



Republic of the Philippines
OFFICE OF THE PRESIDENT
COMMISSION ON HIGHER EDUCATION

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No. 14
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**SUBJECT: POLICIES AND STANDARDS FOR BACHELOR
OF SCIENCE IN NURSING (BSN) PROGRAM**

In accordance with pertinent provisions of Republic Act (RA) No. 7722, otherwise known as the Higher Education Act of 1994 and pursuant to Commission en Banc Resolution No. 170 dated April 19, 2009, and for the purpose of rationalizing Nursing Education in the country to provide relevant and quality health services locally and internationally, the following policies and standards for Bachelor of Science in Nursing (BSN) program are hereby adopted and promulgated by the Commission.

ARTICLE I
INTRODUCTION

Section 1. A person is a unique bio-psycho-socio-cultural and spiritual being who is always in constant interaction with the environment. These interactions affect individuals, families, population groups and societal health status.

The nurse assumes the caring role in the promotion and restoration of health, prevention of diseases, alleviation of suffering and, when recovery is not possible, in assisting patients towards a peaceful death. The nurse also collaborates with other members of the health team and other sectors to achieve quality healthcare. Moreover, the nurse works with individuals, families, population groups, communities and society, as a whole, in ensuring active participation in the delivery of holistic healthcare.

Within the context of Philippine society, nursing education, with *caring* as its foundation, subscribes to the following core values which are vital components in the development of a professional nurse and are therefore emphasized in the BSN program:

- 1.1 Love of God
- 1.2 Caring as the core of nursing
 - a. Compassion
 - b. Competence
 - c. Confidence
 - d. Conscience

- e. Commitment (commitment to a culture of excellence, discipline, integrity and professionalism)
- 1.3 Love of People
 - a. Respect for the dignity of each *person regardless of creed, color, gender and political affiliation.*
- 1.4 Love of Country
 - a. Patriotism (Civic duty, social responsibility and good governance)
 - b. Preservation and enrichment of the environment and culture heritage

A strong liberal arts and sciences education with a transdisciplinary approach, enhances this core values. The BSN program therefore, aims to prepare a nurse, who, upon completion of the program, demonstrates beginning professional competencies and shall continue to assume responsibility for professional development and utilizes research findings in the practice of the profession. The following are the Key Areas of Responsibility for which a nurse should demonstrate competence in:

1. Safe and quality nursing care
2. Management of resources and environment
3. Health education
4. Legal responsibility
5. Ethico-moral responsibility
6. Personal and professional development
7. Quality improvement
8. Research
9. Record Management
10. Communication
11. Collaboration and teamwork

ARTICLE II AUTHORITY TO OPERATE

Section 2. All private higher education institutions (PHEIs) intending to offer the Bachelor of Science in Nursing program must first secure proper authority from the Commission in accordance with existing rules and regulations. State universities and colleges (SUCs) and local colleges and universities (LCUs) should strictly adhere to the provisions of these policies and standards.

The BSN program shall be offered by HEIs with strong liberal arts education, offering at least six (6) baccalaureate programs, preferably in a university-based setting. In the case of colleges and universities with less than six (6) baccalaureate program offerings, a Memorandum of Agreement [MOA] shall be entered between and among higher education institutions with strong liberal arts education [e.g. AB Psychology, BS Biology, AB English, BS Engineering, BS Math, BS Economics] or hire qualified faculty to teach the General Education courses.

**ARTICLE III
PROGRAM SPECIFICATIONS**

Section 3. Degree Name.

The degree name shall be Bachelor of Science in Nursing (BSN). To ensure the quality of the nursing graduate, the degree is conferred upon completion of at least four-year BSN program offered by a college or university duly recognized by the Commission on Higher Education.

Section 4. Program Description.

The BSN is a four-year program consisting of general education and professional courses. Professional courses begin in the first year and threads through the development of competencies up to the fourth year level. The BSN program provides an intensive nursing practicum that will refine clinical skills from the first year level to ensure basic clinical competencies required of a beginning nurse practitioner.

4.1 Objective: The BSN program aims to produce a fully functioning nurse who is able to perform the competencies under each of the Key Areas of Responsibility as enumerated in Article IV Section 5 herein.

4.2 Specific Careers/Professions/Occupations. Graduates of this program as beginning nurse practitioner may pursue the following career paths but not limited to:

- a. Clinical Nursing
- b. Community Health Nursing
- c. Private-duty Nursing
- d. Occupational Health Nursing
- e. School Nursing
- f. Military Nursing
- g. Health Education
- h. Research
- i. Entrepreneurship

4.3 Allied Programs. The BSN program is allied to the following health related programs:

- a. Medicine
- b. Dentistry
- c. Optometry
- d. Physical Therapy/Occupational Therapy
- e. Pharmacy
- f. Public Health
- g. Medical Technology
- h. Radiologic Technology
- i. Respiratory Therapy
- j. Nutrition and Dietetics

- k. Midwifery
- l. Speech Pathology

ARTICLE IV COMPETENCY STANDARDS

Section 5. Graduates of Bachelor of Science in Nursing program must be able to apply analytical and critical thinking in the nursing practice. The nurse must be competent in the following Key Areas of Responsibility and its respective core competency standards and indicators:

Key Areas of Responsibility	Core Competency	Indicators
A. Safe and Quality Nursing Care	Core Competency 1: Demonstrates knowledge based on the health /illness status of individual / groups	<ul style="list-style-type: none"> • Identifies the health needs of the clients (individuals, families, population groups and/or communities) • Explains the health status of the clients/ groups
	Core Competency 2: Provides sound decision making in the care of individuals / families/groups considering their beliefs and values	<ul style="list-style-type: none"> • Identifies wellness potential and/or health problem of clients • Gathers data related to the health condition • Analyzes the data gathered • Selects appropriate action to support/enhance wellness response; manage the health problem • Monitors the progress of the action taken
	Core Competency 3: Promotes safety and comfort and privacy of clients	<ul style="list-style-type: none"> • Performs age-specific safety measures in all aspects of client care • Performs age-specific comfort measures in all aspects of client care • Performs age-specific measures to ensure privacy in all aspects of client care
	Core Competency 4: Sets priorities in nursing care based on clients' needs	<ul style="list-style-type: none"> • Identifies the priority needs of clients • Analyzes the needs of clients • Determines appropriate nursing care to address priority needs/problems
	Core Competency 5: Ensures continuity of care	<ul style="list-style-type: none"> • Refers identified problem to appropriate individuals / agencies • Establishes means of providing continuous client care
	Core Competency 6: Administers medications and other health therapeutics	<ul style="list-style-type: none"> • Conforms to the 10 golden rules in medication administration and health therapeutics

	<p>Core Competency 7: Utilizes the nursing process as framework for nursing</p> <p>7.1 Performs comprehensive and systematic nursing assessment</p>	<ul style="list-style-type: none"> • Obtains informed consent • Completes appropriate assessment forms • Performs appropriate assessment techniques • Obtains comprehensive client information • Maintains privacy and confidentiality • Identifies health needs
	<p>7.2 Formulates a plan of care in collaboration with clients and other members of the health team</p>	<ul style="list-style-type: none"> • Includes client and family in care planning • Collaborates with other members of the health team • States expected outcomes of nursing intervention maximizing clients' competencies • Develops comprehensive client care plan maximizing opportunities for prevention of problems and/or enhancing wellness response • Accomplishes client-centered discharge plan
	<p>7.3 Implements planned nursing care to achieve identified outcomes</p>	<ul style="list-style-type: none"> • Explains interventions to client and family before carrying them out to achieve identified outcomes • Implements nursing intervention that is safe and comfortable • Acts to improve clients' health condition or human response • Performs nursing activities effectively and in a timely manner • Uses the participatory approach to enhance client-partners empowering potential for healthy life style/wellness
	<p>7.4 Evaluates progress toward expected outcomes</p>	<ul style="list-style-type: none"> • Monitors effectiveness of nursing interventions • Revises care plan based on expected outcomes
<p>B. Manage - ment of Resources and Environment</p>	<p>Core Competency 1: Organizes work load to facilitate client care</p>	<ul style="list-style-type: none"> • Identifies tasks or activities that need to be accomplished • Plans the performance of tasks or activities based on priorities • Verifies the competencies of the staff prior to delegating tasks • Determines tasks and procedures that can be safely assigned to other members of the team • Finishes work assignment on time

	Core Competency 2: Utilizes financial resources to support client care	<ul style="list-style-type: none"> • Identifies the cost-effectiveness in the utilization of resources • Develops budget considering existing resources for nursing care
	Core Competency 3: Establishes mechanism to ensure proper functioning of equipment	<ul style="list-style-type: none"> • Plans for preventive maintenance program • Checks proper functioning of equipment considering the: <ul style="list-style-type: none"> -intended use -cost -benefit -infection control -safety -waste creation and disposal storage • Refers malfunctioning equipment to appropriate unit
	Core Competency 4: Maintains a safe environment From Competency 5	<ul style="list-style-type: none"> • Complies with standards and safety codes prescribed by law • Adheres to policies, procedures and protocols on prevention and control of infection • Observes protocols on pollution-control (water, air and noise) • Observes proper disposal of wastes • Defines steps to follow in case of fire, earthquake and other emergency situations.
C. Health Education	Core Competency 1: Assesses the learning needs of the clients/ partner/s	<ul style="list-style-type: none"> • Obtains learning information through interview, observation and validation • Analyzes relevant information • Completes assessment records appropriately • Identifies priority needs
	Core Competency 2: Develops health education plan based on assessed and anticipated needs	<ul style="list-style-type: none"> • Considers nature of learner in relation to: social, cultural, political, economic, educational and religious factors. • Involves the client, family, significant others and other resources in identifying learning needs on behavior change for wellness, healthy lifestyle or management of health problems • Formulates a comprehensive health education plan with the following components: objectives, content, time allotment, teaching-learning resources and evaluation parameters • Provides for feedback to finalize the plan
	Core Competency 3: Develops learning materials for health education	<ul style="list-style-type: none"> • Develops information education materials appropriate to the level of the client • Applies health education principles in the development of information education materials

	Core Competency 4: Implements the health education plan	<ul style="list-style-type: none"> • Provides for a conducive learning situation in terms of time and place • Considers client and family's preparedness • Utilizes appropriate strategies that maximize opportunities for behavior change for wellness/healthy life style • Provides reassuring presence through active listening, touch, facial expression and gestures • Monitors client and family's responses to health education
	Core Competency 5: Evaluates the outcome of health education	<ul style="list-style-type: none"> • Utilizes evaluation parameters • Documents outcome of care • Revises health education plan based on client response/outcome/s
D. Legal Responsibility	Core Competency 1: Adheres to practices in accordance with the nursing law and other relevant legislation including contracts, informed consent.	<ul style="list-style-type: none"> • Fulfills legal requirements in nursing practice • Holds current professional license • Acts in accordance with the terms of contract of employment and other rules and regulations • Complies with required continuing professional education • Confirms information given by the doctor for informed consent • Secures waiver of responsibility for refusal to undergo treatment or procedure • Checks the completeness of informed consent and other legal forms
	Core Competency 2: Adheres to organizational policies and procedures, local and national	<ul style="list-style-type: none"> • Articulates the vision, mission of the institution where one belongs • Acts in accordance with the established norms of conduct of the institution / organization/legal and regulatory requirements
	Core Competency 3: Documents care rendered to clients	<ul style="list-style-type: none"> • Utilizes appropriate client care records and reports. • Accomplishes accurate documentation in all matters concerning client care in accordance to the standards of nursing practice.
E. Ethico-moral Responsibility	Core Competency 1: Respects the rights of individual / groups	<ul style="list-style-type: none"> • Renders nursing care consistent with the client's bill of rights: (i.e. confidentiality of information, privacy, etc.)
	Core Competency 2: Accepts responsibility and accountability for own decision and	<ul style="list-style-type: none"> • Meets nursing accountability requirements as embodied in the job description • Justifies basis for nursing actions and

	actions	judgment
	Core Competency 3: Adheres to the national and international codes of ethics for nurses	<ul style="list-style-type: none"> Projects a positive image of the profession Adheres to the Code of Ethics for Nurses and abides by its provisions Reports unethical and immoral incidents to proper authorities
F. Personal and Professional Development	Core Competency 1: Identifies own learning needs	<ul style="list-style-type: none"> Identifies one's strengths, weaknesses and limitations Determines personal and professional goals and aspirations
	Core Competency 2: Pursues continuing education	<ul style="list-style-type: none"> Participates in formal and non-formal education Applies learned information for the improvement of care
	Core Competency 3: Gets involved in professional organizations and civic activities	<ul style="list-style-type: none"> Participates actively in professional, social, civic, and religious activities Maintains membership to professional organizations Support activities related to nursing and health issues
	Core Competency 4: Projects a professional image of the nurse	<ul style="list-style-type: none"> Demonstrates good manners and right conduct at all times Dresses appropriately Demonstrates congruence of words and actions Behaves appropriately at all times
	Core Competency 5: Possesses positive attitude towards change and criticism	<ul style="list-style-type: none"> Listens to suggestions and recommendations Tries new strategies or approaches Adapts to changes willingly
	Core Competency 6: Performs functions according to professional standards	<ul style="list-style-type: none"> Assesses own performance against standards of practice Sets attainable objectives to enhance nursing knowledge and skills Explains current nursing practices, as the situation arises
G. Quality Improvement	Core Competency 1: Gathers data for quality improvement	<ul style="list-style-type: none"> Identifies appropriate quality improvement methodologies for clinical problems Detects variations in specific parameters i.e vital signs of the client from day to day Reports significant changes in clients' condition/environment to improve stay in the hospital Solicits feedback from clients and significant others regarding care rendered

	Core Competency 2: Participates in nursing audits and rounds	<ul style="list-style-type: none"> • Shares with the team relevant information regarding clients' condition and significant changes in clients' environment • Encourages the client to verbalize relevant changes in his/her condition • Performs daily check of clients' records / condition • Documents and records all nursing care and actions implemented
	Core Competency 3: Identifies and reports variances	<ul style="list-style-type: none"> • Reports to appropriate person/s significant variances/changes/occurrences immediately • Documents and reports observed variances regarding client care
	Core Competency 4: Recommends solutions to identified problems	<ul style="list-style-type: none"> • Gives an objective and accurate report on what was observed rather than an interpretation of the event • Provides appropriate suggestions on corrective and preventive measures • Communicates solutions to appropriate groups
H. Research	Core Competency 1: Gathers data using different methodologies	<ul style="list-style-type: none"> • Specifies researchable problems regarding client care and community health • Identifies appropriate methods of research for a particular client / community problem • Combines quantitative and qualitative nursing design through simple explanation on the phenomena observed
	Core Competency 2: Analyzes and interprets data gathered	<ul style="list-style-type: none"> • Analyzes data gathered using appropriate statistical tool • Interprets data gathered based on significant findings
	Core Competency 3: Recommends actions for implementation	<ul style="list-style-type: none"> • Recommends practical solutions appropriate to the problem based on the interpretation of significant findings
	Core Competency 4: Disseminates results of research findings	<ul style="list-style-type: none"> • Shares/presents results of findings with colleagues / clients/ family and to others • Endeavors to publish research • Submits research findings to own agency and others as appropriate
	Core Competency 5: Applies research findings in nursing practice	<ul style="list-style-type: none"> • Utilizes findings in research in the provision of nursing care for individuals / groups / communities • Makes use of evidence-based nursing to enhance nursing practice
I. Records Management	Core Competency 1: Maintains accurate and updated	<ul style="list-style-type: none"> • Completes updated documentation of client care

	documentation of client care	<ul style="list-style-type: none"> • Applies principles of record management • Monitors and improves accuracy, completeness and reliability of relevant data • Makes record readily accessible to facilitate client care
	Core Competency 2: Records outcome of client care	<ul style="list-style-type: none"> • Utilizes records system ex. Kardex or Hospital Information System (HIS) • Uses data in decision and policy making activities
	Core Competency 3: Observes legal imperatives in record keeping	<ul style="list-style-type: none"> • Maintains integrity, safety, access and security of records • Documents/monitors proper record storage, retention and disposal • Observes confidentiality and privacy of the clients' records • Maintains an organized system of filing and keeping clients' records in a designated area • Follows protocol in releasing records and other information
J. Communication	Core Competency 1: Establishes rapport with clients, significant others and members of the health team	<ul style="list-style-type: none"> • Creates trust and confidence • Spends time with the client/significant others and members of the health team to facilitate interaction • Listens actively to client's concerns/significant others and members of the health team
	Core Competency 2: Identifies verbal and non-verbal cues	<ul style="list-style-type: none"> • Interprets and validates client's body language and facial expressions
	Core Competency 3: Utilizes formal and informal channels	<ul style="list-style-type: none"> • Makes use of available visual aids • Utilizes effective channels of communication relevant to client care management
	Core Competency 4: Responds to needs of individuals, families, groups and communities	<ul style="list-style-type: none"> • Provides reassurance through therapeutic touch, warmth and comforting words of encouragement • Provides therapeutic bio-behavioral interventions to meet the needs of clients
	Core Competency 5: Uses appropriate information technology to facilitate communication	<ul style="list-style-type: none"> • Utilizes telephone, mobile phone, electronic media • Utilizes informatics to support the delivery of healthcare

K. Collaboration and Teamwork	Core Competency 1: Establishes collaborative relationships with colleagues and other members of the health team	<ul style="list-style-type: none"> • Contributes to decision making regarding clients' needs and concerns • Participates actively in client care management including audit • Recommends appropriate interventions to improve client care • Respects the role of other members of the health team • Maintains good interpersonal relationships with clients, colleagues and other members of the health team
	Core Competency 2: Collaborates plan of care with other members of the health team	<ul style="list-style-type: none"> • Refers clients to allied health team partners • Acts as liaison / advocate of the client • Prepares accurate documentation for efficient communication of services

ARTICLE V CURRICULUM

Section 6. Curriculum. Higher education institutions offering the Bachelor of Science in Nursing program must conform to the standard curriculum embodied in this CMO, provided that program innovations shall be subject to prior review by the Commission.

Section 7. Level Objectives. The student shall be given opportunities to be exposed to the various levels of health care (health promotion, disease prevention, risk reduction, curative and restoration of health) with various client groups (individual, family, population groups and community) in various settings (hospital, community). These opportunities shall be given in graduated experiences to ensure that the competencies per course, per level and for the whole program are developed.

Before graduation, the student shall approximate the competencies of a professional nurse as they assume the various roles and responsibilities. For each year level, the following objectives should be achieved:

7.1 At the end of the first year, the students shall have acquired an understanding and awareness of themselves as an individual and as a member of the family, the community, and the world with emphasis on personal, societal and professional values responsibilities, rights, and an awareness of physical, social and cultural milieu.

The student shall have an awareness of the competency-based approach in the curriculum and the core competencies under the 11 key areas of responsibility: safe and quality nursing care, communication, collaboration and teamwork, health education, legal responsibility, ethico-moral responsibility, personal and professional development, quality improvement, research, management of resources and environment, and record management.

Specifically, the student shall:

- a. develop a deeper understanding of himself/herself and the multi-factorial dimensions of the individual which can affect health and well being;
- b. recognize his/her duty in improving the quality of life not only for himself/herself but for others as well;
- c. develop a deeper awareness of his/her rights, duties and responsibilities to God, country and the world;
- d. demonstrate beginning skills in the use of the nursing process in caring for healthy individuals;
- e. explain the theoretical foundation of nursing with the four meta-paradigms as guide to his/her nursing practice;
- f. apply the scientific method to his activities wherever possible;
- g. imbibe the values cherished by the nursing profession such as teamwork, respect, love of God, integrity and caring;
- h. discuss the competency based BSN program and the core competencies under the 11 key areas of responsibility; and
- i. demonstrate critical thinking skills in relating with self and others.

7.2 At the end of the second year, the student shall have acquired the holistic understanding of the human person as a bio-psycho-cultural being focusing on the concept of health and illness as it is related to the care of the mother and child in varied settings. The student shall be able to demonstrate the competencies in the following key areas of responsibility such as safe and quality nursing care, communication, collaboration and teamwork, health education, legal responsibility, ethico-moral responsibility, personal and professional development, quality improvement, research, management of resources and environment, and records management.

Specifically, the student shall:

- a. describe the health care delivery system and the role of the nurse in it;
- b. demonstrate ethico-moral, legal responsibilities in the care of individual family and community;
- c. demonstrate the beginning skills in the provision of independent and collaborative nursing functions;
- d. relate the stages of growth and development in the care of clients;
- e. demonstrate beginning skills in the preparation of healthy and therapeutic diets in varied client cases;
- f. explain the dynamics of the disease process caused by microbes and parasites and the environment;
- g. imbibe the core values cherished by the nursing profession such as love of God, country and people, and caring;
- h. design a plan that will focus on health promotion and risk reduction to clients; and
- i. utilize the nursing process in the care of the high risk mother and child in the family.

7.3 At the end of the third year, given actual clients/situations with various physiologic and psychosocial alterations, the student shall be able to demonstrate the competencies in the following key areas of responsibility such as safe and quality nursing care, communication, collaboration and teamwork, health education, legal responsibility, ethico-moral responsibility, personal and professional development, quality improvement, research, management of resources and environment, and records management.

Specifically the student shall:

- a. utilize the nursing process in caring for clients across the lifespan with problems in oxygenation, fluid and electrolyte balance, metabolism and endocrine functioning, inflammatory and immunologic reactions, perception coordination and maladaptive patterns of behavior;
- b. apply the research process in addressing nursing/health problems to improve quality of care;
- c. integrate the role of culture and history in the plan of care;
- d. apply principles of good governance in the effective delivery of quality health care;
- e. observe the core values cherished by the nursing profession such as love of God, country and people, and caring and the bioethical principles in the care of clients;
- f. apply a nursing theory in the management of care of a client for case study; and,
- g. discuss the roles of economics as it impacts on health and illness;

7.4 At the end of the 4th year, given actual clients/situations the student shall be able to demonstrate competencies in all the key areas of responsibility such as safe and quality nursing care, communication, collaboration and teamwork, health education, legal responsibility, ethico-moral responsibility, personal and professional development, quality improvement, research, management of resources and environment, and records management.

Specifically, the student shall:

- a. utilize the nursing care process in caring for clients across the lifespan with problems in cellular aberrations and acute biologic crisis, disaster/emergency situations;
- b. apply a nursing theory in the management of care of a client for case study;
- c. observe the core values cherished by the nursing profession such as love of God, country, people and caring, and the bioethical principles and legal dimensions in the care of clients; and,
- d. demonstrate leadership and management skills in the care of a group of clients in the community and hospital setting utilizing research findings.

Section 8. Curriculum Outline

A. Outline of Total Units of General Education (GE) Courses: 87 Units

Courses	Units
Language and Humanities	21
English 1 & 2 (Communication Skills)	6
English 3 (Speech and Communication)	3
Filipino 1 & 2	6
Philosophy of Man	3
Logic and Critical Thinking	3
Mathematics, Natural Sciences & Information Technology	22
Mathematics (College Algebra)	3
Biostatistics	3
General Chemistry 3/2	5
Biochemistry 3/2	5
Physics 2/1	3
Informatics 2/1	3
Health Sciences	9
Anatomy & Physiology 3/2	5
Microbiology & Parasitology 3/1	4
Social Sciences	15
General Psychology	3
Sociology/Anthropology	3
Humanities [World Civilization & Literature]	3
Economics with Taxation & Land Reform	3
Bioethics	3
Mandated Subjects	20
Life, Works and Writings of Rizal	3
Philippine History, Government & Constitution	3
PE 1 to 4 [2 units each]	8
National Service Training Program 1& 2	6

B. Outline and Units of Professional Courses 115 Units

Theoretical Foundations in Nursing	3
Health Assessment (2/1*)	3
Community Health Nursing (3/2*)	5
Nutrition and Diet Therapy (3/1)	4
Health Education	3
Pharmacology	3
Nursing Research I (2/1)	3
Nursing Research II	2
Competency Appraisal I	3
Competency Appraisal II	3
Elective I**	2
Elective II**	2
NCM 100 – Fundamentals of Nursing Practice (3/2*)	5
NCM 101 -- Care of Mother, Child and Family (4/4*)	8

NCM 102 Care of Mother, Child, Family and Population Group At-risk or With Problems (5/6*)	11
NCM 103 Care of Clients with Problems in Oxygenation, Fluid & Electrolyte Balance, Metabolism and Endocrine (8/6*)	14
NCM 104 Care of Clients with Problems in Inflammatory and Immunologic Response, Perception and Coordination (5/4*)	9
NCM 105 Care of Clients with Maladaptive Patterns of Behavior (4/2*)	6
NCM 106 Care of Clients with Problems in Cellular Aberrations, Acute Biologic Crisis including Emergency and Disaster Nursing (6/5*)	11
NCM 107 Nursing Leadership and Management (4/3*)	7
Intensive Nursing Practicum (8*)	8

*Related Learning Experience

Grand Total Number of Units = 202

At the end of the B. S. Nursing program, the total number of related learning experiences, skills laboratory/clinical shall include the following:

Courses	Skills Lab	Clinical	RLE Contact Hours (1 credit unit =51 hours)
Health Assessment	1	0	51
Community Health Nursing	0.5	1.5	102
Nursing Research I	1	0	51
Nursing Research II	2	0	102
Nursing Care Management 100	2	0	102
Nursing Care Management 101	1	3	204
Nursing Care Management 102	1	5	306
Nursing Care Management 103	1	5	306
Nursing Care Management 104	1	3	204
Nursing Care Management 105	0	2	102
Nursing Care Management 106	2	3	255
Nursing Care Management 107-B	0	3	153
Intensive Nursing Practicum	0	8	408
Total	12.5	33.5	2,346 hours
	46 RLE Units		

At the end of the B. S. Nursing program, the total number of laboratory units/hours shall comprise the following courses:

Courses	Laboratory Units	Laboratory Hours 1 unit lab=54 hours
General Chemistry	2	108
Anatomy & Physiology	2	108
Biochemistry	2	108
Physics	1	54
Microbiology & Parasitology	1	54
Nutrition with Diet Therapy	1	54
Informatics	1	54
TOTAL	10 units	540 hours

Section 9. Program of Study

BACHELOR OF SCIENCE IN NURSING Prototype 4-Year Curriculum

FIRST YEAR

First Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
English 1	Communication Skills I	3	0	0	0	3
Filipino 1	Komunikasyon sa Akademikong Filipino	3	0	0	0	3
Chem 1	General Chemistry (Organic & Inorganic)	3	2	0	0	5
TFN	Theoretical Foundations in Nursing	3	0	0	0	3
Math 1	College Algebra	3	0	0	0	3
Psych	General Psychology	3	0	0	0	3
PE 1	Physical Education 1	2	0	0	0	2
NSTP 1	National Service Training Program	3	0	0	0	3
Total		23	2	0	0	25

Second Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
English 2	Communication Skills II	3	0	0	0	3
Filipino 2	Pagbasa at Pagsulat Tungo sa Pananaliksik	3	0	0	0	3
Ana/Physio	Anatomy and Physiology	3	2	0	0	5
NCM 100	Fundamentals of Nursing Practice	3	0	2	0	5
Chem 2	Biochemistry	3	2	0	0	5
PE 2	Physical Education 2	2	0	0	0	2
NSTP 2	National Service Training Program	3	0	0	0	3
Total		20	4	2	0	26

SUMMER

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
Physics	Physics	2	1	0	0	3
Logic	Logic and Critical Thinking	3	0	0	0	3
HA	Health Assessment	2	0	1	0	3
Total		7	1	1	0	9

SECOND YEAR

First Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	CL	
NCM 101	Care of Mother, Child and Family	4	0	1	3	8
CHN	Community Health Nursing	3	0	0.5	1.5	5
Micro/Para	Microbiology and Parasitology	3	1	0	0	4
Philo	Philosophy of Man	3	0	0	0	3
Bioethics	Bioethics	3	0	0	0	3
PE 3	Physical Education 3	2	0	0	0	2
Total		18	1	1.5	4.5	25

Second Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	CL	
NCM 102	Care of Mother, Child, Family and Population Group At-risk or With Problems	5	0	1	5	11
NuDiet	Nutrition and Diet Therapy	3	1	0	0	4
Pharma	Pharmacology	3	0	0	0	3
Socio/Anthro	Sociology with Anthropology	3	0	0	0	3
PE 4	Physical Education 4	2	0	0	0	2
Total		16	1	1	5	23

SUMMER

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
HealthEd	Health Education	3	0	0	0	3
Info	Informatics	2	1	0	0	3
English 3	Speech Communication	3	0	0	0	3
Total		8	1	0	0	9

THIRD YEAR

First Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
NCM 103	Care of Clients with Problems in Oxygenation, Fluid & Electrolyte Balance, Metabolism and Endocrine	8	0	1	5	14
Biostat	Biostatistics	3	0	0	0	3
Econ	Economics with Taxation & Land Reform	3	0	0	0	3
Humanities	Humanities [World Civilization and Literature]	3	0	0	0	3
Rizal	Life, Works and Writings of Rizal	3	0	0	0	3
Total		20	0	1	5	26

Second Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
NCM 104	Care of Clients with Problems in Inflammatory and Immunologic Response, Perception and Coordination	5	0	1	3	9
NCM 105	Care of Clients with Maladaptive Patterns of Behavior	4	0	0	2*	6
PhilHist	Philippine History, Government & Constitution	3	0	0	0	3
Nres 1	Nursing Research 1	2	0	1	0	3
Elective 1	Elective Course 1	2	0	0	0	2
Total		16	0	2	5	23

**The clinicals in NCM 105 may be done in Summer for Cross affiliation purposes.*

FOURTH YEAR

First Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
NCM 106	Care of Clients with Problems in Cellular Aberrations, Acute Biologic Crisis including Emergency and Disaster Nursing	6	0	2	3	11
CA 1	Competency Appraisal 1	3	0	0	0	3
NCM 107-A	Nursing Leadership and Management (Lecture)	4	0	0	0	4
Nres 2	Nursing Research 2	0	0	2	0	2
Elective 2	Elective Course 2	2	0	0	0	2
Total		15	0	4	3	22

Second Semester

Course Code	Course Name	Lec	Lab	RLE		Units
				SL	C	
INP	Intensive Nursing Practicum	0	0	0	8	8
CA 2	Competency Appraisal 2	3	0	0	0	3
NCM 107-B	Nursing Leadership and Management (RLE)	0	0	0	3	3
Total		3	0	0	11	14

SL - Skills Laboratory

C - Clinicals

**ARTICLE VI
OTHER REQUIREMENTS**

Section 10. Program Administration:

10.1 The College shall be administered by a full-time dean with the following qualifications:

- a. Filipino citizen;
- b. Registered Nurse in the Philippines with current and valid PRC ID;
- c. Holder of Master's degree in Nursing (MAN, MN, MSN) conferred by a college or university duly recognized by the Commission on Higher Education;
- d. Has at least one (1) year experience of clinical practice and a total of at least five (5) years experience in teaching, administration and supervision of nursing education;
- e. Physically and mentally fit;
- f. Of good moral character;
- g. Has no other teaching assignments or administrative functions in other public/private institutions or higher education institutions;
- h. Member of accredited professional nursing organization of good standing;
- i. Upon appointment, he/she must be an active member of good standing of the Association of Deans of Philippine College of Nursing (ADPCN); and,
- j. Upon appointment, he/she should have a duly notarized employment contract of at least one (1) academic year renewable annually. The contract should specify the academic rank.

10.2 The Dean shall have the following functions and responsibilities:

- a. Prepares short term and long term plans;
- b. Initiates curriculum development programs;
- c. Plans a rational faculty, academic and non-academic load;
- d. Leads in the faculty and staff development programs;
- e. Manages human, financial and physical resources;
- f. Manages student development programs;
- g. Manages department/college office operations;
- h. Leads development and utilization of instructional resource materials;
- i. Pursues personal and professional development;
- j. Collaborates with the health services, affiliation agencies and other academic units in the implementation of instructional programs;
- k. Monitors proper implementation of the programs;
- l. Initiates research and community extension projects/programs;
- m. Establishes internal and external linkages;
- n. Obtains recognition/accreditation of the nursing program; and
- o. Evaluates the performance results of the nursing program.

10.3 The Dean shall have a teaching load not exceeding a total of six (6) units of lecture in a semester.

Section 11. Faculty Qualifications/Requirements:

11.1 The faculty shall have academic preparation appropriate to his/her teaching assignment. In addition to being a Filipino citizen and having good moral character, the following qualifications must be observed:

For faculty members teaching professional courses:

- a. Registered Nurse in the Philippines with current/valid PRC ID
- b. Holder of Master's degree in Nursing (MAN, MN, MSN), Education or other allied medical and health sciences conferred by a college or university duly recognized by the Commission on Higher Education;
- c. At least one (1) year of clinical practice
- d. A member of accredited professional nursing organization of good standing

For faculty members teaching other courses:

- e. At least a master's degree holder of other allied medical and health sciences as specified under Section 4.3 of this CMO for those teaching health science courses;
- f. At least a master's degree holder in their area of specialization for faculty members teaching general education courses and should only teach courses in their area of specialization;

11.2 When vacancies occur in the teaching force of the college during the school year, substitute or replacement with similar or higher qualifications shall be employed.

11.3 The following conditions for employment must be observed:

- a. The salary of faculty shall be commensurate to his/her academic rank.
- b. Full time faculty member who teaches professional courses shall be responsible for both classroom and Related Learning Experiences (RLEs).

11.4 Upon appointment, a faculty member should have a duly notarized employment contract of at least one (1) academic year, renewable annually specifying academic rank in accordance with his academic training and clinical expertise. The recognized ranks are: instructor, assistant professor, associate professor and professor.

11.5 For the initial operation of the BSN program with two (2) sections of not more than 50 students per section, a minimum of four (4) qualified faculty members teaching professional and health science courses, two (2) of whom must be at least holders of a master's degree in nursing, shall be employed.

11.6 The College of Nursing shall have an updated five-year faculty development program (FDP). The FDP consists of written activities and programs toward the development of the faculty for intellectual, personal, and professional as well as moral and spiritual growth. The program may be in the form of:

- a. graduate studies
- b. scholarship and research grants
- c. in-service and continuing training programs
- d. clinical skills enhancement on official basis for at least two weeks per year

11.7. Teaching Load. The teaching load of faculty members should be as follows:

- a. Full-time faculty members may carry a combined RLE and teaching load of not more than thirty-six (36) units per semester which include consultation hours and other activities related to RLE instruction, research and extension services. One hour of RLE supervision is equivalent to one (1) unit credit.
- b. Nurses who are employed in government and private institutions and at the same time who serve as part time faculty or clinical instructors must secure permit from the employer/s to be given a maximum teaching load of nine (9) units, provided they will render services after office hours. Moreover, the Chief Nurse/Training Coordinator/Supervisor/Head Nurse should not assume any administrative and clinical supervisory function in any nursing school.

11.8. The college of nursing must have a faculty manual containing information and policies on all matters pertaining to the faculty.

11.9. There must be a faculty clinical orientation on policies, standards, guidelines and expectations on the course of affiliating agencies. Likewise, nurses from affiliating agencies employed as preceptors or clinical instructors must be oriented on the BSN Curriculum and the expectations on the course.

Section 12. Library

12.1. Policy. Library services shall provide the instructional and research needs of the staff and students making it one of the most important service units within a higher education institution. It is for this reason that libraries should be given special attention by the administrators of the institution. Libraries should be maintained with a wide and up-to-date collection, qualified staff, communications and connectivity portals.

12.2 Library Staff. The Head librarian should be:

- a) A registered librarian;
- b) Masters' degree holder in Library Science; and,
- c) Posses appropriate professional training.

The library should be staffed with one full time registered librarian for every 1,000 students and a ratio of 1 librarian to 2 staff/clerks.

12.3. Library Holdings. Library holdings should conform to existing requirements for libraries. There should be five (5) book titles per professional subject found in the curriculum at a ratio of one (1) volume per fifteen (15) students enrolled in the program. Book titles must be of recent edition, published within the last five (5) years. The Higher education institutions [HEI] are encouraged to maintain periodicals and other non-print materials relevant to the nursing program to aid the faculty and students in their academic works. CD-ROMs may complement a library's book collection but should not be considered a replacement for the same.

a. Opening of new BSN program shall have at least 3,000 total number of books accessioned, 30% of which shall consist of professional books. Ten percent (10%) of the total professional book collection shall be of Filipiniana collection.

b. The library collection during the recognition of the BS Nursing program shall double the book collection specified in 12.3.a.

12.4. Journals. For the opening of new BS nursing program, the HEI shall have a regular and updated subscription to at least seven (7) professional foreign nursing journals and at least two (2) local journals in the following areas:

- a. Maternal and Child Nursing
- b. General Nursing
- c. Nursing Research
- d. Psychiatric Nursing
- e. Nursing Management/Leadership
- f. Pediatric Nursing
- g. Medical-Surgical Nursing

For the recognition of the BS nursing program, the subscription of foreign nursing journals should be regularly updated and maintained. The number of copies of these journals shall be increased depending upon the student population.

In addition to the core book collection, a core periodical collection of current and relevant titles (local and foreign) shall also be provided. Periodicals shall include serials, magazines and newspapers. A minimum of five (5) titles are required. The recommended number of periodicals based on enrollment is as follows:

Enrollment	No. of copies of Periodicals
For every 250 students	5 copies per title

12.5. Regular weeding out program shall be undertaken to keep the collections relevant and up-to-date within the last five (5) years. Archived collections shall not be more than 30% of the total collections.

12.6. Stamping of Library Collections. For purposes of identification, the library collection including general education books, professional books, reference materials, journals and similar other collections shall be stamped with the name of college/university and the campus where the institution is located.

12.7. Internet Access. Internet access is encouraged but should not be made a substitute for book holdings.

12.8. Space Requirements. The following are the minimum requirements for the library:

- a. At least 126 square meters or approximately two (2) classrooms shall be required for the library.
- b. At any one time, a library space should accommodate at least five per cent (5%) of the total enrollment.
- c. It should include space for collections, shelving areas, stockroom, reading area and office space or lounge for staff. The facilities shall be designed to attract and provide safety and promote operational efficiency and effectiveness of use. In addition, provision for future expansion should be made.

12.9. Finance. All library fees should be used exclusively for library operations and procurement for collections, furniture and fixtures, equipment and facilities, maintenance and staff development.

12.10. Networking. School libraries shall participate in inter-institutional activities and cooperative programs whereby resource sharing is encouraged.

12.11. Accessibility. The library should be accessible to all and should be open to serve the needs of users even beyond class hours. Users include members of the faculty, students and employees of the institution.

Section 13. Facilities and Equipment

13.1. Laboratory Requirements:

Laboratories should conform to existing requirements as specified in RA 6541, "The National Building Code of the Philippines" and Presidential Decree 856, "Code of Sanitation of the Philippines." List of required and recommended equipment are listed in each course requirement.

A system for identification of laboratory equipment, supplies and models should be observed.

13.2. Classroom Requirements:

- a. For regular lecture class, the class size shall have a maximum of 50 students.
- b. For science laboratory class, the class size shall have a maximum of 25 students
- c. For special lectures, a class size of more than 45 students may be allowed as long as the required facilities are provided.

The classroom area shall have at least 7 meters x 9 meters or 63 square meters.

13.3. Nursing Skills Laboratory:

The nursing skills laboratory must be well-lighted and well-ventilated. Its demonstration room and practice area for return demonstration must have an area of at least 8m. x 14m. or 112 sq.m. The nursing skills laboratory simulates major areas in hospital setting and equipped with basic instruments, equipment and supplies, to aid in the development of the competencies in performing nursing procedures. Specifically, the nursing skills laboratory shall have:

- a. An amphitheater-style demonstration room that can accommodate a maximum of 50 students at one time with lavatory and running water;
- c. Ratio of bed to practicing students is 1:2 or a practice area for return demonstration where there is one (1) bed to two (2) students at any given time;
- d. At least two (2) doors which will serve as an entrance and exit;
- e. At least one (1) fire extinguisher placed outside the door in each science laboratory/nursing skills laboratory. The fire extinguisher must have a record of refill and expiry date attached to the unit;
- f. Basic demonstration models namely:
 1. Birthing model
 2. Newborn Model
 3. Adult bisexual model with the following contraptions for:
 - 3.1 basic life support
 - 3.2. tracheostomy care
 - 3.2. colostomy care
 - 3.3 catheterization
 - 3.4 enema
 - 3.5. parenteral/intravenous (IV)
- g. Equipment
 1. Electrocardiogram (ECG) monitoring demonstration
 2. Suction apparatus
- h. Ratio of demonstration models to practicing students is 1:10, to facilitate learning.

13.4. Clinical Facilities and Resources:

Related Learning Experiences (RLEs) are teaching-learning opportunities designed to develop the competencies of students utilizing processes in various health situations. These could be sourced from, but not limited to: lying-in clinics, schools, industrial establishments, community, out-patient clinics and general and specialty hospitals.

Base Hospital. The base hospital is a health facility utilized by a higher education institution with nursing program offering as a source of basic or primary related learning experiences. The hospital maybe independent or owned or operated by the institution or utilized by the institution in accordance with an effective and duly notarized Memorandum of Agreement between the institution and the base hospital which clearly specifies the responsibilities of each party.

The base hospital of a nursing school should meet the following requirements:

- a. Has current accreditation by the DOH-Bureau of Licensing and Regulation as Level IV Hospital (Tertiary Care/Teaching/Training Hospital). However, Level III Hospitals (Secondary Care Hospitals) may be considered provided that the hospital can provide the following:
 - a.1 adequate case load for the number of students enrolled as stipulated in Article VII, Section 15-e. 9.
 - a.2 adequate facilities for the teaching and learning needs of the students.
- b. Has minimum capacity of 100 beds with general services and minimum bed occupancy of eighty percent (80%);
- c. Should be accessible and located within the region where the nursing school is situated. In the case of nursing schools located in Metro Manila, the base hospital should be located within Metro Manila.
- d. Sixty per cent (60%) of the total bed capacity of the base hospital shall be used for the RLEs of students.
- e. Should have a master rotation plan indicating the schedule/areas of all the schools utilizing the hospital for training of students.

Affiliation Hospital is a health facility being utilized by the higher education institution in specialized areas for supplementary clinical learning of students such as mental, orthopedics and communicable diseases. A Contract of Affiliation shall be used as a legal document to show the terms of references among involved parties. Parties to the contract of affiliation should provide and maintain an

environment conducive for the attainment of the teaching-learning objectives. The nursing school and the hospital agency should establish effective coordination and cooperation. Open communication should exist among the medical staff and the school personnel.

Cross regional affiliations will not be allowed unless in cases where specialty areas cannot be found in the region.

The base hospital/s, affiliation hospital/s and community health agency/ies being used by the students for RLEs either conducted in urban or rural community should have the following facilities:

- a. classroom for conference
- b. library
- c. comfort room
- d. dressing room
- e. lounge
- f. locker

Provision should be made for adequate physical facilities, supplies and equipment for effective nursing care and learning experiences of students.

The nursing service should be provided with a designated training coordinator and the required staffing composed of qualified professional and non-professional personnel.

The faculty and the nursing service personnel of the affiliation agency should work together in the planning, implementation and evaluation of the related learning experiences of students.

There should be an adequate number of patients varying in age, sex, level/acuity and types of illness desired for teaching-learning experience of different curricular levels.

13.5. Virtual Nursing Skills Laboratory:

Higher education institutions are encouraged to put up Virtual Skills Laboratory to supplement and complement the related learning experiences prior to actual experience.

ARTICLE VII INSTRUCTIONAL STANDARDS

Section 14. Standard of Instruction. The institution must maintain a high standard of instruction, utilizing appropriate and updated course syllabi/references and instructional methods/strategies taking into consideration the key areas of responsibility

(safe and quality nursing care, health education, communication, collaboration & teamwork, legal responsibility, ethico-moral responsibility, personal & professional development, research, quality improvement, records management and management of resources and environment) that contribute to quality nursing education. The following should be strictly observed:

- a. Professional nursing subjects should be offered with the corresponding RLEs taking into consideration the pre-requisites, sequencing, continuity and integration requirements.
- b. Credit for the completion of the course shall be based on the fulfillment of curricular requirements. The grades on professional courses shall be based on the course credit (i.e. lecture units and RLE units).
- c. The ratio of faculty to student in science laboratory class is 1:25 while regular classroom is 1:50. The institution shall provide for a systematic and continuing plan of evaluation of the student's progress through a marking system that is consistent and congruent with set objectives.
- d. A system of academic evaluation shall be instituted and implemented for monitoring and evaluating students and teacher performance.
- e. There shall be a regular academic audit on instructional resources such as syllabi, textbooks, modules, audiovisual materials and others such as software.
- f. Academic records of faculty members must be properly kept and maintained in the college of nursing.
- g. The competency standards for nursing practice in the Philippines must be an integral part of the nursing education process, therefore, the Philippine Nursing Core Standards shall serve as the framework for the development of instructional standards of the BS Nursing curriculum as provided by the PRC-BoN Resolution No.112 s. 2005 and future amendments consistent thereto; as well as PRC-BoN Memorandum No. 01 s. 2009 dated April 14, 2009 entitled, "*Policy Guidelines on Intrapartal, Immediate Care of the Newborn and Intra-operative Care*".

Section 15. The teaching-learning process is composed of the theoretical/didactic and experiential/RLE. The Related Learning Experience (RLE) is composed of Clinicals and Skills Laboratory. The RLE activities are carefully selected to develop competencies utilizing the nursing process in varying health situations. The following conditions must be observed:

- a. Related Learning Experience (clinicals) shall be offered simultaneously or immediately after the lecture. Classroom and RLE activities must be congruent with the objectives of the course.
- b. Faculty teaching the lecture shall supervise students in their RLE. In the case of team teaching, there should be close coordination and collaboration between the lecturer and the clinical faculty.

- c. A documented RLE rotation plan showing distribution of students and faculty supervision in each clinical area of base hospital and affiliation agencies shall be made available.
- d. Faculty compensation shall be based on the computation that one (1) hour RLE is equivalent to one (1) lecture hour.
- e. Effectiveness and efficiency of the Related Learning Experience, shall consider the following factors:
 - e.1 Quality of supervision of clinical instructors and teaching-learning process
 - e.2 Readiness and capability of the learner
 - e.3 Quality of the learning resources both in institutions and communities
 - e.4 Adequate number and variety of clientele
 - e.5 Utilization of appropriate feedback mechanism
 - e.6 Adequate number of qualified nursing staff and other personnel
 - e.7 Quality of nursing care services
 - e.8 Compliance with the required equivalence of fifty one (51) hours to one (1) unit RLE
 - e.9 Ratio of student to clientele depends upon the objectives and the capacity of the student.

The ratio of student to clientele shall be:

Level	1 st Semester	2 nd Semester
I	NA	1:1
II	1:1	1:2
III	1:2-3	1:3-4
IV	1:5	1:6

The ratio depends upon the client group, e.g, ICU 1:1-2; Psych 1:1; Community-based experience 1:1 Family; 1:1 Population Group per catchment area; 1-2:1 Community (depending on the size of the barangay).

The ratio of faculty to student for RLE (Skills Laboratory) shall be:

Level	1 st Semester	2 nd Semester	Summer
I	NA	1:8-10	1:8-10
II	1:8-10	1:8-10	NA
III	1:10-12	1:10-12	NA
IV	1:12-15	1:12-15	NA

The ratio of faculty to student for RLE (Clinicals in Hospital/Community setting) shall be:

Level	1 st Semester	2 nd Semester
I	NA	NA
II	1:8-10	1:8-10
III	1:10-12	1:10-12
IV	1:12-15	1:12-15

Section 16. Recognition and Accreditation

- a. For government recognition, an increase in student population shall be subject to proportionate increase in resources both in classroom and clinical area, subject to CHED approval. For this purpose, CHED Regional Offices shall strictly monitor compliance herein.
- b. Nursing schools that are in existence for a period of five (5) years are encouraged to undergo program accreditation.

ARTICLE VIII RESEARCH REQUIREMENTS

The administration shall encourage and support research among its students and faculty and promote utilization of research findings to guide and improve nursing practice, educational management and other aspects of the nursing program.

All students shall complete a research project during the course of study.

Faculty research outputs and publications shall be considered in faculty promotions and academic ranking. Strict adherence to ethics in research must be observed.

There shall be an adequate budget allocated for research and publication. A functional research committee or office should support research and publication activities.

ARTICLE IX ADMISSION, SELECTION AND RETENTION OF STUDENTS

The school shall have a well-defined admission, selection, promotion and retention policy published and made known to students and reflected in the Student Handbook. In addition, the college shall administer entrance examination to incoming freshmen students covering the following areas:

- a. English
- b. Science
- c. Mathematics
- d. Inductive Reasoning

The number of students admitted to the College of Nursing shall be based on the following:

- a. qualified faculty
- b. teaching/learning resources
- c. resources of the base hospital/affiliation agencies based on:
 - clientele
 - staffing
 - facilities/services
 - number of student affiliates

Records and evidences of actual implementation of these policies must be made available.

A student is allowed to enroll a course after he/she has satisfactorily passed all its pre-requisite courses.

A student shall be allowed to enroll only the regular semestral load. However, academic load for graduating students must be guided by appropriate CHED issuances.

All students in the BS Nursing program shall strictly adhere to the regular rotation of RLE and schedule of classes. The Special BS Nursing program provided in CMO No. 9 s. 2004 shall no longer be allowed.

ARTICLE X RESIDENCY REQUIREMENTS

As a general rule, a candidate for graduation must have taken the last curricular year level in the college. The student shall be evaluated according to the criteria or system of evaluation required by the college to determine proficiency in all professional courses.

ARTICLE XI SANCTIONS

Non-compliance with the provisions of this CMO shall, after due process, cause the Commission to revoke government permit/recognition or deny issuance of authority to operate the nursing program.

The average national passing percentage in the Philippine Nurses Licensure Examination from 2004 to 2008 is 45.91%. Two thirds (2/3) of 45.91% is thirty percent (30%), the basis for the implementation of gradual phase-out.

Thus, in the initial implementation of the gradual phase out of the nursing program, an average of below 30% for a three-year period (SY 2010-2011, 2011-2012, 2012-2013) in the Philippine Nurse Licensure Examination starting from 2013 shall be implemented by the CHED, subject to the following guidelines:

1. The official results of the Nurse Licensure Examination issued by the Board of Nursing of the Professional Regulation Commission shall be the basis in phasing-out of nursing programs.

2. The performance of the school shall be based upon the average rating obtained within the schoolyear, namely, ratings in the June and December examinations. If the school has only one examination undertaken in a year, this shall be considered the annual rating.
3. The average passing rate obtained by HEIs for the past three (3) years shall be the basis in phasing-out the program.
4. The computation of the 30% shall only involve the ratings of the examinees who took the Nurse Licensure Examination for the first time.

ARTICLE XII TRANSITORY PROVISION

Higher education institutions that have been granted permit or recognition to offer the BS Nursing program are required to fully comply with all the requirements in this CMO within three (3) years after the date of effectivity. There shall be close monitoring of nursing programs by the Commission.

ARTICLE XIII SEPARABILITY AND REPEALING CLAUSE

Any provision of this Order, which may thereafter be held invalid, shall not affect the remaining provisions.

All CHED issuances, rules and regulations or parts thereof that are inconsistent with the provisions of this CMO are hereby repealed.

ARTICLE XIV EFFECTIVITY CLAUSE

Higher education institutions [HEIs] that opted to implement CMO No. 30 s. 2001 shall allow their students to the finish BSN curriculum under CMO No. 30 s. 2001 while those HEIs that opted to implement CMO No. 5 s. 2008 during the SY 2008-2009 shall allow their students to graduate under CMO No. 14 s. 2009.

This CMO shall take effect starting Schoolyear 2009-2010, fifteen (15) days after its publication in the Official Gazette or in a newspaper of national circulation.

EMMANUEL Y. ANGELES
Chairman

Quezon City, Philippines
April 28, 2009

COURSE SPECIFICATIONS

Course Name	:	THEORETICAL FOUNDATIONS IN NURSING
Course Code	:	TFN
Course Description	:	This course deals with the meta concepts of a person, health, environment and nursing as viewed by the different theorists. Likewise, it includes non-nursing theories such as systems, developmental and change theories. It presents how these concepts and theories serve as guide to nursing practice. It further deals with health as a multifactorial phenomenon and the necessary core competencies that the nurse needs to develop.
Course Credit	:	3 units
Contact Hours/sem	:	54 lecture hours
Placement	:	1 st Year, 1 st Semester
Course Objectives:		At the end of the course and given simulated conditions/situations, the student will be able to: <ol style="list-style-type: none"> 1. differentiate views given by various nursing theorists on person, health, environment and nursing 2. describe the various non-nursing theories as applied to nursing 3. utilize selected nursing theories and non-nursing theories in the care of clients 4. demonstrate selected competencies under the eleven key areas of responsibilities pertinent to nursing
Course Outline	:	<p>I. Overview</p> <ol style="list-style-type: none"> 1. Definition of concept, theory, principle 2. Characteristics of a theory 3. Components of a theory 4. Purposes of nursing theory 5. Nursing paradigm <p>i. Different views of person, health, environment and nursing by various nursing theorists</p> <ol style="list-style-type: none"> 1. Florence Nightingale 2. Ernestine Weidenbach 3. Virginia Henderson 4. Faye Glenn Abdellah 5. Jean Watson 6. Dorothea Orem 7. Myra Estrine Levine 8. Martha Rogers 9. Dorothy Johnson 10. Callista Roy 11. Betty Neuman 12. Imogene King 13. Hildegard Perplau

	<ul style="list-style-type: none"> 14. Ida Jean Orlando 15. Joyce Travelbee 16. Madelline Leininger 17. Rosemarie Rizzo Parse 18. Joyce J. Fitzpatrick 19. Anne Boykin and Savina Schoenhoffer 20. Margaret Neuman 21. Josephine E. Paterson 22. Loretta Zderad <p>III. Different Views of Non-nursing Theories:</p> <ul style="list-style-type: none"> 1. Systems Theory 2. Change Theory 3. Developmental Theory <p>IV. Health as a Multifactorial Phenomenon</p> <p>V. Interlinking Relationships of Factors Affecting Health</p> <p>VI. Care Enhancement Qualities including Core Values</p> <p>VII. Competency-based Approach to the BSN Curriculum</p> <p>VIII. Core competencies under the 11 Key Areas of Responsibility</p>
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Course Name	:	ANATOMY AND PHYSIOLOGY
Course Code	:	Ana/Physio
Course Description	:	This course deals with the physiologic concepts, principles and basic anatomical structure.
Course Credit	:	3 units lecture, 2 units lab
Contact Hours/sem	:	54 lecture hours, 108 lab hours
Pre-requisite	:	None
Placement	:	1 st year, 2nd semester
Course Objectives:		<p>At the end of the course and given specific situations/conditions, the student should be able to:</p> <ul style="list-style-type: none"> 1. describe the anatomic structures and physiologic mechanisms/processes/systems involved in the following physiologic concepts: <ul style="list-style-type: none"> 1.1 locomotion 1.2 fluid transport 1.3 gas exchange 1.4 fluid and electrolyte, acid/base dynamics 1.5 nutrition metabolism 1.6 chemical regulation 1.7 neural regulation 1.8 sensory intake 1.9 protection 1.10 awareness and response to the environment 1.11 reproduction 2. utilize basic anatomical facts and physiological concepts and principles in the nursing care of individuals

Course Outline	: <ul style="list-style-type: none"> I. Anatomy <ul style="list-style-type: none"> A. Definition <ul style="list-style-type: none"> 1. Types of Study <ul style="list-style-type: none"> a. Systematic Anatomy b. Regional Anatomy c. Surface Anatomy B. Physiology <ul style="list-style-type: none"> 1. Definition 2. Types of Study: <ul style="list-style-type: none"> a. According to the organism involved b. According to levels of organism within a given organism C. Structural and Functional organization <ul style="list-style-type: none"> 1. Seven Structural Levels <ul style="list-style-type: none"> a. Chemical b. Organelle c. Cell d. Tissues e. Organ f. Organ System g. Organism D. Characteristics of Life <ul style="list-style-type: none"> 1. Organization 2. Metabolism 3. Responsiveness 4. Growth 5. Development 6. Reproduction E. Homeostasis <ul style="list-style-type: none"> 1. Negative feedback 2. Positive feedback F. Terminology and the Body Plan <ul style="list-style-type: none"> 1. Directional Terms 2. Planes/Sections 3. Body Regions 4. Body Cavities 5. Serous Membranes II. Cells, Tissues, Glands and Membranes <ul style="list-style-type: none"> A. Cells <ul style="list-style-type: none"> 1. Cell Structure and Function 2. Whole Cell Activity B. Tissues <ul style="list-style-type: none"> 1. Basic Tissue Types <ul style="list-style-type: none"> a. Epithelial tissue b. Connective tissue c. Muscle tissue d. Nervous tissue
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- e. Membranes
- f. Inflammation
- g. Tissue repair
- C. The Chemistry of Life
 - 1. Basic Chemistry
 - 2. Chemical Reactions
 - 3. Acids and Bases
 - 4. Water
 - 5. Organic Molecules
- III. The Respiratory System
 - A. Anatomy of the Respiratory System
 - 1. Nose & Nasal Cavities
 - 2. Pharynx
 - 3. Larynx
 - 4. Trachea
 - 5. Bronchi & smaller air passages
 - 6. Lungs
 - 5. Pleural cavities
 - B. Ventilation and Lung Volumes
 - 1. Phases of Ventilation
 - 2. Mechanisms of Ventilation
 - 3. Collapse of the Lung
 - 4. Pulmonary volumes and capacities
 - C. Gas Exchange
 - D. O₂ and CO₂ transport in the Blood
 - E. Modification of Ventilation
- IV. The Cardio Vascular System
 - A. The Heart
 - 1. The Blood Vessels and Circulation of Blood
 - a. Structure & Function
 - b. Blood Vessels of the Pulmonary Circulation
 - c. Blood Vessels of the Systemic Circulation
 - d. The Physiology of Circulation
 - e. Control of Blood Vessels
 - f. Regulation of Arterial Pressure
 - B. The Blood
 - 1. Function
 - 2. Composition of Blood
 - a. Plasma
 - b. Cellular Content
 - c. WBC or Leukocytes
 - d. Platelets or Thrombocytes
 - 3. Preventing Blood Loss
- V. The Lymphatic System and Immunity
 - 1. Functions
 - 2. Lymphatic Vessels
 - 3. Lymphatic Organs
 - 4. Immunity

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| | <p>VI. The Digestive System</p> <ol style="list-style-type: none"> 1. Activities in the Digestive System 2. Trunks or Layers of the Digestive Tract 3. Organs and Functions of the Digestive System 4. Movements and Secretions in the Digestive System 5. Metabolism <p>VII. The Endocrine System</p> <ol style="list-style-type: none"> 1. Hormones 2. The Endocrine Glands and their Hormones 3. Other Hormones <p>VIII. The Urinary System and Fluid Balance</p> <ol style="list-style-type: none"> 1. Structure and function 2. Kidney 3. Ureters 4. Urinary Bladder 5. Urethra <p>IX. Fluids and Electrolytes</p> <ol style="list-style-type: none"> 1. Body Fluid Compartments 2. Composition of Fluid in the body Fluid Compartments 3. Exchange between Body fluid Compartments 4. Regulation of Extracellular Fluid Composition 5. Regulation of Acid-Base Balance 6. Alterations in the Buffering Mechanism <p>X. The Integumentary System</p> <ol style="list-style-type: none"> 1. Structure of the Skin 2. Accessory Skin Structures <p>XI. The Nervous System</p> <ol style="list-style-type: none"> 1. Division of the Nervous System 2. Cells of the Nervous System 3. Central Nervous System 4. Peripheral Nervous System 5. Autonomic Nervous System <p>XII. The Special Senses</p> <ol style="list-style-type: none"> 1. Major Groups 2. General Sense 3. Special Senses <p>XIII. The Skeletal System</p> <ol style="list-style-type: none"> 1. Major Components 2. Connective Tissue 3. General Feature of Bone 4. General Classification of Bone Anatomy <p>XIV. The Muscular System</p> <ol style="list-style-type: none"> 1. Characteristics of Skeletal muscle 2. Smooth Muscle Anatomy 3. Skeletal Muscle Anatomy <p>XV. The Reproductive System</p> |
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		1. Male Reproductive System a. Parts b. Physiology of male reproduction 2. Female Reproductive System a. Parts 3. Physiology of the female reproduction
Laboratory Supplies and Equipment	:	Anatomical models, charts Videos and CD ROMs Preserved specimens and slides Reflex hammer
		Sphygmomanometer Stethoscope Microscope

Course Name	:	FUNDAMENTALS OF NURSING PRACTICE
Course Code	:	NCM 100
Course Description	:	This course provides the students with the overview of nursing as a science, an art and a profession. It deals with the concept of man as a holistic being comprised of bio- psycho- socio and spiritual dimensions. It includes a discussion on the different roles of a nurse emphasizing health promotion, maintenance of health as well as prevention of illness utilizing the nursing process. It includes the basic nursing skills needed in the care of individual clients.
Course Credit	:	3units lecture, 2units RLE (Skills Lab)
Contact Hours/Sem	:	54 hours lecture, 102 RLE hours Skills Lab
Prerequisite	:	General Chemistry, Theoretical Foundations of Nursing
Co-requisite	:	Anatomy & Physiology, Biochemistry
Placement	:	1 st Year, 2 nd semester
Course Objectives:	:	At the end of the course and given actual or simulated situations /conditions, the student will be able to: 1. utilize the nursing process in the holistic care of client for the promotion and maintenance of health 1.1 Assess with the client his/her health status and risk factors affecting health 1.2 Identify actual wellness/at risk nursing diagnosis 1.3 Plan with client appropriate interventions for the promotion and maintenance of health 1.4 Implement with client appropriate interventions for the promotion and maintenance of health 1.5 Evaluate with client outcomes of a healthy status 2. ensure a well-organized recording and reporting system 3. observe bioethical principles and the core values (love of God, caring, love country and of people) 4. relate effectively with clients, members of the health team and others in work situations related to nursing and health; and, 5. observe bioethical concepts/ principles and core values and nursing standards in the care of clients

Course Outline	:	<ul style="list-style-type: none"> I. Nursing as a Profession <ul style="list-style-type: none"> A. Profession <ul style="list-style-type: none"> 1. Definition 2. Criteria B. Nursing <ul style="list-style-type: none"> 1. Definition 2. Characteristics 3. Focus: Human Responses 4. Personal and professional qualities of a nurse C. History of Nursing <ul style="list-style-type: none"> 1. In the world 2. In the Philippines (include the history of own nursing school) D. Development of modern nursing E. Growth of Professionalism <ul style="list-style-type: none"> 1. Profession <ul style="list-style-type: none"> a. Specialized education b. Body of knowledge c. Ethics d. Autonomy 2. Carpers four patterns of knowing <ul style="list-style-type: none"> a. Nursing science b. Nursing ethics c. Nursing esthetics d. Personal knowledge F. Overview of the Professional Nursing Practice <ul style="list-style-type: none"> 1. Level of Proficiency according to Benner (Novice, Beginner, Competent, Proficient, Expert) 2. Roles and Responsibilities of a Professional nurse 3. Scope of Nursing Practice based on RA 9173 4. Overview of the Code of Ethics for Nurses/Filipino Bill of Rights/Legal Aspects 5. Professional/legal and moral accountability / responsibility G. Different Fields in Nursing <ul style="list-style-type: none"> 1. Institutional nursing (hospital staff nursing) 2. Community health nursing (school nursing /industrial nursing/public health nursing) 3. Independent nursing practice 4. Nursing in education 5. Nursing in other fields H. Communication Skills <ul style="list-style-type: none"> 1. Effective communication 2. Purposes of therapeutic communication 3. Components of communication 4. Criteria for effective verbal communication 5. Guidelines for active & effective listening 6. Guidelines for use of touch 7. Developmental consideration in communication
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	<ul style="list-style-type: none"> 8. Communicating with people who are <ul style="list-style-type: none"> a. Physically challenged b. Cognitively challenged c. Aggressive 9. General guidelines for trans-cultural therapeutic communication I. Nursing Process <ul style="list-style-type: none"> 1. Assessment 2. Nursing Diagnosis (as a concept and process) 3. Planning (long-term, short-term, priority setting, formulation of objectives) 4. Intervention (collaborative, independent nursing interventions) 5. Evaluation (formative, summative) 6. Documentation of plan of care /reporting J. Health and Illness: <ul style="list-style-type: none"> 1. Recall concepts learned about man as an individual and as a member of the family 2. Define health, wellness and illness 3. Explain the dimensions of wellness 4. Discuss the Health-Illness Continuum 5. Enumerate the stages of wellness and Illness 6. Describe the three levels of Prevention K. Levels of Care <ul style="list-style-type: none"> 1. Health promotion 2. Disease prevention 3. Health maintenance 4. Curative 5. Rehabilitative L. Basic Interventions to Maintain <ul style="list-style-type: none"> 1. Healthy lifestyle, 2. Oxygenation 3. Fluid and electrolyte balance 4. Nutrition 5. Elimination 6. Temperature regulation 7. Mobility and exercise 8. Hygiene and comfort, 9. Safety, security and privacy 10. Psychosocial and Spiritual Concerns M. Meeting needs related to death and dying/grief and grieving <ul style="list-style-type: none"> 1. Concept of death and dying/grief and grieving 2. Care of the terminally ill patients and their families 3. Post mortem care II. Nursing as an Art <ul style="list-style-type: none"> 1. Definition of Arts 2. Why is nursing an art? 3. Concepts related to the art of nursing
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		<ol style="list-style-type: none"> 4. Self-awareness/concept (Who am I?) 5. Self enhancement (How do I become a better person?) 6. Caring : An Integral Component of Nursing 7. Nursing – Client relationship 8. Therapeutic communication 9. Focus of nursing <p>III. Health and Illness:</p> <ol style="list-style-type: none"> 1. Recall concepts learned about man as an individual and as a member of the family 2. Define Health. Wellness and Illness 3. Explain the dimensions of wellness 4. Discuss the Health-Illness Continuum 5. Enumerate the stages of wellness and Illness 6. Describe the three levels of Prevention
Guide for RLE		<p>Provides opportunity to demonstrate the various nursing procedures learned.</p> <p>Provides opportunity to care for a healthy/well client.</p>
Laboratory Supplies and Equipment	:	<p>Office Supplies such as:</p> <p>Hospital forms and logbook</p> <p>Equipment such as surgical instruments, hospital equipments like bed pan, urinal, surgical beds, stethoscope, non-mercurial BP apparatus, etc.</p> <p>Fixtures such as chart rack, medicine and treatment cards rack</p> <p>Audio visual equipments such as mannequin, models, videos, CD, etc.</p> <p>Appliances such as footstool, wheel chair, stretcher etc.</p> <p>Hospital linens</p>

Course Name	:	HEALTH ASSESSMENT
Course Code	:	HA
Course Description	:	The course deals with concepts, principles & techniques of history taking using various tools, physical examination (head to toe), psycho-social assessment and interpretation of laboratory findings to arrive at a nursing diagnosis on the client across the lifespan in community and hospital settings.
Course Credit	:	2 units lecture, 1 unit RLE
Contact Hours/sem	:	36 lecture hours, 51 RLE hours
Prerequisite	:	Theoretical Foundations of Nursing, General Psychology, Anatomy-Physiology, Chemistry 2 & NCM 100
Placement	:	1 st year, Summer

Course Objectives:	<p>At the end of the course and given simulated and actual conditions/ situations, the student will be able to:</p> <ol style="list-style-type: none"> 1. Differentiate normal from abnormal assessment findings; 2. Utilize concepts, principles, techniques and appropriate assessment tools in the assessment of individual client with varying age group and development; and, 3. Observe bioethical concepts/ principles and core values and nursing standards in the care of clients.
Course Outline :	<ol style="list-style-type: none"> I. Review of the Nursing Process II. Health History Guidelines <ol style="list-style-type: none"> A. Interview <ol style="list-style-type: none"> 1. Purpose 2. Structure 3. Guidelines of an effective interview III. Health History <ol style="list-style-type: none"> A. Personal profile <ol style="list-style-type: none"> 1. Chief complaint of present illness 2. Past health history 3. Current medications 4. Personal habits & patterns of living 5. Psychosocial history <ol style="list-style-type: none"> a. Mental status assessment <ul style="list-style-type: none"> ▪ Children and adolescent ▪ Adults B. Functional assessment <ol style="list-style-type: none"> 1. Adults 2. Physical activities of daily living (PADL) 3. Instrumental activities of daily living (IADL) C. Functional Assessment Tests <ol style="list-style-type: none"> 1. Newborns – Apgar scoring system 2. Infants & children – MMDST 3. Adults <ol style="list-style-type: none"> a. Katz Index of Independence in ADL b. Barthel index D. Review of systems (symptoms) E. Assessment in pregnancy (e.g. LMP, EDC) F. Pediatric additions to health history (e.g. head circumference, weight, height, immunization) G. Geriatric additions to the Health History (e.g. immunization, current prescription medications, over the counter medications, ADL, social support, etc.) III. Physical Examination <ol style="list-style-type: none"> A. Preparation guidelines B. PE guidelines

	<ul style="list-style-type: none"> C. Techniques in physical assessment <ul style="list-style-type: none"> 1. Inspection 2. Auscultation 3. Percussion 4. Palpation D. Continuing assessment <ul style="list-style-type: none"> 1. Pain 2. Fever E. Pediatric adaptation <ul style="list-style-type: none"> 1. General guidelines 2. Specific age groups F. Geriatric adaptations <ul style="list-style-type: none"> 1. General guidelines 2. Modifications G. Cultural considerations <ul style="list-style-type: none"> 1. Sequence of PE (adult/pedia/geriatric adaptations) <ul style="list-style-type: none"> a. Overview b. Integument c. Head d. Neck e. Back f. Anterior Trunk g. Abdomen h. Musculoskeletal system i. Neurologic system j. Genitourinary system H. Clinical alert I. Documentation of findings J. Patient & family education & home health teaching <p>IV. Diagnostic tests (routine laboratory exams)</p> <p>V. Appropriate nursing diagnosis</p>																				
Guide for RLE	<p>Provides opportunity to demonstrate the various nursing procedures learned.</p> <p>Provides opportunity to care for clients.</p>																				
Laboratory Supplies and Equipment	<table border="0"> <tr> <td>Assessment forms</td> <td>Patient's chart</td> </tr> <tr> <td>Ophthalmoscope</td> <td>Watch with second hand</td> </tr> <tr> <td>Otoscope</td> <td>Sphygmomanometer</td> </tr> <tr> <td>Flashlight or penlight</td> <td>Stethoscope</td> </tr> <tr> <td>Tongue depressor</td> <td>Gloves and lubricant</td> </tr> <tr> <td>Ruler & tape</td> <td>Vaginal speculum and equipment for cytological</td> </tr> <tr> <td>Thermometer</td> <td>bacteriological study</td> </tr> <tr> <td>Tuning fork</td> <td>Reflex hammer</td> </tr> <tr> <td>Safety pins</td> <td>Paper, pen and pencil</td> </tr> <tr> <td>Cotton</td> <td></td> </tr> </table>	Assessment forms	Patient's chart	Ophthalmoscope	Watch with second hand	Otoscope	Sphygmomanometer	Flashlight or penlight	Stethoscope	Tongue depressor	Gloves and lubricant	Ruler & tape	Vaginal speculum and equipment for cytological	Thermometer	bacteriological study	Tuning fork	Reflex hammer	Safety pins	Paper, pen and pencil	Cotton	
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Course Name	:	COMMUNITY HEALTH NURSING
Course Code	:	CHN
Course Description	:	This course focuses on the care of population groups and community as clients utilizing concepts and principles in community health development. It also describes problems, trends and issues in the Philippine and global health care systems affecting community health nursing practice.
Course Credit	:	3 units lecture; 2 units RLE (0.5 Skills Lab; 1.5 Clinicals)
Contact Hours/sem	:	54 lecture hours; 102 RLE hours
Prerequisite	:	NCM 100, Theoretical Foundations of Nursing, Health Assessment
Placement	:	^{2nd} Year, 1 st semester
Course Objectives:		<p>At the end of the course, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply concepts and principles of community health development in the care of communities and population groups. 2. Utilize the nursing process in the care of communities and population groups. <ol style="list-style-type: none"> a. Assess the health status of communities and population groups to identify existing and potential problems. b. Plan relevant and comprehensive interventions and programs based on identified priority problems. c. Implement appropriate plan of care to improve the health status of the communities and population groups. d. Evaluate the progress and outcomes of community health nursing interventions and programs. 3. Ensure a well-organized recording and reporting system. 4. Share leadership/relate effectively with others in work situations related to nursing and health.
Course Outline	:	<ol style="list-style-type: none"> I. Overview of Community Health Nursing <ol style="list-style-type: none"> a. Community Health Nursing as a Field of Nursing Practice <ol style="list-style-type: none"> i. The hallmark of community health nursing is that it is population- or aggregate-focused. ii. CHN is a synthesis of nursing and public health practice <ol style="list-style-type: none"> 1. emphasis on the importance of the “greatest good for the greatest number” 2. assessing health needs planning, implementing and evaluating the impact of health services on population groups 3. priority of health-promotive and disease-

	<p>preventive strategies over curative interventions</p> <ol style="list-style-type: none"> 4. tools for measuring and analyzing community health problems; and 5. application of principles of management and organization in the delivery of health services to the community <p>iii. Basic concepts and principles of community health nursing</p> <ol style="list-style-type: none"> 1. The family is the unit of care; the community is the patient and there are four levels of clientele in community health nursing. 2. The goal of improving community health is realized through multidisciplinary effort. 3. The community health nurse works with and not for the individual patient, family, group or community. The latter are active partners, not passive recipients of care. 4. The practice of community health nursing is affected by changes in society in general and by developments in the health field in particular. 5. Community health nursing is part of the community health system, which in turn is part of the larger human services system. <p>iv. Roles of the nurse in caring for communities and population groups</p> <p>v. Brief history of community health/public Health nursing practice in the Philippines</p> <p>II. Community Health and Development Concepts, Principles and Strategies</p> <p>a. Primary Health Care Approach</p> <ol style="list-style-type: none"> i. Definition; PHC as a philosophy, approach, structure and services ii. Legal Basis of PHC in the Philippines iii. Components of PHC <p>b. Health Promotion</p> <ol style="list-style-type: none"> i. Concept of health promotion (as embodied in the Ottawa Charter, November 1986) ii. Health promotion strategies: <ol style="list-style-type: none"> 1. Build healthy public policy 2. Create supportive environments 3. Strengthen community action 4. Develop personal skills 5. Reorient health services iii. Examples of Theories/Models of Health Promotion: Pender, Bandura, Green
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		<ul style="list-style-type: none"> c. Community organizing towards community participation in Health <ul style="list-style-type: none"> i. Definition of Community Organizing <ul style="list-style-type: none"> 1. CO Characteristics, 2. Process, 3. Phases 4. Goal ii. Community participation in health: levels of community participation, factors affecting community participation d. Capacity-building for sustainable community health Development towards community competence <ul style="list-style-type: none"> i. Concept of a sustainable community health development: integrated, community-based, comprehensive ii. Capacity-building strategies: health education, competency-based training for community health workers, supervision of lower level health workers e. Partnership building and collaboration <ul style="list-style-type: none"> i. Networking ii. Linkage-building iii. Multi-sectoral collaboration iv. Interdisciplinary collaboration v. Advocacy <p>III. The Community Health Nursing Process</p> <ul style="list-style-type: none"> a. Assessment of Community Health Needs <ul style="list-style-type: none"> i. Components of community needs assessment: <ul style="list-style-type: none"> 1. health status 2. health resources 3. health action potential ii. Community Diagnosis <ul style="list-style-type: none"> 1. Definition 2. Types of community diagnosis: comprehensive, problem-oriented or focused 3. Steps in conducting the community diagnosis iii. Tools used in community diagnosis: demography, vital and health statistics, epidemiology <ul style="list-style-type: none"> 1. Demography <ul style="list-style-type: none"> a. Definition and uses of demography b. Components of demography <ul style="list-style-type: none"> i. Describing population size ii. Describing population composition iii. Describing spatial distribution c. Sources of demographic data 2. Vital and health statistics
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	<ul style="list-style-type: none"> a. Definition and uses of vital and health statistics b. Common vital and health statistical indicators <ul style="list-style-type: none"> i. Fertility rates ii. Mortality rates iii. Morbidity rates 3. Epidemiology <ul style="list-style-type: none"> a. Definition and uses of epidemiology b. Epidemiologic concepts and principles <ul style="list-style-type: none"> i. Multiple Causation Theory or Ecologic Concept of Disease <ul style="list-style-type: none"> 1. Agent-Host-Environment 2. Models: web, wheel and triad ii. Natural history of disease iii. Levels of disease prevention iv. Concept of causality and association c. Epidemiologic approach focusing on: <ul style="list-style-type: none"> i. Descriptive epidemiology ii. Analytical epidemiology b. Planning of Community health nursing services <ul style="list-style-type: none"> i. Principles in community health planning ii. Bases for developing a community health plan <ul style="list-style-type: none"> 1. health status 2. health resources 3. health action potential iii. Steps in making a plan: the planning cycle iv. Context in developing the community health plan <ul style="list-style-type: none"> 1. Philippine health care delivery system <ul style="list-style-type: none"> a. Executive Order 102 (The Department of Health) b. RA 7160 (Local Health Systems) c. Levels of Health Care and Referral System 2. Global health situation (Millennium Development Goals) 3. National health situation (FOURmula One) 4. Primary health care as an approach to health care delivery IV. Implementing the community health nursing services <ul style="list-style-type: none"> a. Components of program implementation <ul style="list-style-type: none"> i. Coordinating the health program ii. Monitoring health programs iii. Supervising the program staff b. National health programs of the DOH <ul style="list-style-type: none"> i. Family health services
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		<ol style="list-style-type: none"> 1. Maternal health 2. Family planning 3. Child health <ol style="list-style-type: none"> a. Infant and young child feeding b. Expanded program on immunization c. Integrated management of childhood illness 4. Nutrition program 5. Oral health program 6. Essential health packages for the adolescent, adult men and women and older Persons ii. Control of non-communicable diseases <ol style="list-style-type: none"> 1. Integrated community-based non-communicable disease prevention program 2. Programs for the prevention of other non-communicable diseases <ol style="list-style-type: none"> a. National prevention of blindness b. Mental health and mental disorders c. Renal disease control program d. Community-based rehabilitation program iii. Control of communicable diseases <ol style="list-style-type: none"> 1. National TB Program-Directly Observed Treatment, short-course (NTP-DOTS) 2. National Leprosy Control Program 3. Schistosomiasis Control Program 4. Filariasis Control Program 5. Malaria Control Program 6. RabiesControl Program 7. Dengue Control Program 8. Sexually-Transmitted Infections and AIDS Control Program iv. Environmental Health <ol style="list-style-type: none"> 1. Water supply sanitation 2. Proper excreta disposal 3. Solid waste management 4. Vector control 5. Food sanitation 6. Air pollution 7. Proper housing c. Specialized fields of community health nursing <ol style="list-style-type: none"> i. School health nursing ii. Occupational health nursing iii. Community mental health nursing <p>V. Evaluating community health nursing services</p> <ol style="list-style-type: none"> a. Definition of evaluation
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		<ul style="list-style-type: none"> i. Types of evaluation: quantitative, qualitative ii. Aspects of evaluation: process, impact and outcome iii. Methods and tools of evaluation iv. Evaluation indicators <p>b. Quality Assurance: Sentrong Sigla Movement</p> <p>VI. Recording and Reporting</p> <ul style="list-style-type: none"> a. Family Health Service Information System b. Components of FSHIS <ul style="list-style-type: none"> i. Family Treatment Record ii. Target Client List iii. Reporting Forms iv. Output Reports
Guide for RLE		<p>Provide opportunity to practice bag technique and other nursing procedures</p> <p>Provide for actual care of individual, family, population group and community as client. Requires competencies with emphasis on health promotion and disease prevention</p>
Equipment and Materials (these could be found in nursing skills lab and in the community)		CHN Bag complete with relevant equipment and supplies

Course Name	:	MICROBIOLOGY AND PARASITOLOGY
Course Code	:	Micro/Para
Course Description	:	<p>This course is designed to assist students in the study of important microorganisms and parasites. It explains the physiology and pathogenic properties of bacteria, fungi and viruses as an introduction to disease causation, their biology, the infections they cause, host response to these infections and their mode of transmission, prevention, treatment and nursing responsibilities.</p> <p>The laboratory experiences provide specimen collection, handling and processing of specimens for isolation and identification of microorganisms and parasites involved in the infectious processes.</p>
Course Credit	:	3 units lecture, 1 unit laboratory
Contact Hours/sem	:	54 lecture hours, 54 lab hours
Prerequisite	:	General Chemistry, Anatomy and Physiology
Placement	:	2 nd year, 1 st semester

Course Objectives	At the end of the course and given simulated/actual situations/conditions, the student will be able to: 1. Apply the concepts and principles of microbiology and parasitology in the care of individuals. 2. Utilize principles and techniques in the collection, handling of specimens and identification of microorganisms and parasites involved in the infectious processes.
Course Outline	: I. Scope of Microbiology 1. Organisms that make up the microbial world and the development of microbiology 2. Microorganisms 3. Division of microbiology 4. Significance of microbiology 5. Practical applications of microbiology 6. Evolution of microbiology 7. Basic laboratory equipment and procedures in the study of bacteria II. Microbial Control 1. Techniques for controlling pathogenic microorganisms 2. Surgical and medical asepsis 3. Antimicrobial agents in therapy III. Infection and Host Resistance 1. Infection and bacterial invasion 2. Host response to infection a. Non-specific host resistance b. Specific host resistance c. Vaccines in the elimination of disease IV. Pathogenic Microorganisms and Parasitic Helminthes 1. Normal human microbial flora and microorganisms pathogenic to man 2. Protozoan and helminthes diseases of man V. Microbial Disease of the Different Organ System 1. Skin and eye 2. Nervous system 3. Cardiovascular system 4. Respiratory system 5. Digestive system 6. Urinary and reproductive system

Course Name	: CARE OF MOTHER, CHILD AND FAMILY
Course Code	: NCM 101
Course Description	: Principles and techniques of caring for the normal mothers, infants, children and family and the application of principles and concepts on family and family health nursing process.
Course Credit	: 4 units lecture, 4units RLE [1unit Skills Lab/3units Clinical]

Contact Hours/Sem	:	72 lecture hours, 204 RLE hours
Prerequisite	:	FNP, Health Assessment, Anatomy and Physiology
Co-requisite	:	Microbiology and Parasitology
Placement	:	2 nd year, 1 st semester
Course Objectives:		<p>At the end of the course, given actual or simulated situations /conditions involving the client (normal pregnant woman, mother, and/or newborn baby, children and the family), the student will be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the holistic care of client for the promotion and maintenance of health. <ol style="list-style-type: none"> 1.1 Assess with the client his/her health condition and risk factors affecting health 1.2 Identify wellness /at risk nursing diagnosis 1.3 Plan with client appropriate interventions for health promotion and maintenance of health 1.4 Implement with client appropriate interventions for health promotion and health maintenance taking into consideration relevant principles and techniques 1.5 Evaluate with client the progress of one's health condition and outcomes of care. 2. Ensure a well-organized recording and reporting system 3. Observe bioethical principles and the core values (love of God, caring, love country and of people) 4. Relate effectively with clients, members of the health team and others in work situations related to nursing and health
Course Outline	:	<ol style="list-style-type: none"> I. The Family and Family Health <ol style="list-style-type: none"> 1. Concepts/ Definition of family 2. Family structure and functions 3. Universal characteristics of families 4. Characteristics of a healthy family 5. Family stages and tasks 6. Levels of prevention in family health II. The Family Health Nursing Process <ol style="list-style-type: none"> 1. Definition of family health nursing & family nursing process 2. Principles of family nursing process 3. Steps of the family health nursing process 4. Initial assessment/data base for family nursing practice 5. Family structure/characteristics/dynamics 6. Social, economic & cultural factors 7. Health status of each family member 8. Values & practices on health promotion III. Methods of Data Gathering <ol style="list-style-type: none"> 1. Health assessment of each family member 2. Observation 3. Interview 4. Review of records/reports & laboratory results 5. Assessment of home & environment

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| | <p>6. Tools used in family assessment: genogram, ecomap, initial database, family assessment guide</p> <p>IV. Typology of Nursing Problems in Family Nursing Practice</p> <ol style="list-style-type: none"> 1. 1st level assessment: identify health threats, foreseeable crisis, health deficits & wellness potential/state 2. 2nd level assessment: determining family's ability to perform the family health tasks on each health threat, health deficit, foreseeable crisis or wellness potential <p>V. Statement of a Family Health Nursing Problem- health problem and cause/ contributing factors or health condition and factors related with non-performance of family health tasks</p> <p>VI. Developing the Care Plan</p> <ol style="list-style-type: none"> 1. Priority setting: criteria 2. Defining/setting goals/objectives 3. Specifying intervention plan 4. Developing the evaluation plan, specifying methods/tools <p>VII. Categories of nursing interventions in family nursing practice include:</p> <ol style="list-style-type: none"> 1. Human becoming: methods/processes 2. Competency-based teaching 3. Motivation-support for behavior change/lifestyle modification <p>VIII. Categories of health care strategies and intervention</p> <ol style="list-style-type: none"> 1. Preventive 2. Curative 3. Rehabilitative 4. Facilitative 5. Facilitation 6. Direct <p>IX. Evaluation</p> <ol style="list-style-type: none"> 1. Qualitative & quantitative data for evaluation 2. Methods & sources of evaluative data 3. Steps in evaluation 4. Evaluation criteria 5. Evaluation in family nursing practice <p>X. Records in Family Health Nursing Practice</p> <ol style="list-style-type: none"> 1. Importance & uses 2. Types of records & reports <p>XI. Mother and Child Health</p> <ol style="list-style-type: none"> 1. Procreative health <ol style="list-style-type: none"> a. Definition and theories related to procreation b. Process of human reproduction c. Risk factors that will lead to genetic disorders d. Common tests for determination of genetic abnormalities e. Utilization of the nursing process in the prevention of genetic alteration and in the care of clients seeking services before & during conception <p>XII. Antepartum/ Pregnancy</p> <ol style="list-style-type: none"> 1. Anatomy & physiology of the male and female |
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	<p style="text-align: center;">reproductive system</p> <ol style="list-style-type: none"> 2. Physiology of menstrual cycle 3. The process of conception 4. Fetal circulation 5. Milestones of fetal development 6. Estimating the EDC 7. Common teratogens and their effects 8. Health history: past, present, potential, biographical data, menstrual history, current pregnancy (EDD, AOG, gravid, para), previous pregnancies & outcomes (TPAL score), gynecologic history, medical history, nutritional status 9. Normal changes during pregnancy <ol style="list-style-type: none"> a. Local & systematic physical changes including vital signs, review of systems b. Emotional changes including 'angers in pregnancy' c. Leopold's maneuver 10. Danger signs of pregnancy 11. Normal diagnostic/laboratory findings & deviations <ul style="list-style-type: none"> Pregnancy test Urine test Blood test (CBC) ultrasound 12. Appropriate nursing diagnoses 13. Addressing the needs and discomforts of pregnant mothers 14. Prenatal exercises 15. Preparation for labor and delivery <p>XIII. Intrapartum (Process of Labor & Delivery)</p> <ol style="list-style-type: none"> 1. Factors affecting labor & delivery process- passenger, passage, power (primary and secondary) and placenta 2. Functional relationships of presenting part 3. Theories of labor onset 4. Common signs of labor 5. Stages of labor & delivery 6. Common discomforts of the woman during labor and delivery 7. Danger signs during labor & delivery 8. Appropriate nursing diagnoses 9. Care of clients experiencing labor & delivery process 10. Physical & psychological preparation of the client: <ul style="list-style-type: none"> ▪ Explanation of the procedure, Securing informed consent, provision of safety, comfort & privacy (proper positioning, draping, constant feedback, therapeutic touch) 11. Monitoring of progress of labor delivery 12. Provision of personal hygiene, safety & comfort measures e.g. perineal care, management of labor pain, bladder and bowel elimination 13. Coping mechanisms of woman's partner and family of the stresses of pregnancy, labor and delivery & puerperium
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	<p>14. Preparation of the labor & delivery room</p> <p>15. Preparation of health personnel</p> <p>XIV. Post Partum</p> <ol style="list-style-type: none"> 1. Definition 2. Specific body changes on the mother 3. Psychological changes on the mother 4. Phases of puerperium <ul style="list-style-type: none"> ▪ “Taking In” ▪ “Taking Hold” ▪ “Letting Go” 5. Monitoring of vital signs, uterine involution, amount & pattern of lochia, emotional responses, responses to drug therapy, episiotomy healing 6. Possible complications during post partum : bleeding & infection 7. Appropriate nursing diagnoses 8. Nursing care of mothers during post partum <ol style="list-style-type: none"> a. Safety measures: limitations in movement, protection from falls, provision of adequate clothing, wound care e.g. episiotomy b. Comfort measures: exercises, initiation of lactation, relief of discomforts like breast engorgement and nipple sores, hygienic measures, maintaining adequate nutrition c. Measures to prevent complication: ensuring adequate uterine contraction to prevent bleeding, adequate monitoring, early ambulation, prompt referral for complications d. Support for the psychosocial adjustment of the mother e. Health teaching needs of mother, newborn, family f. Accurate documentation and reporting as needed 9. Health beliefs & practices of different cultures in pregnancy, labor delivery, puerperium 10. Current trends in maternal and child care 11. Family planning <ol style="list-style-type: none"> a. Natural methods- Standard Days Method (SDM) with cycle beads, Billing’s Method, sympto-thermal method, lactation amenorrhea method (LAM) b. Artificial methods- use of hormones, intra-uterine device, barrier methods, tubal ligation, vasectomy <p>XV. The Newborn</p> <ol style="list-style-type: none"> A. Profile of the newborn <ol style="list-style-type: none"> 1. Physiologic function & appearance <ul style="list-style-type: none"> ▪ APGAR score, Ballard’s score, Review of systems, Anthropometric measurements (weight, head, chest, abdomen circumference, length, other relevant measures) 2. Vital signs, patent airway
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	<ul style="list-style-type: none"> 3. Behavioral assessment & other significant information 4. Newborn screening B. Nursing care of the newborn. <ul style="list-style-type: none"> 1. Establishment of respiration 2. Maintaining patent airway 3. Water/oil bath, tub bath, changing of diapers, 4. Eye prophylaxis 5. Cord care 6. Vitamin K administration 7. Regulation of temperature 8. Sensory stimulation (audio& tactile) 9. Vestibular stimulation 10. Breast feeding 11. Burping 12. Elimination 13. Cuddling C. Concept on Growth & Development <ul style="list-style-type: none"> 1. Definition 2. Principles of growth & development (GD) 3. Major factors influencing GD 4. Foundations of GD <ul style="list-style-type: none"> ▪ Age Periods ▪ Methods of studying GD –cross-sectionals, longitudinal ▪ Patterns of GD ▪ Individual differences 6. Biologic growth & development 7. Development of mental function & personality development 8. Theories: <ul style="list-style-type: none"> - psychosexual - moral - psychosocial - relational - cognitive - behaviorism 9. Development of self-concept- body image, self-esteem 10. Development of sexuality D. The Infant and Family <ul style="list-style-type: none"> 1. Definition of terms 2. Growth & development of the infant <ul style="list-style-type: none"> ▪ biologic- proportional changes & maturation of systems, development milestones – fine & gross motor, language, psychosocial development, cognitive development, social development, development of social image, temperament 3. Coping with concerns related to normal growth & Development, e.g. separation anxiety, teething, etc. 4. Promotion of health during infancy 5. Prevention of injury
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| | <p>E. The Toddler & the Family</p> <ol style="list-style-type: none"> 1. Definition 2. Growth & development of the toddler – biologic, developmental milestone, psychosocial, cognitive, social, spiritual, sexuality, and body image development 3. Coping with concerns related to normal growth & development 4. Promotion of health during toddlerhood 5. Prevention of injury <p>F. The Preschooler and the Family</p> <ol style="list-style-type: none"> 1. Definition of terms 2. Growth & development- biologic, developmental milestone, psychosocial, cognitive, social & moral development 3. Coping with concerns related to normal growth & development 4. Promotion of health 5. Prevention of injury <p>G. The Schooler and the Family</p> <ol style="list-style-type: none"> 1. Definition of terms 2. Growth & development- biological, psychosocial, cognitive, moral, spiritual, social & self-concept development 3. Coping with concerns related to normal growth and development 4. Promotion of health during school age period 5. Prevention of injury <p>H. The Adolescent & the Family</p> <ol style="list-style-type: none"> 1. Definition of terms 2. Growth & development – biologic, psychosocial, cognitive, moral, spiritual and social development 3. Promotion of health during adolescence <p>I. Adulthood</p> <ol style="list-style-type: none"> 1. Early adulthood <ol style="list-style-type: none"> a. Theories, physiological, cognitive, moral & psychosocial development b. Nursing implications 2. Middle adulthood <ol style="list-style-type: none"> a. Physical, cognitive, moral and psychosocial development b. Nursing implications 3. Late adulthood <ol style="list-style-type: none"> a. Viewpoints on aging b. Theories of aging c. Biologic, sociologic, psychologic changes d. Needs of older persons e. Nursing implications |
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<p>Guide for RLE</p>	<p>Provide for actual hospital and community experiences to ensure that competencies are developed in the following:</p> <ul style="list-style-type: none"> • Prenatal • Intrapartal • Post partal • Immediate care of the newborn <p>Provide the opportunity to do the following related clinical experiences:</p> <p style="text-align: center;">AT LEAST THREE (3) ACTUAL DELIVERIES properly supervised in any of these settings:</p> <ul style="list-style-type: none"> • Lying-in/Birthing Centers • Hospitals (any category) • One home/domiciliary delivery may be allowed as long as the two others are done in any of the above settings first. <p style="text-align: center;">AT LEAST THREE (3) NEWBORNS GIVEN IMMEDIATE CARE in settings where actual deliveries are performed.</p> <p>In the event that the required competencies are not developed within the allotted hours/weeks, the nursing student/s shall be made to “extend” his/her Related Learning Experience (RLE) exposure until the expected competencies are satisfactorily achieved.</p> <p>To standardize documentation, a prescribed form shall be completed right after the related clinical experience.</p> <p>Provide opportunities to participate in Expanded Program of Immunization [EPI]</p>
<p>Equipment and Materials [these could be found in nursing skills lab, base hospital, affiliating centers]</p>	<p>Delivery set, delivery table, functional birthing model, pelvic model, newborn with placenta, weighing scale for infants, Doppler apparatus, fetoscope, perineal flushing tray, breast care tray, perilight, nipple shield, breast pump.</p> <p>Baby’s Layette, cord dressing tray, oil bath tray, ophthalmic ointment, Vitamin K, injection, baby’s bath tub, feeding bottle, immunization tray, MMDST kit and manual.</p> <p>Visual aids on family planning methods, breast feeding, growth charts, immunization schedules, developmental landmarks, video on actual delivery</p>

Course Name	: CARE OF MOTHER, CHILD, FAMILY AND POPULATION GROUP AT-RISK OR WITH PROBLEMS
Course Code	: NCM 102
Course Description	: This course deals with the concept of disturbances & pre-existing health problems of pregnant women and the pathologic changes during intrapartum and post partum periods. This course further deals with the common problems occurring during infancy to adolescence stage.
Course Credit	: 5 units lecture, 6 units RLE [1unit Skills Lab/5units Clinical]
Contact Hours/Sem	: 90 lecture hours, 306 RLE hours
Prerequisite	: Care of Mother, Child and Family
Co-requisite	: Pharmacology; Nutrition with Diet Therapy
Placement	: 2 nd year, 2 nd semester
Course Objectives:	<p>At the end of the course, given actual or simulated situations /conditions involving individual client (mother, newborn baby, children) and family at risk/with problem, the student will be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the holistic care of client for the promotion and maintenance of health in community and hospital settings. <ol style="list-style-type: none"> 1.1 Assess with the client his/her health condition and risk factors affecting health 1.2 Identify actual/at risk nursing diagnosis 1.3 Plan with client appropriate interventions for identified problems 1.4 Implement with client appropriate interventions for identified problems 1.5 Evaluate with client the progress of their condition and outcomes of care. 2. Ensure a well-organized recording and reporting system 3. Observe bioethical principles and the core values (love of God, caring, love country and of people) 4. Relate effectively with clients, members of the health team and others in work situations related to nursing and health
Course Outline	<ol style="list-style-type: none"> I. Mother <ol style="list-style-type: none"> A. High-Risk Prenatal Client <ol style="list-style-type: none"> a. Identifying Clients at Risk <ol style="list-style-type: none"> 1. Assessment of risk factors 2. Screening procedures 3. Diagnostic tests and laboratory exams b. Pre-gestational conditions such as rheumatic heart disease, diabetes mellitus, substance abuse, HIV/AIDS, Rh Sensitization, anemia c. Gestational condition such as hyperemesis gravidarum, ectopic pregnancy, gestational trophoblastic disease (H-mole), incompetent cervix, spontaneous abortion, placenta

previa, abruptio placenta, premature rupture of membranes, pregnancy-induced hypertension

B. Nursing Care of the client with high-risk labor & delivery & her Family

1. High-Risk factors:

(may happen at anytime during the course of labor to a client who has been otherwise been healthy throughout her pregnancy & may be related to stress/stressor; adaptive process):

- passenger or fetus
- passage way or pelvic bones & other pelvic structure
- powers or uterine contractions
- placenta
- clients' psyche or psychologic state

2. Problems of the Passenger

a. Fetal malposition

1. Types of fetal malposition
2. Nursing care
3. Medical Management

b. Fetal malpresentation

1) Vertex malpresentation

- a) brow presentation
- b) face presentation
- c) sincipital presentation

2) Breech presentation

- a) types
- b) maternal risks
- c) vaginal evolving of breech
- d) external/podalic version

3) Shoulder presentation

- a) Compound presentation

4) Nursing care of client with malpresentation

c. Fetal distress

- 1) causes
- 2) signs/symptoms
- 3) nursing interventions

d. Prolapse umbilical cord

- 1) cause
- 2) contributing factors
- 3) assessment & nursing diagnoses
- 4) nursing interventions.

3. Problems with the passageway

- a. abnormal size or shape of the pelvis
- b. cephalopelvic disproportion
- c. shoulder dystocia
- d. nursing care of client with problems of the passageway

	<ul style="list-style-type: none"> 4. Problems with the Powers <ul style="list-style-type: none"> a. dystocia or difficult labor <ul style="list-style-type: none"> ▪ hypertonic uterine dysfunction ▪ hypotonic uterine dysfunction ▪ abnormal progress in labor ▪ retraction rings b. premature labor c. precipitate labor and birth d. uterine prolapse e. uterine rupture 5. Placental problems <ul style="list-style-type: none"> a. Implantation in the lower uterine segment b. Premature detachment of placenta 6. Problems with the psyche factors <ul style="list-style-type: none"> a. Inability to bear down properly b. Fear/anxiety C. Nursing Care of the High-Risk Postpartal Client <ul style="list-style-type: none"> 1. Postpartal hemorrhage <ul style="list-style-type: none"> a. Early postpartal hemorrhage b. Late postpartal hemorrhage subinvolution 2. Postpartal puerperal infection <ul style="list-style-type: none"> a. Endometritis b. Wound infection c. UTI 3. Thromboembolic disorders 4. Postpartal psychiatric disorder D. Care of couple with problems of infertility <ul style="list-style-type: none"> 1. Causes of infertility in males and females 2. Diagnostic tests 3. Nursing interventions <p>II. Child</p> <ul style="list-style-type: none"> A. Nursing care of the high-risk newborn to maturity <ul style="list-style-type: none"> 1. Problems related to maturity <ul style="list-style-type: none"> a. Prematurity b. Postmaturity 2. Problems related to gestational weight <ul style="list-style-type: none"> a. Small for gestational age (SGA) b. Large for gestational age (LGA) 3. Acute conditions of the neonates such as: <ul style="list-style-type: none"> a. Respiratory distress syndrome b. Meconium aspiration syndrome c. Sepsis d. Hyperbilirubinemia e. Sudden death syndrome (SDS) B. Common health problems that develop during infancy example: intussusception, failure to thrive, sudden infant death
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syndrome, colic, trisomy 21, cleft palate, imperforated anus, hirschsprung's disease, spina bifida, hydrocephalus, otitis media, meningitis, febrile seizures, autism/ADHD

C. Health problems common In toddlers

example: burns, poisoning, child abuse, cerebral palsy

D. Health problems common In preschooler

example: leukemia, wilm's tumor (nephroblastoma), asthma, urinary tract infection (UTI)

E. Health problems most common in school aged children

example: diabetes mellitus, rheumatic fever, rheumatic arthritis, scabies, pediculosis, impetigo

F. Health problems common in adolescent

example: scoliosis, bone tumors, accidents (trauma/injury), STD, amenorrhea, dysmenorrhea, obesity, anorexia nervosa, substance abuse, suicide

III. Family

A. The family with health problems

1. Assessment of the family capability to perform health tasks

a. Primary assessment

b. Secondary assessment

2. Family health problem identification

a. Determination of categories of family health problems

- Health deficits
- Health threats
- Foreseeable crisis/stress points
- Enhanced capability for health promotion

3. Definition of contributing risk factors

- Predisposing factors
- Enabling factors
- Reinforcing factors

4. Criteria of setting priorities among family health problems:

- Nature of the problem
- Magnitude of the problem
- Modifiability of the problem
- Preventive potential
- Salience

5. Tool of analysis

- Social determinants of health

B. Planning of individual & family health nursing care

1. Concepts, principles, phases and components in planning family health interventions

2. Programs and services that focus on primary & secondary prevention of communicable and non-communicable diseases

a. Examples of DOH programs:

- National Tuberculosis Program – Direct Observed
- Short Course Treatment (NTP-DOTS)
- Integrated Management of Childhood Illness (IMCI)
- Control of Diarrheal Diseases (CDD)

	<ul style="list-style-type: none"> 3. Identification of goal of care for priority problems 4. Parameters for selecting nursing interventions: <ul style="list-style-type: none"> a. Applicable, appropriate and available to the home community setting b. Promotes client safety, comfort & hygiene c. Standards of care & interventions that address acute and chronic illness 5. Principles of collaboration and advocacy to be considered to ensure continuity of care C. Implementation of Individual & Family Health Nursing Care <ul style="list-style-type: none"> 1. Component of care in acute and chronic illness <ul style="list-style-type: none"> a. Health promotion b. Disease prevention c. Restorative d. Curative e. Rehabilitative care 2. Bio-behavioral interventions and holistic care for individuals & Family with specific problems in oxygenation, fluid and electrolyte balance, metabolic and endocrine function 3. Strategies in meeting health problems of family <ul style="list-style-type: none"> a. Promoting behavior change b. Creating a supportive environment towards healthy lifestyle 4. Principles of behavior change 5. Referral system 6. Concept & principles of collaboration & advocacy D. Evaluation of progress and outcome of care <ul style="list-style-type: none"> 1. Methods & tools in evaluating effectiveness of family health interventions 2. Sources of evaluative data 3. Alternative strategies & approaches for specific problems & objectives E. Ensuring a well organized & accurate documentation & reporting <ul style="list-style-type: none"> 1. Standard format 2. Legal principles involved in documentation
<p>Guide for RLE</p>	<p>Provide opportunity for actual clinical hospital and community experiences to ensure competencies are developed.</p>
<p>Equipment and Materials [these could be found in nursing skills lab, base hospital, affiliating centers]</p>	<p>Baby model for resuscitation, video on resuscitation, rubber bulb, infant suction catheter, suction apparatus, IV set (microdrip), infant feeding tubes</p>

Course Name	:	NUTRITION AND DIET THERAPY
Course Code	:	NuDiet
Course Description	:	This course deals with the study of food in relation to health. It covers nutrients and other substances and their action, and interaction and balance in relation to health and diseases and the process by which organism ingests, digests, absorbs, transports, utilizes and excretes food substances. It will also focus in the therapeutic and food service aspects of the delivery of nutritional services in hospitals and other healthcare institutions.
Course Credit	:	3 units lecture, 1 unit laboratory
Contact Hours/sem	:	54 lecture hours, 54 laboratory hours
Prerequisite	:	General Chemistry, Biochemistry, Anatomy and Physiology, Micro-Parasitology
Placement	:	2 nd year, 2 nd semester
Course Objectives:		At the end of the course, given relevant situations/conditions, the student will be able to: 1. Apply appropriate principles and techniques to assist clients in maintaining nutritional health 2. Utilize knowledge of diet therapy in assisting clients needing dietary modifications
Course Outline	:	A. Introduction to nutrition <ol style="list-style-type: none"> 1. Definition of terms 2. Nutrition concepts 3. Classification of nutrients B. Basic Tools in nutrition <ol style="list-style-type: none"> 1. FNRI & USDA Food Guide Pyramid 2. 10 NGF 3. RDA or RENI 4. FEL 5. Food Labeling C. Six essential nutrients <ol style="list-style-type: none"> 1. Carbohydrates <ol style="list-style-type: none"> a. Functions b. Deficiencies/toxicity c. Food sources 2. Protein <ol style="list-style-type: none"> a. Functions b. Deficiencies/toxicity c. Food sources 3. Fats and waters <ol style="list-style-type: none"> a. Functions b. Deficiencies/toxicity c. Food sources 4. Vitamins and Minerals <ol style="list-style-type: none"> a. Functions b. Deficiencies/toxicity c. Food sources

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| | <p>D. Dietary computations</p> <ol style="list-style-type: none"> 1. Body mass index and classification 2. Desirable Body Weight (DRW) Determination 3. Total Energy Requirement (TER) & distribution of TER 4. Application to Food Exchange List (FEL) & sample menu <p>E. Nutrition throughout the lifespan</p> <ol style="list-style-type: none"> 1. Pregnancy <ol style="list-style-type: none"> a. Stages b. Nutritional problems and interventions c. Recommended diet 2. Lactation <ol style="list-style-type: none"> a. Common nutritional problems and interventions b. Recommended diet 3. Infancy <ol style="list-style-type: none"> a. Nutritional problems and intervention b. Factors affecting nutritional status c. Guidelines in feeding d. Recommended diet 4. Pre-Schoolers & Schoolers <ol style="list-style-type: none"> a. Nutritional problems and interventions b. Guidelines in feeding c. Recommended diet 5. Adolescents <ol style="list-style-type: none"> a. Nutritional problems and intervention b. Recommended Diet 6. Adulthood <ol style="list-style-type: none"> a. Nutritional problems and interventions b. Recommended diet <p>F. Diet Therapy</p> <ol style="list-style-type: none"> 1. General diets <ul style="list-style-type: none"> ▪ Regular/full Diet ▪ High fiber diet ▪ Vegetarian diets ▪ Therapeutic diets 2. Diets modified in consistency <ul style="list-style-type: none"> ▪ Clear liquid ▪ Full liquid ▪ Cold liquid/ T&A diet ▪ Soft sland ▪ Mechanical soft ▪ Soft bland ▪ Bland ▪ Residue restricted ▪ Low fiber 3. Diets Modified in Composition <ul style="list-style-type: none"> ▪ Low calorie ▪ High calorie |
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		<ul style="list-style-type: none"> ▪ High protein ▪ Low protein ▪ Low fat ▪ Low cholesterol ▪ Low carbohydrate ▪ Low salt/sodium restricted ▪ Low potassium ▪ Low purine/ purine restricted <p>4. Tube feeding</p> <p>a. Enteral feeding</p> <ul style="list-style-type: none"> ▪ Types ▪ Indications & contraindications for use ▪ Complications and problems <p>b. Types of enteral formulas</p> <ul style="list-style-type: none"> ▪ Intact ▪ Hydrolyzed ▪ Modular <p>c. Feeding administration</p> <ul style="list-style-type: none"> ▪ Continuous drip ▪ Bolus ▪ Combination <p>d. Parenteral Feeding</p> <ul style="list-style-type: none"> ▪ Indications & contraindications for use ▪ Complications & problems <p>G. Dietary management of some common medical conditions including computations and preparations and their rationale</p>
Guide for Laboratory	:	Provide opportunity for actual preparation of the prescribed therapeutic dietary regimen (to include evaluation and computation)
Laboratory Equipment & Supplies	:	Weighing scale, food pyramid/chart, IEC materials for diet, osteorizer, demonstration table, calorie counter
Reference	:	Laboratory Guide/Manual

Course Name	:	PHARMACOLOGY
Course Code	:	Pharma
Course Description	:	This course deals with pharmacodynamics, pharmacokinetics, clinical/therapeutic uses and toxicology of drugs. Emphasis is given on how a drug works to anticipate when giving a drug to a patient are of paramount importance since nursing responsibilities include administering drugs, assessing drug effects, intervening to make a drug more tolerable, and providing teaching about drugs and the drug regimen.
Course Credit	:	3 units lecture

Contact Hours/Sem	:	54 lecture hours
Prerequisite	:	Math 1, General Chemistry, Anatomy & Physiology, NCM 102
Placement	:	2 nd year, 2 nd semester
Course Objectives	:	<p>At the end of the course and given relevant actual or simulated situations/conditions, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply concepts and principles of pharmacology to ensure safe and proper use of drugs 2. Explain the actions, therapeutic uses, preparations, dosages, modes of administration of selected drugs and medicinal plants. 3. State precautionary measures to be observed in the administration of selected drugs 4. Discuss the role and responsibility of the nurse in pharmacology
Course Outline	:	<p>A. Introduction to Nursing Pharmacology</p> <ol style="list-style-type: none"> 1. Introduction to drugs <ol style="list-style-type: none"> a. Drugs and the body b. Toxic effects of drugs c. Nursing management d. Dosage calculations 2. Chemotherapeutic Agents <ol style="list-style-type: none"> a. Anti-infective agents b. Antibiotics c. Antiviral agents d. Antifungal agents e. Antiprotozoal agents f. Antihelminthic agents g. Antineoplastic agents 3. Drugs acting on the immune system <ol style="list-style-type: none"> a. Anti-inflammatory agents b. Immune modulators c. Vaccines and sera 4. Drugs acting on the CNS and PNS <ol style="list-style-type: none"> a. Anxiolytic and hypnotic agents b. Antidepressant agents c. Psychotherapeutic d. Antiepileptic agents e. Antiparkinsonism agents f. Muscle relaxants g. Narcotics and anti-migraine drugs h. General and local anesthetics i. Neuromuscular blocking agents 5. Drugs acting on the ANS <ol style="list-style-type: none"> a. Adrenergic agents b. Adrenergic blocking agents c. Cholinergic agents d. Cholinergic blocking agents

	<ul style="list-style-type: none"> 6. Drugs acting on endocrine system <ul style="list-style-type: none"> a. Hypothalamic and pituitary agents b. Adrenocortical agents c. Thyroid and parathyroid agents d. Antidiabetic agents 7. Drugs acting on the cardiovascular system <ul style="list-style-type: none"> a. Anti-hypertensive drugs b. Cardiotonic agents c. Anti-arrhythmic agents d. Antianginal agents e. Lipid lowering agents f. Drugs affecting blood coagulation g. Drugs used to treat anemia 8. Drugs acting on Renal System <ul style="list-style-type: none"> a. Diuretics such as potassium-sparing, potassium-losing, osmotic diuretics, parenteral fluids (hypotonic, hypertonic, isotonic), electrolytes (sodium, potassium chloride) 9. Drugs acting on the respiratory system <ul style="list-style-type: none"> a. Bronchodilators b. Expectorants c. Antitussive 10. Drugs acting on the Gastrointestinal System
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Course Name	:	HEALTH EDUCATION
Course Code	:	HealthEd
Course Description	:	The course includes discussions on health education concepts, principles, theories and strategies as they apply in the clinical and classroom situations.
Course Credit	:	3 units lecture
Contact Hours/sem	:	54 lecture hours
Prerequisite	:	None
Placement	:	2 nd year, Summer
Course Objectives	:	<p>At the end of the course, given relevant situations/conditions, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply principles, theories and strategies of health education in assisting clients to promote and maintain their health 2. Develop an instructional design to meet the learning needs of clients
Course Outline	:	<p>A. Health education perspective</p> <ol style="list-style-type: none"> 1. Historical development in health education 2. Issues and trends in health education <ol style="list-style-type: none"> 2.1 Health issues and the biological, psychological, and

	<p>sociological aspects of health and disease</p> <p>2.2 Contemporary health and the promotion of optimal health throughout the lifespan</p> <p>3. Theories in health education - (e.g. Pender's Health Promotion Theory, Bandura's Self Efficacy Theory, Health Belief Model, Green's Precede-Proceed Model)</p> <p>B. Perspective on teaching and learning</p> <ol style="list-style-type: none"> 1. Overview of education on health care 2. Concepts of teaching, learning, education process vis-a-vis nursing process, historical foundations for the teaching role of the nurse, 3. Role of the nurse as a health educator 4. Hallmarks of effective teaching in nursing 5. Principles of good teaching practice in undergraduate education 6. Barrier to Education and Obstacles to Learning 7. Applying learning theories to health care practice <ol style="list-style-type: none"> a. Principles of learning b. Learning theories c. Types of learning d. Learning styles of different age groups 8. Planning and conducting classes <ol style="list-style-type: none"> a. Developing a course outline/syllabus b. Formulating course objectives c. Selecting content d. Selecting teaching methods e. Choosing a textbook/references f. Conducting the class <p>C. Characteristics of the learner</p> <ol style="list-style-type: none"> 1. Determinants of Learning <ol style="list-style-type: none"> a. Learner's characteristics b. Assessment of the learner c. Assessing learning needs 2. Motivation and behavior of the learner <ol style="list-style-type: none"> a. Learning principles b. Motivation and behavior change theories 3. Literacy and readability <ol style="list-style-type: none"> a. Reading levels of clients b. Assessing literacy c. Teaching strategies for low literate patients d. Developing printed educational materials <p>D. Teaching strategies and methodologies for teaching and learning</p> <ol style="list-style-type: none"> 1. Traditional teaching strategies <ol style="list-style-type: none"> a. Lecturing b. Discussion
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		<ul style="list-style-type: none"> c. Questioning d. Using audio visuals e. Interactive lecture <ul style="list-style-type: none"> 2. Activity-based strategies <ul style="list-style-type: none"> a. Cooperative learning b. Simulations c. Problem-based learning d. Self-learning modules 3. Computer teaching strategies <ul style="list-style-type: none"> a. Computer-assisted instructions b. Internet c. Virtual reality 4. Distance learning <ul style="list-style-type: none"> a. Interactive television classes b. Via internet 5. Teaching psychomotor skills <ul style="list-style-type: none"> a. Approaches to teaching skills b. Assessment of psychomotor skill learning 6. Clinical teaching <ul style="list-style-type: none"> a. Purpose of clinical laboratory b. Models of clinical teaching c. Preparation for clinical instruction d. Conducting a clinical laboratory session <p>E. Assessment and evaluation</p> <ul style="list-style-type: none"> a. Learning assessment of clients b. Methods of evaluation c. Qualities of good measurement d. Interaction process analysis/process recording
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Course Name	:	INFORMATICS
Course Code	:	IT
Course Description	:	This course deals with the use of information technology system and data standards based on nursing informatics principles/theories. It further deals with the utilization of clinical information systems in the management and decision-making of patient care. A laboratory session shall be provided for practice application.
Course Credit	:	2 units lecture; 1 unit laboratory
Contact Hours/sem	:	36 lecture hours; 54 laboratory hours
Prerequisite	:	College Algebra
Placement	:	2 nd Year, Summer
Course	:	At the end of the course and given relevant actual or simulated

Objectives	:	<p>situations/conditions, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply concepts, theories and principles of informatics in nursing and health care 2. Discuss issues and trends in informatics relevant to nursing and health
Course Outline	:	<ol style="list-style-type: none"> A. Computers and nursing <ol style="list-style-type: none"> 1. Computers and nursing 2. Historical perspectives of nursing and the computer 3. Electronic health record from a historical perspective B. Computer system <ol style="list-style-type: none"> 1. Computer hardware 2. Computer software and systems 3. Open source and free software 4. Data processing 5. The internet: a nursing resource 6. PDA and wireless devices 7. Incorporating evidence: use of computer-based clinical decision support system for health professionals C. Issues in informatics <ol style="list-style-type: none"> 1. Nursing informatics and healthcare policy 2. The role of technology in the medication-use process 3. Healthcare data standards 4. Electronic health record systems: U.S. federal initiatives and public/private partnerships 5. Dependable systems for quality care 6. Nursing minimum data set systems D. Informatics theory <ol style="list-style-type: none"> 1. Theories, models and frameworks 2. Advanced terminology systems 3. Implementing and upgrading clinical information systems E. Practice application <ol style="list-style-type: none"> 1. Practice application 2. Critical care applications 3. Community health applications 4. Ambulatory care systems 5. Internet tools for advanced nursing practice 6. Informatics solutions for emergency preparedness and response 7. Vendor applications F. Consumer's use of informatics <ol style="list-style-type: none"> 1. Consumer and patient use of computers for health 2. Decision support for consumers G. International perspectives <ol style="list-style-type: none"> 1. Nursing informatics in Canada 2. Nursing informatics in Europe 3. Pacific Rim 4. Nursing informatics in Asia 5. Nursing informatics in South America

	H. The future of informatics 1. Future directions
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Course Name	:	CARE OF CLIENTS WITH PROBLEMS IN OXYGENATION, FLUID AND ELECTROLYTE BALANCE, NUTRITION AND METABOLISM AND ENDOCRINE
Course Code	:	NCM 103
Course Description		This course deals with the principles and techniques of nursing care management of sick clients across lifespan with emphasis on the adult and the older person, population group in any setting with alterations/problems in oxygenation, fluid and electrolyte balance, nutrition and metabolism and endocrine function.
Course Credit		8 units lecture, 6 units RLE (1 unit Skills Lab; 5 units Clinical)
Contact Hours/sem		144 hours lecture and 306 hours RLE
Prerequisite		NCM 102
Placement		3rd year, 1 st semester
Course Objectives		<p>At the end of the course, and given actual clients with problems in oxygenation, fluid and electrolyte balance, nutrition and metabolism, and endocrine function, the student should be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of individuals, families in community and hospital settings. <ul style="list-style-type: none"> - Assess with client/s his/her/their condition/health status through interview, physical examination, interpretation of laboratory findings - Identify actual and at-risk nursing diagnosis - Plan appropriate nursing interventions with client/s and family for identified nursing diagnosis - Implement plan of care with client/s and family - Evaluate the progress of his/her/their client's condition and outcomes of care 2. Ensure a well organized and accurate documentation system; 3. Relate with client/s and their family and the health team appropriately; 4. Observe bioethical concepts/ principles, core values and nursing standards in the care of clients; and, 5. Promote personal and professional growth of self and others.
Course Outline	:	<p>I. The individual client with problems in oxygenation, fluid & electrolyte balance, nutrition and metabolism & endocrine function:</p> <p>A. Risk factors among clients that contribute to the development of problems in the following:</p> <ol style="list-style-type: none"> 1. Oxygenation – cardiovascular risk factors (modifiable and non-modifiable) 2. Fluid and electrolyte – potential factors for exceeding renal reserve capacity, dietary habits to include salt intake,

	<p>hypertension, infection, diabetes</p> <ol style="list-style-type: none"> 3. Nutrition and metabolism - risk factors related to malnutrition, obesity 4. Endocrine function - risk factors related to endocrine hypo or hyper-functioning <p>B. Identifies significant subjective data from the client history related to problems in oxygenation, fluid electrolyte , nutrition and metabolism and endocrine function</p> <ol style="list-style-type: none"> 1. Chief complaints 2. Relevant information, to include eleven functional patterns <ul style="list-style-type: none"> ▪ Health Perception management pattern ▪ Nutritional/metabolic pattern ▪ Elimination pattern ▪ Activity/exercise patterns ▪ Cognitive/perceptual pattern ▪ Sleep-rest pattern ▪ Self perception –self concept pattern ▪ Role relationship pattern ▪ Sexuality-reproductive pattern ▪ Coping-stress tolerance pattern ▪ Value-belief pattern <p>C. Principles and techniques of physical examination in newborn, children, adults, deviations from normal:</p> <ol style="list-style-type: none"> 1. Oxygenation <ol style="list-style-type: none"> a. Inspection – gas exchange; perfusion b. Palpation – gas exchange; perfusion c. Percussion – gas exchange d. Auscultation – gas exchange – heart sound, breath sound, deviations ; fluid transport 2. Fluid and electrolyte balance <ol style="list-style-type: none"> a. Inspection – signs of dehydration, overhydration, b. Palpation – edema, ascites, neck vein filling, hand vein filling, neuromuscular irritability, characteristic of pulse c. Percussion – abdomen for presence of air, fluid d. Auscultation – rates 3. Gastrointestinal Function – IPPA <ol style="list-style-type: none"> a. Inspection – color, texture of skin, mucous membrane, growth patterns, scars, masses b. Auscultation – bowel sounds, bruits c. Palpation – focus on GIT for presence of masses, ascites, rebound tenderness, distention d. Percussion – liver span, masses, ascites 4. Metabolism and endocrine function (focus on GIT, systemic effects of endocrine malfunction) -IPPA <ol style="list-style-type: none"> a. Inspection – color, texture of skin, mucous membrane, growth patterns, obesity b. Auscultation – bruit, heart sounds, breath sounds c. Palpation – organ - thyroid enlargement, masses, edema
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- d. Percussion – fluid, edema
- e. Others – weight, delayed healing of wounds
- C. Results and implications of diagnostic/laboratory examinations of clients with reference to problems in:
 - 1. Oxygenation:
 - a. Screening procedure – peak flow meter
 - b. Diagnostic procedures
 - Non-invasive:
 - Pulmonary: e.g. sputum microscopy, chest x-ray, pulmonary function tests, smoke analyzer
Fagerstrom test – standardized degree of nicotine dependence
 - Cardiac: ultrasound, ECG, 2-D echo, stress test,
 - Vascular: doppler ultrasonography
 - Blood: pulse oximeter .
 - Invasive:
 - Pulmonary: bronchoscopy, ABG, thoracentesis, pulmonary angiography
 - Cardiac: CO determination, cardiac catheterization, CVP, hemodynamics monitoring, enzyme levels, Serum, Cholesterol,
 - Vascular: angiography,
 - Blood: CBC and bone marrow biopsy
 - 2. Fluid and Electrolyte Balance:
 - a. Diagnostic tests
 - Non-invasive: electrolyte determination, intake and output, KUB-IVP and ultrasound
 - Invasive – biopsy,
 - b. Weight, VS
 - 3. Gastrointestinal function
 - Non-invasive: ultrasound of the abdomen, stool culture
 - Invasive: to include: barium swallow, esophagoscopy, biopsy, cytology examination, gastric secretion analysis, endoscopy (gastroscopy, duodenoscopy), proctosigmoidoscopy and rectal examination
 - 4. Metabolic and endocrine function
 - a. Screening: glucose tolerance test
 - Non-invasive: e.g. GI x-ray, ultrasound abdomen, Radio-iodine assay (RAI), protein bound iodine (PBI), thyroid scan, free thyroxine level, basal metabolic rate (BMR), thyroxine stimulating hormone (TSH) test, OGTT (Glucose tolerance test) urinalysis (glycosuria, ketonuria)
 - Invasive: e.g. percutaneous transhepatic cholangiogram, liver function test , serum thyroxine and triiodothyronine test, Iodine 131 uptake, blood sugar tests (fasting blood sugar (FBS), random blood sugar (RBS), glycosylated hemoglobin (Hgb), two-hour post prandial blood glucose, endocrine assay

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| | <p>D. Pathophysiologic Mechanisms:</p> <ol style="list-style-type: none"> 1. Alterations in oxygenation <ol style="list-style-type: none"> a. Alteration in gas exchange – ventilatory dysfunction, impaired diffusion, impaired perfusion b. Alteration in cardiac performance – heart rate problems, Impaired stroke volume secondary to altered preload, afterload, myocardial contractility c. Alteration in vascular integrity – transport network impairment d. Alteration in oxygen carrying capacity of the blood – decreased circulating erythrocytes (anemia) , increased circulating erythrocytes(polycythemia) 2. Fluid electrolyte imbalances <ol style="list-style-type: none"> a. Volume impairment – fluid volume deficit, fluid volume excess, third space fluid shift b. Osmotic imbalances – hyponatremia, hypernatremia c. Ionic concentration problems – hypo- and hyperkalemia; hypo- and hypercalcemia; hypo and hyperchloremia; hypo- and hypermagnesiumemia; hypo- and hyperphosphatemia d. Acid and base imbalances – metabolic acidosis and alkalosis; respiratory acidosis and alkalosis 3. Alterations in GIT function <ol style="list-style-type: none"> a. Disturbances in ingestion – problems in buccal cavity and esophagus b. Disturbances in digestion – peptic acid disease, gastritis and gastric cancer c. Disturbances in absorption – malnutrition, malabsorption syndrome and inflammatory bowel conditions d. Disturbances in elimination – bowel obstruction, hemorrhoids, diarrhea and constipation 4. Alterations in endocrine function <ol style="list-style-type: none"> a. Hypo- and Hyperfunction of the pituitary organ b. Hypo- and Hyperfunction of the hypothalamus c. Hypo- and Hyperfunction of the thyroid organ d. Hypo- and Hyperfunction of the parathyroid organ e. Hypo- and Hyperfunction of the adrenal organ f. Hypo- and Hyperfunction of the gonads g. Problems in glucose metabolism – hypoglycemia and hyperglycemia (IDM, NIDDM) <p>E. Nursing diagnoses taxonomy pertinent to problems/ alteration in:</p> <ol style="list-style-type: none"> 1. Oxygenation <ol style="list-style-type: none"> a. Ineffective breathing pattern b. Ineffective airway clearance c. Impaired gas exchange d. Inability to sustain spontaneous ventilation e. Dysfunctional ventilatory weaning response f. Decreased cardiac output (CO) g. Altered tissue perfusion systemic |
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	<ul style="list-style-type: none"> h. Impaired gas exchange related to altered O₂ carrying capacity of blood due to decreased erythrocytes/hemoglobin i. Activity intolerance related to malnutrition, tissue hypoxia, 2. Fluid and electrolyte imbalance <ul style="list-style-type: none"> a. Risk for fluid volume deficit b. Fluid volume deficit c. Fluid volume excess d. High risk for injury related to electrolyte deficit/excess e. High risk for injury related to acid/base imbalance f. Altered urinary elimination g. Impaired integumentary integrity 3. Gastrointestinal function <ul style="list-style-type: none"> a. Alteration in nutrition less than body requirement b. Alteration in nutrition more than body requirement c. Alteration in oral mucous membrane integrity d. Alteration in comfort: epigastric pain/abdominal pain e. Fluid volume deficit 4. Endocrine function <ul style="list-style-type: none"> a. Alterations in nutrition less than body requirement b. Fluid volume deficit c. Activity intolerance F. Principles of various modalities of management <ul style="list-style-type: none"> 1. Health promotive 2. Disease preventive 3. Curative and restorative G. Principles of management <ul style="list-style-type: none"> 1. For altered pulmonary function <ul style="list-style-type: none"> ▪ Airway patency ▪ Oxygen therapy ▪ Adequate ventilation ▪ Drug therapy ▪ Hydration ▪ Removal of secretion ▪ Prevention of infection ▪ Prevention of complications ▪ Prevention of psychosocial problems ▪ Rehabilitation 2. For cardiac function <ul style="list-style-type: none"> ▪ Hemodynamics monitoring ▪ O₂ therapy ▪ Drug therapy ▪ Hydration ▪ Prevention of infection ▪ Prevention of complications ▪ Prevention of psychosocial problems ▪ Rehabilitation 3. Oxygen carrying capacity of the blood <ul style="list-style-type: none"> ▪ Blood component replacement
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	<ul style="list-style-type: none"> ▪ O2 therapy ▪ Drug therapy ▪ Hydration ▪ Prevention of infection ▪ Prevention of complications ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>4. Fluid Volume Deficit</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Hydration ▪ Blood transfusion as needed ▪ Drug therapy - electrolyte ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>5. Fluid Volume Excess</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy – diuretics, electrolytes ▪ Dietary restriction - sodium ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>6. Electrolyte Deficit – hyponatremia, hypokalemia, hypocalcemia, hypomagnesemia, hypophosphatemia</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy – electrolyte replacement ▪ Dietary management ▪ Supportive management ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>7. Electrolyte Excess- hypernatremia, hyperkalemia, hypercalcemia, hypermagnesemia, hyperphosphatemia</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy – electrolyte replacement ▪ Dietary management ▪ Supportive management ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>8. Metabolic Alkalosis – Base bicarbonate excess</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy - ▪ Dietary management
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	<ul style="list-style-type: none"> ▪ Supportive management ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>9. Metabolic Acidosis – base bicarbonate deficit</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>10. Respiratory Alkalosis – carbonic acid deficit</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>11. Respiratory Acidosis – carbonic acid excess</p> <ul style="list-style-type: none"> ▪ Determination of cause ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>12. Disturbances in ingestion</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Hydration ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>13. Disturbances in digestion</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Hydration ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation
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	<p>14. Disturbances in absorption</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Hydration ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>15. Disturbances in elimination</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Hydration ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>16. Disturbances in hepatic, biliary and pancreatic functions</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Hydration ▪ Drug therapy ▪ Dietary management ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>17. Disturbances in endocrine hypo-function</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy – diuretics, electrolytes ▪ Dietary restriction - sodium ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation <p>18. Disturbances in endocrine hyperfunction</p> <ul style="list-style-type: none"> ▪ Determination and management of cause ▪ Drug therapy – diuretics, electrolytes ▪ Dietary restriction - sodium ▪ Supportive management ▪ Prevention of infection ▪ Prevention of complication ▪ Prevention of psychosocial problems ▪ Rehabilitation
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H. Pharmacologic actions, therapeutic uses, side effects, indications, contraindications, and nursing responsibilities:

1. Pulmonary

- Bronchodilators
- Expectorants
- Antitussives
- Antihistamines

2. Cardiac

- Sympathomimetic agents
- Sympatholytic agents
- Anti-anginal agents
- Anti-arrhythmic agents
- Angiotensin converting enzyme inhibitors
- Antilipemic agents
- Anticoagulant agents
- Thrombolytics
- Peripheral vascular agents

3. Blood

- Hematinics
- Vitamin supplements

4. Fluid

a. Parenteral fluids –

- hypotonic,
- hypertonic
- isotonic solutions

5. Electrolyte

- Sodium
- Potassium
- Calcium
- Magnesium
- Phosphate

6. Diuretics

- Potassium-sparing
- Potassium-losing
- Osmotic diuretics

7. Vitamin D supplements

8. Gastrointestinal, hepato-biliary and pancreatic function

- Antiemetics
- Anticoagulant
- Hematinics agents
- Laxatives and stool softeners
- Antipruritus
- Vitamin supplement
- Antacids
- Antihyperlipidemics
- Antispasmodics
- Antidiarrheal

	<p>9. Endocrine function</p> <ul style="list-style-type: none"> ▪ Corticosteroids ▪ Alpha-adrenergic blocking agents ▪ Alpha-adrenergic blocking agents ▪ Beta-adrenergic blocking agents ▪ Tyrosine inhibitors ▪ Dopamine receptor antagonists ▪ Glucocorticoids ▪ Parathyroid hormone agents ▪ Thyroid hormone agents ▪ Insulin ▪ Oral hypoglycemic agents <p>10. Perioperative care</p> <ul style="list-style-type: none"> ▪ Preoperative – pre-operative medications ▪ Intraoperative – anaesthetic agents – general, spinal, blocks ▪ Postoperative – analgesics, opioids, antipyretics, antibiotics <p>I. Purpose, indications, nursing responsibilities for the following surgical and special procedures:</p> <ol style="list-style-type: none"> 1. Pulmonary <ol style="list-style-type: none"> a. Surgical procedures – tracheostomy, thoracostomy, lung resection, lobectomy, pneumonectomy, thoracoplasty, decortication b. Special procedures – endotracheal/tracheal suctioning and care, humidification, IPPB, ventilatory assist 2. Cardiac <ol style="list-style-type: none"> a. Surgical procedures – coronary artery bypass, pacemaker insertion, valve replacement, repair of congenital abnormality, insertion of ventricular assist device, heart transplant b. Special procedures – laser therapy, basic life support, advance life support 3. Vascular <ol style="list-style-type: none"> a. Surgical procedures – endarterectomy, aneurysmectomy, insertion of intravascular stents b. Special procedures – application of antiembolic stockings 6. Blood forming organs <ol style="list-style-type: none"> a. Surgical procedures – bone marrow aspiration, bone marrow transplant b. Special procedures - blood component transfusion, reverse isolation 5. Renal dysfunction <ol style="list-style-type: none"> a. Major surgical procedures - nephrectomy, nephrostomy, cystectomy, ureterostomy, renal transplants, urinary diversion b. Special procedures - peritoneal dialysis, hemodialysis, bladder training, cystoclysis/bladder irrigation 6. Gastrointestinal dysfunction <ol style="list-style-type: none"> a. Surgical procedures – gastrostomy, gastrectomy, colostomy,
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	<p>hemorrhoidectomy, gastrointestinal bypass, ileostomy</p> <p>b. Special procedures – parenteral hyperalimentation; feeding per nasogastric, jejunostomy, gastrostomy tubes; colostomy care and irrigation, dietary planning for common GT and endocrine problems; administering medications via NGT, J tube, G tube; hot sitz bath</p> <p>7. Endocrine dysfunction</p> <p>a. Surgical procedures –</p> <ul style="list-style-type: none"> ▪ Thyroidectomy, ▪ Parathyroidectomy <p>b. Special procedures –</p> <ul style="list-style-type: none"> ▪ monitoring of blood glucose levels, ▪ maintenance of blood glucose – diet, exercise, drugs <p>J. Safe and comprehensive perioperative nursing care</p> <ol style="list-style-type: none"> 1. Assessment and care during the perioperative period 2. Techniques in assisting the surgical team during the operation 3. Principles of safety, comfort and privacy during the perioperative period <p>1. Nursing responsibilities during the perioperative period</p> <ul style="list-style-type: none"> • Preoperative - physical, psychological, spiritual preparation • Intraoperative – circulating nurse functions, scrub nurse functions • Postoperative – airway, breathing, circulation priorities. Meeting the physical, psychological and spiritual needs of the client. <p>K. Steps/pointers in decision making and prioritization with client/s having problems in oxygenation, fluid and electrolyte balance, metabolic and endocrine function</p> <p>L. Principles, concepts and applications of bioethics in the care of clients</p> <p>M. Developing outcome criteria for clients with problems in oxygenation, fluid and electrolyte balance, metabolic and endocrine function</p> <p>N. Appropriate discharge plan including health education</p> <p>O. Accurate recording and documentation</p>
Guide for RLE	<p>Provide opportunities to demonstrate the procedures for oxygenation, fluid electrolytes balance, nutrition and metabolism, endocrine functions, and intra-operative care.</p> <p>Regarding the intra-operative care experience, provide opportunities for the following:</p> <ol style="list-style-type: none"> 1. Act as a circulating nurse in THREE (3) MAJOR SURGICAL CASES IN THE HOSPITAL SETTING 2. Act as a scrub nurse in AT LEAST THREE (3) MAJOR VARIED SURGICAL CASES IN THE HOSPITAL SETTING ONLY

	<p>In the event that the required competencies are not developed within the allotted hours/weeks, the nursing student/s shall be required to extend his/her Related Learning Experience (RLE) exposure until the expected competencies are satisfactorily achieved.</p> <p>To standardize documentation, a prescribed form shall be accomplished upon completion of the related clinical experience.</p> <p>Provide opportunities for actual hospital and community experiences to ensure that competencies are developed.</p>
<p>Equipment and Materials [these could be found in nursing skills lab, base hospital, affiliating centers]</p>	<p>Alteration in Oxygenation: Oxygen (O2) tank, O2 regulator, humidifier, monkey wrench, O2 tubings, O2 cannula/catheter, O2 masks, croupette, O2 tent, suction catheters, suction machine, suction catheters, oxymeter, peak flow meter, ventilatory support equipments, nebulizer, one-way/two-way/three-way water seal drainage, microscope, glass slide, BP apparatus, stethoscope, basic life support model, cardiac monitor, EKG machine cardiac arrest board, gloves, tongue depressor, Blood transfusion set, hemoglobin test</p> <p>Alteration in fluid electrolyte balance - weighing scale, tape measure, stethoscope, IV tubings, different types of IV fluids (hypotonic, hypertonic and isotonic), peritoneal dialysis set, dialyzing solution, hemodialysis machine</p> <p>Alteration in nutrition and metabolism – body weight, tape measure, BMR, body fat analyser, anthropometric measurement, special diets, nasogastric or gastrostomy feeding, enterostomal care (colostomy, ileostomy), hot Sitz bath,</p> <p>Alteration in endocrine function – blood glucose monitoring, ketone determination, diet therapy computation for diabetics, insulin injection,</p> <p>Pain - measurement of pain perception</p> <p>Perioperative care - pre-operative care (physical, psychological and spiritual preparation) intraoperative: (gowning, gloving, simulated OR table, scrubs Etc); postoperative care: (suction apparatus, oral airway, endotracheal tube, nasogastric/gastrostomy tubes, different types of dressings)</p>

Course Name	:	BIOSTATISTICS
Course Code	:	Biostat
Course Description	:	This course is designed to meet the introductory statistical needs of students in the health related disciplines. The study includes topics on collection and presentation of the different statistical data used in health administration, frequency, distribution, measures of central tendencies, measures of variability, normal distribution and hypothesis testing.
Course Credit	:	3 units lecture
Contact Hours/sem	:	54 lecture hours
Prerequisite	:	College Algebra
Placement	:	3 rd Year, 1 st semester
Course Objectives	:	At the end of the course and given relevant simulated situations/ conditions, the student will be able to apply the concepts, theories and principles of biostatistics (from collection and presentation of the different statistical data used in health administration, frequency, distribution, measures of central tendencies, measures of variability, normal distribution and hypothesis testing) in nursing and health related disciplines.
Course Outline	:	<ul style="list-style-type: none"> A. Introduction <ul style="list-style-type: none"> 1. Definition 2. Branches/kinds of statistics 3. Symbols used B. Statistical data collection <ul style="list-style-type: none"> 1. Health care overview 2. Data collection 2. Uses of data C. Common statistical data used in health administration <ul style="list-style-type: none"> 1. Population census 2. Percentage of occupancy 3. Mortality/morbidity rates 4. Autopsy rules 5. Length of stay/discharge 6. Miscellaneous rates D. Data presentation <ul style="list-style-type: none"> 1. Tabular presentation <ul style="list-style-type: none"> a. Table gormats b. Frequency distribution table c. Graphical presentation d. Data presentation via computer E. Measures of central tendencies <ul style="list-style-type: none"> 1. Mean 2. Median 3. Mode 4. Ranks/quantiles

	<p>F. Measures of variability</p> <ol style="list-style-type: none"> 1. Range 2. Average deviation 3. Quartile deviation 4. Variance 5. Standard Deviation <p>G. Normal distribution</p> <ol style="list-style-type: none"> 1. Normal curve 2. Normal curve areas 3. Application of the normal curve areas <p>H. Hypothesis testing</p> <ul style="list-style-type: none"> Definition of terms Types/kinds of test Steps in testing hypothesis Common statistical tests used <p>I. Validity and reliability testing</p>
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Course Name	:	ECONOMICS WITH TAXATION AND LAND REFORM
Course Code	:	Econ
Course Description	:	This course is an introduction to economics, the basic concepts of microeconomics, money and banking, economic growth and development and international economics and its implication to nursing. Also discussed are the basic concepts of taxation and land reform.
Course Credit	:	3 units lecture
Contact Hours/sem	:	54 lecture hours
Placement	:	3 rd Year, 1 st Semester
Course Objectives	:	<p>To introduce the students to the concepts of economics applied to health and enable them to appreciate and apply the principles in health program, decision-making and development. At the end of the course, the student shall be able to:</p> <ol style="list-style-type: none"> 1. Appreciate the basic concepts and rationale of economics. 2. Discuss the concept of health with emphasis on the use of health outcomes. 3. Apply the basic concepts of the law of supply and demand to health related issues. 4. Discuss the various roles of the different health sectors and in the provisions of health goods and services and analyze how the government and private health sectors finance health care. 5. Describe the basic principles of evaluating health programs and projects.
Course Outline	:	<ol style="list-style-type: none"> 1. Introduction to Economics 3. The Concepts of Economics <ol style="list-style-type: none"> a. Man's work against scarcity b. General economics resources: land, labor, capital & technology

- c. The universal objective of attaining the maximum output out of a given input
 - d. Three components of economics: alternative choices, the choices and their costs, the effect of choices on the future
- II. General economic concepts: the law of supply and demand
1. The demand curve
 - a. Characteristics of the demand curve; the law of downward sloping demand
 - b. Relationships between the price of goods and the quantity demanded
 - c. Economic factors which affect the demand curve
 - d. Demand shift
 2. The Supply curve
 - a. Characteristics of the supply curve
 - b. The Law of upward sloping supply: relationship between the price of goods and the quantity of procedures are willing to supply
 - c. Economic factors which affect the supply of goods
 - d. The supply shift
 3. The supply and demand inter-relationships
 - a. Price, demand and supply
 - b. The equilibrium point
 - c. Elasticities
- Case No. 1: Cases on law of supply and demand apply to healthcare policy making
- III. Introduction to the concept of health
1. Definition of health
 2. How is "health" objectively measured?
 3. What determines health? The underlying and proximate determinants of health
- IV. Economics and the health care sector
1. Demand for health care: determinants of health seeking behavior:
 - a. Economic variables which affect the demand for health care
 - b. Demographic variables which affect the demand for health care
 - c. Why are health services and commodities different from other consumer goods?
 2. The supply of health services
 - a. Factors which affect the supply of health manpower
 - b. Trade-off between high quality manpower and abundant supply
 - c. Experiences from manpower substitution
 - d. Experiences from other input substitution
 3. Concept of demographic transition

Changes in age, health risks and health –stock and its effect on:

	<ul style="list-style-type: none"> a. Probability of getting ill b. The type of illnesses experienced c. The type of health care commodities demanded <p>3.2 Population composition, demographic transition and its applications on health program planning</p> <p>Case No. 2: “Where do we put our money?” A case on demographic transition, population, composition, and comprehensive health programs of Japan and the Philippines</p> <p>V. Economic evaluation of health programs</p> <ul style="list-style-type: none"> 1. Health cost concepts <ul style="list-style-type: none"> Type of costs: direct and indirect costs, recurrent and capitalized costs 2. Cost minimization [description] 3. Cost benefit analysis [description] 4. Cost utility analysis [description] <p>VI. Description of the health care sector</p> <p>Reaction Paper: “Health Status of the Philippines and Asia”</p> <p>VII. Health finance and managed care</p> <ul style="list-style-type: none"> 1. Current trends and growth of alternative moods of healthcare financing in the Philippines <ul style="list-style-type: none"> Out-of-pocket/fee-for service Medical insurance Health maintenance organizations and other managed care organizations 2. Out-of-pocket healthcare financing: advantages and disadvantages 3. Concepts: medical insurance <ul style="list-style-type: none"> Costs and pricing of medical insurance: actuarial (medical) costs and administrative costs 4. Health maintenance organizations: an off-shoot of medical insurance and emphasis on preventive and promotive healthcare <ul style="list-style-type: none"> Growth and trends of the HMO industry Conceptual framework of the organization of HMOs 5. Other managed-care organizations: description and concepts <ul style="list-style-type: none"> Changing roles of physicians, nurses and allied medical professionals under a managed-care system Emphasis on efficiency outcomes <p>VII-A. Descriptive study on Philippine health maintenance organizations</p> <ul style="list-style-type: none"> 1. Trends in Philippine HMOs 2. Examples of HMO plan benefit coverage 3. A glimpse on the financial/operational performance of HMOs <p>VIII. Taxation</p> <p>IX. Land reform</p>
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Course Name:	:	CARE OF CLIENTS WITH PROBLEMS IN INFLAMMATORY AND IMMUNOLOGIC RESPONSE AND PERCEPTION AND COORDINATION
Course Code	:	NCM 104
Course Description	:	This course deals with the concepts, principles and theories of human behavior and the care of the sick client across the lifespan with emphasis on the adult and the older person, population group experiencing alterations in Inflammatory and Immunologic Response and perception and coordination in varied settings.
Course Credit	:	5 units lecture, 4 units RLE (1unit skills lab, 3 unit clinicals)
Contact Hours/Sem	:	90 Lecture Hours/ 204 RLE Hours
Prerequisite	:	NCM 103
Placement	:	3 rd Year, 2 nd Semester
Course Objectives	:	<p>At the end of the course, and given actual clients, population group, with problems in inflammatory and immunologic response and perception and coordination, the student should be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of individuals, families in community and hospital settings. <ul style="list-style-type: none"> - Assess with client/s his/her/their condition/health status through interview, physical examination, interpretation of laboratory findings. - Identify actual and at-risk nursing diagnosis. - Plan appropriate nursing interventions with client/s and family for identified nursing diagnosis. - Implement plan of care with client/s and family. - Evaluate the progress of his/her/their client's condition and outcomes of care. 2. Ensure a well-organized and accurate documentation system. 3. Relate with client/s and their family and the health team appropriately. 4. Observe bioethical concepts/ principles and core values and nursing standards in the care of clients. 5. Promote personal and professional growth of self and others.
Course Outline	:	<ol style="list-style-type: none"> I. Alteration in inflammatory and immunologic response <ol style="list-style-type: none"> A. Risk factors assessment and screening procedures among clients that contribute to the development of problems in inflammatory and immunologic reaction B. Significant subjective data from client – relevant information based on chief complaints, functional patterns, including psychosocial and behavioral assessment 2. Alterations in perception and coordination <ol style="list-style-type: none"> A. Risk factors assessment and screening procedures among

	<p>clients that contribute to the development of problems in perception and coordination</p> <p>B. Significant subjective data from client – relevant information based on chief complaints, functional patterns, including psychosocial and behavioral assessment</p> <p>C. Principles and techniques of physical examination in newborn, children & adults and deviations from normal in perception & coordination</p> <ol style="list-style-type: none"> 1. Inflammatory and immunologic reactions <ol style="list-style-type: none"> a. Inspection – color, lesions, masses b. Palpation – turgor, tenderness, masses, body temperature, tenderness 2. Neurologic assessment <ol style="list-style-type: none"> a. Inspection: loss of consciousness (LOC), hearing, sight, papillary changes, gait, posture, ADL, muscle strength, discharge b. Palpation: tenderness, muscle strength c. Percussion: reflexes 3. Visual and auditory assessment <ol style="list-style-type: none"> a. Inspection: hearing, sight, papillary changes, discharge, bleeding b. Palpation: pain, tenderness, presence of mass/lesions 4. Locomotion assessment <ol style="list-style-type: none"> a. Inspection: posture and gait, ADL, swelling, atrophy, deformity, deformity, muscle strength, discharge b. Palpation: deviation/limitation in range of motion (ROM), tenderness, deformity of joints, muscle size and strength, crepitation on movement of joints, presence of subcutaneous nodules c. Palpation: turgor, tenderness, masses, body temperature, tenderness <p>D. Results and implications of diagnostic/laboratory examinations of clients with reference to problems in:</p> <ol style="list-style-type: none"> 1. Inflammatory and immunologic reaction – <ol style="list-style-type: none"> a. Diagnostic tests – <ul style="list-style-type: none"> ▪ Non-invasive: urinalysis, culture and sensitivity tests, x-ray ▪ Invasive – CBC, antistreptolysin titer, biopsy, blood Chemistry, CSF, Gram Staining, ELISA, Western Blot, tests for emerging infections e.g. SARS 2. Perception and coordination – <ol style="list-style-type: none"> a. Neural regulation <ul style="list-style-type: none"> ▪ Non-invasive diagnostic procedures: skull x-ray, electroencephalogram (EEG), magnetic resonance imaging (MRI), ultrasound, ▪ Invasive diagnostic procedures: cerebral angiography, lumbar puncture, CT scan
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	<p style="text-align: center;">ventriculogram</p> <p>b. Visual Auditory</p> <ul style="list-style-type: none"> ▪ Non-invasive diagnostic procedures: visual acuity, visual field testing, ophthalmoscopy, slit lamp, audiometry ▪ Invasive diagnostic procedures: CT scan, electronystagmography, ear culture, sensitivity <p>c. Locomotion</p> <ul style="list-style-type: none"> ▪ Non-invasive diagnostic procedures: electromyogram (EMG) ▪ Invasive diagnostic procedures: biopsy, cerebrospinal & synovial fluid determination, serum calcium, phosphorus, alkaline phosphatase determination <p>E. Pathophysiologic mechanisms of Alterations in perception and coordination</p> <ol style="list-style-type: none"> 1. Inflammatory and Immunologic reactions <ol style="list-style-type: none"> a. Inflammatory reactions b. Bacterial conditions c. Bullous diseases d. Infestation and parasitic diseases e. Vaccine-preventable infectious diseases f. Others – AIDS, STDs 2. Immunologic reactions <ol style="list-style-type: none"> a. Hypersensitivity reactions b. Immunodeficiency c. Autoimmune disorders 3. Neural regulation <ol style="list-style-type: none"> a. Motor disturbances b. Seizures c. Sensory deviations d. Head ache ad pain e. Altered state of consciousness 4. Visual and Auditory <ol style="list-style-type: none"> a. Disturbances in visual perception: blindness, inflammatory disturbances: neoplastic disturbances, traumatic interferences with visual perception, absence of visual perception, congenital and neonatal visual disturbances, b. Disturbances in auditory perception: deafness/hearing loss, inflammatory /infection, trauma, meniere’s syndrome, degenerative changes, disturbances of hearing, obstructive problems 5. Locomotion <ol style="list-style-type: none"> a. Infections/Inflammatory disorders b. Abnormalities in the curvature of the spine c. Degenerative disorders
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	<ul style="list-style-type: none"> d. Traumatic injuries e. Congenital disorders f. Bone tumors <p>F. Nursing diagnoses taxonomy pertinent to problems/ alteration in perception and coordination</p> <ul style="list-style-type: none"> 1. Inflammatory and immunologic reaction <ul style="list-style-type: none"> a. Impaired skin integrity b. Activity intolerance c. Potential for infection d. Disturbances in self-concept e. Ineffective family coping f. Social isolation 2. Neural regulation <ul style="list-style-type: none"> a. Altered cerebral tissue perfusion b. Impaired verbal communication c. Impaired swallowing d. Potential for injury e. Activity intolerance f. Ineffective individual coping g. Knowledge deficit 3. Visual and auditory perception <ul style="list-style-type: none"> a. Alteration in sensory perception: visual/auditory b. Potential for infection c. Self esteem disturbance d. Potential for injury e. Knowledge deficit 4. Locomotion <ul style="list-style-type: none"> a. Alteration in comfort: pain/pruritus b. Knowledge deficit c. Impaired physical mobility d. Disturbance in self-concept e. Altered nutrition <p>G. Principles of Management for altered Perception coordination</p> <ul style="list-style-type: none"> 1. Inflammatory and immunologic reaction <ul style="list-style-type: none"> a. Determination and management of cause b. Drug therapy c. Prevention of infection d. Supportive management e. Prevention of complications f. Rehabilitation 2. Neural regulation <ul style="list-style-type: none"> a. Determination and management of cause b. Airway patency c. Oxygen therapy d. Adequate ventilation e. Drug therapy f. Hydration g. Removal of secretion
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	<ul style="list-style-type: none"> h. Prevention of infection i. Psychosocial interventions j. Seizure precaution k. Increased ICP precaution l. Prevention of complications m. Rehabilitation <ul style="list-style-type: none"> 3. Visual and auditory perception <ul style="list-style-type: none"> a. Determination and management of cause b. Drug therapy c. Supportive management for visual/auditory impaired d. Prevention of infection e. Psychosocial interventions f. Prevention of complication g. Rehabilitation 4. Locomotion <ul style="list-style-type: none"> a. Determination and management of cause b. Drug therapy c. Supportive management: immobility precaution d. Removal of secretion e. Prevention of infection f. Prevention of complications g. Rehabilitation <p>H. Pharmacologic actions, therapeutic use, side effects, indications, contraindication, and nursing responsibilities for perception and coordination</p> <ul style="list-style-type: none"> 1. Inflammatory and Immunologic reactions <ul style="list-style-type: none"> a. Antibiotics b. Antifungal agents c. Keratolytic agents d. Anticholinergic agents e. Adrenergic agents f. Antihistamines g. Anti-inflammatory agents h. Corticosteroids i. Immunologic agents j. Vaccines 2. Neural regulation <ul style="list-style-type: none"> a. Anti-convulsants b. Osmotic diuretics c. Corticosteroid d. Antibiotics e. Antipyretics f. Anti-inflammatory agents 3. Visual and auditory perception <ul style="list-style-type: none"> a. Miotic agents b. Corticosteroids c. Mydriatic agents d. Antibiotics
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	<ul style="list-style-type: none"> 4. Locomotion <ul style="list-style-type: none"> a. Antibiotics b. Anti-inflammatory agents c. Corticosteroids I. Purpose, indications, nursing responsibilities for the following surgical and special procedures in perception and coordination <ul style="list-style-type: none"> 1. Inflammatory and immunologic reaction <ul style="list-style-type: none"> a. Surgical procedures – debridement, incision and drainage, excision b. Special procedures - universal precaution, reverse isolation, medical asepsis/surgical asepsis 2. Neural regulation <ul style="list-style-type: none"> a. Surgical procedures: craniotomy, cranioplasty, ventriculo- peritoneal shunt b. Special procedures: ICP monitoring, seizure precaution 3. Visual and auditory perception <ul style="list-style-type: none"> a. Surgical procedures: iridectomy, cataract procedures, enucleation, keratoplasty, mastoidectomy, tympanoplasty, myringotomy, fenestration b. Special procedures: instillation of otic solution, external auditory canal irrigation, hearing aide device 4. Locomotion <ul style="list-style-type: none"> a. Surgical procedures: internal/external fixation, amputation, bone resection, open reduction, tenorrhaphy, spinal fusion, b. Special procedures: application of casts, tractions, braces, crutch walking J. Safe and comprehensive perioperative nursing care <ul style="list-style-type: none"> 1. Assessment ad care during the perioperative period 2. Techniques in assisting the surgical team during the operation 3. Principles of safety, comfort and privacy during the perioperative period 4. Nursing responsibilities during the perioperative period K. Steps/pointers in decision making and prioritization with client/s having problems in perception coordination, adjustment or adaptation L. Principles, concept and application of bioethics in the care of clients M. Developing outcome criteria for clients with problems in in perception coordination and adjustment/adaptation N. Appropriate discharge plan including health education O. Accurate recording and documentation
Guide for RLE	Provide opportunities to demonstrate the procedures for inflammatory and immunologic response, perception and coordination.

	<p>In the event that the required intra-operative competencies in NCM 103 are not achieved within the allotted hours/weeks, the nursing student/s shall be made to complete the competencies in this course.</p> <p>To standardize documentation, a prescribed form shall be completed right after the related clinical experience.</p> <p>Provide opportunities for actual clinical hospital and community experiences to ensure competencies are developed.</p>
Equipment and Materials (these could be found in nursing skills lab, base hospital, affiliating centers)	<p>Alterations in inflammatory and immunologic reactions: hand washing facility, isolation barrier techniques and materials, needles and syringes for skin testing.</p> <p>Alterations in neural regulation: flashlight/penlight, tongue depressor, cotton, safety pin, reflex hammer, watch with second hand.</p> <p>Alterations in visual and auditory: ophthalmoscope, otoscope, penlight, ear irrigating device, Snellen chart, tuning fork, hearing augmentation device.</p> <p>Alterations in locomotion: sand bag, splints, types of traction, types of casts, orthopedic bed/appliances, crutches, walker</p> <p>Videos on exercises, neurologic assessment</p>

Course Name	:	CARE OF CLIENTS WITH MALADAPTIVE PATTERNS OF BEHAVIOR
Course Code	:	NCM 105
Course Description	:	The course is designed to focus on health and illness across the lifespan of clients, population groups with acute and chronic psychosocial difficulties and psychiatric illnesses.
Course Credit	:	4units lecture ; 2units RLE (2units Clinical)
Contact Hours/Sem	:	72 Lecture hours; 102 RLE hours
Prerequisite	:	General Psychology, NCM 103
Co-requisite	:	NCM 104
Placement	:	3 rd Year; 2 nd semester
Course Objectives	:	<p>At the end of the course, and given actual clients with maladaptive patterns of behavior, the student shall be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of individuals, families in community and hospital settings. <ul style="list-style-type: none"> - Assess client/s with his/her/their condition through mental status examination, physical examination, interpretation of diagnostic procedures.

	<ul style="list-style-type: none"> - Identify actual and potential nursing diagnosis. - Plan appropriate nursing interventions with client/s and family for identified nursing diagnosis. - Implement plan of care with client/s and family. - Evaluate the progress of his/her/their client's condition and outcomes of care. <ol style="list-style-type: none"> 2. Apply knowledge and understanding of maladaptive patterns of behavior in providing safe and quality care to clients. 3. Increase self-awareness and therapeutic use of self in the care of clients. 4. Ensure a well-organized and accurate documentation system. 5. Relate with client/s and their family and the health team appropriately. 6. Observe bioethical concepts/ principles, core values and nursing standards in the care of clients. 7. Promote personal and professional growth of self and others.
Course Outline	<p>I. Overview of psychiatric nursing</p> <ol style="list-style-type: none"> A. Evolution of mental health-psychiatric nursing practice B. The mental health nurse <ol style="list-style-type: none"> 1. Role 2. Essential qualities C. Interdisciplinary team D. The mental health illness continuum <p>II. Mental health-psychiatric nursing practice</p> <ol style="list-style-type: none"> A. Personality theories and determinants of psychopathology: Implications for mental health-psychiatric nursing practice <ol style="list-style-type: none"> 1. Psychoanalytic 2. Behavioral 3. Interpersonal 4. Cognitive 5. Humanistic 6. Psychobiologic 7. Cognitive 8. Psychosocial 9. Psychospiritual 10. Eclectic B. General assessment considerations <ol style="list-style-type: none"> 1. Principles and techniques of h-Psychiatric nursing interview 2. Mental status examination 3. Diagnostic examinations specific to psychiatric patients C. Building nurse-client relationship <ol style="list-style-type: none"> 1. Nurse-client interaction vs. nurse-client relationship 2. Therapeutic use of self

	<ul style="list-style-type: none"> 3. Therapeutic communication <ul style="list-style-type: none"> a. Characteristics b. Techniques 4. Goals in the one-to-one relationship 5. Phases in the development of nurse-client relationship D. Documentation in psychiatric nursing practice <ul style="list-style-type: none"> 1. Problem-oriented recording <ul style="list-style-type: none"> a. SOAP 2. Narrative recording 3. Process recording E. Therapeutic modalities, psychosocial skills and nursing strategies <ul style="list-style-type: none"> 1. Biophysical /somatic interventions <ul style="list-style-type: none"> a. Electroconvulsive and other somatic therapies b. Psychopharmacology 2. Supportive Psychotherapy <ul style="list-style-type: none"> a. Nurse-patient relationship therapy b. Group therapy c. Family therapy 3. Counseling 4. Mental health teaching/client education 5. Self-enhancement, growth/therapeutic groups 6. Assertiveness training 7. Stress management 8. Behavior modification 9. Cognitive restructuring 10. Milieu therapy 11. Play therapy 12. Psychosocial support interventions 13. Psychospiritual Interventions 14. Alternative Medicine/Therapies F. Concept of Anxiety <ul style="list-style-type: none"> 1. Defining characteristics of Anxiety 2. Levels of Anxiety 3. Manifestations of Levels of Anxiety <ul style="list-style-type: none"> a. Physiologic b. Psychologic 4. Ego Defense Mechanisms <ul style="list-style-type: none"> a. Four levels of Defense G. Crisis <ul style="list-style-type: none"> 1. Types of crisis 2. Phases of Crisis Development 3.Characteristics of Crisis 4. Crisis Intervention III. Care of clients with maladaptive patterns of behavior across the lifespan (childhood, adolescent, adulthood) <ul style="list-style-type: none"> A. The <i>Nursing Process</i> applied to Psychiatric Nursing Practice: <ul style="list-style-type: none"> 1. Assessing human response to the different maladaptive patterns of behavior
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- a. Self-awareness and Use of Self
- b. Bio-Psycho-Social and Behavioral data
- 2. Nursing Diagnosis and Outcome identification
- 3. Planning and implementing nursing intervention
 - a. Biological
 - b. Psychosocial
- 4. Evaluation and treatment outcomes

B. Maladaptive Patterns of Behavior

- 1. Age-Related Maladaptive Patterns: Disorders Across the Lifespan
- 2. Anxiety-Related Disorders
 - a. Anxiety disorders across the lifespan
 - Panic Disorder
 - Phobias
 - Post traumatic stress disorder
 - Acute Stress disorder
 - Obsessive-compulsive disorder
 - Generalized Anxiety Disorder
 - b. Somatoform disorders
 - Somatization disorder
 - Conversion disorder
 - Hypochondriasis
 - Pain disorder
 - Body Dysmorphic disorder
 - c. Dissociative disorders
 - Depersonalization
 - Psychogenic Amnesia
 - Psychogenic Fugue
 - Dissociative Identity Disorder/ Multiple Personality disorder
- 3. Psychophysiologic Response and Sleep
- 4. Personality Disorders
 - a. Childhood Personality disorders
 - Conduct disorder
 - Oppositional Defiant Behavior
 - b. Odd/eccentric behaviors
 - Paranoid personality disorder
 - Schizoid personality disorder
 - Schizotypal personality disorder
 - c. Dramatic, emotional, erratic behaviors
 - Antisocial personality disorder
 - Borderline personality disorder
 - Narcissistic personality disorder
 - Histrionic personality disorder
 - d. Anxious, fearful behaviors
 - Obsessive compulsive personality disorder
 - Dependent personality disorder

- Avoidant personality disorder
 - e. Passive aggressive
- 6. Substance-related disorders: substance abuse, dependence, intoxication, withdrawal and polysubstance dependence
 - a. Central nervous system depressants
 - Alcohol
 - Sedatives-hypnotics and anxiolytics
 - Opioids
 - b. Central nervous system stimulants
 - Caffeine
 - Nicotine
 - Amphetamine and cocaine
 - c. Hallucinogens
 - d. Cannabis
 - e. Inhalants
 - f. Nursing Issues
- 7. Mood disorders
 - a. Reactive attachment disorder
 - b. Bipolar I disorder
 - c. Bipolar II disorder
 - d. Cyclothymic disorder
 - e. Dysthymic disorder
 - f. Major depressive disorder
 - g. Clients at risk for suicidal and self-destructive behavior
- 8. Schizophrenia and other Psychoses
 - a. Schizophrenia
 - Catatonic type
 - Paranoid type
 - Undifferentiated type
 - Disorganized type
 - Residual type
 - b. Other Psychotic disorders
 - Schizophreniform disorder
 - Schizoaffective disorder
 - Delusional disorder
 - Brief psychotic disorder
 - Shared psychotic disorder
- 9. Cognitive disorders
 - a. Fetal alcohol syndrome
 - b. Attention deficit hyperactive disorder
 - c. Autism
 - d. Delirium
 - e. Dementia
 - f. Alzheimer's disease
 - g. Diffuse Lewy body disease
 - h. Korsakoff's disease
 - i. Huntington's disease

	<ul style="list-style-type: none"> j. Pick's disease k. Vascular and multi-infarct dementia <p>10. Eating disorders</p> <ul style="list-style-type: none"> a. Pica b. Rumination c. Feeding disorders d. Anorexia nervosa e. Bulimia nervosa <p>11. Psychosexual disorders</p> <ul style="list-style-type: none"> a. Gender identity disorder b. Sexual dysfunctions c. Paraphilias <p>12. Abuse and violence</p> <ul style="list-style-type: none"> a. Victims of violent behavior <ul style="list-style-type: none"> ▪ Child ▪ Spouse ▪ Elderly b. Torture and ritual abuse c. Rape and sexual assault <p>C. Legal issues affecting mental health nursing D. Future trends and issues in mental health nursing practice E. Community-based mental health programs</p>
Guide for RLE	Provide opportunities to care for actual clients in the hospital and community to ensure competencies are developed.

Course Name	:	BIOETHICS
Course Code	:	Bioethics
Course Description	:	This course deals with the application of ethico-moral and legal concepts and principles to issues that affect the practice of nursing. These provide the basis for appropriate decision making given varied situations, to prepare the learner to render effective, efficient and safe nursing care. Furthermore, related learning experiences provide opportunities to concretize commitment to nursing. The critical thinking process shall be used in the unit with the objective of developing the intellectual capacity to conceptualize and contextualize what students know about particular ethico-moral and legal issues.
Course Credit	:	3 units lecture
Contact Hours/Sem	:	54 lecture hours
Prerequisite	:	Logic, Philosophy of Man
Placement	:	3 rd Year, 2 nd Semester
Course Objectives	:	At the end of the course and given actual and relevant simulated situations/ conditions, the student will be able to: 1. Explain the concepts, theories and principles of bioethics in nursing and health.

	2. Apply relevant bioethical principles in nursing and health related situations.
Course Outline	: <ul style="list-style-type: none"> A. Definition of terms <ul style="list-style-type: none"> 1. Ethics 2. Biology 3. Bioethics 4. Health ethics 5. Professional ethics 6. Prevalence of bioethical issues <ul style="list-style-type: none"> ▪ Abortion ▪ Euthanasia ▪ Suicide ▪ Determination of death ▪ (Biological and clinical death) ▪ In-vitro fertilization ▪ Stem cell technology B. The human person <ul style="list-style-type: none"> 1. The personhood 2. Human acts & acts of man <ul style="list-style-type: none"> a. knowledge b. freedom c. conscience C. Types of ethical thoughts <ul style="list-style-type: none"> 1. Cantian 2. Rawl's ethics 3. St. Thomas Aquinas 4. Ross ethics <ul style="list-style-type: none"> ▪ actual/ prima-facie duty ▪ duty of fidelity ▪ duty of reparation ▪ duty of gratitude ▪ duty of justice ▪ duty of beneficence ▪ duty of improvement ▪ duty of non-maleficence D. The calling of the health care provider <ul style="list-style-type: none"> 1. The health care profession 2. The client 3. The health care provider 4. Health care provider-client relationship E. The Qualities and responsibilities of a good health care provider to the client, society and its profession F. Virtues, vices, & habits of a health care provider <ul style="list-style-type: none"> 1. Virtues 2. Vices 3. Habits <ul style="list-style-type: none"> a. Types of good habits b. Types of bad habits

		<p>4. Virtues of the health care provider</p> <ul style="list-style-type: none"> ▪ Fidelity ▪ Honesty ▪ Integrity ▪ Humility ▪ Respect ▪ Compassion ▪ Prudence ▪ Courage <p>5. Vices of the health care</p> <ul style="list-style-type: none"> ▪ Fraud ▪ Pride ▪ Greed <p>G. Basic ethical principles</p> <ul style="list-style-type: none"> ▪ Stewardship ▪ Totality ▪ Double effect ▪ Cooperation ▪ Solidarity <p>H. Major bioethical principles</p> <ul style="list-style-type: none"> ▪ Respect for person & justice ▪ Non-maleficence ▪ Beneficence <p>I. Application of bioethical principles to the care of the sick</p> <ol style="list-style-type: none"> 1. Functions of informed consent <ul style="list-style-type: none"> ▪ Protective and participative 2. Rights of a patient
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Course Name	:	NURSING RESEARCH I
Course Code	:	NRes I
Course Description	:	This is an introductory course intended to equip the nursing students with concepts, principles in research starting from an overview of the major phases of the research process. The course will include discussions from formulation to dissemination of research findings, focus on the formulation of a research problem to the selection of the research design, planning and choosing the appropriate research tools for data gathering. This course will require the student of group to present a research proposal in a colloquium with the application of knowledge and demonstration of skills and attitude in the conceptual, design and planning phases of the research process.
Course Credit		2 units lecture 1unit RLE
Contact Hours/Sem	:	36 lecture hours; 51 RLE hours
Prerequisite	:	Biostatistics
Placement	:	^{3rd} year, 2nd semester

Course Objectives	:	<p>At the end of the course and given actual situation, the student will be able to:</p> <ol style="list-style-type: none"> 1. Discuss the major phases of the research process. 2. Present a group research proposal based on an identified clinical/situational problem.
Course Outline	:	<ol style="list-style-type: none"> A. Introduction to nursing research <ol style="list-style-type: none"> 1. Definition of nursing research 2. The importance of research in nursing 3. Roles of nurses in research 4. Evolution of nursing research 5. Purposes of nursing research B. Overview of the research process in quantitative and qualitative studies <ol style="list-style-type: none"> 1. Major phases of a research process <ol style="list-style-type: none"> a. The conceptual phase <ul style="list-style-type: none"> ▪ Formulating and delimiting the problem ▪ Sources of research problem ▪ Criteria in evaluating research problem ▪ Criteria for stating research problem b. Reviewing the related literature <ul style="list-style-type: none"> ▪ Purpose of literature review ▪ Categories of references ▪ Locating relevant literature for research review c. Defining the framework and developing conceptual and theoretical frameworks d. Definition of important terms: concept, construct, conceptual models and statistical models e. Formulating hypotheses <ul style="list-style-type: none"> ▪ Purpose of research hypotheses ▪ Types of hypotheses ▪ Criteria considered when stating hypotheses 2. The Design and planning phases <ol style="list-style-type: none"> a. Selecting a research design b. Major categories of research design <ul style="list-style-type: none"> ▪ Experimental designs ▪ Non-experimental designs ▪ Qualitative designs c. Characteristics of research designs d. Identifying the population to be studied <ul style="list-style-type: none"> ▪ Differences between total & target populations ▪ How to determine sample e. Designing the sampling plan <ul style="list-style-type: none"> ▪ Methods of sampling f. Specifying methods to measure variables

	<ul style="list-style-type: none"> ▪ Primary methods <ul style="list-style-type: none"> - Self report/questionnaire - Observation - Interviews - Bio-physiologic measurements ▪ Secondary methods <p>C. Ethical aspects of nursing research</p> <ol style="list-style-type: none"> 1. Ethical principles for protecting study participants <ol style="list-style-type: none"> a. Beneficence b. Respect of human dignity c. Justice 2. Procedures for protecting study participants <ol style="list-style-type: none"> a. Informed consent b. Risk/benefit assessment c. Confidentiality procedures d. Debriefings and referrals e. Treatment of vulnerable groups f. Institutional reviews, boards and external reviews <p>D. Steps of writing a good research proposal</p>
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Course Name:	:	CARE OF CLIENTS WITH PROBLEMS IN CELLULAR ABERRATIONS, ACUTE BIOLOGIC CRISIS, EMERGENCY AND DISASTER NURSING
Course Code	:	NCM 106
Course Description	:	It deals with the principles and techniques of nursing care management of sick clients across the lifespan with emphasis on the adult and older person with alteration/problems in cellular aberration, acute biologic crisis, including emergency and disaster nursing and IV Therapy.
Course Credit	:	6units lecture, 5units RLE (2units Skills Lab ; 3units Clinical)
Contact Hours/sem	:	108 lecture hours, 255 RLE Hours
Prerequisite	:	NCM 104-Care of clients with problems in inflammatory and immunologic response, perception and coordination NCM 105-Care of clients with maladaptive patterns of behavior
Placement	:	4 th Year, 1 st Semester
Course Objectives	:	At the end of the course, and given actual clients with problems in cellular aberrations, acute biologic crisis and emergency, the student should be able to: <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of individuals, families in community and hospital settings. <ul style="list-style-type: none"> - Assess with client/s his/her/their condition/health status

	<p>through interview, physical examination, interpretation of laboratory findings</p> <ul style="list-style-type: none"> - Identify actual and potential nursing diagnosis. - Plan appropriate nursing interventions with client/s and family for identified nursing diagnosis. - Implement plan of care with client/s and family - Evaluate the progress of his/her/their client's condition and outcomes of care <p>2. Ensure a well organized and accurate documentation system</p> <p>3. Relate with client/s and their family and the health team appropriately</p> <p>4. Observe bioethical concepts/ principles, core values and nursing standards in the care of clients</p> <p>5. Promote personal and professional growth of self and others</p>
<p>Course Outline :</p>	<p>I. The Individual across the lifespan</p> <p>A. Risk factors assessment and screening procedures among clients that contribute to the development of cellular aberration – lung, breast, uterine, prostate, colorectal and skin</p> <p>B. Significant subjective data from client – relevant information based on chief complaints, functional patterns, including psychosocial and behavioral assessments</p> <p>C. Principles and techniques of physical examination in newborn, children, adults, deviations from normal:</p> <ol style="list-style-type: none"> 1. Cellular aberration <ul style="list-style-type: none"> a. Inspection – vasculature, symmetry, movement, nodules, discharges, masses b. Auscultation – heart sounds, breath sounds, bowel sounds, vascular sounds, friction rub c. Palpation – masses, tenderness, nodules, lesions, distention d. Percussion – gas patterns, areas of flatness and dullness, liver span, masses, ascites 3. Acute biologic crisis or life threatening situation <ul style="list-style-type: none"> Standard assessment of the critically ill (focused on history-taking, discriminating PE - airway, breathing circulation, including hemodynamics status) <p>D. Results and implications of diagnostic/laboratory examinations of clients with reference to problems in:</p> <ol style="list-style-type: none"> 1. Cellular aberration <ul style="list-style-type: none"> a. Screening: BSE, pap smear, rectal examination, b. Non-invasive: MRI, CT scan, bone scan, ultrasound, thyroid scan c. Invasive: biopsy, digital rectal examination, cyst

	<p style="text-align: center;">aspiration, cystoscopy, lymph angiography, cerebral arteriography</p> <ol style="list-style-type: none"> 2. Acute biologic crisis/multiorgan problem <ol style="list-style-type: none"> a. Non-invasive: ECG, cardiac rhythms, b. Invasive: ABG, hemodynamic monitoring, CVP, pulmonary capillary wedge pressure (PCWP) <p>E. Pathophysiologic mechanisms:</p> <ol style="list-style-type: none"> 1. Cellular aberrations <ol style="list-style-type: none"> a. Solid tumors – lung cancer, breast, uterine cancer, prostate cancer, colorectal, brain cancer b. Liquid tumors – lymphomas, leukemias 2. Acute biologic crisis /multiorgan system dysfunction/ emergency <ul style="list-style-type: none"> ▪ Cardiac failure ▪ Acute myocardial infarction ▪ Acute pulmonary failure ▪ Acute renal failure ▪ Stroke ▪ Increased intracranial pressure ▪ Metabolic emergencies – e.g. DKA/HHNK ▪ Massive bleeding ▪ Extensive surgeries ▪ Extensive burns ▪ Poisoning ▪ Emerging illnesses (SARS, Avian Flu) ▪ Multiple injuries <p>F. Nursing Diagnoses taxonomy pertinent to problems/ alteration in:</p> <ol style="list-style-type: none"> 1. Cellular aberration <ol style="list-style-type: none"> a. Potential for infection b. Alteration in tissue perception c. Activity intolerance d. Potential for alteration in nutrition less than body requirement e. Alteration in oral mucous membrane integrity f. Alteration in comfort: pain/pruritus g. Fluid volume deficit 2. Acute biologic crisis/ multi-organ failure <ol style="list-style-type: none"> a. Impaired gas exchange b. Inability to sustain spontaneous ventilation c. Dysfunctional ventilatory weaning response d. Decreased cardiac output (CO) e. Altered tissue perfusion systemic f. Alterations in nutrition less than body requirement g. Fluid volume deficit h. Activity intolerance <p>G. Principles of various modalities of management</p> <ol style="list-style-type: none"> 1. Health promotive
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	<ul style="list-style-type: none"> 2. Disease preventive 3. Curative 4. Restorative H. Principles of management for altered <ul style="list-style-type: none"> 1. Cellular aberration <ul style="list-style-type: none"> a. Determination and management of cause b. Definitive management; surgery, chemotherapy, radiation therapy, biotherapy c. Blood component replacement d. O2 therapy e. Drug therapy f. Hydration g. Prevention of infection h. Supportive management i. Prevention of complications j. Rehabilitation 2. Acute biologic crisis / multi-organ failure <ul style="list-style-type: none"> a. Determination and management of cause b. Life saving interventions: basic life support, advanced cardiac life support, first aid measures, fluid resuscitation c. Life maintaining interventions: airway management and care of patients with ventilator, parenteral fluid administration including blood and blood component therapy, interventions for cardiac output problems, pharmacologic interventions for hemodynamic instability, continuous hemodynamic monitoring, interventions for neural regulation, fluid and electrolyte problems, nutrition and perioperative problems d. Psychosocial and behavioral interventions: measures to relieve anxiety, fear, depression, critical care concerns life: immobility, sleep deprivation, sensory overload, body image alterations, grieving, sexuality, spirituality e. Supportive management f. Prevention of complication g. Rehabilitation – pulmonary, cardiac, neurologic I. Pharmacologic actions, therapeutic use, side effects, indications, contraindication, and nursing responsibilities: <ul style="list-style-type: none"> 1. Cellular aberrations <ul style="list-style-type: none"> a. Anticancer agent b. Analgesics c. Narcotics d. Corticosteroids e. Antibiotics f. Antipruritus g. Analgesics, opioids
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- 3. Acute biologic crisis/multiorgan failure
 - a. Analgesics
 - b. Narcotics
 - c. Corticosteroids
 - d. Antihypertensive
 - e. Vasopressors
 - f. Antibiotics
 - g. Parenteral fluids
 - J. Purpose, indications, nursing responsibilities for the following surgical and special procedures
 - 1. Cellular aberration
 - a. Major surgical procedures: lobectomy, pneumonectomy, mastectomy, nephrectomy, prostatectomy, colectomy, colostomy, bone marrow transplant, urinary diversion
 - b. Special procedure: brachytherapy, radiation therapy, Reverse isolation, chemotherapy,
 - 2. Acute biologic crisis/multiorgan failure
 - a. Surgical procedure – coronary bypass, angioplasty, skin grafting,
 - b. Special procedures – advanced life support, parenteral hyperalimentation, ventilatory support, fluid resuscitation, first aid measure including emergency wound and trauma management, IV therapy
 - K. Safe and comprehensive perioperative nursing care
 - a. Assessment and care during the perioperative period
 - b. Techniques in assisting the surgical team during the operation
 - c. Principles of safety, comfort and privacy during the perioperative period
 - d. Nursing responsibilities during the perioperative period
 - L. Steps/pointers in decision making and prioritization with client/s having problems in inflammatory and immunologic reaction, cellular aberration, acute biologic crisis/multiorgan failure, including emergency and disaster preparedness
 - M. Principles, concept and application of bioethics in the care of clients
 - N. Developing outcome criteria for clients with problems in inflammatory and immunologic reaction, cellular aberration, acute biologic crisis/multiorgan failure, including emergency and disaster preparedness
 - O. Appropriate discharge plan including health education
 - P. Accurate recording and documentation
- III. Disaster & emergency
- A. Definition of emergency
 - B. Types of emergency
 - C. Triage

	<ul style="list-style-type: none"> 1. Objectives 2. START triage 3. Military triage D. Hospital emergency incident command system E. Incident command education F. Hospital operations plan G. Personal protective equipment H. Hazardous materials I. Decontamination J. Biological warfare and biological agents K. Blast injuries L. Natural disasters M. Stress reactions <ul style="list-style-type: none"> ▪ Post traumatic ▪ Stress disorder critical incident stress management ▪ Debriefing N. Nurses' role in disaster and emergency <p>IV. Intravenous parenteral therapy</p> <ul style="list-style-type: none"> A. Basic foundation of IV therapy <ul style="list-style-type: none"> • Philosophy • Historical background of IV therapy • Standards and competencies of IV therapy B. Content <ul style="list-style-type: none"> • Review of anatomy and physiology of the vascular Peripheral and integumentary system • Fluid and electrolyte therapy • Venipuncture technique on adult and children • Complications of IV therapy • Infection, control & microbiology • Demonstration of procedure • Documentation activity C. Performance scale for IV therapy
<p>Guide for RLE</p>	<p>Provide opportunities to demonstrate procedures needed in acute biologic crisis.</p> <p>Acute Biologic Crisis: Provide opportunities for actual experience to ensure competencies in caring for clients with acute biologic crisis and those with emergency situations are developed.</p> <p>For Disaster Situations: You may provide simulated scenarios/ situations for these experiences</p> <p>IV Therapy:</p> <ul style="list-style-type: none"> • Faculty member handling the course must have a current certificate as IV Therapist • Provide opportunities for demonstration/return demonstration

		through the use of an IV dummy arm and one-on –one intravenous insertion
Equipment and Materials [these could be found in nursing skills lab, base hospital, affiliating centers]		<p><u>Cellular Aberration</u>: Breast examination model, cervical examination model, safety guidelines for chemotherapy and radiotherapy, safety barriers, for chemotherapy and spill kits.</p> <p><u>Acute Biologic Crisis</u>: Cardiac monitor, EKG machine, oxymeter, ventilatory support equipment, endotracheal tubes, tracheostomy tube, airway, BP apparatus, stethoscope, oxygen tank, O2 regulator, humidifier, monkey wrench, O2 tubings, O2 cannula/catheter, O12 masks, croupette, O2 tent, suction catheters, suction machine, cardiac arrest board, gloves, peak flow meter, tongue depressor, microscope, glass slide, one-way/two-way/three-way water seal drainage, CVP manometer and tubing, peritoneal dialysis set, dialyzing solution, hemodialysis machine (optional), incubator, Billi light, Isolette, Model for basic and advance life support, including equipment and materials for NCM 104 and NCM 105.</p> <p>IV Therapy: IV arm dummy, IV injection tray, IV needles, cotton and alcohol</p>

Course Name	:	NURSING LEADERSHIP AND MANAGEMENT (Lecture)
Course Code	:	NCM 107-A
Course Description	:	This course deals with the concepts, principles, theories and methods of developing nursing leaders and managers in the hospital and community-based settings. It also includes ethico-moral/legal aspects of health care and nursing practice and the nurses' responsibilities for personal and professional growth.
Course Credit	:	4units lecture
Contact Hours/sem	:	72 lecture hours
Pre-requisite	:	NCM 104-Care of Clients with Problems in Inflammatory and Immunologic Response, Perception and Coordination NCM 105-Care of Clients with Maladaptive Patterns of Behavior
Co-requisite	:	NCM 106-Care of Clients with Problems in Cellular Aberrations, Acute Biological Crisis, Emergency and Disaster Nursing
Placement	:	4 th Year, 1 st semester
Course Objectives	:	At the end of the course, the student shall be able to: <ol style="list-style-type: none"> 1. Discuss principles of leadership and management 2. Apply the principles learned in organizing and conducting a seminar
Course Outline	:	A. Management <ol style="list-style-type: none"> 1. Definition/description 2. Universal principles of management. 3. Theories of management 4. Management process.

	<ul style="list-style-type: none"> a. Roles that managers fulfill in an organization 5. Strategic planning process <ul style="list-style-type: none"> b. Vision/mission/philosophy/objectives/core values 6. Standards of nursing practice B. Management functions <ul style="list-style-type: none"> 1. Planning 2. Organizing <ul style="list-style-type: none"> a. organizational structure b. staffing (selection, orientation, job description) c. patient classification system d. scheduling e. modalities of care <ul style="list-style-type: none"> ▪ case method ▪ primary nursing ▪ team nursing ▪ modular nursing ▪ functional nursing ▪ modified method 3. Directing/leading <ul style="list-style-type: none"> a. Leadership theories b. Leadership styles c. Leadership skills <ul style="list-style-type: none"> ▪ Case analysis ▪ Decision making c. Bases for power d. Principles of delegation e. Communication f. Motivation theories g. Time management h. Conflict management 4. Controlling <ul style="list-style-type: none"> a. budgeting <ul style="list-style-type: none"> ▪ types of budgeting ▪ costing of nursing services b. performance evaluation/appraisal <ul style="list-style-type: none"> ▪ feedback c. staff development d. quality improvement /quality management <ul style="list-style-type: none"> ▪ nursing audits & rounds ▪ variance reports ▪ solutions to identified problems C. Professional and Personal Development <ul style="list-style-type: none"> 1. Ethico moral aspects of nursing <ul style="list-style-type: none"> a. Code of Ethics for Nurses in the Philippines b. International Council of Nursing (ICN) Code of Ethics for Nurses 2. Legal Aspects of Nursing <ul style="list-style-type: none"> a. RA 9173 or The Nursing Act of 2002
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	<ul style="list-style-type: none"> b. Legal Responsibilities of Nurses c. Other Laws Affecting Nursing Profession and the Nurse (e.g. Magna Carta for Public Health Workers, Labor Code, Rooming In and Breastfeeding Act, Milk Code, Senior Citizens Act, Sexual Harassment, Clean Air Act, Local Government Code, Dangerous Drugs Act, etc.) d. Malpractice and Negligence Act e. Contracts/Wills/ Testaments f. Legal protections in the nursing service 3. Personal /professional <ul style="list-style-type: none"> a. Positive image of a professional nurse <ul style="list-style-type: none"> ▪ Self assessment ▪ Self awareness b. Roles and responsibilities of beginning nurse practitioner <ul style="list-style-type: none"> ▪ Benner’s theory ▪ Nurse practitioner c. Career Planning <ul style="list-style-type: none"> ▪ Beginning a job search ▪ Sources of job leads ▪ Developing a resume <ul style="list-style-type: none"> - Elements - Types - Writing a cover letter - Developing an electronic resume ▪ Tracking job leads ▪ Dressing for a successful interview ▪ Answering interview questions ▪ Resigning from a nursing position d. Emerging opportunities <ul style="list-style-type: none"> ▪ Fields of specialization ▪ Expanded roles of nurses ▪ Balancing personal and professional needs e. Issues and trends in nursing practice/education [migration, aging population, complementary therapy, medical tourism, evidence–based practice, etc.] f. Nursing associations <ul style="list-style-type: none"> ▪ Accredited professional organization ▪ Interest groups ▪ Specialty organizations 4. Leadership in community development <ul style="list-style-type: none"> a. Application of concepts, approaches, methodologies, strategies and tools in community development discussed in NCM 100 b. The Community as a client <ul style="list-style-type: none"> ▪ Community diagnosis– definition, types, components, phases ▪ Definition of health problems, nursing problems
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	<ul style="list-style-type: none"> ▪ Priority setting based on selected criteria ▪ Strategies in people participation ▪ Programs for basic health services (maternal and child health, family planning, medical care, environmental sanitation, communicable disease control) and the nursing components of these programs ▪ Existing government and non-government programs ▪ Community organization – definition, principles and mechanics ▪ Leadership training principles and process ▪ Specific programs and projects of DOH ▪ Concepts and principles of networking and linkage-building ▪ Evaluation of programs and services ▪ Recording and reporting system (vital statistics, notifiable disease, services provided to family and community) <p>D. Seminars on issues and trends in nursing and health related fields</p> <p>1.Planning</p> <ol style="list-style-type: none"> a. Identify issues and trends b. Map out priority/relevant issues and trends c. Assign specific topics to the respective groups d. Prepare schedule for the seminars e. Formulate objectives for the seminar <p>2. Organizing/Leading</p> <ol style="list-style-type: none"> a. Identify working committees for the seminar b. Define functions of each committees c. Assign committee members d. Delegate functions and responsibilities to the committee members e. Prepare schedule of activities <p>3.Controlling</p> <ol style="list-style-type: none"> a.Prepare budget for the seminar b.Develop an evaluation tool c.Monitor implementation of the scheduled activities d.Post seminar evaluation
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Course Name	:	NURSING LEADERSHIP AND MANAGEMENT (RLE)
Course Code	:	NCM 107-B
Course Description	:	This course deals with the application of the concepts, principles, theories and methods of developing nursing leaders and managers in the hospital and community-based settings. It also includes ethico-

		moral/legal aspects of health care and nursing practice and the nurses' responsibilities for personal and professional growth.
Course Credit	:	3units RLE (3 units Clinical)
Contact Hours/sem	:	153 RLE hours
Pre-requisite	:	NCM 107-A
Placement	:	4 th Year, 2 nd semester
Course Objectives	:	<p>At the end of the course, given a group of clients with varied conditions, the student should be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of individuals, families, population group, in hospital and community settings. <ol style="list-style-type: none"> 1.1 Assess with client/s his/her/their condition/health status through interview, physical examination and interpretation of laboratory findings 1.2 Identify actual and at-risk nursing diagnosis 1.3 Plan appropriate nursing interventions with client/s and family for identified nursing diagnosis 1.4 Implement plan of care with client/s and family 1.5 Evaluate the progress of the client's condition and outcomes of care; 2. Ensure a well organized and accurate documentation and reporting system; 3. Demonstrate leadership and competence in the performance of her responsibilities as a beginning nurse practitioner in the hospital or community setting 4. Observes bioethical principles, core values, and standards of nursing care while practicing nursing 5. Promote personal and professional growth for self and others
Guide for RLE		<p>RLE shall be offered simultaneously with Intensive Nursing Practicum</p> <p>Provide opportunities for actual head nursing experience in the hospital to ensure competencies are developed.</p> <p>Provide opportunities to demonstrate managerial and leadership functions with the community as the client.</p>

Course Name	:	NURSING RESEARCH II
Course Code	:	NRes II
Course Description	:	This course is a continuation of Nursing Research 1 which

		<p>includes collection of data, analysis, interpretation, summary and conclusion and recommendation. Advising is done throughout the practicum sessions.</p> <p>The course will provide the student/group an opportunity to undergo the final research defense process to appreciate data gathering, analyze and interpret study results disseminate the findings and make recommendations based on the results of their respective studies.</p>
Course Credit	:	2 units RLE
Contact Hours/Sem	:	102 RLE hours
Prerequisite	:	Nursing Research I
Placement	:	4 th year, 1 st semester
Course Objectives	:	<p>At the end of the course and given actual situation, a group of student will be able to:</p> <ol style="list-style-type: none"> 1. Undertake a final research defense process (from data gathering, analysis and interpretation of study results, dissemination of the research findings to making appropriate recommendations based on the results of their respective studies) 2. Submit a written group research study 3. Critique a research study based on stated guidelines 4. Observe ethical concepts/ principles and standards in research
Course Outline	:	<ol style="list-style-type: none"> A. The empirical phase <ol style="list-style-type: none"> 1. Measurement and the assessment of quantitative data <ol style="list-style-type: none"> a. Definition of measurement b. Levels of measurement c. Advantages of measurement 2. Reliability <ol style="list-style-type: none"> a. Three important aspects of reliability (stability, internal consistency and equivalence) 3. Validity <ol style="list-style-type: none"> a. Three important aspects of validity (content validity, criterion- related validity & construct) b. Sensitivity and specificity B. The Analytical phase <ol style="list-style-type: none"> 1. Analyzing the quantitative and qualitative data <ol style="list-style-type: none"> a. Descriptive data analysis b. Inferential data analysis c. Classification of statistics d. Criteria for selecting statistical tool C. The dissemination phase <ol style="list-style-type: none"> a. Communicating the research findings b. Using research in evidence-based nursing practice D. Writing the final research report (handout on research report)

	(Format will be given to the students during the discussion)
	E. Critiquing of research reports
	a. Guidelines for use in critiquing reports

Course Name	:	COMPETENCY APPRAISAL I
Course Code	:	CA I
Course Credit	:	3 units lecture
Contact Hours/sem	:	54 lecture hours
Prerequisite	:	NCM 105, Nursing Research 1
Placement	:	4 th Year, 1 st Semester
Course Objectives	:	<p>At the end of the course, given relevant simulated situations involving health promotion, disease prevention, health maintenance, risk reduction, curative and rehabilitative aspects of care for the mother, child and family, population group and community, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply the nursing process in the care of individuals, families, population groups in selected settings. <ol style="list-style-type: none"> 1.1 Assess client/s condition/health status through data derived from case scenarios (history, physical examination, interpretation of laboratory findings). 1.2 Identify actual and at risk nursing diagnosis. 1.3 Plan appropriate nursing interventions with client/s and family for identified nursing diagnosis. 1.4 Implements plan of care with client/s and family 1.5 Evaluates the progress of his/her/their client's condition and outcomes of care 2. Ensure a well organized and accurate documentation system 3. Utilize bioethical concepts/ principles, core values and nursing standards in the care of clients 4. Integrate the various competencies in the various key areas of responsibilities in the care of selected clients.
Course Outline	:	<ol style="list-style-type: none"> A. Overview <ol style="list-style-type: none"> 1. Core competencies under the 11 key areas of responsibility 2. Terminal competencies per nursing care management courses [NCM 100-104] B. Nursing clinical scenarios integrating the nursing process, levels of care/prevention in the nursing management of the following: <ol style="list-style-type: none"> 1. Healthy/at risk/sick mother and child 2. Sick individual with alterations in oxygenation, fluid and electrolyte balance, metabolism and endocrine functioning, inflammatory and immunologic response, perception and coordination, pain including the perioperative concept,. 3. Family 4. Population group

		<p>5. Community</p> <p>C. Nursing scenarios [integrating communication, health education, ethico-moral/legal responsibilities and research in various settings]</p> <ol style="list-style-type: none"> 1. Hospital 2. Home 3. Community 4. School
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Course Name	:	COMPETENCY APPRAISAL II
Course Code	:	CA II
Course Description	:	This course deals with the application of the concepts, principles and processes basic to the practice of nursing with emphasis on health promotion, health maintenance, preventive, risk reduction, curative and rehabilitative aspects of care of sick individual with alterations in cellular aberrations, adjustment problems and maladaptive patterns of behavior, acute biologic crisis, disaster and emergency. It includes the utilization of the nursing process and the core competencies under the eleven (11) key areas of responsibility.
Course Credit		3units lecture
Contact Hours	:	90 lecture hours
Prerequisite	:	Competency Appraisal I, NCM 106, Research 2
Placement	:	4 th Year, 2 nd Semester
Course Objectives	:	<p>At the end of the course, given relevant simulated situations involving health promotion, health maintenance, preventive, risk reduction, curative and rehabilitative aspects of care of sick individuals with alterations in cellular aberrations, adjustment problems and maladaptive patterns of behavior, acute biologic crisis, disaster and emergency, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply the nursing process in the care of individuals, families, population group in selected settings. <ol style="list-style-type: none"> 1.1 Assess client/s condition/health status through data derived from case scenarios (history, physical examination, interpretation of laboratory findings). 1.2 Identifies actual and at risk nursing diagnosis 1.3 Plans appropriate nursing interventions with client/s and family for identified nursing diagnosis 1.4 Implements plan of care with client/s and family 1.5 Evaluates the progress of his/her/their client's condition and outcomes of care 2. ensure a well organized and accurate documentation system 3 utilize bioethical concepts/ principles, core values and nursing standards in the care of clients

		4. integrate the various competencies in the various Key Areas of Responsibility in the care of selected clients
Course Outline	:	<p>A. Overview</p> <ol style="list-style-type: none"> 1. Core competencies under the 11 Key Areas of Responsibility 2. Terminal Competencies per nursing care management courses [NCM 105-107] <p>B. Nursing Clinical Scenarios integrating the nursing process, levels of care/prevention in the nursing management of the following:</p> <ol style="list-style-type: none"> 1. Sick individual with alterations in cellular aberrations, adjustment problems and maladaptive patterns of behavior, acute biologic crisis, disaster and emergency. <p>C. Nursing Scenarios integrating leadership and management, management of resources and environment, records management, collaboration and teamwork, quality improvement, ethico-moral/legal responsibility and research in various settings]</p> <p style="margin-left: 40px;">Hospital Home Community School</p>

Course Name	:	INTENSIVE NURSING PRACTICUM
Course Code	:	INP
Course Description	:	Actual application of the theories, principles and concepts of clinical nursing practice to groups of clients in varied settings to refine nursing skills in the different basic nursing services including community. Emphasis is placed on integrating the multiple roles of professional nursing as a vehicle to enhance critical thinking and communication skills.
Course Credit		8 Units RLE
Contact Hours	:	408 hours Clinicals (24 RLE hours per week)
Prerequisite	:	All Professional subjects
Placement	:	4 th year, 2 nd semester
Course Objectives	:	<ol style="list-style-type: none"> 1. Apply the nursing process in the care of groups of clients across the lifespan with varied conditions and the community. <ol style="list-style-type: none"> a. Assess the clients total condition and resources b. Formulate nursing diagnosis based on the data gathered c. Develop a plan of care for individual, family and community. d. Implement plan of care applying appropriate interventions e. Evaluate outcome of care. 2. Demonstrate competencies of a beginning staff nurse, head nurse, researcher and leader. 3. Observe bioethical principles, core values, and standards of nursing care. 4. Organize seminars on issues and trends in nursing and health-related fields. 5. Promotes personal and professional growth.

<p>Course Outline :</p>	<p>I. Assignment in the clinical areas:</p> <ol style="list-style-type: none"> 1. Staff Nurse experience in the ward <ul style="list-style-type: none"> ▪ Case Method ▪ Primary Nursing 2. Public Health Nurse experience in the Rural Health Unit/Health Centers and Community based Practicum <ul style="list-style-type: none"> • Case load Management • Participatory approach to developing community competence <p>II. Focus of Clinical Experience</p> <ol style="list-style-type: none"> A. Nursing process applied in the care of individual, groups of clients, families and community: Case Load Management, Conducting Health Programs/Services, Developing Community Competence B. Primary nursing elements C. Standards of care D. Interpersonal and managerial concepts and strategies. <ol style="list-style-type: none"> 1. Unit management 2. Staff development E. Evidence-based practice <p>III. Conduct:</p> <ol style="list-style-type: none"> 1. Case presentations 2. Seminar on trends in patient care
<p>Guide for RLE</p>	<p>Planning for the RLE of INP and NCM 107 shall be done simultaneously within the semester to be reflected in one clinical rotation.</p> <p>Provide opportunities for actual hospital experiences applying the primary nursing and the case method of assignment to ensure competencies are developed.</p> <p>Provide opportunities for actual experiences with community as a client.</p>

Nursing Electives: Students shall choose at least two Electives [Elective I and Elective II] to Complete the BS Nursing Program.

Elective I is taken in the 3rd Year 2nd Semester. Choices for Elective I are as follows:

1. Parent-Child Nursing
2. Spiritual Care Nursing
3. Hospice Palliative Care

Elective II is taken in the 4th Year, 1st Semester. Choices for Elective II are as follows:

1. Acute/Critical Care Nursing
2. Quality Health Care and Nursing
3. Care of the Chronically ill and the Older Person

Course Name:	:	ELECTIVE I: PARENT CHILD NURSING
Course Code	:	Elec I
Course Description	:	Nursing interventions/strategies for the prevention and/or management of behavioral problems of children arising from parent-child relationships.
Course Credit	:	2 units
Contact Hours	:	36 hours
Prerequisite	:	NCM 101, NCM 102
Placement	:	4 th Year, 1 st Semester
Objectives	:	At the end of the course, given actual scenarios/situations, the student will be able to: <ol style="list-style-type: none"> 1. Explain the developmental tasks of the family as a unit and of parents; 2. Discuss strategies to address marital relationship problems based on relevant laws; and 3. Discuss strategies to address parent-child relationship problems that are age-appropriate and based on relevant laws.
Course Outline	:	<ol style="list-style-type: none"> 1. The Family as a unit <ul style="list-style-type: none"> • family developmental tasks 2. Choosing a partner <ul style="list-style-type: none"> • factors influencing the choice of a spouse • dating and courtship 3. Roles of Married couples 4. Ways of maintaining love and respect between husband and wife <ul style="list-style-type: none"> • marital relationship • sexual adjustments • power, decision-making and communication 5. Special problems in marital relationships <ul style="list-style-type: none"> • non-marital relationship/live-in partnership • marital infidelity • domestic violence 6. Law affecting marital relationship

	<ul style="list-style-type: none"> • Family Code EO 209 <p>7. The Parents</p> <ul style="list-style-type: none"> • Developmental tasks of parents-to-be: mothering and fathering • Mercer's theory and Rubin's theory • Behavior and needs of expectant mothers • Mothering role • Fathering role • Selected situational crises affecting parental assumption of their role: <ul style="list-style-type: none"> a. single parenthood b. birth of handicapped child c. adopting a child d. separation/divorce e. hospitalization/death of a spouse f. working mother/absentee parent(s) <p>8. Effects of childless marriage</p> <p>9. Child Abuse including laws protecting children:</p> <ul style="list-style-type: none"> • RA 8043 An Act Regulating Inter-country Adoption, • RA 8552 An Act Regulating Domestic Adoption • RA 9231 Special Protection of Children Against child abuse, exploitation and discrimination • RA 9262 An Act Defining Violence Against women and their children providing for protective measures for victims <p>10. Parenting an Infant</p> <ul style="list-style-type: none"> • Common behavioral problems of infants • Role of the nurse in the care of a family with healthy/ill infant <p>11. Parenting a Toddler</p> <ul style="list-style-type: none"> • common behavioral problems <ul style="list-style-type: none"> a. bed wetting b. thumb sucking c. temper tantrums • accident prevention • role of the nurse in the care of a family with healthy/ill toddler <p>12. Parenting a Preschooler</p> <ul style="list-style-type: none"> • Preparing the child for school • Sex awareness/sex education • Common behavioral problems <ul style="list-style-type: none"> a. sibling rivalry b. middle child complex <ul style="list-style-type: none"> • role of the nurse in the care of a family with a healthy/ill preschool child <p>13. Parenting a Schooler</p> <ul style="list-style-type: none"> • Common behavioral problems <ul style="list-style-type: none"> a. under achievement b. attention deficit hyperactivity syndrome <ul style="list-style-type: none"> • role of the nurse in the care of a family with healthy/ill schooler
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Course Name	:	ELECTIVE I: SPIRITUAL CARE NURSING
Course Code	:	Elec I
Course Description	:	The course deals with the history, philosophy, theories, principles, process, modes and interventions of spiritual care. Emphasis is made on the process of spiritual formation and the role of nurses in providing spiritual care.
Course Credit	:	2 units lecture
Contact Hours/sem	:	36 hours lecture
Pre-requisite	:	None
Placement	:	4 th year, 1 st semester
Course Objectives:	:	<p>Given relevant situations/conditions, the student will be able to:</p> <ol style="list-style-type: none"> 1. Apply principles, theories and strategies of spiritual care in understanding the spiritual needs of the clients. 2. Demonstrate traits and characteristics that reflects the holistic development of a nurse.
Course Outline	:	<ol style="list-style-type: none"> 1. History of Spiritual Care in Nursing <ol style="list-style-type: none"> 1.1 Pre-Christian Era 1.2 Christian Era 1.3. Post-Reformation Era 2. The Nature of Spirituality 3. The Spiritual Need <ol style="list-style-type: none"> Distinction between Spiritual Needs and Psychosocial Needs 3.2 Clarifying Spiritual Needs in Terms of Three Dimensions <ol style="list-style-type: none"> 3.2.1 Physical or Biological Dimension 3.2.2 Psychosocial Dimensions 3.2.3 Spiritual Dimensions 4. How Nursing Today View Spiritual Care <ol style="list-style-type: none"> 5.1 For a long time, spiritual care was frankly Religious functions and Intervention limited (at least officially) to calling the hospital chaplain 5.2 1960-1970 - a growing interest in the spiritual, psychosocial and Emotional aspects of nursing care 4.3 1971 - The nurse ministering to the whole person 4.4 Spiritual Care- a natural part of total care which fits easily into the nursing process (e.g Spiritual Assessment and care) 6. Concepts, theories and applications in the care of the human Spirit <ol style="list-style-type: none"> 5.1. Virginia Henderson 5.2 Faye Abdellah 5.3 Joyce Travelbee

		<p>5.4 Betty Newman</p> <p>5.5 Parse, Peterson and Zderad</p> <p>5.6 Jean Watson</p> <p>6. Ethics in Spiritual Care Nursing</p> <p>7. The Nurse's Role in Spiritual Care</p> <p>7.1 Nurse's Spirituality</p> <p>Understanding own and the degree to which one's spiritual needs are being met</p> <p>Resolving one's spiritual concerns and distress</p> <p>7.2 Recognizing the nurse's own limitations</p> <p>7.3 Mobilising the patient's spiritual resources and patients' expressed needs</p> <p>7.4 Developing a relationship of trust between the nurse and the patient</p> <p>7.5 Awareness and respect of the patient's culture, social and spiritual preferences</p> <p>7.6 Referral or utilise members of the team is as important for spiritual care as it is for other aspects of care</p> <p>7.7 Documenting spiritual care</p> <p>8. Patient's Needing Spiritual care</p> <p>8.1 Patient with acute illness</p> <p>8.2 Chronically Ill Patient</p> <p>8.3 Children and Families</p> <p>8.4 Older Adult</p> <p>8.5. Dying and Bereavement</p> <p>8.6 During disasters</p> <p>8.7 During emergencies</p> <p>9. Personal Spiritual Development: Theological Reflection</p> <p>10. Meeting the Challenge</p> <p>10.1 The therapeutic use of the self in meeting the needs of the human spirit:</p> <p>The need for love and relatedness, meaning and purpose and hope</p> <p>10.2 Attending on going education courses and workshops dealing with spiritual care in nursing, reading relevant literatures, interacting with colleagues, liaising with hospital chaplains</p>
Course Name	:	ELECTIVE I: HOSPICE PALLIATIVE CARE
Course Code	:	Elec I
Course Description	:	This course includes the concepts, principles and theories of hospice palliative care.
Course Credit	:	2 units lecture
Contact Hours	:	36 hours
Prerequisite	:	None
Placement	:	4 th year, 1 st semester
Objectives	:	At the end of the course, given actual or simulated situations/conditions in terms of providing quality of life of the person in

		<p>near death situation, the student will be able to:</p> <ol style="list-style-type: none"> 1. Differentiate the stages of death and dying. 2. Assess the needs of client and family members/carers 3. Identify and prioritize the appropriate nursing intervention of the client/family/carer at any stage of the life situation. 4. Implement with client/family/carer the most relevant intervention at present time taking into consideration the principles and techniques of desired actions. 5. Follow with respect the bioethical and cultural beliefs and practices of the client/family/carer 6. Relate effectively with clients/family/carer and members of the health team and others to fulfill the quality of life.
Course Outline	:	<p>B. Principles of Palliative Care:</p> <ol style="list-style-type: none"> 1. Affirms life and regards dying as a normal process 2. Neither hastens nor postpones death 3. Provides relief from pain and other distressing symptoms 4. Integrates the psychological, ethical, legal, and spiritual aspects of care 5. Offers a support system to help patients live as actively as possible until death 6. Offers a support system to help patient's families cope during the patient's illness and in their own bereavement <p>II. Essential Components of Palliative Care</p> <ol style="list-style-type: none"> 1. Symptom control 2. Effective communication 3. Rehabilitation 4. Continuity of care 5. Terminal care 6. Support in bereavement 7. Education 8. Research <p>I. Nurses Role</p> <ol style="list-style-type: none"> a. Providing direct care b. Advocate c. Counselor d. Collaborative Role <p>II. Issues and Trends in Hospice Palliative Care</p>

Course Name	:	ACUTE/CRITICAL CARE NURSING
Course Code	:	Elec II
Course Description	:	This course is designed to introduce the student to care for critically ill patients. Emphasis is on rapid assessment, setting priorities, rapid decision-making and appropriate nursing interventions. The course may include cases with cardiovascular, pulmonary, renal, neurologic, and multisystem alterations.
Course Credit		2units lecture
Contact Hours	:	36 lecture hours

Prerequisite	:	All Professional Subjects
Placement	:	4 th year, 2 nd semester
Course Objectives	:	At the end of the course, students should be able to: <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of patients with acute/critical condition. 2. Identify trends and issues related to the care of acutely/critically ill patients. 3. Apply principles of decision-making, critical thinking and independent judgment to the care of patients in acute/critical condition. 4. Observe bioethical principles, core values, and standards of nursing care. 7. Promote personal and professional growth.
Course Outline	:	<ol style="list-style-type: none"> 1. Critical care nursing concept 2. Characteristics of acute illness and injury 3. Nursing process applied to acutely/critically ill patients <ul style="list-style-type: none"> - Health Assessment - Correlation of pathophysiology to nursing assessment and management 4. Trends in the management of acute and critically ill patients 5. Psychosocial concerns in acute illness [e.g. role transition, sleep deprivators, sensory overload, powerlessness, altered body image] 6. Critical thinking <ul style="list-style-type: none"> - Self-directed decision-making skills - Critical thinking skills

Course Name	:	QUALITY HEALTH CARE AND NURSING
Course Code	:	Elec II
Course Description	:	This course deals with the concepts, principles and dimensions of quality health care, quality standards for Health Provider Organizations is and implementing a Performance Improvement/management program in the health care system.
Course Credit		2 units lecture
Contact Hours/Sem.		36 lecture hours
Prerequisite		
Course Objective		At the end of the course, and given actual health care management and clinical case scenario, the student will be able to: <ol style="list-style-type: none"> 1. Implement the PhilHealth Quality Standards. 2. Apply Performance Improvement Program utilizing the rationale and steps for performance improvement and TQM. 3. Utilize the documentation-Evaluation Action Trend using as framework the Plan-Do-Check-Act (PDCA) Cycle. 4. Select/use appropriately Quality Improvement Tools.

	<ol style="list-style-type: none"> 5. Form Quality Circles and Quality Teams. 6. Implement Quality Improvement activities
<p>Course Outline</p>	<ol style="list-style-type: none"> C. Quality Standards for Health Provider Organizations <ol style="list-style-type: none"> 1. Patient Rights and Organizational Ethics. 2. Patient Care Standards 3. Leadership and Management 4. Human Resource Management 5. Information Management 6. Safe Practice and Environment 7. Improving Performance D. Rationale and Steps for Performance Improvement E. TQM Program Implementation Steps. F. The Documentation – Evaluation – Action Trend. <ol style="list-style-type: none"> 1. Documentation <ul style="list-style-type: none"> • Safety • Consistency of purpose • Standardization • Improvement 2. Evaluation <ul style="list-style-type: none"> • Reflection and analysis • Integrative 3. Action <ul style="list-style-type: none"> • Improved performance based on the information G. The Plan-Do-Check-Act (PDCA) cycle H. Quality Improvement Tools: <ol style="list-style-type: none"> 1. Problem Identification Tools <ul style="list-style-type: none"> • Affinity Diagram • Brainstorming • Flowchart • Nominal Group Technique 2. Problem Description Tools <ul style="list-style-type: none"> • Bar Graph • Check Sheet • Force File Analysis • Line Graph • Pareto Chart • Pie Chart 3. Problem Analysis Tools <ul style="list-style-type: none"> • Fishbone Diagram • Matrix Diagram • Scatter plot Diagram 4. Solution Development Tools <ul style="list-style-type: none"> • Prioritization matrix • Process Decision program Chart (PDPC) • Tree Diagram 5. Quality Monitoring Tools <ul style="list-style-type: none"> • Control Chart

		<ul style="list-style-type: none"> • Histogram • Radar Chart <p>I. Quality Circles and Quality Teams</p> <p>J. Quality Improvement Activities</p> <p>Clinical Practice Guidelines</p> <ul style="list-style-type: none"> • Clinical Pathways • Medical/Nursing Audit • Utilization Review • Complaints Analysis • Morbidity and mortality meetings • Sentinel Events Monitoring • Credentialing and Clinical Privileging • Variance Reporting and Analysis
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Course Code:	:	CARE OF THE CHRONICALLY ILL AND THE OLDER PERSON
Course Code	:	Elec II
Course Description	:	It deals with the concepts, principles and techniques of nursing care management of those with chronic illness and the older persons
Course Credit	:	2units lecture
Contact Hours	:	36 hours
Prerequisite	:	None
Placement	:	4 th Year, 2 nd Semester
Objectives	:	<p>At the end of the course, given scenarios/situations, the student should be able to:</p> <ol style="list-style-type: none"> 1. Utilize the nursing process in the care of patients with chronic illness and care of the older person 2. Discuss special concerns, issues and trends in caring for the chronically ill and the older person
Course Outline	:	<p>III.Chronic Illness</p> <ol style="list-style-type: none"> A. Key Problem Areas Experienced By Patients With Chronic Illness B. Review of the Pathophysiology of selected chronic conditions: Heart Disease, Hypertension, Chronic Obstructive Pulmonary Disease Diabetes, Cancer, Dementia, Stroke C. Specific assessment focus and management of the above conditions D. Health Education in Chronic Illness E. Behavioral Management in chronic illness – <ul style="list-style-type: none"> • Coping interventions for powerlessness, hopelessness, sensory deprivation, sleeplessness etc. • Social Support System and family in Chronic illness F. Issues and Trends in Chronic Care

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| | <p>IV. Care of the Older Persons</p> <p>A. Factors that affect normal functioning of the older persons</p> <ul style="list-style-type: none"> • Demographics of Aging • Theories of Aging • Socioeconomic Aspects of Aging • The Aging Family The Well Older Person Changes in the Older person and their Implications to Care <ul style="list-style-type: none"> Physical/ Physiological/Biological Social and Psychological Emotional <p>B. Cultural factors/ethnicity such as regard for elders, perception of health</p> <p>C. Risk factors associated with chronic illness</p> <p>D. Patterns of Illness of the older persons</p> <p>E. Comprehensive geriatric assessment</p> <p>F. Nursing Diagnosis related to Wellness, & chronic illness</p> <p>G. Problems related to the older persons</p> <ul style="list-style-type: none"> • Physiologic functioning • Behavioral • Safety <p>H. Needs for Self-care, life support, health maintenance</p> <p>I. Health problems in chronic illness</p> <p>J. Levels of care</p> <p>K. Principles in the care of the older persons</p> <ul style="list-style-type: none"> • Wellness • Health promotion • Chronic illness • Recovery and rehabilitation • Quality of Life <p>L. Nursing Interventions for specific problems of the older persons include care that support:</p> <ul style="list-style-type: none"> • Wellness <ul style="list-style-type: none"> Nutrition support Activity and exercise Stress management • Physiologic functioning <ul style="list-style-type: none"> Activity & exercise Nutrition support Respiratory management Tissue perfusion management Electrolyte and acid-base balance management Skin/wound management Physical comfort promotion • Behavioral <ul style="list-style-type: none"> Coping assistance Patient education Spiritual care |
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	<ul style="list-style-type: none"> • Safety <ul style="list-style-type: none"> Risk reduction activities Management of the environment • Bioethical components of care <p>M. Community resources for care of older persons</p> <p>N. Criteria for evaluation</p> <ul style="list-style-type: none"> • Indicators for wellness • Responses to care <p>O. Gerontological nursing concepts, standards of care</p> <p>P. Ethical aspects in the care of the older person</p> <p>Q. Current trends and issues in the care of the older person</p> <p>R. Evidence based interventions in the care of older persons</p>
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GUIDELINES FOR IMPLEMENTING RELATED LEARNING EXPERIENCES

The Bachelor of Science in Nursing (BSN) curriculum is a competency-based and community-oriented curriculum. The teaching-learning process is composed of the theoretical/didactic and experiential/RLE. The Related Learning Experiences (RLEs) is composed of Clinicals and Skills Laboratory. The RLE activities are carefully selected to develop competencies utilizing the nursing process in varying health situations.

Hence, the challenges depend greatly in the preparedness and ability of the faculty to organize the learning experiences in the classroom or various health situations based on the clearly-defined objectives.

The RLE is viewed in terms of changes in the behavior of the students and not just in terms of content. The faculty must be competent in selecting RLE that will provide for continuity, sequence and integration of principles, concepts, skills and values that have been previously learned in the classroom and other situations.

In coming up with the proposed formula for determining cost of RLE per student, considerations were given to (a) Rules and Standards of Nursing Education and the prescribed units and hours for the RLE in the BSN Curriculum, (b) faculty preparation, and competence. The following should be considered:

1. A class is composed of 48-50 students.

Faculty-student Ratio for RLE (clinicals in hospital/community setting) per semester and year level shall be:

- 2nd Year level 1:8 students to a group (1st Semester)
1:8 students to a group (2nd Semester)
- 3rd Year level 1:10-12 students to a group (1st Semester)
1:10-12 students to a group (2nd Semester)
- 4th Year level 1:12-15 students to a group (1st Semester)
1:12-15 students to a group (2nd Semester)

3. Related Learning Experiences hours required
for the whole program 2, 346 hours

Courses	Skills Lab	Clinical	RLE Contact Hours (1 credit unit =51 hours)
Health Assessment	1	0	51
Community Health Nursing	.5	1.5	102
Nursing Research I	1	0	51
Nursing Research II	2	0	102
Nursing Care Management 100	2	0	102
Nursing Care Management 101	1	3	204
Nursing Care Management 102	1	5	306
Nursing Care Management 103	1	5	306
Nursing Care Management 104	1	3	204
Nursing Care Management 105	0	2	102
Nursing Care Management 106	2	3	255
Nursing Care Management 107	0	3	153
Intensive Nursing Practicum	0	8	408
Total	12.5	33.5	2,346 hours
	46 RLE Units		

4. Basis for Computation to Determine RLE Fee:

Number of hours assigned to faculty X hourly rate = RLE Fee
Hourly rate shall be specified in the Guidelines for Affiliation
promulgated by the Department of Health

5. Computation of RLE Hours: 1 unit = 51 hours