MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
POLICY # C-4

TITLE: MASTER RESOURCE OUTLINES (MROs) FOR UNDERGRADUATE COURSES

POLICY: The College of Nursing has two different undergraduate course outlines: 1) Master Resource Outlines (MROs) developed by the total faculty through multilevel/multispecialty groups; and 2) Individual Faculty Syllabi (IFSs) developed by individual faculty after teaching a course for the second time or a newly developed course for the first time. This policy addresses Master Resource Outlines. Individual Faculty Outlines are addressed in Policy C-5.

RATIONALE: All undergraduate courses must address relevant “Essentials of Baccalaureate Education for Professional Nursing Practice” (AACN, 2013) as well as the mission of the College of Nursing and the foundational and terminal outcome objectives for the baccalaureate program. The Master Resource Outline (MRO) is a major tool through which this can be demonstrated. Faculty approved Master Resource Outlines are used to develop course syllabi (as described in College of Nursing Policy A-14) and they provide a consistent approach for maintaining the quality, relevancy, and integrity of the baccalaureate curriculum.

PROCEDURE:
The Master Resource Outline (MRO) for each course in the undergraduate curriculum contains the following elements which are approved by the Undergraduate Academic Affairs Committee (UAAC) and then by the faculty at a General Faculty Meeting:

a. Course Number and Title
b. Course Credits
c. Semester(s) Offered
d. Pre- and/or Co-requisite Courses
e. Course Description (to be no longer than 40 words for the MSU Course Bulletin).
f. Course Objectives (designated with Foundational Level Outcomes [FOs] and Terminal Level Outcomes [TOs] to link each course objective with the relevant Foundational and Terminal Level Outcomes objectives of the baccalaureate curriculum as described in College of Nursing Policy C-13).

The MRO also contains two additional sections that are not part of the faculty approval process but demonstrate that course objectives can be met, that there is a level of consistency in teaching the course at each campus, and that relevant course content/concepts and student learning activities are noted for new faculty teaching the course or all faculty teaching a new course, and to provide a framework for the Individual Faculty Outlines (IFSs):

a. Recommended Course Content/Concepts
b. Suggested Student Learning Activities

All MROs are initially approved by the Undergraduate Academic Affairs Committee (UAAC) and are reviewed at least once every three years on a staggered schedule. Following UAAC approval they are presented to the next General Faculty Meeting for final approval. The approval dates of the UAAC and Faculty are recorded on the MRO prior to the Chair of UAAC sending the final approved
MRO to the Webmaster to be placed on the College of Nursing Web site at: http://www.montana.edu/nursing/facstaff/mro.htm.

This policy, C-4 (along with C-5 and the policy on syllabi, A-14) is reviewed with all new faculty members during their orientation to the faculty teaching role.

An example of an approved MRO is attached to this document.

Approved by:
Level I: UAAC (February 2014)
Level II: Associate Dean for Undergraduate Programs (March 2014)
MONTANA STATE UNIVERSITY
COLLEGE OF NURSING
Master Resource Outline

NRSG 346: Nursing Care of Women and the Childbearing Family
Credits: 5 (2 lecture, 3 clinical laboratory)
Semesters offered: F, Sp
Prerequisites: NRSG 258, NRSG 336, NRSG 341, NRSG 352

Course Description: The focus of this course is the nursing care of women, neonates and their families in a variety of settings. Normal pregnancy and childbirth will be addressed, as well as the identification and management of high risk childbearing situations among diverse populations. Selected health care of women content across the lifespan is included.

Course Objectives: The student will:

1. Provide client-centered care to childbearing women, neonates and their families based on synthesis of theoretical and empirical knowledge from nursing, the sciences and the humanities. (T1-8, 12)
2. Utilize evidence-based nursing practice to assist childbearing women, neonates, and women across the lifespan and their families with health promotion, health maintenance, prevention of disease and illness and disease management. (T2, 3, 5, 7, 10, 12)
3. Incorporate caring behaviors of altruism, autonomy, human dignity, cultural sensitivity, integrity and social justice into nursing practice. (T5, 6)
4. Demonstrate behaviors that are congruent with the ANA Code of Ethics, Scope and Standards of Practice, and Social Policy Statements in all class related interactions. (T1, 2, 5, 7, 8, 13)
5. Demonstrate safe practices in providing quality nursing care to childbearing families. (T1-3)
6. Communicate effectively verbally, electronically and in writing with health care team, patients and families. (T6, 9)
7. Examine relevant research and information technology for applicability to nursing care of childbearing families. (T4)

Recommended Content and Concepts:

A. Biophysical growth and development of the pregnant woman, fetus, and neonates e.g. to include genetics, embryology, hormonal cycle.
B. Psychosocial growth and development of the pregnant woman and neonates e.g. to include developmental tasks of pregnancy and aging across the lifespan
C. Nursing care of well-defined problems in antepartal, intrapartal, postpartal and newborn clients and families.
D. Health promotion and health maintenance care for women across the lifespan, neonates and their families e.g. to include anticipatory guidance and teaching related to
preconceptual health, contraception, nutrition during pregnancy, and peri/post menopause.

E. Community resources for referral and follow-up care for childbearing families. Impact of rurality.

F. Professional role and responsibility/confidentiality, communication, advocacy.

G. Attitude/role of the nurse in care of childbearing families e.g. to include essential values of professional nursing - American Association of Colleges of Nursing (AACN); influence of culture and social values.

H. Risk assessment of the childbearing families
   1. Risk scales (formal/informal)
      a. physical
      b. biomedical
      c. psychosocial
      d. developmental
      e. family dynamics

I. Family focused nursing care for the woman and neonates with selected high risk or complex problems during the childbearing cycle.
   1. Physiological deviations and nursing care in high risk clients
      For example:
      **Maternal**
      - infection
      - diabetes
      - preterm labor
      - pregnancy induced hypertension (PIH)
      - hematologic disorders e.g. placenta previa, abruptio placenta, postpartum hemorrhage, thrombo embolic disease, hydatidiform mole
      - reproductive loss/failure
      - dystocia e.g. vaginal birth after Caesarean, Caesarean birth, induction, augmentation
      - postpartum depression/psychosis
      - adolescent pregnancy

      **Newborn**
      a. Transient Tachypnea of the Newborn
      b. infections
      c. hematologic disorders
      d. newborn resuscitation
      e. Infant of the Diabetic Mother
      f. Jaundice
      g. Drug-exposed newborns

2. Nutrition
3. Pharmacology

J. Impact on families of a high risk pregnancy
   Loss and grief
Cultural
Psycho/social/economic
Siblings
Growth and development

K. Application of family developmental theory to high risk childbearing families
L. Research - application of pertinent research findings
M. Reproductive changes across the lifespan and its physiologic/psychosocial impact on women and their families.
N. Menarche/menstrual cycle
O. Contraception
P. Osteoporosis
Q. Human Sexuality
R. Mental health issues
S. Annual Exams & Preventative Screenings

Suggested Student Learning Activities:

- Student presentations
- Clinical conferences
- Case studies
- Care maps
- Care plans
- Patient care discussions
- Simulation and skills lab
- Provision of direct patient care in the hospital, community, and/or home for pregnant women (AP, IP, PP), newborns and perinatal families
- Administration of appropriate medications, treatments
- Assessment of pregnant women (AP, IP, PP) low and high risk, including physiological, psychosocial, nutritional, pharmacological needs
- Written papers
- Patient teaching – individual and/or group
- Discharge teaching and referrals

Examples of Clinical Placements:

In patient: postpartum, labor and delivery, newborn nursery, newborn intensive care nursery.

Out patient: prenatal doctor’s offices/clinics, certified nurse midwives, specialty practice offices, prenatal education, prenatal and postnatal home visits.

Approved by UAAC: September 10, 2012
Approved by Faculty: October 8, 2012