



**NUR 1519 – 1<sup>st</sup> Semester**

# Transfer Packet

Dear Transfer Student,

Thank you for your interest in Oklahoma City Community College nursing program. This packet will assist you in preparing for the various testing that you will need to complete prior to entry into our program. All students seeking to transfer/readmit will need to complete the following steps:

### **Step 1**

Obtain two letters of recommendation. These letters must come directly from the Dean, Director, or Nursing Faculty member from your previous college/university.

- One from the Dean or Director of your transferring program.
- One from your previous nursing faculty.

### **Step 2**

Contact the nursing department for an evaluation appointment by phone at 405-682-1611 x7133 or by email at [HPSupport@occc.edu](mailto:HPSupport@occc.edu). Please bring the following to your appointment. Failure to do so will constitute re-scheduling of the appointment.

- Transcripts from all college and universities attended.

### **Step 3**

Apply to OCCC and submit transcripts <http://www.occc.edu/admissions/applying.html>

### **Step 4**

Schedule the required Proficiency Exam and skills demonstration 8 weeks prior to the start of the semester. Students can only take the Proficiency Exam one time. A minimum of 74% on the exam along with successful skills demonstration is required for transfer into the OCCC Nursing program. Three attempts at skills demonstration is allowed. All nursing pathway placement is contingent on slot availability.

## **NUR 1519 Theory Objectives**

### **Legal and Ethical Guidelines for Nursing Practice**

- 1 Identify sources of law and types of laws that affect nursing practice.
- 2 Demonstrate an understanding of the nurse's legal responsibility for providing safe, quality, client-centered care.
- 3 Discuss the legal responsibilities of the nursing student.
- 4 Relate professional and legal regulation of the nursing profession.
- 5 Relate areas of potential liability for the nurse.
- 6 Describe legal safeguards and strategies that protect the nurse from litigation.
- 7 Discuss common ethical dilemmas that health care professionals may encounter and their impact on decision-making.
- 8 Discuss the nurse's role as advocate for the client.
- 9 Discuss the legal implications relating to the use of informatics in health care setting.

### **Communication in Nursing Practice**

- 1 Define the concept of communication.
- 2 Discuss the various levels of communication.
- 3 Discuss the differences between verbal and nonverbal communication.
- 4 Discuss barriers for effective communication.
- 5 Explain the concept of therapeutic communication.
- 6 Illustrate how various factors influence therapeutic communication.
- 7 Discuss techniques that promote therapeutic communication.
- 8 Review principles of professional communication.

### **Diversity**

- 1 Examine the concept of diversity to include culture, ethnicity, social background, life style choices and spirituality when providing safe, quality client-centered care.
- 2 Determine cultural influences and barriers on client-centered care
- 3 Discuss legal and ethical nursing responsibilities when caring for the diverse client.
- 4 Apply therapeutic communication techniques to the care of the diverse client.
- 5 Compare and contrast the delivery of nursing and medical care between countries in North America with those of another continent.\* Meets Global Awareness Requirement

### **Developmental and Age-Related Changes**

- 1 Discuss principles of developmental and age-related changes across the life span.
- 2 Discuss factors that influence developmental and age-related changes across the life span.
- 3 Demonstrate an understanding of Erickson's stages of human development and Piaget's cognitive theory of development.
- 4 Identify common health problems for each of the developmental stages.
- 5 Identify age-appropriate assessment techniques.
- 6 Demonstrate an understanding of factors that affect client safety in each developmental stage.
- 7 Discuss the special needs of the aging client to include community resources.

## **Nursing Process and Clinical Reasoning**

- 1 Identify the overall purposes of the nursing process to guide and direct the practice of safe, quality nursing care.
- 2 Relate the concepts of critical thinking and clinical reasoning to nursing process knowledge and skills.
- 3 Identify the components of the nursing process.
- 4 Discuss the importance of assessment data in the development of a client-centered plan of care.
- 5 Establish and prioritize a nursing diagnosis based upon assessment data.
- 6 Determine expected outcomes based upon the nursing diagnosis.
- 7 Develop and implement client-centered interventions (to include caring interventions) to meet expected outcomes.
- 8 Evaluate the effectiveness of the plan of care in meeting the expected outcomes.
- 9 Relate the use of evidence based practice to the nursing process and the provision of safe, quality, client-centered care.
- 10 Relate the importance of active involvement of the client, family, or significant other in the development of the client's plan of care.
- 11 Discuss how diversity influences the client's plan of care.

## **Teaching and Learning**

- 1 Apply learning domains to client teaching and learning.
- 2 Determine factors affecting client learning.
- 3 Develop a client-centered plan of care that utilizes the nursing process and the knowledge of teaching learning principles
- 4 Implement the use of evidence based practice in client teaching in the provision of safe, quality, client-centered care.
- 5 Discuss the importance of documentation to the teaching/learning process.

## **Documentation**

- 1 Apply guidelines and approved abbreviations/symbols used in documentation.
- 2 Discuss the importance of timely, accurate documentation in healthcare.
- 3 Identify various documentation systems, including electronic health records.
- 4 Describe the purpose of the client record.
- 5 Discuss legal aspects of documenting client care.
- 6 Apply the principles and essential information in the documentation of client care.

## **Health Promotion and Maintenance Responsibilities in Nursing Practice**

- 1 Discuss wellness, health promotion, health protection and levels of prevention.
- 2 Discuss individual factors that influence a client's position on the wellness-illness continuum.
- 3 Differentiate between the healthy client and those experience alterations in health.
- 4 Explain the nurse's role in maintaining and promoting health.
- 5 Discuss the use of evidence-based practice in health promotion and the provision of safe, quality, client-centered care.
- 6 Relate the influence of Healthy People 2020 on safe, quality, client-centered care.

## **Principles of Medication Administration in Nursing Practice**

- 1 Discuss the implications of pharmacokinetics and pharmacodynamics in the delivery of safe, quality client-centered care.
- 2 Examine the principles of drug administration.
- 3 Discuss routes of medication administration to include advantages, disadvantages and nursing considerations.
- 4 Examine the role of standards of care and national safety initiatives relating to the administration of medication.
- 5 Recognize the legal and ethical nursing responsibilities as they relate to the administration of medication.
- 6 Examine potential hazards of medication administration and strategies to prevent errors.
- 7 Develop a client-centered plan of care that utilizes the nursing process related to the administration of medications.
- 8 Discuss client-teaching needs as they relate to the administration of medication.

## **Promoting Pain Management and Comfort**

- 1 Differentiate between the different types of pain.
- 2 Determine factors that affect clients experiencing pain.
- 3 Describe and demonstrate a comprehensive pain assessment.
- 4 Compare and contrast pharmacological pain relief measures.
- 5 Compare and contrast non-pharmacological pain relief measures.
- 6 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for pain.
- 7 Discuss how age and/or diversity impact the client's response to pain and the plan of care.
- 8 Discuss health promotion and maintenance activities for clients with or at risk for pain.
- 9 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for pain.
- 10 Relate teaching needs for the client with or at risk for pain.

## **Promoting Rest and Sleep**

- 1 Discuss the human need for rest and sleep.
- 2 Determine factors that affect sleep.
- 3 Discuss common sleep disorders: sleep apnea, insomnia, sleep disturbances.
- 4 Describe and demonstrate a comprehensive sleep assessment.
- 5 Develop a client-centered plan, emphasizing safety and evidence based practice, for the clients with or at risk for the problems with sleep.
- 6 Discuss how age and/or diversity impact the client's response to sleep problems and the plan of care.
- 7 Discuss health promotion and maintenance activities for clients with or at risk for sleep problems.
- 8 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for sleep problems.
- 9 Relate teaching needs for the client with or at risk for sleep problems.

## **Fluids and Electrolyte Balance**

- 1 Review physiologic processes and body mechanisms used to maintain fluid and electrolyte balance within the body. (online activity)
- 2 Describe the location and function of major electrolytes within the body.
- 3 Identify factors that affect normal fluid and electrolyte balance.
- 4 Differentiate between isotonic, hypertonic, and hypotonic fluids.
- 5 Identify basic diagnostic testing related fluid and electrolyte balance.
- 6 Describe and demonstrate a comprehensive fluid and electrolyte assessment.
- 7 Develop a client-centered plan, emphasizing safety and evidence based practice, for the clients with or at risk for fluid volume imbalance.
- 8 Discuss how age and/or diversity impact the client's response to fluid volume imbalance and the plan of care.
- 9 Discuss health promotion and maintenance activities for clients with or at risk for fluid volume imbalance.
- 10 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for fluid volume imbalance.
- 11 Relate teaching needs for the client with or at risk for fluid volume imbalance.

## **Oxygenation**

- 1 Review the anatomy and physiological process of the respiratory system. (online activity)
- 2 Discuss the principles of respiratory physiology and oxygenation.
- 3 Discuss factors that influence oxygenation.
- 4 Discuss common problems affecting alterations in oxygenation: hypoxemia, hypoxia, hypercapnia, airway obstruction, altered breathing patterns.
- 5 Describe and demonstrate a comprehensive respiratory assessment.
- 6 Interpret basic diagnostic testing related to oxygenation.
- 7 Develop a client-centered plan, emphasizing safety and evidence based practice, for the clients with or at risk for oxygenation problems.
- 8 Discuss how age and/or diversity impact the client's response to oxygenation problems and the plan of care.
- 9 Discuss health promotion and maintenance activities for clients with or at risk for oxygenation problems.
- 10 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for oxygenation problems.
- 11 Relate teaching needs for the client with or at risk for oxygenation problems.

## **Activity and Mobility**

- 1 Review the anatomy and physiological process of the musculoskeletal system. (Online activity)
- 2 Discuss factors that influence activity and mobility.
- 3 Discuss common problems affecting alterations in activity and mobility: osteoporosis, scoliosis, osteoarthritis.
- 4 Describe and demonstrate a comprehensive activity and mobility assessment.
- 5 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for activity and mobility problems.
- 6 Discuss how age and/or diversity impact the client's response to activity and mobility problems and the plan of care.
- 7 Discuss health promotion and maintenance activities for clients with or at risk for activity and mobility problems.

- 8 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for activity and mobility problems.
- 9 Relate teaching needs for the client with or at risk for activity and mobility problems.

### **Circulation**

- 1 Review the anatomy and physiological process of the circulatory system. (online activity)
- 2 Discuss factors that affect circulation.
- 3 Discuss common problems affecting alterations in circulatory function: pre-hypertension, atherosclerotic changes, venous stasis, ischemia.
- 4 Describe and demonstrate a basic circulatory assessment.
- 5 Interpret basic diagnostic testing related to circulation.
- 6 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for circulation problems.
- 7 Discuss how age and/or diversity impact the client's response to circulation problems and the plan of care.
- 8 Discuss health promotion and maintenance activities for clients with or at risk for circulation problems.
- 9 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for circulation problems.
- 10 Relate teaching needs for the client with or at risk for circulation problems.

### **Metabolic Function**

- 1 Review the anatomy and physiological process of the gastrointestinal system. (Online activity)
- 2 Discuss energy balance; to include metabolic requirements, body weight standards and caloric requirements.
- 3 Determine factors that affect nutrition.
- 4 Discuss clients at risk for complications associated with altered nutrition.
- 5 Describe and demonstrate a nutritional assessment.
- 6 Differentiate causes and interventions for hyper-hypoglycemia.
- 7 Interpret basic diagnostic testing related to nutrition.
- 8 Discuss and identify normal and modified diets.
- 9 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for nutritional problems.
- 10 Discuss how age and/or diversity impact the client's response to nutritional problems and the plan of care.
- 11 Discuss health promotion and maintenance activities for clients with or at risk for nutritional problems.
- 12 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for nutritional problems.
- 13 Relate teaching needs for the client with or at risk for nutritional problems.

### **Sensory Functions**

- 1 Review the anatomy and physiological process associated with sensory function. (Online activity)
- 2 Determine factors that affect sensory function.
- 3 Describe and demonstrate a basic sensory assessment.

- 4 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for sensory problems.
- 5 Discuss how age and/or diversity impact the client's response to sensory problems and the plan of care.
- 6 Discuss health promotion and maintenance activities for clients with or at risk for sensory problems.
- 7 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for sensory problems.
- 8 Relate teaching needs for the client with or at risk for sensory problems.

## **Urinary Elimination**

- 1 Review the anatomy and physiological process associated with genitourinary function. (Online activity)
- 2 Determine factors that affect urinary elimination.
- 3 Describe and demonstrate a basic genitourinary assessment.
- 4 Discuss common health problems related to urinary elimination: cystitis, dysuria, hematuria, urinary incontinence, urinary retention.
- 5 Interpret basic diagnostic testing relating to urinary elimination.
- 6 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for urinary problems.
- 7 Discuss how age and/or diversity impact the client's response to urinary problems and the plan of care.
- 8 Discuss health promotion and maintenance activities for clients with or at risk for urinary problems.
- 9 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for urinary problems.
- 10 Relate teaching needs for the client with or at risk for urinary problems.

## **Bowel Elimination**

- 1 Review the anatomy and physiological process associated with gastrointestinal function. (Online activity)
- 2 Determine factors that affect bowel elimination.
- 3 Discuss common health problems related to bowel function: constipation, fecal impaction, diarrhea, bowel incontinence, gastroenteritis
- 4 Describe and demonstrate a bowel assessment.
- 5 Interpret basic diagnostic testing relating to bowel elimination.
- 6 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the clients with or at risk for bowel problems.
- 7 Discuss how age and/or diversity impact the client's response to bowel problems and the plan of care.
- 8 Discuss health promotion and maintenance activities for clients with or at risk for bowel problems.
- 9 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for bowel problems.
- 10 Relate teaching needs for the client with or at risk for bowel problems.

## **Tissue Integrity**

- 1 Review the anatomy and physiological process associated with the integumentary system.  
(Online activity)
- 2 Determine factors that affect tissue integrity.
- 3 Describe and demonstrate an integumentary and wound assessment.
- 4 Discuss common health problems related to tissue integrity: pressure ulcers, cellulitis, contact dermatitis, and wounds.
- 5 Develop a client-centered plan, emphasizing safety and evidence based practice, for the clients with or at risk for tissue integrity problems.
- 6 Discuss how age and/or diversity impact the client's response to tissue integrity problems and the plan of care.
- 7 Discuss health promotion and maintenance activities for clients with or at risk for tissue integrity problems.
- 8 Discuss legal and ethical nursing responsibilities when providing client-centered care for the client with or at risk for tissue integrity problems.
- 9 Relate teaching needs for the client with or at risk for tissue integrity problems.

## **Promoting Healthy Responses to Grief, Loss, and Death Learning**

- 1 Differentiate between dying, death, grief and loss.
- 2 Compare and contrast models of grief.
- 3 Determine factors that affect grieving and altered grieving.
- 4 Develop a client-centered plan, emphasizing safety and evidence-based practice, for the dying client and the client experiencing grief and loss.
- 5 Discuss how age and/or diversity impact the dying client and the client experiencing grief and loss and the plan of care.
- 6 Discuss legal and ethical nursing responsibilities when providing client-centered care for the dying client and the client experiencing grief and loss.

## **Dosage Calculation**

- 1 All exams will have a dosage calculation component.

## **NUR 1519 Campus Lab Objectives**

### **Lab and Simulator Orientation, VS, BM and Client Transfers**

- 1 Identify and demonstrate appropriate techniques and nursing responsibilities for assessing temperature, pulse, respirations and blood pressure.
- 2 Identify age-related variations in the normal ranges for temperature, pulse, respirations, and blood pressure.
- 3 Demonstrate the normal movements utilized in passive range-of-motion exercises.
- 4 Demonstrate appropriate body mechanics as they relate to positioning, transferring, lifting, and ambulating clients with and without assistive devices.
- 5 Identify nursing responsibilities in maintaining safety for clients experiencing problems with activity and mobility.
- 6 Demonstrate correct use of various assistive devices for positioning, transferring, lifting and ambulating clients.

### **Basic Clinical Skills, Aseptic Technique, PPE and Hand Hygiene**

- 1 Demonstrate correct technique for the measuring and application of TED and SCD appliances.
- 2 Examine factors affecting personal hygiene, hygiene practices and comfort to include developmental and cultural consideration.
- 3 Demonstrate techniques used when assisting clients with hygiene measures and providing for a clean and safe environment.
- 4 Demonstrate making an occupied and an unoccupied bed.
- 5 Examine strategies for implementing CDC guidelines for standard and transmission based precautions in the clinical setting.
- 6 Demonstrate appropriate hand hygiene measures and use of commercial hand hygiene products.
- 7 Demonstrate the psychomotor skills of applying and removing personal protective equipment.
- 8 Demonstrate the correct procedure for removing items from a isolation room.
- 9 Discuss the principles of medical asepsis when providing care for the client.
- 10 Identify nursing responsibilities in establishing and maintaining a sterile field.
- 11 Demonstrate establishing and maintaining a sterile field.
- 12 Demonstrate the psychomotor skill of donning and removing sterile gloves.

### **Nursing Physical Assessment and Nursing Program Forms (Clinical Information Session)**

- 1 Identify age appropriate techniques and equipment used for the examination of clients.
- 2 Identify the components of the general survey.
- 3 Discuss expected findings of a physical assessment.
- 4 Distinguish basic subjective and objective data to be obtained before, during and after the assessment.
- 5 Demonstrate physical assessment using the head to toe method.
- 6 Demonstrate accurate documentation of assessment findings.

## **Non-parenteral Medication Administration and Parenteral Medication Administration: An Introduction**

- 1 Demonstrate accuracy in drug dosage calculations.
- 2 Administer non-parenteral medications to standardized clients in the practice lab setting.
- 3 Demonstrate accurate documentation and necessary client education when administering non-parenteral medications.
- 4 Identify principles required for the safe administration by non-parenteral and parenteral routes.
- 5 Examine potential hazards of medication administration and strategies to prevent errors.
- 6 Determine basic subjective and objective data to be collected prior to medication administration.
- 7 Demonstrate the psychomotor skills necessary to correctly prepare and administer non-parenteral and parenteral medications.

## **Feeding the Client, Special Diets and Precautions, Fingersticks, Nutritional Assessment & Lab Values**

- 1 Determine care and complications associated with enteral nutrition.
- 2 Demonstrate the psychomotor skills necessary in assessing residual and administration of enteral feedings.
- 3 Demonstrate correct techniques when feeding a client.
- 4 Demonstrate accurate documentation of intake.
- 5 Discuss and demonstrate a comprehensive nutritional assessment.
- 6 Discuss swallowing precautions and methods used to prevent aspiration in the high risk client.
- 7 Interpret basic diagnostic testing related to nutrition.

## **Suctioning, Oxygenation Equipment and System Assessment (Respiratory)**

- 1 Identify nursing responsibilities when caring for the client requiring airway management.
- 2 Demonstrate understanding of age appropriate techniques and equipment used when performing nasopharyngeal and oropharyngeal suctioning.
- 3 Distinguish between the various oxygen delivery systems to include the rationale and contraindications for each.
- 4 Demonstrate the psychomotor skills necessary for the correct application of various oxygen delivery systems and transport of the client with a portable oxygen device.
- 5 Demonstrate the proper application of a pulse oximetry to include the setting of alarms, troubleshooting, and documentation of SpO<sub>2</sub>.
- 6 Discuss methods and proper techniques for collecting sputum specimens (expectorated).
- 7 Demonstrate a focused respiratory assessment.
- 8 Utilize appropriate safety precautions based on client's situation.
- 9 Demonstrate accurate documentation of assessment findings.

## **System Assessment (Circulation and Musculoskeletal) and Open Skills Lab Practice**

- 1 Demonstrate understanding of age appropriate techniques and equipment used to perform a basic focused circulatory assessment.
- 2 Demonstrate understanding of age appropriate techniques and equipment used to perform a basic focused musculoskeletal assessment.
- 3 Utilize appropriate safety precautions based on client's situation.
- 4 Demonstrate a basic focused circulatory assessment.
- 5 Demonstrate a basic focused musculoskeletal assessment.
- 6 Demonstrate accurate documentation of assessment findings.

## **Neurological, Sensory, and HEENT Assessment**

- 1 Demonstrate understanding of age appropriate techniques and equipment used to perform a basic focused sensory, HEENT, and neurological assessment.
- 2 Utilize appropriate safety precautions based on clients situation.
- 3 Demonstrate a basic focused sensory, HEENT, and neurological assessment.
- 4 Demonstrate accurate documentation of assessment findings.

## **Urinary Catheterization, Specimen Collection and Bowel Care and System Assessment (Genitourinary and Abdomen)**

- 1 Demonstrate understanding of age appropriate techniques and equipment used to perform a focused genitourinary assessment.
- 2 Demonstrate understanding of age appropriate techniques and equipment used to perform a focused abdominal assessment.
- 3 Utilize appropriate safety precautions based on clients situation.
- 4 Demonstrate a focused genitourinary assessment.
- 5 Demonstrate a focused abdominal assessment.
- 6 Demonstrate accurate documentation of assessment findings.
- 7 Demonstrate sterile technique when catheterizing male and female clients (straight and indwelling).
- 8 Discuss methods utilized for collecting urine and stool specimens.
- 9 Demonstrate the psychomotor skills necessary to obtain a capillary blood glucose specimen.
- 10 Identify methods to determine specific gravity and abnormal constituents in the urine.
- 11 Demonstrate proper technique in the administration of various types of enemas.
- 12 Demonstrate methods for assisting clients with toileting.
- 13 Discuss methods for evaluating post void residuals.
- 14 Demonstrate the application of a condom catheter.
- 15 Demonstrate accurate documentation of assessment findings.

## **Wound Management and System Assessment (Skin and Breast/Axillae)**

- 1 Determine nursing interventions utilized in the prevention, identification and care of pressure ulcers.
- 2 Demonstrate the procedure for collecting a culture from a wound.
- 3 Utilize Braden risk assessment scale and the Norton skin assessment tool to determine a clients risk for the development of skin breakdown.
- 4 Demonstrate understanding of age appropriate techniques and equipment used to perform a focused integumentary assessment.
- 5 Utilize appropriate safety precautions based on clients situation
- 6 Demonstrate a focused integumentary assessment.
- 7 Demonstrate the psychomotor skills necessary to manage various client wounds and drains.
- 8 Demonstrate a focused breast/axillae assessment
- 9 Demonstrate accurate documentation of assessment findings.

# Skills Demonstration Information and Resources

## Preparation for skills check off day

1. Lab coordinator will schedule practice and demonstration times.

## On the day of the skills demonstration:

1. Report to campus lab promptly on your scheduled day and time. Do not enter the lab until the faculty has directed you to do so. **NOTE: *Students arriving late for their scheduled time will be sent home and will forfeit their first attempt to complete the assigned skill.***
2. Students are to come dressed in appropriate attire for the nursing campus laboratory (e.g. scrubs, closed toe shoes).  
Hair must be securely arranged out of your face. **NOTE: *Students not dressed appropriately will be sent home and will forfeit their first attempt to complete the assigned skills.***
3. Leave all personal belongings at home. Personal items are not allowed in the lab area during the final skills demonstration.
4. No food or drinks are allowed in the lab.
5. Students will have 40 minutes to complete all skills.
6. You are expected to come prepared. Faculty will not be assisting you during the evaluation. (e.g. provide cues or answering positively/negatively to inquiries if the skill(s) are being done correctly)

## Instructions for skills re-demonstration

1. All re-demonstrations of skills will be scheduled one week from the original skills demonstration date but not later than the deadline set forth for entry into the program.
2. The re-demonstration will be videotaped and reviewed by two additional faculty members.
3. Students requiring a second evaluation are strongly encouraged to utilize all available resources prior to the second demonstration.
4. Appointments for re-demonstration of skills will be scheduled by the Nursing Lab Coordinator.
5. Students will have a maximum of two (2) attempts to successfully demonstrate assigned skills.
6. Students will re-demonstrate the skill set in its entirety when retesting. Errors in performance not related to the first demonstration of the skill may be cause for failure during the re-demonstration.

OCCC Nursing Program  
NUR1519 Final Skills Demonstration  
Mixing Medications/Insulin

Student's Name:		ID #:	
Evaluator's Name (#1):		Date:	
Evaluator's Name (#2):		Date:	
Remediation Faculty:		Date:	

Skill Steps <b>**Critical Elements are highlighted. If a student is unsuccessful on a critical element, the attempt is failed. No more than 2 self-corrections are allowed per skill. **</b>	Attempt #1		Attempt #2		Final Attempt	
	S	U	S	U	S	U
Checked accuracy and completeness of MAR versus medication order.						
Checked for patient allergies.						
Performed 1 <sup>st</sup> check: Patient's name, medication name, dosage, route of administration, and time of administration.						
Considered medications to be mixed, compatibility, and type of injection.						
Performed hand hygiene.						
Checked expiration date of medication.						
Appropriately chose insulin vial and rolled between the hands to re-suspend insulin, if needed.						
Wipe off tops of vials and allowed to dry. ( one alcohol swab per vial)						
Verified insulin dose against MAR a second time.						
Selected the correct syringe and aspirated volume of air equal to dosage to be withdrawn from intermediate or long acting insulin.						
Injected air into vial of intermediate or long acting without needle touching solution.						
Removed syringe from vial without aspirating medication.						
Injected air into vial of rapid or short acting insulin, inverted vial and withdrew correct dose and verified with 2 <sup>nd</sup> nurse prior to removing syringe from vial. (all air bubbles removed to ensure accurate dose)						
Verified insulin dose with MAR a third time.						
Inserted needle into vial of intermediate or long acting insulin and correctly withdrew desired amount without going past intended dose. Verified with 2 <sup>nd</sup> nurse prior to removing syringe from vial.						
Withdrew needle and checked fluid level in syringe. Recapped needle using the one hand method.						

**Attempt #1:**    **Pass/Fail**

**Comments:**

**Final Attempt:**    **Pass/Fail**

**Comments:**

OCCC Nursing Program  
NUR1519 Final Skills Demonstration

Administering Intramuscular Injection

<b>Student's Name:</b>		<b>ID #:</b>	
<b>Evaluator's Name (#1):</b>		<b>Date:</b>	
<b>Evaluator's Name (#2):</b>		<b>Date:</b>	
<b>Remediation Faculty:</b>		<b>Date:</b>	

<b><u>SKILL STEPS</u></b> <b>**Critical Elements are highlighted.</b> <b>If a student is unsuccessful on a critical element, the attempt is failed.</b> <b>No more than 2 self-corrections are allowed per skill. **</b>	Attempt #1		Attempt #2		Final Attempt	
	<u>S</u>	<u>U</u>	<u>S</u>	<u>U</u>	<u>S</u>	<u>U</u>
Checked accuracy and completeness of MAR versus medication order.						
Checked patient for allergies.						
Performed 1 <sup>st</sup> check: Patient's name, medication name, dosage, route of administration, and time of administration.						
Performed hand hygiene						
Selected appropriate syringe and needle, considering volume and type of medication, and patient's muscle mass. <b>Syringe size chosen:</b> <b>Needle length chosen:</b> <b>Needle gauge chose:</b>						
Performed 2 <sup>nd</sup> check: Patient's name, medication name, dosage, route of administration, and time of administration.						
Drew up correct medication and dose without contamination.						
Recapped needle using the one hand method.						
Performed 3 <sup>rd</sup> check at bedside of patient: Identified patient using 2 identifiers (patients name and date of birth or patients name and medical record number) correct medication, dosage, route and time.						
Performed hand hygiene						
Explained procedure to patient						
Applied clean gloves.						
Exposed injection site only. Assessed integrity of muscle while selecting injection site.						

<b><u>SKILL STEPS</u></b> <b>**Critical Elements are highlighted.</b> <b>If a student is unsuccessful on a critical element, the attempt is failed.</b> <b>No more than 2 self-corrections are allowed per skill. **</b>	Attempt #1		Attempt #2		Final Attempt	
	<u>S</u>	<u>U</u>	<u>S</u>	<u>U</u>	<u>S</u>	<u>U</u>
Assisted patient to comfortable position according to injection site.						
Verbalized correct landmarks and muscle of injection site.  Ventrogluteal    /        Vastus Lateralis        /        Deltoid						
Cleaned injection site with an antiseptic swab. Allow to dry.						
Removed needle cap by pulling it straight off.						
Held syringe between thumb and index finger (as a dart), palm down.						
With non-dominant hand, spread skin tightly and grasped muscle, or used Z-track method and administered injection at 90-degree angle.						
With non-dominant hand, grasped lower end of syringe barrel (with Z-track method, continued to hold skin taut), then moved dominant hand to plunger.						
Aspirated to check for blood return. If blood aspirated, withdrew needle, if not injected medication slowly.						
Withdrew needle quickly, (with Z-track method, kept needle inserted for 10 seconds, then withdrew and released skin).						
Applied gentle pressure. Did not massage site.						
Discarded in proper receptacle uncapped needle or needle enclosed in safety shield and syringe.						
Removed gloves and performed hand hygiene.						
Verbalized that nurse would remain with patient. Observed for allergic reaction.						
Verbalized that nurse would document site used, needle size and gauge, and how patient tolerated injection.						

<b>Attempt #1:    Pass/Fail</b>  <b>Comments:</b>
<b>Final Attempt: Pass/Fail</b>  <b>Comments:</b>

OCCC Nursing Program  
NUR1519 Final Skills Demonstration

Insertion of a Straight or Indwelling Urinary Catheter

<b>Student's Name:</b>		<b>ID #:</b>	
<b>Evaluator's Name (#1):</b>		<b>Date:</b>	
<b>Evaluator's Name (#2):</b>		<b>Date:</b>	
<b>Evaluator's Name (Final):</b>		<b>Date:</b>	
<b>Remediation Faculty:</b>		<b>Date:</b>	

<b><u>SKILL STEPS</u></b> <b>**Critical Elements are highlighted.</b> <b>If a student is unsuccessful on a critical element, the attempt is failed.</b> <b>No more than 2 self-corrections are allowed per skill. **</b>	<b>Attempt #1</b>		<b>Attempt #2</b>		<b>Final Attempt</b>	
	<b><u>S</u></b>	<b><u>U</u></b>	<b><u>S</u></b>	<b><u>U</u></b>	<b><u>S</u></b>	<b><u>U</u></b>
Check patient's orders for type of catheter needed.						
Checked for allergies						
Gather supplies and equipment needed.						
Provide privacy and introduced self to patient.						
Identify patient with two identifiers.						
Verified for allergies with patient.						
Preform hand hygiene. Apply clean gloves.						
Raised bed to appropriate height, raise side rails on opposite side, lower side rails needed to work.						
Assist patient to appropriate position, ask patient to relax thighs, drape patient so perineum is exposed.						
Perform Peri-care.						
Remove dirty gloves and perform hand hygiene.						
Open outer wrapping of catheterization kit, place inner wrapped kit on cleaned surface.						
Open inner sterile wrap using sterile technique.						
Put on sterile gloves using sterile technique.						
<b>Female Patient:</b> Unfold sterile square drape without breaking sterile technique. Place drape on bed with shiny side down between patient's thighs. Patient can raise hips so cuffed edge can be placed under buttocks. (If patient cannot lift hips, drape can be placed between thighs close to buttocks with breaking sterile technique). Fenestrated drape does not have to be used.						

<b><u>SKILL STEPS</u></b> <b>**Critical Elements are highlighted.</b> <b>If a student is unsuccessful on a critical element, the attempt is failed.</b> <b>No more than 2 self-corrections are allowed per skill. **</b>	Attempt #1		Attempt #2		Final Attempt	
	<u>S</u>	<u>U</u>	<u>S</u>	<u>U</u>	<u>S</u>	<u>U</u>
<b>Male Patient:</b> Unfold square drape without breaking sterile technique. Place drape shiny side down on bed between patient's thighs/on top of patient's thighs just below penis. Place Fenestrated drape with opening over penis.						
Arrange supplies on the sterile field, maintain sterility. Place loaded sterile tray on sterile drape. <ol style="list-style-type: none"> <li>Pour antiseptic solutions over cotton balls or open swab sticks for cleaning</li> <li>Open sterile specimen container if needed.</li> <li>Take catheter out of plastic.</li> <li>Open lubricant. Lubricate catheter with gel.</li> </ol>						
Cleans urethral meatus. <ol style="list-style-type: none"> <li> <b>Female patient:</b> <ol style="list-style-type: none"> <li>Separate labia with fingers of non-dominant hand.</li> <li>Maintain position of hand throughout procedure.</li> <li>Using forceps pick up saturated cotton ball or swab stick and clean labia wiping top to bottom. Using a new cotton ball or swab for each side. Using a new cotton ball or swab stick clean meatus, wiping from top to bottom.</li> </ol> </li> <li> <b>Male patient:</b> <ol style="list-style-type: none"> <li>Retract foreskin if present, with non-dominant hand. Hold penis stable with same hand.</li> <li>Use uncontaminated hand pick up saturated cotton ball or swab stick. Starting at the urethral meatus. In a circular motion cleanse down to base of glans. Repeat 3 times.</li> </ol> </li> </ol>						
Picks up lubricated catheter properly coiling on hand if needed.						
<b>Inserting Catheter:</b> <ol style="list-style-type: none"> <li>Female patient               <ol style="list-style-type: none"> <li>Ask patient to bear down. Insert catheter slowly through urethral meatus.</li> <li>Advance catheter about 3 inches or until urine flow is seen. Then advance about 1-2 inches.</li> <li>If indwelling catheter, hold catheter secure with non-dominant hand for balloon to be inflated.</li> </ol> </li> <li>Male Patient               <ol style="list-style-type: none"> <li>Apply upward traction to penis at it is held at a 90-degree angle from the body.</li> <li>Ask patient to bear down. Insert catheter slowly through urethral meatus.</li> <li>Advance catheter 7-9 inches or until urine flow is seen. When urine is seen advance to bifurcation.</li> <li>If indwelling catheter, hold catheter secure with non-dominant hand for balloon to be inflated.</li> </ol> </li> </ol>						

<b>Straight Cath:</b> At point of urine flow collect urine specimen if needed. Slowly remove catheter after urine flow stops.						
<b>Indwelling Cath:</b> a. Continue holding catheter with non-dominant hand. b. Connect prefilled syringe to port with free hand. c. Inject total amount of fluid in syringe. d. Release catheter and GENTLY pull back on catheter to ensure placement. e. Remove syringe from port.						
Securing indwelling catheter with securement device (per your facility protocol). Attach to patient with enough slack so catheter does not pull. a. Female: Secure tubing to inner thigh. b. Male: secure tubing to upper thigh or lower abdomen. Replace foreskin if needed.						
Clip Foley bag to the bed lower than the bladder. DO NOT attach to the bed railing.						
Ensure tubing has no obstructions to urine flow. Assist patient to a comfortable position and provide any hygiene needed.						
Dispose of supplies in appropriate receptacles.						
Measure Urine. Remove gloves and perform hand hygiene. Document output and all other pertinent information in patient chart. Document on Foley bag date time etc. per facility protocols.						

<p><b>Attempt #1:      Pass/Fail</b></p>  <p><b>Comments:</b></p>       
<p><b>Final Attempt: Pass/Fail</b></p>  <p><b>Comments:</b></p>       

# The Rounding Rules

## Basic Rounding: (Applies to both Adult & Pediatric clients):

If the number is greater than or equal to 5 then round up. If the number is less than 5 then round down.

Ex:  $1.57 = 1.6$       Ex:  $2.43 = 2.4$

Ex:  $0.782 = 0.78$       Ex:  $0.968 = 0.97$

Remember: Round at the end of the problem.

## Converting pounds and kilograms

Round at the end of the problem.

Ex: DrugX 15mg/Kg per day. Patient weight is 82 lbs.

$82 \text{ lbs} \div 2.2 = 37.27 \text{ kg}$   
 $37.27 \text{ kg} \times 15 \text{ mg/kg} = 559.0909 \text{ mg}$

$2.2 \text{ lbs} = 1 \text{ kg}$       2.2

Answer 559.1mg

\*\* See instructions for how to round tablets if calculating oral/enteral dose

## Drops (gtt) and Units

Drops and units are too small to divide into parts.

Cannot give  $\frac{1}{2}$  a drop

Always round to the nearest whole number.

Ex:  $89.5 = 90$

Ex:  $77.4 = 77$

## mL

If the answer is less than 1 mL then round to the nearest 100<sup>th</sup>

Ex:  $0.376 = 0.38 \text{ mL}$

If the answer is greater than 1 then round to the nearest tenth.

Ex:  $1.57 = 1.6 \text{ mL}$

## Tablets

Tablets as a rule, can only be given whole or broken in half (if scored). Round to the half (0.5):

Ex:  $1.45 = 1.5 \text{ tablets}$

Ex:  $1.1 = 1 \text{ tablet}$

## Conversion Table

Metric Units of Measurement			
Gram (Weight)	1 kilogram (kg, Kg)	1000 g	
	1 gram (g, gm, G, Gm)	1000 mg	0.001 g
	1 milligram (mg)	1000 mcg	
Liter (volume)	1 liter (L, l)	1000 mL	
Household Equivalents in Fluid volume			
1 measuring cup =		8 ounces (oz)	
1 medium-size glass (tumbler size) =		8 ounces (oz)	
1 coffee cup (c) =		6 ounces (oz)	
1 ounce (oz) =		2 tablespoons (T)	
1 tablespoon (T) =		3 teaspoons (t)	
1 teaspoon (t) =		60 drops (gtt)	
1 drop (gt) =		1 minim (min, or m)	
Approximate Metric, Apothecary, and Household Equivalents			
Metric System	Apothecary System	Household System	
1 kilogram (kg)	2.2 pounds (lb)	2.2 pounds (lb)	
1000 gram (g)	2.2 pounds (lb)		
	1 pound (lb)	16 ounces (oz)	
60 milligram (mg)	1 grain (gr)		
240 milliliter (mL)		1 cup	
15 mL		1 tablespoon (T)	
5 mL		1 teaspoon (t)	

## Oklahoma City Community College

### NUR 1519 Sample Dosage Calculation Practice

This sample dosage calculation practice exam is provided because there may be dosage calculation questions on the proficiency exam.

1. 65 mg=\_\_\_\_\_g
2. 500 mcg=\_\_\_\_\_mg
3. 7.16 Kg=\_\_\_\_\_g
4. 9 Kg=\_\_\_\_\_lbs
5. 2 ½ oz=\_\_\_\_\_mL
6. 13 t=\_\_\_\_\_mL
7. 250 lbs=\_\_\_\_\_Kg
8. ½ gr=\_\_\_\_\_mg
9. 4 T =\_\_\_\_\_mL
10. 125 mL=\_\_\_\_\_L

11. The order reads: Levothroid 0.075 mg PO every day

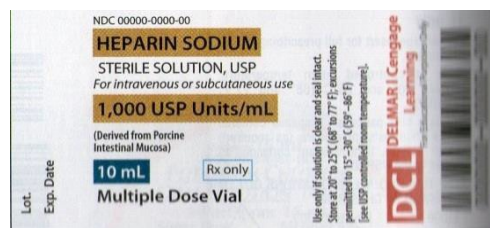
The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

12. The order reads: Heparin 650 units SC q 12h

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

13. The order reads: Depo-Provera 1 g *IM stat*.

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

14. The order reads: Clonazepam 1.5 mg PO every day

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

15. The order reads: Morphine Sulfate gr  $\frac{1}{4}$  IM q 4-6hrs, pain.

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

16. The order reads: Cefaclor 20 mg/kg/dose PO TID.

Weight of child 24 lbs

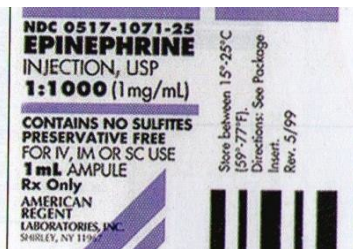
The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

17. The order reads: Epinephrine 200 mcg subcut stat

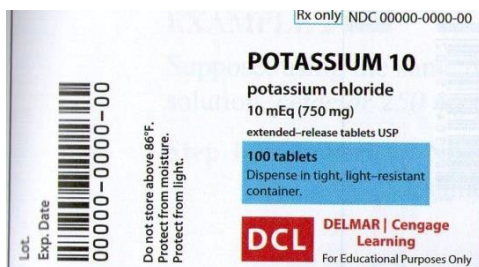
The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

18. The order reads: Potassium 15 mEq PO every day

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

19. The order reads: Biaxin 500mg PO q 12hrs.

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

20. The order reads: Terbutaline 250 mcg subcut stat and repeat q. 15-30 min if no significant improvement in status asthmaticus

The available dose is indicated by the label below.



How much medication will the nurse administer for 1 dose? \_\_\_\_\_

Answers:

- 1) 0.065
- 2) 0.5
- 3) 7160
- 4) 19.8
- 5) 75
- 6) 65
- 7) 113.6 OR 113.64
- 8) 30
- 9) 60
- 10) 0.125 OR 0.13
- 11) 3 tablets/tabs
- 12) 0.65 mL (remember if less than 1 mL round to 100<sup>th</sup>)
- 13) 2.5 mL
- 14) 3 tablets/tabs
- 15) 1 mL
- 16) 5.8 mL
- 17) 0.2 mL
- 18) 1.5 tablets/tabs
- 19) 2 tablets/tabs
- 20) 0.25 mL