NURSINGKAMP

Welcome to Conceptual Nursing KAMP. Included are my worksheets in my class that I use for advanced Medical Surgical Nursing. My style of instruction is based on a hybrid blended and flipped class room. These include active learning stations, exercises and conceptual models. This book is an evolution of my course as I continue to update, readjust and work through the delivery.

Students are Required to have Yellow Post Its and another Color of their choice-Yellow Represents Chronic and the other Color represents acute

If you have any questions comments or otherwise please do not hesitate to contact me.

Kevin Pommenville MSN (alphabet soup) (518) 428-3189

Posters for Walls

These are placed around the class room and used for two exercises Symptomology Acuity and Medications analysis of the Top 200 Medications.

CARDIAC

PULMONARY









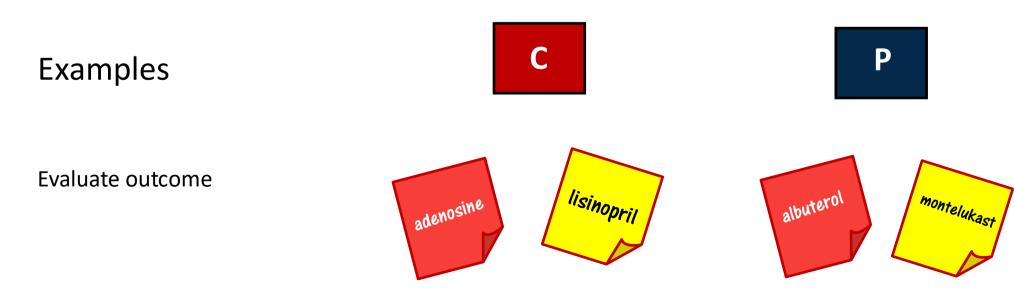
ANTIBIOTICS OTHER

First Class Assignment Med Analysis:

Each Person gets assigned a number 1-6 then writes the names of the meds on the stick-e-note according to acuity by color of stickenote- "red" acute "yellow" chronic



Once complete Students match med with the system on the wall



TOP 200 MED LIST

1	2	3	4	5
Nitroprusside	Glucagon	Haloperidol	Magnesium sulfate	octeotide
Atropine	Adenosine	Diltiazem	Metoprolol	levophed
Levothyroxine	Sertraline	Clonazepam	Memantine	Diazepam
Hydrocodone/APAP	Ibuprofen	Benazepril	Atenolol	Oxycodone
Amoxicillin	Zolpidem	Meloxicam	Pravastatin	Risedronate
Lisinopril	Furosemide	Citalopram	Fluoxetine	Folic Acid
Esomeprazole	Omeprazole	Cephalexin	Insulin Detemir	Losartan + HCTZ
Atorvastatin	Trazodone	Tiotropium	Fluconazole	Prednisone
Simvastatin	Valsartan	Gabapentin	Levofloxacin	Prednisolone
Clopidogrel	Tramadol	Aripiprazole	Rivaroxaban	Alendronate
Montelukast	Duloxetine	Potassium	Potassium Celecoxib	
Rosuvastatin	Warfarin	Cyclobenzaprine	Codeine / APAP	Tamsulosin
Metoprolol	Amlodipine	Methylprednisolone	Mometasone	Triamterene + HCTZ
Escitalopram	Oxycodone/APAP	Methylphenidate	Ciprofloxacin	Paroxetine

6	1	2	3	4
Azithromycin	Quetiapine	Loratadine	Pregabalin	Buprenorphine + Naloxone
Albuterol	Promethazine	Carvedilol	Insulin Aspart	Enalapril
Hydrochlorothia- zide	Fluticasone	Carisoprodol	Venlafaxine	Lovastatin
Metformin	Alprazolam	Digoxin	Lorazepam	Pioglitazone
Dobutamine	Dopamine	neo phenylephrine	mannitol	Amiodarone
Diazepam	Estrogen	Allopurinol	Ezetimibe	Meclizine
Penicillin	Lisinopril + HCTZ	Metronidazole	Quinapril	Minocycline
Sitagliptin	Bupropion	Vitamin D	Sildenafil	Phenazopyridine
Amitriptyline	Cetirizine	Testosterone	Ondansetron	Spironolactone
Clonidine	Topiramate	Ropinirole	Oseltamivir	Vardenafil
Latanoprost	Valacyclovir	Risperidone	Methotrexate	Clobetasol
Lisdexamfetamine	Eszopiclone	Olopatadine	Dabigatran	Benzonatate
Fluticasone + Sal- meterol	Acyclovir	Donepezil	Donepezil Budesonide	
Budesonide + For- moterol	Cefdinir	Dexmethylpheni- date	Doxazosin	Dutasteride
		MED LIST 2		

TOP 200 MED LIST

5	6	1	2	3	
Dexlansoprazole	Clindamycin	Enoxaparin	Desvenlafaxine	Febuxostat	
Glyburide	Levetiracetam	Fentanyl	Insulin lispro	Lamotrigine	
Olanzapine	Gemfibrozil	Dicyclomine	Clarithromycin	Nortriptyline	
Tolterodine	Guaifenesin	Levalbuterol	Buspirone	Glimepiride	
Ranitidine	Glipizide	Atomoxetine	Finasteride	Rabeprazole	
Famotidine	Irbesartan	Ramipril	Ketoconazole	Etanercept	
Diltiazem	Metoclopramide	Temazepam	Solifenacin	Nebivolol	
Insulin Glargine	Losartan	Phentermine	Methadone	Nabumetone	
Spironolactone	Nitroglycerine	Oxybutynin	Mupirocin	Nifedipine	
Epinepherine	Esmolol	Lidocaine	Milrinone	nicardipine	
Insulin Glargine	Losartan	Phentermine	Methadone	Nabumetone	
Spironolactone	Nitroglycerine	Oxybutynin	Mupirocin	Nifedipine	
Vardenafil	Propranolol	Tadalifil	Nitrofurantoin	Naproxen	
Clobetasol	obetasol Nystatin		Etanercept	Tizanidine	
MED LIST 3					

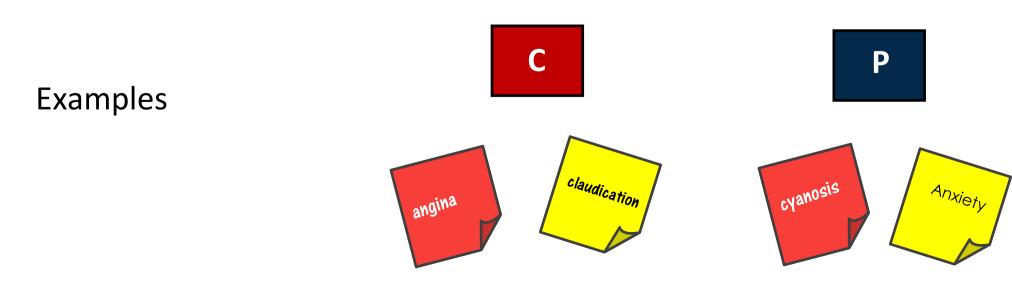
4	5	6	
Dutasteride	Phenytoin	Cefuroxime	
Febuxostat	Fenofibrate	Methocarbamol	
Lamotrigine	Liraglutide	Travoprost	
Nortriptyline	Ticagrelor	Lurasidone	
Glimepiride	Diclofenac	Terazosin	
Rabeprazole	Saxagliptin	Sumatriptan	
Nifedipine	Amoxicillin + Clavulanate	Mirtazepine	
Nitrofurantoin	Ezetimibe + Simvastatin	Adalimumab	
Nitroglycerine	Raloxifene	rifene Baclofen	
Hydralazine	Nabumetone	Dextro- amphetamine	
Benzonatate	Verapamil	Rivastigmine	
Divalproex	Estradiol	Lansoprazole	
Nebivolol	Amphetamine	heparin	
Neostigmine	Salmeterol	lithium	

Second Class Assignment Symptom Analysis:

Each Group gets assigned a number 1-4 then writes the names of the symptoms on the stick-e-note according to acuity by color of stickenote- "red" acute "yellow" chronic



Once complete Students match symptom with the organ on the wall

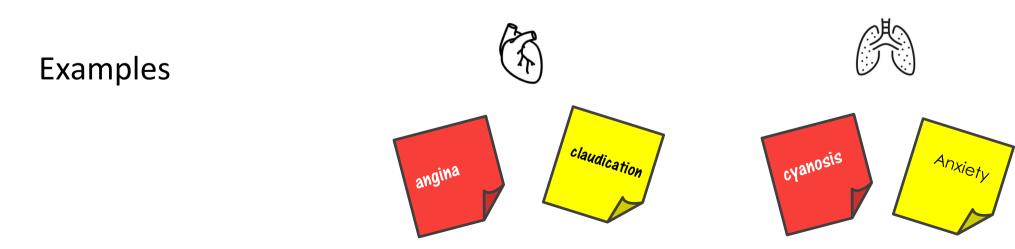


Third Class Assignment Symptom Analysis:

Each # Group 1-4 then rearranges under according to writes the names of the symptoms on the stick-e-note according to acuity by color of stickenote- "red" acute "yellow" chronic



Once complete Students match symptom with the organ on the wall



PERFUSION

OXYGENATION

PERFUSION

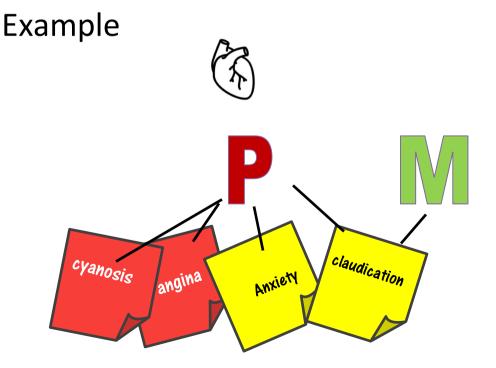
PERFUSION

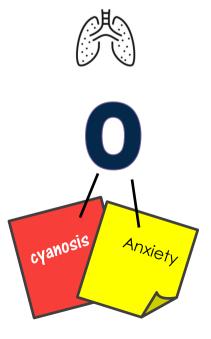
Fourth Class Assignment Symptom Analysis:

Discussion on the following Conceptual Focus

- O- Oxygenation Related B- Perfusion Related
- S- Safety Related
- M- Higher Maslow- (ie. Requiring education, teaching)

Students Further Classify by OBSM





Third Class Assignment Symptom Analysis:

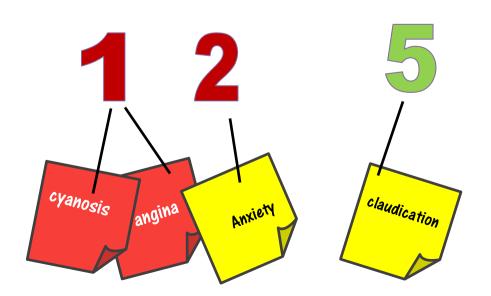
Discussion on the following

Acuity Rating

- 1- Stay in the room Urgent-Notfiy Provider 2- Intervention Needed

- 3- Assess Patient gather more Data 4- Anticipate Medication Being Ordered
- 5- Non Urgent

Example



CRITICAL THINKING ON SYMPTOMOLOGY

Objective: The student will critically think through each presented symptom and classify it according to system outline below and base it on an acuity rating.

Primary Classification (though several organs may be involved narrow down to the most likely condition or presentation symptom that would be included in a nclex style question)

Primary System or Specialty Involvement

P= Pulmonary Symptom

C= Cardiac Symptom

R=Renal Symptom

E=Endocrine Symptoms

N-Neurological

L-Labor Deliver Kids Maternal Health

B-Behavioral Health

I-Infection

Conceptual Focus

- O- Oxygenation Related
- B- Perfusion Related
- S- Safety Related

M- Higher Maslow- (ie. Requiring education, teaching)

Acuity Rating

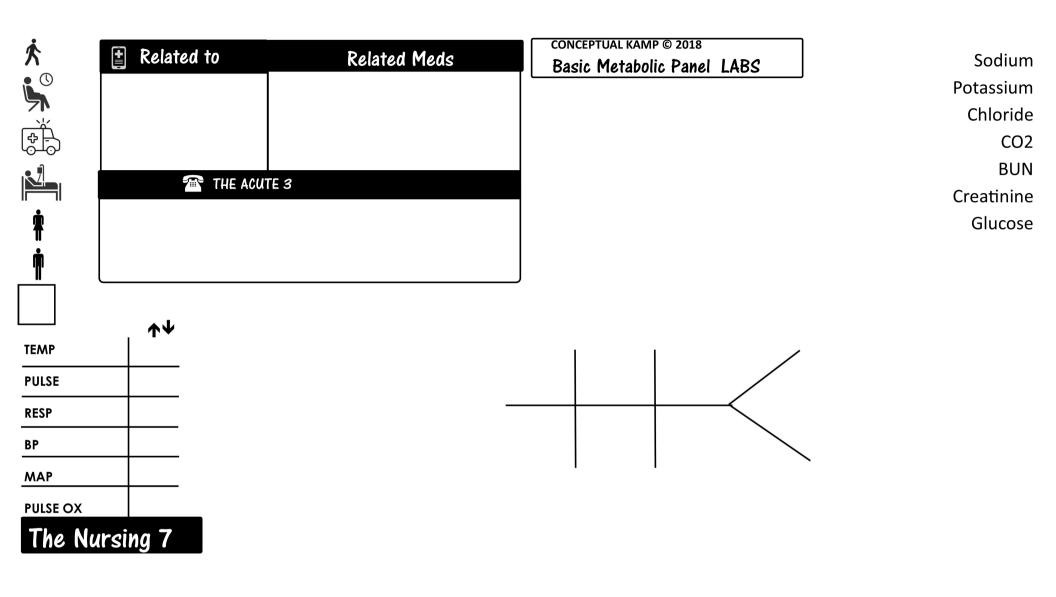
- 1- Stay in the room Urgent-Notfiy Provider 2- Intervention Needed
- 3- Assess Patient gather more Data
- 4- Anticipate Medication Being Ordered
- 5- Non Ürgent

Complication- Main complication 3 word or less

SYMPTOMOLOGY CLASSIFICATION					
1	2	3	4		
Abdominal distention	Breast nodule	Deep tendon reflexes (hyperactive)	Flank pain		
Abdominal mass	Breast pain	Deep tendon reflexes (hypoactive)	Flatulence		
Abdominal pain	Breast ulcer	Delirium	Fontanel (bulging)		
Abdominal rigidity	Breath odor (ammonia)	Depression	Fontanel depression		
Accessory muscle use	Breath odor (fecal)	Diaphoresis	Footdrop		
Agitation	Breath odor (fruity)	Diarrhea	Gag reflex abnormalities		
Alopecia	Brudzinski sign	Diplopia	Gait (bizarre)		
Amenorrhea	Bruit	Dizziness	Gait (propulsive)		
Amnesia	Buffalo hump	Doll's eye reflex (absent)	Gait (scissors)		
Analgesia	Butterfly rash	Drooling	Gait (spastic)		
Anhidrosis	Café-au-lait spots	Dysarthria	Gait (steppage)		
Anorexia	Capillary refill time (increased)	Dysmenorrhea	Gait (waddling)		
Anosmia	Carpopedal spasm	Dyspareunia	Gallop, atrial (\$4)		
Anuria	Cat's cry	Dyspepsia	Gallop, ventricular (\$3)		
Anxiety	Chest expansion (asymmetrical)	Dysphagia	Genital lesions (male)		
Aphasia (dysphasia)	Chest pain	Dyspnea	Gum bleeding		
Apnea	Cheyne-Stokes respirations	Dystonia	Gum swelling		
Apneustic respirations	Chills	Dysuria	Gynecomastia		
Apraxia	Chorea	Earache	Halitosis		
Arm pain	Chvostek sign	Edema (arm)	Halo vision		
Nipple discharge	Pulse pressure (widened)	Stools (clay-colored)	Wheezing		
Nipple retraction	Pulse rhythm (abnormal)	Stridor	Wrist Drop		
Nocturia	Pulsus alternans	Syncope			
Nasal flaring	Psychotic behavior	Skin (mottled)	Visual Floaters		
Nasal obstruction	Ptosis	Skin (scaly)	Vomiting		

SYMPTOMOLOGY CLASSIFICATION					
1	2	3	4		
Ascites	Clubbing	Edema (face)	Headache		
Asterixis (liver fappingtremor)	Cogwheel rigidity	Edema (generalized)	Hearing loss		
Ataxia	Cold intolerance	Edema (leg)	Heat intolerance		
Athetosis	Confusion	Enophthalmos	Heberden nodes		
Babinski reflex	Conjunctival injection	Enuresis (nocturnal)	Hematemesis		
Back pain	Constipation	Epistaxis	Hematochezia		
Barrel chest	Corneal reflex (absent)	Erectile dysfunction	Hematuria		
Battle sign	Costovertebral angle tende	Eructation	Hemianopsia		
Biot respirations	Cough (barking)	Erythema	Hemoptysis		
Bladder distention	Cough (nonproductive)	Exophthalmos	Hepatomegaly		
Blood pressure decrease	Cough (productive)	Eye discharge	Hiccups		
Blood pressure increase	Crackles	Eye pain	Hirsutism		
Bowel sounds (absent, silent)	Crepitation (bony)	Facial pain	Hoarseness		
Bowel sounds (hyperactive)	Crepitation (subcutaneous)	Fasciculations	Homans sign		
Bowel sounds (hypoactive)	Cry (high-pitched, cerebral)	Fatigue	Hyperpigmentation		
Bradycardia	Cyanosis	Fecal incontinence	Hyperpnea		
Bradypnea	Decerebrate posture	Fetor hepaticus	Hypopigmentation		
Breast dimpling	Decorticate posture	Fever	Insomnia		
Nausea	Pulse (absent or weak)	Skin turgor (decreased)	Vulvar Lesions		
Neck pain	Pulse (bounding)	Spider angioma	Weight Gain(Excessive)		
Night blindness	Pulse pressure (narrowed)	Splenomegaly	Weight Loss(Excessive)		
Muscle spasticity	Postnasal drip	Seizures (generalized tonic- clonic)	Violent behavior		
Muscle weakness	Priapism	Setting sun sign	Vision loss		
Mydriasis	Pruritus	Skin (bronze)	Visual blurring		
Myoclonus	Psoas sign	Skin (clammy)	Vaginal bleeding (postmenopausal)		

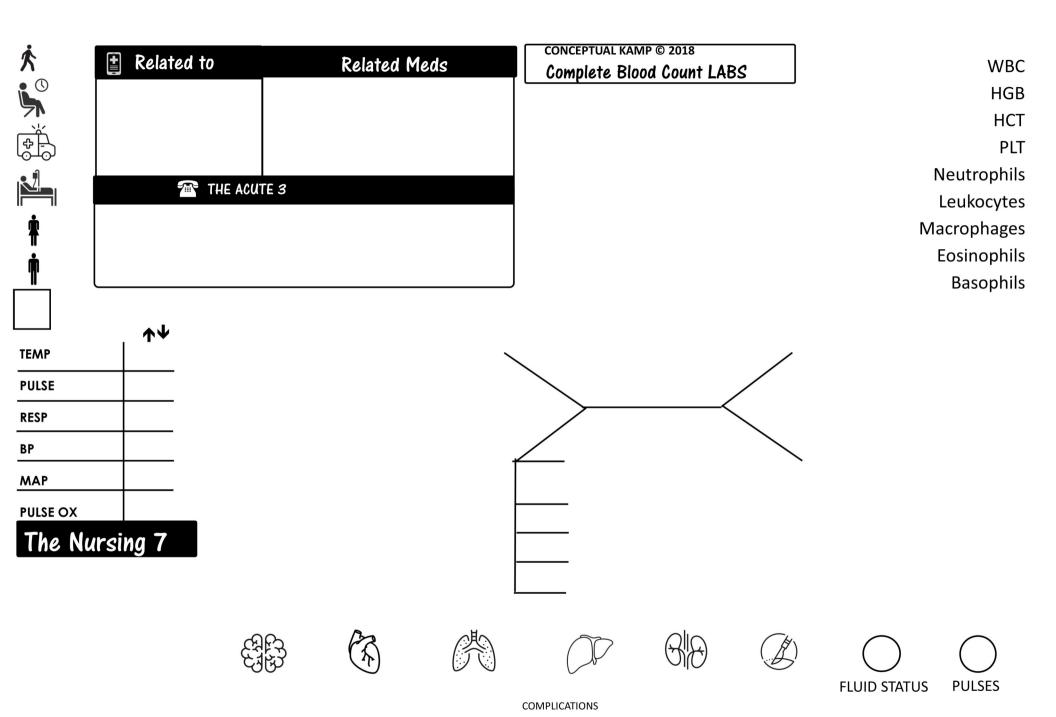
SYMPTOMOLOGY CLASSIFICATION					
1	2	3	4		
Intermenstrual bleeding	Nuchal rigidity	Pulsus bisferiens	Tachycardia		
Intermittent claudication	Nystagmus	Pulsus paradoxus	Tachypnea		
Janeway lesions	Ocular deviation	Pupils (nonreactive)	Taste abnormalities		
Jaundice	Oligomenorrhea	Pupils (sluggish)	Tearing (increased)		
Jaw pain	Oliguria	Purple striae	Throat pain		
Jugular vein distention	Opisthotonos	Purpura	Thyroid enlargement		
Kehr sign	Orofacial dyskinesia	Pustular rash	Tics		
Kernig sign	Orthopnea	Pyrosis	Tinnitus		
Leg pain	Orthostatic hypotension	Raccoon eyes	Tracheal deviation		
Level of consciousness (decreased)	Ortolani sign	Rebound tenderness	Tracheal tugging		
Lid lag	Osler nodes	Rectal pain	Tremors		
Light flashes	Otorrhea	Respirations (grunting)	Trismus		
Low birth weight	Pallor	Respirations (shallow)	Tunnel vision		
Lymphadenopathy	Palpitations	Respirations (stertorous)	Uremic frost		
Masklike facies	Papular rash	Retractions (costal and sternal)	Urethral discharge		
McBurney sign	Paralysis	Rhinorrhea	Urinary frequency		
McMurray sign	Paresthesia	Rhonchi	Urinary hesitancy		
Melena	Paroxysmal nocturnal dyspnea	Romberg sign	Urinary incontinence		
Menorrhagia	Peau d'orange	Salivation (decreased)	Urinary urgency		
Miosis	Pericardial friction rub	Salivation (increased)	Urine cloudiness		
Moon facies	Peristaltic waves (visible)	Salt craving	Urticaria		
Mouth lesions	Photophobia	Scotoma	Vaginal bleeding (postmenopausal)		
Murmurs	Pleural friction rub	Scrotal swelling	Vaginal discharge		
Muscle atrophy	Polydipsia	Seizures (focal aware)	Venous hum		
Muscle flaccidity	Polyphagia	Seizures (focal with impaired awareness)	Vertigo		
Muscle spasms	Polyuria	Seizures (generalized absence)	Vesicular rash		



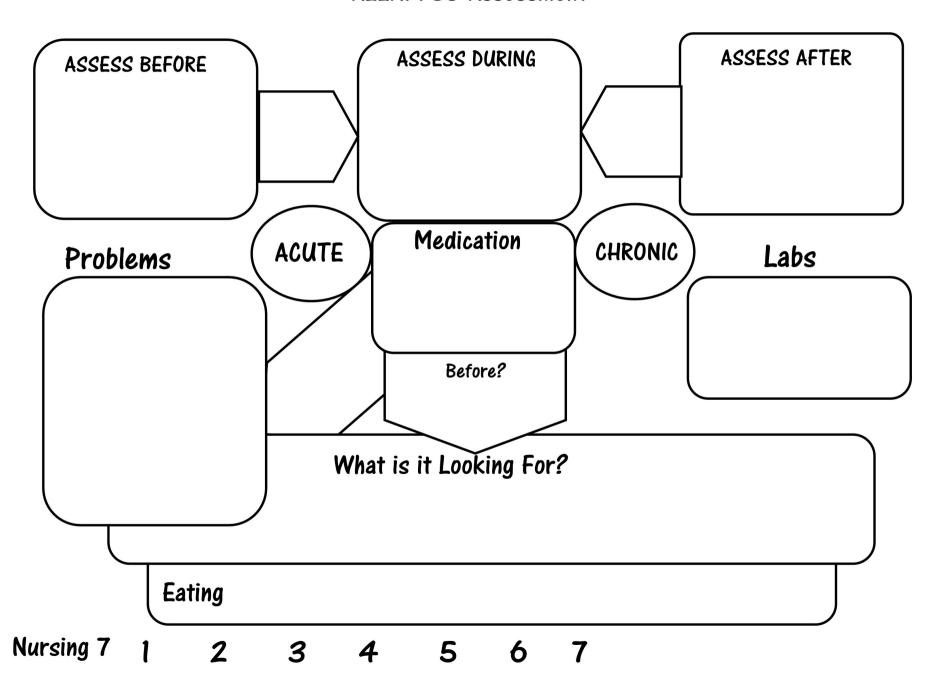
COMPLICATIONS

FLUID STATUS

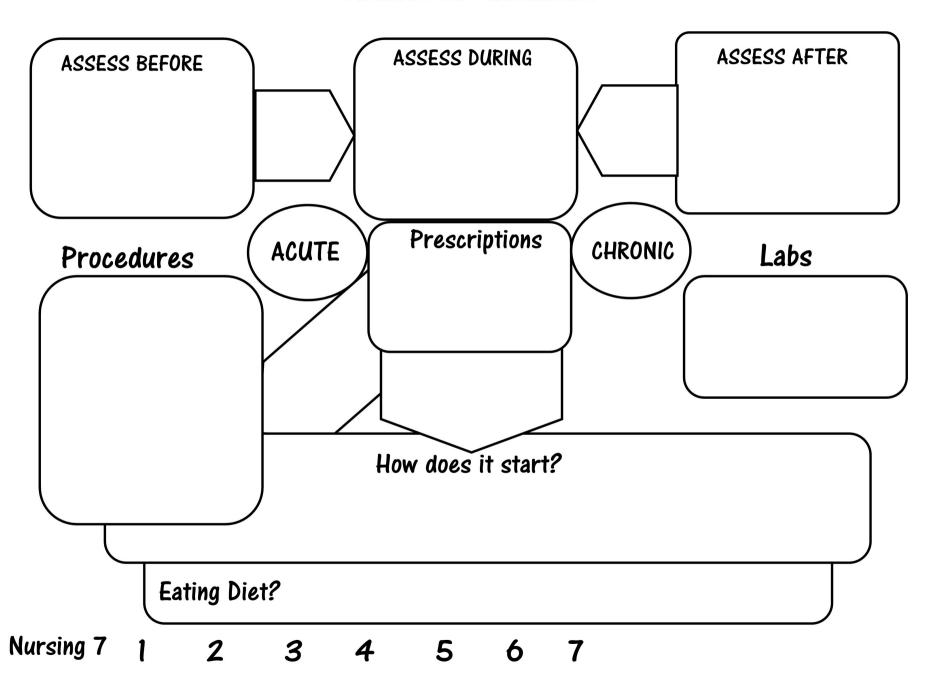
PULSES



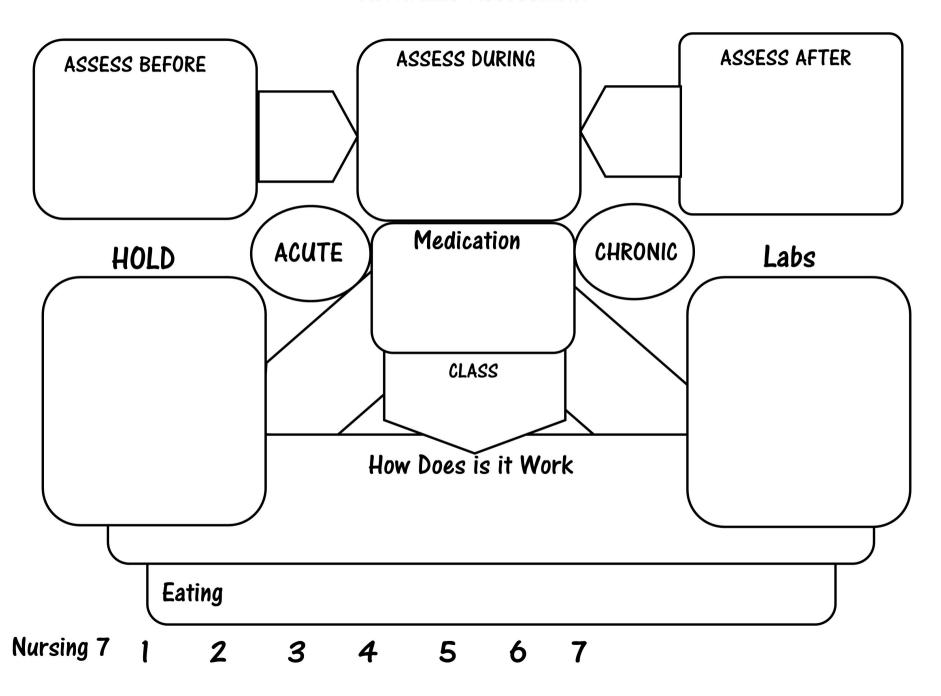
ALEAPPS3 Assessment



ASLEAPPS3 Assessment

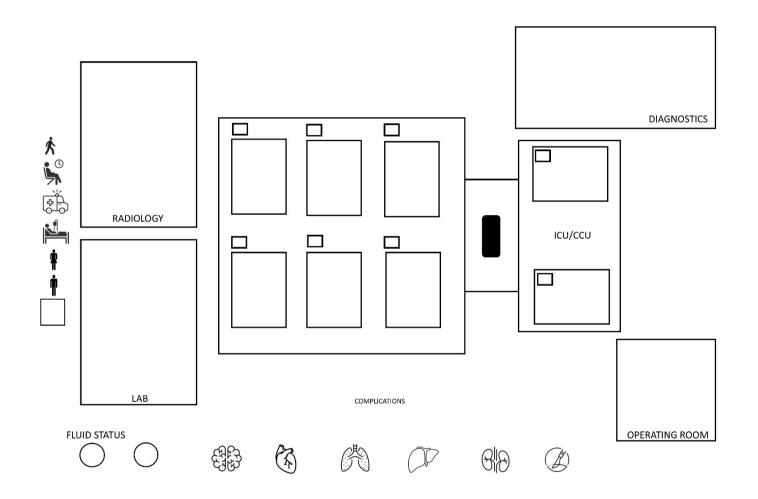


AWHALES Assessment



BURN LIST CARDIAC

1	2	3	4	5	6
LDL	CAD	Total Cholesterol	ACS	Triglycerides	PVD
Angina	CRP	Prinzmetal Angina	Variant Angina	Stress Test	Stable Angina
Arterial Ulcers	HDL	Arteriosclerosis	Intermittent Claudication	Unstable Angina	CK-Total
Chest Pain	ST Elevation	Venous Ulcers	Myoglobin	Atherosclerosis	ST Depression
BNP	ANP	Troponin 1	Cardiac Tamponade	Troponin T	Dilated
Cardiomyopathy	D-Dimer	Myocarditis	ANP	Hypertrophic	Marfan Syndrome
Endo Carditis	Нер ХА	PE	Marfan Syndrome	DVT	PAWP>12
Stroke	Murmur	CVP>8	Rheumatic Fever	Hypotension	Left Sided Stroke
INR	PT	Dobuatmine	Right Sided Stroke	PTT	S4
EF<60	Cardiogenic	Ca Pines	Cardiogenic Shock	Aortic Stenosis	Cal
\$3	Dopamine	JVD	Muffled Heart Sounds	Nitroprusside	isosorbide
Ca Diltiazem	Nitro Gtt	Nitro	Calcium Gyclerides	Heparin	ARBS
Coumadin	Ace Inhibitors	Atropine	Thoracic Aneurysm	Bradycardia	Integrelin
Aortic Aneurysm	Adenosine	Amiodarone	Distended Neck Veins	Neo	Beta Blockers
Increased Afterload	Tachycardiac	Decreased LOC	Decreased Afterload	High Creatinine	Impending Doom
Decreased Preload	PP	СО	Decreased Preload	Pace Maker	Hypotension
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Cardiac KAMP

Cardiovascular Hemodynamics

CVP

PAWP

CO

EF

SV

HR

BP

MAP

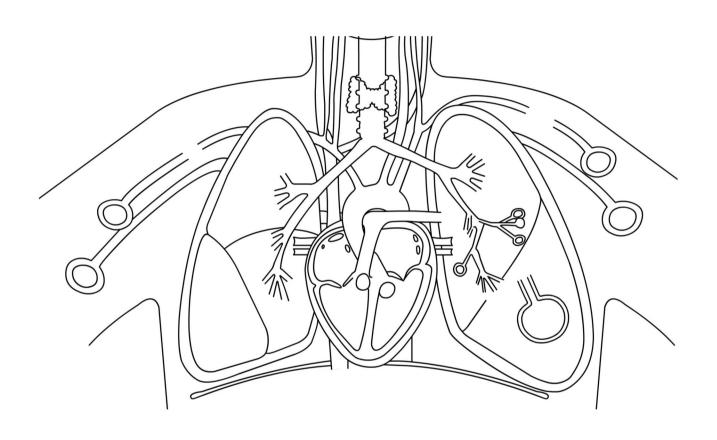
S1

S2

AV Valves

S3

S4



SVR

Tricuspid

Mitral

Pulmonic

Aortic

Aorta

Pulmonary

Arteries

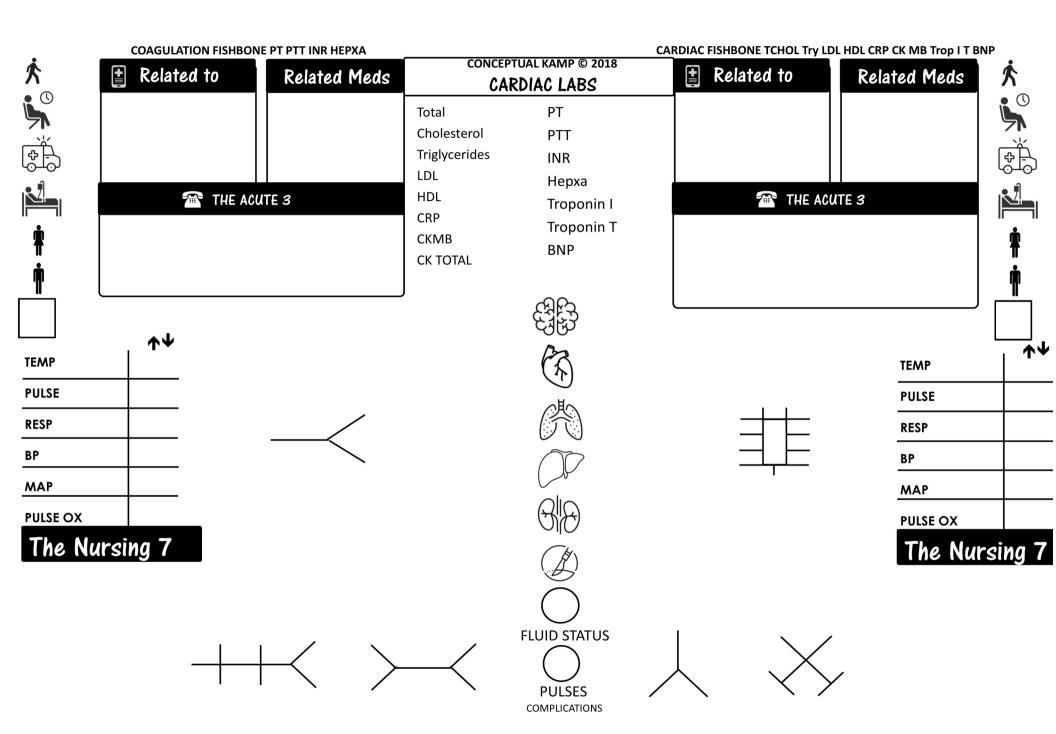
Carotids

Sa Node

AV Node

PP

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Cardiovascular Hemodynamics

CVP

PAWP

CO

EF

SV

HR

BP

MAP

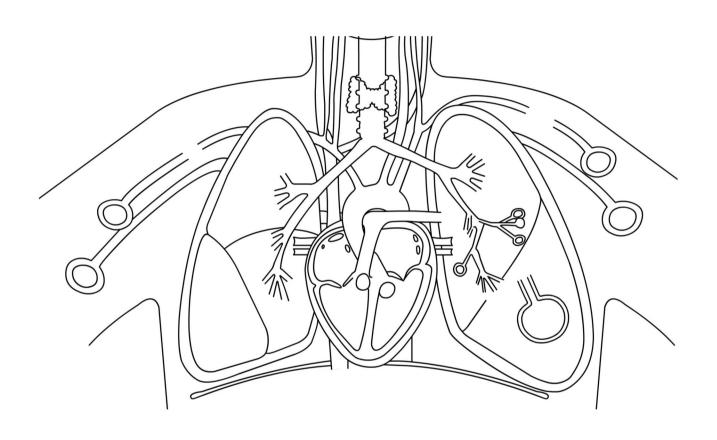
S1

S2

AV Valves

S3

S4



SVR

Tricuspid

Mitral

Pulmonic

Aortic

Aorta

Pulmonary

Arteries

Carotids

Sa Node

AV Node

PP

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Acuity & Priority of Medications in Questions

Medications in questions are important indicators of understanding of the nursing process. Whenever there is a medication in the question the med should be analyzed using "AHAPC". Utilizing the 5 step method when attempting to answer the question gives a critical thinking and insight into the presenting question.

AHAPC - Rules for Medication Presenting in Nursing Questions.

- 1 Medications that are in the question are questions about the medication don't overlook them
- 2. Medications that are in the answers are generally distractors see rule 3 for other indicators
- 3. If the question indicates anticipated order, or to prepare for, or prescribed interventions the med in the answer may be correct.

Think if this med is given does the patient get better or am I treating just the symptom. Generally meds are not given in priority action for symptom management in NCLEX questions leading to Nursing Interventions as priority.

AHAPC is Completed in the following Priority Order

A

ACUTE or CHRONIC: Define the medication as acute or chronic. Acute means it requires immediate action, assessment or monitoring. Chronic meds are either looking for what is an Acute finding or requiring higher maslow approach or teaching. For example: Lisinopril is chronic medication that presents with angioedema in a question this is an "acute" situation Chronic aspects of medications would be on teaching the patient to notify HCP if the experience any swelling of the face.

Н

HOLD MEDICATION: Do you recognize there is a problem in the question that requires you to hold it. Is it an acute situation being presented in the patient or if you gave this medication is there further harm that could be caused if so **HOLD.**

A

ASSESS FOR COMPLICATIONS: Before or after—Does the medication require the patient to be assessed before giving the medication. For example you would assess potassium levels, prior to giving potassium not after. Does the patient require further assessment for example INR is elevated assess for signs of bleeding.

P

PREPARE TO ADMINISTER/ PREPARE FOR: If the option allows for preparation of a medication this is the next step. For Example a patient that is briskly bleeding from heparin infusion a nurse would prepare Protamine Sulfate.

C

C - Call or notify provider— If the previous steps were not options or the patient is acute distress the last step of the process is to call or notify the health care provider.

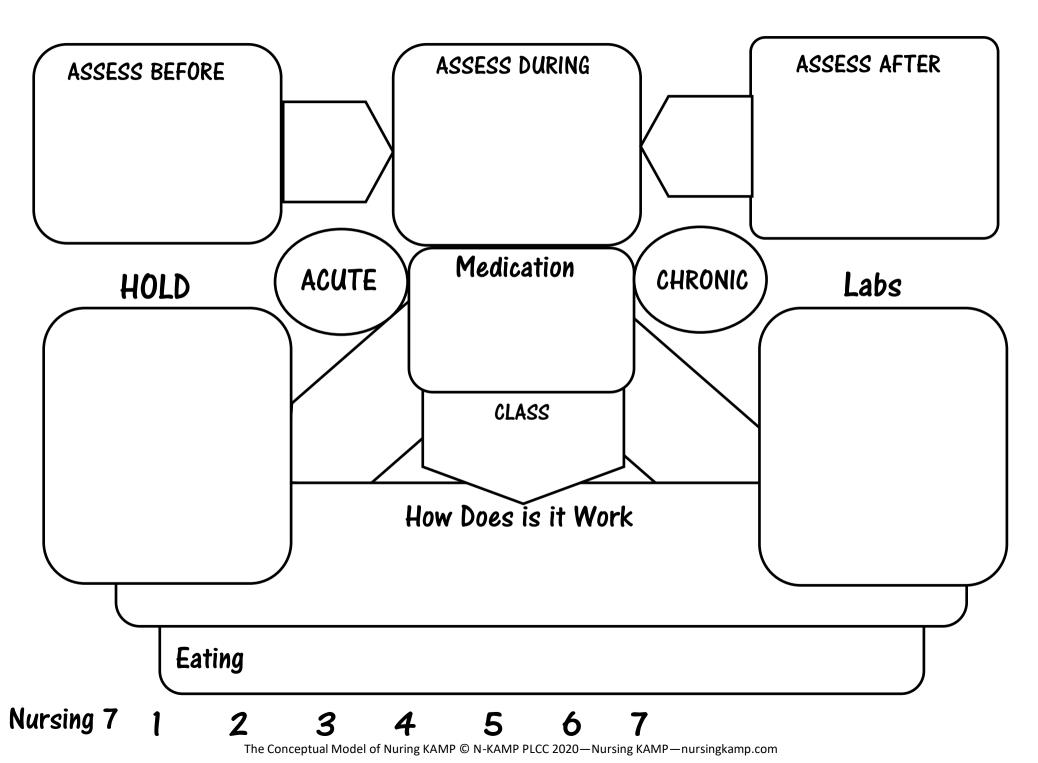
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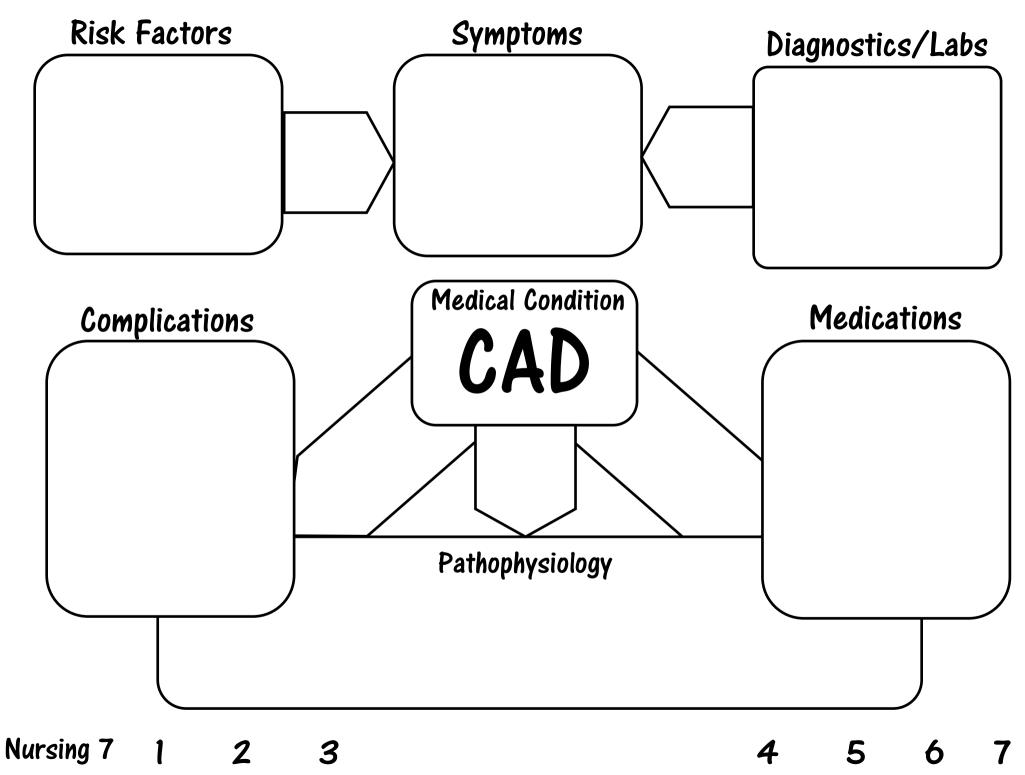
Cardiac Medications You Should Know!

TOP 200 CARDIAC MEDICATIONS

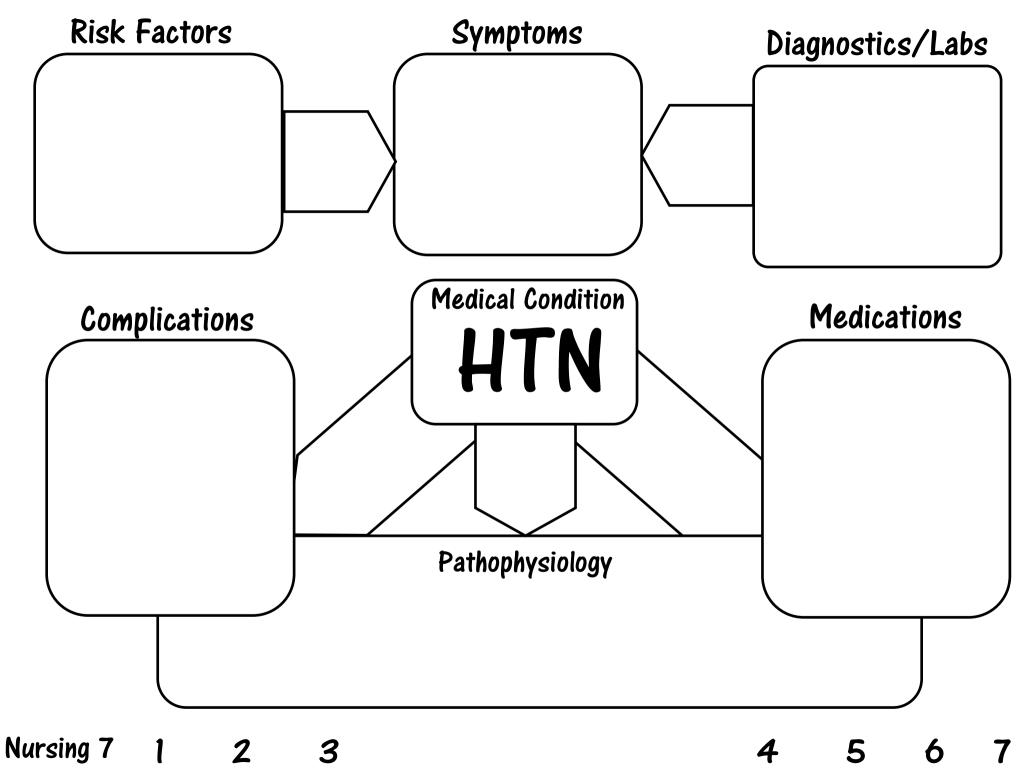
Lisinopril	Bivalirudin	Enoxaparin	Propranolol	Alteplase
Atorvastatin	Tamsulosin	Ramipril	Verapamil	Levophed
Simvastatin	Triamterene + HCTZ	Quinapril	Fenofibrate	Epinephrine
Clopidogrel	Enalapril	Dabigatran	Ticagrelor	Atenolol
Rosuvastatin	Lovastatin	Doxazosin	Ezetimibe + Simvastatin	Losartan
Metoprolol	Pravastatin	Finasteride	Adenosine	Hydralazine
Hydrochlorothiazide	Rivaroxaban	Spironolactone	Atropine	Streptokinase
Furosemide	eptifibatide	Vardenafil	Amiodarone	Dobutamine
Valsartan	Clonidine	Dutasteride	Heparin	Digoxin
Warfarin	Diltiazem	Nebivolol	Nitro	Irbesartan
Amlodipine	Benazepril	Nifedipine	Aspirin	Terazosin
Carvedilol	Gemfibrozil	Travoprost	Dopamine	Neo

AWHALES Assessment

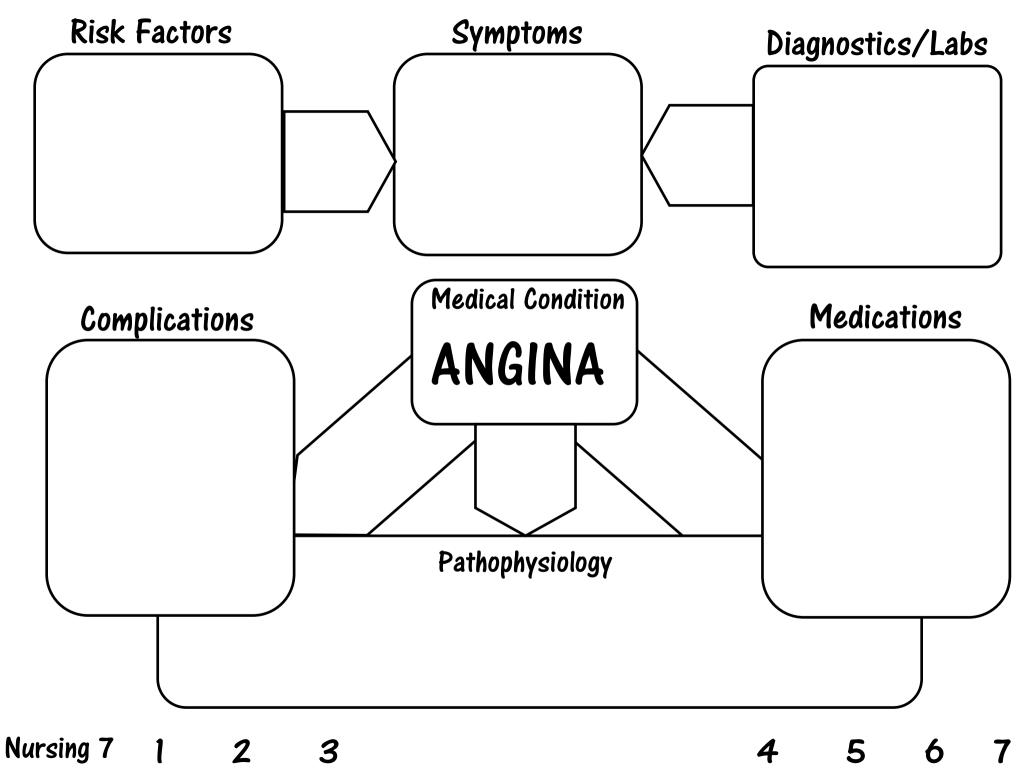




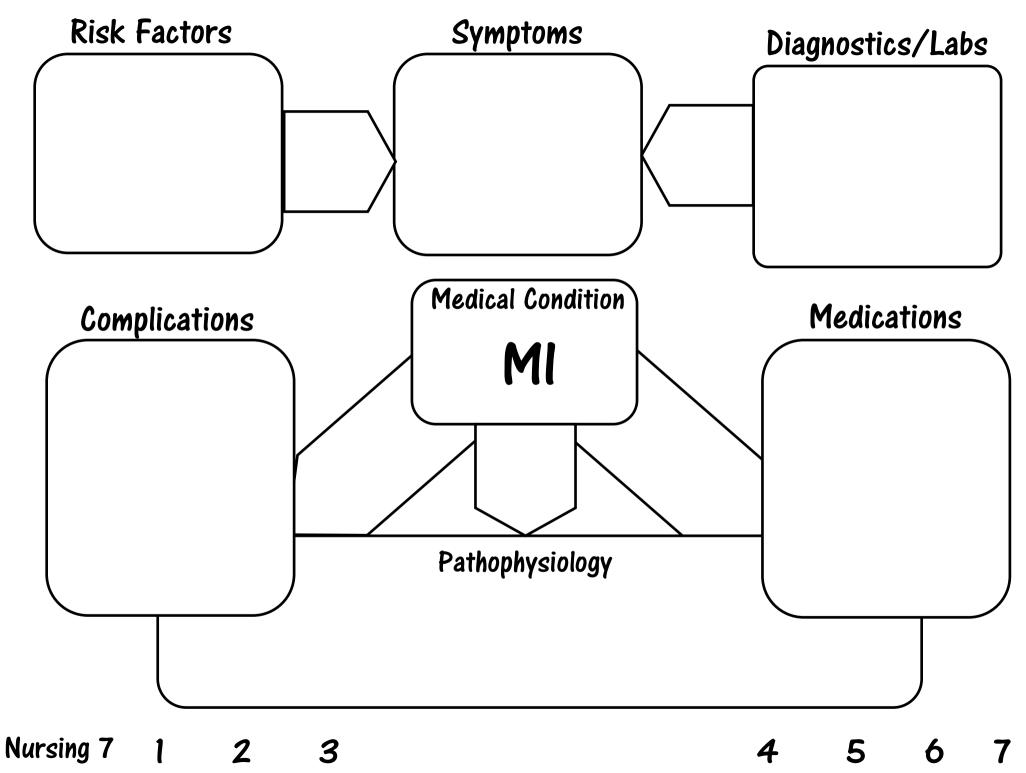




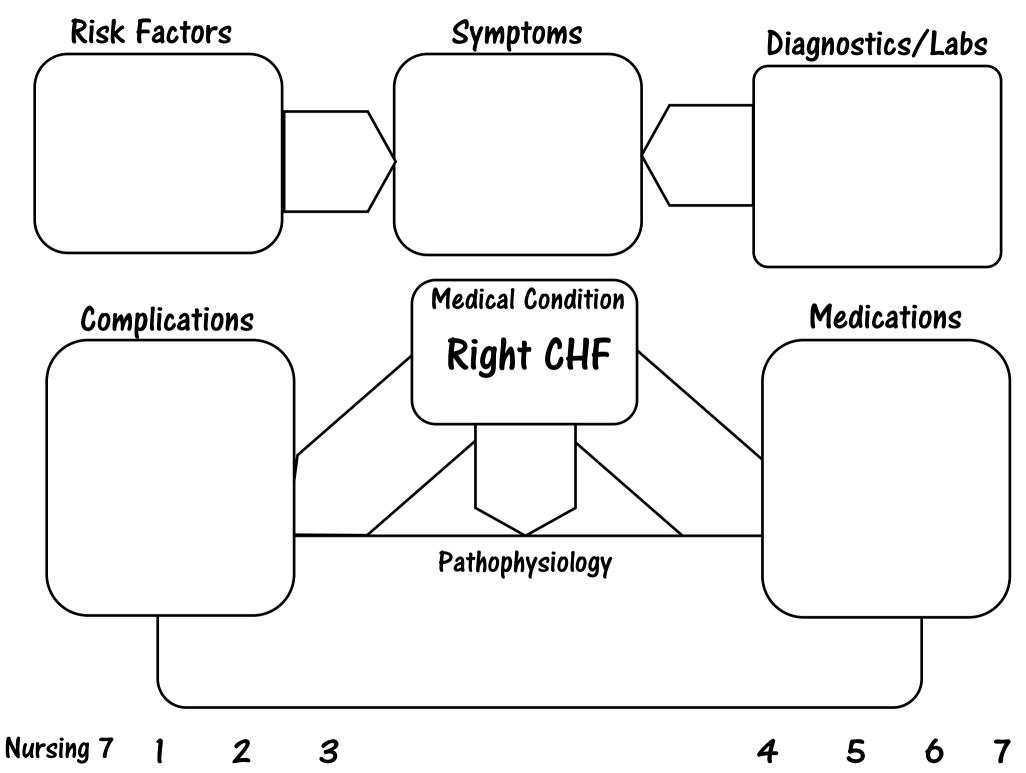




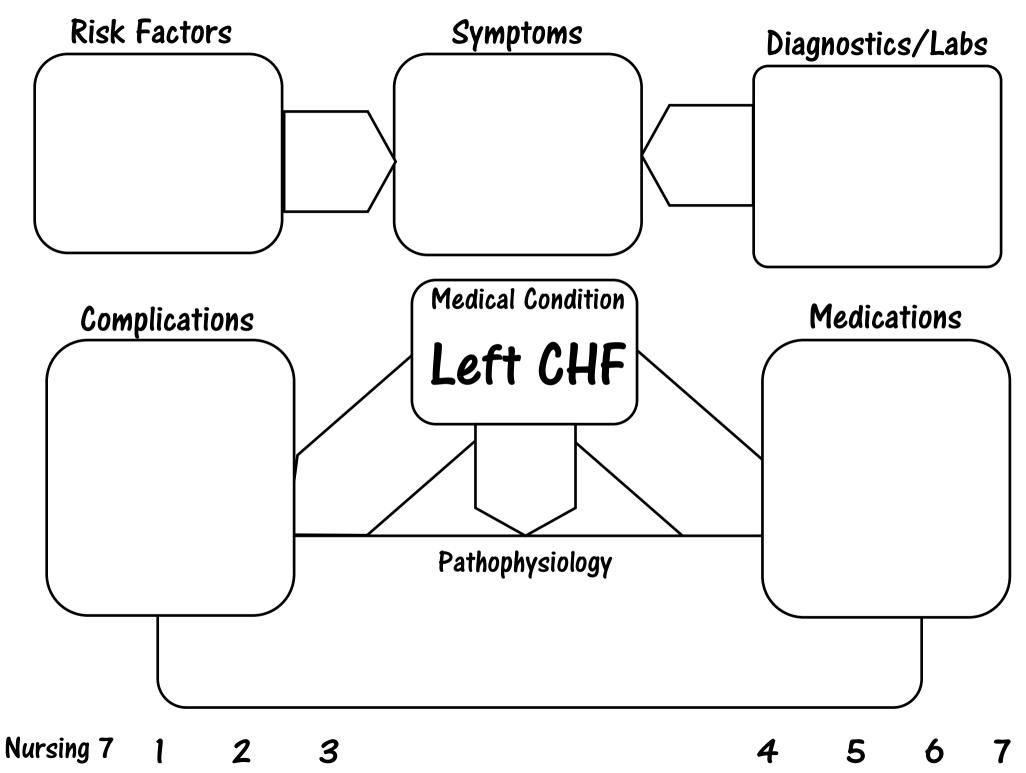




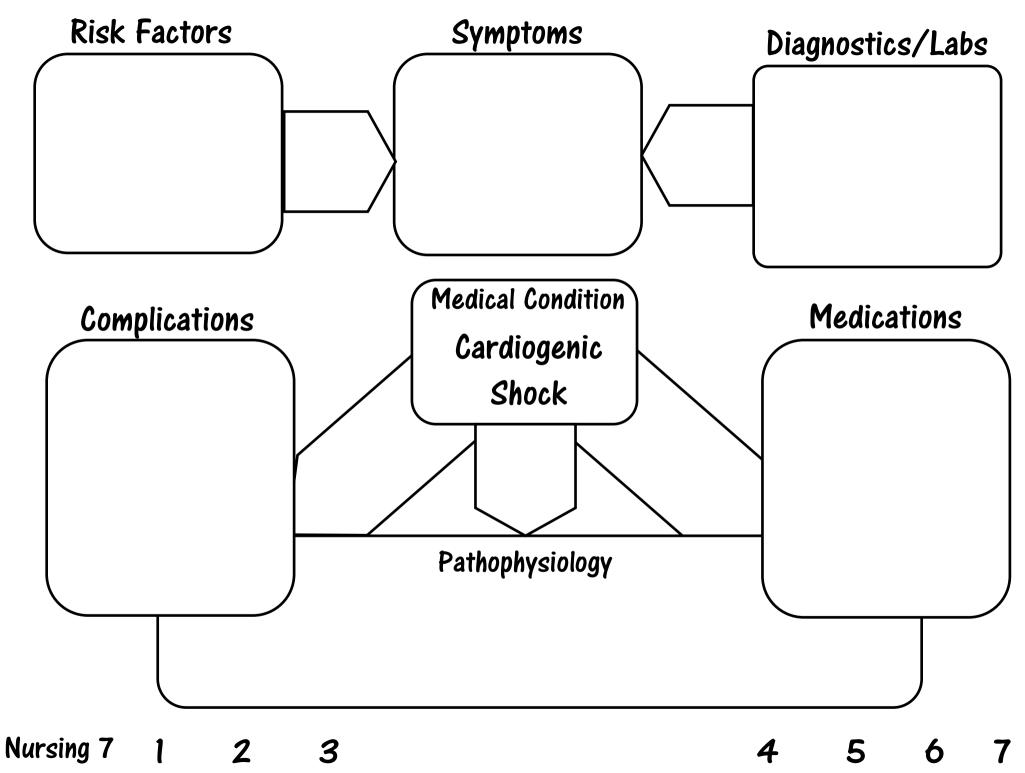




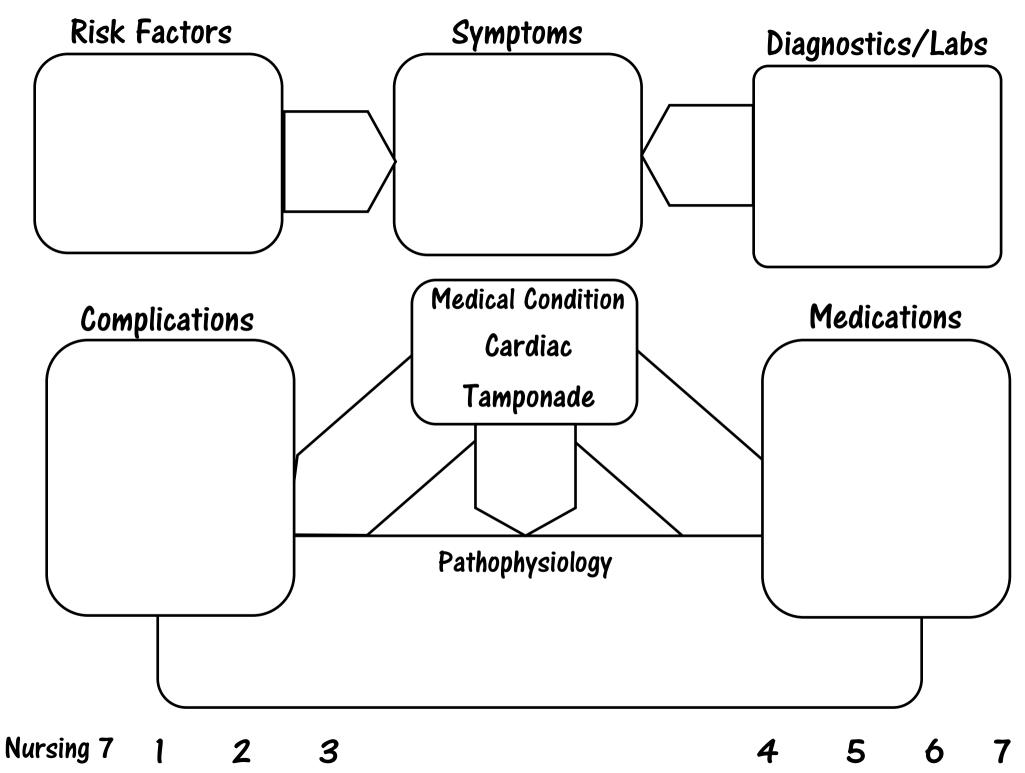




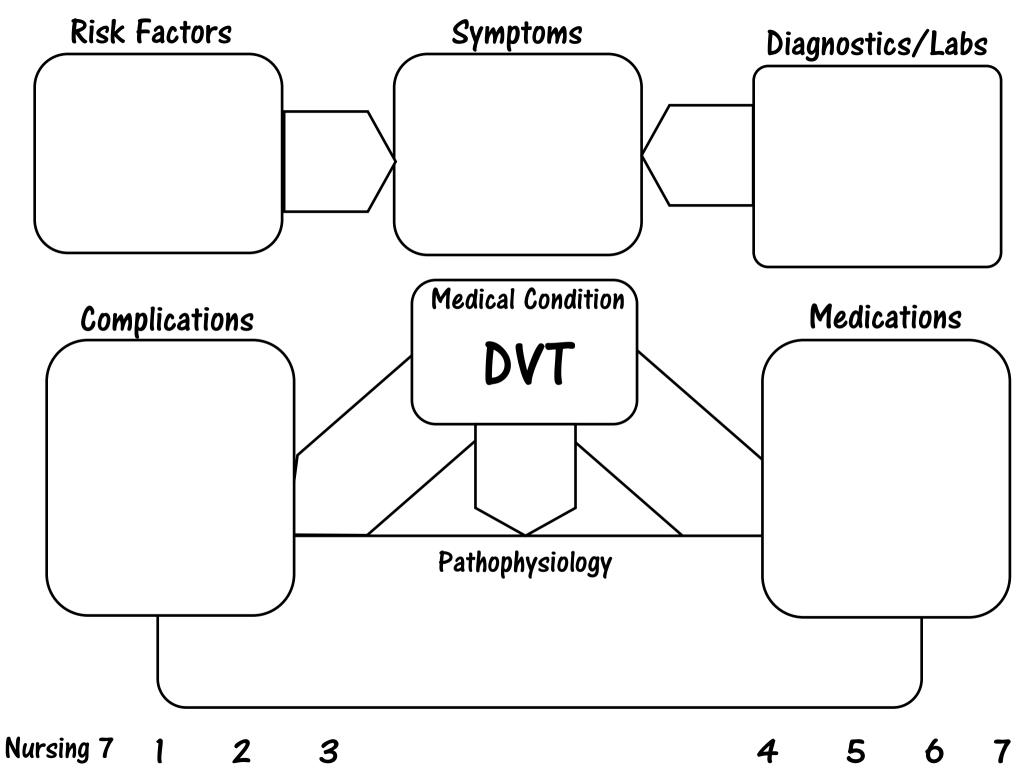




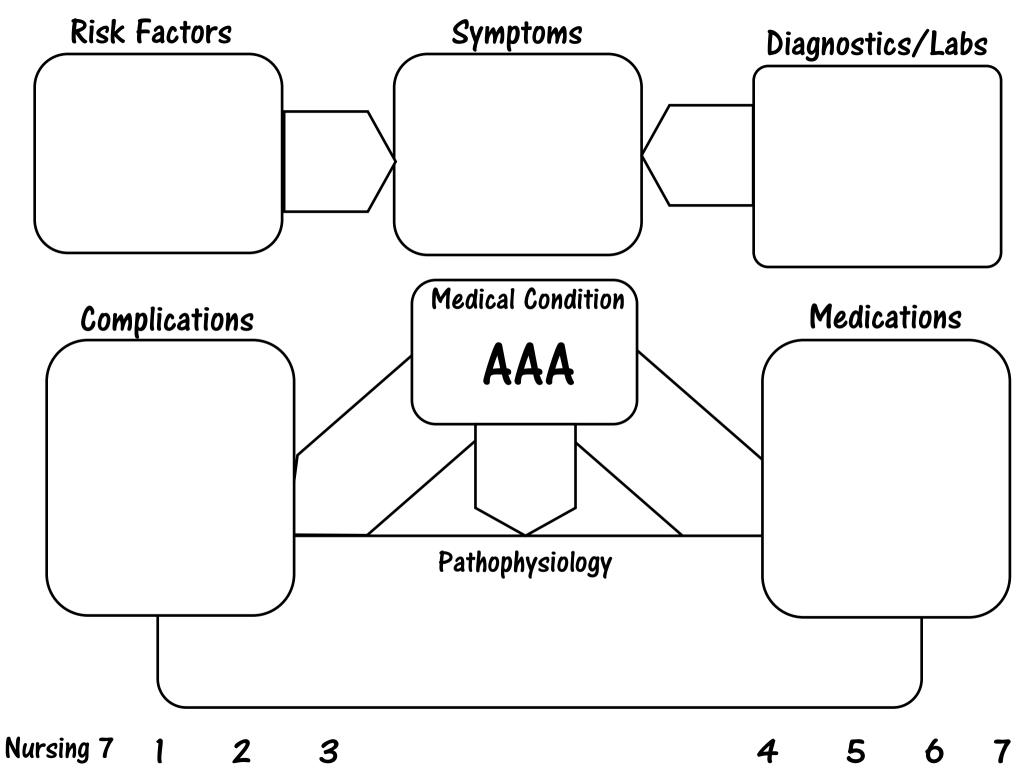




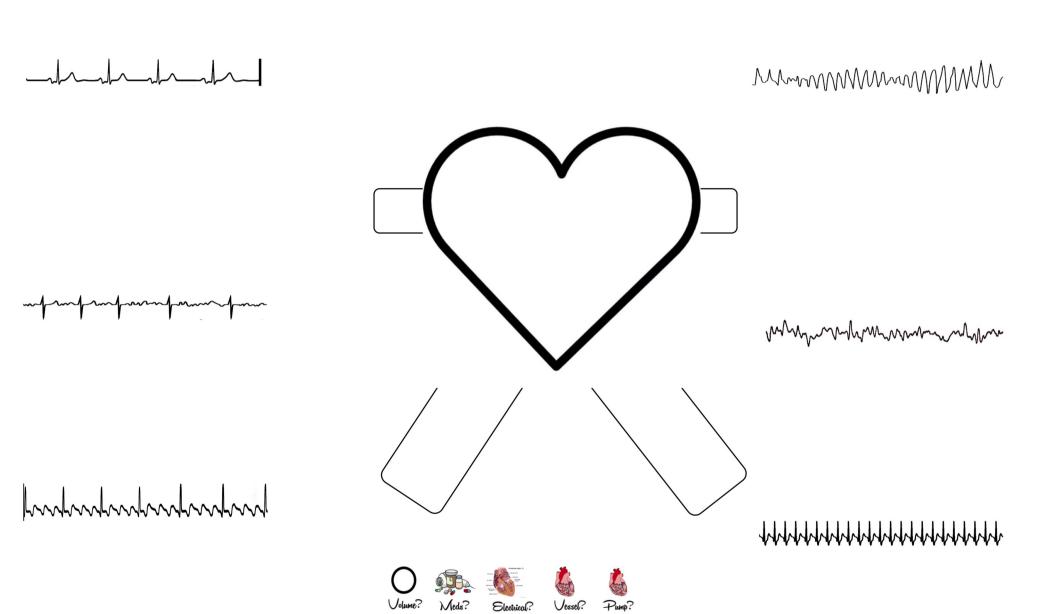








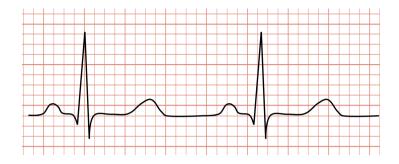






MMMMMMM

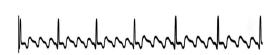


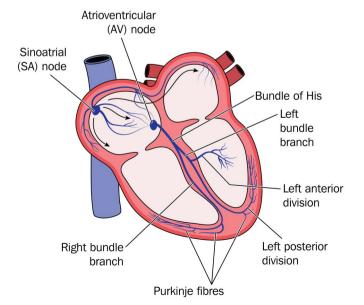


MMMmmmM









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Pulmonary Unit

Pulmonary Medications

You Should Know!

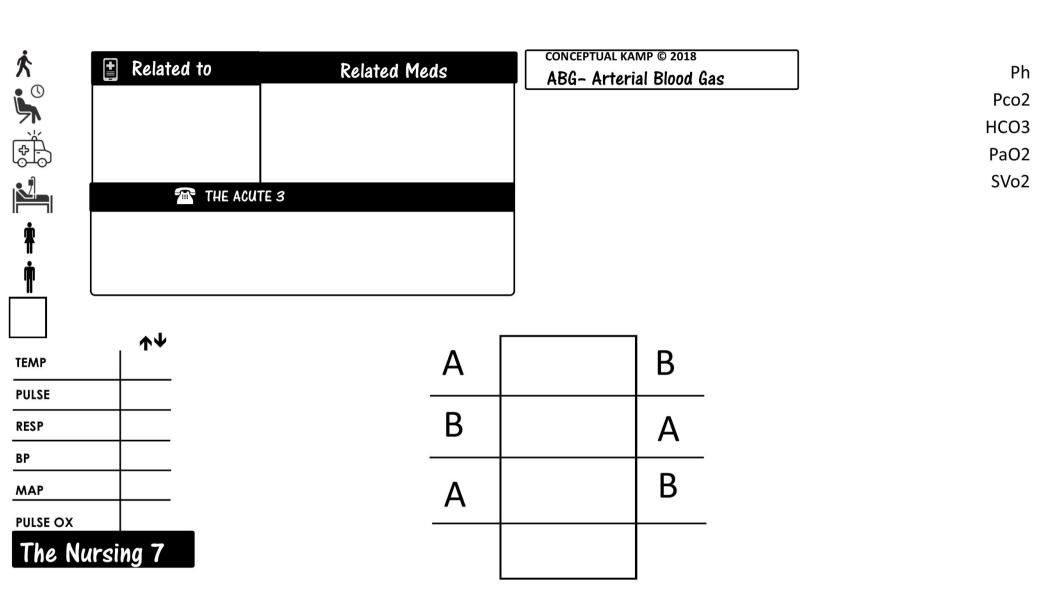
From the Top 200 List of Prescribed Medications

Montelukast	Methylprednisolone	Fluticasone + Salmeterol	Olopatadine	Salbutamol
Albuterol	Loratadine	Budesonide + Formoterol	Levalbuterol	Ipratropium
Promethazine	Prednisone	Cetirizine	Clobetasol	Salmeterol
Fluticasone	Prednisolone	Guaifenesin	Benzonatate	Tiotropium
Tiotropium	Mometasone	ipratropium bromide	Triamcinolone	Terbutaline

PULMONARY MEDS ARE CLASSIFIED AS EITHER SABA or SAMA or LABA or LAMA

SABA- Short Acting β Agonist (rescue med)	Salbutamol, Terbutaline	Used in acute inhalers in combination with SAMA	
SAMA-Short Acting Muscarinic Antagonist	Ipratropium	Used in Combination with SABA	
LABA =Long Acting β Agonist	Salmeterol, Formeterol	Used in combination with LAMA	
LAMA =Long Acting Muscarinic Antagonist	Tiotropium	Used in combination with LABA	

Medications change frequently. This list may not be all inclusive and up to date —2018

















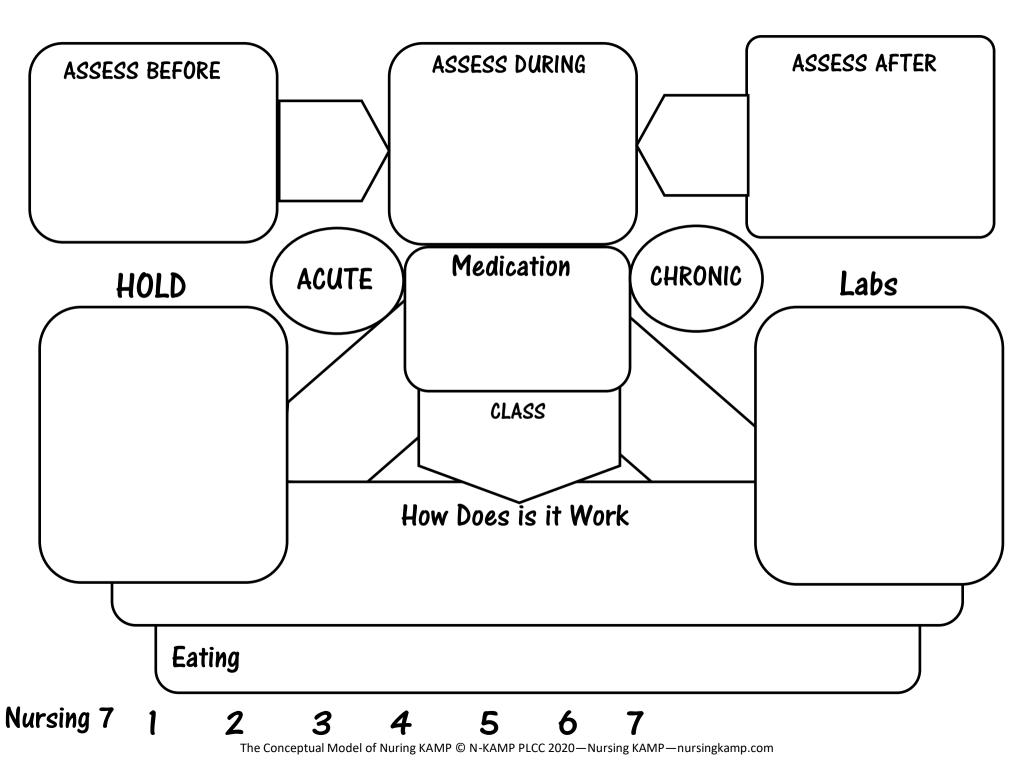
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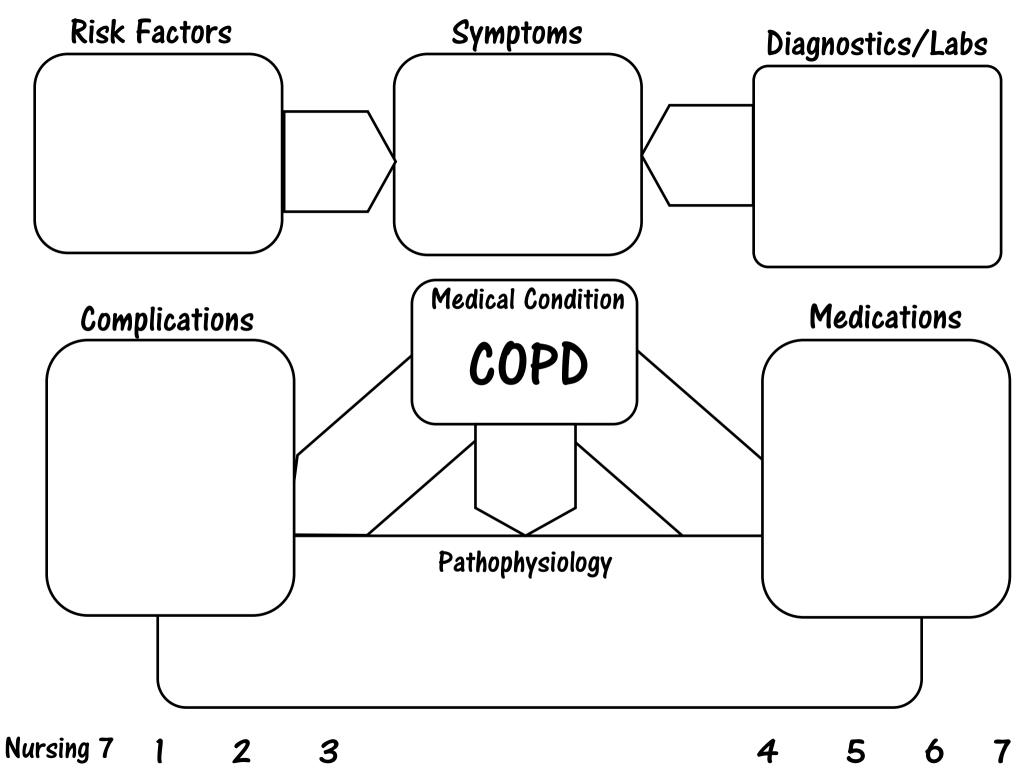


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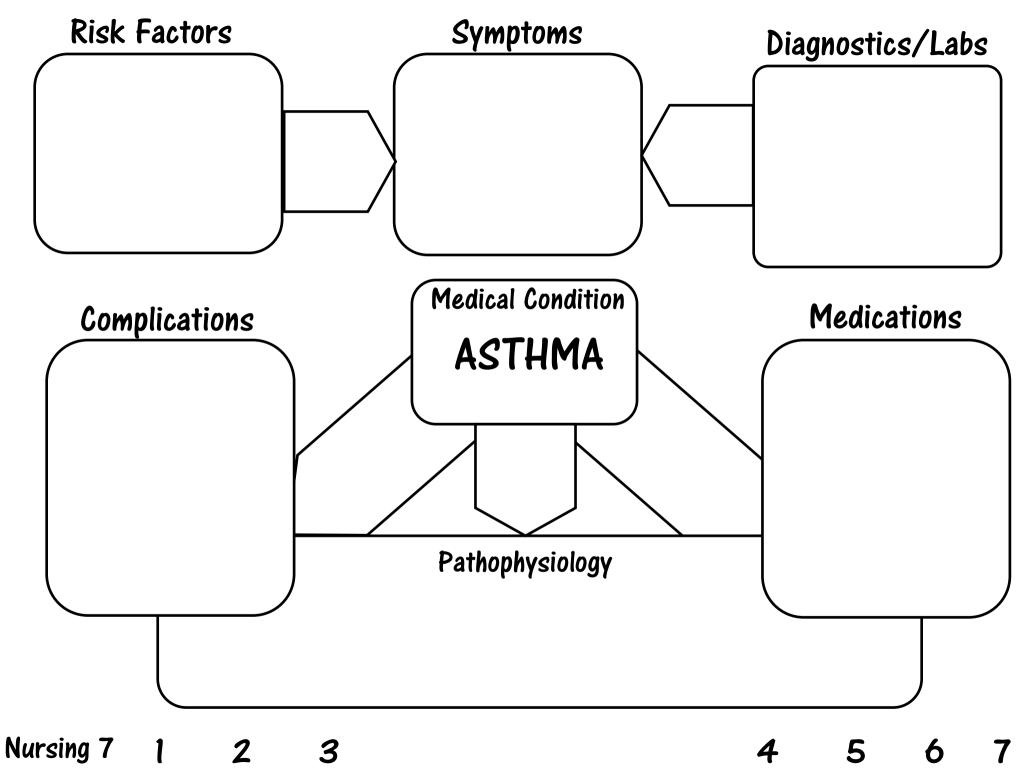
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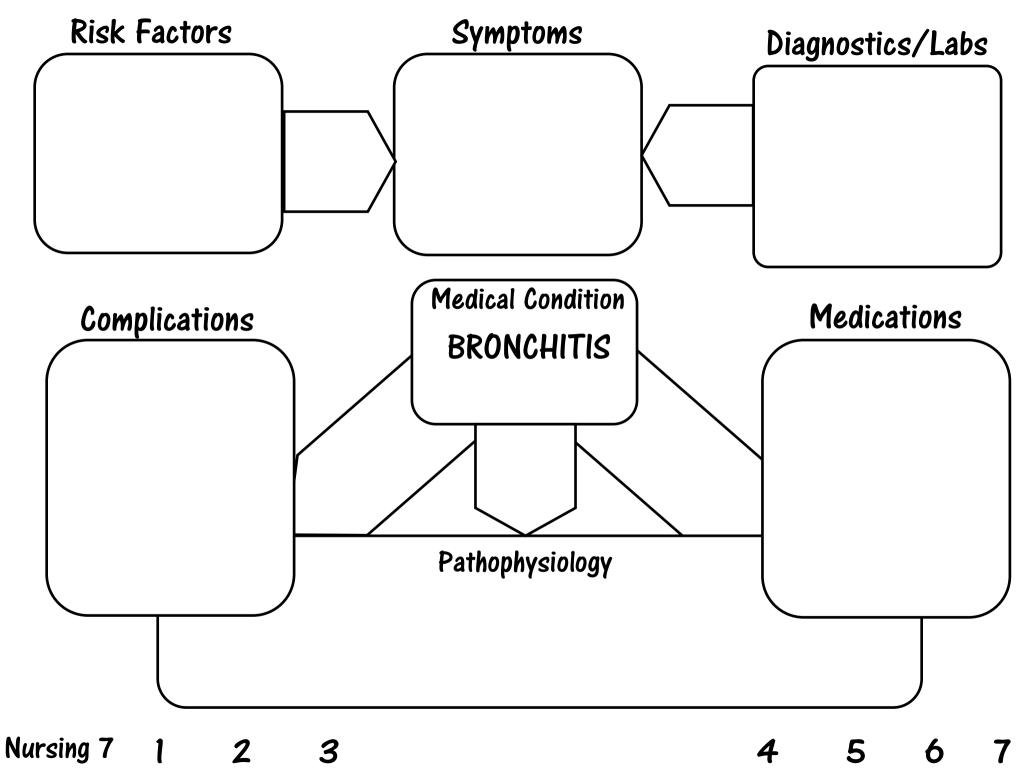




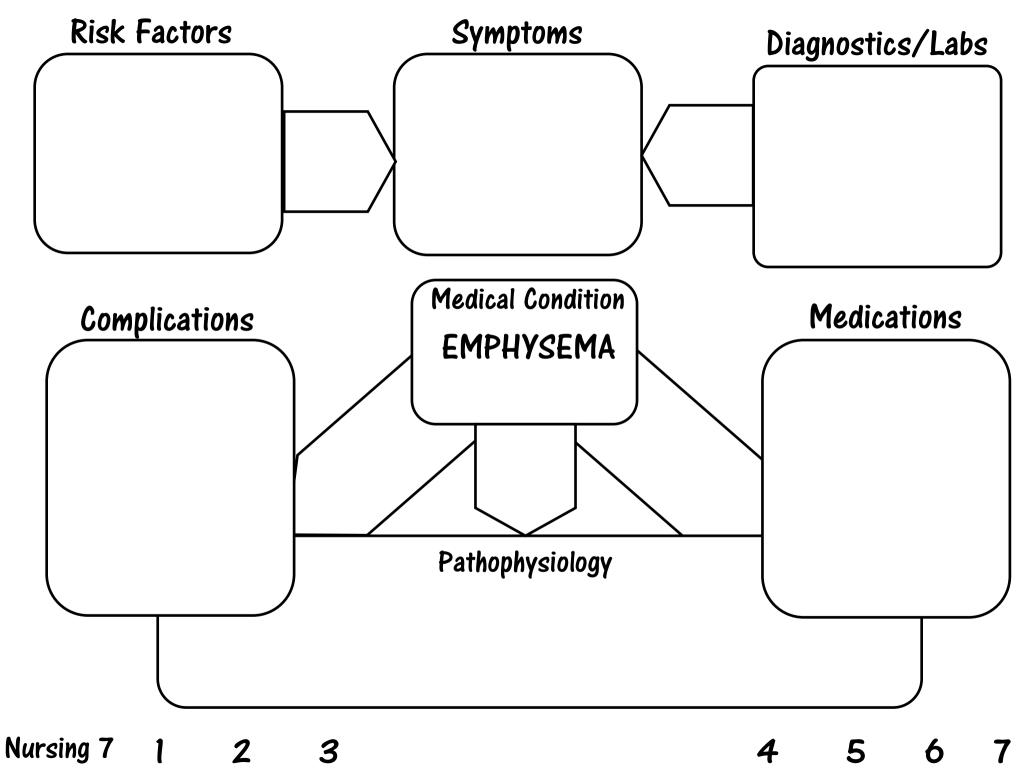




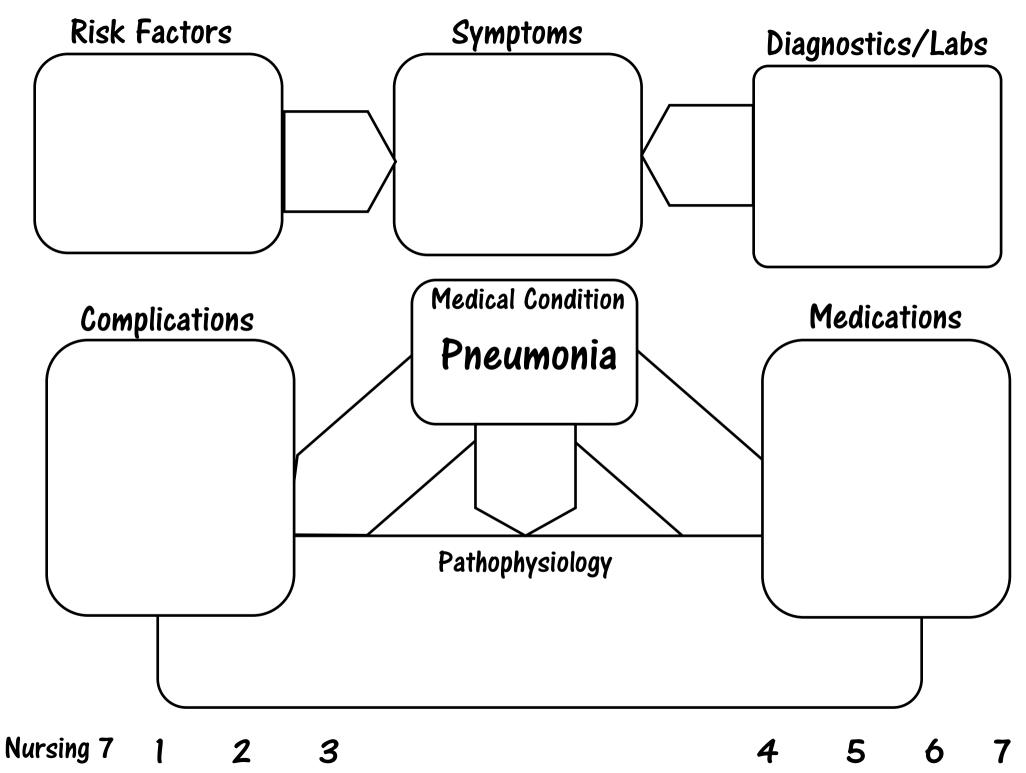




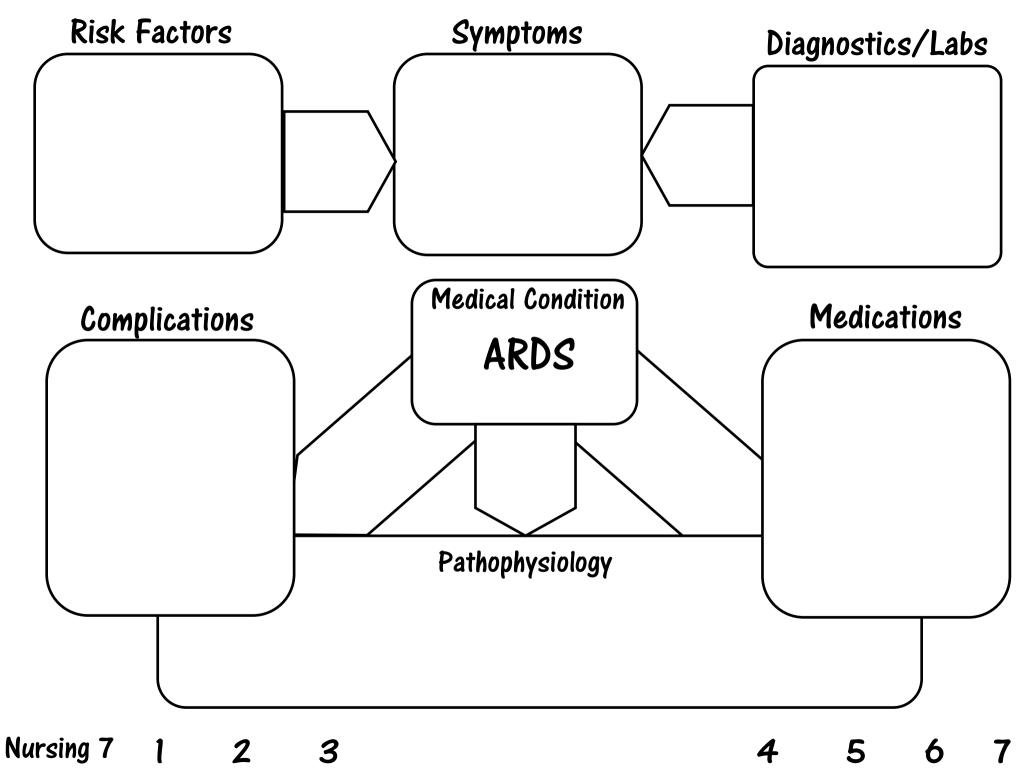




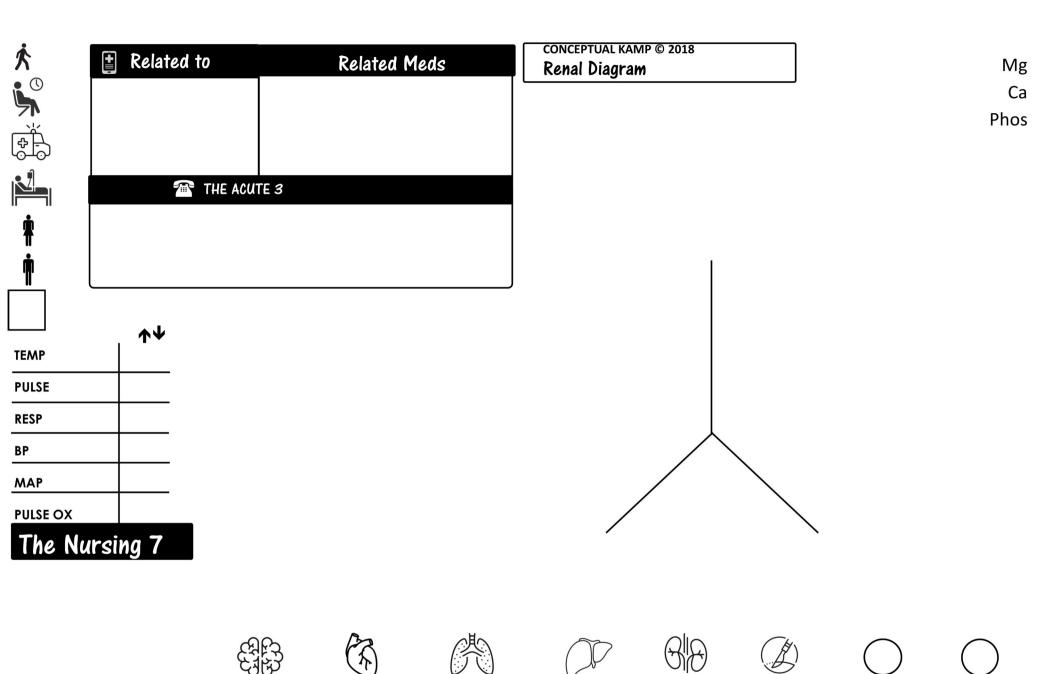












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Endocrine-GU/GI Medications

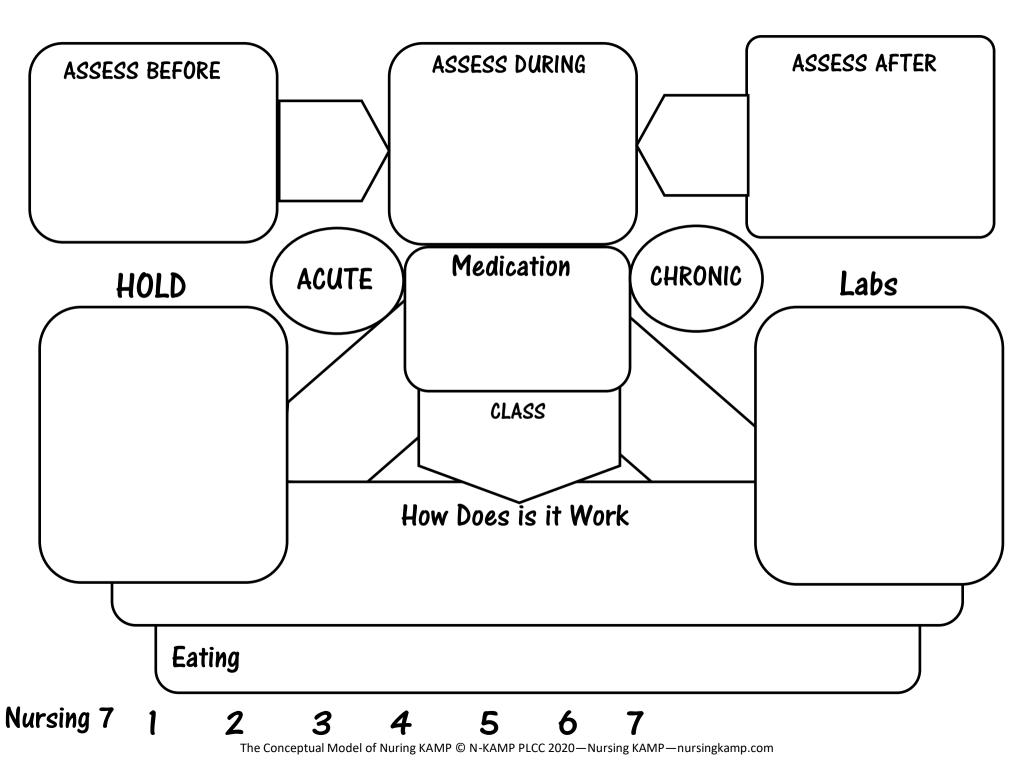
You Should Know!

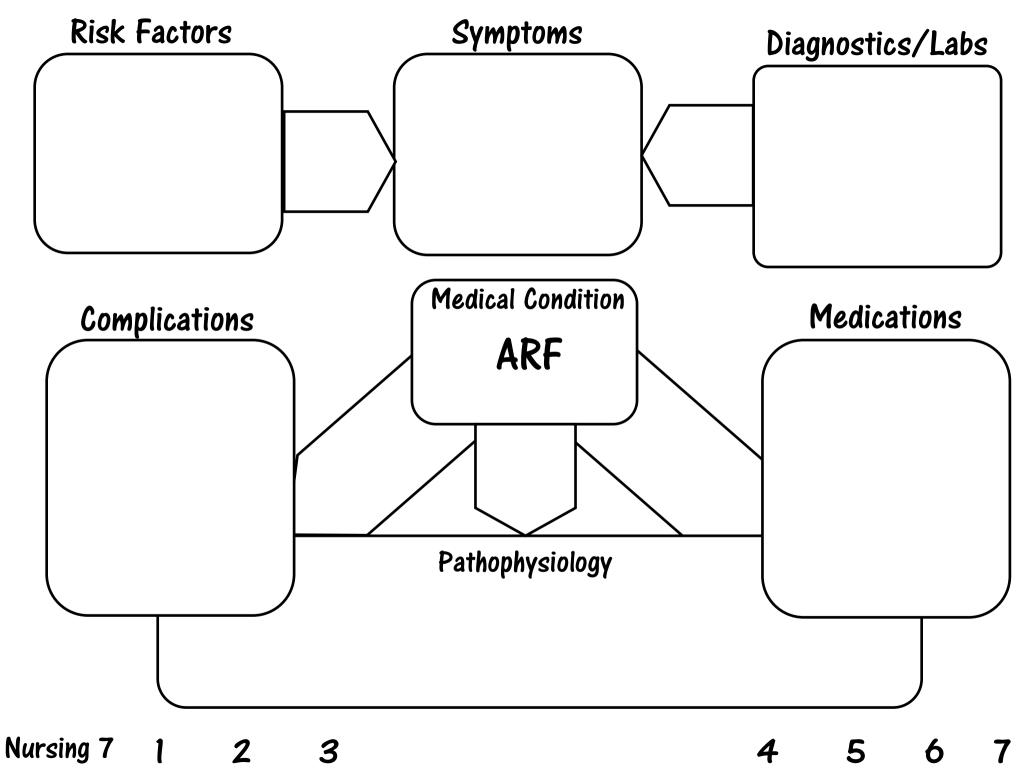
From the Top 200 List of Prescribed Medications

Levothyroxine—3	Allopurinol	Testosterone	Lamotrigine
Esomeprazole-3	Sitagliptin	Dicyclomine	Nortriptyline
Metformin	Latanoprost	Ondansetron	Glimepiride
Omeprazole	Dexlansoprazole	Budesonide	Rabeprazole
Folic Acid	Glyburide	Doxazosin	Lansoprazole
Pantoprazole	Tolterodine	Insulin Lispro	Terazosin
Pioglitazone	Ranitidine	Finasteride	Estradiol
Insulin Detemir	Famotidine	Ketoconazole	Liraglutide
Insulin Aspart	Insulin Glargine	Solifenacin	Saxagliptin
Estrogen	Glipizide	Dutasteride	Febuxostat
Meclizine	Metoclopramide	Phenazopyridine	

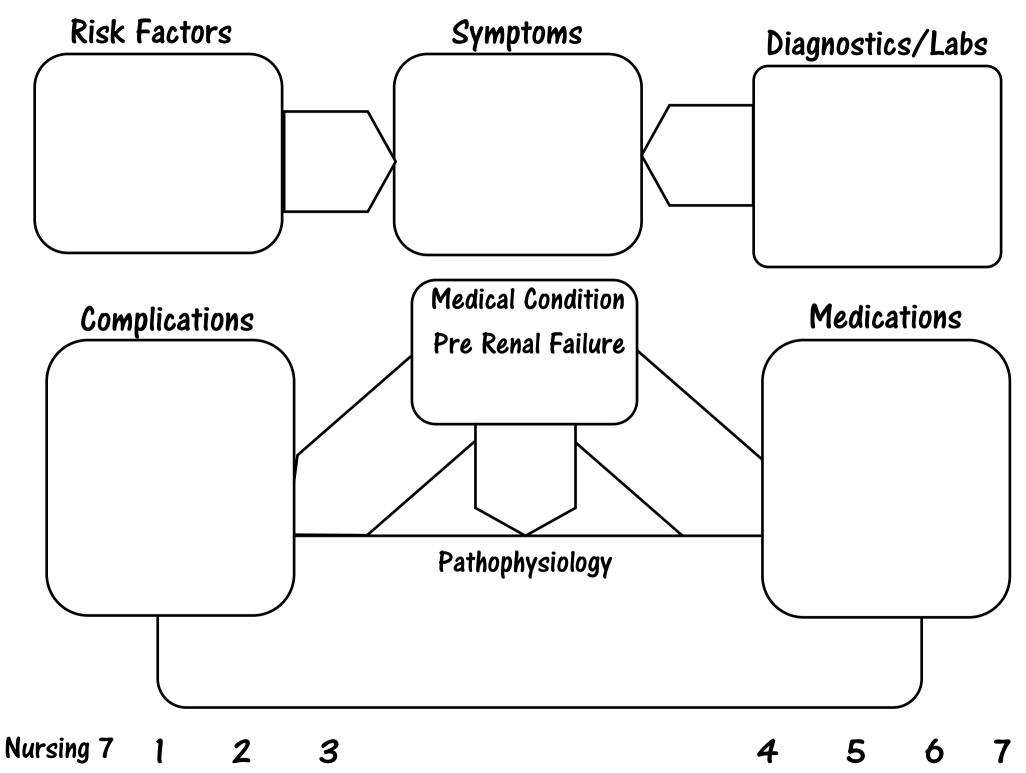
Medications change frequently. This list may not be all inclusive and up to date —2018

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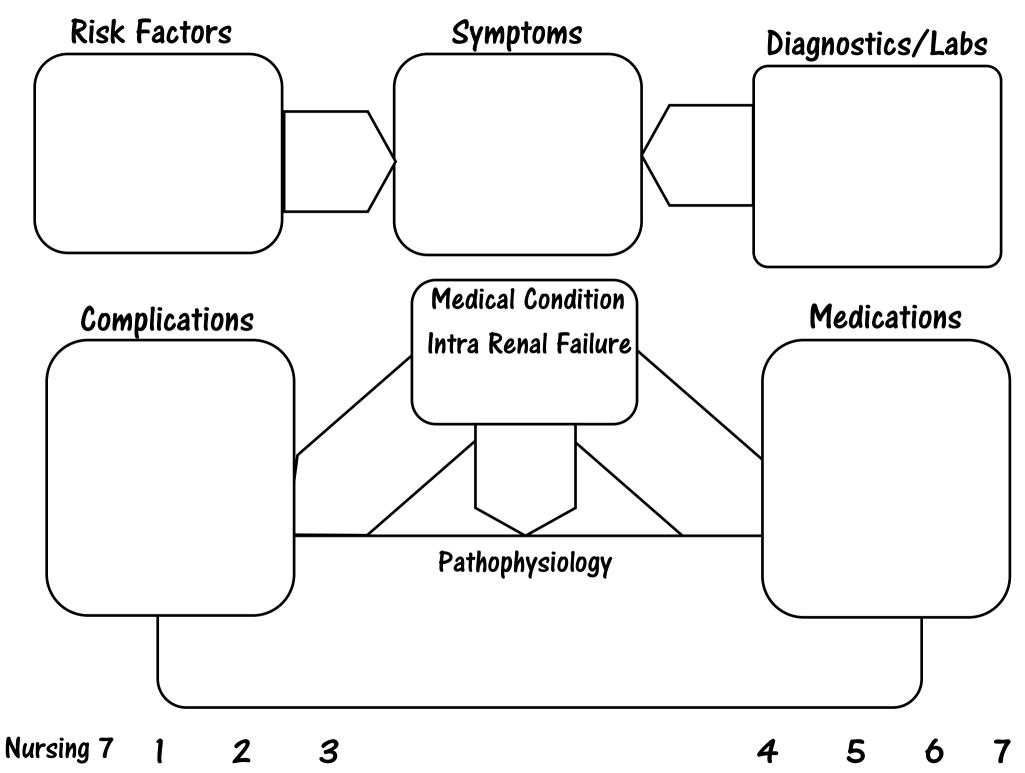




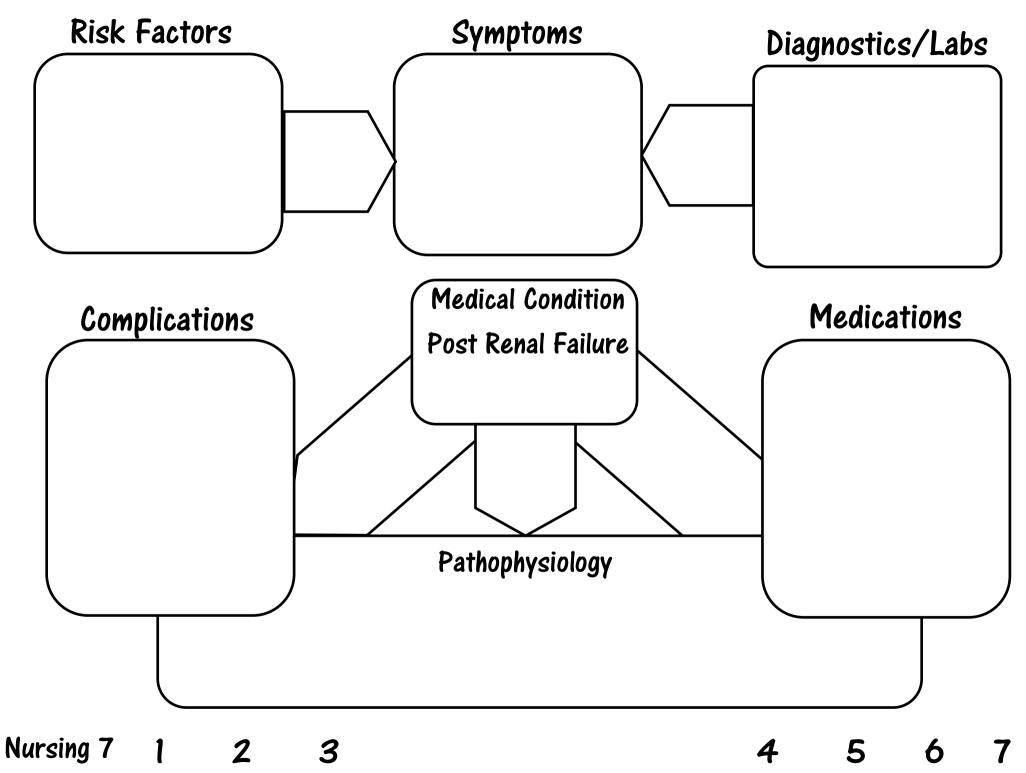




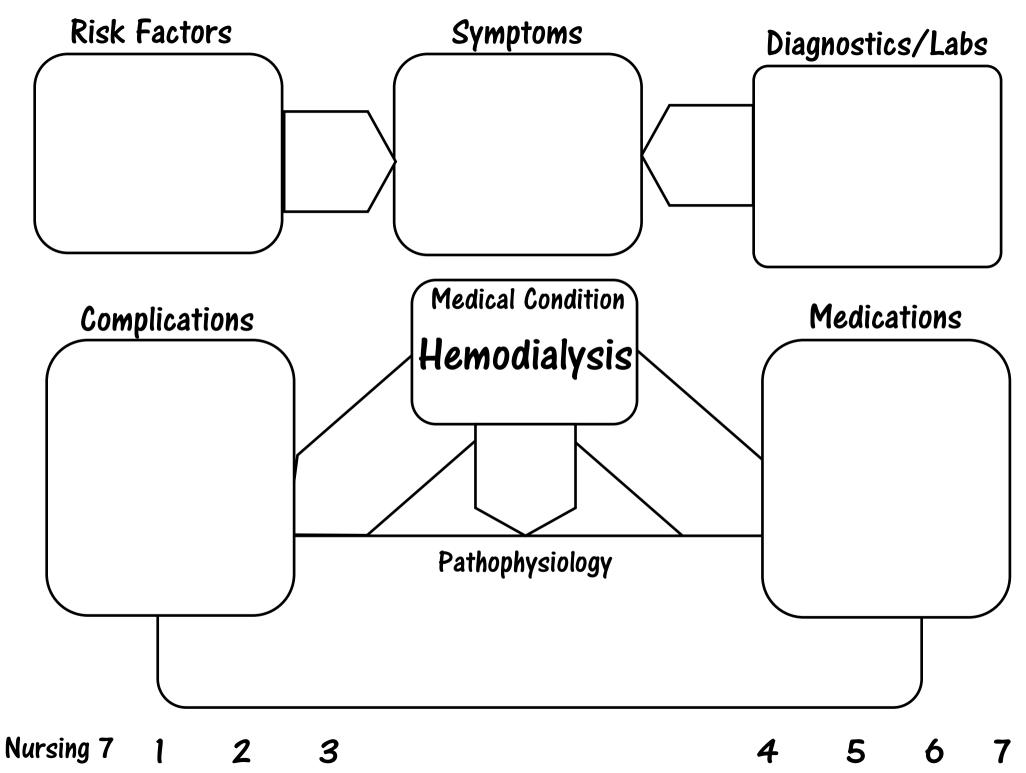




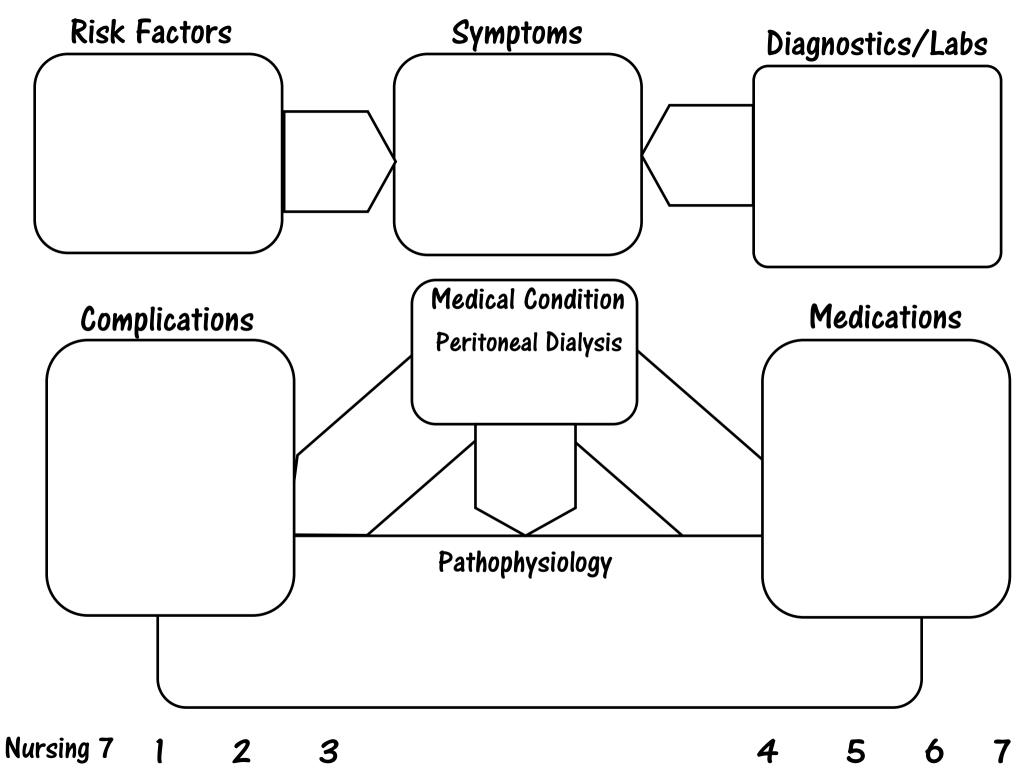




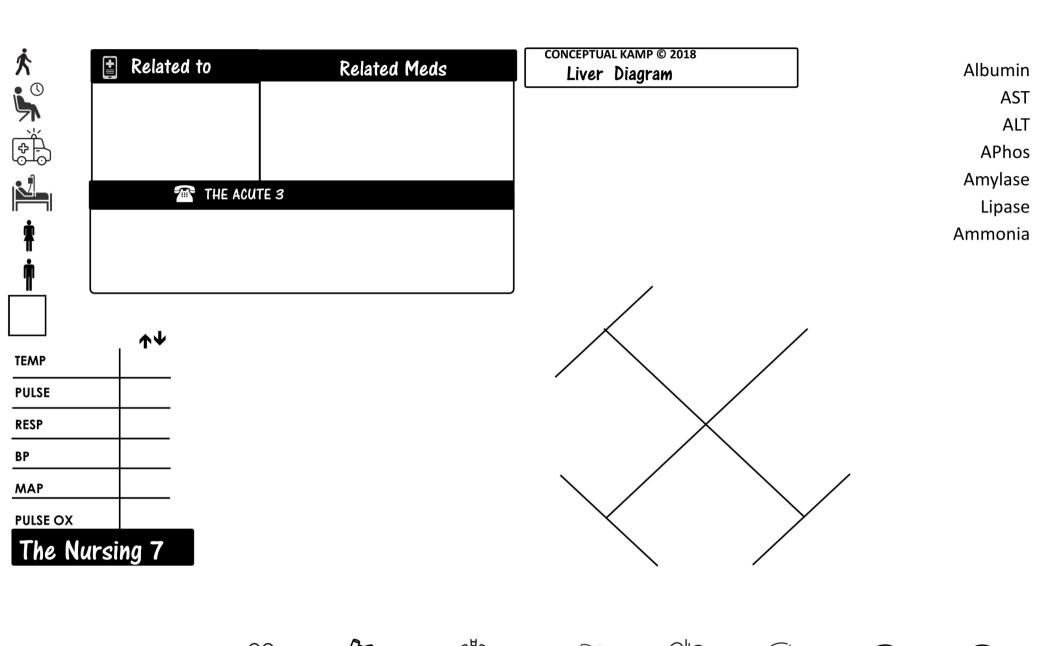








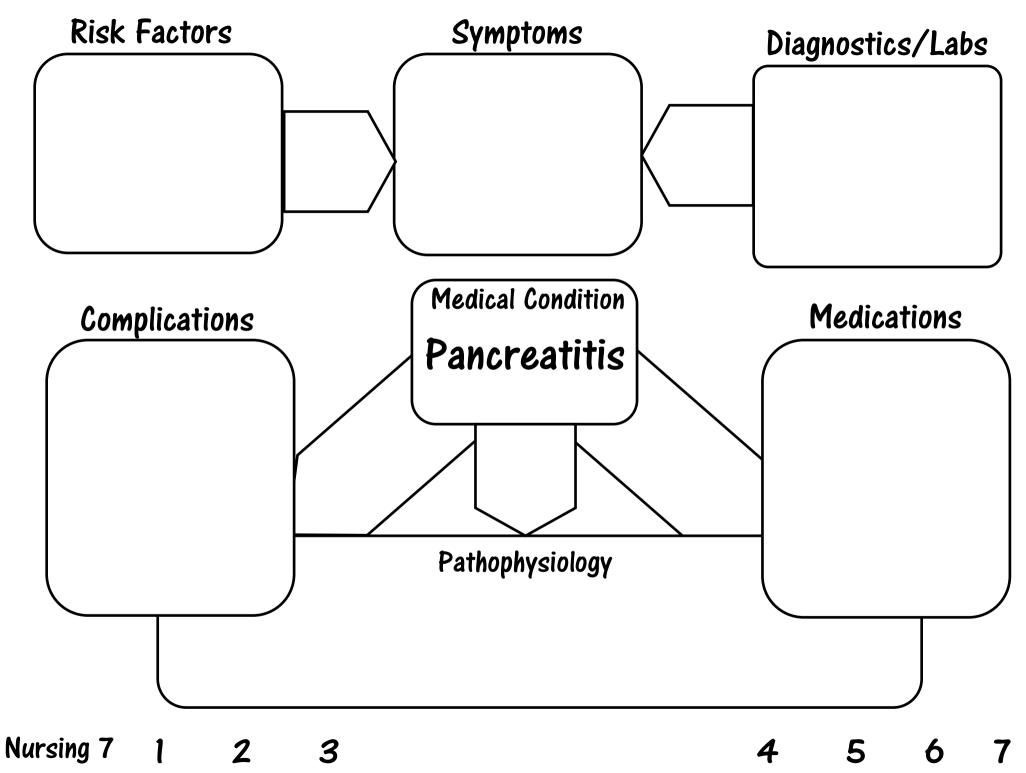




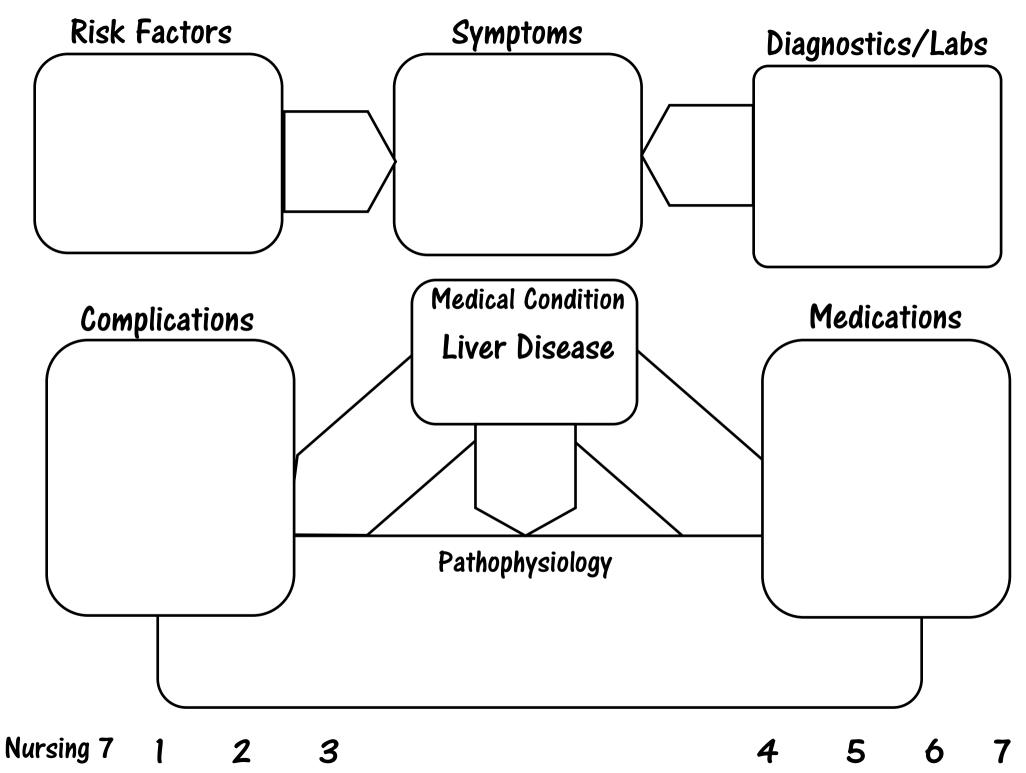
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