

**VENTURA COLLEGE
SCHOOL OF NURSING AND
ALLIED HEALTH**



ADVANCED PLACEMENT OPTIONS

FALL 2021 - SPRING 2022



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TRANSFER / CHALLENGE POLICIES

TRANSFER POLICIES

A. Students with previous education and / or experience electing to pursue coursework at Ventura College leading to eligibility for licensure as a registered nurse are encouraged to meet with a nursing counselor early in their planning process. The following procedure applies to:

- **applicants transferring from an accredited program educating individuals for licensure as registered nurses,**
 - **applicants transferring from an accredited program educating licensed vocational nurses,**
 - **or applicants currently licensed as vocational nurses in the State of California.**
1. A student may be given a maximum of 21 units (theory and clinical combination) of transfer credit (first year) for their nursing coursework.
 2. Each applicant will be evaluated on an individual basis.
 3. Challenge testing to demonstrate theory / clinical competency will be required. The applicant will receive an outline of the objectives to be tested. (Refer to Advanced Placement Challenge Options)
 4. All prerequisite coursework identified in the college catalog must be completed with a minimum grade of C before transfer credit will be considered.
 5. A minimum grade of C will be required in all nursing coursework in order to be considered for transfer credit.
 6. An overall GPA of 2.5 is required for admission.
 7. A science GPA of 2.5 in anatomy, physiology and microbiology with no more than one W, D or F in these courses is required for admission.
 8. A success score on the Test of Essential Academic Skills (TEAS) is required for admission after successful completion of the challenge exam and prior to admission to the nursing program. The current success score is 62% for ATI TEAS version but is subject to change. Applicants not meeting the established "success score" will be required to remediate identified deficiencies and successfully retest before entry. A maximum of two TEAS tests are allowed.
 9. Official high school and college transcripts and two letters of recommendation (nursing school program director and one clinical faculty member) will be required.
 10. A physical examination, CPR certification, criminal background check, and alcohol and drug screening will be required prior to admission. Students with misdemeanor or felony convictions within the past seven years will not be able to enter the program because of inability to be assigned for clinical experience.
 11. All application materials must be completed one month prior to the admitting semester.
 12. Advanced placement admission is on a space available basis only.

B. 30 – Unit Option

An LVN candidate seeking advanced placement as a 30-unit option candidate may receive a maximum of 21 units of transfer credit (first year) for nursing coursework.

CANDIDATES WHO ENTER THE PROGRAM IN THE 30-UNIT OPTION CANNOT CHANGE TO THE ADN OPTION.

1. Each 30-unit option applicant will be evaluated on an individual basis.
2. Testing to demonstrate theory / clinical competency will not be required
3. The applicant is not required to meet college admission requirements.
4. To be eligible, the applicant must be currently licensed as a vocational nurse (LVN) in the state of California.
5. Official high school and college transcripts will be required.
6. A physical examination, CPR certification, criminal background check, and alcohol and drug screening will be required prior to admission. Students with misdemeanor or felony convictions within the past seven years will not be able to enter the program because of inability to be assigned for clinical experience.
7. All application materials must be completed one month prior to the admitting semester.
8. Advanced placement admission is on a space available basis only.
9. On completion of the 30-unit option the student is NOT a graduate of the nursing program and does NOT receive a degree. This status will not change even if the student goes on to obtain a degree. The student may also have difficulty applying to a college/university for an advanced degree. Individuals who become licensed as registered nurses using this option may not be eligible for licensure in states other than California. Students pursuing this option must complete NS V31 and NS V41 instead of NS V30 and NS V40.
10. Microbiology and physiology are required prerequisites to the nursing courses, however, the student is not required to have microbiology or physiology prerequisites, e.g. chemistry, math, etc.
11. All applicants must complete required courses:

Prerequisites (A minimum grade of C is mandatory in each course)

	UNITS
PHSO V01 Physiology	4
MICR V01 General Microbiology	4

Nursing Courses

NS V31	Patient-Centered Care II and Maternal Newborn and Mental Health Nursing	9
NS V41	Patient-Centered Care III and Transition to Professional Practice	9
		<hr/> 26 units

12. All applicants must meet with the program director for objective counseling that includes admission process, course requirements, and the advantages/disadvantages of this route to licensure.

C. Students with educational experience in health care fields analogous to the field of nursing.

1. A student seeking admission into the ADN program who has analogous educational experience may be granted the opportunity to challenge specific nursing coursework as it relates to their respective educational / experiential background. **(i.e. nursing assistants, licensed psychiatric technicians, military corpsman, etc.).**
2. Each transfer applicant will be evaluated on an individual basis.
3. Testing to demonstrate theory / clinical competency will be required. The student will receive an outline of the objectives to be tested. (Refer to Advanced Placement Challenge Options)
4. All prerequisite coursework identified in the college catalog must be completed with a minimum grade of C before transfer credit will be considered.
5. A minimum grade of C will be required in all nursing coursework in order to be considered for transfer credit.
6. An overall GPA of 2.5 is required for admission.
7. A science GPA of 2.5 in anatomy, physiology and microbiology with no more than one W, D or F in these courses is required for admission.
8. A success score on the Test of Essential Academic Skills (TEAS) is required for admission after successful completion of the challenge exam and prior to admission to the nursing program. The current success score is 62% ATI TEAS version but is subject to change. Applicants not meeting the established "success score" will be required to remediate identified deficiencies and successfully retest before entry. A maximum of two TEAS tests are allowed.
9. Official high school and college transcripts will be required.
10. A physical examination, CPR certification, criminal background check, and alcohol and drug screening will be required prior to admission. Students with misdemeanor or felony convictions within the past seven years will not be able to enter the program because of inability to be assigned for clinical experience.
11. All application materials must be completed one month prior to the admitting semester.
12. Advanced placement admission is on a space available basis only.

VENTURA COLLEGE
SCHOOL OF NURSING
ADVANCED PLACEMENT CHALLENGE OPTIONS

CHALLENGE OPTIONS

There are several admission options for advanced placement. These vary depending upon the qualifications and needs of the applicant. All advanced placement admissions are on a space available basis and should be initiated by filing a Petition for Credit by Examination and Application for Advanced Placement with a nursing counselor. Please call the Counseling Front Desk for an appointment with the nursing counselors. (805-289-6448):

For any additional information, you may contact the nursing counselors directly at:

Bea Herrera

(805) 289-6011

Angelica Gonzales

(805) 289-6010

I. Qualifying Requirements for Advanced Placement

1. Satisfactory completion of all required ADN prerequisite qualifying requirements described in the Ventura College catalog. This includes: General Microbiology (MICR V01); General Human Anatomy (ANAT V01) and Introduction to Human Physiology (PHSO V01); Human Development (CDV03) or Introduction to Developmental Psychology (PSY V05).
2. An overall GPA of 2.5 and a 2.5 GPA in the biological sciences (anatomy, physiology & microbiology) with no more than on W, D or F in any of these three science courses.
3. Submission of the completed Application for Advanced Placement to the School of Nursing two months prior to assessment testing for clinical competency.
4. Completion of assessment testing for theory and clinical competency if applicable.
5. Submission of Petition for Credit by Examination for each course challenged.
6. A success score on the Test of Essential Academic Skills (TEAS) is required for admission after successful completion of the challenge exam and prior to admission to the nursing program. The current success score is 62% for the ATI TEAS version but is subject to change. Applicants not meeting the established "success score" will be required to remediate identified deficiencies and successfully retest before entry. A maximum of two TEAS tests are allowed

- II. **Clinical Competency Testing for Advanced Placement** – All objectives, critical behaviors and required forms are included in this packet. Skills checklists for required skill competency testing will be provided prior to testing.

COMPETENCY TESTING #1:

DEMONSTRATION OF COMPETENCY FOR NS V10 (Foundations of Nursing Practice).

- a. Written comprehensive examination demonstrating competency in applying the nursing process in Introduction to Professional Nursing. Decision score of 75 required on NLN exam.
- b. Written nursing care plan for a geriatric client utilizing the nursing process as the basis. A nursing care plan form and a client chart will be provided. Candidate may bring any texts/reference books.
- c. Written medication administration and dosage calculation exam. Passing score of 90% required. A calculator is not allowed.
- d. Clinical skills demonstration. Applicant must demonstrate 100% accuracy in performance of critical behaviors and 80% of total behaviors.

Upon satisfactory completion of all testing and payment of the permit fee for posting the class on the transcript, credit will be given for NS V10.

COMPETENCY TESTING #2:

DEMONSTRATION OF COMPETENCY FOR NS V20 (Patient-Centered Care I and Family-Centered Care of Children).

- a. Written comprehensive examination demonstrating competency in applying the nursing process for the medical/surgical client and the nursing process with maternal/infant clients. Decision score of 75 required on NLN exams.
- b. Written nursing care plan for the medical/surgical or pediatric client utilizing the nursing process as the basis. Nursing care plan form and client chart will be provided.
- c. Written medication administration and dosage calculation exam. Passing score of 90% required. A calculator is not allowed.
- d. Clinical skills demonstration. Applicant must demonstrate 100% accuracy in performance of critical behaviors and 80% of total behaviors.

Upon satisfactory completion of all testing and payment of the permit fee for posting the class on the transcript, credit will be given for NS V20.

III. Options for Advanced Placement Admission

OPTION #1: ADVANCED PLACEMENT ADMISSION INTO NS V20

- a. Satisfactory completion of all qualifying requirements
- b. Satisfactory completion of all assessment testing for COMPETENCY #1 **OR** Current licensure as a vocational nurse in California.

OPTION #2: ADVANCED PLACEMENT ADMISSION INTO NS V30

- a. Satisfactory completion of all qualifying requirements
- b. Satisfactory completion of all assessment testing for COMPETENCY #1 and COMPETENCY #2.

NS V40 Advanced Placement applicants are NOT accepted into the last semester of the nursing program.

OPTION #3: ADVANCED PLACEMENT ADMISSION AS A 30-UNIT OPTION CANDIDATE

- a. Submission of the completed Application for Advanced Placement to the School of Nursing two months prior to optional assessments for clinical competency.
- b. Current licensure as an LVN in the State of California
- c. It is recommended that the candidate be IV certified and have worked a minimum of six months in an acute care agency within the last two years. This will facilitate success in the ADN Program.
- d. It is recommended that the candidate complete all assessment testing for Clinical Competency in order to determine areas of strength and weakness. This will facilitate success in the ADN Program and success on the state licensing exam.
- e. Satisfactory completion of the following coursework:
 1. PHSO V01: Physiology (4 units)
 2. MICR V01: General Microbiology (4 units)
 3. NS V31: Patient-Centered Care II and Maternal Newborn and Mental Health Nursing (9 units)
 4. NS V41: Patient-Centered Care III and Transition into Professional Practice (9 units)

Upon satisfactory completion of all coursework with a grade of C or better the student is eligible to apply to the California Board of Registered Nursing for licensure as a 30-unit option candidate. Admission as a 30-unit option does not lead to an Associate in Science Degree and the registered nurse licensed under this option may NOT be eligible for reciprocity of licensure with other states. Candidates who enter the program in the 30-unit option cannot change to the Associates Degree option.

Advanced placement admissions are on a space available basis only.

If finances are a block to your applying for advanced placement, please contact the student financial aid office at (805) 289-6369.

Students are strongly encouraged to take pharmacology (NS V07 - 3 units).

**Psychiatric Technician Challenge Procedure
For the Psychiatric Nursing Content
of the NS V30 Module**

To challenge the clinical portion:

- The student must submit a letter to the director of the School of Nursing & Allied Health requesting to challenge the psychiatric nursing content of the associate degree nursing program. The letter must indicate the date of completion of the psychiatric technician program and experience working in mental health since that time.
- **The student must submit a copy of his / her psychiatric technician license to the director of the School of Nursing and Allied Health with the letter requesting challenge.**
- The student must prepare a process recording (IPA) and nursing care plan* and must submit it to the lead instructor at least one month prior to the start of the psychiatric / mental health component of the course. Refer to objectives and clinical guides in the NS V30 syllabus to prepare this assignment. All client problems should be identified and two client problems must be discussed in detail on the 6-column form. The student must present a resume of clinical psychiatric experience, including dates, places of employment and job description.

To challenge the lecture portion:

- The student must take a written exam. The earned grade on the exam will be the lecture/theory grade recorded for that portion of the NS V30 course. The minimum passing score is 75%. Contact the program director one month prior to the start of the course to schedule a date to take the exam.

*Student should use client contacts in the psychiatric technician role for process recording and care plan. These forms are available in the nursing office.

**BEHAVIORAL OBJECTIVES FOR NLN TESTING
ADVANCED PLACEMENT**

COMPETENCY TESTING #1:

Demonstration of competency for NS V10 (Foundations of Nursing Practice)

1. Demonstrate understanding of fundamental aspects of nursing care
2. Demonstrate knowledge of the nursing process and nursing care planning
3. Demonstrate knowledge of professional accountability, health promotion, psychosocial health, skills basic to nursing practice, patient needs for safety and comfort, hygiene, body alignment, activity and exercise, rest and sleep, nutrition and elimination, respiration and circulation, fluid and electrolyte balance, and growth and development
4. Demonstrate knowledge of psychosocial issues in client care, including sexuality, self-esteem, loss and death, self-actualization
5. Demonstrate knowledge of perioperative care
6. Demonstrate knowledge of verbal and nonverbal communication, including principles of documentation
7. Demonstrate knowledge of general principles of drug administration
8. Demonstrate knowledge of moral, ethical and legal issues associated with client care.

COMPETENCY TESTING #2:

Demonstration of competency for NS V20 (Patient-Centered Care I and Family-Centered Care of Children I)

1. Demonstrate ability to utilize the nursing process in providing client care
2. Demonstrate knowledge of the nursing care of adults in various settings who have a variety of common health deviations
3. Demonstrate knowledge of pharmacology and drug administration associated with common health deviations.
4. Demonstrate knowledge of the reproductive client including antenatal, parturition and postpartum care
5. Demonstrate knowledge of care of the high-risk pregnancy patient
6. Demonstrate knowledge of fetal growth and development, care of the normal neonate, common complications of the neonatal period, and care of the high-risk neonate.

BEHAVIORAL OBJECTIVES FOR NURSING CARE PLAN ADVANCED PLACEMENT

Although the behavioral objectives for the nursing care plan are the same for all advanced placement options, increased depth of understanding and implementation of the nursing process must be demonstrated as the advanced placement candidate challenges successive courses. The applicant will be provided with the grading criteria for care plans at the level being tested prior to the testing date.

The nursing care plan format is attached. Students may bring textbooks or care planning guides to this exam. No written materials or sample care plans may be used during testing. Use of a computer, PDA, cell phone or IPAD is not permitted during testing.

Given the limitations imposed by the artificial situation of a hypothetical client, the following objectives must be met:

1. Organize a data base through systematic assessment of all aspects of the client chart to determine the client's priority problems.
2. Identify changes in health status that affect the client's ability to meet needs.
3. Assess verbal/nonverbal communication of self, client and support systems.
4. Identify actual or potential needs/deficits.
5. Select nursing diagnoses on the basis of analysis and interpretation of data.
6. Demonstrate participation of the client, family, significant others and members of the health care team to establish client-centered goals and interventions directed toward promoting and restoring the client's optimum state of health, preventing illness and providing rehabilitation.
7. Establish priorities for care.
8. Develop nursing interventions in response to the client's priority needs and/or deficits.
9. Demonstrate a plan that implements and monitors the prescribed medical regimen and nursing procedures for the client undergoing diagnostic testing and/or therapeutic procedures.
10. Address inconsistencies in prescribed nursing and medical regimen and discuss your plan for modification of intervention.
11. Develop a nursing plan of care which is evidence based and that promotes client autonomy and client teaching.
12. Identify sources for referral of clients with actual or potential needs/deficits.
13. Evaluate the effect of nursing interventions on the status of the client.

BEHAVIORAL OBJECTIVES FOR DOSAGE CALCULATION ADVANCED PLACEMENT OPTIONS

There are several dosage calculation books available for purchase at the Ventura College bookstore that would be helpful to the student who wants to practice before testing. Additional dosage calculation books are available in the Ventura College library. The dosage calculation tests must be passed with a 90% or above. Calculators will be provided by the School of Nursing. You may not use your own calculators.

COMPETENCY TESTING #1:

Demonstration of competency for NS V10 (Foundations of Nursing Practice):

1. Add, subtract, multiply and divide fractions
2. Add, subtract, multiply and divide decimal numbers
3. Solve simple word problems utilizing ratio-proportion
4. Convert apothecary, household and metric systems of measurement, and convert between hours and minutes
5. Calculate oral drug dosages in solid and liquid form
6. Calculate parenteral (IM, SubQ, ID and Insulin) drug dosages (excluding IV medications)
7. Calculate medicine dosage according to weight (mg/kg), given weight in pounds or kilograms
8. Determine whether a dosage is safe to administer
9. Calculate medication dosages using milliequivalents
10. Reconstitute medications supplied in powdered form and calculate the correct dosage

COMPETENCY TESTING #2:

Demonstration of competency for NS V20 (Patient-Centered Care I and Family-Centered Care of Children)

1. Demonstrate mastery of the above objectives
2. Calculate IV flow rate in gtts/minute, ml/hour, ml/day or hours of infusion
3. Determine the oral fluid requirement based on IV intake and 24-hour fluid allowance
4. Determine pediatric dosages based on milligram per kilogram
5. Calculate pediatric intermittent IV medications administered with infusion control sets, such as a metriset.

**SKILLS TESTING FOR CLINICAL COMPETENCY
ADVANCED PLACEMENT**

COMPETENCY TESTING #1:

Demonstration of competence for NS V10 (Foundations of Nursing Practice)

1. Insertion of a Foley catheter – male or female
2. Drawing two medications in a syringe – potential use of ampules, vials, and carpuject.
3. Demonstrate injection techniques and identify correct landmarks

COMPETENCY TESTING #2:

Demonstration of competency for NS V20 (Patient-Centered Care I and Family-Centered Care of Children)

1. Application of a wet to dry dressing
2. Preparation and administration of an IV infusion, including clearing the tubing and utilization of an infusion control device
3. Head to toe physical assessment – child or adult
4. Insertion of a nasogastric tube – child or adult

Tests to be Used for Challenge Testing

- Student must score 75% on each required test.
- All tests have 125 multiple choice questions and 2.5 hours are allowed for completion.

To challenge NS V10 and enter NS V20

- Basic Nursing Care I – (#620419)
 - Assesses understanding of the fundamentals of nursing care, with an emphasis on the nursing process, nursing diagnosis and the nursing care plan. Includes questions on health promotion and prevention, psychosocial health and professional accountability. Also addresses basic client needs for nutrition, safety, comfort, activity & rest.
- Basic Nursing Care II – (#641206)
 - Assess understanding of the fundamentals of nursing care, with an emphasis on setting priorities and critical thinking. Care of physiological needs (including oxygenation and the maintenance of fluid and electrolyte balance) and special needs (including preparation for surgery and diagnostic testing) are included. Also addresses the principles of medication administration

To challenge NS V20 and enter NS V30

- Nursing Care of Adults I (#710104)
 - Assesses understanding of concepts basic to the care of adult clients and their families, including prevention and health promotion, early detection, care management, health maintenance and restoration and psychosocial aspects of healthcare. Emphasis is on the nurse's role in providing care to adults experiencing alterations in fluid and gas transport; metabolic, gastrointestinal, musculoskeletal and renal function; fluid and electrolyte imbalances; and pre- and postoperative care.
- Nursing the Childbearing Family (#860604)
 - Assesses understanding of concepts basic to culturally competent nursing care of the childbearing family. Focuses on normal events of the childbearing experience, common health problems of mothers and infants, and intrapartal complications. Incorporates relevant items on communication, nutrition and pharmacology.

**CRITICAL BEHAVIORS FOR CLINICAL SKILLS
ADVANCED PLACEMENT**

Skill checklists will be provided to the applicant who wishes to test out of a course. The checklists will indicate the critical behaviors. The applicant is required to perform 80% of all behaviors correctly and 100% of the critical behaviors correctly in order to pass the clinical competency. The applicant who fails to meet these criteria on the first attempt will be given one additional testing opportunity on the same day as the first attempt.

NS V10 Foundations of Nursing Practice

- 1. PREPARATION & ADMINISTRATION OF TWO MEDICATIONS IN ONE SYRINGE FOR IM INJECTION (SEE SKILLS CHECKLISTS FOR SPECIFIC CRITERIA)**
 1. Check order and gather equipment. Selects appropriate syringe and needle size based on age, size of client & medication
 2. Perform the first and second check of medication administration. Calculated the correct dosage.
 3. Washes hands prior to procedure
 4. Identifies the client and ask for allergies.
 5. Provides privacy for the client
 6. Complete necessary assessments prior to medication administration (e.g. Blood pressure, heart rate, pain scale).
 7. Perform 3rd medication check and 7 rights of medication administration
 8. Explains the procedure to the client.
 9. Demonstrates and identifies all sites and anatomical landmarks for subcutaneous and intramuscular injection sites.
 10. Draws up the correct amounts of medication.
 11. Injects medication using correct technique (verifies last injection site, maintains surgical asepsis, dons gloves prior to administering, cleanses area, uses Z track for IM and pinches skin for subcut, and does not massage the site).
 12. Does not recap needle.
 13. Remove gloves and perform hand hygiene.
 14. Returns client to comfortable position and evaluate patient response.
 15. Maintains clean technique throughout procedure
 16. Utilizes standard precautions
 17. Completes the procedure in 15 minutes or less
 18. Documents appropriately

- 2. INSERTION OF INDWELLING FOLEY CATHETER (Female or male) (SEE SKILLS CHECKLISTS FOR SPECIFIC CRITERIA)**
 1. Checks the order and collect equipment. Review chart for allergies.
 2. Identifies the client
 3. Explains the procedure to the client
 4. Washes hands prior to procedure
 5. Screens the client for privacy
 6. Raises bed to waist height, prepares work area and lowers bed rail.

7. Dons clean gloves
8. Performs genitourinary assessment.
9. Teach patient about what you are doing.
10. Position patient in dorsal recumbent position.
11. Performs pericare.
12. Open sterile catheter kit and don sterile gloves to prepare for catheter insertion
13. Apply sterile drape.
14. Apply antiseptic to cotton balls, ensure clamp on drainage bag is closed, lubricates catheter tip 1-2 inches, and apply sterile water syringe to Y port.
15. Cleanses client's meatus with cotton balls or cleansing swabs
16. Inserts catheter gently into meatus and guides through urethra until urine drains, then
17. Inserts catheter 2-3 inches beyond this point
18. Fills balloon with sterile water via syringe in kit
19. Effectively secures catheter to client and drainage bag to bed
20. Repositions the client for comfort and returns bed to low position
21. Maintains sterile technique throughout the procedure
22. Utilizes standard precautions
23. Completes the procedure in 15 minutes or less
24. Documents appropriately

NS V20 – Patient-Centered Care I and Family-Centered Care of Children

1. **APPLICATION OF A WET-TO-DRY DRESSING**
(SEE SKILLS CHECKLISTS FOR SPECIFIC CRITERIA)
 1. Check order and gather equipment.
 2. Identifies the client
 3. Screens the client for privacy
 4. Washes hands prior to procedure
 5. Prepare the work area, assemble supplies, adjust bed to working height.
 6. Assess need for pain management prior to performing dressing change.
 7. Teach patient about what you are doing.
 8. Removes soiled dressings with clean gloves and disposes of them safely
 9. Assess wound (location, intact, drainage, undermining/tunneling, presence of eschar, granulation, stage, measure wound).
 10. Removes gloves using glove to glove and skin to skin technique
 11. Washes hands
 12. Prepares equipment using sterile technique. Don sterile gloves.
 13. Clean the wound. Dry surrounding skin with sterile gauze dressing.
 14. Pack wound maintaining sterility. Squeeze excess solution out of dressing before applying to the wound. Gently press to loosely pack the moistened gauze into the wound. Apply several dry sterile gauze pads over wet gauze. Place the ABD pad over the gauze.
 15. Remove and discard gloves. Apply skin protectant, secure dressing with tap, and label dressing with date and time
 16. Remove all remaining equipment
 17. Place patient in a comfortable position, side rails up and bed in low position.
 18. Perform hand hygiene.
 19. Evaluates patient's response to the procedure.
 20. Completes the procedure in 15 minutes or less
 21. Documents appropriately

2. PREPARATION AND ADMINISTRATION OF AN IV INFUSION, INCLUDING CLEARING THE TUBING AND UTILIZATION OF AN INFUSION CONTROL DEVICE

(SEE SKILLS CHECKLISTS FOR SPECIFIC CRITERIA)

1. Selects the correct IV solution and correct tubing
2. Utilizes the five rights of medication administration
3. Inspects IV bag for defects and fluid for color changes, foreign particles or cloudiness; checks expiration date
4. Removes tubing from packaging and carefully check for any discoloration or stains
5. Moves roller clamp to about 12" below drip chamber
6. Closes roller clamp
7. Places bag in hanging position or lying on flat surface
8. Removes plastic cover from tubing port
9. Removes cover from tubing spike
10. With hand behind the thumb guard, inserts spike into port with twisting motion
11. Squeezes the plastic drip chamber to fill ½ full
12. Removes cover from distal end of tubing and slowly fills tubing with fluid, making sure to flush air from siphon valve and insertion sites
13. Checks to see that all air is removed from tubing
14. Attaches date/time label to tubing
22. Identifies the client using identifiers, name and DOB (armband & patient verbalizes)
23. Explains the procedure to the client
24. Prepares to administer solution through infusion control device; correctly sets device controls
25. Maintains sterile technique throughout the procedure
26. Utilizes standard precautions
27. Completes the procedure in 15 minutes or less
28. Documents appropriately

3. HEAD-TO-TOE PHYSICAL ASSESSMENT – CHILD OR ADULT

(SEE SKILLS CHECKLISTS FOR SPECIFIC CRITERIA)

1. Obtains appropriate equipment – stethoscope, BP cuff, thermometer, etc.
2. Identifies the client using 2 identifiers
3. Explains the procedure to the client
4. Screens the client for privacy and drapes appropriately
5. Washes hands prior to procedure
6. Demonstrates an organized, comprehensive approach to physical assessment
7. Demonstrates proper use of inspection, auscultation, palpation, and percussion techniques
8. Evaluates symmetry of findings
9. Utilizes standard precautions
10. Completes the procedure in 15 minutes or less
11. Documents assessment on proper form, using appropriate terminology

**4. INSERTION OF A NASOGASTRIC TUBE – CHILD OR ADULT
(SEE SKILLS CHECKLISTS FOR SPECIFIC CRITERIA)**

1. Checks physician's order
2. Collects the required equipment
3. Perform hand hygiene and put on PPE, if indicated
4. Identifies the client
5. Explains the procedure to the client
6. Screens the client for privacy
7. Washes hands prior to procedure
8. Perform a gastrointestinal assessment.
9. Positions the client in high Fowler's position, unless contraindicated
10. Drapes a towel or pad over the client's chest
11. Places emesis basin within client's reach. Provides a glass of water with straw.
12. Measures tubing length for insertion & marks tubing
13. Determines which nostril to use
14. Put on gloves.
15. Lubricates the tube with water-soluble gel
16. Instructs client in head position throughout procedure
17. Inserts and advances tube asking patient to slightly flex head back against pillow
18. When pharynx is reach, instruct patient to touch chin to chest.
19. Offers water or ice and encourages swallowing, unless contraindicated
20. Continue to advance tube downward and backward when patient swallows.
21. Examines client's mouth
22. Discontinue procedure and remove tube if there are signs of distress, such as gasping, coughing, cyanosis, and inability to speak or hum.
23. Secure tube loosely.
24. Aspirates for stomach contents, validates placement via checks
 - a. gastric pH
 - b. X-ray to confirm placement
25. Apply skin barrier to tip and end of nose. Then secure tube to patient nose with tape.
26. Secures tube to client's gown based on measurement of exposed tube.
27. Attaches tube to suction equipment, if ordered, and sets pressure
28. Assist with or provide oral hygiene at 2-4 hour intervals. Offer analgesic throat lozenges or anesthetic spray for throat irritation as needed.
29. Remove equipment and return patient to position of comfort. Remove gloves, raise side rail and lower bed.
30. Utilizes standard precautions and performs hand hygiene.
31. Completes the procedure in 15 minutes or less
32. Documents size of tube and rate of enteral feeding or setting of gastric suction



VENTURA COLLEGE SCHOOL OF NURSING APPLICATION FOR ADVANCED PLACEMENT

Applications accepted August 1 - September 15 or February 1 - March 15

First Name: _____ Last Name: _____ Middle Initial: _____

Name on Most Recent Transcript

First Name: _____ Last Name: _____ Middle Initial: _____

Date of Birth (mm/dd/yyyy) _____ Student ID Number (900#): _____

Street Address: _____

City, State & Zip Code: _____ Telephone No.: _____

Personal E-mail Address: _____

VCCCD E-mail Address: _____

LVN License Number: _____ Exp. Date: _____

School Name: _____ Year of Graduation: _____
(where course work for license obtained)

History of health care related experience within the past two years:

____ I have worked in acute care. _____ I have worked in another setting as an LVN.
____ I have not worked in health care. Specify Setting: _____
____ I have worked in skilled nursing. _____

Option I

I am seeking advanced placement in the **Associate Degree Nursing** (ADN) Program and am requesting to be scheduled for theory and clinical competency assessment testing. Test #1 must be completed prior to taking #2. (Please check all that apply.) You will be contacted by the Nursing Department to schedule an appointment with the Nursing Director to discuss testing.

_____ Assessment Testing for Clinical Competency #1 (credit for NS V10)

_____ Assessment Testing for Clinical Competency #2 (credit for NS V20)

I understand I will submit a Petition for Credit by Examination form to a nursing counselor for each course challenged. _____ (*initial*)

I understand I will be charged for the competency examination and any required per unit fees for courses challenged. _____ (*initial*)

I understand that I must have a lifespan development course completed when admitted to the program. If I do not have the lifespan development course complete, I understand that I must use my one-time deferral. _____ (*initial*)

Option II

_____ I am requesting the 30-unit option. I understand that if admitted to the Nursing Program as a 30-unit option, I may NOT later become a candidate for the Associate Degree in Nursing. I understand that registered nurses licensed in California under this option may not be recognized in other states.
_____ (*initial*)

Option III

_____ I am a licensed vocational nurse requesting **admission into NSV20 without challenge testing.**

I understand I will need to meet with a Nursing Counselor to submit a Petition for Credit for Prior Learning to receive credit for NSV10 after successful completion of NSV20. _____ *(initial)*

I understand I will be charged the per unit fee associated with NSV10 after successfully completing NSV20. _____ *(initial)*

I understand that I must have a lifespan development course completed when admitted to the program. If I do not have the lifespan development course complete, I understand that I must use my one-time deferral. _____ *(initial)*

Upload a copy of your LVN License:

PLEASE READ CAREFULLY AND SIGN BELOW

_____ **I UNDERSTAND THAT FAILURE TO PROVIDE VENTURA COLLEGE WITH THE FOLLOWING ITEMS BY THE POSTED DEADLINE DATES WILL RESULT IN MY IMMEDIATE DISQUALIFICATION.**

_____ I understand and agree to undergo a Criminal Background Check as required of all entering nursing students. The fee is currently \$60.00 for this service. This background check is done prior to admittance to the program and is conducted by a Licensed Private Investigator.

_____ I understand and agree to undergo a drug and alcohol screen as required of all nursing students. The fee is currently \$50.00 for this service. The drug and alcohol screen are done prior to admission or prior to progression in the nursing program and is conducted utilizing the department's chain of custody procedure. Students with a positive drug or alcohol screen will be immediately disqualified for admission. The drug and alcohol screening may only be done one time and these results are used to determine eligibility. The Ventura College School of Nursing does not permit students to be under the influence of alcohol, marijuana, or other drugs while attending the nursing program; either medically prescribed or otherwise. The School of Nursing complies with the United States Code Controlled Substances Act, Title 21, Chapter 13, Drug Abuse prevention and Control.

_____ I understand that the following must be completed before entering the nursing program. If not completed, I understand I must use my one-time deferral. (This requirement does not apply to the 30-unit option.)

Growth and development across the lifespan: CD V03 or Psy V05 (MC: Psy M07; OC: Psy R108)

_____ I understand that it is my responsibility to schedule and take the TEAS exam or, if taken elsewhere, request ATI to send electronic TEAS results to VC Nursing Department by the established deadline of April 1st or October 1st. Failure to take the TEAS exam, or have TEAS results submitted by the deadline, or not attaining the established minimum success score 62% (ATI TEAS), will result in not meeting eligibility to be placed on the Advanced Placement eligibility (wait) list. (This requirement does not apply to the 30-unit option.)

_____ I understand that it is my responsibility to keep the School of Nursing informed of any change of address or telephone number. **Failure to do so may render my application ineligible if, for any reason, the college is unable to contact me.**

_____ I certify the **accuracy** and **completeness** of the preceding statements. I understand that my enrollment in the nursing program may be subject to termination if there has been willful misrepresentation of the information submitted. I authorize the use of this information by appropriate Ventura College personnel for the purpose of evaluating my qualifications for application to this program.

SIGNATURE _____ **DATE** _____

NOTE: INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED. ONCE YOU SUBMIT THIS APPLICATION, CHANGES CANNOT BE MADE. IT IS CRITICAL THAT YOU ENSURE YOUR APPLICATION IS THOROUGHLY COMPLETED AND ALL REQUIRED DOCUMENTS ARE ATTACHED BEFORE SUBMITTING IT. THE PROCESS CONCLUDES UPON MEETING WITH A VENTURA COLLEGE NURSING COUNSELOR TO REVIEW THIS APPLICATION.

The Ventura County Community College District and Ventura College are committed to providing an equal opportunity for admission, student financing, student support facilities and activities, and employment, regardless of race, color, religion, sex, or national origin.

COUNSELING TO COMPLETE:

Overall GPA _____ Science GPA _____ Number of Science Repeats _____

Satisfactorily completed all required ADN prerequisite coursework identified in the college catalog including:

Anatomy _____ Physiology _____ Human Development _____

Math _____ Microbiology _____ Chemistry with Lab _____

_____ Currently enrolled in Human Development _____

Remediation completed for:

Overall GPA _____ Science GPA _____ Repeats _____ TEAS _____

Date _____ Date _____ Date _____ Date _____

TEAS results are on file at Ventura College Yes No

If yes, please notate the attempt dates and scores:

_____ Student has been informed that they have one final attempt to take and pass the TEAS exam.

Additional Comments

COUNSELOR SIGNATURE _____ **DATE** _____

30 UNIT OPTION STATEMENT

I have chosen to enter the Ventura College nursing program as an advanced placement student under the 30-unit option. This is to verify that I have been informed that:

- The 30-unit option is valid only in the state of California. A registered nurse licensed under this option may not be recognized as a registered nurse in any other state;
- Once entered as a 30-unit option candidate, I cannot later request to graduate as an associate degree nurse, even if I later complete degree requirements;
 - Cannot walk in graduation;
 - Can attend pinning ceremony;
 - Cannot graduate and earn an ADN degree from Ventura College;
 - May not be able to transfer to an RN to BSN completion program once I earn the 30-unit option and achieve California state licensure;
- I understand that the option for advanced placement that would allow me to graduate as an associate degree nurse is offered through transfer / challenge only or returning as a generic student;
- Having withdrawn or failed from the 30-unit option, I will not be eligible to enter the nursing program as an Advanced Practice/LVN (AP/LVN).

Student Name (please print)

Student Signature

Director's Signature

Date

**NURSING CARE PLAN FORMS,
DIRECTIONS, &
SAMPLE NURSING CARE PLAN
Fall 2021 Version**

CLINICAL ORGANIZATION SHEET

Pt. _____ Code _____ Age _____ Student _____

Diagnosis		Surgery Date			Activity Order			
0645	0700	0800	0900	1000	1100	1200	1300	1400
<input type="checkbox"/> Check Orders/ progress Nts. for changes. <input type="checkbox"/> Check Mar for new times/meds Notes from report _____ _____ _____ _____ _____ Lab tests _____ IV sol. _____ Rate _____	<input type="checkbox"/> All Meds available <input type="checkbox"/> Sign/Check med sheet T _____ P _____ R _____ B/P _____ <input type="checkbox"/> Meds to be given VS Accucheck _____ <input type="checkbox"/> Meds given Treatments _____ <input type="checkbox"/> Physical Assessment <input type="checkbox"/> Special Assessment Neuro Cardio Resp GI/GU Skin MS Pain	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments Lab results _____ _____ _____ Diet ordered _____ % _____ cc _____	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments 1130 T _____ P _____ R _____ B/P _____ Accucheck _____ Meds I/O _____ NG _____ Treatments _____	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments		<input type="checkbox"/> Report off <input type="checkbox"/> Charting <input type="checkbox"/> Sign all meds

Pt. _____ Code _____ Age _____ Student _____

Diagnosis		Surgery Date			Activity Order			
0645	0700	0800	0900	1000	1100	1200	1300	1400
<input type="checkbox"/> Check Orders/ progress Nts. for changes. <input type="checkbox"/> Check Mar for new times/meds Notes from report _____ _____ _____ _____ _____ Lab tests _____ IV sol. _____ Rate _____	<input type="checkbox"/> All Meds available <input type="checkbox"/> Sign/Check med sheet T _____ P _____ R _____ B/P _____ <input type="checkbox"/> Meds to be given VS Accucheck _____ <input type="checkbox"/> Meds given Treatments _____ <input type="checkbox"/> Physical Assessment <input type="checkbox"/> Special Assessment Neuro Cardio Resp GI/GU Skin MS Pain	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments Lab results _____ _____ _____ Diet ordered _____ % _____ cc _____	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments 1130 T _____ P _____ R _____ B/P _____ Accucheck _____ Meds I/O _____ NG _____ Treatments _____	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments		<input type="checkbox"/> Report off <input type="checkbox"/> Charting <input type="checkbox"/> Sign all meds

<p>Safety Check: Perform when enter room</p> <p>IV fluid / rate - matches order <input type="checkbox"/> <input type="checkbox"/> Infusion device set <input type="checkbox"/> IV tubing - dates checked <input type="checkbox"/> Oxygen ordered level _____ <input type="checkbox"/> Suction working <input type="checkbox"/> Suction supplies @ bedside <input type="checkbox"/> Bag & mask - appropriate size <input type="checkbox"/> Face shield <input type="checkbox"/> No choking hazards (<3yo esp.) <input type="checkbox"/> Fall precautions <input type="checkbox"/> Rails up (as needed) <input type="checkbox"/> Pt ID (armband) – matches/on</p> <p><input type="checkbox"/> O₂ Sat monitor: Alarms set + Site rotation Heart rate HI _____ Heart rate LOW _____ LOW sat _____ HI sat _____</p> <p><input type="checkbox"/> Apnea monitor: Alarms set - Heart rate HI _____ Heart rate LOW _____ Apnea time _____</p> <p><input type="checkbox"/> Cardiac monitor: Alarms set Heart rate HI _____ Heart rate LOW _____ RATE matches apical _____</p>	<p style="text-align: center;">Patient Care Map</p> <p>Student Name: _____ Today's Date: _____</p> <p>Patient Initials: _____ Room #: _____ Admission Date: _____</p> <p>CODE Status: _____ Age: _____ Preferred Gender: _____ Sex: _____</p> <p>Weight: _____ Height: _____ Braden: _____ Fall Risk: _____</p> <p>Diet: _____ Activity: _____</p> <p>Allergies: _____ Religion: _____</p> <p>Developmental Stage: _____</p> <hr/> <p style="text-align: center;">Admitting Diagnosis/ History of Present Illness</p>	<p style="text-align: center;">Lab Values/Diagnostic Tests</p> <div style="text-align: center;"> </div> <div style="text-align: center; margin-top: 10px;"> </div> <ul style="list-style-type: none"> • Abnormal Lab Values • Diagnostic Test Results • Brief Explanation of Abnormals 												
<p>Past Medical/Surgical History</p>	<p style="text-align: center;">Full Head to Toe Narrative Assessment-- HIGHLIGHT ABNORMALS</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; padding: 5px;">Integumentary Include IV</td> <td style="width:80%;"></td> </tr> <tr> <td style="padding: 5px;">Neurologic</td> <td></td> </tr> <tr> <td style="padding: 5px;">Cardiovascular</td> <td></td> </tr> <tr> <td style="padding: 5px;">Respiratory</td> <td></td> </tr> <tr> <td style="padding: 5px;">GI</td> <td></td> </tr> <tr> <td style="padding: 5px;">GU</td> <td></td> </tr> </table>	Integumentary Include IV		Neurologic		Cardiovascular		Respiratory		GI		GU		<p style="text-align: center;">Treatments</p>
Integumentary Include IV														
Neurologic														
Cardiovascular														
Respiratory														
GI														
GU														

	MS		
	Psychosocial		
	24 Hr Intake		
	24 Hr Output		
<p align="center"><u>Pathophysiology: definition, etiology, risk factors, clinical manifestations, expected diagnostic evaluation, HIGHLIGHT THAT WHICH APPLIES TO YOUR PATIENT</u></p>			

Nursing Plan of Care (Columnar)

No. 1 Prioritized Nursing Diagnosis (physical)

No. 2 Prioritized Nursing Diagnosis (physical)

No. 3 Prioritized Nursing Diagnosis (psychosocial)

Assessment Subjective and Objective Data	Patient Goals, Desired Outcomes & Time Frame	Nursing Interventions (Include frequencies)	Rationale (Text & pg. number)	Evaluation (Effectiveness of Nursing Interventions)
	The patient will As Evidenced By: A B C	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5 Goal Accomplished(circle) YES NO As evidenced by: a. b. c.

Height _____ Weight _____

MEDICATIONS (Oral, IM, SQ, IV, topical, etc.)

Allergies:

Medication Trade/Generic (List both)	Classification/Action	Seven Rights and Compatibility	Indication for <i>THIS</i> Patient	Expected Outcome for this patient	Major Side Effects/ Nursing Implications
1		Dosage _____ Route _____ Frequency _____ <input type="checkbox"/> AC <input type="checkbox"/> PC <input type="checkbox"/> c meals Safe Dose: <input type="checkbox"/> Y <input type="checkbox"/> N Crush: <input type="checkbox"/> Y <input type="checkbox"/> N Compatible: <input type="checkbox"/> Y <input type="checkbox"/> N			
2		Dosage _____ Route _____ Frequency _____ <input type="checkbox"/> AC <input type="checkbox"/> PC <input type="checkbox"/> c meals Safe Dose: <input type="checkbox"/> Y <input type="checkbox"/> N Crush: <input type="checkbox"/> Y <input type="checkbox"/> N Compatible: <input type="checkbox"/> Y <input type="checkbox"/> N			
3		Dosage _____ Route _____ Frequency _____ <input type="checkbox"/> AC <input type="checkbox"/> PC <input type="checkbox"/> c meals Safe Dose: <input type="checkbox"/> Y <input type="checkbox"/> N Crush: <input type="checkbox"/> Y <input type="checkbox"/> N Compatible: <input type="checkbox"/> Y <input type="checkbox"/> N			
4		Dosage _____ Route _____ Frequency _____ <input type="checkbox"/> AC <input type="checkbox"/> PC <input type="checkbox"/> c meals Safe Dose: <input type="checkbox"/> Y <input type="checkbox"/> N Crush: <input type="checkbox"/> Y <input type="checkbox"/> N Compatible: <input type="checkbox"/> Y <input type="checkbox"/> N			

CARE PLAN DIRECTIONS

- Completion of CAREMAP for selected patient using data gathered
- Complete the following:
 - Name, allergies, code status
 - HPI, Surgical Procedure / date,
 - PMH
 - Definition of Medical Diagnosis
 - Initiate pathophysiology including expected diagnostic evaluation with rationale for tests and clinical manifestation for disease with patient's highlighted
- Research / list on form
 - All **critical** lab values or
 - Any diagnostic tests (lab / x-ray etc.) that relate to the client's diagnoses.
These tests require explanation of the test is abnormal specific to this client only.
- Complete an organizational tool to utilize during clinical shift
- Medication sheet: List all medications ordered and research / apply all meds anticipated to administer.
- Update your care map with new diagnostic test results / changes in physician orders (medications, treatments, etc.)
- During care, utilize assessment data to brainstorm highest priority Nursing Diagnosis for your patient.
- Document complete head to toe assessment **w/ highlight abnormal assessment**
- Complete research of medications and diagnostic tests: Be sure to personalize to this patient
- Prepare organizational tool for second day of clinical
- Using assessment data identify the most important NS V20 pathophysiological NANDA**
- Complete columnar:
 - Develop priority **physiological** NANDA (3-part NANDA with goal, interventions, rationale and evaluation)
 - Complete second high priority physiological Nanda (3-part diagnostic statement only)
 - Complete third Psychological Nanda (3-part diagnostic statement only)
 - Be prepared to give SBAR report & share Nanda in preconference.
- Complete evaluation on 6-columnar
- Check the grading rubric to make sure that all areas have been addressed

SAMPLE NURSING CARE PLAN

*Yellow highlights indicate abnormal assessment findings.

Safety Check: Perform when enter room

- IV fluid / rate - Saline locked
- Infusion device set -NA
- IV tubing -NA
- Oxygen ordered level -NA
- Suction working -NA
- Suction supplies @ bedside -Yes
 - Bag & mask - appropriate size
- Face shield -Yes
- No choking hazards (<3yo esp.) -Yes
- Fall precautions -Yes
- Rails up (as needed) -Yes
- Pt ID (armband) – matches/on -Yes

- O₂ Sat monitor: Alarms set + -NA
Site rotation

Heart rate HI _____

Heart rate LOW _____ LOW sat

HI sat _____

- Apnea monitor: Alarms set - NA
Heart rate HI _____

Heart rate LOW _____ Apnea time

- Cardiac monitor: Alarms set -NA

Patient Care Map

Student Name: _____ Today's Date: 02/03/2021
 Patient Initials: J.F. Room #: 4108 Admission Date: 01/30/2021
 CODE Status: Full Age: 82 Preferred Gender: F Sex: F
 Weight: 61.9kg Height: 64in Braden: 20 Fall Risk: _____
 Diet: Consistent Carb Diet Activity: With assistance
 Allergies: Lipitor, Amoxicillin Religion: None
 Developmental Stage: Integrity v Despair

Admitting Diagnosis/ History of Present Illness

Chief Complaint: Blood in stool

Admit Dx: Sigmoid Colon Cancer

Admitting Vitals:

T-36.6 (oral)

P- 80

RR-18

BP 130/70

O2-99

Hx of Present Illness:

Last year Pt presented with blood in her stool, a colonoscopy was scheduled but delayed because of covid. Colonoscopy done one month ago showed Pt had a cancerous 3cm sigmoid polyp and her robotic laparoscopic lower anterior resection was scheduled and successfully done on 01/31/2021

Diagnostic Test Results:

Endoscopy: 3 cm sigmoid polyp

TEST	1/31	2/03
WBC (5.0-10.0)	10.0	5.7
RBC	NA	3.44
Hgb (M 14-18; F12-16)	10.2	10.6
Hct (M 42-42, F 37-47)	30.1	31.6
MCV (80-95L)	NA	91.9
MCH (27-31)	NA	30.9
MCHC (32-36%)	NA	33.6
RDW	NA	15.2
Plt (150-400)	92	142
ABS Neut	NA	4.0
Neut %	NA	71.2
Lymph (20-40%)	NA	14.2
Mono (2-8%)	NA	12.2
Eos (1-4%)	NA	2.1
Baso (0.5-1%)	NA	0.3
Na (135-145)	135	132
K (3.5-5)	3.3	4.6
Cl (98-106)	107	103
CO2 (35-45)	20	20
Anion Gap	NA	9
Glucose (74-106)	116	109
BUN (10-20)	25	36
Creatinine (M 0.6-1.2 F 0.5-1.1)	2.21	1.77

Heart rate HI _____

Heart rate LOW _____ RATE matches

apical _____

SURGICAL/ MED HISTORY:

- Diabetes Mellitus, Type II
- Hypertension

- Mastectomy; L breast (1980)
- Cesarean section (1954, 1965)
- Knee Surgery (1986)
- Parathyroidectomy (1986)

TREATMENTS:

Colon cancer being treated by robotic laparoscopic lower anterior resection

Integumenta+ry	<p>Skin warm, dry, and smooth. No elastic turgor or edema noted and skin clear without odor. 22 gauge IV saline lock on right brachial. Finger and toe nails clean, pink, with CRT <3. Abdomen has a 2 inch long incision under umbilicus covered with 5 steristrips, incision dry and clean with small amounts of dry blood and skin looks slightly bruised around it. Abdomen also has a total of 4 small incisions, one in each quadrant each covered with a single steristrip, all clean and dry without any skin irritation.</p> <p>HEENT: Smiling facial expression with symmetrical head shape. Pt wearing eye glasses, pupils 4mm each, brisk reaction, and white sclera without drainage. No use of hearing aids, no issues with hearing, and no lesions or drainage. Capable of scent without any lesions or drainage from nose. No teeth and Pt did not have dentures with her, mucous membranes and gums moist and pink, tongue at midline, no odor. Throat clear, no lesions or inflammation noted, moist without difficulty swallowing. No JVD, no enlarged thyroid noted, trachea at midline, and no signs of swollen lymph nodes.</p>
Neurologic	A/O x4. Moderate and clear tone. Cooperative with feelings appropriate to situation and verbalizes realistic feelings of others and the future. Expresses full thoughts with realistic perceptions. Recalls past events correctly. Able to determine similarities and differences between objects. Gives logical response to what if questions. Can identify sharp and dull stimuli. Swallows without difficulty and moves all extremities on command. 15 GCS, 30/30 MMSE. Correctly identifies scent, PEERLA, accurate taste and hearing.
Cardiovascular	No abnormal pulsations noted. All heart sounds regular rate, rhythm, no murmurs auscultated. Apical pulse 78. BP 127/70. All temporal, carotid, brachial, radial, popliteal, pedal pulses present, symmetrical with regular rhythms. CRT<3 in fingers and toes.

BUN/ Cr Ratio	NA	20.3
eGFR Afr/ Am	NA	33
eGFR NonAfr/Am	NA	27
Ca (9.0-10.5)	9.0	10.5
Corrected Ca	NA	11.3
Phosphorous	NA	2.9
Mg	NA	1.9
Protein Ttl (6.4-8.3)	NA	6.6
Albumin (3.5-5.0)	NA	3.0
Globulin (2.3-3.4)	NA	3.6
A/G Ratio	NA	0.8
Bilirubin Ttl (0.3-1.0)	NA	0.5
ALT (4-36)	NA	9
AST (0-35)	NA	18
ALK (30-120)	NA	91
LDH	NA	NA
Lipase Level (0-160)	NA	NA
Lactic Acid (5-20)	NA	NA

RBC 3.44:
Unable to determine trend, but low possible due to blood lost from surgery. If RBC was also low prior to surgery it could be caused from a blood loss from colon cancer (Pagana 396-397)

Respiratory	Normal rate, rhythm, depth bilaterally during inspiration and expiration. No adventitious breath sounds auscultated throughout. RR 18, SaO2 99%. No cough but able to cough on demand.
GI	Abdomen has a 2 inch long incision under umbilicus covered with 5 steristrips, incision dry and clean with small amounts of dry blood and skin looks slightly bruised around it. Abdomen also has a total of 4 small incisions, one in each quadrant each covered with a single steristrip, all clean and dry without any skin irritation. Pt states abdominal pain at 3/10 with certain movements with hyperactive bowel sounds. Pt continent but had two episodes of uncontrollable diarrhea that were loose, runny, and brown/ yellow in color.
GU	Pt urinated during bowel movement, unable to assess amount and color. Pt states no issues with urination
MS	Body build slightly over weight but reflects age and lifestyle. Upper and lower extremities 4/5. Posture crouching over while ambulating and sitting and patient hugging at abdominal area. No tenderness, redness, or crepitus noted or stated by PT on any muscles or joints. Slow but steady and balanced gait, no immobile body parts. Did not perform Romberg test.
Psychosocial	Pt friendly and cooperative with staff during shift and maintained a very delightful attitude during conversations. Pt states being concerned about going home because she doesn't feel safe being alone, her granddaughter will be there to help but Pt states she has no nursing knowledge so she's worried about that. Pt also very concerned about covid stating she did not want to go to a nursing home because "everyone there gets the virus". Pt also very cautious with mask and repeatedly requested multiple masks
24 Hr Intake	800ml

Hgb 10.2/10.6:
Low levels but increasing due to low RBC levels from surgery and colon cancer. The lower Hgb from before surgery could reflect that RBC was also likely low at that time. The increase reflects less blood lost (Pagana 255)

Hct 30.1/31.6:
Low levels but increasing due to low RBC levels from blood loss during surgery and from colon cancer (Pagana 248)

RDW 15.2:
RDW level low due to lower levels of RBCs, RDW is red cell distribution width, low RDW reflects the RBCs as being small in size (Pagana 399)

Plt 92/142:
Low levels but increasing possibly due to blood lost during surgery, levels are increasing because the marrow is producing new platelets (Pagana 362)

Lymph 14.2:
Level low possibly due to blood lost from surgery (Pagana 472)

Mono 12.2:
Level low possibly due to blood lost from surgery (Pagana 472)

Na 135/132:
Sodium regular on day of surgery but decreased days after surgery possibly due to increased fluid amount causing more blood volume. Or possible from lack of sodium intake

K 3.3/4.6:

24 Hr Output	500ml
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Pathophysiology

Colon cancer is caused from colon cancerous polyp developments on the inner lining of the colon or rectum. Polyps refers to any protrusion into the lumen of GI tract, they can be benign or malignant.

Clinical Manifestations:

The manifestations of colon cancer depend on the anatomic location and function of the bowel segment containing the tumor. On the right side of the colon where water and electrolyte absorption happens, manifestations typically include **black tarry stools which can signify bleeding into the intestinal lumen**. The left side of the colon is typically manifested via obstructions. This can be presented with abdominal cramping and fullness, with pencil shaped stools, and a person might notice the passage of stool or flatus relieves abdominal pain.

Complications:

Complications of colon cancer can include electrolyte and fluid imbalance from excessive blood lost or obstruction. The cancer in the colon could also metastasize to surrounding organs and tissue.

Risk Factors:

Rick factors associated with colon cancer include **increased age**, dietary factors such as high fat/ low fiber diets, certain bowel conditions like Crohn’s disease, and a hereditary predisposition

Potassium low but increased possibly due to low intake and elevated glucose (Pagana 368)

Glucose 116/109: Glucose levels are 82-115 in elderly, and Pt has type II diabetes mellitus. Could have also been a stress response from surgery (Pagana 229)

BUN 25/36: Increased BUN possibly due to the patient having type II diabetes and its affect on the kidneys (Pagana 453)

Creatinine 2.21/1.77: Creatinine elevated due to the pt having type II diabetes and its affect on the kidneys (Pagana 172)

Albumin 3.0
Albumin low possibly due to pts surgery, large volumes of protein are lost from the intestines because absorption is inadequate (Pagana 382)

Medication Form

Student Name: _____ Pt. Initials: J.F. Ht.: 64in Wt.: 61.9kg
 Date of Care: 02/03/2021 Allergies: Lipitor, Amoxicillin

Date Ordered	Medication	Times Given	Class:	Nursing Implications	Expected Outcomes	Evaluation
01/30/2021	Generic Name: Amlodipine Trade Name: Norvasc Dose: 5mg Route: PO Frequency: Daily Safe Range: 10mg/day Age Related Considerations: GERI: dose reduction recommended because increased risk of hypotension Black Box Warnings: <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	0900	Class: Antihypertensive, Calcium channel blocker Action: Inhibits the transport of calcium into myocardial and vascular smooth muscle cells resulting in inhibition of excitation-contraction and subsequent contraction Side Effects (Top 5): Peripheral edema, dizzy, fatigue, bradycardia, hypotension Why Administered: For hypertension, decreases BP	Monitor BP, pulse, I/O, signs of Heart failure (peripheral edema, rales/crackles, dyspnea, weight gain, JVD) LAB: ECG	Decrease in BP	Vitals at 0830: BP: 118/73 P:73 No edema, lungs clear, no JVD After administration: Did not recheck BP, but Pt didn't show any signs of side effects

Date Ordered	Medication	Times Given	Class:	Nursing Implications	Expected Outcomes	Evaluation
01/30/2021	Generic Name: Aspirin Trade Name: Ecotrin Dose: 162mg Route: PO Frequency: BID Safe Range: 50-325mg/day Age Related Considerations: GERI: increased risk of adverse reactions especially GI	0900	Class: Antipyretic, Nonopioid analgesic Action: Produce analgesia and reduce inflammation and fever by inhibiting the production of prostaglandins. Decrease platelet aggregation	Assess pain, fever Labs: hepatic (AST, ALT, Alkaline Phosphatase) Platelet count, hematocrit	Prevention of transient ischemic attacks Prevention of myocardial infarction	Pt did not have any adverse side effects Patients pain: 0 AST, ALT, and ALK not available Hgb: 10.2 (low) Hct: 30.1 (low)

	bleeding; more sensitive to toxic levels Black Box Warnings: <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		Side Effects (Top 5): dyspepsia (indigestion), epigastric distress, nausea, hepatotoxicity Why Administered: Inflammatory disorders like rheumatoid arthritis and osteoarthritis. Mild to moderate pain. Fever. Prophylaxis of transient ischemic attacks and myocardial infarction	Toxicity overdose: tinnitus, headache, hyperventilation, mental confusion, diarrhea, sweating		
--	---	--	--	---	--	--

Date Ordered 01/30/2021	Medication Generic Name: Cyanocobalamin Trade Name: Vitamin B-12 Dose: 1000mcg Route: PO Frequency: QDAY Safe Range: <u>PO (Adults):</u> For hematologic remission only– 1000–2000 mcg/day. Age Related Considerations: Black Box Warnings: <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Times Given 0900	Class: Antianemics, Vitamin Action: Necessary coenzyme for metabolic processes, including fat and carbohydrate metabolism and protein synthesis. Side Effects (Top 5): Headache, heart failure, diarrhea, itching, thrombocytosis Why Administered: Corrects manifestations of anemia (caused by GI lesions). Corrects vitamin B-12 deficiency	Nursing Implications Assess for signs vitamin B-12 deficiency: pallor, neuropathy, psychosis, red/inflamed tongue Lab: hemoglobin, hematocrit, and reticulocyte count before treatment	Expected Outcomes Resolution of the symptoms of vitamin B12 deficiency. Increase in reticulocyte count. Improvement in manifestations of pernicious anemia	Evaluation Skin warm and no signs of pallor, tongue pink, no numbness or weakness, PT A&Ox4 without any signs of psychosis Hgb: 10.2 (low) Hct: 30.1 (low)
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<p>Date Ordered 01/30/2021</p>	<p>Medication Generic Name: Enoxaparin Trade Name: Lovenox Dose: 30mg Route: SQ Frequency: QDAY Safe Range: <i>Abdominal surgery</i>– 40 mg once daily Age Related Considerations: Geriatric: Older adults may have ↑ risk of bleeding due to age-related ↓ in renal function Black Box Warnings: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Major hemorrhages including retroperitoneal and intracranial bleeding have been reported</p>	<p>Times Given 0900</p>	<p>Class: Anticoagulant Action: Potentiates the inhibitory effect of antithrombin on factor Xa and thrombin Side Effects (Top 5): edema, bleeding, anemia, headache, insomnia Why Administered: Prevention of venous thromboembolism</p>	<p>Nursing Implications Assess for signs of bleeding and hemorrhage (bleeding gums; nosebleed; unusual bruising; black, tarry stools; hematuria; fall in hematocrit or BP; guaiac-positive stools); bleeding from surgical site. Lab: CBC, platelet count, hematocrit</p>	<p>Expected Outcomes Prevention of deep vein thrombosis and pulmonary embolism</p>	<p>Evaluation No signs of bleeding/hemorrhaging. Hgb: 10.2 (low) Hct: 30.1 (low)</p>
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<p>Date Ordered</p>	<p>Medication Generic Name: Insulin Trade Name: LISPRO Dose: 0-8 units Route: SQ Frequency: with meals Safe Range: 0.5-1.2 units/kg/day Age Related Considerations: Pedi: Children <3 yr (safety of lispro insulin not established) or <18 yr (safety of 75/25 mix not established) Black Box Warnings: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Severe hypoglycemic risk 3 hours post injection</p>	<p>Times Given</p>	<p>Class: Antidiabetic hormone Action: Lowers blood glucose by: stimulating glucose uptake in skeletal muscle and fat, inhibiting hepatic glucose production. Side Effects (Top 5): Hypoglycemia, hypokalemia, erythema, swelling Why Administered: control of hyperglycemia in diabetic patients</p>	<p>Nursing Implications Assess for symptoms of hypoglycemia (anxiety, tingling in hands, feet, lips, tongue, confusion, etc.) Monitor body weight LABS: monitor blood glucose every 6 hours</p>	<p>Expected Outcomes Control of blood glucose levels in diabetic patients without the appearance of hypoglycemic or hyperglycemic episodes</p>	<p>Evaluation Blood glucose at 0700 was at 98</p>
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Date Ordered	Medication	Times Given	Class: Antihypertensive, Beta Blocker Action: Blocks stimulation of beta1 (myocardial)-adrenergic receptors. Does not usually affect beta2 (pulmonary, vascular, uterine)-adrenergic receptor sites. Side Effects (Top 5): fatigue, weakness, depression, bradycardia, pulmonary edema Why Administered: Decreased BP and heart rate. Decreased frequency of attacks of angina pectoris. Decreased rate of cardiovascular mortality and hospitalization in patients with heart failure.	Nursing Implications Assess BP, ECG, P Monitor I/O, daily weights LAB: BUN, potassium, uric acid	Expected Outcomes Decrease in BP Prevention of MI	Evaluation <u>Vitals at 0830:</u> BP: 118/73 P:73 BUN: 25 After administration: Did not recheck BP, but Pt didn't show any signs of side effects
01/30/2021	Generic Name: Metoprolol Trade Name: Dose: 100mg Route: PO Frequency: QDay Safe Range: 25-100mg/day Age Related Considerations: Pedi: Safety and effectiveness not established in children <18 yr (tablets, extended-release tablets, and injection) or children <6 yr (extended-release capsules). Black Box Warnings: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no This warning is issued in regard to the dangers of the sudden discontinuation of Metoprolol which has been reported to worsen chest pain (angina), irregular heartbeat (ventricular arrhythmias) and may increase the risk of a heart attack (myocardial infarction). Beta blocker therapy, especially in those suffering from coronary artery disease (CAD), should be tapered off over a week or two to avoid increased heart rate (tachycardia), high blood pressure (hypertension) and inadequate circulation (ischemia).	0900				

Pt. JF Code FULL Age 82 Student Date 02/03/2021

Diagnosis COLON CANCER Surgery Type/Date BOWEL RESECTION Activity Order Ambulate with assistance

NANDA AND Pt. Centered Goal with 3-4 Expected Outcomes & interventions for today (ON BACK OF SHEET)

0645	0700	0800	0900	1000	1100	1200
<input checked="" type="checkbox"/> Check Orders/ progress Nts. for changes. <input type="checkbox"/> Check Mar for new times/meds Notes from report: Pt refusing to walk, small pebble like stools, Pt only taking Tylenol for pain <hr/> Lab tests _____ IV sol. – saline locked Rate _____	<input type="checkbox"/> All meds available <input type="checkbox"/> sign/check med sheet T _____ P <u>80</u> R <u>18</u> B/P <u>127/70</u> Pain <u>0</u> O ₂ Sat <u>99</u> <input type="checkbox"/> Nasal Cannula <input type="checkbox"/> Room Air Accucheck <u>109</u> <input type="checkbox"/> Meds to be given Treatments _____ <input checked="" type="checkbox"/> Assessment	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments Lab results Eat breakfast in chair Pero care with BMs Incentive spirometer _____ Diet ordered : consistent carb % 30 <u> </u> cc <u>300</u>	<input checked="" type="checkbox"/> Meds <input type="checkbox"/> Treatments <input type="checkbox"/> Walk <input type="checkbox"/> Physical Therapy <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments 1130 T _____ P _____ R _____ B/P _____ Pain _____ O ₂ Sat _____ Accucheck <u>98</u> <input type="checkbox"/> Meds given Intake _____ Output _____ NG _____ Treatments	<input type="checkbox"/> Meds <input type="checkbox"/> Treatments <input type="checkbox"/> Report off to RN <input type="checkbox"/> Charting <input type="checkbox"/> Sign all meds	

Nursing Plan of Care (Columnar)

No. 1 Prioritized Nursing Diagnosis (physical)

Dysfunctional gastrointestinal motility r/bowel resection 2nd to colon cancer AEB abdominal pain, change in bowel sounds, and acceleration of gastric emptying

No. 2 Prioritized Nursing Diagnosis (physical)

Imbalanced nutrition r/t bowel resection 2nd to colon cancer AEB abdominal pain, diarrhea, and an intake of 20% of patient's food

No. 3 Prioritized Nursing Diagnosis (psychosocial)

Anxiety r/t becoming infected with covid AEB continuously requesting extra masks, stating "I can't go to a nursing home, everyone's got the virus there", and each time someone new came in the room patient would grab a second mask and cover her already masked face with it

Assessment Subjective and Objective Data	Patient Goals, Desired Outcomes & Time Frame	Nursing Interventions (Include frequencies)	Rationale (Text & pg. number)	Evaluation (Effectiveness of Nursing Interventions)
<p>Objective:</p> <p>-Bowel resection</p> <p>-Hyperactive bowel sounds on day of care</p> <p>-Hypoactive bowel sounds charted the previous 2 days</p> <p>-Diarrhea on day of care</p> <p>-Small hard stools charted the previous 2 days</p> <p>-Pt consumed less than 30% of each meal on Pt's chart</p>	<p>The patient will improve current manifestations of dysfunctional gastrointestinal motility by end of shift</p> <p>As Evidenced By:</p> <p>A Have decreased abdominal pain with each day</p> <p>B Have normal bowel sounds by end of the shift</p> <p>C Able to better anticipate when needing to pass</p>	<p>1 (Action) Help the client out of bed to walk at least two times per day</p> <p>2 (Action) Improve access to toileting via a bed side commode</p> <p>3 (Action) Encourage Pt to have many small meals throughout the day</p> <p>4 (Assess) Inspect, auscultate for bowel sounds noting characteristics and frequency; palpate and percuss the abdomen</p> <p>5 (Teach) Teach patient the importance of fluid intake and the signs and symptoms associated with dehydration and</p>	<p>1 "Exercise may increase gastrointestinal motility" (Ackley 428)</p> <p>2 "Acute or transient fecal incontinence frequently occurs in the acute care or long term care facility secondary to mentation changes associated with environment change, inadequate access to toileting facilities, insufficient assistance with toileting, or inadequate privacy when attempting to toilet" (Ackley 537)</p> <p>3 "A small randomized controlled trial found that diets with smaller particle size reduced the symptoms of gastroparesis in diabetic clients" (Ackley 428)</p> <p>4 "Hypoactive bowel sounds are found with decreased motility as with peritonitis from paralytic ileus or from late bowel obstruction. Hyperactive</p>	<p>1 Effective- Pt walked twice the amount from the day before and expressed that her stomach feels less painful than days before</p> <p>2 Ineffective- Pt unable to hold her loose bowels in time for the commode</p> <p>3 Effective- Pt ate 20% of her breakfast, then ate a yogurt at 1030 and drank half of her protein drink</p> <p>4 Effective- Assessed and charted bowel sounds which had changed from the previous days showing movement her bowels compared to before</p>

<p>Subjective:</p> <p>-Pt states abdominal tenderness during movement</p> <p>-Pt states unable to hold bowel from coming out because its so loose</p>	<p>a bowel movement</p>	<p>electrolyte imbalance that could develop from continuous diarrhea</p>	<p>bowel sounds are association with increased motility” (Ackley 427)</p> <p>5 “Severe diarrhea can cause deficient fluid volume, electrolyte imbalance, extreme weakness, and possible state of shock” (Ackley 338)</p>	<p>5 Effective- Pt stated she understands the importance of drinking fluids and eating consistently and they will help her stay healthy</p> <p>Goal Accomplished(circle) YES NO</p> <p>As evidenced by: A Yes- Pt’s pain decreased in comparison to previous days</p> <p>B No- Pt had hyperactive bowel sounds during shift</p> <p>C No- Pt unable to determine the need to defecate in time to get to commode</p> <p>Revisions: I’d like to improve my assessment and charting time. With this patient the morning became very busy very fast with loose bowels and overall the speed at which patient could do things. Going forward I will attempt to complete assessment and charting before 9am</p>
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Works Cited

Ackley, B. J., Ladwig, G. B., Beth, M. F., Martinez-Kratz, M. R., & Zanotti, M. (2020). *Nursing diagnosis handbook: An evidence-based guide to planning care* (12th ed.). St. Louis, MO: Elsevier.

Banasik, J. L., & Copstead, L. C. (2019). *Pathophysiology*. St. Louis, MO: Elsevier.

Pagana, K. & Pagana, T. (2018). *Mosby’s Manual of Diagnostic and Laboratory Tests* (6th ed.). St. Louis: Mosby-Year Book, In

CHALLENGE OPTIONS AVAILABLE

1. **LICENSED VOCATIONAL NURSE**

- a. Current licensure as a vocational nurse (LVN) in the state of California allows the student to be admitted directly into NS V20. Once the student successfully passes NS V20 he/she may advance to NS V30 and then NS V40 to earn an Associate Degree in Nursing. The student must pay the per unit fees required for NS V10 and submit a Petition for Credit for Prior Learning (for NS V10).
- b. Current licensure as a vocational nurse (LVN) in the state of California allows the student the option to enter directly into NS V30 once the LVN has challenged NS V10 and NS V20 successfully. If the LVN attempts to challenge NS V10 and fails, the LVN must apply to the generic program to enroll in NS V10. If the LVN passes the NS V10 challenge exam and then passes the NS V20 challenge exam, they may enter into NS V30 to complete the program and earn an Associate Degree in Nursing. The student will pay a fee for each challenge examination and any required per unit fee for courses challenged.
- c. Current licensure as a vocational nurse (LVN) in the state of California and application as a 30 unit option allows the student to be admitted directly into NS V31 and NS V41 to earn a 30 unit option only. The 30 unit option does not lead to an Associate in Science Degree and the registered nurse licensed under this option may not be eligible for reciprocity of licensure with other states.

2. **Licensed Vocational Nurse AND is a former Ventura College nursing student who failed out of the Ventura College nursing program.**

- a. For the former Ventura College nursing student who failed out of the Ventura College nursing program in NS V10 or NS V20: Current licensure as a vocational nurse (LVN) in the state of California allows the student to be admitted directly into NS V20. This option is available for the former Ventura College nursing student who failed out of the program in NS V10 or NS V20. Once the student successfully passes NS V20 he/she may advance to NS V30 and then NS40 to earn and Associate Degree in Nursing.
 - If the applicant is entering the nursing program as a student in a new category, e.g. LVN, their prior TEAS tests as a generic student will not be considered. The applicant may “restart” and can take the ATI TEAS test two more times in order to gain entrance to the nursing program. This may include a remediation if they failed the ATI TEAS test while applying for the Advanced Placement Option.
 - If the applicant had failed the ATI TEAS test twice in the process of trying to gain entry as a generic student, then obtains an LVN license – the LVN program counts as remediation for the TEAS test. This form of remediation counts as a “restart” which enables the student to take the ATI TEAS test for a third and fourth time with remediation if they failed as an Advanced Placement Option.

OR

For the former Ventura College nursing student who failed out of the Ventura College nursing program in NS V10 or NS V20: Current licensure as a vocational nurse (LVN) in the state of California allows the student the option to enter directly into NS V30 once the LVN has challenged NS V10 successfully and then NSV20 successfully. If the LVN attempts to challenge NS V10 and fails, that LVN must apply to the generic program to enroll in NSV10 in order to complete the program and earn an Associate Degree in Nursing. The student will pay a fee for each challenge examination and any required per unit fee for courses challenged.

OR

The student could take the 30 unit option.

- b. For the former Ventura College nursing student who failed out of the Ventura College nursing program in NS V30: Current licensure as a vocational nurse (LVN) in the state of California allows the student the option to enter directly into NS V30 **OR** complete a 30 unit option.

(Former AP/LVN students in the Ventura College Nursing Program, who failed out of the program after successfully completing NS V10 and/or NS V20, **may not reenter as a 30 Unit Option. Both are considered AP/LVN options. The former student has the option of coming back as a generic student in one of the following ways. The former AP/LVN student may:**

- Come in as a new NS V10 generic student. The applicant must meet all of the current entry requirements including GPA and ATI TEAS testing. The applicant qualifies for a “restart” and may take the ATI TEAS test an additional 2 times with remediation if necessary. If the former student decides to apply, the Counselors will attach a Petition to Repeat Due to Significant Lapse of Time form to the application before it is sent to the Nursing Department.

OR

- Take the competency test for NS V10 and NS V20. If the applicant successfully passes the competency test (s), the grade will not be reposted on the transcript for that level, and the applicant would enter at either the NS V20 level (if the NS V10 competency test was passed) or the NS V30 level (if both the NS V10 and NS V20 competency tests were passed). The applicant must meet all of the current entry requirements including GPA and ATI TEAS testing. The applicant qualifies for a “restart” and may take the ATI TEAS test an additional 2 times with remediation if necessary. If the former student decides to apply, the Counselors will attach a Petition to Repeat Due to Significant Lapse of Time form to the application before it is sent to the Nursing Department.
- If the applicant fails the competency test(s), he/she would have to start as a generic student in NS V10. The applicant must meet all of the current application requirements including GPA and ATI TEAS testing. The applicant qualifies for a “restart” and may take the ATI TEAS test an additional 2 times with remediation if necessary. If the former student decides to apply, the

Counselors will attach a Petition to Repeat Due to Significant Lapse of Time form to the application before it is sent to the Nursing Department.

3. FOR THE STUDENT WHO HAS ATTENDED ANOTHER NURSING PROGRAM PRIOR TO VENTURA COLLEGE SCHOOL OF NURSING

- a. Students may challenge an unlimited number of units when external exams are used, for example the NLN achievement exams, for coursework taken elsewhere.
- b. Students may only challenge 12 units credit if Ventura College School of Nursing examinations are used.
- c. Students may only earn advanced NS V20A credit if they have greater than 20 units nursing coursework from another institution, that is the coursework taken elsewhere is equivalent to the content in NS V10 and NS V20. The student may then challenge NS V10 and NS V20 and earn credit at Ventura College if the challenge exams are successfully passed.
- d. Student begins by challenging NS V10 with the NLN exam. If the student passes the NS V10 challenge then he/she may challenge NS V20.
 - If the student has taken coursework equivalent to NS V20 the student challenges NS V20. The student must then enroll in NS V30. Once NS V30 is successfully completed, the student can earn the credit for NS V10, NS V20 and NS V30. Students cannot get unit credit for challenged coursework until they have completed one nursing course at Ventura College successfully.
 - **Fees for challenge exams:**
 - Students have to pay the per unit fee for course petitioned by credit by exam.
 - From (Registrar) - The student is charged for unit fees only if they have successfully completed the challenge examinations - \$46 per unit (or current unit fee).
 - Student must also pay enrollment fees and has to be enrolled in other courses at Ventura College.
 - If the student is not enrolled in other classes then the student must also pay health fees, that is, the Student Center Fee of \$10 per unit (or current fee).

**CHALLENGE / ADVANCED PLACEMENT POLICY INTO THE
NURSING PROGRAM FOR MILITARY TRAINED HEALTHCARE PERSONNEL**

The Ventura College Nursing Program is committed to awarding students credit for relevant military education and experience toward the requirements for licensure as Registered Nurses. *(this is in alignment with CCR Sections 1423.1, 1423.2 and amended CCR Sections 1418, 1424, 1426, and 1430 that implement Senate Bill 466)*

Individuals who present with relevant military education and experience, equal to but not limited to, Basic Medical Technician Corpsman (Navy HM or Air Force BMTCP), Army Health Care Specialist (68W Army Medic) or Air Force Independent Duty Medical Technician (IMDT 4N0X1C), are eligible for advanced placement in the nursing program. All nursing courses can be challenged with the exception of NS V40; however, individuals must have prior relevant education and experience that meet the specific requirements of the course. Prior education, military education, and military experience will all be evaluated on an individual basis in order to grant the individual full or partial course credit. The program will follow the following procedure with each individual seeking this opportunity.

PROCEDURE:

Interested candidates must request an appointment with a Nursing Counselor at least eight weeks prior to any application period to discuss eligibility requirements for the Associate Degree Nursing Program. Documentation of education, training, and experience should accompany the applicant to this meeting. Following the evaluation of the candidate's education and experience, and in determining their eligibility for admission to the Nursing Program, the candidate will meet with the Director of the Nursing program to determine courses eligible for full or partial credit and to discuss the challenge policy and procedure for each course. Challenge procedures may include: 1) lecture challenge examinations, 2) dosage calculation exam(s), 3) and skills competency exam(s).

1. Applicants must meet all admission criteria/requirements of the Associate Degree Nursing Program (ADN), including:
 - a. completion of designated prerequisites for the Nursing Program
 - b. Successful completion of the Testing of Essential Academic Skills (TEAS) pre-admission examination (62% or higher)
2. Applicants applying for transfer credit must submit the following materials verifying education and experience:
 - a. transcripts from appropriate education program(s), demonstrating satisfactory completion of coursework and clinical experience
 - b. documentation of experience
3. Applicants must have an honorable discharge or be in active current honorable service (DD214)

4. Acceptance of Military Challenge students into the Associate Degree Nursing Program is contingent upon successful completion of the following:
 - a. Achievement of 75% or above on the Challenge Exam(s) for nursing courses,
 - b. "Pass" (with all critical elements maintained) of skills competency performance examination (CPE), and
 - d. 90% or higher on the medication dosage calculation examination(s)

5. Military Challenge students admitted to the Associate Degree Nursing Program after academic failure at a prior nursing school will not be eligible for re-entry after an academic failure from the Ventura College ADN Program.

Once Challenge confirmation is made, the following materials will be made available to the applicant prior to the examinations and skills testing:

1. Course Outlines, Syllabus, Bibliography and Textbook lists
2. Examples of style and format of examination
3. List of critical elements for all nursing skills
4. Dosage calculation review sheet and rules for rounding

Written and skills competency examinations for advanced placement or challenge applicants must be completed eight weeks prior to admission to the program, unless waived by the Director of the Nursing Program. Advanced Placement will be granted if the applicant meets minimum requirements equivalent to those required of students enrolled in the actual course.

Advance Placement students are admitted on a space availability basis; however, military personnel and veterans are given preference.

Adopted fall 2021

DROP AND DEFERRAL POLICIES

Advanced Placement Drop Policy

Advanced placement students may drop out of the nursing program and ask to reenter one time. If they drop again or fail out of a nursing class they may not reenter the program (unless there are extenuating circumstances and the faculty approves reentry). When the student drops a note will be entered in their file and the file will be placed in the inactive files. When students ask to reenter (first time only) their name will be placed on the appropriate side /wait list if there is no room for the student in the incoming class.

Advanced Placement Deferral Policy

Students may request a deferral when notified of a space available in the incoming class. The student's name will be placed on the alphabetical Advanced Placement Wait list noting the request and including all past narrative from the permanent file. If the same student requests another deferral when offered a space, then he/she is permanently dropped from the wait list.