

Module Description: Emergency Nursing (electives)

Module name	Course Module
Module level, if applicable	Professional Nurse Degree Program
Code, if applicable	17557R0204
Subtitle, if applicable	-
Course, if applicable	Clinical Elective: Emergency Nursing Practice
Semester(s) in which the module is taught	X
Person responsible for the module	Moh. Syafar Sangkala, S.Kep., Ns., MANP
Lecturer	1. Tuti Seniwati, S.Kep., Ns., M.Kes 2. Ilkafah, S.Kep.,Ns.,M.Kep.
Language	Indonesian Language [Bahasa Indonesia]
Relation to Curriculum	This course is an elective course and offered in the 10 th semester.
Type of teaching, contact hours	<p>Teaching methods used in this course are:</p> <ul style="list-style-type: none"> - Bed side teaching - Pre-post conference - Reflective study - One-Minute Preceptorship (OMP) - Case Based Discussion <p>The class size for supervision is approximately 10 – 15 students, therefore there are 3 – 5 students for each lecturer/Academic preceptor.</p> <p>Clinical fieldwork contact hours is 186.67 hours with supervision from Academic Preceptor at least 2 – 3 times a week for 2 – 3 hours.</p>
Workload	For this course, students are required to meet a minimum of 186.67 hours for clinical fieldwork.
Credit points	4 credit points (equivalent with 7.47 ECTS)
Requirements according to the examination regulations	Students' presence must 100% and submitted all clinical practice assignments that are scheduled before the final clinical practice week.
Recommended prerequisites	Students must have graduated with Bachelor Science in Nursing (BSN) and must have passed all the compulsory nursing practice courses.
Module objectives/intended learning outcomes	<p>After completing the clinical elective: Emergency Nursing Practice:</p> <p>Attitude</p> <p>CLO1: Students will be able to provide emergency nursing care in the area of trauma or non-trauma cases with cultural sensitivity that respect to ethics, religions or other factors of each emergency client as well as applying ethical and legal aspects in emergency nursing practice. (A1)</p> <p>CLO2: Capable to work professionally with passion and determination in the area of trauma or non-trauma emergency nursing cases based on maritime continent culture in achieving patients' goal of care according</p>

	<p>to her/his clinical privilege and responsibility, in particular in emergency nursing care for tropical disease. (A2)</p> <p>Competence</p> <p>CLO3: Students will be able to apply comprehensive and continuing emergency nursing care in the area of trauma or non-trauma cases based on research that ensure patients' safety according to the standards of nursing care in emergency nursing area. (C1)</p> <p>CLO4: Students will be able to perform therapeutic communication and give accurate information to emergency clients and/or to family/assistance/advocates in obtaining an informed consent of care within their responsibility. (C2)</p> <p>CLO5: Be able to manage nursing care systems in emergency nursing unit or ward within their responsibility by collaborating with other nurses, other health professionals, and group of people in community to reduce morbidity rates, to improve healthy lifestyles and healthy environment. (C3)</p> <p>CLO6: Students will be able to apply the results of research in an effort to improve the quality of emergency nursing care for trauma or non-trauma case patients. (C4)</p>
Content	<p>Students will learn and practice about:</p> <ol style="list-style-type: none"> 1. Initial assessment for Trauma OR Non-trauma patients 2. Advanced Airway and breathing management 3. Emergency Triage System 4. Basic Life Support 5. Advanced Cardiac Life Support 6. Advanced Trauma Life Support 7. Emergency nursing case management for trauma patients (Neurological, trunk, abdominal, pelvic, and musculoskeletal trauma, burn and scald, barotrauma, Paediatric and obstetric trauma) based on evidence based research. 8. OR Emergency nursing case management for Non-trauma patients (Neurological, cardiovascular, gastrointestinal, genitourinary and endocrine emergencies, paediatric emergency cases, toxicology and envenomation) based on evidence based research. 9. Caring for clients and families in the phase of loss 10. Preparing clients and families under conditions of death 11. Analysing the gap between theory and practice found in the field. 12. Communicating the results of nursing care to team members to be followed up.
Forms of Assessment	<ul style="list-style-type: none"> - Written test (MCQ) - DOPS (Direct Observation of Procedural Skills) - SOCA (Student Oral Case Analysis) - CIR (Critical Incidence Report) - Case Report - Portofolio - OSLER (Objective Structured Long Examination Record) - MSF-360 Degree (Multi Source Feedback)
Study and examination requirements and forms of examination	<p>Study and examination requirements:</p> <ul style="list-style-type: none"> - Students carry out clinical elective: Emergency Nursing Practice in accordance with the objectives to be achieved.

	<ul style="list-style-type: none"> - Students must be present 15 minutes before the activity begins, if students are late, they are required to report to the supervisor. - Students are obliged to work in the morning shift, afternoon and evening according to the official schedule. - Students must wear complete attributes, if the attributes used are incomplete, students are not allowed to take part in practical activities and must replace the shift on other day - If students are late to attend at the ward (maximum of 15 minutes from the actual schedule), they are required to change their shift for 2 days - If during the Practice, students are absent without any confirmation, students are required to replace the shift for 2 days, while if students report sick, student only required to replace 1 day. - If Students are absent for 3 days, then their clinical elective: Emergency Nursing Practice is considered fail. - The presence of students during this clinical elective practice must be 100% - Students are not allowed to leave practice site except with the permission of the supervisor - All the assignments and log book must be submitted maximum of 1 week after the practice takes place. The score of late assignments will be reduced by 1% per day. <p>Form of examination: Written test (MCQ) and OSLE</p>
Media employed	Nursing Kit
Reading list	<ol style="list-style-type: none"> 1. Ackley & Ladwig (2004). <i>Nursing Diagnosis Handbook: A Guide to Planning Care</i>. 6th edition. Mosby Inc. 2. Beauchamp, T. L., & Childress, J. F. (1994). <i>Principles of biomedical ethics</i> (5th ed.). New York: Oxford University Press. 3. Bersten, A. D., & Soni, N. (2009). <i>Oh's intensive care manual</i> (6th ed.). Philadelphia: Butterworth Heinemann. 4. Bulechek, G. M., Butcher, H. K., Dochterman, J. M., & Wagner, C. M. (Eds.) (2013). <i>Nursing Interventions Classification (NIC)</i> (6th ed.). St. Louis, Missouri: Elsevier Mosby 5. Burghardt, J. C. (2012). <i>Medical-surgical nursing made incredibly easy!</i> (Third Ed.). Philadelphia, PA: Wolters Kluwer Lippincott Williams & Wilkins. 6. Curtis, K., Ramsden, C., & Friendship, J., (Eds). (2007). <i>Emergency and trauma nursing</i>. Philadelphia: Mosby. 7. Emergency Nurses Association (ENA). (2018). <i>Keperawatan Gawat Darurat dan Bencana Sheehy</i> (Edisi Indonesia 1 ed.). Singapore: Elsevier. 8. Guyton & Hall (2007). <i>Text Book of Medical Physiology</i>. W. B. Saunders Company, Philadelphia, Pennsylvania. 9. Herdman, H., & Kamitsuru, S. (Eds.) (2014). <i>NANDA International Nursing Diagnoses: Definitions & Classification, 2015 - 2017</i> (10th ed.). Oxford, UK: Wiley Blackwell. 10. Lemone, P. & Burke, K. (2004). <i>Medical surgical nursing critical thinking in client care</i> (Third Ed.). New Jersey, NJ: Pearson Prentice Hall.

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| | <ol style="list-style-type: none">11. Lewis, S.L., Dirksen, S. R., Heitkemper, M.M & Bucher, L. (2014). <i>Medical surgical nursing: Assessment and management of clinical problems</i> (Ninth Ed.). St. Louis, MO: Mosby.12. McCance, K. L., Huether, S. E., Brashers, V. L., & Rote, N. S. (2010). <i>Pathophysiology: the biologic basis for disease in adults and children</i> (6th ed.). Philadelphia: Mosby.13. Moorhead, S., Johnson, M., Maas, M. L., & Swanson, E. (Eds.) (2013). <i>Nursing Outcome Classification (NOC): Measurement of Health Outcome</i> (5th ed.). St. Louis, Missouri: Elsevier Mosby.14. Potter & Perry (2009). <i>Fundamental of Nursing : Concepts, Process, and Practice</i>. Mosby-Year Book Inc.15. Smeltzer, S. C., Bare, B. G., Hinkle, J. L., & Cheever, K. H. (2010). <i>Burnner & Suddarth's Textbook of medical-surgical nursing</i> (Twelfth edition). Philadelphia: Lippincott Williams & Wilkins.16. Warner, C., & Engelhard, K. (2007). Pathophysiology of traumatic brain injury. <i>British Journal of Anaesthesia</i>, 99(1), 4-9 |
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