

## NURS2447 - Nursing Clinical III

Credits:	4 (0/4/0)
Description:	<p>This clinical course provides the professional nursing student with opportunities to manage care for diverse patient populations including care planning delegation, supervision, prioritization and continuity of care. Concepts of evidence-based nursing care and clinical judgment skills, personal identity and behavior, teamwork and collaboration, holism, patient-centered care, safety and quality improvement will be interwoven into patient care.</p>
Prerequisites:	<ul style="list-style-type: none"> <li>• BIOL2202</li> <li>• Current American Heart Association Basic Life Support</li> <li>• Current, clear national background check</li> <li>• Current, clear Minnesota Department of Health criminal background check</li> <li>• Experience as a nursing assistant as guided by the generic ADN application packet if generic student OR LPN if advanced standing student</li> <li>• NURS2426</li> <li>• NURS2437</li> <li>• NURS2438</li> <li>• NURS2455</li> <li>• Up-to-date immunizations and health form</li> </ul>
Corequisites:	
Pre/Corequisites*:	

<p>Competencies:</p>	<ol style="list-style-type: none"> <li>1. Function competently within professional, ethical and legal frameworks as a member of the interprofessional team.</li> <li>2. Recognize that nursing and other health professionals are part of the system of care and care processes that affect outcomes for patients and families.</li> <li>3. Manage care for diverse patient populations, integrating planning care, delegation, supervision, prioritization and continuity of care.</li> <li>4. Integrate multiple dimensions of patient, family and community dynamics into holistic plan of care.</li> <li>5. Use national patient safety resources for own professional development and to focus attention on safety in care settings.</li> <li>6. Employ communication technologies to coordinate care for patients.</li> <li>7. Communicate observations or concerns related to hazards and errors to patients, families and the health care team.</li> <li>8. Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care, incorporating principles of informatics, documentation and ISBARR.</li> <li>9. Relate evidence-based practice to include the components of research findings, clinical expertise, and patient and family values.</li> <li>10. Evaluate own strengths, limitations and values in functioning as a team member.</li> <li>11. Integrate the contributions of others who play a role in helping the patient and/or family achieve health goals.</li> <li>12. Examine nursing roles in assuring coordination, integration and continuity of care.</li> </ol>
<p>MnTC goal areas:</p>	<p>None</p>

*\*Can be taking as a Prerequisite or Corequisite.*