**The University of Texas at Arlington**

**College of Nursing**

**N5442 Primary Care Pediatric Nursing**

**Fall 2014**

**Instructors:**

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| **Sharolyn Dihigo DNP, RN, CPNP-PC*****Clinical Assistant Professor***Office Number: Pickard Hall # 625Office Telephone Number: (817) 272-4087Email Address: sdihigo@uta.edu Faculty Profile: <https://www.uta.edu/mentis/profile/?392>  |
| **Instructor**: Nancy WyrickOffice Number**:** Pickard Hall # 626 Office Telephone Number**:** (817) 272-2776Email Address**:** wyrick@uta.eduFaculty Profile: <https://www.uta.edu/mentis/profile/?367>  |
| **Instructor**: Linda GrandeOffice Number: Pickard hall # 626Office Telephone Number: (817) 272-2776Email Address: grande@uta.edu  |
| **Instructor**: Office Number: Office Telephone Number: Email Address:  |

Office Hours: By appointment

**Section Information:**

NURS 5442 Sections 001-004

**Time and Place of Class Meetings:**

1 Thursday/ Saturday 9am- 5pm, Pickard Hall Rm. 223

**Description of Course Content:**

Focus is on integration of acquired theoretical concepts and empirical knowledge in the assessment, diagnosis, and management of multiple common acute and stable chronic health problems in children birth to 21 years.

**Other Requirements:**

2 Lecture Hours, 6 Lab hours. Prerequisite: NURS 5306, 5313 5314 or concurrent enrollment; or Certificate Program standing

Additional Course Days: 9/4/2014 Interprofessional Education Day and 11/14/2014 Child Abuse Seminar

**Student Learning Outcomes:**

Upon completion of the course, the student will be able to:

1. Assess, diagnose, and manage children birth to 21 years experiencing common acute and stable chronic health problems using evidence-based knowledge.
2. Provide appropriate health promotion and disease prevention services related to relevant individual patient characteristics (e.g. age, culture, gender, risk, & health status).
3. Collaborate with health professionals to coordinate services and allocate resources to improve health outcomes along the continuum of care for children within their family system.
4. Provide health education and counseling with special emphasis on children birth to 21 years with special needs within their family system.
5. Implement the Pediatric Nurse Practitioner (PNP) role in the execution of cultural/spiritual sensitive care of children birth to 21 years and their families.
6. Examine PNP practice outcomes using research methodology.

**Required Textbooks and Other Course Materials:**

1. Kliegman, R. Stanton, B., Geme, J., Schor, N., Behrman, R. (2011). *Nelson Textbook of Pediatrics,* (19th ed.). St. Louis, MO: Saunders **ISBN: 9781437707557**
2. Burns, C., Dunn, A., Brady, M., Barber, N., Blosser, C., (2012). *Pediatric Primary Care*. (5th ed.). Philadelphia, PA: Elsevier Saunders. **ISBN**: **9780323080248**
3. Duncan, P., Hagan, J. (2007). *Bright Futures Pocket Guide.* (3rd ed.)American Academy of Pediatrics**. ISBN: 9781581102246**
4. Richardson, B. (2011). *Pediatric Primary Care.* (2nd ed.). Jones & Bartlett Learning. **ISBN: 9781449600433**

**Recommended:**

1. Carey, W., Crocker, A., Elias, E., Feldman, H., Coleman, W. (2009) *Developmental-Behavioral Pediatric.* (4th ed.).St. Louis: W.B. Saunders **ISBN: 9781416033707**
2. St. Pierre, S. Dunn, E. Stephens, G., Pulcini, J., Boynton, R. (2009). *Manual of Ambulatory Pediatrics (*6th ed.). Philadelphia, PA: Lippincott Williams & Wilkins **ISBN:** **9780781788748**
3. Brazelton, T., Sparrow, J. (2006). *Touchpoints: Birth to Three (*2nd ed.). Da Capo Press**. ISBN**: **9780738210490**
4. Brazelton, T., Sparrow, J. (2002). *Touchpoints: 3-6.* Da Capo Press. **ISBN**: **9780738206783**
5. Graham, M., Uphold, C. (2004). *Clinical Guidelines in Child Health. (3rd ed.).* Gainesville: Barmarrae Books. **ISBN**: **9780964615175**

**Descriptions of major assignments and examinations: Due dates to follow on course schedule:**

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| **Evaluation Methods**: |  |
| Exam 1 | 15% |
| Final Exam | 15% |
| CDM 1 | 20% |
| CDM 2 | 20% |
| Community Project/Participation | 10% |
| Classroom Participation & Discussion Boards | 10% |
| Project Poster Presentation | Pass/Fail |
| Clinical Practicum | 10% |
| ***TOTAL***  | **100%** |

|  |  |
| --- | --- |
| **Clinical Hours:** |  |
| Elogs | Pass/Fail |
| Office Clinical Practice Hours | 90 Hours |
| ***TOTAL*** | **90 Hours** |

**Attendance Policy:**

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

**Grading Policy:**

Students are expected to keep track of their performance throughout the semester and seek guidance from available sources (including the instructor) if their performance drops below satisfactory levels.

Course Grading Scale

A = 92 to 100

B = 83 to 91

C = 74 to 82

D = 68 to 73 – cannot progress

F = below 68 – cannot progress

**Make-up Exams:**

Please contact your faculty for approval. Upon approval from your faculty, you need to schedule an appointment with Sonya Darr at sdarr@uta.edu. Please allow a 24 hour advance notice when scheduling.

**Test Reviews:**

Test reviews may be scheduled up to two weeks after grades have been posted to blackboard for the current exam. Due to time constraints, you will only be allowed 30 minutes to review your test. Unfortunately, we will not be able to allow multiple test reviews. Contact Sonya Darr to schedule at sdarr@uta.edu. Please allow a 24 hour advance notice when scheduling.

**Expectations of Out-of-Class Study**

Beyond the time required to attend each class meeting, students enrolled in this course should expect to spend at least an additional 6-9 hours per week on their own time in course-related activities, including reading required materials, completing assignments, preparing for exams, etc.

**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 University Catalog <http://catalog.uta.edu/academicregulations/grades/#graduatetext>.

**Drop Policy:** Graduate students who wish to change a schedule by either dropping or adding a course must first consult with their Graduate Advisor. Regulations pertaining to adding or dropping courses are described below. Adds and drops may be made through late registration either on the Web at MyMav or in person through the student’s academic department. 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. Contact the Office of Financial Aid and Scholarships at <http://wweb.uta.edu/aao/fao/> . The last day to drop a course is listed in the Academic Calendar available at <http://www.uta.edu/uta/acadcal.php?session=20146>

1. A student may not add a course after the end of late registration.
2. A student dropping a graduate course after the Census Date but on or before the end of the 10th week of class may with the agreement of the instructor, receive a grade of W but only if passing the course with a C or better average. A grade of W will not be given if the student does not have at least a C average. In such instances, the student will receive a grade of F if he or she withdraws from the class. Students dropping a course must:

(1) Contact course faculty to obtain permission to drop the course with a grade of “W”.

(2) Contact your graduate advisor to obtain the form and further instructions.

**Census Day: September 8, 2014**

**Last day to drop or withdraw: October 29, 2014**

**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](http://www.uta.edu/disability) or by calling the Office for Students with Disabilities at (817) 272-3364.

**Title IX:** The University of Texas at Arlington is committed to upholding U.S. Federal Law “Title IX” such that no member of the UT Arlington community shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity. For more information, visit [www.uta.edu/titleIX](http://www.uta.edu/titleIX).

**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 the 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."

As a licensed registered nurse, graduate students are expected to demonstrate professional conduct as set forth in the Texas Board of Nursing rule **§215.8. in the event that a graduate student holding an RN license is found to have engaged in academic dishonesty, the college may report the nurse to the Texas BON using rule §215.8 as a guide.**

**Plagiarism:**

Copying another student’s paper or any portion of it is plagiarism. Copying a portion of published material (e.g., books or journals) without adequately documenting the source is plagiarism. Consistent with APA format, 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, according to APA format. 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 expected to review the plagiarism module from the UT Arlington Central Library via <http://library.uta.edu/plagiarism/index.html>

**Student Support Services**:

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](http://www.uta.edu/resources).

**Electronic Communication:**  UT Arlington has adopted MavMail as its official means to communicate with students about important deadlines and events, as well as to transact university-related business regarding financial aid, tuition, grades, graduation, etc. **All students are assigned a MavMail account and are responsible for checking the inbox regularly.** There is no additional charge to students for using this account, which remains active even after graduation. Information about activating and using MavMail is available at <http://www.uta.edu/oit/cs/email/mavmail.php>.

If you are unable to resolve your issue 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 tests 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 exit. 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 individuals with disabilities.

**Librarian to Contact:**

**Peace Williamson**, *Nursing Librarian*

Phone: (817) 272-7433

E-mail: peace@uta.edu

Research Information on Nursing:

[**http://libguides.uta.edu/nursing**](http://libguides.uta.edu/nursing)

Library Home Page <http://www.uta.edu/library>

Subject Guides <http://libguides.uta.edu>

Subject Librarians <http://www.uta.edu/library/help/subject-librarians.php>

Database List <http://www.uta.edu/library/databases/index.php>

Course Reserves <http://pulse.uta.edu/vwebv/enterCourseReserve.do>

Library Catalog <http://discover.uta.edu/>

E-Journals <http://liblink.uta.edu/UTAlink/az>

Library Tutorials <http://www.uta.edu/library/help/tutorials.php>

Connecting from Off- Campus <http://libguides.uta.edu/offcampus>

Ask A Librarian [http://ask.uta.edu](http://ask.uta.edu/)

The following URL houses a page where we have gathered many commonly used resources needed by students in online courses: <http://www.uta.edu/library/services/distance.php>

**UTA College of Nursing additional information:**

**Clinical Evaluations:**

Students must pass both the didactic and clinical portions of a clinical course in order to pass the course. In order to pass the clinical portion, the student must receive a passing grade (minimum of 83%) on the faculty evaluation of the student’s clinical performance (Nurse Practitioner Clinical Evaluation). Students who fail a faculty evaluation have a one-time option to retake the practicum. A second faculty member will be present during the clinical performance retake. If the student passes the clinical performance retake (minimum of 83%), the **maximum** grade the student can receive for the exam for purposes of grade calculation is 83%. If the student fails the retake, the student will receive a grade of “F” for the course.

**Clinical Clearance:**

All students must have current clinical clearance to legally perform clinical hours each semester. If your clinical clearance is not current, you will be unable to do clinical hours that are required for this course and this would result in course failure.

**Student Requirement For Preceptor Agreements/Packets:**

1. Preceptor Agreements must be **signed and dated** by the student and the preceptor the first day the student attends clinical (may be signed on that day), scanned and emailed to npclinicalclearance@uta.edu.
2. **Student** is responsible to ensure that all of his/her preceptor agreements are signed and complete including their student 1000 number and course number before beginning clinical experience and those agreements are scanned and emailed to Kim Hodges @ npclinicalclearance@uta.edu or Janyth Arbeau at arbeau@uta.edu by the third week of the semester. (For instance, if a student starts working with a particular preceptor late in the semester, he/she would contact that preceptor during the first 3 weeks of the semester.
3. If this is the first time a preceptor is precepting a graduate nursing student for The University of Texas at Arlington, please have him/her complete the Preceptor Biographical Data Sheet. If he/she is a returning preceptor have them fill out the phone number and email address section of the preceptor agreement.
4. The signed/completed preceptor agreement is part of the clinical clearance process. Failure to submit in a timely fashion will result in the inability to access the E-log system.
5. All communications to the NP Clinical Coordinator should be made to the following email address: npclinicalclearance@uta.edu. This includes scanned copies of preceptor agreements, preceptor evaluations of the student, and student evaluations of the preceptor.

**Clinical E-Logs:**

Students are required to enter all patient encounters into the E-Log system.  E-Log is both a student learning opportunity and an evaluation method for clinical courses.  Patient encounters include patients the student assesses, diagnoses, and manages as part of their clinical coursework.  Individual clinical courses may have additional guidelines/requirements related to their specific course and will be noted in the course syllabus (e.g. types of encounter required, number of patients required during course).

Students can access their Elogs by entering their own unique Elogs username and password which will be accessible their first clinical semester. <http://totaldot.com/> The username consists of the student’s first, middle, and last initials (in CAPS) with the last four digits of their 1000#. Example: Abigail B. Cooper, 1000991234 is ABC1234. If the student does not have a middle initial, then only two initials will be used. The student’s password is simply their last name. Example: Cooper (note first letter is a capital letter).

The student’s ELog data provides a description of the patients managed during the student’s clinical experience, including the number of patients, diagnoses of patients, and the type of interventions initiated.  As a result, E-Log data are an essential requirement of the student’s clinical experience and are used to evaluate student clinical performance.  The data are used to meet course requirements and to evaluate student clinical performance.  Upon completion of the Program, students will receive an executive summary of their E-Log entries for their professional portfolio.

**Students are expected to enter information accurately so that (if needed) faculty may verify/validate the information provided.  Falsifying and/or misrepresenting patient encounter data is considered academic dishonesty.**

**Status of RN Licensure:**

All graduate nursing students must have an unencumbered license as designated by the Texas Board of Nursing (BON) to participate in graduate clinical nursing courses. It is also imperative that any student whose license becomes encumbered by the BON must immediately notify Dr. Mary Schira, Associate Dean, Department of Advanced Practice Nursing. The complete policy about encumbered licenses is available online at: [www.bon.state.tx.us](http://www.bon.state.tx.us)

**MSN Graduate Student Dress Code:**

The University of Texas at Arlington College of Nursing expects students to reflect professionalism and maintain high standards of appearance and grooming in the clinical setting. **Clinical faculty has final judgment on the appropriateness of student attire and corrective action for dress code infractions. Students not complying with this policy will not be allowed to participate in clinical.**

**Please View the College of Nursing Student Dress Code on the nursing website:** <http://www.uta.edu/nursing/msn/msn-students> **.**

**UTA Student Identification:**

**MSN Students MUST be clearly identified as UTA Graduate Students and wear a UTA College of Nursing ID in the clinical environment.**

**Unsafe Clinical Behaviors:**

Students deemed unsafe or incompetent will fail the course and receive a course grade of “F”. **Any of the following behaviors constitute a clinical failure**:

1. Fails to follow standards of professional practice as detailed by the Texas Nursing Practice Act \* (available at [www.bon.state.tx.us](http://www.bon.state.tx.us))

2. Unable to accept and/or act on constructive feedback.

3. Needs continuous, specific, and detailed supervision for the expected course performance.

4. Unable to implement advanced clinical behaviors required by the course.

5. Fails to complete required clinical assignments.

6. Falsifies clinical hours.

7. Violates student confidentiality agreement.

\*Students should also be aware that violation of the Nursing Practice Act is a “reportable offense” to the Texas Board of Nurse Examiners.

**Blood and Body Fluids Exposure:**

A Health Verification form was signed by all MSN students at start of the program documenting personal health insurance coverage. All MSN students have mandatory health insurance and will need to manage exposure to blood and fluids. Current CDC guidelines can be found at:<http://www.cdc.gov/>

**Confidentiality Agreement:**

You signed a Confidentiality Form in orientation and were provided a copy of the form. Please take your copy of this Confidentiality Form with you to your clinical sites. Please do not sign other agency confidentiality forms. Contact your faculty if the agency requires you to sign their confidentiality form.

**Graduate Student Handbook:**

Students are responsible for knowing and complying with all policies and information contained in the Graduate Student handbook online at: <http://www.uta.edu/nursing/msn/msn-students>

**Student Code of Ethics:**

The University of Texas at Arlington College of nursing supports the Student Code of Ethics Policy. Students are responsible for knowing and complying with the Code. The Code can be found in the student handbook online: <http://www.uta.edu/nursing/msn/msn-students>

**No Gift Policy:**

In accordance with Regent Rules and Regulations and the UTA Standards of Conduct, the College of Nursing has a “no gift” policy. A donation to one of the UTA College of Nursing Scholarship Funds, found at the following link: is <http://www.uta.edu/nursing/student-resources/scholarship> would be an appropriate way to recognize a faculty member’s contribution to your learning.  For information regarding Scholarship Funds, please contact the Dean’s office.

**Online Conduct:**

The discussion board should be viewed as a public and professional forum for course-related discussions. Students are free to discuss academic matters and consult one another regarding academic resources. The tone of postings should be professional in nature.

It is not appropriate to post statements of a personal or political nature, or statements criticizing classmates or faculty. Inappropriate statements/language will be deleted by the course faculty and may result in denied access to the Discussion boards. Refer to UTACON Student Handbook for more information.

***For this course Blackboard communication tools, discussion boards, and UTA MAV email will be used extensively and should be checked often.***

**Writing Center:** The Writing Center provides the workshops below to help guide graduate students through the demands of writing at the graduate level. In order to sign up for workshops, students must register with the Writing Center at http://uta.mywconline.com/. Workshops are listed on the regular appointment schedule. If you experience any difficulty signing up for any of these, please call (817)272-2601 and one of our staff will be happy to assist.

All Workshops hosted by the Writing Center are held in 411 Central Library and are offered at 6 p.m. on Mondays, Tuesdays, Wednesdays or Thursdays. These are not recorded and are not available online.

**Departmental Office/Support Staff**

**Department of Advanced Practice Nursing**

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| --- | --- |
| **Mary Schira,** PhD, RN, ACNP-BCAssociate Dean and Chair; Graduate AdvisorEmail: schira@uta.edu  | **Rose Olivier**, Administrative Assistant IOffice # 605-Pickard Hall, (817) 272-9517Email: olivier@uta.edu  |
| **Sheri Decker**, Assistant Graduate AdvisorStudents: A-JOffice # 611-Pickard Hall, (817) 272-0829Email: sdecker@uta.edu  | **Janyth Arbeau,** Clinical CoordinatorOffice # 610- Pickard Hall, (817) 272-0788Email: Arbeau@uta.edu or npclinicalclearance@uta.edu  |
| **Luena Wilson**, Graduate Advisor IStudents: K-ZOffice # 613-Pickard Hall, (817) 272- 4798Email: lvwilson@uta.edu  | **Kimberly Hodges,** Support Specialist IIOffice #612 Pickard Hall, (817) 272-9373E-mail: khodges@uta.edu or npclinicalclearance@uta.edu |
| **Sonya Darr**, Support Specialist IOffice # 609-Pickard Hall, (817) 272-2043 Email: sdarr@uta.edu  | **Timara Spivey**, Admissions AssistantOffice # 606, Pickard Hall (817) 272-4796Email: tnspivey@uta.edu or npadmasst@exchange.uta.edu |

**Emergency Phone Numbers**: In case of an on-campus emergency, call the UT Arlington Police Department at 817-272-3003 (non-campus phone), 2-3003 (campus phone). You may also dial 911.

**Course Specific Information**

Required Reading Assignments

Required reading assignments will come from Nelson Textbook of Pediatrics and Burns, Brady & Dunn, Starr. Pediatric Primary Care and correspond with the scheduled lecture.

**Community Projects**

1. Choose an agency in the community to visit.
2. Discuss the purpose/mission of the agency.
3. Describe services provided.
4. How is the nurse practitioner to obtain these services for a client?
5. Where are the services performed?
6. What type of payment is assessed and how does the client pay for the services? (i.e. free vs. insurance)
7. Develop a presentation for class or discussion board. .
8. Develop a **one page handout** for everyone in class to be used as a reference.

These are the only guidelines so be creative and thorough.

Prepare a 10 to 15 minute Power Point or some other type of formal presentation.

**N5442 Primary Care Pediatric CDMs**

**TIPS FOR DEVELOPING YOUR CDM:**

1. If you have a positive complaint, it must be addressed in the physical exam, assessment, and plan.

2. It is not necessary to do a complete review of systems for an interval/episodic visit. You should do an appropriate ROS for the presenting problem, current medications (indicate why patient is taking the medication, i.e., Amoxicillin 250 mg po tid for otitis media, etc.), and status of concurrent health problems. Pertinent past medical history, family history, and social history should be addressed. Your history shouldbe focused.

3. “Rule out” diagnoses are those diagnoses that are most probable, and must be addressed in the plan (Ex: What do I need to do to rule this out?) A differential diagnosis is merely one that you are considering as you are looking at the chief complaint or taking the history. It is not addressed in the plan as it is not one of your “most likely” diagnoses.

1. All sources must be referenced according to APA format. **Check web sites (i.e. AAP, CDC, NHLBI, NIH, etc) for the latest guidelines on common diseases in order to practice evidence based primary care.**

**A Few examples are:**

<http://www.nhlbi.nih.gov/index.htm>

<http://www.aap.org/default.htm>

<http://www.cdc.gov/>

<http://www.aafp.org>

When you are giving the rationale for medication usage, please explain the drug’s category and action (i.e., third generation cephalosporin antibiotic and is used primarily for gram positive organisms), and why the patient has been prescribed the particular medication. Reference your plan using national guideline.

PLEASE use the following format when preparing your CDM. If a category is not applicable, simply put NA.

**N5442 Primary Care Pediatrics**

**CLINICAL DECISION MAKING GUIDE**

**I.** **SUBJECTIVE DATA**

A. Chief complaint

B. History of Present Illness

The History Present Illness (HPI) should include all positive historical findings regardless of where in the history the information normally would be placed. For example, the immunization history should be mentioned here for a patient suspected of having measles, even though immunizations usually are mentioned in the past history. Similarly, a family history of sickle cell anemia should be mentioned in a patient admitted for evaluation of anemia, even though it usually is discussed in the family history.

Begin the present illness with "the patient was in good health until. ..." or, if the patient has a chronic illness, with "the patient was in his usual state of health until . . ." Then use the HPI and seven variables format used in Advanced Assessment Class. The seven variables include: Timing (onset, duration, constant or intermittent), Location (on the body), Setting (when or where does this happen), Quality (describe symptom further), Quantity/Severity (Pain Scale, or how it this interfering with school and usual activities, Aggravating/Alleviating Factors (what makes it better, what makes it worse), and Associated Symptoms (other symptoms experiences).

Remember physical examinations, laboratory evaluations, assessments, and treatments that occurred before this presentation are now part of the history and should be included now, at the appropriate chronological point in the history. *Avoid giving your assessment at this point; this belongs later, in the assessment section.*

C. Current health data is obtained

* 1. Current medications
	2. Allergies
	3. Last physical examinations
	4. Immunization status
	5. LMP and type of birth control (if applicable)

D. Past Medical History

* 1. Illnesses / trauma
	2. Hospitalizations
	3. Birth History
	4. Sexual History
	5. Emotional/Psychiatric History

E. Family History

F. Personal/Social History

G. Review of Systems (appropriate to clinical scenario)

When you are doing your review of systems, the “general” category includes symptoms such as fever, malaise, fatigue, night sweats, and weight change or appetite change. It does not include any objective information such as “alert”, “oriented”, “good historian”. Please include General, HEENT, Heart, Lungs, and area of chief complaint as a minimum in pediatric patients.

**II.** **OBJECTIVE DATA**

* 1. Examination of vital signs including weight, height, and head circumference (when appropriate for infants) the exam of the appropriate systems, laboratory or diagnostic test (if results are available.) Check growth percentiles on ALL pediatric patients!!! Compare to a CDC or WHO growth chart for the patient’s age and state whether or not the patient is growing appropriately.
1. **ASSESSMENT & Pathophysiology/Rationale**
	1. Primary Diagnosis (es) – ICD 9 Codes with pathophysiology that correlates with the patient data for major diagnosis. Include references. This is not to be an “excerpt” from a medical text but must be written in your own words as to not plagiarize. Include a rationale for choosing this diagnosis or excluding other diagnoses. Also include pertinent positives.
	2. Differential Diagnosis- ICD-9 Codes (optional) with explanation of why you think this is a possible diagnosis based on subjective and/or objective data provided. This is not to be a “laundry” list of ALL diagnosis, only those that fit the data you are given
	3. Rule Out Diagnosis(es) if applicable- ICD 9 codes (optional) if appropriate with explanation of why you think this is an important diagnosis to rule out. Again, this is not a “laundry” list of all possible rule outs, only those that fit the scenario you are given.
2. **PLAN**
3. Write a plan of care for the patient described in the case. **Include a detailed, scientific evidence based rationale for each intervention of your plan referenced by a national guideline.** If you plan a new, controversial, or not widely used intervention, provide specific references and a discussion of the literature supporting the use of the intervention.
4. Discuss the cost effectiveness of your plan including any prescribed medications, therapies, change in formulas or nutrition products, labs tests, x-rays, or other testing. You may also consider the cost of the office visits; follow up visits, or hospitalizations.
5. Diagnostic studies and/or laboratory tests with rationale for each treatment in the management plan and **appropriate references**. (The plan should include how you will “rule-out” or “rule-in” your primary diagnosis.)
6. Medical therapeutics/Nursing therapeutics, prescriptions with rational for each treatment and appropriate references. Discuss any medications that may be used (support with the reference form a national guideline). Then write medications out in a prescription format such as: Amoxil 400mg/5ml Sig: 1 tsp po bid x 10 days Disp: 100ml with no refill.
7. **Additional Information**
8. Patient education as related to the diagnosis with references (this includes any teaching for parents or patients)
9. Counseling (when appropriate)
10. Health Promotion/Health Maintenance/Anticipatory Guidance (This is information to keep your patient healthy and safe. This should be information **not related to your diagnosis**. Any teaching regarding the diagnosis goes under patient education.)
11. Referral (when appropriate)
12. Consults (when appropriate)
13. Follow-up appointments
14. **References – APA format 6th Edition or most current Edition per UTA**

Include the correct hyperlink directly to your article or the front page of the national guideline. Include all references on your Reference page.

Include copies of any educational handouts given to the patient or family.

**FORMAL CLINICAL DECISION MAKING (CDM) ASSIGNMENT**

**EVALUATION GUIDE/GRADE SHEET**

Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Possible Actual**

**Points Points**

20 \_\_\_\_\_\_ A. Completed subjective and objective database, as appropriate to scenario.

* + - * + 7 variables (5 points)

-2 if not put into 7 variables

* + - * + PMH (2 points), FH (2 points), SH (1 point)
				+ ROS (3 points)
				+ Objective (5 points)

Growth percentiles (1 point out of the 5 points for objective)

BMI (1 point out of the 5 points for objective)

* + - * + Additional questions written that would be asked (not provided in scenario) (2 points)

20 \_\_\_\_\_\_ B. Data prioritized, with pertinent positives established. Assessments, rule-out diagnoses, and differential diagnoses stated appropriately with the ICD-9 or ICD-10 Code(s).

* Pertinent positives (2 points)
* Diagnosis/diagnoses – include all diagnoses (10 points)
* Rule-outs (2 points)
* Differentials (3 points)
* ICD-9 or ICD-10 codes (3 points)

20 \_\_\_\_\_\_ C. Physiological and pathological (patho) process leading to diagnosis(es) are documented and referenced. Patho must be completed on EACH main diagnosis.

* Includes judgment and references (10 points)
* Must relate to patient (10 points)

20 \_\_\_\_\_\_ D. Plan is sound, logical, cost-effective and includes both medical and nursing management and is referenced. Should put initial tests that are indicated – order these tests first and if additional tests are required, briefly discuss what might be needed at a later time or visit. Should include a section entitled Health Promotion/Health Maintenance.

* Plan (12 points)
* Cost effectiveness (4 points)
* Health Promotion/Health Maintenance (4 points)

20 \_\_\_\_\_\_ E. Rationale and **references are provided for each** **step in the management plan**. **Reference and Provide** the front page of a **National Guideline** to guide and reference your plan.

* Rationale (5 points)
* References in plan (5 points)
* National Guideline Used (10 points)
	+ -5 points if not provided but referenced

**Total Points**:\_\_\_\_\_\_\_\_\_\_\_

**COMMENTS:**

N5442 Fall 2013 – Room 223

|  |  |  |  |
| --- | --- | --- | --- |
| **Sept 4****(Thursday)IPE Day**9:00 – 5:00 | Interprofessional Education Day | Room 549Receive Grant CDM #1 | Dr. Judy LefloreDr. Mindy AndersonDr. Mary Lou BondDr. Pat ThomasDr. S. DihigoS. MooreL. Moake |
| **Prior to Class** | Obesity & PCOS & Infectious Disease |  | **Online** |
| **Sept 6 (Sat)**9:00 – 10:1510:30 – 12:0012:00 – 1:001:00: - 4:304:30 – 5:00 | Course IntroductionHypertensionCase Studies on Hypertension, & ObesityLunchInfectious Disease  Mini Case StudiesMeet with Clinical InstructorsCourse Wrap Up/Questions | DihigoWyrick | **Online content**Pediatric Athletic Injuries+Sports Participation Article on BbSpeech(additional info on Bb)The Difficult ChildDentalAdditionalReading: Infectious Diseases Chapters |
| **Sept 27** |  | Grant CDM #1Due |  |
| **Oct 3-5** |  | **Online TEST #1** |  |
| **Oct 11**9:00 to 10:3010:30 to 12:0012:00 to 1:001:00 to 5:00 | Nutrition Adol Gyn & Breast Lunch Adol Case Studies Meet with Clinical InstructorsCourse Wrap Up/Questions | WyrickSign up for Community Project Group | **Online Content**HIV Musculoskeletal InfectionsPediatric Oncology |
| **Oct 25** |  | Post Community Project Online – Discussion Board Begins |  |
| **Nov 14****4-7** | IPE DayPoster Presentations | Grant Poster Due | **University Center Carlisle Room** |
| **Nov 15**9:00 to 9:309:30 to 11:0011:00 to 12:001:00 to 5:00 | Anemia/Thal ReviewAnemia Case StudiesLunch**Smart Hospital & Debriefing** | Boger | Pedi EndocrinologySickle Cell Hemophilia/Blood disordersLearning Disorders, ADD, and AutismBreastfeeding Module on Bb |
| **Nov 29** |  | **CDM#2 Due****Community Project Db Ends** |  |
| **Dec 5-7** |  | **Online Final** |  |
| **Dec 6****No Class** |  | Elogs & Clinical Notebooks Due Online |  |

Pink highlighting = Due Dates

Teal highlighting = Watch prior to class

Red highlighting= Not yet confirmed; being updated; Do not print or view yet

View Online Content through Blackboard links under Course Materials

***As the course faculty, I reserve the right to adjust this schedule in any way that serves the educational needs of the students enrolled in this course. –Dr. Sharolyn K. Dihigo***