

University of Baghdad
College of Nursing
BSN. Program

Course Syllabus
Pediatric Nursing

2022/2023
1st Semester

This syllabus is subject to change. Changes will be announced to students.

It is the responsibility of the student to comply with any changes.

Created: January 9, 2023 by © Dr. Adraa Hussen, Dr.Zaid Ajil

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General Information & Policies

Course Number and Title: NURS306 Pediatric Nursing

تمريض الاطفال

Number of Credit Hours: (8) **Credit hours: 8 credits/ One Semester:** Theory 3 Hours (3) credits. Laboratory 2 Hours (1) credit. Practice at Pediatric Hospitals 12 Hours (4) credits.

Course Calendar:

(3) Hours Theory/ week for (15) weeks.. Total: 45 Hours

(2) Hours Laboratory/ week for (15) weeks.. Total: 30 Hours

(12) Hours Clinical/ week for (15) weeks.. Total: 180 Hours

Times & Places:

Days	Curriculum	Time	Lecturers	Place
Sunday	Pediatric nursing\ theory	8:30-11:30	Faculty members	Hall 3
Monday	Pediatric nursing\ clinical	8:30-2:30	Faculty members	Hospitals
Tuesday	Pediatric nursing\ clinical	8:30-2:30	Faculty members	Hospitals

Prerequisites: None

Course Description:

This course introduces the student to the care of the child through the life span from infant to adolescent in health and sickness (well, with special needs and with acute and chronic health care needs). Students will consider the role of the family and the importance of it to the care of the child. Clinical will focus on both well children and children with health care needs.

Teaching Methods:

Lectures, group discussion, clinical child's physical assessment, cases discussion. Hand out, Data show, Clinical preparation of special procedures, Pediatric wards. Implementation of special pediatric procedures at Pediatric Nursing Laboratory and practical training at Pediatric Teaching Hospitals. Google Classroom shall be used for online discussion (Class Code: ttnr6ds)

Evaluation Methods: Unit exam(s), quiz(s), written reports. Presentation seminar.

Faculty, Contact Information, & Office Hours:

Dr. Khatam Mutahseer, Dr. Adraa Hussien, Dr.Zaid Ajil , Dr. Asmahan Qassen, Assis. Marwa Salah, Assis. Samar Kareem, Assis. Suizan Ali, Assis. Ahmed Wissam, A Room No.1, 2, 3 in Pediatric Nursing Department- College of Nursing- University of Baghdad

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Required Textbook(s) and Other Materials:

- 1- Hockenberry M. J. & Wilson D. (2015). Wong's Nursing Care of Infants and Children. 10th edition. Canada. Elsevier Mosby.
- 2- Kyle T. & Carman S. (2013). Essentials of pediatric nursing. 2nd edition. Wolters Kluwer China. Health | Lippincott Williams & Wilkins.
- 3- Hockenberry, & D. Wilson. Wong's Essentials of Pediatric Nursing. (pp. 71-96). St. Louis, Missouri: Mosby Elsevier. 2015. Wong, D., L.; Hockenberry- Eaton, M.; Wilson, D.; Winkelstein, M., L. and Schwartz, P., Wong's Essential of Pediatric Nursing, sixth ed., St. Louis: Mosby, 2012

Academic Dishonesty: Academic honesty is required in all aspects of a student's relationship with the university. **Students are advised that cheating are not tolerated.** If that happens, the student shall earn zero and be under the legal circumstances.

Course Objectives

By the completion of this course the student will be able to:

1. Identify the role of the nurse in the pediatric care setting.
2. Perform a head to toe assessment of the pediatric patient.
3. Develop a plan of care in collaboration with ill child, family, as well as the interdisciplinary health care team, using the nursing process for a pediatric patient with health care needs.
4. Deliver appropriate nursing care to the pediatric patient based on diagnosis, age and developmental stage.
5. Consider the culture of the pediatric patient and the family when planning care.
6. Utilize appropriate teaching strategies when instructing the pediatric patient and family.
7. Apply ethical and legal principles when caring for the pediatric patient and family.
8. Educate the family about agencies in the community that can help with difficulties concerning the child's diagnosis, as well as provide support

Course Requirements

To complete the course successfully, the student must:

1. Adhere to the policies stated in this syllabus and printed in the *College of Nursing Student Handbook*.

2. Complete and submit each assignment by the due date and time. Failure to do so without prior permission will result in a **loss of 5%** of the points possible for the assignment per school day late.
4. Earn a grade of **50% or higher**. The aforementioned grade in NURS courses **is the minimum passing grade at the graduate level**.
5. Attend classes! Based on *The Student Guideline*, the student shall be marked “failure” if (s)he absents 10% of the total hours.

Evaluation & Grading

Distribution of Points:

Possible Points	Requirements
Seasonal exams (3)	15%
Quizzes (3)	5%
Seminar	10%
Clinical taring hospitals (5 wards)	20%
Clinical Report	10%
The total of 60% converted to 40% before the final exam	
Final theory exam	40%
Final clinical exam	20%
Total	100%

Course Schedule and activities

All the above objectives are based on specific criteria that are explained in the grading rubrics.

Content:

Week	Date of Class	Unit to be Covered and/or Activity	Assigned Readings to be Completed Before Class
Week 1 & 2	06-9-2022	Part 1. Introduction to Child Health Nursing. Perspectives of Pediatric Nursing Health promotion and assessment of the child Communication, immunization	UNIT I \ Children, Their Families, and the Nurse\ p 8-12 UNIT II \ Childhood and Family Assessment\ p 91-147, 195

Week 3 & 4		Newborn Care Immediate newborn care Care during the neonatal period High risk neonates Birth injuries	UNIT III\ Family-Centered Care of the Newborn\ p 294- 336
Week 5 & 6		Respiratory dysfunctions: Upper Airway Infections Lower Airway Infections	UNIT XI \ Childhood Oxygenation Problems\ p 1129-1213
Week 7 & 8		Genitourinary dysfunction: Electrolyte Balance U.T.I. Glomerulonephritis Nephrotic Syndrome Hypospadias Wilm's Tumor Renal Failure	UNIT X\ Childhood Nutrition and Elimination Problems\ p 996-1049
Week 9 & 10		Circulation of Blood Problems of Child: Hematologic or Immunologic dysfunction: Red blood cell disorders Defect in hemostasis Neoplastic disorder Cardiovascular dysfunction: Acquired Vascular Disorders Congenital Heart Defects Heart Failure	UNIT XII \ Childhood Blood Production and Circulation Problems P 1251- 1367
Week 11 & 12		Gastrointestinal dysfunction: Inflammatory disorders Structural disorders Obstructive disorders	UNIT X \ Childhood Nutrition and Elimination Problems\ p 1051-1107
Week 13		Endocrine dysfunction: Pituitary function disorder Thyroid and parathyroid disorder Growth hormone deficiency Precocious puberty	UNIT XIII Childhood Regulatory Problems P 1493-1510
Week 14 & 15		nursing care of neurological system Diseases: spina befida scoliosis meningomylocele meningitis	

Plus the three hours theory and two hours lab weekly, 12 hours (2 days) clinical training in pediatric hospitals.

Due Dates

• Lab exam	4\11\2021
• The first midterm exam	10\11\2021
• The second midterm exam	15\12\2021
• Seminar	With each related lecture
• The final clinical exam	12-15\1\2021

*** Never ever tell the patients about their medical diagnosis, especially if it is leukemia or other cancer diseases because most of them do not know what they suffer from.**

Requirements in the Clinical (lab and hospital)

- _ Uniform
- _ Tag's name
- _ Notebook
- _ Thermometer
- _ Stethoscope
- _ Sphygmomanometer
- _ Mask
- _ Gloves
- _ Torch
- _ Measurement tape

Attendance Rules:

Present = 8:00 – 8:30 AM

Late = 8:30 – 9:00 AM

Absent = After 9:00 AM

One Absent = Minus 2 points

Two Late = Minus 2 points

The Grading Rubric for the Clinical Performance

(in the Lab and Hospital)

Domains	Points
Clinical quiz	2
Implement nursing care for ill child based on the relationship of the patient, health, and environment	4
Implement the required nursing daily notes	8
Discuss case studies with the aspect of critical thinking	6
Total	20

The Grading Rubric for the Clinical Performance

Rating Scale	Course Learning Objectives	Score	4	3	2	1	0
Clinical quiz	5& 6& 9& 10		Precisely demonstrates right answers "rating scale"	Consistently demonstrates right answers "rating scale"	Demonstrates some right answers "rating scale"	Demonstrates limited right answers "rating scale"	Demonstrates no right answers "rating scale"
Implement nursing daily notes	3, 4, 5, 7, 8, 9		Precisely implements all technical skills with a high degree of competence	Consistently implements all technical skills with a considerable competence	Implements some technical skills with a moderate competence	Implements some technical skills with a limited competence	Implements no technical skills
Implement the required nursing procedures precisely	6, 7, 8, 9	The required nursing procedures are graded based on specific rubric for each procedure.					
Discuss case studies with the aspect of	1-12		Precisely discuss case studies with applying critical	Consistently discuss case studies with applying critical	Discuss some case studies with the aspect of critical	Discuss limited case studies with the aspect of	Discuss no case studies

critical thinking			thinking skills	thinking skills	thinking	critical thinking	
Total score							

The required nursing procedures

1- Drugs and fluids administration

2- Blood Transfusion

3- Care for newborn

4- Oxygen therapy

5- Wound care

6- Nasogastric tube

7- colostomy care

Skills Checklist

Chemotherapy Administration

Student's name:

Evaluator's name:

Date:

* Students MUST do ALL the nursing procedures under the supervision of the clinical instructors or the preceptors.

Skills	Score	2 Precisely implements the technical skill with a high degree of competence	1 Consistently implements the technical skill with a moderate competence	0 Implements no technical skills
Hand washing and wear gloves				
Confirm the chemotherapy with the patient's name and the physician order				
Confirm the time and rout of administration				
Determine patient's weight				
Confirm the dose of the chemotherapy				
Monitor patient's vital signs				
Review the laboratory values				
Check for medications that must be taken one or more days prior the chemotherapy				
For IV administration, allow 10 - 20 ml of normal saline solution to infuse to verify patency of IV.				
Clean medication port or lower y-port of the IV line with an antimicrobial swab and allow to dry				
Connect the chemotherapy line				

Hang the bag				
Open the clamp to allow the solution to flow				
Monitor the site for signs and symptoms of extravasation during infusion				
Ensure IV continues to flow within the dose calculation				
Check for blood return every 5-15 minutes				
After the dose is administered, the chemotherapy line is disconnected				
Flush with 30-50ml of IV solution at completion of chemotherapy				
Discard the equipment in specific waste container				
Document in the patient's chart				
Total 40/40/40 ÷20 =/2			

Evaluator's signature.....

** Irrelevant and non-logic skills will make the grade zero.

Skills Checklist

Blood Transfusion

Student's name:

Evaluator's name:

Date:

* Students MUST do ALL the nursing procedures under the supervision of the clinical instructors or the preceptors.

Skills	Score	2 Precisely implements the technical skill with a high degree of competence	1 Consistently implements the technical skill with a moderate competence	0 Implements no technical skills
Hand washing and wear gloves				
Confirm the Physician's order				
Note the indication, rate of infusion, and any premedication orders				
Verify the patient and blood product identification, as follows:				
Ask the patient state his full name and date of birth (if he is able) and compares it to the name and date of birth located on the blood bank form				
Compare the patient's name in the patient's chart with the patient's name on the blood bank form attached to the blood product.				
Compare the patient's blood type listed on the patient's chart with the blood type listed on the blood product container and the blood bank form				
Monitor patient's vital signs				
Check the cannula flow by administrating 5 ml of saline				
Remove the blood administration set from the package and labels				

the tubing with the date and time.				
Make sure the blood bag's temperature is within the room temperature (between 20 - 25')				
Connect the blood line				
Hang the bag				
Inspect the tubing for air. If air bubbles remain in the tubing, flicks the tubing with a fingernail to mobilize the bubbles				
Gently invert the blood product container several times				
Open the clamp to allow the blood to flow based on the rate of infusion				
Remain with the patient during the first 5 minutes and then obtains vital signs				
Obtain vital signs in 15 minutes, then again in 30 minutes, and then hourly while the transfusion infuses				
Monitor the site during infusion				
After the dose is administered, the blood line is disconnected				
Discard the equipment in specific waste container				
Monitor the vital signs				
Document in the patient's chart				
Total 40/40/40			
	÷20 =			
/2			

Evaluator's signature.....

** Irrelevant and non-logic skills will make the grade zero.

Skills Checklist

Changing Dressing C.V. Line

Student's name:

Evaluator's name:

Date:

* Students MUST do ALL the nursing procedures under the supervision of the clinical instructors or the preceptors.

Skills	Score	2 Precisely implements the technical skill with a high degree of competence	1 Consistently implements the technical skill with a moderate competence	0 Implements no technical skills
Hand washing and wear gloves and mask				
Prepare the equipment				
Explain what you are going to do to the patient				
Place patient in trendelenburg position unless contraindicated (e.g., increased ICP) or if femoral/ PICC (place supine and flat)				
Note the status of any sutures that may be present				
Remove old dressing by lifting it distally and then working proximally, making sure to stabilize the catheter				
Discard dressing in trash				
Remove gloves and discard				
Put on sterile gloves				
Start at insertion site and continuing in a circle, wipe off any old blood or drainage with a sterile antimicrobial wipe				
Use the chlorhexidine swab, clean the site. Clean directly over				

the insertion site				
Apply chlorhexidine using a back and forth friction scrub for at least 30 seconds				
Allow to dry completely				
Use an alcohol wipe to clean each lumen of the catheter, starting at the insertion site and move outward				
Apply transparent site dressing over the insertion site				
Working with one lumen at a time, remove end cap. Clean the end of the lumen with an alcohol swab. Apply new end cap or clean the end cap with an alcohol swab and apply it				
Insert the saline flush syringe into the cap on the extension tubing. Pull back on the syringe to aspirate the catheter for positive blood return. If positive, instill 5 ml of the solution over 30 seconds. Remove syringe.				
Insert heparin syringe and instill 3 cc of heparin solution (100 units heparin/cc), [<i>unless you have been instructed differently</i>] over 1 minute				
Remove syringe and reclamp the lumen				
Document in the patient's chart				
Total 40/40/40 ÷20 =/2			

Evaluator's signature.....

** Irrelevant and non-logic skills will make the grade zero.

Skills Checklist

Plasmapheresis

Student's name:

Evaluator's name:

Date:

* Students MUST do ALL the nursing procedures under the supervision of the clinical instructors or the preceptors.

Skills	Score	2 Precisely implements the technical skill with a high degree of competence	1 Consistently implements the technical skill with a moderate competence	0 Implements no technical skills
Hand washing and wear gloves				
Confirm patient's identity				
Explain the procedure to the patient				
Monitor patient's vital signs				
Prepare the plasmapheresis machine, the set of venipuncture, and the required equipment				
Check patient's lab tests, especially for viral infection				
Ensure the replacement fluids are within the room temperature (between 20 - 25°)				
Prevent of infections with careful antisepsis				
A flush with 10 mL of normal saline is placed in the draw lumen				
Connect the patient to the plasmapheresis machine				
Monitor the patient for any S&S of febrile reaction or allergic reactions				

Monitor the plasmapheresis machine				
Monitor the site for signs and symptoms of extravasation during infusion				
Disconnect the patient from the plasmapheresis machine				
Discard the equipment in specific waste container				
Monitor the vital signs				
Document in the patient's chart				
Total 40/40/40 ÷20 =/2			

Evaluator's signature.....

** Irrelevant and non-logic skills will make the grade zero.

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Pediatric Nursing Assessment Guide

Student's name:

Patient's demographics:

Name of child:

Age: Gender: Date of admission:

Head circumference:

Chest circumference:

Height :

Weight :

:

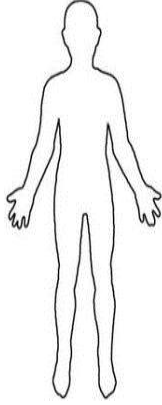
Patient's medical diagnosis:.....

Patient's history:

*	Category	Description	
1	Chronic diseases	Hypertension	Since:
		Diabetes Millets	Since:
		Cardiovascular dis	Since:
		Cerebrovascular dis	Since:
		Others:()	Since:
2	Injuries & accidents		
3	Immunizations	Fully immunized	
		Partially immunized	
		Not immunized	
		Type	Explain
4	Allergies	Foods	
		Medications	
		Environmental	
5	Feeding method	Type	Explain
		Breast	
		Bottle	
		others	
6			

Present history:

Vital Signs

Pulse	Site(s) 	Temporal	Rate	Rhythm	Regular	Strength	0	No palpable pulse
		Carotid					+1	Faint, but detectable pulse.
		Apical					+2	Slightly more diminished pulse than normal.
		Brachial						
		Radial						
		Ulnar			+3		Normal	
		Femoral						
		Popliteal			+4		Strong, Bounding	
		Posterior Tibial						
		Dorsalis Pedis						

Blood Pressure	Systolic=	Hypertensive
	Diastolic=	Normotensive
		Hypotensive

Respiration	Rate =	Tachypnea	Rhythm	Regular	Depth	Shallow
		Eupnea				Irregular
		Bradypnea				

Temperature	Finding=	Hyperthermia	Site(s)	Orally
		Euthermia		Axillary
		Hypothermia		Rectally

General appearance
<input type="checkbox"/> Obese
<input type="checkbox"/> Undernourished
<input type="checkbox"/> Other

Skin

Color:

- Pink
- Olive /brown
- Jaundice
- Cyanosis
- Edema -----
- Other -----

Appearance :

- Dry Moist

Other -----

- Birthmarks lesion

Mental status :

- Awake & Alert
- Coma
- Lethargic
- Shows signs of depression
- Angry /aggressive
- Withdrawn
- Shares openly

Neurologic assessment	
Eye opening	
Spontaneous	4
To sound	3
To pain	2
None	1
Best verbal response	
Oriented	5
Confused	4
Inappropriate words	3
Incomprehensible Sounds	2
None	1
Best motor response	
Obeys commands	6
Localizes stimulus	5
Withdrawal from stimulus	4
Abnormal flexion (decelerate)	3
Abnormal extension (decelerate)	2
Flaccid	1
Total score	

Pain	WHAT'S UP-Guide	W	Where is it?	
		H	How does it feel? Describe the quality. (Ex.: is it dull, sharp, stabbing?)	
		A	Aggravating & Alleviating factors. What makes it worse? What makes it better?	
		T	Timing. When did it start? How long does it last?	
		S	Severity. How bad is it? This can often be rated on a scale of 0 to 10.	<p>PAIN MEASUREMENT SCALE</p>
		U	Useful other data. What other symptoms are present that might be related?	
P	Patient's perception of the problem. The patient often has an idea about what the problem is, or the cause, but may not believe that his or her thoughts are important to share unless specifically asked.			

Respiratory system:

	Dyspnea		
	Orthopnea		
	Apnea		
Cough	Productive	Consistency:	
		Amount:	
	Non-productive	Color:	

Circulatory system


Edema	Yes	Location(s)		-	
		Extent		-	
				Localized	
				Generalized	
		Grade	1+	A pit of 2 mm or less; presents as slight pitting with no distortion. Pitting disappears immediately.	
			2+	A deeper pit measuring 2- 4 mm. It will have no easily discernible distortion and the pitting will disappear in 10 – 15 seconds.	
			3+	A noticeably deep pit measuring 4- 6 mm. The area affected will look distinctly fuller and swollen. The indentation will take as long as 60 seconds before it disappears.	

				4+ A very deep pit is seen which will last 2- 5 minutes before it disappears. This indentation will measure 6 – 8 mm in depth and the body part affected by the edema will look gross and distorted.
		No		
Dehydration		Yes	Support with evidence(s):	
		No	Support with evidences(s):	



Gastrointestinal system & Nutritional status Assessment

Mouth & teeth	Halitosis	Support:
	Missing teeth	
	Dental caries	
Ability to swallow	Swallow easily	
	Dysphagia	
Appetite	Poor	Support:
	Good	Support:
Changes in food intake due to disease process	Increased	Support:
	No change	
	Decreased	
Abnormalities	Nausea	Support:
	Vomiting	
	Indigestion	
	Hyperacidity	
	Polyphagia	
	Polydipsia	
Changes in body weight due to disease process	Increased	Support:
	No Change	
	Decreased	

Elimination system

Bowel Motion	Usual Patterns	1 Time per.....		Abnormalities	Diarrhea
		2 Times per....			Constipation
		≥3 Times per....			Fecal incontinence
					Malena
Urination	Ask:	1 Do you urinate more than usual?	Yes	Abnormalities	Frequency
			No		
		2 Any pain or burning upon urination?	Yes		Urgency
			No		
		3 Any difficulty starting or maintaining the stream of urine?	Yes		Dysuria
			No		
		4 Any blood in your urine?	Yes		Urinary Tract Infection
			No		
		5 Any difficulty controlling your urine?	Yes		Urinary incontinence
			No		

Sleep

Sleeping hours/24hrs=	Factors interfering with sleep	Pain	Factors ensuring good sleep	Medications
				Warm drink
		Noisy environment		Warm Bath
				Quite environment
				Back rub
				Other: - -

Integumentary system

Discharge Care Plan:

*	Areas that may require alteration/assistance & teaching	Explain
1	Self-care Activities	
2	Sleeping	
3	Ambulation	
4	Wound or Tubes Care	
5	schooling	
6	playing	
7	Sport	
8	feeding	
9	Follow up date	
10	Others	

Prototype

The student will be creative in this assignment and build a sample, model, or a product to act as a one or more of the following concepts that have been learned.

The concepts are: 1- Pathophysiology; it can be pathophysiology tree which contains definition of the disease, causes, pathophysiology, signs and symptoms, 2- diagnostic tests and procedures, 3- treatment which includes drug classification, route, dose, frequency, action, indication, contraindication, and nursing action).

The Grading Rubric for the Assessment and Report based on QSEN; Quality and Safety Education for Nurses

	Criteria		
Assessment	Student must have the following Assessment Criteria:		50 Points possible _____ St.'s awarded
	<ul style="list-style-type: none"> • Completed Physical Assessment Student presents all relevant assessment data.....50 Student leaves out one relevant area in assessment data.....40 Student leaves out 2 or more relevant areas in assessment data.....35-5 Student does not present relevant data regarding assessment.....0		
Total	Possible points (50/50) = 5/5		Total Points awarded/50 =/5

The Grading Rubric for Nursing Care Plan

	20	15	10	5	0
Assessment Includes subjective, objective and historical data that support actual or risk for nursing diagnosis.	Includes all data that related to nursing diagnosis and does not include data that is not related to nursing diagnosis.	Includes all data that related to nursing diagnosis, but also includes data not related to nursing diagnosis.	Does not include all data that related to nursing diagnosis. May also include data that does not relate to nursing diagnosis.	Assessment portion is incomplete.	No assessment is written
Nursing Diagnosis Includes the most appropriate diagnosis for patient and ordinal number that includes all appropriate parts (stem, related to or R/T, and as evidenced by AEB for actual diagnosis) and is	Diagnosis is appropriate for patient and ordinal level, and diagnosis is NANDA approved. Diagnosis	Diagnosis is appropriate for patient and ordinal level, and diagnosis is NANDA approved, but does not	Diagnosis is not appropriate for patient and ordinal level (first diagnosis, second diagnosis,	Diagnosis portion is incomplete.	No nursing diagnosis was written

NANDA approved.	also includes all parts and information is listed in correct part of diagnosis.	include all parts or information is listed in wrong part of diagnosis.	etc). May also not be NANDA and may not include all parts.		
Planning Includes a patient or family goal that is most appropriate for the patient/family and the nursing diagnosis. Goal should be measurable by at least two criteria and have a target date or time.	Goal statement is patient or family oriented, and contains two measurable criteria and a target date or time.	Goal statement is patient or family oriented, and contains at least one measurable criteria or a target date/time.	Goal statement is not patient or family oriented and may not have measurable criteria or a target date or time.	Goal portion is incomplete.	No planning was written
Implementation Includes interventions or nursing actions that directly relate to the patient's goal, that are specific in action and frequency, are labeled "I" for independent and "C" for collaborative, and include a referenced rationale with page number (if applicable). Number of interventions should be appropriate to help patient or family meet their goal.	Interventions portion contains adequate number of interventions to help patient/family meet goal, and interventions are specific in action and frequency, labeled with "I" or "C" and are listed with referenced rationales.	Interventions portion contains adequate number of interventions to help patient/family meet goal, but interventions may not be specific, labeled or listed with rationales.	Interventions portion does not include adequate number of interventions to help patient/family meet goal. Interventions may also not be specific, labeled or listed with rationales.	Interventions portion is incomplete.	No intervention was written
Evaluation Includes data that is listed as criteria in goal statement. Based on this data, goal is determined to be met, partially met, or not met.	Evaluation portion does contain data that is listed as criteria in goal statement. Does describe goal as met,	Evaluation portion does contain data that is listed as criteria in goal statement, but does not describe goal as met,	Evaluation portion does not contain data that is listed as criteria in goal statement. May also not describe goal	Evaluations portion is incomplete.	No evaluation was written

	partially met, or not met.	partially met, or not met.	as met, partially met, or not met.		
Total	Possible points 100% = 5/5		Total Points awarded/100 =/5		

The Grading Rubric for Patient Education

	10	5	2	0
Assessment/Goals	Performs needs assessment. Goals for teaching are measurable and clearly identified.	Partially identifies special needs. Some goals for teaching are identified	Limited needs are identified. Limited goals for teaching are identified.	No needs assessment and goals of teaching
Brochure Content	The brochure includes extensive information and includes all of the following key components: patient assessment, disease identification, and key educational points for the patient.	The brochure includes some information and includes some of the following key components: patient assessment, disease identification , and key educational points for the patient.	The brochure includes limited information and includes limited of the following key components: patient assessment, disease identification , and key educational points for the patient.	The brochure does not the following key components: patient assessment, disease identification , and key educational points for the patient.
Style/Mechanics	-The brochure is organized and is not just a list of facts. -The brochure is presented in a dynamic and	-The brochure has some pictures however they are not relevant to the content. -Some mistakes are	-The brochure lacks neatness and clarity -Brochure lacks style and information	No pictures No style

	concise manner with full understanding of the subject.	made. -Little organization and clarity is used. -There is little style and reads more like a list of facts rather than a brochure.	and pictures are not related to the topic.	
Elocution	Student engages audience and maintains eye contact throughout the presentation and is very confident with information presented	Audience members have slight difficulty hearing presentation. Student occasionally makes eye contact.	Student speaks too quietly for students to hear them. Student reads all of presentation with no eye contact.	No presentation
Proofreading/pronunciation	Student uses a clear voice with correct pronunciation of terms so that all audience members can hear presentation.	Student speaks coherently but has difficulty with scientific terms.	Student mumbles and incorrectly pronounces terms.	No presentation
Total	Possible points 50/50=5/5	Total Points awarded/50 =/5		

The Grading Rubric for Prototype

Prototype		
Creativity	Student must be creative to build a sample, model, or a product Student creates his/her own idea.....2 Student copies a previous idea from others.....0	2 Point possible ____ St.'s awarded
Aesthetics	Student uses clear and related drawings, pictures, tools, or dolls.....1 Student uses some unrelated drawings, pictures, tools, or dolls0.5 Student does not use relevant drawings, pictures, tools, or dolls0	1 Point possible ____ St.'s awarded

Presentation	Student presents all the content clearly and concisely2	2 Point possible _____ St.'s awarded
	Student presents some of the content clearly and concisely1.5	
	Student presents some the content vaguely and uncertain.....1	
	Student does not present the content0	
Total	Possible points 5/5	Total Points awarded/5

***References should be included in the requirements. Otherwise, one point shall be cut off.**

**** All the aspects in the above evaluating measures MUST be relevant and logic.**

Otherwise, the student shall earn zero.

Student Self-Evaluation

Provide examples from your clinical experiences to validate your performance including:

- * Strengths:
- * Areas needing improvement:
- * Strategies for improved performance:

References

1- Hockenberry M. J. & Wilson D. (2015). *Wong's Nursing Care of Infants and Children*. 10th edition. Canada. Elsevier Mosby.

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