

SPECIFIC CURRICULUM CONTENT

Please provide information on specific content in the following skill areas.

The practical nursing program or post basic course **did / did not** include a theory, lab and clinical component on **Administration of Medications/Pharmacology.**

Number of Hours: **Theory** _____ **Lab** _____ **Clinical** _____

At completion of the education program, the graduate was able to prepare and administer medications via the following routes:

- _____ Enteral (oral, nasogastric, gastrostomy, rectal)
- _____ Percutaneous (otic, ophthalmic, skin, inhalants etc.)
- _____ Subcutaneous Injections
- _____ Intramuscular Injections
- _____ Intradermal Injections
- _____ Immunization Injections

The practical nursing program or post basic course **did / did not** include a theory, lab and clinical component on **Infusion Therapy and Blood/Blood Products.**

Number of Hours: **Theory** _____ **Lab** _____ **Clinical** _____

At completion of the education program, the graduate was able to manage intravenous therapy and blood/blood products therapy including the following:

- _____ Monitor intravenous sites, solutions and flow rates
- _____ Calculate and adjust intravenous flow rates
- _____ Change intravenous solution bags and tubing
- _____ Discontinue intravenous therapy infusion
- _____ Maintain various types of venous access/infusion control devices
- _____ Maintain blood and blood related infusions
- _____ Document assessment and care of clients receiving infusion therapy
- *Hypodermoclysis
- *Initiate Blood and Blood Products
- *Insertion of Intravenous Catheters
- *Intravenous Medication Administration
- *Central Venous Catheter (CVC) care

At completion of the education program, the graduate was able to administer medications at the proficient level.

Yes____ **No**____

All competencies listed above, with the exception of those marked with an asterisk*, are mandatory requirements for licensure in Newfoundland and Labrador.

Comments:

Include a detailed copy of the medication administration/pharmacology course outline & course description.

Specific Curriculum Content provided by:

Name (Please Print)

Title

Signature

Date (D/M/Y)

(_____)_____
Phone Number

(_____)_____
Fax Number