FLORIDA ATLANTIC UNIVERSITY

NEW COURSE PROPOSAL
Graduate Programs

Department Nursing

College Nursing

*(To obtain a course number, contact **erudolph@fau.edu**)*

UGPC Approval _____
UFS Approval _____
SCNS Submittal _____
Confirmed _____
Banner _____
Catalog _____

Prefix NGR

Number

(L = Lab Course; C = Combined Lecture/Lab; add if appropriate)
Lab Code L

Type of Course Lab ☒

Course Title Psychiatric Mental Health Nursing Across the Lifespan: Diagnosis and Medication Management in Advanced Nursing Practice

Credits *(See Definition of a Credit Hour)*

Grading *(Select One Option)*
Regular ◉
Sat/UnSat ○

Effective Date *(TERM & YEAR)*
Fall 2024

Course Description *(Syllabus must be attached; see Template and Guidelines)*
This course focuses on advanced knowledge of psychopathology, assessment, diagnosis, differential diagnosis, the introduction of psychiatric and mental health diagnoses in clinical practice, and management of psychiatric and mental health pharmacologic medications and non-pharmacological care in the practice setting.

Prerequisites
NGR6141, 6172

Prerequisites, Corequisites and Registration Controls are enforced for all sections of course.

Academic Service Learning (ASL) course ☐
Academic Service Learning statement must be indicated in syllabus and approval attached to this form.

Corequisites
NGR6002, 6002L
(BSN-DNP students)

Registration Controls *(For example, Major, College, Level)*

Minimum qualifications needed to teach course:
Member of the FAU graduate faculty and has a terminal degree in the subject area (or a closely related field).

List textbook information in syllabus or here
See attached syllabus

Faculty Contact/Email/Phone
Katherine Chadwell, kchadwel@health.fau.edu,

List/Attach comments from departments affected by new course
none

Approved by	*Date*
Department Chair Katherine Chadwell	3/12/2024
College Curriculum Chair Kristen Weeks, PhD, RN	3/14/2024
College Dean	3/14/24
UGPC Chair	
UGC Chair	
Graduate College Dean	
UFS President	
Provost	

Email this form and syllabus to UGPC@fau.edu 10 days before the UGPC meeting.

FLORIDA ATLANTIC UNIVERSITY
CHRISTINE E. LYNN COLLEGE OF NURSING
COURSE SYLLABUS

SEMESTER: FALL 2024

COURSE NUMBER: NGR XXXXL

COURSE TITLE: Psychiatric Mental Health Nursing Across the Lifespan: Diagnosis and Medication Management in Advanced Nursing Practice

COURSE FORMAT: Clinical/Online Synchronous Clinical Supervision (Dates in CANVAS)

CREDIT HOURS: 2

COURSE SCHEDULE: 120 clinical hours practicum scheduled at clinical sites throughout the semester. Weekly online clinical supervision with clinical group and faculty via Zoom, as per course schedule.

PREREQUISITES: NGR6141, 6172

COREQUISITES: NGR6002, 6002L (BSN-DNP students)

FACULTY: TBD

OFFICE HOURS: TBD

COURSE DESCRIPTION: This course focuses on advanced knowledge of psychopathology, assessment, diagnosis, differential diagnosis, the introduction of psychiatric and mental health diagnoses in clinical practice, and management of psychiatric and mental health pharmacologic medications and non-pharmacological care in the practice setting.

COURSE OBJECTIVES: Upon completion of NGR XXXXL, the student will be able to create caring nursing responses in: *

Becoming competent

1. Apply knowledge, judgement, skills, effective therapeutic communication techniques, and experience from nursing and related disciplines to assess the physical, mental, spiritual, emotional, and cultural well-being of individuals with mental disorders across the lifespan and determine a diagnosis/differential diagnosis in the practice setting. (Domain 1,2,4,9)
2. Apply research findings, clinical guidelines from national organizations, and evidence-based standards of care to formulate a diagnosis/differential diagnosis, determine pharmacological or non-pharmacological intervention to minimize complications and to promote recovery of individuals with mental disorders. (Domain 1,4)
3. Utilize nursing situations, informatics and health technologies to evaluate, integrate, coordinate, and improve healthcare for individuals with mental disorders. (Domain 8)
4. Apply knowledge based on pharmacokinetic and pharmacodynamics concepts, pharmacogenetics, ethical and legal considerations of drugs in the management of acute and chronic mental disorders across the lifespan and in vulnerable groups. (Domain 1,2, 4)

Becoming compassionate

5. Choose caring strategies based on nursing theories and complex patterns of knowing in psychiatric mental health advanced nursing situations that reflect relation based compassionate care, with an appreciation of the individual and families' cultural and spiritual beliefs in the practice setting. (Domain 2, 9)
6. Co-create a patient centered plan of care grounded in cultural competency to develop an integrative holistic approach to diagnosis and pharmacologic and nonpharmacologic therapies for persons with mental disorders. (Domain 2,3,4,5,9)

Demonstrating comportment

7. Identify effective communication strategies to foster interprofessional partnerships and collaboration to decrease stigma and to advocate for health equity and to improve health (Domain 1,2,9)
8. Demonstrate an understanding of the impact of ethical, legal, political, cultural, global, and socioeconomic issues

in providing safe and accountable care for individuals with mental disorders. (Domain 3,5,9)

9. Demonstrate awareness of the impact of self on encounters with individuals who are prescribed drug therapy in the management of mental disorders. (Domain 6,9)

Becoming confident

10. Develop a sense of self as a caring individual in relation to individuals in your care and other professionals within psychiatric mental health nursing advanced practice. (Domain 2, 10)
11. Demonstrate beginning clinical confidence, through critical thinking by applying advanced nursing knowledge, research and evidence-based care to diagnose and prescribe drugs for individuals with mental disorders in the practice setting. (Domain 1,4,10)

Attending to conscience

12. Discuss ethical and morally sensitive issues affecting psychiatric mental health advanced nursing practice in the clinical setting. (Domain 2)
13. Co-create drug therapy plans that maximize patient's participation toward their wellbeing. (Domain 2)

Affirming commitment

14. Understand the role and scope of practice of the psychiatric mental health nurse practitioner in providing safe, ethical, efficient, cost effective, quality care, and impact of drug therapy for individuals with mental disorders in the practice setting. (Domain 9)

**The 6 subjectives based on Roach's (2002) work organize the course objectives.*

TEACHING LEARNING STRATEGIES: Creating Caring Community for Learning, Course Assignments, Synchronous Clinical Supervision Sessions, Modeling/Mentoring with Preceptor and Clinical Faculty, e-Value/E-Log Documentation, Nursing Situations/Group Work.

GRADING AND EVALUATIONS:

Evaluation Measure	Percentage	Due Dates
Beginning of Semester: Preceptor Agreement, Clinical Arrangement Form, Complio Compliance, Formative Evaluation Quiz	0%	Week 1
Preceptor Evaluation (Mid-term & Final)	10%	Week 5 & 10
Faculty Evaluation (Mid-term & Final)	30%	Week 5 & 10

Student Self Evaluation (Midterm & Final)	10%	Week 5 & 10
Clinical Supervision: Bi-Weekly	10%	Bi-Weekly, TBD
Documentation: Weekly e-Value/E-log Medication Evaluation (1) Psychiatric Evaluation (1) Preceptor Log Bi-Weekly	15%	See course schedule for dates in CANVAS
Reflective Journal (2)	10%	Week 3 & 8
Professionalism/Completion of Documentation/Appearance/Timeliness	10%	Weekly
Total	100%	

GRADING SCALE: Grade below C is not passing in the Graduate Program.

94 - 100 = A
90 - 93 = A-
87 - 89 = B+
84 - 86 = B
80 - 83 = B-
77 - 79 = C+
74 - 76 = C
70 - 73 = C-
67 - 69 = D+
64 - 66 = D
61 - 63 = D-
0 - 60 = F

REQUIRED TEXTS:

American Nurses Association, American Psychiatric Nurses Association, & International Society of Psychiatric-Mental-Health Nurses. (2022). *Psychiatric-mental health nursing: Scope and standards of practice* (3rd ed.). Silver Spring, MD: Author. ISBN: 9781947800977

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders: Text revision: DSM-5-TR* (5th ed.). Washington, D. C.: American Psychiatric Publishing. ISBN: 9780890425763

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.). Washington, D. C.: Author. ISBN: 9781433805615

Boland, R., Verduin, M. L., & Ruiz, P. (2021). *Kaplan & Sadock's synopsis of psychiatry: Behavioral sciences/clinical psychiatry* (12th ed.). Philadelphia, PA: Wolters Kluwer. ISBN: 9781975145569

Carlat, D.J. (2017). *The psychiatric interview* (4th ed.). Philadelphia, PA: Wolters-Kluwer. ISBN: 9781496327710

Dulcan, M. K., Ballard, R. R., Jha, P., Sadhu, J. M. (2018). Concise guide to: Child & adolescent psychiatry (5th edition). Arlington, VA: American Psychiatric Association Publishing. ISBN: 978-1615370788

Stahl, S. M. (2021). *Stahl's essential psychopharmacology: Neuroscientific basis and practical applications* (5th ed.). New York, NY: Cambridge University Press. ISBN13: 9781108971638

Stahl, S. M. (2021). *Prescriber's guide: Stahl's essential psychopharmacology* (7th ed.). New York, NY: Cambridge University Press. ISBN: 9781108926010

Stahl, S. M. (2019). *Prescriber's guide: Children and adolescents* (1st ed.). New York, NY: Cambridge University Press. ISBN: 978-1-108-44656-3

RECOMMENDED TEXTS:

Preston, J. D., O'Neal, J. H., Talaga, M. C, & Moore, B. A. (2021). *Child and adolescent clinical psychopharmacology made simple* (4th ed.). Oakland, CA: New Harbinger Publications, Inc. ISBN: 978-1684035120

Preston, J., & Johnson, J. (2020). *Clinical psychopharmacology made ridiculously simple* (9th ed.). Miami, FL: MedMaster, Inc. ISBN: 978-1935660408

Zimmerman, M. (2013). 2013). Interview guide for evaluating DSM-5 psychiatric disorders and the mental status examination. Psych Products Press. ISBN: 978-0-9633821-1-5

COMPUTER REQUIREMENTS AND TECHNICAL SKILLS:

Laptop Computer: All FAU students in the Master's Program are required to have a laptop computer. You are required to have a camera on your laptop or desktop for this course in order to use Lockdown Browser Monitor.
Operating System: A computer that can run Mac OSX or Win XP or higher
Peripherals: Speakers and a camera.
Software: All students will need to install LockdownBrowser (LDB). A link is provided on the Canvas in the course. There will be a practice LDB quiz before the first exam. Download LDB from the link in the course. **Skills:** Using and learning the Canvas platform, using the course inbox, checking grades, posting assignments, taking quizzes and exams on LDB.

TOPICAL OUTLINE:

1. Scientific Foundation:

- Introduction to the study of psychiatric mental health advanced practice utilizing foundational concepts of psychopathology, diagnostic reasoning, and evidence-based practice.
- Foundational theoretical perspectives: Social Science, Psychology, Nursing.
- History of role: CNS, NP role.
- Nurse practitioner-patient relationship grounded in caring: health promotion, professional role, leadership, interprofessional communication, health policy, quality improvement, practice inquiry, technology and information literacy to assess,
- DSM-5: diagnosis, differential diagnosis, prevalence, of mental disorders including: Neurodevelopmental Disorders, Schizophrenia Spectrum, and Psychosis Disorders, Bipolar Disorders, Depressive Disorders, Anxiety Disorders, Obsessive-Compulsive and Related Disorders, Feeding and Eating Disorders, Dissociative Disorders, Somatic and Related Disorders, Feeding and Eating Disorders, Elimination Disorders, Sleep-Wake Disorders, Sexual Dysfunction Disorders, Gender Dysphoria, Disruptive Impulse Control and Conduct Disorders, Substance Related and Addictive Disorders, Neurocognitive Disorders, Personality Disorders, Emergency and Mental Health Crisis.
- Pharmacokinetics & Pharmacodynamics
- Neurotransmission, transporters, receptors, enzymes, and ion channels as targets of psychopharmacological drug action
- Genetics and Psychopharmacology
- Herbal therapies & supplements
- Psychotropics mechanism of action, side effects, adverse events for drugs used in treatment of mental health disorders

2. Leadership

- Mental health advocacy for patients, families, caregivers, communities, and members of the healthcare team.
- Communication: effective communication both orally and in written format, risk analysis documentation.

3. Practice

- Health promotion and disease prevention include: Genetic causes of common diseases and screening, epidemiology prevalence and incidence of mental disorders, ecological, global, and social determinants of health.

- Nurse Practitioner patient relationship grounded in caring including: Authentic presence, relationship of mutual trust, and patient centered care; principles of learning and change theory, health literacy; cultural and ethnic considerations.
- Assessment: health history, mental status exams, assessment tools, suicide/homicide risk analysis.
- Holistic integrative approaches to mental illness
- Cultural competency & health literacy patient and family education
- National Standards and Practice Guidelines

4. Technology and Information Literacy

- Informatics: electronic health record, assessment tools used to gather, document, and analyze outcomes related to mental health.
- Essentials of writing prescriptions
- Evidenced-based decision-making related to prescribing

5. Ethics

- Ethical principles in decision making and practice: Differential diagnosis, least restrictive environment, commitment laws, competency laws, risk analysis.
- Legal & ethical considerations in prescribing psychopharmacological drugs

6. Independent Practice

- Critical decision-making and diagnostic reasoning required for the treatment of mental disorders that builds on previous knowledge in related sciences such as anatomy and physiology, psychology, and genetics.
- Integrates advanced knowledge of pharmacology, pathophysiology, health assessment and research in the care of individuals across the life span.
- Integrates advanced knowledge of pharmacology, pathophysiology, health assessment and research in the care of individuals across the life span.

COURSE ASSIGNMENTS:

Beginning of Semester (0% of course grade)

Students must complete clinical prework in CANVAS, which includes signed Preceptor Agreement form, Clinical Arrangement Form, Complio compliance, Formative Evaluation Quiz.

Preceptor Evaluation of Student (10% of total grade)

Your preceptor will conduct a midterm and final evaluation which will be reviewed with you by the preceptor and clinical faculty. The documents must be submitted to CANVAS on designated midterm and final evaluation dates. The evaluation content/form will be available for review on the CANVAS site.

Faculty Site Evaluation (30% of Grade)

Faculty will conduct a site evaluation once per semester, either live or via online technology. The evaluation criteria are available for review on the CANVAS site. The date will be mutually determined by the clinical instructor, preceptor and student.

Inadequate (69% or less)	Satisfactory (70-79%)	Above Average (80-89%)	Excellent (90-100%)
Mostly 2-3s on Site Visit Performance Evaluation	Mostly 3s on Site Visit Performance Evaluation	Mostly 4s on Site Visit Performance Evaluation	Mostly 4-5s on Site Visit Performance Evaluation

Student Self Evaluation (10% of total grade)

Students will complete a self-evaluation which will be reviewed with the preceptor and clinical faculty at midterm and final evaluation meetings. The completed self-evaluation form must be 7 submitted to CANVAS on due date assigned. The evaluation form will be available for review on the CANVAS website.

Clinical Supervision: Weekly (10% of total grade)

Purpose: The purpose of the clinical supervision process is to guide the student in developing clinical skills and professional role development using reflective practice. Reflective practice is the capacity to reflect on action so as to engage in a process of continuous learning, which is one of the defining characteristics of professional practice (Schon,1983). Reflective practice involves paying critical attention to the practical values and theories which inform everyday actions, by examining practice reflectively and reflexively, leading to developmental insight (Bolton, 2010). As a process of supervision, students are expected to develop integrity and collegial attributes in relationships with peers within the supervisory group.

Process: Conducted via Cisco WebEx as scheduled. Each clinical supervisor will determine specific parameters and goals of supervision and establish the supervision schedule. each student is required to attend all clinical supervision sessions, unless the clinical faculty have given permission for absence which must be granted 24 hours prior to clinical supervision date(s). The process of supervision involves the examination of the student's work with a patient in which the clinical supervisor helps the student interpret what is going on in the student-patient relationship and to plan further intervention. The supervisory relationship is one in which the student obtains assistance when needed, feels secure to express reactions to clinical experiences, experiments with new ideas and new skills, and assumes responsibility for his or her own growth (Gregg, Bregg & Spring, 1976). The clinical supervisor wears many hats – teacher, coach, consultant, mentor, evaluator, senior clinician. Ultimately, effective clinical supervision ensures that clients are competently served (SAMHSA, 2014).

Supervision is an important instructional activity in the development of a psychiatric nurse practitioner's clinical competencies. It is a tool that allows students to bridge classroom and clinical practice. Further, clinical supervision has a long-standing tradition in professional mental health practice (counseling,

clinical psychology, social work, psychotherapy, psychiatric nursing) as a method for developing practitioner skills, increasing treatment effectiveness and quality, and maintaining ethical standards. Indeed, clinical supervision may begin as an educational initiative; however it will likely remain a life-long professional practice for the PMHNP.

Clinical Documentation: Weekly (20% of total grade)

Weekly e-value/eLogs: Students will document all patient encounters in e-Logs on a weekly basis, including required clinical information: of age of patient, chief complaint, objective findings, diagnosis and code, therapeutic interventions/type of therapy provided including recommended medication and other treatment. Each SOAP note should be of an interesting or atypical situation, clear, concise, and complete. Faculty may require rewriting of notes or additional notes to be written. If this occurs, it is expected that the quality of the written note will improve over the semester. A rubric for grading will be posted on the Canvas under assignments.

Points	0-10	11-12	13-14	14.5-15	Total Score
Criteria	Enters mostly complete information: age, dx, RX, SOAP on weekly basis at least 8-10 weeks, or needed faculty prompt to update e-Value/eLOGS	Enters mostly complete information: age, dx, Rx SOAP on weekly basis at least 10-11 weeks	Enters complete information: age, dx, RX, SOAP on weekly basis at least 11-12 weeks.	Always enters complete information: age, dx, RX, SOAP on weekly basis	/15

Please include all the required information but do not include any identifying information regarding any specific patient.

Presentation of Psychiatric Evaluation/Diagnosis/Differential Diagnosis and Treatment Plan

Each student must submit one Psychiatric Evaluation/Diagnosis and Treatment Plan to the CANVAS assignment area during the course, following the grading criteria/rubric below, a full description of criteria is in CANVAS. Faculty may require rewriting of evaluation or additional information to be written. If this occurs, it is expected that the quality of the written evaluation will improve.

Criteria	Complete (2 pts)	Developing (1 pts)	Incomplete (0 pts)
Identifying Information	All nine elements of the identifying information present.	One or two of the required elements are missing.	Three or more of the critical elements are missing.
Presenting Symptoms	Symptoms were stated "in the person's own words.	Symptoms presented, not in pt. words.	No presenting symptoms.
History of Present Illness	All seven attributes of the present illness are stated.	One or two of the required attributes are missing.	Three or more of the required

			attributes are missing.
Past Psychiatric History	All elements of a PPH are present.	Limited past psychiatric history.	No psychiatric history present.
Past Medical History	Relevant medical history present.	Limited medical history present.	No medical history present.
Family History	Relevant family history with genogram present.	Relevant family history with genogram present.	NO family history present
Psychosocial History	Relevant psychosocial history present.	Limited psychosocial history present	No psychosocial history present.
Developmental History	Relevant developmental history present.	Limited developmental history present	No developmental history present.
Psychiatric Review of Systems	Relevant psychiatric ROS history present.	Limited psychiatric ROS history present	No psychiatric ROS history present.
Medical Review of Systems	Relevant medical ROS history present.	Limited medical ROS history present	No medical ROS history present.
Mental Status Exam	All elements of mental status exam present.	One or two of the required elements are missing	Three or more of the required elements are missing.
Diagnosis/Differentials	A list DSM-5 diagnosis with considerations of appropriate differential diagnosis is present	The list of DSM-5diagnosis is incomplete or inaccurate, pertinent acute and chronic illnesses, developmental/special population considerations are missing.	DSM-5 diagnoses are missing, no list of differentials.
Treatment Plan	Plan is complete with specific patient directions, citations of sources in-text for plan. Rationale for the diagnosis and plan is present.	Plan is incomplete lacks specific patient directions, citations of sources in-text for plan. Rationale for the diagnosis and plan is limited.	Plan is incomplete lacks specific patient directions. Rationale for the diagnosis and plan is not present.
Case Formulation	Thorough biopsychosocial case formulation with a rationale is present.	Limited biopsychosocial case formulation presented	No biopsychosocial case formulation presented.

Medication Evaluation

Each student must submit one Medication Evaluation to the CANVAS assignment area during the course, following the grading criteria/rubric below, a full description of criteria is in CANVAS. Faculty may require rewriting of evaluation or additional information to be written. If this occurs, it is expected that the quality of the written evaluation will improve.

Criteria	**Complete (2 pts)**	**Developing (1 pts)**	**Incomplete (0 pts)**
Drug Selection: Identify drug(s) to address persons identified behaviors in the nursing situation, including mechanism of action,	Discusses and selects appropriate drugs to address behaviors; fully describes MOA, SE, AE, Dose, and Routes	Discusses and selects drugs which may address behaviors; Partially describes MOA, SE, AE, Dose, and Routes	Does not select appropriate drugs to address behaviors; minimal discussion of

common side effects, possible adverse events, dosage, and route			MOA, SE, AE, Dose, and Route
Discussion: Discuss practice guidelines, tools, and labs to review; and patient education needed.	Correctly identifies practice guidelines, drug categories, tools, and lab values supporting selected drug(s); fully describes patient education required	Partially identifies practice guidelines, tools and lab values which support selected drugs(s); minimal description of patient education	Does not identify practice guidelines or tools or labs to support drug(s) selected; no description of patient education
Rationale: Provide rationale for drug selection	Thorough description of rationale for selection of drug with supporting literature	Minimal description of rationale for drug selection, no supporting literature	Does not provide rationale for selection of drug

Preceptor Log

Each student is required to keep a clinical log of your client encounters and clinical hours during this semester. You must complete a minimum of 120 clinical hours. Your preceptor, attesting to its accuracy must approve these logs weekly. You may be dismissed for falsification of clinical hours.

Reflective Journal (10% of Total Grade)

Purpose: The purpose of the reflective journal is to help students reflect on their learning experiences in clinical, with specific application of theoretical perspectives, caring concepts, personal reflection, current evidence, and development of insight in relation to a nursing situation. Reflection is a valuable tool for learning and retaining new information.

Assignment: Two reflective journals are required this semester. Please use proper grammar and sentence structure. Do not include any identifying information regarding specific clients.

Criteria	Points
Discuss a clinical situation; something important that you learned from a clinical situation, an interaction with a client or preceptor, or simply a question that arose from your clinical interactions.	1
Relate your discussion to a theoretical therapeutic approach used in therapy.	1
Discuss 1 scholarly article related to your discussion	1
Relate your discussion to caring concepts of Sr. Roach and/ or M. Mayeroff and Yalom's group concepts. Describe the impact of these concepts – to the clinical situation, client outcomes, or clinical interactions.	1
What insight did you gain from this clinical experience and reflective thinking?	1

Professionalism/Completeness of Documentation (10% of total grade)

Professionalism is expected in the clinical setting such as arriving on time on expected days with white lab coat and FAU name badge. Inquire about dress code and need for closed-toe shoes. Students are not allowed to be in the clinical setting when the University is closed.

Completeness of Documentation: e-value/e-logs completed on time as directed, documentation is complete and reflects care to provided; preceptor log completed and submitted on time

Students are strongly recommended to obtain membership in the American Nurses Association (ANA), the Florida Nurses Association (FNA) or their respective state affiliate of ANA, and the American Psychiatric Nurses Association, but whether they choose to obtain the membership, or not, will not affect their grade.

BIBLIOGRAPHY:

2023 American Geriatrics Society Beers Criteria® Update Expert Panel. (2023). American Geriatrics Society 2023 updated AGS Beers Criteria® for potentially inappropriate medication use in older adults. *Journal of the American Geriatric Society, 71*(7), 2052-2081. doi:10.1111/jgs.18372

Delaney, K. (2005). The psychiatric nurse practitioner 1993-2003: A decade that unsettled a specialty. *Archives of Psychiatric Nursing, 19*(3), 107-115.

Delaney, K. R., Robinson, K. M., & Chafetz, L. (2013). Development of integrated mental health care: Critical workforce competencies. *Nursing Outlook, 61*(6), 384-391.

Damkier, P., & Videbech, P. (2018). The safety of second-generation antipsychotics during pregnancy: A clinically focused review. *CNS Drugs*, 1-16. DOI: 10.1007/s40263-018-0517-5

Department of Family and Protective Services. (2016). *Psychotropic medication utilization parameters for children and youth in foster care.* Retrieved from https://www.dfps.state.tx.us/Child_Protection/Medical_Services/documents/reports/2016-03_Psychotropic_Medication_Utilization_Parameters_for_Foster_Children.pdf

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V.,Koss, M. P.l, & Marks, J. S. (1998). Relationship of common abuse and household dysfunction to many of the leading causes of death in adults: The adverse childhood experiences (ACE) study. *American Journal of Preventive Medicine, 14*(4), 245-258.

Grenyer, B. F. S, Ng, F. Y. Y., Townsend, M., & Rao, S. (2017). Personality Disorder: A mental health priority area. *Australian and New Zealand Journal of Psychiatry, 51*(9), 872-875.

LeDoux, J. E., & Pine, D. S. (2016). Using neuroscience to help understand fear and anxiety: A two-system framework. *American Journal of Psychiatry, 173*(11), 1083-1093.

National Institute for Children's Health Quality. (2002). *Vanderbilt assessment scales used for diagnosing ADHD.* Retrieved from https://www.nichq.org/sites/default/files/resource-file/NICHQ_Vanderbilt_Assessment_Scales.pdf

U.S. Department of Health and Human Services. (2001). *Mental health: Culture, race, and ethnicity—a supplement to mental health: A report of the surgeon general.* Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services

Williams, C.L., Newman, D., Marmstål Hammar, L.M. (2018). Preliminary study of a communication intervention for family caregivers and spouses with dementia. *International Journal for Geriatric Psychiatry, 33,* e343-e349. DOI: 10.1002/gps.4816

Witkin, J.M., Knutson, D.E., Rodriquez, G.J., & Shi, S. (2018). Rapid-acting antidepressants. *Current Pharmaceutical Design*, July, EPub. DOI : 10.2174/1381612824666180730104707

COURSE SPECIFIC LITERATURE:

Caring Relationships

Delaney, K. R., Shattell, M., & Johnson, M. E. (2017). Capturing the interpersonal process of psychiatric nurses: A model for engagement. *Archives of Psychiatric Nursing, 31*,634-640.

Goldstein, L. S. (2014). The relational zone: The role of caring relationships in the co-construction of the mind. *American Educational Research Journal, 36,* 647-673.

King, B., Linette, D., Donohue-Smith, M., & Wolf, Z. R. (2019). Relationship between perceived nurse caring and patient satisfaction in patients in a psychiatric acute care setting. *Journal of Psychosocial Nursing and Mental Health Services, 57*(7), 29-38.

King, B. M., & Barry, C. D. (2018). Mutual vulnerability: Creating healing environments that nurture wholeness and well-being. In W. Rosa, S. Horton-Deutsch, & Watson (Eds.) A handbook for caring science: Expanding the paradigm. (pp. 373-384). Springer Publishing.

King, B. M. (2016). Unpacking meaning. *Journal of Art and Aesthetics in Nursing and Health Sciences, 3*(2), 24-26.

King, B., M., & Barry, C. D. (2019). "Caring between" the nurse, the one nursed, and the healthcare robot: An interpreted nursing situation using the Barry, Gordon, King Framework. *International Journal for Human Caring, 23*(2), 168-177.

McCarthy, C. T., & Acquino-Russell, C. (2009), A comparison of two nursing theories in practice: Peplau and Parse. *Nursing Science Quarterly, 22*(1), 34-40.

Peplau, H.E. (1997). Peplau's theory of interpersonal relations. *Nursing Science Quarterly,10*(4):162-7.

Wolf, Z. R., King, B. M., & France, N. E. M. (2015). Antecedent context and structure of communication during a caring moment: Scoping review and analysis. *International Journal for Human Caring, 19*(2), 7- 20.

Zhao Y; Osaka K; Yasuhara Y; King B; Tanioka T. (2019). *The Journal of Medical Investigation: JMI [J Med Invest], ISSN: 1349-6867, 66* (1.2), 15-18; Publisher: University of Tokushima School of Medicine.

Pathophysiology/Diagnosis

Cannabinoids and mental health, Part 1: The endocannabinoid system and exogenous cannabinoids

Law, W. C., McClannahan, R., Weismuller, P. C. (2017). Depression screening in the school setting, Journal of School Nursing, 32(6),

Pharmacology/Prescribing

Andreescu, C. & Varon, D. (2015). New research on anxiety disorders in the elderly and an update on evidence-based treatments. *Current Psychiatry Report, 17*(53), 1-7. DOI 10.1007/s11920-015-0595-8

Caroff, S. N., Yeomans, K., Lenderking, W. R., Cutler, A., Tanner, C. M., Shalhoub, H., Page, V., Chen, j., Franey, E. & Yonan, C. (2020). RE-KINECT: A prospective study of the presence and healthcare burden of tardive dyskinesia in clinical practice settings. *Journal of Clinical Psychopharmacology, 40*, 259-268.

"Drugs to Treat Anxiety Disorders and Obsessive-Compulsive Disorder (OCD)." *Journal of Psychosocial Nursing and Mental Health Services*, 59(5), pp. 7–8.

Fick, Donna M et al. (2019). American Geriatrics Society 2019 updated AGS Beers Criteria® for potentially inappropriate medication use in older adults. *Journal of the American Geriatrics Society,* 67(4), 674–694.

Fixen, R. R. (2019). 2019 AGS Beers Criteria for older adults. *Pharmacy Today*, Nov., 42-54

Goodwin, G. M. et al. (2016). Evidence-based guidelines for treating bipolar disorder: Revised third edition recommendations from the British Association for Psychopharmacology. *Journal of Psychopharmacology, 30*(6), 495-553.

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Approved by CON Faculty Assembly, 9/25/2017; Revised Committee on Programs 10/ 8/2018; Presented for Action to CON Faculty Assembly 10/22/2018, Approved CON Faculty Assembly 10/22/18

COURSE POLICIES & GUIDELINES

The well-being of each student as an expression of successful learning is of great importance to the course professor.

Caring for Self

In this course you will need to be organized, aware of due dates for assignments, and committed to devoting adequate time for successful completion of coursework. Being organized is essential for achieving your goals and integral to caring for yourself.

Collegial Caring

A supportive environment for learning is a caring environment in which all aspects of persons are respected, nurtured, and celebrated. The course is a commitment of active and thoughtful participation in which each one of us is both teacher and learner. A caring community is one in which you nurture each other throughout the semester.

Online Course Participation

This course has an online delivery format and frequent participation in the course is required. Students are expected to check email frequently and participate in all online course activities and assignments. If you are experiencing major illness or other issues that impact your participation in this course, contact the professor immediately to formulate a resolution.

Clinical Practicum

This course is a clinical practicum and hours related to this clinical practicum must be complete during the semester. Documentation utilizing e-Logs are utilized in this course.

Student Credentials

Student credentials must be up to date in order to practice in a clinical setting. The Christine E. Lynn College of Nursing uses Castle Branch system to track all background checks and health requirements. Prior to the start of clinical, the student must be compliant in Complio for their background check and submit a copy of the approved clinical requirement summary sheet to the clinical faculty. The student cannot begin clinical until this is completed. Please contact Colleen Alcantara-Slocombe if you need assistance, email: slocombe@health.fau.edu or Janice Miller janicemiller@health.fau.edu

Beginning of Term Checklist for Students

- Read the preceptor manual. • Complio summary sheet with all areas approved.
- Contact information for clinical site: name of agency, preceptor, address, and phone
- Electronic submission of clinical site information once assignments are made and the Preceptor Credentialing Form is signed (the Preceptor Credentialing/agreement form is now uploaded with the Clinical Arrangement Form).
- Preceptor Agreement Form to be signed by preceptor on the first day of clinical (form will be provided by clinical faculty).
- Preceptor's email for Beginning and End of Term Letters

Documentation of Clinical Hours

Students will be required to use NP Student Clinical Experience Documentation and Tracking System provided by e-Value/e-Logs. The web site is at grad.elogs.org and instructions will be provided on the first day of class. There is no charge to the student for using e-Value/e-Logs. Make sure the supplemental notes that you include: medication and dosage. All clinical hours are to be verified by the preceptor. Falsified clinical hours are considered plagiarism.

Assignments

All course assignments must be completed by the due dates on the Course Schedule.

Email and Netiquette

Students are required to use their FAU e-mail and are advised to check it frequently for important course announcements. Communication using web-based tools has created the need for a protocol called "netiquette" that encourages efficient and effective communication while discouraging abuse of email, chat sessions, and discussion boards. Proper grammar and spelling are expected. Avoid all text shorthand messages. A civil and respectful message to faculty and students is required. Visit http://www.albion.com/netiquette/corerules.html for more information. No exceptions are permitted. Policy for Late Assignments If you are experiencing some unusual situation, you must contact the professor before the due date of an assignment. Otherwise, all assignments must be submitted by the due date.

Academic Integrity

Student work is done independently or in groups if assigned in that manner. Sharing course work or assignments with other students is a breach of academic integrity. Plagiarizing will result in an automatic "0" for all papers, exams, and assignments. Plagiarism includes definitions in the university handbooks and the APA 6th edition manual (this includes turning in work that belongs to someone else, working on assignments that are not group work in groups and turning this in as individual work, and turning in the same work/assignment in more than one course).

Changes in Course Format or Schedule

At times it may be necessary to change the course schedule. The professor can make these changes for the benefit of student learning.

COLLEGE OF NURSING POLICIES

The faculty reserves the right to make changes in course content and requirements.

Policies below may be found in:
a). The Christine E. Lynn College of Nursing Graduate Handbook located at:
http://nursing.fau.edu/uploads/docs/439/Graduate%20Student%20Handbook%20%20Rev%20June%202012.pdf
b). Florida Atlantic University's Academic Policies and Regulations
http://www.fau.edu/academic/registrar/FAUcatalog/academics.php and
http://www.fau.edu/regulations

CODE OF ACADEMIC INTEGRITY:
Students at Florida Atlantic University are expected to maintain the highest ethical standards. Academic dishonesty is considered a serious breach of these ethical standards, because it interferes with the university mission to provide a high quality education in which no student enjoys an unfair advantage over any other. Academic dishonesty is also destructive of the university community, which is grounded in a system of mutual trust and places high value on personal integrity and individual responsibility. Harsh penalties are associated with academic dishonesty. For more information, see University Regulation 4.001. If your college has particular policies relating to cheating and plagiarism, state so here or provide a link to the full policy—but be sure the college policy does not conflict with the University Regulation. For more information, see: http://www.fau.edu/ctl/AcademicIntegrity.php
CON Academic Integrity: http://nursing.fau.edu/academics/student-resources/graduate/policiesregulations/academic-integrity-policy.php

The College of Nursing regards adherence to the Code of Academic Integrity as a professional competency and an expectation of all students. **ANY** act of dishonesty that violates the code of academic integrity and misrepresents your efforts or ability is grounds for immediate failure of the course.

DISABILITY STATEMENT:
In compliance with the Americans with Disabilities Act Amendments Act (ADAAA), students who require reasonable accommodations due to a disability to properly execute coursework must register with Student Accessibility Services (SAS) and follow all SAS procedures. SAS has offices across three of FAU's campuses – Boca Raton, Davie and Jupiter – however disability services are available for students on all campuses. For more information, please visit the SAS website at http://www.fau.edu/sas/
To apply for SAS accommodations: http://www.fau.edu/sas/

COUNSELING AND PSYCHOLOGICAL SERVICES (CAPS) CENTER

Life as a university student can be challenging physically, mentally and emotionally. Students who find stress negatively affecting their ability to achieve academic or personal goals may wish to consider utilizing FAU's Counseling and Psychological Services (CAPS) Center. CAPS provides FAU students a range of services – individual counseling, support meetings, and psychiatric services, to name a few – offered to help improve and maintain emotional well-being. For more information, go to http://www.fau.edu/counseling/

INCOMPLETE POLICY:
The Incomplete Grade Policy is enforced. A student who registers for a course but fails to complete the course requirements, without dropping the course, will normally receive a grade of "F" from the course instructor. A student who is passing a course but has not completed all the required work because of exceptional circumstances may, with the approval of the instructor, temporarily receive a grade of "I" (incomplete). This must be changed to a grade other than "I" within a specified time frame, not to exceed one calendar year from the end of the semester during which the course was taken.

ATTENDANCE POLICY:
Students are expected to attend all of their scheduled University classes and to satisfy all academic objectives as outlined by the instructor. The effect of absences upon grades is determined by the instructor, and the University reserves the right to deal at any time with individual cases of non-attendance. Students are responsible for arranging to make up work missed because of legitimate class absence, such as illness, family emergencies, military obligation, court-imposed legal obligations or participation in University approved activities. Examples of University-approved reasons for absences include participating on an athletic or scholastic team, musical and theatrical performances and debate activities. It is the student's responsibility to give the instructor notice prior to any anticipated absences and within a reasonable amount of time after an unanticipated absence, ordinarily by the next scheduled class meeting. Instructors must allow each student who is absent for a University-approved reason the opportunity to make up work missed without any reduction in the student's final course grade as a direct result of such absence.

RELIGIOUS ACCOMMODATION:
In accordance with rules of the Florida Board of Education and Florida law, students have the right to reasonable accommodations from the University in order to observe religious practices and beliefs with regard to admissions, registration, class attendance, and the scheduling of examinations and work assignments. Students who wish to be excused from coursework, class activities, or examinations must notify the instructor in advance of their intention to participate in religious observation and request an excused absence. The instructor will provide a reasonable opportunity to make up such excused absences. Any student who feels aggrieved regarding religious accommodations may present a grievance to the director of Equal Opportunity Programs. Any such grievances will follow Florida Atlantic University's established grievance procedure regarding alleged discrimination. For more information, see:
https://www.fau.edu/provost/resources/files/religiousaccommodations-students-and-faculty-8-21-15.pdf
CON Religious Accommodation: http://www.fau.edu/sas/New.php

USE OF STUDENT COURSE MATERIAL

The Christine E. Lynn College of Nursing may use students' course-related materials for legitimate institutional purposes, such as accreditation, university review process, or state board of nursing review process, etc. In such cases, materials will be used within the college and university.

COURSE SCHEDULE

Date	Topics	Assignments	Due Dates
Week 1	Clinical Supervision	Preceptor Forms Castle Branch	Forms: Meeting Time: TBD
Week 2	Clinical Supervision	e-Value/Elog Documentation	
Week 3	Clinical Supervision	e-Value/Elog Documentation	Meeting Time: TBD
Week 4	Clinical Supervision	e-Value/Elog Documentation Reflective Journal #1	Date: TBD
Week 5	Clinical Supervision	e-Value/Elog Documentation	Meeting Time: TBD
Week 6	Clinical Supervision	e-Value/Elog Documentation Mid-term Evaluation: Preceptor & Faculty	Mid-term Evaluation TBD
Week 7	Clinical Supervision	e-Value/Elog Documentation	Meeting Time: TBD
Week 8	Clinical Supervision	e-Value/Elog Documentation Medication Evaluation	
Week 9	Clinical Supervision	e-Value/Elog Documentation	Meeting Time: TBD
Week 10	Clinical Supervision	e-Value/Elog Documentation Reflective Journal#2	Date: TBD
Week 11	Clinical Supervision	e-Value/Elog Documentation Psychiatric Evaluation	Meeting Time: TBD
Week 12	Clinical Supervision	e-Value/Elog Documentation Final Evaluation: Preceptor, Student, Faculty	Final Evaluation TBD
Holidays:			

PROFESSIONAL STATEMENT
http://nursing.fau.edu/academics/student-resources/undergraduate/policies-regulations/professional-statement.php

When students of nursing begin their course of study, they enter into an implied professional agreement-agreeing to abide by the American Nurses Association (ANA) Code of Nursing Ethics and to conduct themselves in all aspects of their lives in a manner becoming a professional nurse. The College of Nursing faculty holds a professional ethic of caring and healing, recognizing that each person's environment includes everything that surrounds an individual. Similarly, the College creates an environment that preserves the wholeness and dignity of self and others. The faculty requires self and socially responsible behavior and will not accept actions that can be perceived as hostile, threatening or unsafe to others. It is the College's expectation that students promote a positive public image of nursing. It is the College's goal, as a professional college, to build an expanding community of nursing scholars and leaders within the context of its' caring-based philosophy. Safety of the person being nursed and accountability for individual actions are priorities and/or critical components/elements of a professional nursing education. Students who do not abide by this policy will be subject to appropriate academic sanctions which may include disciplinary action, dismissal from the College of Nursing, and/or suspension or expulsion from the University.

Approved in Faculty Assembly 11/28/2016

FAU
FLORIDA ATLANTIC UNIVERSITY

CHRISTINE E. LYNN COLLEGE OF NURSING

STATEMENT OF PHILOSOPHY

Nursing is a discipline of knowledge and professional practice grounded in caring. Nursing makes a unique contribution to society by nurturing the wholeness of persons and environment in caring. Caring in nursing is an intentional mutual human process in which the nurse artistically responds with authentic presence to calls from persons to enhance well-being. Nursing occurs in nursing situations: co-created lived experiences in which the caring between nurses and persons enhance well-being. Nursing is both science and art. Nursing science is the evolving body of distinctive nursing knowledge developed through

systematic inquiry and research. The art of nursing is the creative use of nursing knowledge in practice. Knowledge development and practice in nursing require the complex integration of multiple patters of knowing. Nurses collaborate and lead interprofessional research and practice to support the health and well-being of persons inextricably connected within a diverse global society.

Persons as participant in the co-created nursing situation, refers to individual, families or communities. Person is unique and irreducible, dynamically interconnected with others and the environment in caring relationships. The nature of being human is to be caring. Humans choose values that give meaning to living and enhance well-being. Well-being is creating and living the meaning of life. Persons are nurtured in their wholeness and well-being through caring relationships.

Beliefs about learning and environments that foster learning are grounded in our view of person, the nature of nursing and nursing knowledge and the mission of the University. Learning involves the lifelong creation of understanding through the integration of knowledge within a context of value and meaning. A supportive environment for learning is a caring environment. A caring environment is one in which all aspects of the person are respected, nurtured and celebrated. The learning environment supports faculty-student relationships that honor and value the contributions of all and the shared learning and growth.

The above fundamental beliefs concerning Nursing, Person and Learning express our values and guides the actions of Faculty as they pursue the missions of teaching, research/scholarship and service shared by the Christine E. Lynn College of Nursing and Florida Atlantic University.

'revised April, 2012.'