



UNIVERSITY OF  
CALGARY

FACULTY OF NURSING

Nursing 665

Advanced Health Assessment

Spring/Summer 2012

**June 6 – July 20<sup>th</sup>, 2012**

Wednesdays 0900 – 1600 in Class Room PF 2253

Fridays 0900 – 1200 in Lab PF 1290A

Course Coordinator: Dr. Karen L. Then CCN(C) ACNP PhD  
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**Faculty Clinical Preceptors:**

Dr. James A. Rankin RN ACNP PhD  
Professor & Nurse Practitioner

Dr. Karen L. Then RN CCN(C) ACNP PhD  
Professor & Acute Care Nurse Practitioner

**Course Description:** Builds upon fundamental health assessment skills to provide a solid foundation for advanced assessment. Focuses on history taking, physical examination, diagnostic reasoning and clinical judgment, as well as selected diagnostic skills necessary for advanced practice.

The course is offered in a seminar/lecture format with faculty and guest speakers and also has a practice component that will occur in a clinical/lab setting. Participation is a critical component of this course as one must be able to integrate the knowledge, psychomotor and decision-making skills necessary to perform a health history and physical examination at the advanced level required for NP practice. Attendance is mandatory for any students in the NP program.

**Prerequisites:** consent of the Faculty

**Objectives:** At the end of this course, the student should be able to:

1. Perform a consultation: take a detailed history and then perform an accurate physical examination on an adult patient with an acute or chronic health condition. Assess pertinent cultural and psychosocial factors that impact the patient and family.
2. Documents the comprehensive assessment in a legible manner in a format that is consistently utilized for Nurse Practitioner consultations.
3. Identify the steps and implement the clinical reasoning process.
4. Accurately perform and interpret physical assessment findings.
5. Systematically incorporate knowledge of clinical symptoms, health assessment findings, pathophysiology and diagnostic tests in forming appropriate differential diagnoses and diagnostic plans in clinical settings.
6. Begin interpreting routine laboratory and diagnostic tests.
7. Incorporate knowledge of the sensitivity and specificity of diagnostic tests in clinical decision-making.
8. Incorporate data from health history, physical examination and diagnostic tests to generate a list of differential diagnoses.
9. Communicate findings of the health history, the physical examination and diagnostic testing using accurate and concise written and verbal recording and reporting.

**Evaluation: The assessment structure is based on the following course activities, with the percentage weighting of each activity as indicated. The final grade for the course will be a composite mark based on the student's performance on these course activities.**

Clinical Consult Assignment	30%	<b>Due: by July 6<sup>th</sup></b>
Midterm Examination	30%	<b>June 27</b>
Final Examination	40%	<b>July 24 1300-1600</b>
<b>Total</b>	<b>100%</b>	

1. Seminars  
Students will be expected to prepare for seminars based on the topics outlined with the required readings as outlined.
2. Labs

Students will be expected to practice their health assessment skills on one another while correlating theoretical knowledge gained in seminar in preparation for consolidated learning during lab time.

Students will be expected to demonstrate their knowledge and skills in a clinical practice setting with their assigned clinical preceptor.

**Intellectual Honesty and Plagiarism:** Intellectual honesty is the cornerstone of the development and acquisition of knowledge, and is expected at all times. Students are expected to comply with the Statement on Principles of Conduct specified in the University Calendar. Please refer to the following website for additional information <http://grad.ucalgary.ca/current/usefulinfo>

Plagiarism is a form of intellectual dishonesty in which another person's work is presented as one's own. Be certain that whenever you use a primary or secondary source in your assignments you cite and reference your source using APA format (see below). All direct quotes (quotations of any number of words from the original) and indirect quotes (paraphrased ideas) must be acknowledged appropriately. Failure to do so constitutes plagiarism, and as with any form of academic misconduct, it will be penalized in accordance with University guidelines.

Dutiful citation of quotes and paraphrased materials does not mean that students can write an essay assignment by stringing together a series of quotes. Students should always try to summarize or describe someone else's ideas in their own words. When presenting their own ideas or opinions in a paper, students should provide evidence or arguments to substantiate their position.

**Freedom of Information and Protection of Privacy:** Information (such as phone number address, tracking sites of practica, etc.) that you may be asked to provide is collected under the authority of the Universities/Colleges Act and Freedom of Information and Protection of Privacy Act Section 32(c). It will be used for Practicum placement and contact purposes. Your personal information is protected by Alberta's Freedom of Information and Protection and Privacy Act and can be reviewed upon request. If you have any questions about the collection or use of this information, contact the Graduate Office, at (403) 220-6241.

### **Required Criteria for Health History and Examination (Consult)**

#### **CLINICAL CONSULT ASSIGNMENT (30%) Due by July 6<sup>th</sup>, 2012**

Assignment Criteria/ Required Elements	Points	Assignment Checklist
1. Service (i.e.: Pulmonary service, NP student, Thank you)	1	Marks will be awarded for a clear concise and comprehensive report that documents the key findings of your patient assessment and communicates the patient's problems in a succinct and legible format to other members of the health care team.  Checklist: <input type="checkbox"/> Is the order clear? Did you include headings? Accent your organization with indentations and spacing  Arrange the HPI in chronological order, and PmHx in reverse chronological order.  <input type="checkbox"/> Do data included contribute directly to the assessment?  <input type="checkbox"/> Have you documented pertinent positives and pertinent negatives?  <input type="checkbox"/> Are there overgeneralizations or omissions of important data? (Example: CN exam normal... <i>which CNs were examined?</i> )
2. Identifying Patient Data & Source (ID)	4	
3. Reason for Consult or Referral	4	
4. History of Presenting Illness (HPI)	10	
5. Risk Factors (RF) (if applicable to service)		
a. Cardiac Risk Factors (CRF)		
i. Modifiable: Smoking, HTN, DM, Obesity, Stress, Sedentary, ETOH		
ii. Non-modifiable: Age, sex, postmenopausal, family history		
b. Pulmonary Risk Factors		
i. Smoking, occupation, environmental exposure, Pets, travel, TB exposure, Hot tub, OSA, DVT/PE, Connective Tissue Disease, IVDU/street drugs		
c. Infectious Disease Risk Factors		
i. Pets: fish, birds, cats, dogs, tattoos, piercings, street drugs/IVDU, hot tub, institutionalized living, sexual orientation, travel, TB, surgery, hardware (plates/pins/screws), socioeconomic status (homeless), DM, medications (corticosteroids), immunocompromised state.		
6. Past Medical (PMHx) and Surgical History (PSHx)	5	
7. Family History (FamHx)	2	
8. Social History (SocHx)	5	

9. Medications (at home, in hospital)	2	<ul style="list-style-type: none"> <li>○ Is there too much detail and redundancy?</li> <li>○ Are phrases and abbreviations used appropriately? Use short words and brief phrases instead of long sentences</li> <li>○ Is the style succinct?</li> <li>○ Are all diagrams precise and measurements included where appropriate?</li> </ul> <p>Assignment must be submitted in hand written form</p> <p style="text-align: right;">Adapted from Bickley (2009)</p>
10. Allergies	1	
11. Review of Systems (ROS)	20	
a. Neurologic		
b. Head, Ears, Eyes, Nose, Throat (HEENT)		
c. Neck and lymph		
d. Breasts & Axillae		
e. Respiratory		
f. Cardiovascular		
g. Gastrointestinal		
h. Genitourinary		
i. Musculoskeletal		
j. Peripheral Vascular		
k. Skin		
l. Endocrine		
m. Hematologic		
12. Physical Exam (PE)	30	
a. General Appearance		
b. Vital Signs		
c. HEENT		
d. Neck and lymph		
e. Breasts & Axillae		
f. Resp		
g. CVS		
h. ABD		
i. GU/Pelvic/Rectal		
j. MSK		
k. CNS		
l. Skin (or prior to HEENT)		
13. Investigations/Diagnostics	5	
14. Differential Diagnoses (DDx)	5	
15. Plan	5	
16. Sign and Date	1	

### University of Calgary Grading System

	If the grade on your assignment is:	The percentage will be taken from:	If the total for all assignments is:	Your final grade will be:	
98.0 – 100	A+	4.0	3.95 - 4.00	A+	Outstanding <i>Elegant exposition of publication quality work that would make a significant, scholarly contribution to the area of investigation.</i>
93.0 – 97.9	A	4.0	3.85 – 3.94	A	Excellent - Superior performance showing comprehensive understanding of the subject matter. <i>Exceptional performance that goes beyond the specified requirements of the assignment, and demonstrates a comprehensive understanding of the subject matter that includes the ability to critically assess and creatively apply knowledge to new situations.</i>
88.0 – 92.9	A-	3.7	3.50 – 3.84	A-	Very good performance <i>Clarity of thought and expression that reveals the rich meaning of and complex relationship between assumptions, ideas and actions, and includes a critical examination of the topic. Relevant reference material has been correctly documented and effectively integrated into a well developed line of thought.</i>
83.5 – 87.9	B+	3.3	3.15 – 3.49	B+	Good performance <i>Subject matter is generally understood at the literal level. Wide reading, critical questioning and creative insights may be absent. Prose style reveals a clear, logical, concise and coherent expression of ideas. Work displays conventional grammar, punctuation and</i>

					<i>spelling, with a minimum of errors.</i>
78.0 – 83.4	B	3.0	2.85 – 3.14	B	Satisfactory performance Note: The grade point value (3.0) associated with this grade is the minimum acceptable average that a graduate student must maintain throughout the program as computed at the end of each registration anniversary year of the program. <i>Subject matter is generally understood, but the work displays minimum scholarship. Some gaps in knowledge and inconsistencies in thinking may be evident. Lapses in clarity of expression and the development of a clear line of thought might be evident. Work may display consistent errors in conventional form and require heavy editing on the part of the instructor.</i>
73.5 – 77.9	B-	2.7	2.50 – 2.84	B-	Minimum pass for students in the Faculty of Graduate Studies <i>Work submitted at this level lacks understanding, absence of clarity of expression or insufficient command of conventional form such that content cannot be effectively conveyed.</i>
69.0 – 73.4	C+	2.3	2.15 – 2.49	C+	All grades below B- are indicative of failure at the graduate level and cannot be counted toward Faculty of Graduate Studies course requirements. A student who receives a grade of F will normally be required to withdraw unless the program recommends otherwise.
63.5 – 68.9	C	2.0	1.85 – 2.14	C	
59.0 – 63.4	C-	1.7	1.50 – 1.84	C-	
54.5 – 58.9	D+	1.3	1.15 – 1.49	D+	
50.5 – 54.5	D	1.0	0.50 – 1.14	D	
49.9 or less	F	0	0.00 – 0.49	F	

2009-02-23,2011-08-30,2011-09-21, Adopted Full Council: 11-09-29

**Legend:** *Italics* - Criteria extracted from Faculty of Education grading scale. 2009/02/23