EXPERIENCE THE NORTH

ONTARIO PRIMARY NURSING Contract Nurse Training Program Syllabus

Congratulations for stepping into the unknown! Remote rural practice requires vast knowledge, and due to the large amount of information included in the orientation, a prereading has been included in this syllabus, along with the general orientation schedule. The pre-reading is mandatory prior to attending lectures, and if it is not completed, you may not be equipped or prepared to complete the necessary group case studies and practice scenarios.

Please note there are approximately 1-2 hours of reading for each module listed below, depending on your prior practice knowledge, skill and experience. Please start your prereading well ahead of your orientation and, ensure your schedule permits nightly reading and review during orientation sessions.

PRE-ORIENTATION REQUIRED READING

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	FNIH Adult CPG's		FNIH Paediatric CPG's	
	FNIH Nursing Policy Manual		Laboratory Manual	
	CNO – Practice Standards		CNO – Practice Guidelines	
	 Confidentiality and Privacy 		 Authorizing Mechanisms 	
	 Decisions about Procedures and 		 Conflict Prevention and 	
	Authority		Management	
	 Documentation 		 Consent 	
	 Infection Prevention and 		 Culturally Sensitive Care 	
	Control		 Directives 	
	 Medication 		 Tele-practice 	
	 Restraints 			
	• Therapeutic Nurse Client			
	Relationships			
	FNIHB Drug Formulary			

Note: All documents and links listed can be found in the header of the Learning Management System.

1. First Nations and Inuit Health - CLINICAL PRACTICE GUIDELINES

It is imperative that you familiarize yourself with the adult and pediatric clinical practice guidelines, as they will guide your practice in the north. The CPG's can be found online, and the individual chapters can be downloaded as PDF files, and saved to a device or memory stick for reference. Paper copies are available at the nursing stations, however they may be missing pages, or be out of date.

- Adult Guidelines: First Nations and Inuit Health Clinical Practice Guidelines for Nurses in Primary Care: https://www.canada.ca/en/indigenous-services-canada/services/first-nations-inuit-health/health-care-services/nursing/clinical-practice-guidelines-nurses-primary-care/adult-care.html
- Paediatric and Adolescent Guidelines: First Nations and Inuit Health Clinical Practice
 Guidelines for Nurses in Primary Care: https://www.canada.ca/en/indigenous-services-canada/services/first-nations-inuit-health/health-care-services/nursing/clinical-practice-guidelines-nurses-primary-care/pediatric-adolescent-care.html

The above materials are provided online to ensure access prior to the start of orientation. The guidelines are an essential tool for safe clinical practice in the Northern Communities.

2. FNIHB - Ontario Region - NURSING POLICY MANUAL

This manual contains the policies and procedures surrounding nursing in the north as contracted nurses to First Nations and Inuit Health.

- Uploaded to LMS pre-orientation reading list.
 - Policy 1 Administration
 - Policy 2 Professional Nursing Practice
 - Policy 3 Pharmacy
 - Policy 4 Procedures and Diagnostics
 - Policy 5 Infection Prevention and Control
 - Policy 6 TB Policies

3. College of Nurses of Ontario - Practice Guidelines and Standards

CNO provides practice standards and guidelines to support nurses in providing safe and ethical nursing care to the people of Ontario.

Practice standards outline the expectations for nurses that contribute to public protection. They inform nurses of their accountabilities and the public of what to expect of nurses. The standards apply to all nurses regardless of their role, job description or area of practice.

Practice guidelines, which often address specific practice-related issues, help nurses understand their responsibilities and how to make safe and ethical decisions in their practice.

Practice Standards

- Confidentiality and Privacy Personal Health Information
- Decisions about Procedures and Authority
- Documentation
- Infection Prevention and Control
- Medication
- Restraints
- Therapeutic Nurse Client relationship

Practice Guidelines

- Authorizing Mechanisms
- Conflict Prevention and Management
- Consent

- Culturally Sensitive Care
- Directives
- Tele-practice

4. FNIHB – Ontario Region – 2018 NURSING STATION DRUG FORMULARY (National) - Moose Factory Drug Formulary (Moose Factory Zone)

 Uploaded to LMS – pre-orientation reading list, and also found in Module 5 – Prescribing

5. Laboratory Nursing Station Manual

Sioux Lookout Meno Ya Win Health Centre

 Uploaded to LMS – pre-orientation reading list and also found in Module 18 – Laboratory

MANDATORY ADJUNCT COURSES

In addition to your Basic CPR, Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and trauma course (ITLS, ATCN, ATLS, TNCC etc.), the following courses are also mandatory for completion prior to being rostered as a CHCA Nurse:

CHCA - ONTARIO IMMUNIZATION COURSE

As part of orientation, you will need to successfully review the entire Immunization module and complete the Immunization quiz successfully to receive your certificate prior to your first contract.

• For Reference: Ontario Immunization Schedule (updated 2016): http://www.health.gov.on.ca/en/pro/programs/immunization/docs/immunization_schedule.pdf

NP-Education - Controlled Substances in First Nations Facilities

This educational module is intended for nurses who work in First Nations health facilities and provide care to patients who clinically require narcotics and controlled substances (CS) for optimal care. The module introduces the therapeutic application of narcotics and controlled substances along with the legal and professional competencies and responsibilities required by these nurses in order to have the authority to conduct activities with controlled substances under a Section 56 Exemption. Register directly online, keep your receipt for submission.

• https://cpd-prv.np-education.ca/courses/15/modules

BioRisk Management Canada - Transportation of Biologic Materials and Related Substances/ Transportation of Dangerous Goods (TDG)

The online TDG course and certificate complies with Transport Canada Training and Certificate requirements. Section 6.1 of the Transportation of Dangerous Goods (TDG) Regulations state that a person who handles, offers for transport, or transports dangerous goods must be adequately trained and hold a training certificate.

- Request your student login information from Angeline Goldsworthy at CHCA
- http://www.bioriskmanagement.com → click on student login

Coursera and University of Alberta - INDIGENOUS CANADA COURSE

Indigenous Canada is a 12-lesson Massive Open Online Course (MOOC) that explores Indigenous histories and contemporary issues in Canada. From an Indigenous perspective, this course explores key issues facing Indigenous peoples today from a historical and critical perspective highlighting national and local Indigenous-settler relations.

Topics for the 12 lessons include:

- Pre-Colonization
- The fur trade and other exchange relationships,
- Land claims and environmental impacts,
- Legal systems and rights,
- Political conflicts and alliances.
- Indigenous political activism, and
- Contemporary Indigenous life, art and its expressions

RECOMMENDED READING / SMARTPHONE APPS



MUMs Anti-Infective Guidelines for Community Acquired Infections

Book: 2013 Ed. Available for purchase through www.mumshealth.com or your local university bookstore

App: currently only available for iPhone/ iPad on the App Store.



Bates' Pocket Guide to Physical Examination and History Taking

Book: 2016 Ed. Available for purchase through Chapters, Indigo, Amazon etc. App: Available for iPhone/ iPad on the App store and Android on Google Play.



Canadian STI Guidelines - Free!

App available for iPhone/ iPad on the App store and Android on Google Play This application provides Canadian health professionals with up-to-date recommendations for the screening, diagnosis, management, and treatment of STIs, including recommendations for antibiotic-resistant gonorrhea, in a convenient, concise, and easy to use format.



The Ottawa Rules - Free!

App available for iPhone/ iPad on the App Store and Android on Google Play The Ottawa Rules are a set of clinical decision rules developed by Dr. Ian Stiell and his research team at The Ottawa Hospital Research Institute and the University of Ottawa. The rules have been demonstrated to decrease unnecessary diagnostic imaging and emergency room wait times, which enhances patient comfort and reduces health care costs.

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Module 8:	Public Health: Communicable Diseases, Sexually Transmitted Infections and Contact Tracing				
Module 9:	Neonatal, Well Infant and Well Child Health Assessment, and Paediatric Nutrition				
Module 10:	Assessment of the Sick Child: Acute, Urgent and Emergent Presentations and procedures.				
Module 11:	Behavioural Health and Addictions: Adult and Paediatric Chronic, Acute and Emergency Presentations				
Module 12:	Suicide Prevention, Assessment and Treatment of the Suicidal Patient				
Module 13:	Chronic Disease Case Management and Exacerbation Emergencies				
Module 14:	Adult and Geriatric Periodic Health Examination, and Preventative Screening				
Module 15:	Contraceptive Methods and Management				
Module 16:	Routine, High Risk Prenatal, post partum and gynaecological health assessment				
Module 17:	Episodic and Chronic Conditions and issues in Pregnancy				
Module 18:	Basic Labour and Delivery in the Community				
Module 19:	Emergencies and Trauma				
Module 20:	HEENT and Neurology: Assessment, Common and Emergency Presentations				
Module 21:	Cardiovascular and Respiratory Assessment, Acute and Emergent Conditions				
Module 22:	Gastrointestinal and Genitourinary Assessment, acute and Emergency conditions				
Module 23:	Musculoskeletal Assessment, acute and emergent conditions, Basic Radiology and Casting skills				
Module 24:	Dermatology Assessment: Acute and emergent conditions, advanced wound care and suturing skills.				

ORIENTATION OVERVIEW

MODULE 1: WELCOME TO CANADIAN HEALTH CARE AGENCY!

Module 1 Overview

- Welcome Letter Instructions to access Schedule Anywhere
- Orientation Syllabus Instructions to access Learning Management System
- Reference consent and check
- Payroll and Direct Deposit forms
- Tax Forms
- Scope of Practice Statement
- Confidentiality Agreement
- · Government Vehicle use policy
- Employment Equity Questionnaire
- Timesheets (Regular Hours, Overtime hours, Overtime Authorization Form)
- Nurse Referral
- Shepell EFAP, Desjardins Benefits and Open Access Pension Plan
- Nursing Station Orientation Checklist
- Skills Checklist

MODULE 2: INDIGENOUS CULTURAL SAFETY, AND TRAUMA INFORMED CARE

2.1 Required Pre-Reading

- FNIHB Clinical Practice Guidelines: Adult Guidelines Intro (p. 2-4)
- ANAC: Cultural Competence and Cultural Safety in Nursing Education A Framework for First Nations, Inuit and Metis Nursing
- SOGC: Indigenous Companion Piece
- CNO Practice Guideline Culturally Sensitive Care
- Trauma Informed: The Trauma Toolkit

2.2 Lecture Time: 1.5 hours; Activity: 45 minutes; Debrief: 30 minutes

Content in this module is derived from the Aboriginal Nurses' Association of Canada document: "Cultural Competence and Cultural Safety in Nursing Education - A Framework for First Nations, Inuit and Métis Nursing".

2.3 - In this module, Contract Nurses will work toward reconciliation through delivery of health care. They will develop a better understanding of Cultural Safety, and how it relates to the Indigenous peoples of Canada. Contract Nurses will recognize who Indigenous Peoples are and define terms that are used to refer to Indigenous Peoples in Canada. This module will also review Indigenous culture and history, and will explore ways in which Contract Nurses can deliver care, respecting traditions and culture.

Contract Nurses will develop the ability to establish a positive therapeutic relationship and open communication with Indigenous clients and their families, characterized by understanding, trust, respect, honesty and empathy.

Socio-cultural and political factors that are health-protective will be explored, as well as those factors, which undermine the health of Indigenous peoples and place them at risk for increased morbidity and mortality. Discussion of how basic human rights (e.g. adequate housing, employment) are "out of reach" for many if not most Indigenous peoples.

Contract Nurses will analyze and understand the limitations of their knowledge and perspective and incorporate new ways of seeing, valuing and understanding the health and health practices of Indigenous peoples.

Module 2 Overview

- Indigenous Groups
- Indigenous Treaties and History
- Self Government
 - o The Indian Act
 - o First Nations Bands
 - Non-Insured Health Benefits
- The Legacy of Residential Schools
- Truth and Reconciliation Commission
- The Sixties Scoop
- Missing and Murdered Indigenous Women
- Social Determinants of Health
- Jordan's Principle
- Values and Spiritual Beliefs
- Traditional Healing
 - Seven Generations Teachings
- Trauma Informed Care
 - Myths
 - Best Practices
 - o Guidelines
 - Case Example
 - Resources

2.4 Mandatory Learning Activities:

- HANDOUT: Module 2 Indigenous Cultural Safety and Trauma –Informed Care
- RESOURCE: ANAC Cultural Competence and Cultural Safety in Nursing Education
- RESOURCE: Honouring the Truth, Reconciling for the Future
- RESOURCE: SOGC Indigenous Companion Piece
- RESOURCE: CNO Culturally Sensitive Care Practice Guideline
- VIDEO: 01 Aboriginal Cultural Safety: An overview (9 mins)
- VIDEO: 02 Aboriginal Cultural Safety: colonial and post-colonial policies (5 mins)
- VIDEO: Truth and Reconciliation Commission "What Happened?" (4 mins)
- VIDEO 03: Aboriginal Cultural Safety: health determinants and health status (6 mins)
- VIDEO: The Sixties Scoop (9min15secs)
- VIDEO: 04 Aboriginal Cultural Safety: health and healing (5 mins)
- VIDEO: Social Determinants of Health: The Canadian Facts (4 mins)
- VIDEO: Picking Sage and Great Advice from an Elder (7 mins)

2.5 Resources

- ARTICLE: CBC News Indigenous or Aboriginal: Which is correct?
- ARTICLE: CBC A history of Residential Schools in Canada
- ARTICLE: The Sixties Scoop
- VIDEO: Attawapiskat Youth Forum Shannen Koostachin (4mins 34 secs)

- DOCUMENT: Traditional Medicine in Contemporary Contexts
- VIDEO: Stolen Children | Residential School survivors speak out (19 mins)
- VIDEO: 16x9 Cold Reality of Canada's northern communities (16 mins)
- VIDEO: 16x9 Failing Canada's First Nations Children (34 mins)
- VIDEO: CBC The National The legacy of the Sixties Scoop (5 mins)
- LINK: Non-Insured Health Benefits (FNIHB)
- LINK: First Peoples of Canada
- LINK: Assembly of First Nations
 - o LINK: Nishnawbe Aski Nation (Grand Council Treaty 9)
 - o LINK: Mushkegowuk Council (Moose Factory)
 - o LINK: Keewaytinook Okimakanak Council (Sioux Lookout)
- LINK: Inuit Tapiriit Kanatami
- LINK: Métis National Council
- LINK: Anishnawbe Health Toronto Resources
- LINK: Shannen's Dream for Safe and Comfy Schools
- LINK: Jordan's Principle
 - o VIDEO Jordan's Principle (5min 40s)
- LINK: National Inquiry into Missing and Murdered Indigenous Women and Girls
 - o RESOURCE: Missing and Murdered Indigenous Women and Girls Executive Summary
- RESOURCE: Traditional Medicine in Contemporary Contexts
- LINK: Four Directions Teachings
- RESOURCE 7 Generations Teachings
- LINK: Trauma-Informed Care

2.6 Tools

- TOOL: Trauma-Informed Toolkit
- TOOL: External Course: Indigenous Canada

Indigenous Canada is a 12-lesson Massive Open Online Course (MOOC) that explores Indigenous histories and contemporary issues in Canada. From an Indigenous perspective, this course explores key issues facing Indigenous peoples today from a historical and critical perspective highlighting national and local Indigenous-settler relations.

Topics for the 12 lessons include the fur trade and other exchange relationships, land claims and environmental impacts, legal systems and rights, political conflicts and alliances, Indigenous political activism, and contemporary Indigenous life, art and its expressions.

• TOOL: Indigenous Cultural Safety Collaborative Learning Series - Webinars

This national webinar series provides an opportunity to share knowledge; experiences and perspectives in support of collective efforts to strengthen Indigenous cultural safety in health and social services. Webinars:

- Setting the Context for Indigenous Cultural Safety: Facing Racism in Health
- Racism and Privilege in the Everyday
- The "Raced" Body: Reflecting on Clinical Encounters
- Racism, Reconciliation, and Indigenous Cultural Safety
- Deconstructing Racism Strategies for Organizational Change

- Critical Race Theory and its Implication for Indigenous Cultural Safety
- Indigenous Health Equity: Examining Racism as an Indigenous Social Determinant of Health
- Addressing Anti-Indigenous Racism in Health Care: Strategies for Implementing System-level Change
- Cultural Safety in the Classroom: Addressing Anti-Indigenous Racism in Education Settings
- Racism Hurts: Exploring the Health Impacts of Anti-Indigenous Racism
- Decolonizing Anti-Racism

2.7 Activity: KAIROS Blanket Exercise

The KAIROS Blanket Exercise program is a unique, participatory history lesson. Developed in collaboration with Indigenous Elders, knowledge keepers and educators this program fosters truth, understanding, respect and reconciliation between Indigenous and non-indigenous peoples.

MODULE 3 - TEAM COMMUNICATION, PATIENT TRANSPORT PROCEDURES AND REPORTING

3.1 Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Intro (p. 4-7)
- CHCA Workplace Harassment Policy
- CNO Practice Standard Therapeutic Nurse-Client Relationship
- CNO Practice Guideline Authorizing Mechanisms
- CNO Practice Guideline Directives
- CNO Practice Standard Decisions about Procedures
- Ornge Medical Transport Information Manual

3.2 Lecture Time: 1.5 hours; Case Scenario discussion: 30 minutes

3.3 Contract Nurses will be introduced to the workplace environment, reviews procedures for medical consultation, coordinating schedevac/ medevac patient transfers including forms and procedures required for consultation, transfer and evacuation of patients to other agencies and hospitals, or health professionals. They will review the role of the nurse as referral agent, and discuss inter-agency collaboration through various methods of communication and consultation including telemedicine and SBAR (Situation, Background, Assessment and Recommendation)

Contract Nurses will review the use of Service Administration Log software, discuss common types of reportable occurrences and how to effectively manage them, as well as recognize and manage workplace harassment and bullying. They will understand how to use the available methods available in order to consult with other healthcare providers regarding interventions in an appropriate and timely manner, use problem-solving skills to correctly investigate and triage patients, take steps to ensure that equipment is available and operational when needed and understand the need to be familiar with all emergency equipment, as each clinic setting varies.

Module 3 Overview

- Location of Nursing Station
- Workplace Introduction "Nursing Station 101"
 - o Arrival
 - o Keys
 - Phones
 - Internet
 - o Practice Setting
 - o Work Load
- Typical Emergency Room
- Exam Rooms
- SCENARIO 20 yo mother with 1 yo baby
- Communication
 - o Video: Words Matter
 - o SBAR
- Criteria for MD Consult
 - o Fax. Phone. In-Person
- SCENARIO Mr. Cheechoo
- Telemedicine
 - o Specialist Referrals
- Patient Priority for Transfer
 - CTAS Scoring
 - o Medevacs in a nutshell
 - o Non-Urgent Transfer "Schedevac"
 - o Online and paper Forms for Medevac/ Schedevac
 - o Delavs
 - o Non-Medical Escorts
- Service Administration Log
- Occurrence Reports
- Workplace Harassment and Bullying

3.4 Mandatory Learning Material

- HANDOUT: Module 3 Slides Team Communications, Patient Transport procedures and reporting
- CHCA Workplace Harassment Policy
- CNO Practice Guideline Authorizing Mechanisms
- CNO Practice Guideline Conflict Prevention and Management
- CNO Practice Guideline Directives
- CNO Practice Standard Decisions about Procedures
- CNO Practice Standard Therapeutic Nurse-Client Relationship
- RESOURCE: Ornge Medical Transport Information Manual

3.5 - Resources

- VIDEO Words Matter (5m52s)
- VIDEO PTAC Tutorial (5m10s)
- RESOURCE Duties of an escort
- RESOURCE Important Phone Numbers

Charts

o On-Call

- o Practice Context
- o Remote and Isolated
- Community Expectations
- Multiple levels of Government

- RESOURCE Northern Tips
- RESOURCE Nurse decision to medevac
- RESOURCE Nursing station phone numbers
- RESOURCE Ontario Map
- RESOURCE Ornge helicopter safety sheet
- RESOURCE Preparing a Patient for Medical
- RESOURCE Service Administration Log User Manual

3.6 - Tools

- TOOL Apartment Inventory North
- TOOL Canadian Triage Acuity Score
- TOOL First Nations Communications Toolkit
- TOOL KO Telemedicine referral form
- TOOL Medical evacuation information form
- TOOL NIHB form
- TOOL Northern practice fax record
- TOOL Occurrence Form
- TOOL Ornge Medical Escort Checklist
- TOOL Patient transfer authorization form
- TOOL Patient transfer note
- TOOL Service Administration Log screenshot
- TOOL Service Administration Log Dropdown

3.7 - Evaluation

• QUIZ - M03 - Team Communication, Patient Transport and Reporting

MODULE 4: DOCUMENTATION, CONFIDENTIALITY, TRIAGE AND TELEMEDICINE

4.1 Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Intro (p. 12-22)
- CNO Practice Guideline Consent
- CNO Practice Guideline Tele-practice
- CNO Practice Guideline Working with Unregulated Care Providers
- CNO Practice Standard Documentation
- CNO Practice Standard Confidentiality and Privacy Personal Health Information
- FNIHB Nursing Policy II 05: Confidentiality
- FNIHB Nursing Policy II 08: Documentation Standards
- FNIHB Nursing Policy II 21: Appendix A Circle of Care Disclosure
- FNIHB Nursing Policy II 22: Appendix A Third party disclosure of information
- FNIHB Nursing Policy II 22: Appendix B Law Enforcement Investigations
- FNIHB Nursing Policy II 24: Telephone triage and advice

4.2 - Lecture Time: 2 hours; Case Scenario discussion: 15 minutes; SOAP Charting Assignment: 30 minutes.

4.3 - This module gives Contract Nurses the opportunity to apply theoretical concepts and practice skills to understand the expectations of Contract Nurses when documenting client

care. Clear, comprehensive and accurate documentation is an integral part of safe and effective nursing practice.

Topics include: the principles of SOAP documentation, the Contract Nurse's accountability when documenting; and how to maintain security of confidential information. Contract Nurses will then discuss triage and telemedicine, and discuss components of a high-quality telephone triage system. They will summarize the essential aspects of good communication required for triage, and identify how language barrier, cultural norms, rules of thumb, cognitive biases and other distractors influence triage decision-making.

Module 4 Overview

- Documentation
- Negligence
- How documentation is used in court
- How can you improve your charting?
- SOAP Charting overview
 - Subjective
 - Review of Systems
 - o Objective
 - Assessment
 - Primary and Differential Diagnoses
 - o Plan
 - Diagnostics (offsite, referral, consultation)
 - Therapeutic (Non-Pharmacological)
 - Therapeutic (Pharmacological)
- Documentation Summary
- SCENARIO: Clinical Presentation #1
- Consent to Medical Treatment
- Privacy and Access Issues
- Confidentiality
- What is Nursing Tele-practice?
 - o After-hours telephone triage challenges
- Triage Nurse Role

4.4 - Mandatory Learning Activities

- HANDOUT: Module 4 Slides Documentation, Confidentiality, Triage and Telemedicine
- RESOURCE: CNO Practice Guideline Consent
- RESOURCE: CNO Practice Guideline Tele-practice
- RESOURCE: CNO Practice Guideline Working with Unregulated Care Providers
- RESOURCE: CNO Practice Standard Confidentiality and Privacy Personal Health Information
- RESOURCE: CNO Practice Standard Documentation
- VIDEO: SOAP Note Documentation (7 mins)
- VIDEO: Taking a History (3mins)
- VIDEO: Review of Systems (4 mins)

4.5 - Resources

- RESOURCE: CHCA SOAP Charting Outline
- RESOURCE: Taking a patient history
- RESOURCE: Justice Dept Consent Presentation
- RESOURCE: Justice Dept Communicating with the Police Presentation

4.6 - Tools

- TOOL: CHCA Chart Audit Checklist
- TOOL: Consent to Disclose Personal Health Information Form
- TOOL FNIHB Approved Abbreviations and Symbols
- TOOL: Telephone Triage Form

4.7 - Evaluation

- ASSIGNMENT M04 SOAP Note Case Study (online version)
 - Using the information provided, complete a SOAP note for the patient encounter.
- QUIZ M04 Documentation, Confidentiality, Triage and Telemedicine

MODULE 5: INTRODUCTION TO PRESCRIBING IN NORTHERN COMMUNITIES AND CONTROLLED SUBSTANCES POLICY

5.1 Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Intro (p. 9-11)
- FNIHB Policy and Procedures on Controlled Substances
- FNIHB Nursing Station Formulary (Oct 2018)
- FNIHB MFZ Formulary with Treatment Codes (2014)
- CNO Practice Guideline Directives
- CNO Practice Standard Medication
- RESOURCE: Naloxone Injection Guideline
- RESOURCE: Link Canadian TB Standards

5.2 - Lecture Time: 2 hours; Case Scenario Discussion and Calculations: 30 minutes.

5.3 - Contract Nurses will examine pharmacological concepts and nursing practices required to safely care for clients in need of pharmacological treatments. General principles of pharmacology, common drug classifications, principles of medication preparation and administration including drug calculations, and related regulatory competencies are studied. Contract Nurses will learn to safely initiate prescription drugs and therapeutics based on assessment data.

This module provides Contract Nurses with the opportunity to develop calculation skills necessary for the safe administration of medications. Emphasis is on caring for clients on drug therapy, interactions of drugs, psycho/social aspects of drug use, legal control over drugs and health teaching.

Contract Nurses will also become more familiar with Drug Formularies for the different Zones, Drug Classification System for prescribing and calculating drug doses for the paediatric population as well as renal dosing.

Contract Nurses will be responsible to review and understand controlled substance policies, and adhere to the Controlled Substance Register, counting, handling and wastage of controlled substances.

Contract Nurses will become familiar with Direct Observed Therapy (DOT) for the treatment of Active and Latent Tuberculosis, and gain and understanding of the role and responsibilities of the Community Health Nurse in directing this program.

Module 5 Overview

Part One:

- Prescribing Basics
- Introduction to the Drug Formulary
 - o Drug Classification System
- Prescribing Principles
 - Mixing Suspensions
 - o Paediatric Calculations
- Common Questions
 - o SCENARIO: Calculations
 - o Renal Dosing
 - Watchful Waiting
- Dispensing and Labeling

Part Two:

- Controlled Substances Policy and Forms
 - Narcotic Policy Highlights
 - Suboxone
 - o True/False questions

Part Three:

- Direct Observed Therapy (DOT) for Tuberculosis
 - o Role of the CHN
 - Treatment Principles
 - Administration and Monitoring

5.4 - Mandatory Learning Activities

- HANDOUT: Module 5 Slides Prescribing in Northern Communities, Controlled Substances Policy and Directly Observed Therapy for Tuberculosis
- RESOURCE: CNO Practice Guideline Directives
- RESOURCE CNO Practice Standard Medication
- RESOURCE: FNIHB Nursing Station Formulary with treatment codes Oct 2018
- RESOURCE: Moose Factory Zone Formulary (revised Jan 2014)
- RESOURCE: FNIHB Policy on Controlled Substances

5.5 - Resources

- RESOURCE: Naloxone Injection Guideline May 2018
- LINK: Q&A Prescription Opioids Sticker and Handout Requirements for Pharmacists and Practitioners
- LINK: Canadian Tuberculosis Standards 7th Edition: 2014

5.6 - Tools

- TOOL: Acetaminophen children's pain and fever relief
- TOOL: Controlled Substances Signature Form
- TOOL: Controlled Substances Count Sheet Example
- TOOL: Controlled Substances Single Drug Count Sheet
- TOOL: Ibuprofen Adult pain and fever relief
- TOOL: Ibuprofen Children's pain and fever relief
- TOOL: Medication Error Report Form
- TOOL: Tuberculosis DOT Manual File

5.7 - Evaluation

• QUIZ - M05 - Prescribing in Northern Communities

Module 6: Introduction to Laboratory Operations

6.1 Required Pre-Reading:

- FNIHB Ontario Region Nursing Manual:
 - o Policy IV-01 Acknowledging Diagnostic Test Results
 - o Policy IV-02 Laboratory Procedures Unregulated Healthcare Workers
 - o Policy IV- 05 NP- Initiated Laboratory Tests
 - o Policy IV- 06 RN Initiated Laboratory Tests
 - o Policy IV 07- Venipuncture
- Sioux Lookout Meno Ya Win Health Centre Laboratory Manual

6.1.1 COURSE: Transport of Dangerous Goods (PHAC)

Canadian law requires that any person shipping, handling, or transporting dangerous goods must be trained in accordance with Canadian standards by means of relevant transportation.

Worksite Safety's TDG Certification program has been developed in compliance with Transport Canada's Transportation of Dangerous Goods Act and Regulations.

This course covers all aspects of the TDG system, aimed primarily at ensuring students will have a clear understanding of the requirements of the following guidelines:

6.2 - Lecture Time: 2.0 hours; Activity: 30 minutes

6.3 - Contract Nurses will have sound working knowledge of all lab requisitions and how to complete them correctly. They will determine the need for the appropriate laboratory or diagnostic tests and how to processes each test. Contract Nurses will prioritizes specimen processing to ensure accuracy and avoid multiple collections and take steps to ensure that lab and diagnostic equipment are available and operational when needed; by performing daily/ weekly/ monthly quality assurance testing.

Contract Nurses will understand how to perform venipuncture on clients across the lifespan and perform the correct specimen collection appropriate to treatment settings. They will learn to interpret diagnostic laboratory or diagnostic results and respond appropriately. Contract Nurses will identify all available point-of-care tests, understand how to provide and interpret the results, in order to guide treatment and management of the patient. They will demonstrate sound decision-making skills related to lab testing and ongoing screening and lab or diagnostic testing. Contract Nurses will come to understand

scope of practice in relation to all laboratory and diagnostic testing and able to refer and consult as appropriate. They will take steps to ensure that equipment is available and operational e.g., Glucometer, HemoCue

Contract Nurses will demonstrate understanding of the following: use of the centrifuge, procedures for Point of Care testing (POCT): Erythrocyte Sedimentation Rate; Stat Haemoglobin; Urine HCG; Fecal Occult Blood Testing and Interpretation; Urinalysis, 24 hour urine collection, urine for microbiology; Haematology and Chemistry Specimen Processing.

Module 6 Overview:

- Clinic Lab Features
- Vaccine Fridge Temperature Log
- Point of Care Quality Assurance
- HemoCue and Glucose Quality Control Log
- Routine Bloodwork
- Nursing Station Lab Manual: Onsite/Offsite
- Bloodwork: Order of Draw
- Centrifuge
- Handling Serum/ Plasma
- Collection Guidelines
- Labelling Specimens
- Bagging Specimens
- Oral Glucose Tolerance Testing
- Sioux Lookout Meno Ya Win General Requisition
- Moose Factory Weeneebayko General Requisition
- LifeLabs Ministry of Health Requisition
- Urine Culture and Sensitivity
- Microbiology
- Public Health Labs
- STI Testing
- Sending Specimens
- Common Problems/ Reasons for Rejection
- Transportation of Lab Specimens
- Point-of-Care Collection Procedures/
 - o Urinalysis, Rapid Strep, Urine Drug Screen
- 24 Hr Urine Specimen
- Prenatal Bloodwork
- Maternal Serum Screening
- Interpretation of Lab Results
- Sexual Assault Evidence Kit

6.4 - Mandatory Learning Activities

- HANDOUT: Module 6: Introduction to Laboratory Operations Move resource
- COURSE: Transport of Dangerous Goods (PHAC)

- The CHCA Student enrolment key can be obtained from Angeline Goldsworthy. Please email: angeline@chc-a.ca
- VIDEO: How to use a centrifuge
- VIDEO: Introduction to lab values (11 mins)

6.5 - Resources

- Lab Manuals
 - SLMYWHC Lab Manual NSM01
 - o SLMYWHC Lab Manual NSM02
 - SLMYWHC Lab Manual NSM03
 - SLMYWHC Lab Manual NSM04
 - SLMYWHC Lab Manual NSM05
 - o SLMYWHC Lab Manual NSM06
 - SLMYWHC Lab Manual NSM07SL
 - o SLMYWHC Lab Manual Table of Contents
- RESOURCE Collecting a blood sample Things to keep in mind.
- RESOURCE Meno Ya Win Offsite Lab List
- RESOURCE Meno Ya Win Onsite Lab List.
- RESOURCE Meno Ya Win Specimen Labelling
- RESOURCE LifeLabs General Handling and Patient Preparation guidelines
- RESOURCE Integrated Prenatal Screen Provider Monograph
- FORM Glucometer Quality Control log.
- FORM Hemo Cue Quality Control Log
- RESOURCE Order of Draw
- VIDEO Justice in a box: Unboxing the sexual assault evidence kit
- VIDEO What happens during a sexual assault evidence kits examination

6.6 - Tools

- Lab Requisitions
 - o LifeLabs
 - Cytology (pap) and HPV testing
 - MOHLTC
 - Moose Factory Weeneebayko Lab
 - Lab Requisition WGH Blood Requisition
 - Lab Requisition WGH Microbiology Requisition
 - Public Health Ontario
 - Lab Requisition PHO General Test Req
 - Lab Requisition PHO Hep C ma- Hep B viral load
 - Lab Requisition PHO HIV Serology
 - Lab Requisition PHO HIV Viral Load
 - Lab Requisition PHO Prenatal Screening
 - o Sioux Lookout Meno Ya Win Lab Requisitions
 - Lab Requisition MYW Microbiology
 - Lab Requisition MYW On-Site testing
 - Lab Requisition MYW Nursing Station Generated
 - Lab Specimen Requisition
 - o Lab Requisition NYGH Maternal Serum Screen

- TOOL Sexual Assault Evidence Kit Guidelines
- TOOL Government Bill of Lading example
- TOOL Shippers declaration of dangerous goods
- VIDEO: Introduction to lab values and normal ranges Khan Academy
- Lab Interpretation
 - o Tool: Commonly Measured Lab values
 - o TOOL: Electrolyte imbalance signs and symptoms

6.7 Activity

 Hands-on familiarization with tools and implements from the laboratory, including tubes, specimen containers, biohazard bags, requisitions etc.

6.8 Evaluation

o Quiz - Introduction to Laboratory Operations

MODULE 7: PAEDIATRIC AND ADULT IMMUNIZATIONS

7.1 - Pre-Reading:

- 2016 Ontario Immunization Schedule
- FNIHB Clinical Practice Guidelines: Adult Guidelines Chapter 11-1 Communicable Disease
- Canadian Immunization Guide
- Medical Directive Immunizations
- Medical Directive TST
- Immunization Protocol 2018

7.2 - Lecture Time: 2.5 hours; Case Scenario discussion: 30 minutes; Activity: 30 minutes

7.3 - Contract Nurses will review the key parts of a community immunization program and aspects of management, and can evaluate surveillance measures in the event of an outbreak and minimize risk of outbreak. They will go over the application of current immunization schedules to ensure patient immunization status is up to date.

In this module, Contract Nurses will develop a working knowledge of all Biologicals and Vaccine Preventable diseases, and will understand the difference between expected reactions and unexpected reaction. They will learn to provide health teaching to clients and their caregivers. Contract Nurses will have a solid understanding of cold chain and how to operate required storage and monitoring equipment.

Upon successful completion of the quiz, Contract Nurses will receive a certificate.

Module 7 Overview

Part One:

• Principles of Immunity

Part Two:

- Type of Immunizing Products
- Canadian Immunization Guide
- T-dap-IPV-HiB
- Tdap-IPV

- Tdap
- Td
- Pneumococcal Conjugate
- Pneumococcal Polysaccharide

- Rotavirus
- Meningococcal Conjugate C
- Meningococcal Conjugate ACYW
- Measles, Mumps, Rubella
- Varicella
- Measles, Mumps, Rubella, Varicella

Part 3

- Medical Directive
- 2016 Ontario Immunization Schedule
 - o Routine
 - o Catch up

Part 4

• Case Scenarios

Part 5

- Barriers to Vaccination
- Anti-Vaccine movement
- Comparison of Effects of Diseases and Vaccines

Part 6

- Consent and Documentation
- Informed Consent
- Consent/ Mandatory Nursing Actions
- Immunization Errors

Part 7

- Other Vaccines
- Immune Globulins
- Anti Toxins
- BCG/TST
- TST Interpretation/ Documentation

Part 8

- Reporting Adverse Events
- Management of Adverse Events
- Reportable Adverse Events
- What AEFI should be reported?
- Procedure for reporting AEFI

Part 9

• Needle Stick Injury Procedure

Part 10

- Cold Chain Procedure
- Vaccine supply in Ontario
- Vaccine storage and Handling
- Vaccine Fridge layout
- Daily Vaccine Log
- Cold Chain Break
- Vaccine Contingency Planning

- Hepatitis B
 - o Hep B High risk criteria
- Influenza
- Shingles
- Human Papillomavirus
 - o High Risk criteria

Part 11

- Emergency Measures
- Identification of Anaphylaxis
- Treatment Protocol
- Epinephrine
- Diphenhydramine
- · Role of CHN
- Immunization Support Line

7.4 - Mandatory Learning Activities

- HANDOUT: Module 7 Paediatric and Adult Immunizations
- VIDEO Immune System Part 1: Crash Course
- VIDEO Immune System Part 2: Crash Course
- VIDEO Immune System Part 3: Crash Course
- LINK: Canadian Immunization
- RESOURCE: Medical Directive
- RESOURCE: Medical Directive TST
- RESOURCE: Immunization Protocol 2018

7.5 - Resources

- LINK: Immunization Schedules by province and territory
- RESOURCE: National Vaccine Storage and Handling Guidelines for Immunization Providers 2015
- RESOURCE: Anti-Vaccine movement and thimerosal
- RESOURCE: Immunization Abbreviations
- RESOURCE: Needlestick Injuries
- Immunization Patient Resources
- o Chickenpox vaccine 2015-08
- Comparison of effects of diseases and vaccines 2015-08
- Contraindications to and precautions for commonly used vaccines 2015-08
- Dtap-IPV-Hib conjugate vaccine 2015-08
- o Hepatitis A and B vaccine 2015-08
- o Hib conjugate vaccine 2015-08
- Important information about Gardasil 2015-08
- o Influenza vaccine 2015-08
- Measles-mumps-rubella-varicella vaccine 2015-08
- Meningococcal c-conjugate vaccine 2015-08
- Meningococcal group c conjugate vaccine 2015-08

- o MMR vaccine 2015-08
- MMR, varicella and MMRV eligibility and schedules
- Pneumococcal conjugate vaccine 2015-08
- Pneumococcal polysaccharide vaccine 2015-08
- o Polio vaccine 2015-08
- o Rabies vaccine 2015-08
- o Rotavirus vaccine program 2015-08
- o Td vaccine 2015-08
- Tetanus, diphtheria and acellular pertussis vaccine 2015-08
- Varicella (chicken pox) vaccine 2015-08
- o Tuberculin Skin Test and BCG Vaccine
- o BCG insert 2015-08
- Tuberculin skin test 2015

- TOOL: Ontario Immunization Schedule 2016
- TOOL: Adverse Event Following Immunization
- TOOL: Emergency Measures Pocket Guide 2017
- TOOL: Immunization Consent Form
- TOOL: Treatment Protocol for Anaphylaxis 2017
- TOOL: TST Consent Form

7.7 - Activity

• Hands-on familiarization with immunization vials and ampules, packaging, and techniques, case scenario discussion utilizing 2016 Ontario Immunization Schedule.

7.8 - Evaluation

o QUIZ: Module 7 - Paediatric and Adult Immunizations

MODULE 8: PUBLIC HEALTH: COMMUNICABLE DISEASES, SEXUALLY TRANSMITTED INFECTIONS AND CONTACT TRACING

8.1 - Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 18-1 to 18-25 -Communicable Diseases
- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 11 Communicable Diseases
- Canadian Guidelines on Sexually Transmitted Infections

8.2 - Lecture Time: 1.25 hours Case Scenario: 15 minutes; Activity: 15 minutes.

8.3 - Contract Nurses will discuss a variety of communicable diseases and infections that affect both the adult and paediatric populations, including tuberculosis. They will learn to perform comprehensive assessments using an organized approach to assess chief complaint, history of present illness, sexual history as required and perform a relevant physical exam to screen for communicable diseases or sexually transmitted infections.

Contract Nurses will understand and determine the need for the appropriate diagnostic tests (blood work, or urine/ swab for culture) required to test for communicable diseases and sexually transmitted infections, and learn how to discuss assessment and laboratory findings with the client, recognizing the need and performing contact tracing if necessary.

Module 8 Overview

- Chain of Transmission
- Breaking the chain of transmission
- Assessment of Communicable Diseases
- Communicable Disease Control and Management
- Infection Prevention and Control Routine Practices
- Common Communicable Diseases
 - Gastroenteritis (Bacterial and Giardiasis
 - Varicella
 - Viral Hepatitis

- Human Immunodeficiency Virus
- o Fifth Disease
- Invasive Group A Streptococcal Infection

- Streptococcal Toxic Shock Syndrome
- Mononucleosis
 - Reportable Disease form
 - Reportable Disease List
 - *SCENARIO*: Clinical Presentation 1
 - Rabies Exposure
 - Tuberculosis
 - TST Consent form

Sexually Transmitted and Blood Borne Infections and Contact Tracing

- History (Men/ Women)
- Physical Exam
- Differential Diagnoses
- Diagnostic Tests
- Medical Directive Treatment of STBBI
- Pharmacological Interventions
- Non-Pharmacological Interventions
- Blood testing for STBBIs
 - o HIV
 - Syphilis
- Contact Tracing
 - o Forms

8.4 - Mandatory Learning Activities

• HANDOUT: Module 8 - Public Health - Communicable Diseases, STBBIs and Contact Tracing

Rabies

Tuberculosis

- LINK: Canadian Guidelines on Sexually Transmitted Infections 2014-03
- RESOURCE: CNO Practice Standard Infection Prevention and Control

8.5 - Resources

- RESOURCE: Communicable Disease Fact Sheets
 - RESOURCE CD Fact Sheet -Campylobacter
 - RESOURCE CD Fact Sheet -Chlamydia.
 - RESOURCE CD Fact Sheet E.
 Coli.
 - RESOURCE CD Fact Sheet Giardiasis
 - RESOURCE CD Fact Sheet Gonorrhea
 - RESOURCE CD Fact Sheet -Hepatitis A
 - RESOURCE CD Fact Sheet -Hepatitis B

- RESOURCE CD Fact Sheet -Invasive Group A Streptococcal
- RESOURCE CD Fact Sheet Legionellosis
- o RESOURCE CD Fact Sheet Listeriosis
- RESOURCE CD Fact Sheet Meningococcal
- o RESOURCE CD Fact Sheet Mumps
- o RESOURCE CD Fact Sheet Pertussis
- RESOURCE CD Fact Sheet Salmonellosis
- o RESOURCE CD Fact Sheet Shigellosis
- RESOURCE CD Fact Sheet Tuberculosis

RESOURCE - CD Fact Sheet -

o RESOURCE: CD Fact Sheet - Influenza

Yersiniosis

- Flu Facts 2015-11
- ILI Form 2017-08ILI Form 2017-08
- Influenza Pocket Guide for Health care Providers
- Is it a cold or flu? Comparison table.
- Know the Flu Factsheets
- RESOURCE: Rabies
- Fact Sheet Owners involved in Rabies Investigation
- Fact Sheet Rabies
- Rabies Decision Tree Owned Animal
- Rabies Decision Tree Wild Animal
- Rabies Management Overview
- Rabies Vaccine and Immune Globulin Administration
- RESOURCE: Tuberculosis
- CCHCS Care Guide Tuberculosis Surveillance
- Indications for treatment of latent TB infection
- Roles and Responsibilities within TB Management
- TB Meds and Weights
- TB screening and contact management guidelines
- TB symptom inquiry questionnaire
- RESOURCE FNIHB Communicable Disease
- Public Health Liaison Nurse File

8.6 - Tools

- COURSE: CFIA Online Module 1 Determining the Risk of Rabies
- COURSE: CFIA Online Module 2 Sample Collection and Submission to CFIA Rabies Lab
- COURSE: CFIA Online Module 3 Rabies Post Exposure Management of Domestic Animals
- TOOL: Generic Reportable Disease Contact Tracing Form
- TOOL Rabies Guidance Information: Part 1 File
- TOOL: Reportable Disease Form
- TOOL: STI Contact Tracing Form
- VIDEO: Tuberculosis causes, symptoms, diagnosis, treatment & pathology
- VIDEO: Viral hepatitis A, B, C, D, E causes, symptoms, diagnosis, treatment & pathology

8.7 - Activity

• Familiarization with Public Health forms, contact tracing tool, reportable disease form etc.

Evaluation

• QUIZ - M08 - Public Health, CD and STI's

MODULE 9: NEONATAL, WELL INFANT AND WELL CHILD HEALTH ASSESSMENT AND PAEDIATRIC NUTRITION

9.1 - Pre-Reading:

- FNIHB Clinical Practice Guidelines Paediatric Guidelines
 - o Chapter 1 Paediatric Health Assessment
 - o Chapter 3 Paediatric Prevention and Health Maintenance
 - o Chapter 5 Child Maltreatment
 - o Chapter 7 Nutrition

9.2 - Lecture Time: 1.5 hours; Case Scenario 30 minutes; Activity 15 minutes.

9.3 - Contract Nurses will be able to complete focused assessments, recognize deviations from normal, analyze findings and develop differential diagnoses that can help identify urgent and emergency problems in the otherwise well neonate, infant and child. They will perform screening assessments for well baby and well child visits, and understand and determine the need for further consultation, screening and diagnostic tests.

Contract Nurses will be able to discuss health assessment findings with clients and will be able to make appropriate prevention recommendations. They will also understand family structures, determine how to conduct a family assessment and assessment and assist families in accessing resources to meet health needs of their child.

Module 9 Overview

- Rourke Baby Record
- Greig Health Record
- LOOKSEE Checklist (Formerly Nippissing Developmental Guide)
- Newborn Assessment
 - o Birth History'
 - o Length of Gestation
 - APGAR Score
- *SCENARIO* Pre-visit tips
 - General History and Review of Systems
 - o Physical Assessment
 - o General Exam Approach
 - Weight
 - Measurements
 - o Fontanelle Assessment
 - o Eye Exam
 - o Ear Exam
- A note on Fevers
- Nutrition
- Safe Practices
- Professional Duty to Report Child Abuse and Neglect
- Community Resources

9.4 - Mandatory Learning Activities

- o Mouth Exam
- o Cardiovascular Exam
- o Respiratory Assessment
- o Neurological Examination
- Reflexes
- Abdomen and Genitalia
- Hip exam
- Skin exam

- HANDOUT: Module 9 Neonatal, Well Baby and Well Child and Paediatric Nutrition
- VIDEO: CHCA's Well Baby Assessment Video starring Connor Rankin (33mins)

9.5 - Resources

- LINK: APGAR Score
- LINK: Rourke Baby Record
- LOOKSEE Checklist (Formerly Nippissing District Developmental Screen) (NDDS)
- RESOURCE: Infant Assessment Folder
- RESOURCE: Infant Feeding
- Feeding schedule for infants

9.6 - Tools

- TOOL: Rourke Baby Record Form (Ontario) 2017
- TOOL: LOOKSEE Checklist

o 1-2 months	o 2 years
o 4 months	o 3 years
o 6 months	o 4 years
o 9 months	o 5 years
o 12 months	 Greig Health Record Ages 6-to-9
o 15 months	o Greig Health Record Ages-10-to-13
o 18 months	o Greig Health Record Ages-14-to-17

9.7 – Activity – Hands on familiarization with Rourke Baby Record, Greig, and LOOKSEE Tools.

9.8 - Evaluation

• M09 - QUIZ - Neonatal, Well Infant, and Well Child Assessment

MODULE 10: ASSESSMENT OF THE SICK CHILD - ACUTE, URGENT AND EMERGENT PRESENTATIONS AND PROCEDURES.

10.1 - Pre-Reading:

- FNIHB Clinical Practice Guidelines: Paediatric Guidelines
 - o Chapter 2 Paediatric Procedures
 - o Chapter 4 Fluid Management
 - o Chapter 6 Dysfunctional Problems of Childhood
 - o Chapter 9 Ears Nose Throat and Mouth (Otitis Media, Pharyngitis, Tonsillitis)
 - Chapter 10 Respiratory (Bronchiolitis)
 - Chapter 11 Cardiology (Rheumatic Fever)
 - o Chapter 16 Skin (Impetigo)
 - o Chapter 20 General Emergencies and Major Trauma

10.2 - Lecture Time: 2.5 hours; Case Scenarios: 45 minutes

10.3 - Contract Nurses will be able to complete focused assessments, recognize deviations from normal, analyze assessment and diagnostic findings and develop differential diagnoses that can identify urgent and emergent problems in the sick child. They will understand and determine the need for the appropriate screening and diagnostic tests

required treatment of common paediatric illnesses, e.g., blood sugar, Haemoglobin, urinalysis, hearing and vision acuity, ear and throat swab, blood tests.

Contract Nurses will learn to identify common, urgent, and emergent illnesses or conditions, and suitable treatment plans will be made, which best meet the patient's and family's needs. They will understand how to discuss assessment findings with the patient/caregiver and make appropriate primary prevention, safety, environmental and lifestyle recommendations. Furthermore, Contract Nurses will better understand family structures, how to conduct a family assessment and assess potential for change to assist families in accessing resources to meet health needs of the child.

Module 10 Overview

Acute Conditions:

- Respiratory Distress
- Skin Infections
- Otitis Media
- MSK Injuries
- Lice and Scabies

Chronic Conditions

- Asthma
- Eczema
- Iuvenile Arthritis
- FASD
- ADHD, ODD
- Depression
- Anxiety

SCENARIO 1 - Bronchiolitis

SCENARIO 2 – Impetigo

SCENARIO 3 – Invasive Group A Streptococcus

SCENARIO 4 – Gastroenteritis and Dehydration

Paediatric Procedures

- Procedural Preparation and restraint
- Intravenous Access
 - Venipuncture, phlebotomy procedures; Intraosseous access
- Fluid Requirements
- Nasogastric or Oro-gastric tube insertion
- Urinary Catheterization

10.4 - Mandatory Learning Activities

 Module 10: Acute, Urgent and Emergent Sick Child Case Studies and Paediatric Procedures

10.5 – Resources

- RESOURCE Bronchiolitis treatment guidelines
- RESOURCE: Erikson's Psychosocial Stages
- RESOURCES: Fever Management
- RESOURCE Managing your child's fever at home
- RESOURCE Protocol for babies with fever

- RESOURCES: Paediatric Assessment
- RESOURCE Observation of retractions
- RESOURCE Recognition of the seriously ill paediatric patient
- RESOURCE The paediatric patient
- RESOURCES: Paediatric Rashes
- VIDEO: Respiratory Syncytial Virus and Bronchiolitis

10.6 - Tools

- TOOL: How to Document Child Abuse
- TOOLS: Paediatric Procedures
 - o TOOL Intermittent urinary catheter procedure
 - o TOOL Intraosseous access procedure
 - o TOOL Intravenous access procedure
- TOOL: Paediatric Fluid Replacement
- TOOL: Paediatric dehydration and fluid replacement

10.7 - Evaluation - Evaluation of this module is included in the Module 9 quiz.

MODULE 11: BEHAVIOURAL HEALTH AND ADDICTIONS - ADULT AND PAEDIATRIC CHRONIC, ACUTE AND EMERGENCY PRESENTATIONS

11.1 - Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 19 Adolescent Health
- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 15 Mental Health

11.2 - Lecture Time: 1 hour; Activity: 30 minutes

11.3 - Contract Nurses will demonstrate how to perform an organized, comprehensive behavioural health assessment. They will adapt assessment techniques to the client's condition, and recognize the deviations and/ or variations from normal findings, as they relate to the current Clinical Practice Guidelines (CPG) and screening.

They will consult with other healthcare providers regarding assessment in an appropriate and timely manner and perform screening assessments as required, including trauma assessment for patients with acute presentations and addictions.

Contact Nurses will also garner a better understanding to determine the need for appropriate laboratory and diagnostic testing to monitor patients with chronic mental illness on routine pharmacological treatment, as well as to assess and treat drug overdoses or other conditions related to excessive drug or alcohol misuse.

Contract Nurses will learn to utilize evidence-based tools such as the Generalized Anxiety Disorder (GAD-7) and Patient Health Questionnaire (PHQ-9), as well as the Clinical Opiate Withdrawal Score (COWS) and Clinical Institute Withdrawal Assessment for Alcohol (CIWA-Ar).

Note: Suicide is covered entirely in Module 12.

Module 11 Overview

Part 1 – Introduction

- Behavioural Health Assessment
- Common behavioural Health, psychiatric and related problems
 - Anxiety Disorders
 - o Mood Disorders
 - Psychotic Disorders
 - o Family Violence
 - Substance Misuse and Addiction
 - o Harm Reduction

Part 2 – Behavioural Health Emergencies

- Alcohol Withdrawal and Delirium
- Cognitive impairment
- Sexual Assault
- Child abuse and neglect

11.4 - Mandatory Learning Activities

• HANDOUT: Module 11: Behavioural Health and Addictions - Adult and Paediatric chronic, acute and emergency presentations

11.5 - Resources

- RESOURCE: CIHI Mentally healthy communities Aboriginal perspectives
- RESOURCE: Hospital Guidelines for the Treatment of Persons Who Have Been Sexually Assaulted
- ARTICLE: 'Such courage': How one First Nation is fighting opioid addiction
- LINK: Canadian Paediatric Society Mental Health Screening Tools
- VIDEO: How does substance use develop into abuse? (8 mins)
- RESOURCES: Sexual Assault
- National Sexual Violence Resource Centre Guides Assessing patients for sexual violence
- Sexual Assault Resources
 - o Body map
 - o Sexual Assault eBook
- Child Abuse and Neglect Resources
 - How to document child abuse
 - o Tikinagan child and family services intake investigations unit
- Alcohol Withdrawal Resources
 - Alcohol withdrawal assessment scoring guidelines
- LINK: eMentalHealth.ca
- Mental Health Tools
 - o Alcohol, smoking and substance involvement screening test
 - Diagnosing mood disorders
 - o GAD7 Questionnaire
- Mental status assessment
 - o PHQ9 QuestionairePHQ9 Questionnaire
 - o Recognizing delirium, depression and dementia

o RESOURCE - Common procedures drug overdose

11.6 - Tools

- VIDEO Alcoholism: causes, symptoms, diagnosis, treatment, pathology
- VIDEO Clinical depression: major, post partum, atypical, melancholic, persistent
- VIDEO Generalized anxiety disorder GAD causes, symptoms & treatment
- VIDEO Opioid dependence & opioid use disorder
- VIDEO Schizophrenia causes, symptoms, diagnosis, treatment & pathology
- VIDEO Substance Use Disorders (8 mins)
- ONLINE MODULE: Care and Treatment of Persons Who Have Been Sexually Assaulted
- TOOL COWS Clinical Opiate Withdrawal Score
- TOOL Clinical Institute Withdrawal Assessment for Alcohol (CIWA-A)
- TOOL GAD 7 screening questions
- TOOL PHQ9 screening questions
- TOOL: Sexual Assault Evidence Kit instructions
- TOOL Form 1
- TOOL Form 42

11.7 – Activity

 Hands-on familiarization with tools: GAD-7, PHQ-9, CIWA-Ar, COWS, SAEK, and other forms.

11.8 - Evaluation

• QUIZ - Module 11: Behavioural Health and Addictions

MODULE 12: SUICIDE PREVENTION, ASSESSMENT AND TREATMENT OF THE SUICIDAL PATIENT

12.1 Required Pre-Reading:

- Centre for Addiction and Mental Health "Suicide Prevention and Assessment Handbook"
- Adult Guidelines Chapter 15 Mental health (p. 15-72 to 15-84);
- Paediatric Guidelines Chapter 19 Adolescent health (p. 19-22 to 19-29)
- Columbia Suicide Severity Rating Scale

12. 2 - Lecture Time: 1 hour, Activity: 30 minutes

12.3 - Contract Nurses will discuss the Nurse's role in suicide prevention including: Identifying risk and protective factors; identifying warning signs; understanding the importance of "no show" follow up; performing an organized, comprehensive behavioural health assessment, including history and mental status examination.

Contract Nurses will adapt assessment techniques according to the client's condition, and recognize the deviations and or variations from normal findings, conduct a Suicide Risk Assessment; Identify Non-Pharmacological Interventions; Identify Medevac Criteria; Recognize available community resources; Discuss: Coroner's inquest findings (Selena Sakanee and Pikangikum First Nation inquests. They will become familiar with the use of

the Columbia Suicide Severity Rating Scale, as well as gain familiarity with the use of Form 1 and Form 42.

Contract Nurses will discuss assessment and follow-up of suicide attempt, as well as review Suicide Attempt – Initial Emergency Management for hanging and overdose.

Module 12 Overview

- Assessment and Intervention
 - History Taking
 - Physical findings
 - Suicide Risk Assessment Tool (SAD PERSONAS)
 - o Non-Pharmacological Interventions
 - o Attempted Suicide
 - o Referral Medevac Criteria
 - Community Resources
- CHM Role in Suicide Prevention
- Risk and Protective Factors
- Warning Signs
- Coroner's Inquest: Selena Sakanee
- Coroner's Inquest: Pikangikum First Nation
- Suicidal Behaviour
- Columbia Suicide Severity Rating Scale
- Management of the Suicidal patient
- Safety Planning
- Forms (Form 1, Form 42)
- Initial Emergency Management
- Algorithm for the Management of Patients with a recent suicide attempt
- Resources

12.4 - Mandatory Learning Activities

- HANDOUT: Module 12 Prevention of Suicide; Assessment and Treatment of the Suicidal Patient
- CAMH: Suicide Prevention and Assessment Handbook (2011)
- VIDEO: Columbia Suicide Severity Rating Scale (18 mins)

12.5 - Resources

- RESOURCE: Columbia Suicide Severity Rating Scale (CSSRS)
- RESOURCE Suicide Among Aboriginal People in Canada
- RESOURCE Selena Sakanee Inquest
- RESOURCE: Maclean's Magazine -Canada home to the suicide capital of the world.
- Mental Health Act Forms
 - o Form 1
 - o Form 42

12.6 - Tools

- TOOL: Columbia Suicide Severity Rating Scale Screener
- VIDEO: Attawapiskat TVO
- VIDEO: Canada's Aboriginal Suicide Emergency (1m20s)

- VIDEO: Inside Attawapiskat (2m35s)
- VIDEO: Suicide tide in Canadian indigenous community, 'third world conditions' blamed (4mins)

12.7 – Activity – Familiarization with CSSRS tool

12.8 - Evaluation

• QUIZ - Module 12: Suicide Prevention, Assessment and Treatment of the Suicidal Patient

MODULE 13: CHRONIC DISEASE CASE MANAGEMENT AND EXACERBATION EMERGENCIES

13.1 - Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Intro (p. I-7 to I-9)
- FNIHB Clinical Practice Guidelines Chapter 10 Haematology, Metabolism and Endocrinology
- RESOURCE: Canadian Thoracic Society Position statement Pharmacotherapy for patients with COPD an update (2017)
- RESOURCE: Hypertension Canada 2017 Guidelines
- RESOURCE: Kidney Wise Clinical Toolkit
- RESOURCE: Canadian Journal of Diabetes 2013 Clinical Practice Guidelines (p. S296)
- RESOURCE: Eating Well with Canada's Food Guide First Nations, Inuit and Métis
- RESOURCE: Dietary Guidelines for the Brazilian Population
- VIDEO: 23½ Hours: What is the single best thing we can do for our health? (9m18s)

13.2 - Lecture Time: 2.0 hours, Activity: 30 minutes

13.3 - Contract Nurses will learn to recognize the deviations/ variations from normal findings, as they relate to the current clinical practice guidelines. They will help identify potential chronic health problems, and better understand how to routinely manage them. They will understand and determine the need for the appropriate diagnostic testing; including laboratory and imaging used for screening and prevention, and discuss health assessment findings with clients.

Contract Nurses will garner an understanding of common hematologic, endocrine and metabolic conditions such as; Diabetes (Type 1); Diabetes; Anemia (Microcytic, Normocytic, Macrocytic), Chronic Obstructive Pulmonary Disease, Chronic Kidney Disease and Hypertension. They will discuss and demonstrate the diabetic foot assessment (monofilament), as well as the use of screening and monitoring tools.

Module 13 Overview

- Canada's Food Guide for First Nations, Inuit and Metis
- Brazilian Food Guide FAO
- Chronic Obstructive Pulmonary Disease
- Hypertension
- Chronic Kidney Disease
- Diabetes
- Anemia

13.4 - Mandatory Learning Activities

- HANDOUT: Module 13: Chronic Disease Case Management
- VIDEO: 23 ½ Hours: What is the single best thing we can do for our health? (9m18s)
- RESOURCE: Eating Well with Canada's Food Guide First Nations, Inuit and Métis

13.5 - Resources

- RESOURCE: Dietary Guidelines for the Brazilian Population
- RESOURCE: Canadian Guidelines for Body Weight Classification in Adults

Hypertension

- Canadian Hypertension Guidelines (2017)
- VIDEO Hypertension: causes, symptoms, diagnosis, treatment, pathology
- VIDEO: Cardiology Hypertension

Chronic Obstructive Pulmonary Disorder

- Managing dyspnea in patients with advanced chronic obstructive pulmonary disease (2011)
- VIDEO: Understanding COPD (4m 3s)

Diabetes

- RESOURCE: Diabetes Canada 2018 Clinical Practice
- VIDEO: The ABC's of Diabetes (1m46s)
- VIDEO Diabetes mellitus type 1, type 2 & diabetic ketoacidosis DKA causes & symptoms

Anemia

- RESOURCE Food sources of Iron
- RESOURCE Food Sources of Vitamin

13.6 - Tools

- TOOL- FNIHB Diabetes Flow sheet
- TOOL 60 second Foot Screen (Wounds Canada-Inlow)
- TOOL FNIHB Hypertension Flow sheet
- TOOL Kidney Wise Clinical Toolkit
- **13.7 Activity:** Familiarization with tools: Diabetes, Hypertension Flow sheets, and Kidney Wise Toolkit, and use of a monofilament device.

13.8 - Evaluation

Evaluation of this module is done through Case Scenario discussion and observation of skills.

MODULE 14: ADULT AND GERIATRIC PERIODIC HEALTH EXAMINATION AND PREVENTATIVE SCREENING

14.1 - Required Pre-Reading:

- FNIHB Clinical Practice guidelines Adult Guidelines: Intro (p. I-7 to I-9)
- FNIHB Clinical Practice guidelines Adult Guidelines: Chapter 6 Genitourinary System (p. 6-1 to 6-4; 6-20 to 6-35)
- FNIHB Clinical Practice guidelines Adult Guidelines: Chapter 10 Haematology, Metabolism and Endocrinology (p. 10-31 to 10-34)
- Comprehensive Geriatric Assessment

14.1.1 – Recommended adjunct course: McMaster Clinical Skills in Well Woman Care https://fhs.mcmaster.ca/conted/clinicalskills.html

14.2 - Lecture Time: 1.0 hours; Activity: 30 minutes

14.3 - Contract Nurses will review how to perform a periodic health exam systematically using an Inspection, Palpation, Percussion and Auscultation (IPPA) format for both Well Woman and Well Man Exams. They will also be introduced to regular and routine screening for Chronic Disease, as well as Cancer Care Ontario's approach to Preventative Screening. Contract Nurses will also learn to recognize the deviations/ variations from normal findings, as they relate to the current clinical practice guidelines.

Module 14 Overview

Both Men and Women:

- Colorectal Cancer Screening
- Comprehensive Geriatric Assessment
- Osteoporosis Screening

Men's Health

- Well Man Assessment
- Prostate Screening
- Acute Bacterial Prostatitis
- Benign Prostatic Hyperplasia
- Epididymitis
- Testicular Torsion
- Erectile Dysfunction

Women's Health

- Well Woman Assessment
- Cervical Screening
- Breast Screening
- Dysmenorrhea
- Abnormal Uterine Bleeding
- Menopause

14.4 - Mandatory Learning Activities

- RESOURCE: Physical Examination of Adults
- RESOURCE CCO Aboriginal Cancer Strategy
- VIDEO: The Periodic Health Exam (2min 18s)
- VIDEO: Choosing Wisely: Do More Screening Tests Lead to Better Health? (10m17s)

14.5 - Resources

Both Women and Men

- RESOURCE: History For Adults
- LINK: CancerCareOntario Colorectal Screening
- RESOURCE: Comprehensive Geriatric Assessment
- LINK: Osteoporosis Canada
- LINK: WHO FRAX Fracture Risk Assessment Tool
- VIDEO: The Timed Up and Go (TUG) test

Well Man

- VIDEO: Deeper Dive on PSA Screening (1m56s)
- VIDEO: The Prostate Specific Antigen (PSA) Test (8m48s)

Well Woman

- Video 1 Focus on Screening
- Video 2 Focus on Cervix
- VIDEO: Cervical Broom Collection Technique
- Video 3 Focus on Technique
- Video 5 Focus on Women
- VIDEO: The 5 minute breast exam
- RESOURCE: Abnormal Uterine Bleeding Factsheet
- RESOURCE abnormal cervical screening follow up
- RESOURCE: Physical Assessment of Women
- RESOURCE: Depo Info-SOGC Guidelines
- RESOURCE SOGC CPG Osteoporosis in Menopause

14.6 - Tools

- TOOL: FNIHB Well Man Checklist
- TOOL: FNIHB Well Woman Checklist
- TOOL: LifeLabs Diagnostic Cytology Requisition
- TOOL Meno Ya Win Diagnostics Breast Imaging Requisition
- TOOL: Well Women Exam Prompts
- TOOL: Depo Calendar
- **14.7 Activity:** Hands-on familiarization with tools and implements for Well Woman examination, screening tools and resources.

14.8 - Evaluation

Evaluation for this module is via case scenario discussion.

MODULE 15: CONTRACEPTIVE METHODS AND MANAGEMENT

15.1 - Required Pre-Reading:

- FNIHB Adult Clinical Practice Guidelines Chapter 13 Women's Health and Gynaecology (p.13-15 to 13-20)
- FNIHB Paediatric Clinical Practice Guidelines Chapter 19 Adolescent Health (p.19-9 to 19-21)
- SOGC Policy Statement: Sexual and Reproductive Health, Rights, and Realities and Access to Services for First Nations, Inuit, and Métis in Canada
- Canadian Contraceptive Consensus

15.2 Lecture Time: 1.5 hours; Activity 15 minutes

15.3 - Contract Nurses describe and discuss counselling for contraception, garner a greater understanding of the various types of contraceptive options, identify contraindications for hormonal contraceptive use and investigate emergency contraceptive options.

Contract Nurses will describe and discuss counselling for contraception, understand the various types of contraceptive options, identify contraindications for hormonal contraceptive use and investigate emergency contraceptive and termination options.

Module 15 Overview

- Counselling for Contraception
- Non-Pharmacological Interventions
- Contraceptive Options
 - o Barrier
 - o Implantation prevention
 - o Hormonal
 - o Surgically permanent options
- Emergency Contraception
- SCENARIO
- Therapeutic Termination

15.4 - Mandatory Learning Activities

• HANDOUT: Module 15: Contraceptive Methods and Management

15.5 - Resources

- LINK: SOGC Aboriginal Sexual Health
- RESOURCE: Canadian Contraception Consensus
 - o Canadian Contraception Consensus (Part 1 of 4
 - o Canadian Contraception Consensus (Part 2 of 4
 - o Canadian Contraception Consensus Chapter 1 (Part 1 of 4)
 - o Canadian Contraception Consensus Chapter 2(Part 1 of 4)
 - o Canadian Contraception Consensus Chapter 3 (Part 1 of 4)
 - o Canadian Contraception Consensus Chapter 4 (Part 2 of 4)
 - o Canadian Contraception Consensus Chapter 5 (Part 2 of 4)
 - o Canadian Contraception Consensus Chapter 6 (Part 2 of 4)
- RESOURCE: SOGC Policy Statement Aboriginal Sexual Health and Rights
- RESOURCE: SOGC Practice Guideline Emergency Contraception
- RESOURCE: BCBC Choices for Termination

15.6 - Tools

- TOOL: Birth Control Start Sheet
- TOOL: FNIHB Depo-Provera Flow Sheet
- TOOL: Depo-Provera Perpetual Calendar
- **15.7 Activity** Hands-on familiarization with tools and implements for contraception, Including Intrauterine devices, Depo-Provera injection etc.

15.8 - Evaluation

• QUIZ - M15 - Contraceptive Methods & Management

MODULE 16: ROUTINE, HIGH RISK PRENATAL, POST PARTUM AND GYNAECOLOGICAL HEALTH ASSESSMENT

16.1 - Required Pre-Reading:

- Adult Guidelines Chapter 12 Obstetrics
- Adult Guidelines Chapter 13 Women's Health and Gynaecology
- RESOURCE: Ontario Perinatal Record User Guide
- RESOURCE: Preconception Tool

- RESOURCE: SOGC Policy Health Professionals Working With First Nations, Inuit, and Metis Consensus Guideline 2013
- RESOURCE: SOGC Policy Statement Returning birth to indigenous communities

16.2 - Lecture Time: 2 hours; Activity 15 minutes

16.3 - Contract Nurses will discuss endocrine issues in obstetrical client including: Gestational Diabetes Mellitus, and review chronic conditions including: diabetes (type 1, type 2 and Gestational); depression; addictions; and domestic abuse. Contract Nurses will understand the management of obstetrical clients presenting with common, urgent and or emergent problems, initiate prescription of drugs and therapeutics as appropriate, based on the assessment data safely for prenatal clients and provide health teaching for clients and their caregivers. They will demonstrate knowledge of prenatal checklist, date a new pregnancy using the Maternity Care Calendar, understand key physical exam and laboratory tests for prenatal visit and know important "red flag" signs and symptoms to report.

Contact nurses will review various case studies, explain what maternal serum screening is for, as well as how and when to order this blood test, and explain why, when, and how to swab for Group B Strep.

Module 16 Overview

- Patient centred model
- Urine pregnancy test
- GTPAL
- LMP
- Pregnancy Wheel
- Ontario Perinatal Records 2017
- Prenatal Care
- History and Screening
- Depression Screening
- Medication
- Review of Systems
- Prenatal Visits
- Fetal Heart Tones
- Uterine Size
- Quickening
- Common causes of gestational inaccuracies
- Diagnostic Test
- Initial Blood, Urine, Swabs
- Genetic testing
- Ultrasound

16.4 - Mandatory Learning Activities

- HANDOUT: Module 16: Routine and High-Risk Prenatal, Post-Partum and Gynaecological Health Assessment
- Ontario Cervical Screening Cytology Guidelines Summary 2012

16.5 - Resources

- Prenatal Resources
 - o Fetal Development
 - o Fundal growth curve
 - o Group B streptococcus infection in pregnancy
 - Maternity care calendar
 - o Prenatal checklist
 - o Prenatal clinical examination
 - o Prenatal risk score
 - o Prenatal warning signs to report
 - o Routine prenatal care
 - o Vaginal anorectal swab for group b streptococci
- Prenatal Screening Resources
 - Integrated prenatal screening
 - o Maternal Serum Screening Guide
- Post natal resources
 - o Maternal Post natal checklist and postnatal visit
- RESOURCE: 2017 Ontario Perinatal Record User Guide
- RESOURCE: SOGC Policy Health Professionals Working With First Nations, Inuit, and Metis Consensus Guideline
- RESOURCE: SOGC Policy Statement Returning birth to Indigenous communities
- LINK: MotheRisk (Hospital for Sick Children) Pregnancy and Breastfeeding resources
- LINK: Prenatal Screening Ontario
- VIDEO: 5-minute Pregnant Abdomen Exam (5min)
- VIDEO1: Introduction: First Pregnancy Exam Prep Video (9min10sec)
- VIDEO2: General Appearance Exam for Pregnancy Video (4mins)
- VIDEO3: Maternal Pulse Video
- VIDEO4: Fetal Heart Tones Video
- VIDEO5: Fundal Height Measurement
- VIDEO: Digital Exam (Pregnancy) Video

16.6 - Tools

- TOOL: Ontario Perinatal Record 2017
- TOOL: OPR 2017 User Guide
- TOOL: Preconception Tool

LINK: Virtual Pregnancy Wheel

16.7 – Activity – Hands-on familiarization with tools and resources such as the pregnancy wheel and Ontario Perinatal Record 2017.

16.7 - Evaluation

• QUIZ - M16 - Routine and High-Risk Prenatal

MODULE 17: EPISODIC AND CHRONIC CONDITIONS AND ISSUES IN PREGNANCY

17.1 - Required Pre-Reading:

• FNIHB Clinical Practice Guidelines - Adult Guidelines Chapter 12 Obstetrics

17.2 - Lecture Time: 2 hours, Activity 15 minutes.

17.3 - Contract Nurses will identify chief complaints, history of present illness and perform a systematic physical examination, complete a focused assessment, recognize any deviations from normal, analyze assessment findings, and consult appropriately in a timely manner to develop diagnoses for pre and postnatal patients, and understand and determine the need for the appropriate blood work and other diagnostic tests and imaging required to screen and treat common, gynecological, prenatal and postnatal conditions, and manage the care of these clients. They will ensure familiarity with equipment, and ensure that it is operational when needed, e.g., Fetal Heart Doppler

Contract Nurses will discuss common obstetric problems including;

- Group B Streptococcal Infections
- Gestational Diabetes Mellitus
- Hyperemesis Gravidarum
- HELLP Syndrome
- Intrauterine Growth Restriction (IUGR)
- Polyhydramnios/Oligohydramnios

They will also discuss obstetric emergencies including;

- Bleeding in Pregnancy
- Spontaneous Abortion/Miscarriage
- Antepartum Hemorrhage
- Hydatidiform Mole (Molar pregnancy)
- Premature Rupture of Membranes (PROM)
- Preterm Labour and
- Postpartum Hemorrhage.

Contract Nurses will understand and determine the need for the appropriate blood work and diagnostic tests required to screen and treat common, episodic, and/or chronic conditions in prenatal clients, and discuss health assessment findings with clients, as well as understand how to manage the care of prenatal clients presenting with common, urgent and or emergent problems, initiate prescription of drugs and therapeutics as appropriate, based on the assessment data safely for prenatal clients and provide health teaching for clients and their caregivers.

Module 17 Overview

- Common Discomforts of pregnancy/ self care
 - Nausea/ Vomiting (Hyperemesis Gravidarum)
 - o Headache
 - Urinary Frequency
 - o Fatigue
 - Breast Tenderness
 - Epistaxis/ Nasal Stuffiness
 - o Ptyalism
 - o Pyrosis
 - o Dependent Edema
 - Varicose Veins

- Other Common issues:
 - Constipations
 - Round Ligament pain
 - Faintness
 - Dyspnea
- Chronic Illness
 - o Asthma
- Topics for Teaching
 - Discomforts of pregnancy
 - o Danger signs
 - o Nutrition and weight gain
 - o Fetal growth and development
 - Sexual Activity
 - Sibling preparation
- Approach to Care Child protection
- Indications for Inpatient Management
- Safe Prescribing for Pregnant patients
 - o Drugs during pregnancy
 - o Pregnancy Drug Categories
- Dangers signs in Pregnancy
 - o Pre-eclampsia
 - o HELLP Syndrome
 - o PROM
 - Threatened Abortion
 - o Abruptio Placentae
 - o Placenta Previa
 - o UTI / Pyelonephritis
 - o Change in fetal movement
- Common Chronic Illness in Pregnancy
 - o Gestational Diabetes
 - Depression
 - o Asthma

• HANDOUT: Module 17: Episodic and Chronic Conditions and Issues in Pregnancy

17.5 - Resources

- RESOURCE: Nausea and vomiting of pregnancy
- RESOURCE: Pregnancy and Diabetes Information
- RESOURCE: Perinatal Complications Hypertensive Disorders in pregnancy FNIHB OR 2016
- RESOURCE: Quick reference chart for drug safety in pregnancy
- RESOURCE: SOGC Clinical Practice Guideline Alcohol use and pregnancy
- RESOURCE: SOGC Clinical Practice Guideline Guidelines for the management of a pregnant trauma patient
- RESOURCE: SOGC Clinical Practice Guideline Management of Nausea and vomiting in pregnancy

- RESOURCE: SOGC Clinical Practice Guideline Screening for Gestational Diabetes
- RESOURCE: SOGC Clinical Practice Guideline Diagnosis, Evaluation, and Management of the Hypertensive Disorders of Pregnancy- Executive Summary

17.6 - Tools

- VIDEO Placenta Previa causes, symptoms, diagnosis, treatment
- VIDEO Preeclampsia & eclampsia causes, symptoms, diagnosis, treatment, pathology
- VIDEO Diabetes in pregnancy reproductive system physiology Khan Academy
- **17.7 Activity** Hands-on familiarization with tools such as fetal doppler.
- 17.8 Evaluation Evaluation of this module is included in Module 16 quiz.

MODULE 18: BASIC LABOUR AND DELIVERY IN THE COMMUNITY

18.1 - Required Pre-Reading:

• FNIHB Adult Guidelines Chapter 12 - Obstetrics

18.2 - Lecture Time: 1.5 hours

18.3 - Contract Nurses will Review how to complete a focused assessment, recognize deviations from normal analyze assessment findings; identify urgent, and or emergent conditions and how to consult in a timely manner regarding labor and delivery. They will develop an understanding of how to assist a woman through an uncomplicated spontaneous vaginal delivery. Contract Nurses are encouraged to complete the Neonatal Resuscitation Provider (NRP) course certification.

Contract Nurses will view a video presentation outlining a complete prenatal and postnatal assessment, which includes management of care. They will review and complete samples of the Ontario Perinatal Record 2017 on simulated patients, demonstrate the technique of measuring Fundal Height and discuss its significance to fetal development, Leopold's maneuver to determine fetal position, demonstrate use of prenatal equipment, e.g., Fetal Heart Doppler, and demonstrate a complete abdominal examination of a pregnant patient and participate in-group discussion on identifying prenatal abnormalities and or emergencies.

Contract Nurses will also demonstrate emotional support and confidentiality provided during prenatal and postnatal complications, e.g., threatened, spontaneous and elective abortions, ectopic, postpartum hemorrhage, and postpartum depression.

Module 18 Overview

- Terminology
- Obstetric Emergencies
- Stages of Labour: First Stage
- Stages of Labour: Second Stage
- Stages of Labour: Third Stage
- Stages of Labour: Fourth Stage
- Cervical Assessment
- Fetal Assessment oxygenation
- Fetal Heart Rate

- Contraction Palpation
- Bleeding in Pregnancy
- Placenta Previa
- Abruptio placenta
- Abnormal Placentation
- Ectopic Pregnancy
- Hydatidiform Mole
- Premature Rupture of Membranes
- Hypertension in Pregnancy
 - o Pre-Eclampsia
 - o Eclampsia
- Delivery in the Nursing Station
- APGAR Score
- Postpartum Hemorrhage

- HANDOUT: Module 18: Basic Labor and Delivery in the community
- VIDEO: Fetal Heart Auscultation
- VIDEO: Managing Second and Third Stage of Labor
- RESOURCE: First, second, and third stage of labour
- RESOURCE: Signs and Symptoms of imminent delivery

18.5 - Resources

• RESOURCE: Standards of Postnatal Care for Mothers and Newborns in Ontario: Birth to one-week postnatal period

18.6 - Tools

- VIDEO The 5 minute vaginal delivery
- VIDEO: How the cervix thins and dilates during labour
- **18.7 Evaluation -** Evaluation of this module is included in Module 16 quiz.

MODULE 19: EMERGENCIES AND TRAUMA

19.1 - Required Pre-Reading:

- FNIHB Adult Guidelines Chapter 14 General Emergencies and Trauma
- FNIHB Paediatric Guidelines Chapter 20 General Emergencies and Major Trauma

19.2 - Lecture Time: 1.5 hours, Activity 15 minutes.

19.3 - Contract Nurses will perform Health Assessments including relevant health history and physical examinations across the lifespan in emergency patients, adapts assessment techniques according to client's condition and stage of development, analyze the findings from the annual health assessment and synthesizes data from multiple sources to establish a differential and working diagnosis. They will identify emergency conditions across the life span communicates verbally and in writing, concise and precise history and physical assessment findings on clients across the lifespan and identify common urgent/emergent problems/conditions.

Contract Nurses will manage care of common/urgent/emergent problems/conditions, evaluate care of common/urgent/emergent problems/conditions affecting clients across the lifespan, including initiating intravenous fluid therapy according to the needs of the client. They will implement general principles and manage medical evacuations, initiate prescription drugs and therapeutics based on assessment data, recognize a psychosocial emergency and its broader impact and manage psychosocial emergencies using knowledge of crisis intervention. They will consult with other health care providers regarding interventions in an appropriate and timely manner ie: CTAS guidelines

Contract Nurses will also recognize the potential impact of community disasters and mass-casualty incidents, identify communicable diseases, proficiently operate specific emergency equipment, e.g., ECG, AED, take steps to ensure that equipment is available and operational when needed, and provide basic interpretation of ECG's and respond appropriately.

Module 19 Overview

- General Emergencies and Major Trauma Approach
 - Primary Survey (ABCDE)
 - Secondary Survey
 - o Definitive Care
- Shock
- Hypovolemia
- Pelvic Fracture
- Compound Fractures
- Spinal Cord Injuries
- Cold Weather Injuries
 - o Frostbite
 - o Hypothermia
- Community Disasters, outbreaks and mass casualty incidents
 - Emergency Preparedness
 - Mass Casualty Incident Triage basic concepts
 - o Communicable Disease and Pandemic Influenza Planning
 - o Community Evacuation Planning (Forest Fires, Floods etc.)

19.4 - Mandatory Learning Activities

• HANDOUT: Module 19 - General Emergencies and Major Trauma

19.5 Resources

- RESOURCE Cold Weather Injuries
- RESOURCE ITLS-Supplement-Hypothermia-and-Trauma-
- RESOURCE AHA Rheumatic Fever
- RESOURCE American Heart Association Jones Criteria Rheumatic Fever
- RESOURCE Evaluation of post streptococcal illness
- RESOURCE Evacuation of a First Nation Health System Needs
- RESOURCE FNIHB Policy I 04 Evacuation Plan Final
- RESOURCE Influenza Planning Guide January 2014
- VIDEO Complete Heart Sounds In 7 minutes with Heart Sounds Audio

19.6 Tools

- VIDEO Rheumatic fever & heart disease causes, symptoms, treatment & pathology
- VIDEO Shock causes, symptoms, diagnosis, treatment, pathology
- VIDEO: Sydenham's Chorea post rheumatic fever
- **19.7 Activity –** Review of tools used for emergency preparedness, such as pandemic plan, evacuation planning etc.
- **19.8 Evaluation** Evaluation of this module will be conducted through case scenario discussion.

MODULE 20: HEENT & NEUROLOGY: ASSESSMENT, COMMON AND EMERGENCY PRESENTATIONS

20.1 Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 1 Eyes
- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 2 Ears, Nose, Throat and Mouth
- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 8 Eyes
- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 9 Ears, Nose, Throat and Mouth

20.2 Lecture Time: 1.5 hours; Activity: 1 hour

20.3 Contract Nurses will be introduced to the Central Nervous System and learn how to take a neurological history. They will be provided with an overview of how to perform Mental Status Exam, and Montreal Cognitive Assessment (MoCA), and be given instruction on neurological and cranial nerve examination. They will discuss common problems of the Neurological System, including Bell's palsy, Headache (tension, cluster, migraine) and Temporal Arteritis, and discuss emergent presentations of Meningitis, Seizures, Stroke/Intracranial Hemorrhage, Coma (Not yet diagnosed) and Head Trauma

Contract Nurses will review HEENT Assessment including: Red Eye Reflex, Fundoscopy, Otoscopy, Tonsil Size and Cervical Lymph Nodes, they will discuss the application of Sore Throat Score, and how to conduct a rapid Strep swab test. They will review ophthalmology common conditions include conjunctivitis, red eye and glaucoma and Ophthalmic Emergencies including blunt ocular trauma, chemical burns, corneal abrasion, corneal ulcer and foreign body, as well as common ENT conditions include acute otitis media/ externa, tympanic membrane perforation, benign paroxysmal positional vertigo, pharyngitis, and infectious mononucleosis and ENT emergencies including peritonsillar abscess, posterior epistaxis, and dental emergencies.

Module 20 Overview

Part One – Neurology

- Introduction to CNS
- Neurological History
- Mental Status Exam
- Montreal Cognitive Assessment (MoCA)

- Neurological and Cranial Nerve Examination
- 1B: Neurological Conditions:
 - Bell's Palsy
 - Headache (Tension, cluster, migraine)
 - Temporal Arteritis

1C: Neurological Emergencies

- Meningitis
- Seizures
- Stroke/Intercranial Hemorrhage
- Coma (Not Yet Diagnosed)
- Head Trauma

1D: Paediatric Considerations

- · Hypotonia of the infant or child
- Febrile Seizures

Part Two: HEENT

- Advanced Assessment Techniques:
 - o Red Eye Reflex
 - o Fundoscopy
 - Otoscopy
 - o Tonsil Size
 - Cervical Lymph Nodes

Part Three: Ophthalmology

3A: Ophthalmic Conditions

- Conjunctivitis
- · Red Eve
- Glaucoma

3B: Ophthalmic Emergencies

- Blunt Ocular Trauma
- Chemical Burns
- Corneal Abrasion
- Corneal Ulcer
- Foreign Body
- Retinal Detachment

Part Four: Otorhinolaryngology

4A: ENT Common Conditions

- Otitis (media/ externa)
- Sinusitis
- Pharyngitis
- Infectious Mononucleosis
- Dental Abcess and Decay

4B: ENT Emergencies

- Peritonsillar Abscess
- Posterior Epistaxis
- Emergency Dental

• HANDOUT: Module 20 - Head, Eyes, Ears, Nose and Throat; and Neurology Assessment, Acute and Emergent Conditions

20.5 - Resources

RESOURCE: HSFC Stroke assessment pocket guide

20.6 - Tools

• TOOL: Mini Mental Status Exam

Neurology

- VIDEO: Neurological Exam (25m43s)
- VIDEO: Cranial Nerve Exam
- TOOL: Dermatome Map
- TOOL: Headache Record

HEENT: Head, Ears, Eyes, Nose and Throat

- VIDEO: HEENT Exam (17m45s)
- TOOL: Seeing Red American Academy of Pediatrics
- TOOL: MOCA
- VIDEO Dix Hallpike Maneuver to diagnose BPPV
- VIDEO Epley Maneuver for BPPV

20.7 – Activity Hands-on familiarization with cranial nerve examination, gross and fine sensorimotor examination, deep tendon reflexes, mental status, as well as utilization of assessment tools and equipment such as an ophthalmoscope, otoscope, Snellen chart, ear syringe and curette, 'rhino-rockets' and fluorescein stain. Contract nurses will demonstrate eye examinations, including red-reflex, corneal light reflex, and basic fundoscopy; demonstrate ear examinations, including identification of structures of the ear, and demonstrate Dix-Hallpike and Epley Maneuvers.

20.7 - Evaluation

- M20 HEENT and Neuro Quiz
- Evaluation of this module will be conducted through case study discussion, and observation of hands-on techniques.

MODULE 21: CARDIOVASCULAR AND RESPIRATORY ASSESSMENT, ACUTE AND EMERGENT CONDITIONS

21.1 Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 3 and Chapter 4
- FNIHB Clinical Practice Guidelines Pediatric Guidelines Chapter 10 and Chapter 11

21.2 - Lecture Time: 1.5 hours, Activity 30 minutes.

21.3 – Contract Nurses will review the Cardiovascular and Respiratory Systems, beginning with a review of anatomy, how to take a history including cardinal symptoms, medical history, family history and personal history specific to the Cardiovascular and Respiratory systems. They will discuss differential diagnoses of cardiovascular and respiratory symptoms, discuss an overview of how to perform a 12-lead and 15-lead Electrocardiogram (ECG), reviewing the placement of leads and repositioning for 15-lead

tracing. They will then be instructed on basic ECG interpretation, including identifying normal and abnormal findings

Contract Nurses will discuss common problems of the Cardiovascular System, including Congestive Heart Failure and Ischemic Disease. (Note: Hypertension is discussed in the Chronic Disease Module 13). They will discuss differences between Influenza and the Common Cold, peak-flow testing/ spirometry and its implications in the diagnosis of respiratory illness are then considered. Common conditions will be discussed; including Asthma and Community-Acquired pneumonia are reviewed. (Chronic Obstructive Pulmonary Disease (COPD) is discussed in the Chronic Disease Module 13). They will then discuss emergent presentations of acute asthma exacerbation and Paediatric considerations such as Bronchiolitis and Croup to conclude this section.

Module 21 Overview

Part One: Cardiology

- Cardiac Exam
- Physical Exam
- Differential Diagnoses
- Electrocardiogram (ECG)
- Basic ECG Interpretation

1B: Cardiac Conditions

- Congestive Heart Failure
- Ischemic Disease

1C: Cardiac Emergencies

• Myocardial Infarction

1D: Paediatric Considerations

- Assessment of infants and children
- Cyanosis in the newborn
- Rheumatic Fever

Part Two: Respiratory

- · Respiratory Physiology and history
- Physical Exam
- Differential Diagnoses
- Pulmonary Function Testing/Spirometry

2B: Respiratory Conditions

- Asthma
- Community Acquired Pneumonia

2C: Respiratory Emergencies

Flail Chest

2D: Paediatric Considerations

- Assessment of infants and children
 - History and Physical Findings
- Bronchiolitis
- Cyanosis in the Newborn
- Influenza vs. Common cold

2E: Chest x-ray interpretation

- Module 21: Cardiovascular and Respiratory Assessment, Acute and Emergent Conditions
- VIDEO: The Cardio Vascular / Peripheral Vascular Exam (15m44s)

21.5 - Resources

- RESOURCE: Canadian respiratory guidelines
- RESOURCE: Roles and responsibilities in TB Management

21.6 - Tools

- VIDEO: Lung and Thorax Exam (14m33s)
- **21.7 Activity** Hands-on familiarization with chest assessment, including cardiac and respiratory sounds, and placement of ECG leads. Contract nurses will also review and discuss basic ECG interpretation.

21.8 - Evaluation

Evaluation of this module will be conducted through case scenario discussion, and observation of hands-on techniques.

MODULE 22: GASTROINTESTINAL AND GENITOURINARY ASSESSMENT, ACUTE AND EMERGENT CONDITIONS

22.1 Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 5 Gastrointestinal
- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 6 Genitourinary
- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 12 Gastrointestinal
- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 13 Genitourinary

22.2 - Lecture Time - 1.5 hours; Activity 30 minutes

- **22.3** Contract Nurses will review the anatomy and physiology of the Gastrointestinal (GI) and Genitourinary (GU) Systems and history which includes:
 - Cardinal symptoms
 - Medical history
 - Family history and
 - Specific Personal history to Gastrointestinal and Genitourinary system

Contract Nurses will review and demonstrate physical examination of the abdomen, including Psoas, Obturator and Murphy's, signs and Costovertebral Angle tenderness. They will receive instruction on various Point-of-care testing (POCT) such as urinalysis and Fecal Occult Blood, and discuss differential diagnoses of Acute Abdominal pain. They will discuss common conditions of the GI System including:

- Colic
- Constipation
- Gastroenteritis
- Gastroesophageal Reflux Disease (GERD)

- Inguinal Hernia
- Jaundice
- Recurrent Abdominal Pain and
- Umbilical Hernia

Contract Nurses will also discuss emergency presentations of the GI System including;

- Acute Abdominal Pain
- Appendicitis
- Bowel Obstruction
- Gastrointestinal Bleeding
- Intussusception and
- Nephro/Urolithiasis

Module 22 Overview

- Assessment
 - o History and Review of Systems
 - o Physical Exam
 - Psoas Sign
 - Obturator Sign
 - McBurney's Point
 - Murphy's Sign
- Common Conditions
 - o Diverticulitis
 - Appendicitis
 - o Gallbladder disease
 - Cholecystitis
- Emergency Conditions:
 - Acute Abdominal Pain
 - o GI Bleeds
 - o Pancreatitis
 - Urolithiasis
 - o Overactive bladder and Incontinence

22.4 Mandatory Learning Activities

- HANDOUT Module 22: Gastrointestinal and Genitourinary Assessment, Acute and Emergent Conditions
- VIDEO: Abdominal Exam (12m38s)

22.5 Resources

VIDEO - Fecal Occult Testing

22.6 Tools

- TOOL: Overactive Bladder Diary
- VIDEO Acute Cholecystitis
- VIDEO: Alcohol related liver disease causes, symptoms & pathology
- VIDEO: Appendicitis causes, symptoms, diagnosis, treatment
- VIDEO: Gallstones cholelithiasis causes, symptoms, diagnosis, treatment
- VIDEO: Lower urinary tract infection cystitis causes, symptoms, treatment

- VIDEO: Non alcoholic fatty liver disease NAFLD causes, symptoms
- **22.7 Activity** Hands-on familiarization with physical examination of the abdomen, including Psoas, Obturator and Murphy's, signs and Costovertebral Angle tenderness. They will demonstrate various Point-of-care testing (POCT) techniques such as urinalysis and Fecal Occult Blood, and discuss differential diagnoses of Acute Abdominal pain.

22.8 - Evaluation

Evaluation of this module will be conducted through case scenario discussion, and observation of hands-on technique.

MODULE 23: MUSCULOSKELETAL ASSESSMENT, ACUTE AND EMERGENT CONDITIONS; BASIC RADIOLOGY ASSESSMENT AND CASTING SKILLS

23.1. Required Pre-Reading:

- FNIHB Adult Clinical Practice Guidelines Chapter 7 Musculoskeletal System
- FNIHB Paediatric Clinical Practice Guidelines Guidelines Chapter 14 Musculoskeletal System

23.2 Lecture Time: 1.5 hours; Activity 1.5 hours

- **23.3** Contract Nurses will perform an organized, comprehensive musculoskeletal assessment utilizing the IPPA method, including history, understand basic anatomy, conduct range-of-motion examination, and assess motor skills including:
 - Shoulder (Neer's test, Hawkin's Test)
 - C-Spine (Speed's test)
 - Elbow
 - Wrist and Hand (Tinel test, Phalen's Test for Carpal tunnel
 - Hip
 - Mechanical Low Back conditions (CORE Back Tool)
 - Knee (Drawer tests, Varus / Valgus tests, Ottawa Knee Rule)
 - Ankle (Ottawa Ankle Rule)
 - Foot (Ottawa Foot Rule)

Common Musculoskeletal Conditions:

- Rotator Cuff Injury
- Referred Pain
- Epicondylitis
- Carpal tunnel, arthritis, trigger finger
- De Quervain's tenosynovitis
- Osteoarthritis, bursitis
- Sprains
- Fractures

Contract Nurses will discuss Basic Orthopaedic Principles and Radiology; requisitions, roles and responsibilities, discuss basic principles for reviewing chest x-ray and orthopaedic x-ray, review decision making tools for foot, ankle and knee and review Casting Theory including:

Radial Gutter

- Ulnar Gutter
- Forearm Volar Splint
- Lower leg back slab
- Stirrup splint

Contract Nurses will demonstrate musculoskeletal assessments of shoulder, elbow, wrist, low back, hip, knee, ankle and foot, and demonstrate application of cast – forearm volar splint.

Module 23 Overview

Part One

- Examination of MSK System
- Range of Motion
- Ligament Stability
- Neurological/ Vascular Stability
- SCENARIO: Common problems of the MSK
- Shoulder Conditions
 - o Neer's Test
 - Hawkin's Test
 - o SITS
- Biceps Tendon Injury
 - o Speed's Test
 - o C-spine
- Elbow Conditions
 - o Lateral / Medial Epicondylitis
- Wrist/ Hand Conditions
 - o Tinnel Test
 - o Phalen Test
 - o Finkelstein Test
 - o De Quervain Tenosynovitis
 - o Rule out Carpal Tunnel Syndrome
- Hip Conditions
 - o Bursitis
 - o Pelvic Fracture
- Low Back Pain
 - History
 - o CORE Back Tool
 - o Red Flags
 - Yellow Flags
 - Spinal Injury
 - Hanging and Strangulation
 - o C=-Spine and Spinal Cord Trauma
- Knee Pain
 - Ottawa Knee Rules
- Ankle and Foot Conditions

Part Two

Basic Orthopaedic Principle and Radiology

- Indications for X-Ray s
- Fracture Terminology
- Anatomy of Large Bones
- Anatomy of Small Bones
- Systematic Approach
- Compartment Syndrome

Hands on Practice

- Upper Extremity Splints
- Lower Extremity Splints

23.4 Mandatory Learning Activities

- HANDOUT: Module 23 Musculoskeletal Assessment, Acute and Emergent Conditions; Basic Radiology Assessment and Casting Skills
- VIDEO: CORE Back Tool Intro (3m16s)
- VIDEOS: The Upper Limbs Joint Assessment Made Easy Dr. J. Harvey
- VIDEOS: The Lower Limbs Joint Assessment Made Easy Dr. J. Harvey P
- TOOL: CORE Back Tool 2016

23.5 - Resources

- RESOURCE: X- Rays Education Document
- RESOURCE: ROM Chart
- LINK: Ottawa Ankle Rules
- LINK: Ottawa Knee Rules
- LINK: Casting and Splinting
- RESOURCE: Ankle and knee examination

23.6 - Tools

- RESOURCE: Hands, wrists, elbows, shoulders, spine, hips and knees
- TOOL: Practice skills checklist
- VIDEO: Neer's Test (1m11s)
- **23.7 Activities -** Hands-on familiarization with range-of-motion examination, and assessment of motor skills including:
 - Shoulder (Neer's test, Hawkin's Test)
 - C-Spine (Speed's test)
 - Elbow
 - Wrist and Hand (Tinel test, Phalen's Test for Carpal tunnel
 - Hip
 - Mechanical Low Back conditions (CORE Back Tool)
 - Knee (Drawer tests, Varus/ Valgus tests, Ottawa Knee Rule)
 - Ankle (Ottawa Ankle Rule)
 - Foot (Ottawa Foot Rule)

Contract Nurses will discuss Basic Orthopaedic Principles and Radiology; requisitions, roles and responsibilities, discuss basic principles for reviewing chest x-ray and orthopaedic x-

ray, review decision making tools for foot, ankle and knee and review Casting Theory including:

- Radial Gutter
- Ulnar Gutter
- Forearm Volar Splint
- Lower leg back slab
- Stirrup splint

Contract Nurses will demonstrate musculoskeletal assessments of shoulder, elbow, wrist, low back, hip, knee, ankle and foot, and demonstrate application of cast – forearm volar splint.

23.8 - Evaluation

Evaluation of this module will be conducted through case scenario discussion, and observation of hands-on techniques.

MODULE 24: DERMATOLOGY ASSESSMENT: ACUTE AND EMERGENT CONDITIONS; ADVANCED WOUND CARE AND SUTURING SKILLS

24.1 Required Pre-Reading:

- FNIHB Clinical Practice Guidelines Adult Guidelines Chapter 9 Skin
- FNIHB Clinical Practice Guidelines Paediatric Guidelines Chapter 16 Skin

24.2 Lecture Time: 1.5 hours, Activity 1.5 hours

24.3 Contract Nurses will review of the Dermatological System and nomenclature, beginning with a systematic dermatological assessment and history including medical history, family history and personal history specific to the Dermatological symptoms. They will conduct physical examination of the skin, identifying and describing various lesions, and discuss common problems of the Skin including:

- Bacterial (impetigo, MRSA, cellulitis)
- Viral (herpes zoster, molluscum)
- Fungal (tinea, candidiasis)
- Infestations (pediculosis, scabies)
- Inflammatory conditions (atopic dermatitis, eczema)

Contract Nurses will discuss emergent presentations including:

- Animal and human bites
- Burns
- Frostbite and
- Skin Wounds (lacerations).

They will discuss theory and procedure of suturing, stapling and the use of dermal glue, and review of the scope of practice surrounding the use of staples and dermal glue, and the need for consultation. They will demonstrate providing local anaesthetic in preparation for suturing and demonstrate simple interrupted suturing technique, utilizing simulated apparatus (pork and chicken). Further, they will demonstrate a TB Mantoux test on a simulated apparatus.

Module 24 Overview:

- History and Assessment
- Bacterial Infections
 - o Impetigo
 - o MRSA
 - Cellulitis
- Viral Infections
 - Herpes Zoster (Shingles)
- Fungal Infections
 - Tinea (ringworm)
 - Candida (yeast)
- Infestations
 - Pediculosis
 - Scabies
- Inflammatory Conditions
 - Atopic Dermatitis (Eczema)
 - Urticaria (Hives)
- Skin Cancer Screening
- Emergency Burn Treatment
- Frostbite
- Lacerations and Suturing
 - Suturing
 - Staples
 - o Dermal Glue

24.4 Mandatory Learning Activities

• HANDOUT Module 24 – Dermatology Assessment: Acute and Emergent Conditions; Advanced Wound Care and Suturing Skills

24.5 Resources

- RESOURCE: Wound Assessment for Suturing
- RESOURCE: Bates Jensen Wound Assessment File
- RESOURCE: WHAT'S THAT RASH? AN APPROACH TO DANGEROUS RASHES BASED ON MORPHOLOGY

24.6 Tools

- TOOL: Suturing Handout
- TOOL: Common terms used in rash diagnosis

24.7 - **Activity** - Hands-on familiarization with conducting physical examination of the skin, identifying and describing various lesions, and discuss common problems of the Skin. Contract nurses will also discuss theory and procedure of suturing, stapling and the use of dermal glue, and review of the scope of practice surrounding the use of staples and dermal glue, and the need for consultation. They will demonstrate providing local anaesthetic in preparation for suturing and demonstrate simple interrupted suturing technique, utilizing simulated apparatus (pork and chicken). Further, they will demonstrate a TB Mantoux test on a simulated apparatus.

24.8 - Evaluation

Evaluation of this module will be conducted through case scenario discussion, and observation of hands-on techniques.