in Clinical Supplement). Week 4 on your regularly scheduled clinical day (unless it falls on a holiday). At UTA, Rooms/DatesTBA
4. Pharmacology Presentation: This requires prior preparation (see directions in Clinical Supplement). Due the 1st week of clinical scheduled at your assigned clinical facility (date TBA in clinical group).
5. Reflection-Critical Thinking Journals: (See directions in Clinical Supplement). Due Monday 11:59pm after previous Thursday/Friday clinical and Friday 11:59pm after previous Monday clinical experience to clinical instructor on Blackboard. (one per each clinical day).
6. Three Satisfactory Nursing Care Plans with Mental Status Assessment, 3 Full Length Nursing Care Plans on different psychiatric diagnoses. (See directions in Clinical Supplement). Due by Monday 11:59pm after previous Thursday/Friday clinical and Friday 11:59pm after previous Monday clinical to clinical instructor on Blackboard. Three satisfactory full-length NCPs on 3 different patient diagnoses required for mastery.
7. Two Support Group Meeting Reports/Critiques from AA, NA, Overeaters, Codependency (CODA), etc. Must follow guidelines for credit. (See directions in Clinical Supplement). Due dates posted on calendar. Turn in to clinical instructor on Blackboard.
8. One Process Recording: (See directions in Clinical Supplement). Process Recording is due Monday 11:59pm after previous Thursday/Friday clinical and Friday 11:59pm after previous Monday clinical to clinical instructor on Blackboard. Due dates posted on calendar.
9. One Client Teaching-Learning Group Project: (See directions in Clinical Supplement). (date/time set with clinical instructor & facility).
10. Weekly discussion boards to be posted on Blackboard: (See directions in Clinical Supplement). Due dates posted on calendar
11. Psychiatric Mental Health HESI Practice Test (See directions in Clinical Supplement). (date/time for completion TBA prior to actual HESI comprehensive final).

Attendance Policy: Regular class attendance and participation is expected of all students. Students are responsible for all missed course information.

Confidentiality: Confidentiality is a PRIORITY in the psychiatric/chemical dependency/mental health setting. NO PART of a client's medical record may leave the unit. NO INFORMATION is given to any person without client's permission, not even the client's admission status. Information from the chart may be used with clinical assignments. Confidentiality statements are required to be signed for each clinical agency. All clients have code numbers or names that must be used by anyone requesting information.

Course Process and Student Responsibilities:

1. All students enrolled in clinical courses must show proof of current immunizations, TB tests, insurance, and CPR certification as described in the UTA Undergraduate Catalog and the College of Nursing Student Handbook. A checklist of compliance data is maintained in the Undergraduate Student Services Office (Nursing Advising Office) file. Additionally, all students are required to view the file "For Your Protection" prior to clinical practicum, and agree to follow the guidelines relevant to universal precautions published in the Student handbook.

2. ** NURSING CARE PLANS, PROCESS RECORDINGS, CRITICAL THINKING JOURNALS, DISCUSSION QUESTIONS, VIDEO QUESTIONS, MEDICATION ASSIGNMENT, SIMULATION LAB ACTIVITIES, ARE FOR CLINICAL CREDIT (PASS/FAIL); THESE ASSIGNMENTS ARE NOT GROUP WORK—ALL ASSIGNMENTS ARE TO BE COMPLETED BY EACH STUDENT ALONE. CHEATING, COLLUSION, AND/OR PLAGIARISM ON THESE ASSIGMENTS WILL RESULT IN A N3481 CLINICAL FAILURE ("F" FOR THE COURSE). YOU WILL ALSO BE REFERRED TO THE UTA OFFICE OF STUDENT CONDUCT.
   **Cheating: copying the work of another; allowing someone to copy your work; giving aid to or seeking aid from another when not permitted by the instructor; using, obtaining, or attempting to obtain by any means, the whole or part of a work assignment that is not provided for your use by your instructor.
   **Collusion: unauthorized collaboration with another in preparing work that is offered for credit. **Plagiarism: Unacknowledged incorporation of the work of another in work that is offered for credit.
   (UTA Office of Student Conduct, 2011)

3. In the classroom, all beepers, cell phones, other electronic devices etc. are to be off or in a non disruptive/silent/vibrate mode. Telephones are not to be used in the classroom for text messaging, talking, or taking pictures. LAPTOP COMPUTERS MAY BE USED FOR NURS3481 NOTE TAKING ONLY. SURFING THE WEB, FACEBOOK AND OTHER WORK IS VERY DISTRACTING TO OTHERS IN THE CLASS. Students using computers, telephones, or other electronic devices in a manner inconsistent with these rules or in a manner disruptive to the class may be asked to leave class, or not allowed to bring computers to class.

4. Students enrolled in the course are expected to attend and actively participate in all class periods. Attendance may be taken at various times during classes. A student signing the roll for another student is committing academic dishonesty and will be dealt with accordingly. Maximum learning occurs with active student involvement in a variety of modes, including taking notes. Lecture notes and outlines will be the responsibility of each student. Faculty members may or may not provide hard copies or online copies of lecture outline.

5. The clinical instructor and the clinical facility are to be notified of any necessary absence on or before the day of the absence, prior to the appointed time for clinical. Students are responsible for scheduling other activities around clinical times. Excused absences are only for extenuating and emergency situation (illness etc). All excused clinical absences will require make-up and may include time spent at a clinical agency, simulation or lab time, or another learning activity (presentation to clinical group etc)., provided guidelines for notification are followed (see course contract). Work, doctor's appointments, birth of a friend's baby, trips, attending a wedding etc are not excused and may result in course failure. Students may only make up one clinical day and it must be for an excused absence.

6. Students are expected to prepare for both clinical practice and classroom experiences. Students are expected to be on time for both clinical experiences and class. Reading assignments prior to class is expected of students. Students are responsible for all learning materials assigned whether covered in lecture or not.

7. An exam blueprint with the number of exam items per topic will be posted prior to each exam. Each exam has approximately 50 questions. Exams will include material from lecture, discussion, audio visual aids, reading materials, and any other assigned materials or activities.

8. Conduct during exams: Students are assigned to a room for exams. The only items allowed with the student are pencils and student must present Mav ID badge (not drivers license) and sign-in, in order to gain entrance. All cell phones and pagers must be turned off and

placed at the front of the room during all exams. No cell phones, pagers, books, pages of books, papers, notes, or note cards of any type may be on your person or used in any manner during an exam. Caps or hats with bibs are not allowed to be worn. Once a student leaves the testing room, they are expected to leave the area so as not to disturb others still taking the exam.

9. The policy for taking a missed examination: Everyone is expected to take exams at the scheduled time. In the event a student misses an exam, the lead teacher must be notified in advance. The lead teacher must approve a make-up exam (unforeseen legitimate excuses only. The make-up will cover the designated material, but will be different questions in the on-line format. A missed exam must be made up within one week. It is the student's responsibility to notify the lead teacher and schedule a makeup time. Failure to notify the lead teacher prior to missing an exam will result in a grade of "0" for that exam.

10. Grades will be posted on Blackboard when scores have been received, and reviewed by faculty. NO GRADES WILL BE GIVEN BY TELEPHONE. The lead or co-lead teacher will counsel students experiencing difficulty in the course. It is the student's responsibility to make an appointment with either the lead or co-lead teacher in order to discuss progress in the course.

11. Assigned papers may be accepted beyond the due date/time when prior communication has been made with the receiving faculty. Depending on the reason for tardiness, late papers may be reason for a clinical contract and/or failing clinical grade.

12. All students in each group are expected to participate equally in the teaching project.

13. UTA uniforms will be worn for clinical experiences including labs, simulations and mental health court. UTA name tag with last name covered will be worn. No lab coats! The remainder of the UTA dress code will be followed (re jewelry etc). Any variations related to clinical experiences or clinical agencies will be discussed by clinical instructor.

14. Prior to audio and/or video taping any class, the permission of the person teaching the class must be obtained.

15. Classroom conduct should always be respectful of faculty and fellow classmates. Behaviors such as side conversations or leaving or entering class during class (unless there is an emergency) are disrespectful to others in the classroom. Disruptive behavior, disregard for the needs of others, or inattentiveness (talking, sleeping, reading the newspaper) will be addressed and may result in the student being dismissed from the room.

16. Students who miss any part of a class are responsible for obtaining any notes, handouts, etc., from a classmate.

17. Students are expected to use Blackboard as the principle means of non-verbal course communication. Students are responsible for checking Blackboard for course/instructor communication daily throughout the entire course. The Blackboard or discussion board should be viewed as a public and professional forum for discussion. Students are free to discuss academic matters and consult one another regarding academic resources. The tone of postings on the Blackboard discussion board should remain professional in nature. It is not appropriate to post statements of a personal or political nature, or statements criticizing classmates or faculty. Inappropriate statements will be deleted by the course faculty. Announcements from student organizations may be posted with faculty permission.

18. The posting of any patient reference in any way (even if found in a public forum) on facebook, My Space, youtube or other internet forum, may result in course failure and

possible expulsion from the nursing program.

19. Students are to be free of the influence of alcohol and any other drugs or substances that may impair judgment and/or behavior during class, clinical experiences, or any activities related to class or clinical experiences where the student represents UTACON.

College of Nursing Information:

APA Format

APA style manual will be used by the UTACON with some specific requirements for the undergraduate courses. The sample title page & instructions, as well as a Manuscript Preparation document can be found in the Student Handbook which can be found by going to the following link and clicking on BSN Student Handbook: http://www.uta.edu/nursing/bsnprogram/

Code of Professional Conduct

Nursing students in the UTA CON are considered to be part of the nursing profession. As members of the profession, students are expected to commit to and maintain high ethical standards.
Students are responsible and accountable for their own academic and professional behaviors and the resulting consequences.

Students will demonstrate self-discipline throughout all aspects of their nursing education, including meeting academic responsibilities and exhibiting professional conduct in the classroom and in the community, as outlined in the Texas Nurse Practice Act and Texas State Board of Nursing Policies.

It is each student's responsibility to promote scholastic honesty and professional ethics by actively participating with faculty in maintaining a quality academic environment. Students are expected to guard public safety by immediately reporting to faculty, any incident they observe or are aware of which would allow incompetent, unethical, or illegal practice by another individual. Having knowledge of and failing to report such behaviors constitutes a breach of both academic and professional responsibilities.

Refer to the Student Handbook for more information.

Honors College Credit

Students who are members of the Honors College may wish to take this course for Honors credit. If you wish to do so, please provide the Lead Teacher (or other designated faculty member) with an Honors Credit Contract (downloaded from http://honors.uta.edu/documents/credit.pdf). You and the Lead Teacher/faculty member will together determine an appropriate supplemental assignment to justify the awarding of Honors credit. If you are not in the Honors College and would like to learn more about the benefits of membership, visit the website at http://honors.uta.edu/, where you will find an application form for electronic submission.

Classroom Conduct Guidelines

The Faculty of the BSN Program believes that classroom teaching has two goals: the provision of content pertinent to the discipline of nursing and the socialization of students into the professional role. We are committed to providing the curriculum in an atmosphere conducive to student learning and in a manner that will prepare graduates to be successful in the health care workplace. Refer to the Student Handbook for more information.

Essential skills Experience

Each UTACON clinical course has a designated set of essential nursing skills. An essential nursing skill is one that is "required" for each student to have instruction on AND either laboratory or clinical experience performing. Experience is defined as "hands on" performance of a skill in a laboratory setting using standardized patients, manikins, human patient simulators, task trainers, and computer simulation modules or in a clinical setting involving actual patients or communities.

UTACON students are responsible for acquiring essential skills experiences, documenting these experiences, obtaining verification from their clinical instructors, and maintaining an ongoing record of essential skills experience during all Junior and Senior clinical courses.

Each course syllabus will list the Essential Skills required for that specific course. Each course will make the Course Specific Essential Skills Experience Passport available to the student either by attaching it to syllabus or in the course material in Blackboard. The Course Specific Passport must be used to document skills experiences during clinical or simulation laboratory sessions. After performing an essential skill, a student will record the date and the setting, and then his/her initials in the appropriate boxes on the passport. The student will then provide the record to his/her clinical instructor for verification. Students are responsible for the accuracy and integrity of Passport documentation. Any attempt to falsify or alter Passport information may result in disciplinary actionrelated to UTA's Academic Dishonesty policies.

UTA students are required to perform and document ALL the essential skills for each course in order to obtain a passing grade for the clinical component of the course. Throughout the semester, as part of the clinical evaluation process, clinical instructors will monitor student progress in completing all essential skills designated on the Passport. It is the student's responsibility to obtain the required essential skills experiences in a timely manner throughout the semester. The completed Course Specific Passport will be attached to the final clinical evaluation and maintained in the student's record located in the Student Services Office.

CLINICAL PASS/FAIL:
Clinical Failing Behaviors

Clinical failing behaviors are linked to the Texas Board of Nursing Standards of Professional Practice. Issues related to professional conduct, management of stress, clarification of course, clinical assignment, and/or professional role expectations, may warrant clinical warnings, contracts for remediation, or course failure.

Clinical Failing Behaviors	Matched to NPA
1. Performance is unsafe.	1,2,3,5,6,7,9,10,11,12,13,14
2. Questionable decisions are often made.	1,2,3,4,5,6,7,8,9,10,11,12,13,14
3. Lacks insight into own behaviors and that of others.	1,2,3,4,5,6,8,9,10,11,12,13,14
4. Difficulty in adapting to new ideas/functions.	4,5,6,7,8,9,10,11,13,14
5. Continues to need additional guidance and direction.	1,2,3,5,6,7,8,9,10,11,14

Standards of Professional Nursing Practice (BON 213.27, 217.11, 217.12)

1. Knows rationale for side effects of medications and treatments, and correctly administers same 217.00 (1) (C).
2. Documents nursing care accurately and completely, including signs and symptoms, nursing care rendered medication administration. Contacts health care team concerning significant events in patient health 217.11 (1) (D).
3. Implements a safe environment for patients and/or others, i.e., bed rails up, universal precautions 217.11 (1) (B).
4. Respects client confidentiality 217.11 (1) (E).
5. Accepts assignments commensurate with educational level, preparation, experience and knowledge 217.11(1) (T).

6. Obtains instruction and supervision as necessary when implementing nursing procedures or practices 217.11(1) (H).
7. Notifies the appropriate supervisor when leaving an assignment 217.11(1) (I).
8. Recognizes and maintains professional boundaries of the nurse/patient relationship 217.11(1) (J).
9. Clarifies orders, treatments, that nurse has reason to believe are inaccurate, non-effective or contraindicated 217.11(1) (N).
10. 10.Able to distinguish right from wrong 213.27(b) (2) (A).
11. 11.Able to think and act rationally 213.27(b) (2) (B).
12. 12.Able to keep promises and honor obligations 213.27(b) (2) (C).
13. 13.Accountable for own behavior 213.27(b) (2) (D).
14. 14.Able to promptly and fully self-disclose facts, circumstances, events, errors and omissions when these disclosures will enhance health status of patients or protect patients from unnecessary risk or harm 213.27(b) (2)(G).

Please refer to the Board of Nursing at www.BON.state.tx.us for any additional information regarding the Texas Nursing Practice Act.

Clinical Dress Code:
The clinical dress code applies to all graduate and undergraduate students of The University of Texas at Arlington College of Nursing (UTACON), and has two primary purposes: to insure that, whenever in the clinical setting, students of the UTACON: 1) represent the nursing profession and UTACON in a professional and appropriate manner, and 2) are readily identifiable as students.

Students are to adhere to the dress code any time they present themselves to a clinical agency in the role of nursing student. This includes going to the agency prior to clinical to select a patient, arriving at the agency in street clothes to change into hospital scrubs, and attending post-conference or classroom time at the agency, as well as when attending clinical. Clinical faculty has final judgment on the appropriateness of student attire. Refer to the Student Handbook for more information.

Undergraduate, prelicensure student nurses should wear their UTACON uniform and UTACON insignia patch ONLY when in simulation, clinical or other learning experiences authorized by UTACON faculty. Students are to provide nursing care to patients at clinical facilities ONLY when authorized by their UTACON instructor and when their clinical instructor and/or preceptor are present on site. Students who provide nursing care to patients when an instructor or preceptor IS NOT present on site will receive a FAILING grade for clinical and a course grade of “F”.

Clinical Attendance When University is Closed
Some programs in the College of Nursing, such as the Academic Partnership Program, may require students to attend clinical on evenings, nights, week-ends, or holidays. Students are expected to attend their assigned clinical rotation as scheduled, even when the University is otherwise closed.

Award for Student Excellence in Clinical Nursing
This award is for an exceptional student who consistently exceeds the clinical expectations of the course. The student will be honored at an awards ceremony at the end of the semester. Clinical faculty will further discuss the award during the clinical rotation.
Criteria for selection:

- ☐ Consistently exceeds clinical performance standards in the application of theoretical concepts, evidence-based practice, and communication (written and verbal).
- ☐ Demonstrates exemplary performance in the use of critical thinking and problem solving skills.
- ☐ Demonstrates exemplary performance in the application of leadership principles and professionalism.

No Gift Policy:
In accordance with Regents Rules and Regulations and the UTA Standards of Conduct, the College of Nursing has a “no gift” policy. A donation to the UTA College of Nursing Scholarship Fund would be an appropriate way to recognize a faculty member’s contribution to your learning. For information regarding the Scholarship Fund, please contact the Dean’s office.

Observance of Religious Holy Days:
Undergraduate Nursing faculty and students shall follow the University policy regarding Observance of Religious Holy Days:
(http://wweb.uta.edu/catalog/content/general/academic regulations.aspx#6

Hazardous Exposure To Blood, Blood Products Or Body Fluids:
Note: The Centers for Disease Control and Prevention recommend that individuals who have been exposed to needle sticks or to potentially infectious blood, blood products, or body fluids should be evaluated and, when appropriate, have treatment initiated within two hours.

Upon sustaining a contaminated needle stick or being exposed to hazardous blood or blood products, the student will:

1. Immediately report the incident to the clinical faculty member and the appropriate person in the clinical agency.
2. Have the wound inspected, cleansed, and dressed.
3. Complete the institutional incident report and follow institutional policy as applicable.
4. Seek medical attention as necessary based on level of exposure.

Please note that all students are responsible for obtaining and maintaining their own health insurance and are responsible for the costs of medical/health care assessment, treatment and follow-up that are not covered by the student's health insurance. Students should be aware of the coverage on their health insurance policy as most may not cover the full cost of required medical treatment and services in the case of a contaminated needle stick or hazardous exposure to blood or blood products.

Policy on Invasive Procedures
Allowing students to practice invasive skills (e.g., IM, SQ, IV's, NG tubes, intubation) on other students in the learning lab will no longer be used as a teaching strategy. Skills may be practiced on the simulators in the learning lab. Students will be able to perform the skills in the clinical setting under the appropriate faculty or preceptor supervision.

The Student Handbook can be found by going to the following link: http://www.uta.edu/nursing/bsn-program/ and clicking on the link titled BSN Student Handbook located in the lower left-hand corner.

As the instructor for this course, I reserve the right to adjust the course schedule in any way that serves the educational needs of the students enrolled in this course. – Susan Justice

TOPICAL LECTURE OUTLINE – Spring 2014

Week/Date	Topics (*Reading Assignments* in textbook) [**Related Manual References**]	Hours
1 1/15 ALL: (TBA)	•Intro to Course Syllabus •Intro to Course Syllabus, Intro to Mental Health (1,2,4, 31) •Nursing, Nursing Roles (4,7)	2 hours
1 1/16 (TBA) or 1/17 (TBA) Class & Clinical Content 0800- 1430 30 min. lunch	•Orientation to clinical syllabus •Nursing Process for Psych Nursing, (7) •Assessment Strategies/ Mental Status Exam (7, 9) •Boundaries (8) •Confidentiality, Legal & Ethical (6), Safety in Acute care settings (4) MEET AFTER LUNCH WITH CLINICAL GROUP FOR 30 MIN	6 hours Clinical
2 1/22	•Therapeutic Relationships (8) [2] •Communication and the Clinical Interview (9) [3]	2 hours
3 1/29	•Psychobiology, Pharmacology (3)) [21]	2 hours
4 2/5	•Schizophrenia (12) [8] •Therapeutic Groups (33) •Relevant Theories and Therapies for Nursing Practice; Cultural Implications for Psychiatric Mental Health Nursing; (CBT, Reinforcements, etc.) (2,5)	2 hours CONVOD
5 2/12	**Exam I 0800-0915** •Rooms TBA	75 minutes
6 2/19	•Understanding Responses to Stress (10) •Anxiety Disorders (PTSD, PANIC, OCD, Phobias) (15) [5] •Defense Mechanisms (10,15)	2 hours
7 2/26	•Addictive Disorders (22) [10, 19] •Anger, Aggression & Violence (27) [17] •Crisis, disaster & Suicide Interventions (25,26) [13]	2 hours CONVOD
8 3/5	Depressive Disorders MDD6 (14) [6] •Bipolar Disorders (13) [7, 19]	2 hours
9 3/19	**Exam II 0800-0915** •Rooms TBA	75 minutes
10 3/26 Last Drop Date 3/28 (See UTA calendar for	•Somatoform, Factitious, and Dissociative Disorders (16, 17) [19] Sleep (19)	2 hours CONVOD

details)		
11 4/2	Child, Older Adult, and Intimate Partner Abuse, Sexual Assault, (28, 29)[14,15] Eating Disorders (18) [11]	2 hours CONVOD
12 4/9	•Integrative Care (35) •Child Adolescent & Family Mental Health Issues (11, 21) [4, 19] •Family Interventions (34)	CONVOD 2 hours
13 4/16	•Cognitive Disorders (23) [12] •Personality Disorders (24) [9, 19]	2 hours
14 4/23	**Exam III 0800-0915** •Rooms TBA	75 minutes
15 4/30 TBA	•Content Review – Jeopardy Style •Final Clinical Evaluations with your Clinical Instructor	2 hours
16 5/6 TBA	•FINAL HESI TBA DATE NOT FINALIZED	85 minutes

(*) Chapters in Varcarolis Text, 7th Edition. Specific page numbers may be found in index. Related Varcarolis Manual readings [**] apply also. Additional readings, assignments, and/or activities may be assigned at lecturer's discretion. Calendar is subject to change.

As the instructor for this course, I reserve the right to adjust this schedule in any way that serves the educational needs of the students enrolled in this course. –Susan Justice

Quiz Outline – Spring 2014

Week and Date	Topic (*Reading Assignments* in textbook) [**Related Manual References**]	Availability/Minutes
2 1/22	•Therapeutic Relationships (8) [2] •Communication and the Clinical Interview (9) [3]	1/22 6:00 PM- 1/26 11:59 PM/15 minutes
3 1/29	•Psychobiology, Pharmacology (3)) [21]	1/29 6:00 PM- 2/2 11:59 PM/ 15 minutes
4 2/5	•Schizophrenia (12) [8] •Therapeutic Groups (33) •Relevant Theories and Therapies for Nursing Practice; Cultural Implications for Psychiatric Mental Health Nursing; (CBT, Reinforcements, etc.) (2,5)	2/5 6:00 PM- 2/9 11:59 PM/15 minutes
6 2/19	•Understanding Responses to Stress (10) •Anxiety Disorders (PTSD, PANIC, OCD, Phobias) (15) [5] •Defense Mechanisms (10,15)	2/19 6:00 PM- 2/23 11:59 PM/ 15 minutes
7 2/26	•Addictive Disorders (22) [10, 19] •Anger, Aggression & Violence (27) [17] •Crisis, disaster & Suicide Interventions (25,26) [13]	2/26 6:00 PM- 3/2 11:59 PM/ 15 minutes
8 3/5	Depressive Disorders MDD6 (14) [6] •Bipolar Disorders (13) [7, 19]	3/5 6:00 PM- 3/9 11:59 PM/ 15 minutes
10 3/26	•Somatoform, Factitious, and Dissociative Disorders (16, 17) [19] •Sleep (19)	3/26 6:00 PM- 3/30 11:59 PM/15 minutes
11 4/2	Child, Older Adult, and Intimate Partner Abuse, Sexual Assault, (28, 29)[14,15] Eating Disorders (16) [11]	4/2 6:00 PM- 4/6 11:59 PM/ 15 minutes
12 4/9	•Integrative Care (35) •Child Adolescent & Family Mental Health Issues (11, 21) [4, 19] •Family Interventions (34)	4/9 6:00 PM- 4/13 11:59 PM/15 minutes
13 4/16	•Cognitive Disorders (23) [12] •Personality Disorders (24) [9, 19]	4/16 6:00 PM- 4/20 11:59 PM/15 minutes

LECTURE OBJECTIVES

After completing all reading assignments, learning activities, and participating in class; the student should be able to complete the following objectives under each topic area:

CHAPTER 1: MENTAL HEALTH AND MENTAL ILLNESS

- Describe the continuum of mental health and mental illness.
- Explore the role of resilience in the prevention of and recovery from mental illness and consider resilience in response to stress.
- Identify how culture influences the view of mental illnesses and behaviors associated with them.
- Discuss the nature/nurture origins of psychiatric disorders.
- Summarize the social influences of mental health care in the United States.
- Explain how epidemiological studies can improve medical and nursing care.
- Identify how the *Diagnostic and Statistical Manual, 5th edition (DSM-5)* is used for diagnosing psychiatric conditions.
- Describe the specialty of psychiatric mental health nursing and list three phenomena of concern.
- Compare and contrast a *DSM-5* medical diagnosis with a nursing diagnosis.
- Discuss future challenges and opportunities for mental health care in the United States.
- Describe direct and indirect advocacy opportunities for psychiatric mental health nurses.

CHAPTER 7: THE NURSING PROCESS AND STANDARDS OF CARE FOR PSYCHIATRIC MENTAL HEALTH NURSING

- Compare the different approaches you would consider when performing an assessment with a child, an adolescent, and an older adult.
- Differentiate between the use of an interpreter and a translator when performing an assessment with a non–English-speaking patient.
- Conduct a mental status examination (MSE).
- Perform a psychosocial assessment, including brief cultural and spiritual components.
- Explain three principles a nurse follows in planning actions to reach agreed-upon outcome criteria.
- Construct a plan of care for a patient with a mental or emotional health problem.
- Identify three advanced practice psychiatric mental health nursing interventions.
- Demonstrate basic nursing interventions and evaluation of care following the ANA's Standards of Practice.
- Compare and contrast *Nursing Interventions Classification (NIC)*, *Nursing Outcomes Classification (NOC)*, and evidence-based practice (EBP).

CHAPTER 8: THERAPEUTIC RELATIONSHIPS

- Explain the three phases of the nurse-patient relationship.
- Compare and contrast a social relationship and a therapeutic relationship regarding purpose, focus, communications style, and goals.
- Identify at least four patient behaviors a nurse may encounter in the clinical setting.
- Explore qualities that foster a therapeutic nurse-patient relationship and qualities that contribute to a nontherapeutic nursing interactive process.
- Define and discuss the roles of empathy, genuineness, and positive regard on the part of the nurse in a nurse-patient relationship.
- Identify two attitudes and four actions that may reflect the nurse's positive regard for a

patient.
- Analyze what is meant by boundaries and the influence of transference and countertransference on boundary blurring.
- Understand the use of attending behaviors (e.g., eye contact, body language, vocal qualities, and verbal tracking).
- Discuss the influences of disparate values and cultural beliefs on the therapeutic relationship.

CHATPER 6: LEGAL AND ETHICAL GUIDELINES FOR SAFE PRACTICE

- Compare and contrast the terms *ethics* and *bioethics* and identify five principles of bioethics.
- Discuss at least five patient rights, including the patient's right to treatment, right to refuse treatment, and right to informed consent.
- Identify the steps nurses are advised to take if they suspect negligence or illegal activity on the part of a professional colleague or peer.
- Apply legal considerations of patient privilege (a) after a patient has died, (b) if the patient tests positive for human immunodeficiency virus, or (c) if the patient's employer states a "need to know."
- Provide explanations for situations in which health care professionals have a duty to break patient confidentiality.
- Discuss a patient's civil rights and how they pertain to restraint and seclusion.
- Develop awareness of the balance between the patient's rights and the rights of society with respect to the following legal concepts relevant in nursing and psychiatric mental health nursing: (a) duty to intervene, (b) documentation, and (c) confidentiality.

CHAPTER 4: SETTINGS FOR PSYCHIATRIC CARE

- Compare the process of obtaining care for physical problems with obtaining care for psychiatric problems.
- Analyze the continuum of psychiatric care and the variety of care options available.
- Describe the role of the primary care provider and the psychiatric specialist in treating psychiatric disorders.
- Explain the purpose of patient-centered medical homes and implications for holistically treating individuals with psychiatric disorders.
- Evaluate the role of community mental centers in the provision of community-based care.
- Identify the conditions that must be met for reimbursement of psychiatric home care.
- Discuss other community-based care providers including assertive community treatment (ACT) teams, partial hospitalization programs, and alternate delivery of care methods such as telepsychiatry.
- Describe the nursing process as it pertains to outpatient settings.
- List the standard admission criteria for inpatient hospitalization.
- Discuss the purpose of identifying the rights of hospitalized psychiatric patients.
- Explain how the multidisciplinary treatment team collaborates to plan and implement care for the hospitalized patient.
- Discuss the process for preparing patients to return to the community for ongoing care and promoting the continuation of treatment.

CHAPTER 8: THERAPEUTIC RELATIONSHIPS

- Explain the three phases of the nurse-patient relationship.
- Compare and contrast a social relationship and a therapeutic relationship regarding purpose, focus, communications style, and goals.
- Identify at least four patient behaviors a nurse may encounter in the clinical setting.
- Explore qualities that foster a therapeutic nurse-patient relationship and qualities that contribute to a nontherapeutic nursing interactive process.
- Define and discuss the roles of empathy, genuineness, and positive regard on the part of the

nurse in a nurse-patient relationship.
- Identify two attitudes and four actions that may reflect the nurse's positive regard for a patient.
- Analyze what is meant by boundaries and the influence of transference and countertransference on boundary blurring.
- Understand the use of attending behaviors (e.g., eye contact, body language, vocal qualities, and verbal tracking).
- Discuss the influences of disparate values and cultural beliefs on the therapeutic relationship.

CHAPTER 9: COMMUNICATION AND THE CLINICAL INTERVIEW

- Describe the communication process.
- Identify three personal and two environmental factors that can impede communication.
- Discuss the differences between verbal and nonverbal communication.
- Identify two attending behaviors the nurse might focus on to increase communication skills.
- Compare and contrast the range of verbal and nonverbal communication of different cultural groups in the areas of (a) communication style, (b) eye contact, and (c) touch. Give examples.
- Relate problems that can arise when nurses are insensitive to cultural aspects of patients' communication styles.
- Demonstrate the use of four techniques that can *enhance* communication, highlighting what makes them *effective*.
- Demonstrate the use of four techniques that can obstruct communication, highlighting what makes them ineffective.
- Identify and give rationales for suggested (a) setting, (b) seating, and (c) methods for beginning the nurse-patient interaction.
- Explain to a classmate the importance of clinical supervision.

CHAPTER 3: BIOLOGICAL BASIS FOR UNDERSTNDING PSYCHIATRIC DISORDERS AND TREATMENTS

- Discuss major functions of the brain and how psychotropic drugs can alter these functions.
- Identify how specific brain functions are altered in certain mental disorders (e.g., depression, anxiety, and schizophrenia).
- Describe how a neurotransmitter functions as a chemical messenger.
- Describe how the use of imaging techniques can be helpful for understanding mental illness.
- Develop a teaching plan that includes side effects from dopamine blockage (e.g., antipsychotic drugs) such as motor abnormalities.
- Describe the result of blockage of the muscarinic receptors and the α_1 receptors by the standard neuroleptic drugs.
- Identify the main neurotransmitters that are affected by the following psychotropic drugs and their subgroups:
    - Antianxiety and hypnotic drugs
    - Antidepressant drugs
    - Mood stabilizers
    - Antipsychotic drugs
    - Psychostimulants
    - Acetylcholinesterase Inhibitors
- Identify special dietary and drug restrictions in a teaching plan for a patient taking a monoamine oxidase inhibitor.
- Identify cautions you might incorporate into your medication teaching plan with regard to the following:
    - Herbal medicine
    - Genetic pharmacology (i.e., variations in effects and therapeutic actions of medications among different ethnic groups)

CHAPTER 33: THERAPEUTIC GROUPS

- Identify basic concepts related to group work.
- Describe the phases of group development.
- Define task and maintenance roles of group members.
- Discuss the therapeutic factors that operate in all groups.
- Discuss seven types of groups commonly led by basic level registered nurses.
- Describe a group intervention for (1) a member who is silent or (2) a member who is monopolizing the group.

CHAPTER 12: SCHIZOPHRENIA AND SCHIZOPHRENIA SPECTRUM DISORDERS

- Identify the schizophrenia spectrum disorders.
- Describe the symptoms, progression, nursing care, and treatment needs for the prepsychotic through maintenance phases of schizophrenia.
- Discuss at least three of the neurobiological-anatomical-genetic findings that indicate that schizophrenia is a brain disorder.
- Differentiate among the positive and negative symptoms of schizophrenia in terms of treatment and effect on quality of life.
- Discuss how to deal with common reactions the nurse may experience while working with a patient with schizophrenia.
- Develop teaching plans for patients taking first-generation (e.g., haloperidol [Haldol]) and second- generation (e.g., risperidone [Risperdal]) antipsychotic drugs.
- Compare and contrast the first-generation and second-generation antipsychotics.
- Create a nursing care plan incorporating evidence-based interventions for symptoms of psychosis, including hallucinations, delusions, paranoia, cognitive disorganization, anosognosia, and impaired self-care.
- Role-play intervening with a patient who is hallucinating, delusional, and exhibiting disorganized thinking.

CHAPTER 31: SERIOUS MENTAL ILLNESS

- Discuss the effects of serious mental illness on daily functioning, interpersonal relationships, and quality of life.
- Describe three common problems associated with serious mental illness.
- Discuss five evidence-based practices for the care of the person with serious mental illness.
- Explain the role of the nurse in the care of the person with serious mental illness.
- Develop a nursing care plan for a person with serious mental illness.
- Discuss the causes of treatment nonadherence, and plan interventions to promote treatment adherence.

CHAPTER 26: CRISIS AND DISASTER

- Differentiate among three types of crisis. Provide an example of each from the reader’s own experience.
- Delineate six aspects of crisis that have relevance for nurses involved in crisis intervention.
- Develop a handout describing areas to assess during crisis. Include at least two sample questions for each area.
- Discuss four common problems in the nurse-patient relationship that are frequently encountered by beginning nurses when starting crisis intervention. Discuss two interventions for each problem.
- Compare and contrast the differences among primary, secondary, and tertiary intervention, including appropriate intervention strategies.

- Explain to a classmate four potential crisis situations that patients may experience in hospital settings.
- Provide concrete examples of interventions to minimize the situations.
- List at least five resources in the community that could be used as referrals for a patient in crisis.
- Recognize disaster occurrences and management as global concerns.
- Differentiate among disaster types.
- Describe three reasons why professional nurses should have disaster preparedness training.

CHAPTER 25: SUICIDE AND NON-SUICIDAL SELF-INJURY

- Describe the profile of suicide in the United States, noting psychosocial and cultural factors that affect risk.
- Identify three common precipitating events for suicide attempts.
- Describe risk factors for suicide, including coexisting psychiatric disorders.
- Name the most frequent coexisting psychiatric disorders.
- Use the SAD PERSONS scale to assess suicide risk.
- Describe three expected reactions a nurse may have when beginning work with suicidal patients.
- Give examples of primary, secondary, and tertiary interventions.
- Describe basic-level interventions that take place in the hospital or community.
- Identify key elements of suicide precautions and environmental safety factors in the hospital.
- Describe the problem of non-suicidal self-injury.

CHAPTER 10: UNDERSTANDING AND MANAGING RESPONSES TO STRESS

- Recognize the short- and long-term physiological consequences of stress.
- Compare and contrast Cannon's fight-or-flight theory, Selye's general adaptation syndrome, and psychoneuroimmunological models of stress.
- Describe how responses to stress are mediated through perception, personality, social support, culture, and spirituality.
- Assess stress level using the Recent Life Changes Questionnaire.
- Identify and describe holistic approaches to stress management.
- Teach a classmate or patient a behavioral technique to help lower stress and anxiety.
- Explain how cognitive techniques can help increase a person's tolerance for stressful events.

CHAPTER 15: ANXIETY AND OBSESSIVE-COMPULSIVE DISRODERS

- Compare and contrast the four levels of anxiety in relation to perceptual field, ability to problem solve, and physical and other defining characteristics.
- Identify defense mechanisms and consider one adaptive and one maladaptive (if any) use of each.
- Describe clinical manifestations of each anxiety and obsessive-compulsive disorder.
- Identify genetic, biological, psychological, and cultural factors that may contribute to anxiety and obsessive-compulsive disorders.
- Formulate four appropriate nursing diagnoses that can be used in treating a person with anxiety and obsessive-compulsive disorders.
- Describe feelings that may be experienced by nurses caring for patients with anxiety and obsessive-compulsive disorders.
- Propose realistic outcome criteria for a patient with (a) generalized anxiety disorder, (b) panic disorder, and (c) obsessive-compulsive disorder.
- Describe five basic nursing interventions used for patients with anxiety and obsessive-compulsive disorders.

- Discuss four classes of medications appropriate for anxiety and obsessive-compulsive disorders.
- Describe advanced-practice and basic-level interventions for anxiety and obsessive-compulsive disorders.

CHAPTER 2: RELEVANT THEORIES AND THERAPIES FOR NURSING PRACTICE

- Evaluate the premises behind the various therapeutic models discussed in this chapter.
- Describe the evolution of therapies for psychiatric disorders.
- Identify ways each theorist contributes to the nurse's ability to assess a patient's behaviors.
- Provide responses to the following based on clinical experience:
    - An example of how a patient's irrational beliefs influenced behavior;
    - An example of countertransference in your relationship with a patient;
    - An example of the use of behavior modification with a patient.
- Identify Peplau's framework for the nurse-patient relationship.
- Choose the therapeutic model that would be most useful for a particular patient or patient problem.

CHAPTER 5: CULTURAL IMPLICATIONS FOR PSYCHIATRIC MENTAL HEALTH NURSING

- Explain the importance of culturally relevant care in psychiatric mental health nursing practice.
- Discuss potential problems in applying Western psychological theory to patients of other cultures.
- Compare and contrast Western nursing beliefs, values, and practices with the beliefs, values, and practices of patients from diverse cultures.
- Perform culturally sensitive assessments that include risk factors and barriers to quality mental health care that culturally diverse patients frequently encounter.
- Develop culturally appropriate nursing care plans for patients of diverse cultures.

CHAPTER 22: SUBSTANCE RELATED/ADDICITVE DISORDERS

- Describe the terms substance use, intoxication, tolerance, and withdrawal.
- Define addiction as a chronic disease.
- Describe the neurobiological process that occurs in the brain and neurotransmitters involved with substance use.
- Identify potential co-occurring medical and psychological disorders.
- Name the common classification of substances used.
- Identify patterns of substance use.
- Apply the nursing process to caring for an individual who is using substances.

CHAPTER 27; ANGER, AGGRSSION, AND VIOLENCE

- Compare and contrast three theories that explore the determinants for anger, aggression, and violence.
- Compare and contrast interventions for a patient with healthy coping skills with those for a patient with marginal coping behaviors.
- Apply at least four principles of de-escalation with a moderately angry patient.
- Describe two criteria for the use of seclusion or restraint over verbal intervention.
- Discuss two types of assessment and their value in the nursing process.
- Role-play with classmates by using understandable but unhelpful responses to anger and aggression in patients; discuss how these responses can affect nursing interventions.

CHAPTER 14: DEPRESSIVE DISORDERS

- Compare and contrast major depressive disorder and dysthymic disorder.
- Explore disruptive mood dysregulation disorder and its impact on children.
- Describe the symptoms of premenstrual dysphoric disorder.
- Discuss the complex origins of depressive disorders.
- Assess behaviors in a patient with depression in regard to each of the following areas: (a) affect, (b) thought processes, (c) feelings, (d) physical behavior, and (e) communication.
- Formulate five nursing diagnoses for a patient with depression and include outcome criteria.
- Name unrealistic expectations a nurse may have while working with a patient with depression and compare them to your own personal thoughts.
- Role-play six principles of communication useful in working with patients with depression.
- Evaluate the advantages of the selective serotonin reuptake inhibitors (SSRIs) over the tricyclic antidepressants (TCAs).
- Explain the unique attributes of two of the atypical antidepressants for use in specific circumstances.
- Write a medication teaching plan for a patient taking a tricyclic antidepressant, including (a) adverse effects, (b) toxic reactions, and (c) other drugs that can trigger an adverse reaction.
- Write a medication teaching plan for a patient taking a monoamine oxidase inhibitor, including foods and drugs that are contraindicated.
- Write a nursing care plan incorporating the recovery model of mental health.

CHAPTER 13: BIPOLAR AND RELATED DISORDERS

- Assess a patient with mania for (a) mood, (b) behavior, and (c) thought processes, and be alert to possible dysfunction.
- Formulate three nursing diagnoses appropriate for a patient with mania and include supporting data.
- Explain the rationales behind five methods of communication that may be used with a patient experiencing mania.
- Teach a classmate at least four expected side effects of lithium therapy.
- Distinguish between signs of early and severe lithium toxicity.
- Write a medication care plan specifying five areas of patient teaching regarding lithium carbonate.
- Compare and contrast basic clinical conditions that may respond better to anticonvulsant therapy with those that may respond better to lithium therapy.
- Evaluate specific indications for the use of seclusion for a patient experiencing mania.
- Defend the use of electroconvulsive therapy for a patient in specific situations.
- Review at least three of the items presented in the patient and family teaching plan (see Box 13-2) with a patient with bipolar disorder.
- Distinguish the focus of treatment for a person in the acute manic phase from the focus of treatment for a person in the continuation or maintenance phase.

CHAPTER 19: SLEEP-WAKE DIORDERS

- Discuss the impact of inadequate sleep on overall health and well-being.
- Describe the social and economic impact of sleep disturbance and chronic sleep deprivation.
- Recognize the risks to personal and community safety imposed by sleep disturbance and chronic sleep deprivation.
- Describe normal sleep physiology and explain the variations in normal sleep.
- Identify the major categories and medical diagnoses for sleep disorders.
- Identify the predisposing, precipitating, and perpetuating factors for patients with insomnia.
- Apply the nursing process in caring for individuals with sleep disorders.

- Describe the use of two assessment tools in the evaluation of patients experiencing sleep disturbance.
- Formulate three nursing diagnoses for patients experiencing a sleep disturbance.
- Develop a teaching plan for a patient with insomnia disorder, incorporating principles of sleep restriction, stimulus control, and cognitive-behavioral therapy.
- Develop a care plan for the patient experiencing sleep disturbance, incorporating basic sleep hygiene principles.

CHAPTER 16: TRAUMA, STRESOR-RELATED, AND DISSOCIATIVE DISORDERS

- Describe clinical manifestations of each disorder covered under the general umbrella of trauma-related and dissociative disorders.
- Describe the symptoms, epidemiology, comorbidity, and etiology of trauma-related disorders in children.
- Discuss at least five of the neurobiological changes that occur with trauma.
- Apply the nursing process to the care of children who are experiencing trauma-related disorders.
- Differentiate between the symptoms of posttraumatic stress, acute stress, and adjustment disorders in adults.
- Describe the symptoms, epidemiology, comorbidity, and etiology of trauma-related disorders in adults.
- Discuss how to deal with common reactions the nurse may experience while working with a patient who has suffered trauma.
- Apply the nursing process to trauma-related disorders in adults.
- Develop a teaching plan for a patient who suffers from posttraumatic stress disorder.
- Identify dissociative disorders, including depersonalization/derealization disorder, dissociative amnesia, and dissociative identity disorder.
- Create a nursing care plan incorporating evidence-based interventions for symptoms of dissociation, including flashbacks, amnesia, and impaired self-care.
- Role-play intervening with a patient who is experiencing a flashback.

CHAPTER 17: SOMATIC SYMPTOM DISORDERS

- Describe clinical manifestations of each disorder covered under the general umbrella of trauma related and dissociative disorders.
- Describe the symptoms, epidemiology, comorbidity, and etiology of trauma-related disorders in children.
- Discuss at least five of the neurobiological changes that occur with trauma.
- Apply the nursing process to the care of children who are experiencing trauma-related disorders.
- Differentiate between the symptoms of posttraumatic stress, acute stress, and adjustment disorders in adults.
- Describe the symptoms, epidemiology, comorbidity, and etiology of trauma-related disorders in adults.
- Discuss how to deal with common reactions the nurse may experience while working with a patient who has suffered trauma.
- Apply the nursing process to trauma-related disorders in adults.
- Develop a teaching plan for a patient who suffers from posttraumatic stress disorder.
- Identify dissociative disorders, including depersonalization/derealization disorder, dissociative amnesia, and dissociative identity disorder
- Create a nursing care plan incorporating evidence-based interventions for symptoms of dissociation, including flashbacks, amnesia, and impaired self-care.
- Role-play intervening with a patient who is experiencing a flashback.

CHAPTER 28, CHILD, OLDER ADULT, AND INTIMATE PARTNER ABUSE

- Identify the nature and scope of family violence and factors contributing to its occurrence.
- Identify three indicators of (a) physical abuse, (b) sexual abuse, (c) neglect, and (d) emotional abuse.
- Describe risk factors for both victimization and perpetration of family violence.
- Describe four areas to assess when interviewing a person who has experienced abuse.
- Identify two common emotional responses the nurse might experience when faced with a person subjected to abuse.
- Formulate four nursing diagnoses for the survivor of abuse, and list supporting data from the assessment.
- Write out a safety plan for a victim of intimate partner abuse.
- Discuss the legal and ethical responsibilities of nurses when working with families experiencing violence.
- Compare and contrast primary, secondary, and tertiary levels of intervention, giving two examples of intervention for each level.
- Describe at least three possible referrals for an abusive family, including the telephone numbers of appropriate agencies in the community.
- Discuss three psychotherapeutic modalities useful in working with abusive families.

CHAPTER 29: SEXUAL ASSAULT

- Define sexual assault, sexual violence, rape, and attempted rape.
- Discuss the implications for the underreporting of sexual assault.
- Describe the profile of the victim and the perpetrator of sexual assault.
- Distinguish between the acute and long-term phases of the rape-trauma syndrome, and identify some common reactions during each phase.
- Identify five areas to assess when working with a person who has been sexually assaulted.
- Analyze personal thoughts and feelings regarding rape and its impact on survivors.
- Formulate two long-term outcomes and two short-term goals for the nursing diagnosis post-trauma syndrome.
- Identify six overall guidelines for nursing interventions related to sexual assault.
- Describe the role of the sexual assault nurse examiner to a colleague.
- Discuss the long-term psychological effects of sexual assault that might lead a patient to seek psychological care.
- Identify three outcome criteria that would signify successful interventions for a person who has suffered a sexual assault.

CHAPTER 32: FORENSIC PSYCHIATRIC NURSING

- Define forensic nursing, forensic psychiatric nursing, and correctional nursing.
- Describe the educational preparation required for the forensic nurse generalist and the advanced practice forensic nurse.
- Identify the functions of forensic nurses.
- Discuss the specialized roles in forensic nursing.
- Identify three roles of psychiatric nurses in the specialty of forensic nursing.
- Discuss the roles of the forensic psychiatric nurse within the legal system.
- Compare and contrast the roles of forensic psychiatric nurses and corrections nurses.

CHAPTER 23: NEUROCOGNITIVE DISORDERS

- Compare and contrast the clinical picture of delirium with that of dementia.
- Discuss three critical needs of a person with delirium, stated in terms of nursing diagnoses.

- Identify three outcomes for patients with delirium.
- Summarize the essential nursing interventions for a patient with delirium.
- Recognize the signs and symptoms occurring in the stages of Alzheimer's disease.
- Give an example of the following symptoms assessed during the progression of Alzheimer's disease: (a) amnesia, (b) apraxia, (c) agnosia, and (d) aphasia.
- Formulate three nursing diagnoses suitable for a patient with Alzheimer's disease and define two outcomes for each.
- Formulate a teaching plan for a caregiver of a patient with Alzheimer's disease, including interventions for (a) communication, (b) health maintenance, and (c) safe environment.
- Compose a list of appropriate referrals in the community—including a support group, hotline for information, and respite services—for persons with dementia and their caregivers.

CHAPTER 30: PSYCHOSOCIAL NEEDS OF THE OLDER ADULT

- Describe mental health disorders that may occur in older adults.
- Discuss the importance of pain assessment, and identify three tools used to assess pain in older adults.
- Explain the importance of a comprehensive geriatric assessment.
- Recognize the significance of health care costs for older adults.
- Discuss facts and myths about aging.
- Analyze how ageism may affect attitudes and willingness to care for older adults.
- Identify the requirements for the use of physical and chemical restraints.
- Identify legislation and legal documents that protect the rights of older patients, and describe their impact on nursing care.
- Describe the role of the nurse in various geriatric care settings.

CHAPTER 24: PERSONALITY DISORDERS

- Identify characteristics of each of the ten personality disorders.
- Analyze the interaction of biological determinants and psychosocial stress factors in the etiology of personality disorder.
- Describe the emotional and clinical needs of nurses and other staff when working with patients who meet criteria for personality disorders.
- Formulate a nursing diagnosis for each of the personality disorders.
- Discuss two nursing outcomes for patients with borderline personality disorder.
- Plan basic interventions for a patient with impulsive, aggressive, or manipulative behaviors.
- Identify the role of the advanced practice nurse when working with patients with personality disorders.

CHAPTER 11: CHILDHOOD AND NEURODEVELOPMENTAL DISORSERS

- Identify the significance of psychiatric disorders in children and adolescents.
- Explore factors and influences contributing to neurodevelopmental disorders.
- Identify characteristics of mental health and factors that promote resilience in children and adolescents.
- Describe the specialty area of psychiatric mental health nursing.
- Discuss the holistic assessment of a child or adolescent.
- Compare and contrast at least six treatment modalities for children and adolescents with neurodevelopmental disorders.
- Describe clinical features and behaviors of at least three child and adolescent psychiatric disorders.

- Formulate one nursing diagnosis, stating patient outcomes and interventions, for patients with intellectual development disorder, autism spectrum disorder, and attention deficit hyperactivity disorder.

CHAPTER 21: IMPULSE CONTROL DISORDERS

- Describe impulse control disorders.
- Differentiate characteristics of oppositional defiant disorder, intermittent explosive disorder, and conduct disorder.
- Discuss etiology and comorbidities of the impulse control disorders.
- Compare your feelings about working with someone with an impulse control disorder with someone in your class.
- Formulate three nursing diagnoses for impulse control disorders, identifying patient outcomes and interventions for each.
- Identify evidence-based treatments for oppositional defiant, intermittent explosive, and conduct disorders.

CHAPTER 34: FAMILY INTERVENTIONS

- Discuss the characteristics of a healthy family.
- Differentiate between functional and dysfunctional family patterns of behavior as they relate to five universal family functions: management, boundaries, communication, emotional support, and socialization.
- Compare and contrast insight-oriented family therapy and behavioral family therapy.
- Identify five family theorists and their contributions to the family therapy movement.
- Analyze the meaning and value of the family's sociocultural context when assessing and planning intervention strategies.
- Construct a genogram using a three-generation approach.
- Formulate seven outcome criteria that a therapist and family might develop together.
- Identify strategies for family intervention.
- Distinguish between the nursing intervention strategies of a basic level nurse and those of an advanced practice nurse with regard to counseling, psychotherapy, and psychobiological issues.
- Explain the importance of the nurse's role in psychoeducational family therapy.
- Recognize the significance of self-assessment to successful work with families.

CHAPTER 18: FEEDING, EATING, AND ELIMINATION DISORDERS

- Compare and contrast the signs and symptoms (clinical picture) of anorexia nervosa and bulimia nervosa and binge-eating disorder.
- Describe the biological, psychological, and environmental factors associated with eating disorders.
- Apply the nursing process to patients with anorexia nervosa, patients with bulimia nervosa, and patients with binge-eating disorder.
- Identify three life-threatening conditions, stated in terms of nursing diagnoses, for a patient with an eating disorder.
- Identify two realistic outcome criteria for a patient with anorexia nervosa, a patient with bulimia nervosa, and a patient with binge-eating disorder.
- Describe three feeding disorders usually seen in childhood including pica, rumination disorder, and avoidant/restrictive food intake disorders.
- Identify the elimination disorders, enuresis and encopresis.

CHAPTER 35: INTEGRATIVE CARE

- Define the terms integrative care and complementary and alternative medicine.
- Identify trends in the use of nonconventional health treatments and practices.
- Explore the category of alternative medical systems, along the domains of integrative care: natural products, mind and body approaches, manipulative and body-based practices, and other therapies.
- Discuss the techniques used in major complementary therapies and potential applications to psychiatric mental health nursing practice.
- Discuss how to educate the public in the safe use of integrative modalities and avoidance of false claims and fraud related to the use of alternative and complementary therapies.
- Explore information resources available through literature and online sources.