Michigan State University  
College of Nursing  
NUR 807: Clinical Decision Making  
Spring Semester 2006

Course Faculty and Contact Information

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Faculty and Clinical Placements Secretary

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Contacting Faculty and Office Hours

For questions at any time about the online portion of the course, please contact Celia. Contact Brigid for any questions pertaining to the clinical portion of the course prior to January 9, 2006. For questions about clinical after January 9th, contact your assigned clinical faculty member.

Office hours with the course faculty are arranged via email appointment. Please do not leave telephone messages on our office telephones, as these messages may not be received by us in a timely fashion. Unless arranged otherwise with a specific faculty member, please plan to use the Angel course email system to communicate with the faculty about other course-related issues.

Julie Stoner, BA, is the College of Nursing Clinical Placements Secretary. She works with each clinical faculty member to set up clinical placements for your clinical practice hours. You may contact her as needed via telephone or email.

University Course Description

- **Semester**: Spring of every year
- **Credits**: 2 credit online seminar; 1 credit laboratory (clinical) component
- **Restrictions**: Open only to master’s students in the College of Nursing
- **Description**: Clinical decision-making in advance practice nursing. Decision theory and related concepts. Application of critical thinking and clinical judgment to differential diagnoses of common primary care conditions. NUR 807 is a hybrid course that blends regularly scheduled online instruction with regularly scheduled classroom time or required or scheduled in-person contact, including exams, labs, etc.

Course Overview

NUR 807 is viewed as a “bridge” course between the MSN core courses taken thus far and the clinical management courses that will be taken following NUR 807. The learning experiences in NUR 807 are intended to foster movement from a focus on gaining theoretical knowledge to the next steps in developing the advanced clinical practice role. To achieve this aim, NUR 807 is offered in a hybrid (blended) format that includes online and in-person instructional components. The theoretical portion of the course is offered primarily online and focuses on the concepts of clinical judgment/decision making that are needed by advanced practice nurses (APNs) as a basis for making sound clinical decisions. The clinical portion of the course has both online and in-person instructional experiences and will involve application of the key course concepts to often-encountered situations in APN clinical practice. There will be clinical hours for this course which provide practice in clinical data gathering skills, diagnostic reasoning, and clinical problem solving.
Course Objectives

- Apply decision theory to formulate differential diagnoses.
- Analyze the concept of clinical diagnoses in primary care.
- Analyze relevant clinical subjective and objective cues to explain clinical diagnoses.
- Develop appropriate differential diagnoses for the common primary care conditions.
- Analyze the implications of diagnostic decisions relative to cost and efficacy within the contemporary health care delivery system.
- Document a HPI by using the problem-oriented record (POR).

Required Materials

- Dains, J.E., Baumann, L.C., & Scheibel, P. (2003). *Advanced health assessment and clinical diagnosis in primary care (2nd ed.).* St. Louis: Mosby. Dains will be used for the clinical/lab component of the course. You will find it very helpful this semester and for future clinical courses.
- Online articles to be downloaded/viewed by the student via the MSU Library (see Appendix B for a list of articles). Required readings will usually be assigned for each week’s online seminar content and for the clinical portion of the course.
- A variety of online information sources will be used to supplement the textbook and articles that are used in the course. Links for public-access sources will be provided in the course web site in each week’s Lessons folder.
- During clinical conference sessions and in weekly clinical case discussions, the clinical faculty and class members may suggest additional readings, review of key web sites, etc. Often the faculty/class suggestions will come on the basis of “hot news” items that come up during the course and/or clinical experiences.
Evaluation of Academic Performance

- **Midterm exam** – 25% of course grade, graded by Celia and the clinical faculty. This will be given in a proctored format on campus on Thursday, February 23, 2006. The 2-hour short answer/discussion format exam will be based on a selected realistic clinical case scenario that is commonly encountered in APN practice. The exam questions will focus on application of the key theoretical concepts covered thus far in the course. Celia grades questions related to theoretical concepts. The clinical faculty grade questions related to differential diagnosis, physical exam planning, and test ordering. **A test score of at least 80% must be attained on the midterm exam in order for the student to begin the NUR 807 precepted clinical practice hours.** The midterm exam (for grade < 80%) may be retaken once.

- **Online clinical activities** – 25% of course grade, graded by the clinical faculty. Key activities include but are not limited to: weekly online discussion of clinical cases, practicing clinical write-ups of various sorts, practicing HPI/POR documentation, and peer review activities as assigned by the clinical faculty. These activities are geared to provide practice in the application of the key theoretical concepts covered in the online seminar portion of the course. The clinical faculty will provide feedback on paperwork that is submitted by students for this portion of the course. Of the 25% for the online clinical activities component of the course grade, 10% of the grade is based on participation in the weekly online Clinical Discussion Forum (see Appendix C for detailed guidelines), and 15% of the grade is based on turning in completed assignments as required. **Zero credit will be given for late postings in the Clinical Discussion Forum or for required paperwork that is submitted late or not submitted as required to the clinical faculty.** The clinical faculty reserve the discretion to require revision of paperwork that is submitted and/or to make additional assignments as needed in order to foster individual student mastery of key course concepts.

- **Screening test analysis paper** – 25% of course grade, graded by Celia. Each student will select a screening test to analyze that is commonly used in APN practice. See Appendix D of this syllabus for additional details. **Zero credit will be given for papers that are submitted late or not submitted online as required.**

- **Laboratory-based clinical simulation practice hours and precepted clinical practice hours** – 25% of course grade, graded on a pass-fail basis by the clinical faculty. See Appendix E for Clinical Experiences Guidelines. Thirteen (13) hours of laboratory-based clinical simulation practice hours are required, as well as 32 precepted clinical hours in a selected practice setting to be arranged with the clinical faculty (total of 45 clinical hours) during the second half of the semester. The pass-fail grading takes into account the online presentation of a selected clinical case by the student during the second half of the semester, input about student clinical performance obtained from the clinical preceptor, and the quality and timely submission to the clinical faculty of required write-ups for patients seen in clinical practice. **All clinical hours must be completed by the end of the semester in order to receive a grade for NUR 807. Zero credit will be given for required paperwork that is submitted late or not submitted as required to the clinical faculty.** The clinical faculty reserve the discretion to require revision of paperwork that is submitted and/or to make additional assignments as needed in order to foster individual student mastery of key course concepts.
Course Grading Scale

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<thead>
<tr>
<th>Grade on University Grading Scale</th>
<th>Percentage Score Range</th>
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<tbody>
<tr>
<td>4.0</td>
<td>93-100%</td>
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<tr>
<td>3.5</td>
<td>86-92%</td>
</tr>
<tr>
<td>3.0</td>
<td>80-85%</td>
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<tr>
<td>2.5</td>
<td>75-79%</td>
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<tr>
<td>2.0</td>
<td>70-74%</td>
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<tr>
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<td>1.0</td>
<td>60-64%</td>
</tr>
<tr>
<td>0.0</td>
<td>&lt; 60%</td>
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Specific grading responsibilities of the faculty are described in the Evaluation of Academic Performance section of this syllabus. Celia is responsible for computing and submitting NUR 807 course grades to the University Registrar’s Office. At the end of the semester when grading is completed, the clinical faculty will provide Celia with a grade for the Online Clinical Activities portion of the grade, as well as the pass-fail information for the clinical practice hours portion of the grade. Course grades for Spring 2006 are due to the Registrar’s Office by Tuesday, May 9, 2006. Please do not contact the course faculty for information about course grades prior to May 9, 2006 as this can significantly slow down the process of calculating and submitting course grades. Individual students are usually able to view their course grades online via the MSU STUINFO web site by approximately 48 hours following the due date for grades submission; e.g., course grades will be viewable online by approximately May 11, 2006.

Attendance/Participation Policy

Unless otherwise negotiated with the course faculty member, weekly online discussion contributions and other course assignments are expected to be posted/turned in by the pre-established due dates/times. Exceptions for the midterm exam, clinical practice hours, and other assignments due dates/times are typically made only for emergency situations. Assignments submitted late without prior approval of the faculty will receive zero credit. Individual special needs for NUR 807 must be discussed with the course faculty by no later than the end of the first week of classes, Friday, January 13, 2006.

Academic Integrity Policy

Assignments submitted for a grade are expected to be fully the work of individual students. Breaches of academic integrity standards (such as unauthorized collaboration with others on course assignments or the midterm exam) will result in zero credit for the affected assignments. Refer also to College of Nursing policies included in the MSN Student Handbook.

Course Calendar

See Appendix A of this syllabus.
Where to Look for Course Materials

The NUR 807 course web site is located on the MSU Angel platform. To access the course web site, go to the MSU Angel home page and type in your MSU NetID (part that appears before the “@msu.edu” portion of your email address) and your password. If you are registered for the course, you will see a link for the course web site on your personal home page that opens after you’ve entered your MSU address and password. If you experience any difficulties viewing the link to the NUR 807 web site on your personal home page in Angel, contact Jennifer Dunham-Kallos, Administrative Staff Assistant for Academic Affairs, at 517.432.1172. **All other technical problems with use of Angel should be referred to the Angel Help Desk.** The toll free Angel Help Line number is 1.800.500.1554 (North American and Hawaii), and the local campus area number is 517.355.2345.

When to Look for Course Materials

Thursdays are considered the “first” day of the week for course purposes. The weekend is positioned in approximately the middle of a given week of the course--this format is intended to provide weekend time during the “middle” of the course week for work on course activities as desired. The first day of NUR 807 is Thursday, January 12, 2006. The course web site will be accessible starting at 7 am on the first day of MSU spring semester classes, which is Monday, January 9, 2006. You will be able to access the Week #1 and Week #2 Lessons folders starting on January 9th. If possible please review the course syllabus and Week #1 folder contents by Thursday, January 12th, so that you are prepared to ask any questions as needed before starting the course.

By Friday evening each week you will be able to view the contents for the prior weeks, the current week, and the next week of NUR 807 class. For example, NUR 807 Week #1 (January 12-18, 2006) and Week #2 (January 19-25, 2006) folders will be accessible to you on Thursday, January 12th. On Thursday, January 19th, you will be able to view the NUR 807 Weeks #1-#3 folders. On Thursday, January 26th, you will be able to view the NUR 807 Weeks #1-#4 folders, and so forth.

NUR 807 Angel Course Web Site Structure

The **Start Here** folder at the top of the Lessons page is where you should start your review of the course web site. The Start Here folder contains two items. The first item is the course syllabus. You should review the course syllabus before going further in your review of the web site. The second item in the Start Here folder is a subfolder with faculty self-introductions, with a bit more information about us in addition to what you can view by clicking on our Faculty Profile links on p. 1 of this syllabus.

**Tip!** General course and clinical section announcements usually will be sent out via the MSU Angel email system from within the NUR 807 web site. It is recommended that you do not delete announcements from your Angel email account in case you need to refer back to them later on. The course faculty may post additional materials and announcements in the course web site at any time. If new materials are posted this will be announced via a group email message in the Angel course email system. To avoid missing important information it is very important that you check the course web site and your Angel course email at least several times a week.
There will be **Lessons** folders for each week of the course on the Lessons page of the NUR 807 Angel web site. Each week’s Lessons folder is labeled as, “Week #1,” “Week #2,” etc. The key content that will be the focus of each week is highlighted just below each week’s folder.

Within each week’s folder (see illustration for Week #4 below), there will usually be four key folders that are entitled: Week #__ Reading, Week #__ Online Seminar Materials, Week #__ Clinical Activities, and Week #__ Clinical Discussion Forum (see below for Week #4). The folders are arranged (from top to bottom) in the order that you will be accessing them to do your course work for the week.

### Week #4
Epidemiology Concepts, Screening/Diagnostic Test Characteristics (February 2-8, 2006)

The **Reading** folder contains assigned (required) readings assignments. Start your course work for a given week by doing the required readings. For most weeks there will be assigned readings to do for the online seminar and clinical portions of the course. Online articles that are available via the MSU Library are expected to downloaded by students via the MSU Libraries online journals web site (see list of articles in Appendix B). Due to copyright law restrictions and technical reasons, copies of articles cannot be posted and stable direct links to articles cannot be accommodated within the course web site. Links for public-access online sources will be provided in the course web site in each week’s Lessons folder. Students are expected to contact the Angel Help Desk for any difficulties with accessing assigned readings or other links to materials that are posted in the Angel web site.

**Tip!** Students in prior semesters have found it very helpful to download copies of all articles near the beginning of the semester to the computer used for accessing Angel courses. This prevents possible delays in accessing articles later on related to any unforeseeable University computer server problems, and so forth.

Prior to the midterm exam, the **Online Seminar Materials** folder usually contains a text/audio Macromedia Breeze™ presentation by Celia on the week’s key theoretical content. For some weeks there may be additional materials for review posted in this folder. Review the lecture for the week after you’ve done your initial review of the required readings. Then you may find it useful to go back to the online seminar content for a review.

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1 Macromedia Breeze™ is a tool for preparing slide presentations that have an audio component. Clicking on the link for the presentation automatically starts the presentation. You can pause the slide show at any time as needed, and also can replay and print any slides as desired. Slide shows in the Angel web site are copyright protected per MSU policy (see Angel Home Page for additional information) and may be used only for personal use for academic purposes by students who are enrolled for credit in NUR 807. For any technical difficulties with accessing Breeze™ presentations please contact the Angel Help Desk for assistance.
and review the readings again following your review of the lecture. The goal of this content is to provide a sound theoretical base of decision-making knowledge and skills. The key concepts will be applied weekly via discussion of clinical case studies (see Clinical Discussion Forum information below).

The **Clinical Activities** folder contains clinical cases for discussion and some other activities that will vary by the week of the course. Each week there will be a “main” clinical case that serves as the focus of the Clinical Discussion Forum class discussion. This folder also contains information about other activities, such required assignments to turn in for clinical, web sites and suggested readings that you may want to review, etc. Do the activities for the clinical portion of the course after you’ve done the readings for the week and have reviewed the online seminar materials content.

The **Clinical Discussion Forum** is where the online discussion of each week’s “main” clinical case will take place. You should join the discussion after you’ve done the readings for the week, reviewed the online seminar content, and reviewed the clinical case that will be the focus of discussion. During the second half of the semester each student will be expected to present a clinical case based on a patient seen in clinical. **Weekly participation in online clinical discussions is required.** See Appendix C of this syllabus for detailed guidelines on clinical case discussions.

**Tip!** Start your work for a given week of NUR 807 as early as possible in the week. You will be able to look ahead to the next week’s materials each week, so it’s a good idea to read ahead/review the upcoming week’s materials as soon as you can. Ideally you should be a week ahead on reviewing course materials, so that you do not fall behind in your coursework in the event of unforeseen events such as illness, computer problems, etc.

Over the many years that NUR 807 has been taught, the faculty and students have compiled a variety of resources for additional information about course topics. These resources are available in the **Resources** folder that is located at the bottom of the main Lessons page in the Angel course web site. Examples of materials that are available in the Resources folder include links to useful web sites, clinical practice guidelines and decision rules, additional readings, links to software downloads for use on PDAs, and so forth.
### Appendix A
#### Course Calendar

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<thead>
<tr>
<th>Week of the Course</th>
<th>Course Activities, Due Dates, and Other Reminders</th>
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</table>
| **Week #1**        | • January 9\(^{th}\) - MSU classes begin. NUR 807 web site opens at 7 am.  
                     • January 12\(^{th}\) – start NUR 807 Week #1  
                     • **January 13\(^{th}\) – deadline to inform faculty of any special needs**  
                     • January 16\(^{th}\) – Martin Luther King Day (University open; no classes)  
                     • January 18\(^{th}\) – Week #1 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #2**        | • January 19\(^{th}\) – start NUR 807 Week #2  
                     • January 25\(^{th}\) – Week #2 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #3**        | • January 26\(^{th}\) – start NUR 807 Week #3  
                     • February 1\(^{st}\) - Week #3 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #4**        | • February 2\(^{nd}\) – start NUR 807 Week #4  
                     • **February 3\(^{rd}\) – End of tuition refund period for Spring 2006**  
                     • February 8\(^{th}\) – Week #4 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #5**        | • February 9\(^{th}\) – start NUR 807 Week #5  
                     • February 15\(^{th}\) - Week #5 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #6**        | • February 16\(^{th}\) – start NUR 807 Week #6  
                     • February 22\(^{nd}\) - Week #6 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today  
                     • **February 23\(^{rd}\)-24\(^{th}\): On campus midterm exam/clinical sim hours** |
| **Week #7**        | • February 23\(^{rd}\) – start NUR 807 Week #7  
                     • **March 1\(^{st}\) – 5 pm deadline to email Celia will screening test paper topic.** Week #7 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
|                    | • **Spring Break week, March 6-12\(^{th}\)** |
| **Week #8**        | • March 2\(^{nd}\) – start NUR 807 Week #8  
                     • March 15\(^{th}\) - Week #8 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #9**        | • March 16\(^{th}\) – start NUR 807 Week #9  
                     • March 22\(^{nd}\) - Week #9 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| **Week #10**       | • March 23\(^{rd}\) – start NUR 807 Week #10  
                     • March 29\(^{th}\) - Week #10 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
<table>
<thead>
<tr>
<th>Week of the Course</th>
<th>Course Activities, Due Dates, and Other Reminders</th>
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</thead>
</table>
| Week #11           | • March 30\textsuperscript{th} – start NUR 807 Week #11  
                      • April 5\textsuperscript{th} - Week #11 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| Week #12           | • April 6\textsuperscript{th} – start NUR 807 Week #12  
                      • April 12\textsuperscript{th} – Week #12 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| Week #13           | • April 13\textsuperscript{th} – start NUR 807 Week #13  
                      • April 19\textsuperscript{th} – Week #8 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today |
| Week #14           | • April 20\textsuperscript{th} – start NUR 807 Week #14  
                      • April 26\textsuperscript{th} - Screening test papers should be uploaded to the course paper drop box by no later than 5 pm today. Week #8 online discussion comments and other clinical assignments (as relevant) are due by no later 5 pm today.  
                      • April 27\textsuperscript{th} – On campus student paper presentations and clinical evaluation sessions  
                      • April 28\textsuperscript{th} – last day of Spring 2006 MSU classes  
                      • May 1\textsuperscript{st}-5\textsuperscript{th}: MSU Spring 2006 final exam week  
                      • May 9\textsuperscript{th} – NUR 807 course web site closes at 5 pm |
Appendix B
Required Online Articles

This is a list of journal articles that are available online via the MSU Libraries online journals web site. Students are expected to use the MSU Library web site to download articles. Due to copyright law restrictions and technical reasons copies of articles cannot be posted within the course web site and stable direct links to articles cannot be accommodated within the course web site. Students are expected to contact the Angel Help Desk for any difficulties with accessing assigned readings or other materials posted in the Angel web site. All technical questions including questions about accessing online articles via the library should be referred to the MSU Angel Help Desk at 1.800.500.1554 (toll free line for North America and Hawaii) or 517.355.2345 (local area phone number). For off campus access to article, you must configure your computer to use the MSU Proxy server (see http://www.lib.msu.edu/proxy/). If you do not configure your computer to use the MSU Proxy server to access articles, often a web page will display on your computer which asks for your password information and/or requests a fee to view/purchase the article. You must also have a current version of Adobe Acrobat reader software (Version 6.0 or higher) on the computer you’re using for viewing *.pdf files (this free software can be downloaded free of charge at www.adobe.com).

<table>
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<tr>
<th>Online Articles</th>
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2 The course faculty may assign additional online readings at any time during the semester. Please review your NUR 807 Angel course email regularly for any updates to the assigned readings. In addition to the articles listed here, there will be assignments to review web sites, sections of the Dains and Moyet-Carpenito textbooks, and other materials.
Appendix C  
Online Clinical Case Discussion Guidelines

Each week there will be a clinical case for discussion by the class via the online Clinical Discussion Forum. Threads for the discussion already will be started in each week’s Clinical Discussion forum. The clinical case for a given week also will be posted as a separate document in the web site so that you can download/print it out as desired.

**Part I – Online discussion preparation and participation:** Prior to participating in the discussion you should (on your own) draft some initial responses to the focus questions for the clinical case for the week. You should also do the assigned reading in the textbook(s), read any assigned articles and other information we’ve posted for you in the Lessons folder for that week, and review the Breeze™ presentation in the Online Seminar Materials folder before posting commentary about the clinical case. This means that you will need to start your review of the week’s content early in the week, and (ideally) be working ahead by about a week in your review of online materials. After these steps are done, then post some of your initial ideas in the Clinical Discussion Forum, in a way that is informed by what others have already posted (see additional information below). Try to visit the discussion at least several times during the week to see what others are posting/view their responses to your ideas.

**Part II – After discussion, submit your individual answers to the case via the drop box:** By the end of the week (Wednesdays, by 5 pm; see Course Calendar in Appendix A) you will be expected to upload your typewritten individual responses to the clinical case for that week to the drop box that will be located below the link for the Clinical Discussion Forum message board. Your individual answers should take into account what has been discussed by the group about the case thus far, but should reflect your own work/formulation of a response for questions related to the case. Credit is given for turning in the completed case. The reason for turning in your own write-up of the case is for you to gain individual experience with clinical documentation at the advanced level of clinical practice. The clinical faculty will also review your responses for accuracy and appropriateness of clinical documentation. The clinical faculty reserve the discretion to require revision of paperwork that is submitted and/or to make additional assignments as needed in order to foster individual student mastery of key course concepts.

**Tip!** Consider downloading the clinical case document to your computer, opening it in your word processor to type in your answers to the questions, saving the completed document on your computer, and then uploading it to the clinical case drop box in Angel. MS Word format documents are readable on faculty computers. If you are using a different type of word processing program (such as Wordperfect), saving the file you prepare in Text (*.txt), Rich Text Format (*.rtf), or hypertext mark up format (*.html) will also produce a document that is readable on faculty computers. Contact the Angel Help Desk as needed for assistance with saving and uploading files.

**Faculty input for the online Clinical Discussion Forum:** Throughout each week's discussion, faculty will follow your conversations closely on a daily basis (Monday-Friday), and will contribute to the discussion from time to time, to assist in your learning. From time to time, faculty will post impromptu comments or questions in the Clinical Discussion Forum whenever it seems useful to do so for discussion purposes. Most often, we post something in the class discussion once every other day or so during the week. If you would like the course faculty to be sure to address a question you have as
part of that week’s discussion, you should address your question to the faculty member by name; e.g., “Celia (or Brigid, or Denise, or Kate, or Pam), could you comment on...”

In general we will try to respond to specific questions in the online Clinical Discussion Forum by within 48 hours of when questions are posted. Celia is generally online Monday-Friday and responds to questions online in the morning and late afternoon. The clinical faculty will notify you of their schedules for clinical practice activities and any other special scheduling plans for participation in the online Clinical Discussion Forum. Clinical faculty are usually unable to respond to questions during the times they at their clinical practice sites providing care for patients. The course faculty will usually not be online during evening or weekend hours.

Keep in mind that the online case discussions are supposed to simulate a “back and forth” conversation between a group of people, in which everyone has a turn to talk, and the talk should be balanced in terms of how much each person contributes. Think about how you would interact with others at a social event, or in an in-person classroom setting. With in-person interactions, people take turns exchanging relatively brief statements about a topic of interest. Thoughtful dialog that is balanced regarding individual contributions, and in which people carefully listen to each other, increases the likelihood that both individual and group-level understanding of the course content will be enhanced. This type of dialog also conveys respect for the contributions of classmates, which fosters openness in sharing of ideas/insights among class participants.

With these overall thoughts about group discussion in mind, here are some more specific thoughts about things that are helpful/less helpful during weekly online discussions:

- **Always post your responses as a “reply” within the question/thread of conversation you are addressing.** Posting a “new” post to the Clinical Discussion Forum itself, instead of an individual question/response within it, results in “extraneous” posts that are missed by others or result in confusion about what question/response is being addressed.

- **Avoid posting “comprehensive” answers to each of the questions in a single session.** Comprehensive postings are analogous to dominating an in-person conversation in a classroom, and tend to “shut down” the conversation and frustrate colleagues, because others entering the discussion afterwards feel that everything has “already been said.” As a general guideline, any one posting should usually be no more than a brief 3-5 sentences paragraph, addressing only an aspect or two of the ongoing conversation. Some of the better discussions have involved people posting just a sentence or two in response to classmates, but carrying on a dialog back and forth with each other online for an hour or so.

- **Be aware of communication challenges that are somewhat unique to online learning formats, and treat others as you would like to be treated.** Message board approaches such as the Clinical Discussion Forum do have some unique challenges in regard to adequacy of communication. One of the most common issues is that rapid back-and-forth discussion does not occur as it does in an in-person interaction. Thus, more time is needed for typing in, reviewing, and responding to comments. A second issue is that there is a substantially greater potential for people to misunderstand each other’s intentions, when they are communicating without the benefit of visual and auditory cues to the feelings of others. For example, writing
in ALL CAPS or with many !!!!!!s can appear to others that they are being “shouted at,” even if that is not at all what the communicator intended. Also, comments that are intended to be humorous or playful can often be interpreted as personal attacks (online “flaming”). Individual conflicts are best handled in a non-public forum (the Clinical Discussion Forum is a very, very public forum, which may quickly turn a minor conflict into something more major). We also emphasize that the Clinical Discussion Forum is not to used as a “complaint board” to address personal questions, concerns, frustrations, etc. to the faculty (please use our individual email addresses for those kinds of issues). The overall key point about communication in the web site is that each person should take good care to think carefully about how others will perceive what is (or isn’t) intended in a Clinical Discussion Forum posting--and then exercise prudent discretion on that basis. Think about how you would like to be treated by others, and then treat others as you yourself would like to be treated.

- **The Clinical Discussion Forum is “owned” by the student class members.** Sometimes the faculty will post more comprehensive comments (a “mini lecture” of sorts), related to clarifying the course content, and also with the goal of fostering the discussion/raising additional questions about the course content. During the weeks that more challenging content is presented, the faculty will tend to be more active in the online discussions throughout the week. But in general the faculty are also quite mindful of not participating too much at any one time, so that everyone in the class has the opportunity to make a contribution to the discussion. The Clinical Discussion Forum is intended to be for the benefit of class (not faculty) discussions.

- **Quality and timeliness of participation are important.** It’s important that each class member participates enough in the discussion, at a level that fosters both individual learning, as well as helping the learning of others. It’s helpful to review the discussion postings at least several times throughout the week, and to contribute perhaps two or three brief postings over the course of the week, related to the ongoing discussion. For example, repeatedly posting last-minute discussion comments on Wednesday afternoons that repeat the discussion posted earlier or that include statements such as, “I agree, and don’t really have anything else to add to the discussion,” or, “Sorry, I’m always coming in late, and I’m late again this week,” may result in the loss of discussion participation points. It is not unusual that a subset of the class ends up routinely being the first into the Clinical Discussion Forum each week. We would like to ask each person to make a mindful effort to be early into the Clinical Discussion Forum, at least some of the time. If everyone makes an effort this way, no one person should feel that they are carrying the load each week, of getting the discussion started. There is also risk of losing participation credit for routinely being late in the week to post comments in the discussion.

- **The clinical faculty will take into account both the quantity and quality of your Clinical Discussion Forum contributions, in determining course grades.** Although the 10% allocated in the grade for weekly discussion participation is a small portion of the overall course grade, often the Clinical Discussion Forum participation credit can “tip” a course grade for better or worse. Needless to say, it’s relatively easy to gain the full credit for participation by being sure that you have posted some commentary each week of the course.

- **Your postings should reflect that you have reviewed what others have mentioned already.** When you first enter the web site, along with reading any announcements in your Angel course
email that you may not yet have read, you should also review the Clinical Discussion Forum postings for that week, to see what new comments have been entered since you were last in the course web site. When we note that your postings should reflect that you’ve reviewed what others have already mentioned, this doesn’t mean repeating what various others have said, or simply indicating that you “agree” with what others have posted. Instead, what you post should reflect you that you have read and thought about the contributions of others who have posted before you. This means that most of your “communication time” in this course will be spent reading what others have written, versus a much smaller amount of time spent posting your commentary in the web site. For example, suppose that there has been discussion of a confusing concept, which a classmate has helpfully clarified in the discussion. Postings done after this point should reflect an overall knowledge of the group progress, which is also evidence that you have been following the group conversation; e.g., a new posting might thank a colleague for clarifying a difficult concept, or extend the discussion. For example, the new posting might start with something of the form, “The last two postings really cleared up the distinction between sensitivity and specificity. But I’m still not fully clear on the difference between positive and negative predictive values. Can anyone provide some thoughts here about how to tell these two concepts apart?”

- **Whenever possible, try to explicitly link your posting content to at least the last several postings that have appeared in the Clinical Discussion Forum.** For example, suppose that several people have agreed already that a patient with a hand injury from playing sports is in need of some additional assessment to rule out a fracture. The next person entering the discussion should carry the discussion to the next step/question; e.g., in this example, by posting an idea about what type of assessment might be needed, such as a focused physical exam of the hand, a MRI, X-ray, and so forth. For example, someone might post something of this form, “Well, I agree with so-and-so that we don’t need to do a MRI. Would an X-ray be appropriate to do though? I was thinking that the physical exam might not be enough to tell if there’s a micro-fracture somewhere. Am I on track with this?” If you are the first person to post, you could start by addressing just the first question, the next person might respond to your comments and also post something about the second question, and so forth. If you are relatively late to the discussion, you can also try to expand the discussion by introducing a new question for discussion, or by applying the content to a real life situation in your clinical practice.
Appendix D
Guidelines for Screening Test Analysis Paper

For the analysis paper, you will select a screening test to analyze, which is commonly used for screening purposes in primary care populations. Some resources will be available in the course website for thinking through your choice. Pick a screening test, contact your clinical faculty to discuss your idea to be sure it will be appropriate for the purposes of your paper, and then email your test selection to Celia. Celia will post a regularly-updated list of screening test selections in the course website. Your selection of the test for your paper should be finalized by no later than mid-semester—by 5 pm on March 1st you should email Celia with your screening test topic.

Tip! Start thinking about the topic for your paper early on in the semester. This allows you the leeway to discuss your ideas with your clinical faculty member, do some initial literature searching to see what information is available for a particular screening test, and to change your mind about your selected topic.

Differentiating Tests Done For Screening Vs. Other Purposes of Tests

In thinking about the possibilities for your NUR 807 screening paper topic, here are some guidelines for differentiating screening tests, versus testing being done for other (non-screening) purposes. Your screening test paper needs to focus on a screening test, as opposed to a test being done for some other purpose (such as diagnosis or monitoring of an already-diagnosed condition). Additional information about tests will be covered during Week #4 of the course.

In essence, a “test” is anything you do to elicit needed information about the true state of the patient. In this broad definition of test, note that “tests” include not only laboratory/biophysiological measures (e.g., serum blood glucose), but also key questions that you might ask patients (e.g., “Do you have shortness of breath?”), and certain observational measures of patient behavior (e.g., tests of motor activity to assess neurological status).

Screening tests are done for asymptomatic individuals who are deemed at risk for some disease state, with the goals of either preventing the onset of disease and/or intervening early on in the disease course to prevent morbidity/mortality. For example, individuals are screened for high blood pressure, within a goal to prevent cardiovascular incidents such as stroke; colorectal screening for polyps within a goal to prevent or treat colon cancer early, etc.

By contrast, diagnostic tests are done for symptomatic individuals, to aid in getting to/validating a working diagnosis. In Week #4 I mentioned the key goal of doing tests as significantly reducing uncertainty, which helps with the rank order and deletion of differentials in order to arrive at the working diagnosis. For the purposes of your course paper, you should avoid selecting a test that is being used for diagnosis.
Tests are also done for reasons other than screening and diagnosis. In Week #4, it will be mentioned that tests are also done to:

- Assess disease severity
- Predict clinical course
- Predict clinical prognosis
- Determine present treatment responsiveness
- Predict future treatment responsiveness

For the purposes of your course paper, you should also avoid selecting a test that is being used for one of the above purposes regarding disease staging, monitoring, or prediction of future treatment responsiveness.

Here’s a table with key questions to consider to aid in differentiating screening tests from other uses of tests:

<table>
<thead>
<tr>
<th>Questions</th>
<th>Faculty Advice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the patient population for whom you would do the test having symptoms of a disease for which the test is being done to arrive at a working diagnosis?</td>
<td>If “yes,” the test is being used as a diagnostic test. Need to select another paper topic.</td>
</tr>
<tr>
<td>Is the test being used to:</td>
<td>If “yes” to any of these 5 questions, the test is not being used as a screening test. Need to select another paper topic.</td>
</tr>
<tr>
<td>- Assess disease severity?</td>
<td></td>
</tr>
<tr>
<td>- Predict clinical course?</td>
<td></td>
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<tr>
<td>- Predict clinical prognosis?</td>
<td></td>
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<tr>
<td>- Determine present treatment responsiveness?</td>
<td></td>
</tr>
<tr>
<td>- Predict future treatment responsiveness?</td>
<td></td>
</tr>
</tbody>
</table>

When you discuss your idea for a paper topic with your NUR 807 clinical faculty, you should be prepared to justify that your selected test is being used for screening purposes. This will involve identifying a specific patient population seen in a primary care setting that is at risk for some disease state, for which the test is being used to screen for preventive or early detection reasons.

Note that there are a number of tests that are used for a variety of reasons. If you are considering a test that is also used for reasons other than screening, it will be important to clearly describe your rationale for focusing the test as a screening test. Also, in preparing your course paper, the information you include should refer only to the use of the test for screening purposes, as opposed to other uses of the test.
Here are the key elements to include in your paper, including the percentage assigned to each section for grading purposes:

**Part 1: Description of the Screening Test (35%)**
1. Identify and describe the screening test.
2. What guidelines were used to support that the test is appropriate for primary care? Include a copy of the guideline with your final paper. Be sure to address the level(s) of evidence from the clinical guideline for use for the test in the population(s) of focus in your paper.
3. Describe the population for which the test is appropriate, in terms of age, gender, and other characteristics that are relevant.
4. Differentiate between the use of this test for screening versus diagnostic purposes, providing clinical examples as appropriate.
5. Discuss any controversies that exist surrounding the use of the test.

**Part 2: Assessing the Screening Test (30%)**
Evaluate the test in terms of its quality and feasibility. Include reference to sensitivity, specificity, PPV, and NPV in your assessment, referring also to the implications of the population prevalence of the disease, for the population in which the screening test may be used. The cost evaluation should include how much the test would cost in your geographic area, as well as cost factors to the system and to the patient. Provide support from the literature, and remember that costs can include not only financial but other types of expenses; e.g., pain, suffering, inconvenience, and so forth.

**Part 3. Clinical Significance and Implications for Practice (25%)**
Evaluate how appropriate this test is for the primary care population. Given the pros and cons of testing that you have identified, provide rationale for why you either would or would not advocate using this test in your practice. Support your position by reference to the literature.

**Part 4. Format Considerations (10%)**
This includes use of APA format (5th ed.), organization of ideas, clarity of writing, and ability to articulate your rationale. The suggested maximum length of the text of your paper (exclusive of the title page and references) is approximately 10-15 pages double-spaced text, 10-12 point font, 1-inch margins. Your paper should be prepared in MS Word version 1997 or higher, Rich Text, Text format, or PDF format. Please note that MS Works, Wordperfect, and word processing formats other than MS Word, Rich Text, or Text formats are not readable on College computers.

**Submitting your screening test analysis paper:**
Your course paper is due on or before 5 pm on Thursday, April 26th. Your paper and a link to your clinical practice guideline should be uploaded to the course drop box that is located in this week’s folder under the Lessons tab. Please do not provide us with printed copies of your paper or send your paper to us by email.
Appendix E
Clinical Experiences Guidelines

Purpose

NUR 807 includes 13 hours of clinical simulation activities and 32 hours of precepted clinical hours in a selected clinical practice setting to be arranged with the clinical faculty (total of 45 clinical hours). The overall purpose of the clinical experiences in NUR 807 is to gain skill in the application of the clinical decision-making concepts and principles that are taught via the online seminar portion of the course. This portion of the course is graded on a pass-fail basis (for additional information see the Evaluation of Academic Performance section on p. 4 of this syllabus).

Objectives

• Apply key concepts and principles of clinical decision making to the care of selected patients
• Build skills in doing focused histories (HPIs)
• Build skills in doing focused physical examinations (PEs)
• Gain skills in formulating differential diagnoses and deriving working diagnoses
• Gain initial experiences in selecting appropriate screening and diagnostic tests

Activities

Clinical simulation activities will provide the initial skills preparation for the precepted clinical hours. Clinical activities include development of differential diagnoses related to presenting problems/chief complaints; gaining skills in taking focused histories and doing focused clinical exams; and developing appropriate working diagnoses for patients based on the information gathered via HPIs and focused physical exams. These types of clinical activities are the clinical skills “bridge” to the clinical management courses that are taken after completing NUR 807 (see course overview information on p. 2 of this syllabus). For NUR 807, students will not be responsible for developing the management plan per se, but some initial practice will be obtained in selecting appropriate screening and diagnostic tests as applicable to the care of specific patients.

Guidelines for Precepted Clinical Hours and Supervision

• The 32 precepted clinical hours will be scheduled for the second half of Spring semester.
• The student must have passed the NUR 807 midterm exam with a grade of ≥ 80% in order to begin the precepted clinical hours (see Evaluation of Academic Performance, p. 4 of syllabus).
• Each student must arrange clinical hours with her/his assigned NUR 807 clinical faculty member. The clinical placement will be decided upon and arranged for the student by the assigned clinical faculty member in collaboration with Julie Stoner. Clinical site placements will be prioritized for consideration that are as proximal as possible to students’ home geographic locations. However students may be required to travel up to 1 hour from their homes in order to obtain clinical experiences in an appropriate site.
• Appropriate preceptors will be credentialed as Nurse Practitioners or Physicians. Physician Assistants are not eligible to serve as preceptors.
• The student should inform their assigned clinical faculty member about the dates that they plan be in the clinical setting, prior to starting their clinical hours. If changes to plans occur following the initial planning/clinical placement the student should contact the assigned clinical faculty member to discuss.

• Students may do no more than 8 hours/week of precepted clinical hours.

• Each clinical faculty member will have a Clinical Paperwork Drop Box located in the Clinical Activities section of the course web site for weeks of the course in which the precepted clinical hours are occurring. Each student will be responsible for submitting documentation via the Clinical Paperwork Drop Box related to one patient for each four (4) hours in clinical. The assigned clinical faculty member will provide additional information about what type of documentation is to be submitted. This documentation will include HPIs, PE write-ups, SOAP notes, and so forth, as discussed with the clinical faculty.

• During the second half of the semester, each student will present one patient seen in the clinical practice setting in the Online Clinical Discussion Forum.