Instructor's Resource Manual
for
Medical–Surgical Nursing Care

Second Edition

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PREFACE

The nature of nursing embodies the ever-changing rewards and challenges for today's practical and vocational nursing students. Streamlined yet thorough content provides easy access to need-to-know information and the essential skills needed to deliver safe and effective medical–surgical nursing care. This accompanying **Instructor's Resource Manual** is designed to support your teaching in this stepped-up environment, and to reduce your preparation time for class. It will help you focus your energy on teaching students what they need to know and do as practical nurses, and is intended to assist you provide an optimal learning experience for your students and their many learning needs.

Each chapter in the Instructor's Resource Manual is thoroughly integrated with the corresponding chapter in the textbook *Medical Surgical Nursing Care, 2/E* by Burke, Lemone, and Mohn-Brown. Chapters are organized by objectives, and the teaching unit flows from these objectives. You will find the following features to support the objectives:

- The Concepts for Lecture in this manual may be used in their entirety for class presentation or they may be merged with the classroom activities for a mixture of teaching styles that will meet the needs of students with various learning styles.

- The Lecture Outlines can be found on your Instructor's Resource CD-ROM in PowerPoint

- Suggestions for Classroom and Clinical Experiences attempt to go beyond the traditional activities that have been the mainstay of nursing education for many years.

- The Resource Library identifies for you—the instructor—all the specific media resources and activities available for that chapter on the Student CD-ROM, Companion Website and Instructor's Resource CD-ROM. Chapter by chapter, the Resource Library helps you decide what resources from the CD-ROM, Companion Website, and Instructor's Resource CD-ROM to use to enhance your course and your students' ability to apply concepts from the book into practice.

To organize your course further please see the sections at the beginning of this manual that provides you with an overall guide to the media resources and activities available from the Student CD-ROM, Companion Website, and Instructor's Resource CD-ROM. Also, included in this beginning section of this manual is a guide on "Teaching Medical Surgical Nursing Care to Students who Speak English as a Nonnative Language." This tool is intended to guide you in reaching across cultural barriers to train nurses.

Finally, the following additional resources are also available to accompany this textbook. For more information or sample copies, please contact your Prentice Hall Sales Representative:

- **Student Workbook ISBN 0-13-188461-1**—This workbook incorporates strategies for students to focus their study and increase comprehension of concepts of medical surgical nursing care. It contains a variety of activities, MediaLinks referring students to the Student CD-ROM and Companion Website, and more.

- **Student CD-ROM**—This CD-ROM is packaged with the textbook. It provides an interactive study program that allows students to practice answering NCLEX-PN style questions with rationales for right and wrong answers. It also contains an audio glossary, animations and video tutorials, and a link to the Companion Website (an Internet connection is required).

- **Companion Website www.prenhall.com/burke**—This on-line Study Guide is designed to help students apply the concepts presented in the book. Each chapter specific module features Objectives, NCLEX-PN Review Questions with rationales, Chapter Outlines for lecture notes, Case Studies, Critical Thinking WebLinks, Audio Glossary, and more. Faculty adopting this textbook have access to the online *Syllabus Manager* feature of the Companion Website, www.prenhall.com/burke. Syllabus Manager offers a whole host of features that facilitate the students' use of the Companion Website, and allows faculty to post syllabi and course information online for their students. For more information or a demonstration of Syllabus Manager, please contact a Prentice Hall Sales Representative.

- **Instructor's Resource CD-ROM ISBN 0-13-226999-6**—This cross-platform CD-ROM provides text slides and illustrations in PowerPoint for use in classroom lectures. It also contains an electronic test bank, answers to the textbook critical thinking exercises, and animations and video clips from the Student CD-ROM. This supplement is available to faculty free upon adoption of the textbook.

It is our hope that the information provided in this manual will decrease the time it takes you to prepare for class and will optimize the learning experience for your students.

GUIDELINES FOR INCORPORATING PRENTICE HALL'S NURSING MEDIA RESOURCES INTO YOUR COURSE

Media resources for **Medical Surgical Nursing Care, 2/E** by Burke et al. are available for both the instructor and the student. These resources enhance your teaching, as well as help your students visualize and comprehend difficult concepts. Furthermore, the media resources and activities enable your students to apply concepts from the textbook to real nursing scenarios, hone critical thinking skills, and reinforce basic knowledge gained from textbook reading assignments.

The table below identifies where these media resources are available among the free supplements accompanying this textbook. Resources located on the textbook's Companion Website are available to both the instructor and student at *www.prenhall.com/burke*.

RESOURCE	COMPANION WEBSITE	INSTRUCTOR'S RESOURCE CD-ROM	STUDENT CD-ROM
Objectives	√	Electronic Instructor's Manual	√
Audio Glossary	√		√
Chapter Outline	√		√
Practice NCLEX-PN Review Questions	√		√
Animations and/or Video Clips		√	√
Toolbox	√		
Case Studies	√		
Study Tips	√		
Challenge Your Knowledge	√		
Matching	√		
Faculty Office	√		
Web Links	√		
Syllabus Manager™	√ (See Guide for using this resource within this Instructor's Resource Manual.)		
Customizable and Printable Instructor's Resource Manual		√	
PowerPoint Images from the textbook		√	
PowerPoint text slides— Discussion Points		√	
NCLEX-style Test Items		√	
Additional Resources		√	

Suggestions for Incorporating These Media Resources and Activities into Your Course

1. Students who have difficulty identifying the main idea when reading the full chapter may use the chapter summary on the website to highlight major concepts.

2. Students who are visual learners can use the animations and/or video clips to reinforce their understanding of difficult concepts. Instructors may use the animations and/or video clips to enhance lecture presentations.

3. Students may use practice NCLEX-PN style review questions to prepare for course tests and to improve test-taking skills. Students may be expected to use these independently on the Companion website and submit their answers to receive an instant score. Instructors may assign these quizzes and exercises as homework, and ask students to route their answers to the instructor using the Email Results function on the Companion Website. Or, these practice questions may be used as a discussion for the end of the classroom lecture or discussion in small groups.

4. Students may be assigned case studies to analyze as a group and present results to the class in a post conference activity. They may respond to case study questions to prepare for clinical learning experiences as an independent study activity. Or, Instructors may assign these activities as homework and ask students to route their essay-style answers to the instructor using the Email Results Function on the Companion Website.

5. Students may use the MediaLinks as additional resources in support of written assignments or for enhancement of course requirements.

6. Instructors may use PowerPoint images and PowerPoint text slides, i.e., the Discussion Points, to enhance classroom presentations and discussions.

How to Use Prentice Hall's
Syllabus Manager™ and Companion Website

Syllabus Manager™ provides an easy, step-by-step process to create and revise syllabi, with direct links to Companion Websites and other online content. It can be used by a non-technical person to build and maintain one or more syllabi on the web. Students may "turn on" an instructor's syllabus from within any Companion Website. Your complete syllabus is hosted on Prentice Hall servers, allowing convenient updates from any computer by only you and your students. Changes you make to your syllabus are immediately available to your students at their next login.

All features and content on the Companion Website were developed in accordance with the chapter and textbook objectives. Thus, all the exercises meet the goals of the objectives, making the Companion Website a pedagogically sound study and teaching tool. The features on the Companion Website for *Medical Surgical Nursing Care 2/E,* include the following modules for each chapter:

- Objectives
- Chapter Outline
- Audio Glossary
- NCLEX-PN Multiple Choice Questions
- Case Study
- Challenge Your Knowledge
- Matching
- Study Tip
- Web Links
- Faculty Office
- Toolbox

To access Syllabus Manager™, go to the home page for this textbook at **www.prenhall.com/burke**. On the top navigation bar, click on **Syllabus**. New users can click on **Instructor Help** for assistance on the syllabus creation process.

To create your own secure course syllabus online, click on **New Account**. After entering your Personal Information, School Information, and Log in Information, click **Continue**. From here, you begin the easy four-step process to creating your syllabus.

Step 1 Course Details

This step allows you to create the basic information for your syllabus: Course Name (including start date and end date), Course Description (including policies and objectives), Class Time and Location, Course Pre-requisites, and Grading Policy. Some of the fields have drop-down capability. You can even cut and paste your current syllabus into these fields or link the school's URL to your current syllabus. *Scroll to the bottom of the screen, and click on Next or on drop-down menu select STEP 2: Assignment Schedule.*

Step 2 Assignment Schedule

On this screen you are choosing dates for the assignments, and making notations about the assignments. It contains the course calendar in a pane on the left side of the page. Notice the days when your class meets are highlighted in blue. When you create assignments their due dates appear in orange on the calendar. To create an assignment, click on the day of the assignment in the calendar. Next, you will give the assignment a name. Under notes/instructions, you may choose to mention clinical days, guest speakers, activities, or simply describe a set of assignments due that day. Then, you can add a component to the assignment, either from the textbook's Companion Website or a custom assignment from your current syllabus online by adding a link.

To add an activity from the textbook's Companion Website, begin by clicking on **Add CW Resource**. A window opens and displays your Companion Website title and parts. Click through the Companion Website to locate the element you want to include as an assignment resource and the click **Select** to add the component. When the student views your syllabus, they will click on the date of the assignment, and immediately be linked to the exercises you selected on the textbook Companion Website. You may add any combination of components. When you finish creating the assignment click the **Save** button. You may copy this assignment or add additional assignments for other days before clicking on **Next to** continue creating your syllabus. *Click on Next or on drop-down menu select STEP 3: Password for Students.*

Step 3 Password for Students

You may want to protect this syllabus by entering a password. This password should be given out to only those that should have access to this syllabus. If you choose not to enter any password, your syllabus will be viewable by anyone. On this screen you can designate a secure password so only your students can access this syllabus. You can change the password as often as you like. *Click on Next or on drop-down menu select STEP 4: Finish.*

Step 4 Finish

Here you designate whether your syllabus is finished and able to be viewed by students, or still under construction and available only to you. *Click on Log Off to log out of Syllabus Manager™ and return to your Companion Website.*

Your students will now be able to access your course syllabus by searching your name, your email address, or your school name under Student Login. To view or update any of your existing syllabi, begin by logging in under Instructor Login. For additional demonstrations of Syllabus Manager™, or for help in creating your syllabus, please contact your Prentice Hall Sales Representative.

TEACHING MEDICAL SURGICAL NURSING CARE TO STUDENTS WHO SPEAK ENGLISH AS A NONNATIVE LANGUAGE

We are fortunate to have so many multi-national and multi-lingual nursing students in the United States in the 21st century. As our classrooms become more diverse, there are additional challenges to communication, but we in the nursing education community are ready. Our goal is to educate competent and caring nurses to serve the health needs of our diverse communities.

We know that ENNL students experience higher attrition rates than their native English-speaking counterparts. This is a complex problem. However, there are teaching strategies that have helped many students be successful.

The first step toward developing success strategies is understanding language proficiency. Language proficiency has four interdependent components. Each component is pertinent to nursing education. *Reading* is the first aspect of language. Any nursing student will tell you that there are volumes to read in nursing education. Even native speakers of English find the reading load heavy. People tend to read more slowly in their nonnative language. They also tend to recall less. Nonnative speakers often spend inordinate amounts of time on reading assignments. These students also tend to take longer to process exam questions.

Listening is the second component of language. Learning from lectures can be challenging. Some students are more proficient at reading English than at listening to it. It is not uncommon for ENNL students to understand medical terminology, but to become confused by social references, slang, or idiomatic expressions used in class. The spoken language of the teacher may be different in accent or even vocabulary from that experienced by immigrant students in their language education. ENNL students may not even hear certain sounds that are not present in their native languages. Amoxicillin and Ampicillin may sound the same. Asian languages do not have gender-specific personal pronouns (he, she, him, her, etc.). Asian students may become confused when the teacher is describing a case study involving people of different genders.

Speaking is the third component of language proficiency. People who speak with an accent are often self-conscious about it. They may hesitate to voice their questions or to engage in discussion. Vicious cycles of self-defeating behavior can occur in which a student hesitates to speak, resulting in decreased speaking skills, which results in more hesitation to speak. Students may develop sufficient anxiety about speaking that their academic outcomes are affected. Students tend to form study groups with others who have common first languages. Opportunities to practice English are therefore reduced, and communication errors are perpetuated. When the teacher divides students into small groups for projects, ENNL students often do not participate as much as others. If these students are anxious about speaking, they may withdraw from classroom participation. ENNL students may feel rejected by other students in a small group situation when their input is not sought or understood.

The fourth aspect of language is *writing*. Spelling and syntax errors are common when writing a nonnative language. Teachers often respond to student writing assignments with feedback that is too vague to provide a basis for correction or improvement by ENNL students. When it comes to writing lecture notes, these students are at risk of missing important details because they may not pick up the teacher's cues about what is important. They might miss information when they spend extra time translating a word or concept to understand it, or they might just take more time to write what is being said.

Another major issue faced by ENNL nursing students is the culture of the learning environment. International students were often educated in settings where students took a passive role in the classroom. They may have learned that faculty are to be respected, not questioned. Memorization of facts may have been emphasized. It may be a shock to them when the nursing faculty expect assertive students who ask questions and think critically. These expectations cannot be achieved unless students understand them.

Finally, the European-American culture, which forms the context for nursing practice, creates challenges. Because they are immersed in Euro-American culture and the culture of nursing, faculty may not see the potential sources of misunderstanding. For example, if a teacher writes a test question about what foods are allowed on a soft diet, a student who understands therapeutic diets may miss the question if s/he does not recognize the names of the food choices. Nursing issues with especially high culture connection are: food, behavior, law, ethics, parenting, games, or choosing the right thing to say. These topics are well represented in psychiatric nursing, which makes it a difficult subject for ENNL students.

MINIMIZING CULTURE BIAS ON NURSING EXAMS

Our goal is not really to eliminate culture from nursing or from nursing education. Nursing exists in a culture-dependent context. Our goal is to practice transcultural nursing and to teach nursing without undue culture bias.

Sometimes our nursing exam questions will relate to culture-based expectations for nursing action. The way to make these questions fair is to teach transcultural nursing and to clarify the cultural expectations of a nursing student in the Euro-American-dominated health care system.

Students must learn the cultural aspects of the profession before they can practice appropriately within it. Like other cultures, the professional culture of nursing has its own language (medical terminology and nursing diagnosis, of course). We have our own accepted way of dress, our own implements, skills, taboos, celebrations, and behavior. The values accepted by our culture are delineated in the ANA Code of Ethics, and are passed down to our young during nursing education.

It is usually clear to nursing educators that students are not initially aware of all the aspects of the professional culture, and that these must be taught. The social context of nursing seems more obvious to educators, and is often overlooked in nursing education. Some aspects of the social context of nursing were mentioned above (food, games, social activities, relationships, behavior, what to say in certain situations). Students must also learn these social behaviors and attitudes if they are to function fully in nursing. If they do not already know about American hospital foods, what to say when someone dies, how to communicate with an authority figure, or what game to play with a 5-year-old child, they must learn these things in nursing school.

Try for yourself the following test. It was written without teaching you the cultural expectations first.

CULTURE BIASED TEST

1. Following radiation therapy, an African American client has been told to avoid using her usual hair care product due to its petroleum content. Which product should the nurse recommend that she use instead?
   A. Royal Crown hair treatment
   B. Dax Wave and Curl
   C. Long Aid Curl Activator Gel
   D. Wave Pomade

2. A Jewish client is hospitalized for Pregnancy Induced Hypertension during Yom Kippur. How should the nurse help this client meet her religious needs based on the tradition of this holy day?
   A. Order meals without meat-milk combinations
   B. Ask a family member to bring a serving of *Marror* for the client
   C. Encourage her to fast from sunrise to sunset
   D. Remind her that she is exempt from fasting

3. Based on the Puerto Rican concept of *compadrazco*, who is considered part of the immediate family and responsible for care of children?
   A. Parents, grandparents, aunts, uncles, cousins, and godparents
   B. Mother and father, older siblings
   C. Mother, father, any blood relative
   D. Parents and chosen friends (*compadres*) who are given the honor of childcare responsibility

4. A 60-year-old Vietnamese immigrant client on a general diet is awake at 11 P.M. on a summer night. What is the best choice of food for the nurse to offer to this client?
   A. warm milk
   B. hot tea
   C. ice cream
   D. iced tea

5. Which of the following positions is contraindicated for a client recovering from a total hip replacement?
   A. Side-lying using an abductor pillow
   B. Standing
   C. Walking to the restroom using a walker
   D. Sitting in a low recliner

When you took this test, did it seem unfair? It was intended to test nursing behaviors that were based on culture-specific situations. Your immigrant and ENNL students are likely to face questions like these on every exam.

Item #1 is about hair care products for black hair. Option C is the only one that does not contain petroleum products. Students could know this, if they were given the information before the exam. Otherwise the item is culture-biased.

Item #2 is about the Jewish holiday Yom Kippur. To celebrate this holiday, it is customary to fast from sunrise to sunset, but people who are sick, such as the client in the question, are exempted from fasting. This is only unfair if students did not have access to the information.

Item #3 expects you to know about *compadrazco*, in which parents, grandparents, aunts, uncles, cousins, and godparents are all considered immediate family. This can be an important point if you are responsible for visiting policies in a pediatrics unit.

Item #4 tests knowledge about the preferred drink for an immigrant Vietnamese client. Many people in Asia feel comforted by hot drinks and find cold drinks to be unsettling.

Item #5 does not seem so biased. If you understand total hip precautions, it is a pretty simple question, unless you have never heard of a "low recliner". An ENNL student who missed this question, said, "I saw the chairs in clinical called 'geri chairs' and I know that the client cannot bend more than 90 degrees, but 'low recliner' was confusing to me. I imagined someone lying down (reclining) and I think this would not dislocate the prosthesis."

The best way to avoid culture bias on exams is to know what you are testing. It is acceptable to test about hip precautions, but not really fair to test about the names of furniture. The same is true of foods. Test about therapeutic diets, but not about the recipes (an African immigrant student advised us to say "egg-based food" instead of custard).

Behavior in social and professional situations is especially culture-bound. Behavior-based questions are common on nursing exams. Make behavior expectations explicit. Especially when a student is expected to act in a way that would be inappropriate in his or her social culture, these are very difficult questions. For example, we expect nurses to act assertively with physicians and clients. It is inappropriate for many Asian students to question their elders. When a client is their elder, these students will choose the option that preserves respect for the client over one that provides teaching. We must make our expectations very clear.

Finally, talk with your ENNL and immigrant students after your exams. They can provide a wealth of information

about what confused them or what was ambiguous. Discuss your findings with your colleagues and improve your exams. Ultimately your exams will be clearer and more valid.

SUCCESS STRATEGIES

The following strategies were developed originally to help ENNL students. An interesting revelation is that they also help native English speakers who have learning styles that are not conducive to learning by lecture, or who read slowly, or have learning disabilities or other academic challenges.

STRATEGIES FOR PROMOTING ENNL STUDENT SUCCESS

1. You cannot decrease the reading assignment because some students read slowly, but you can help students prioritize the most important areas.
2. Allow adequate time for testing. The NCLEX is not a 1-minute-per-question test anymore. Usually 1.5 hours is adequate for a 50 item multiple-choice exam.
3. Allow students to tape lectures if they want to. You might have lectures audio-taped and put in the library for student access.
4. Speak clearly. Mumbling and rapid anxious speech are difficult to understand. If you have a problem with clarity, provide handouts containing the critical points. Provide the handouts anyway. You want to teach and test nursing knowledge, not note-taking skills.
5. Avoid slang and idiomatic expressions. This is harder than heck to do, but you can do it with practice. When you do use slang, explain it. This is especially important on exams. When in doubt about whether a word is confusing, think about what the dictionary definition would be, if there are two meanings, use another word.
6. Allow the use of translation dictionaries on exams. You can say that students must tell you what they are looking up, so they cannot find medical terminology that is part of the test.
7. Be aware of cultural issues when you are writing exams. Of course you will test on culture-specific issues, but be sure you are testing what you want to test (the student's knowledge of diets, not of recipes).
8. Feel free to use medical terminology, after all this is nursing school. However, when you use an important new term, write it on the board so students can spell it correctly in their notes.
9. In clinical, make the implied explicit. It seems obvious that safety is the priority, but if a student thinks the priority is respecting her elders, when a client with a new hip replacement demands to get out of bed there could be a disaster.
10. Hire a student who takes clear and accurate lecture notes to post his/her notes for use by ENNL and other students. The students will still attend class and take their own notes, but will have this resource to fill in the details that they miss.
11. SOA (spell out abbreviations).
12. Many international students learned to speak English in the British style. If something would be confusing to a British person, they will find it confusing.
13. Provide opportunities for students to discuss what they are learning with other students and faculty. A faculty member might hold a weekly discussion group where students bring questions. It can be interesting to find a student having no trouble tracing the path of a red cell from the heart to the portal vein, but having difficulty understanding what cream of wheat is ("I thought it was a stalk of grain in a bowl with cream poured on it").
14. Make it clear that questions are encouraged. When a student is not asking, and you think they may not understand, ask the student after class if s/he has questions. Make it easier for students to approach you by being approachable. Learn their names, and learn to pronounce them correctly. Hearing you try to pronounce their name might be humorous for them, and it will validate how difficult it is to speak other languages.
15. Take another look at basing grades on class participation. You may be putting inordinate demands on the ENNL students. Of course nurses must learn to work with others, but the nurse who talks most is not necessarily the best.
16. Be a role model for communication skills. You might even say in class when you talk about communication that if you respect a person who is trying to communicate with you, you will persist until you understand the message. Say, "Please repeat that," or "I think you said to put a chicken on my head, is that correct?" or "You want me to do what with the textbook?" It may be considered socially rude to ask people to repeat themselves repeatedly. Make it clear that this is not a social situation. In the professional role, we are responsible for effective communication. We cannot get away with smiling and nodding our heads.
17. In clinical, if a student has an accent that is difficult for the staff to understand, discuss clarification techniques (#16 above) to the student and staff member. Make it explicit that it is acceptable for the student to ask questions and for the staff to ask for clarification.
18. If your college has a writing center where students can receive feedback on grammar and style before submitting papers, have students use it. If you are not so fortunate, view papers as a rough draft instead of a final product. Give specific feedback about what to correct and allow students to resubmit.
19. Make any services available to ENNL students available to all students (such as group discussions and notes). These services may meet the learning needs of many students while preventing the attitude that "they are different and they get something I don't."
20. Faculty attitudes are the most important determinant of a successful program to promote the success of ENNL nursing students. Talk with other faculty about the controversial issues. Create an organized program with a consistent approach among the faculty. The rewards will be well worth the work.

Learn about medical surgical nursing ignatavicius with free interactive flashcards. Choose from 500 different sets of flashcards about medical surgical nursing ignatavicius on Quizlet. Chapter 40: Care of Patients with Hematologic Problems Ignatavicius: Medical-Surgical Nursing, 8th Edition. A nurse in a hematology clinic is worki… A nursing student is caring for a clien… The family of a neutropenic client repo… A nurse is caring for a client who is a… ANS: B Clients with polycythemia vera often have clotting abno… ANS: D In leukemia, the WBCs are abnormal and do not provide p… Test your cognitive nursing skills in med-surge respiratory care for the adult patient. Please note that this quiz does not cover respiratory disorders. Questions and Answers. Remove Excerpt. Removing question excerpt is a premium feature. Upgrade and get a lot more done! Upgrade. As the nurse auscultates the patient, she hears a popping, discontinuous sound over the lung fields. This type of adventitious sound is known as: A. Wheezes. B. Crackles. C.