

Faculty Guide

Elevated Cholesterol



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Year: 2022

Source: https://youtu.be/zemSXkWa-CA

How These Videos Were Developed

These patient videos were scripted by UNCG School of Nursing professional educators. The scenarios are fictitious but based upon real circumstances and acted out by professional actors. The videos are available on YouTube and H5p platforms. Interactive questions were inserted into the videos using the h5p.org online platform. Closed captioning is included for increased accessibility.

The Academic Practice Partnerships Today for Competent Practitioners

Tomorrow (APPTCPT) video case simulations have been designed to enhance nurse practitioners' skills in health history, advanced physical assessment, diagnostic reasoning, and developing management plans. These video case simulations integrate the Adult-Gerontology Primary Care Nurse Practitioner Competencies (AACN, 2016) in the learning objectives.

Course Use

You can link to or embed these videos for your class. H5p videos can be assigned to students to complete as homework or completed in small groups or as a whole class for discussion. H5p videos can be incorporated into a learning management system (LMS) to track student responses. The YouTube videos can be linked or embedded in your course.

Using these Videos with an LMS for Formative Learning

Blackboard: Here are instructions for how to incorporate <u>h5p videos into Blackboard.</u>

Canvas: Using Canvas with H5P.com

To collect students' scores, you'll need an h5p.com account. To get started with H5P in Canvas just go to H5P.com and start a 30 days free trial. You should make sure your Canvas admin is ready to set up the LTI integration. By using H5P.com, the content is inserted right away, grades are stored in the gradebook and you can see what your users answered. Then you can download these ANEW patient videos from h5p.org and import them into your h5p.com account using these import/export instructions.

Moodle: See these instructions for using h5p.org with Moodle.

Disclaimer:

As new scientific information becomes available through basic and clinical research, recommended treatments and therapies undergo changes. At the time of development, the authors have done everything possible to make this simulation case accurate with accepted standards at the time of production.

INTRODUCTION

This simulation video case, "Elevated Cholesterol" presents primary care nurse practitioner learners an opportunity to develop their diagnostic reasoning and advanced health assessment skills/knowledge to function in an APRN role. Learners can discuss and collaborate to diagnosis the patient presentation and develop an appropriate plan of care for treatment and address any preventative care needs. The learning focus of this simulation video case can be for nurse practitioner learners early in their clinical management program or be adjusted to learners at the end of their education program by adding content such as laboratory testing, current cholesterol management guidelines, calculating the patient's ASCVD risk score, developing smoking cessation plan, and culturally adapting care.

LEARNING OBJECTIVES

This video case simulation prepares learners to:

- 1. Apply knowledge in advance health assessment to form differential diagnoses based upon scientific knowledge to differentiate between normal and abnormal findings in physiological, psychological and sociological development in a patient with an elevated total cholesterol level.
- 2. Manage the care of a patient with hypercholesterolemia and advocating for smoking cessation.
- 3. Provide education on management of hypocholesteremia based on appropriate teaching learning theory considering the patient's developmental stage, readiness to learn, health literacy level and resources.
- 4. Recommend strategies to improve the patient's overall health lowering cholesterol, increasing physical activity and smoking cessation.

Learners of Advanced Practice Health Professions:

- Family Nurse Practitioner (FNP)
- Adult-Gerontology Primary Care Nurse Practitioner (AGPCNP)
- Adult-Gerontology Acute Care Nurse Practitioner (AGACNP)
- Physician Assistant (PA)

The charts below were developed through a consensus process by the five nurse practitioner faculty experts who independently reviewed the videos and the faculty guides to determine the relevance of the content of the video and assignments with each of the domains, advanced level nursing education competencies, essentials level 2 sub-competencies and the concepts. The competencies, sub competencies and concepts listed here have an 80% consensus on the item (Polit & Beck, 2006).

Concepts for Nursing Practice Clinical Judgment Communication Compassionate Care Diversity, Equity, Inclusion **Ethics Evidence-Based Practice**

Domain, Competencies, and Sub-competencies for Advanced-level Professional Nursing



Knowledge for Nursing Practice

1.1 - Demonstrate an understanding of the discipline of nursing's distinct perspective

- 1.1e Translate evidence from nursing science as well as other sciences into practice.
- 1.1f Demonstrate the application of nursing science to practice.

1.2 - Apply theory and research-based knowledge from nursing, the arts, humanities, and other

- 1.2f Synthesize knowledge from nursing and other disciplines to inform education, practice, and research.
- 1.2g Apply a systematic and defendable approach to nursing practice decisions.
- 1.2h Employ ethical decision making to assess, intervene, and evaluate nursing care.

1.3 Demonstrate clinical judgment founded on a broad knowledge base.

1.3d Integrate foundational and advanced specialty knowledge into clinical reasoning.



Person-Centered Care

2.1 Engage with the individual in establishing a caring relationship.

2.1e Foster caring relationships.

2.2 Communicate effectively with individuals.

- 2.2i Apply individualized information, such as genetic/genomic, pharmacogenetic, and environmental exposure information in the delivery of personalized health care.
- 2.3 Integrate assessment skills in practice.
- 2.3h Demonstrate that one's practice is informed by a comprehensive assessment appropriate to the

2.4 - Diagnose actual or potential health problems and needs.

- 2.4f Employ context driven, advanced reasoning to the diagnostic and decision-making process.
- 2.4g Integrate advanced scientific knowledge to guide decision making.

2.5 - Develop a plan of care.

- 2.5i Prioritize risk mitigation strategies to prevent or reduce adverse outcomes.
- 2.5j Develop evidence-based interventions to improve outcomes and safety.

2.8 - Promote self-care management.

- 2.8f Develop strategies that promote self-care management.
- 2.8h Employ counseling techniques, including motivational interviewing, to advance wellness and self-care r



Professionalism

9.2 - Employ participatory approach to nursing care.

- 9.2k Model professional expectations for therapeutic relationships.
- 9.2I Facilitate communication that promotes a participatory approach.

Adapted with permission from American Association of Colleges of Nursing. American Association of Colleges of Nursing. (2021). The essentials: Core competencies for professional nursing education. https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf

CASE OVERVIEW

Case: A 40-year-old Asian male presents to the nurse practitioner for an initial visit following a health screening at his place of employment. He was informed by the workplace nurse that his cholesterol was elevated. The patient is not concerned about his cholesterol he came because his wife is concerned and wanted him to see a healthcare provider. This case is divided into two parts.

In the first part of the video, Mr. Hassan is establishing care with a new primary care provider to him. He just recently obtained health insurance. He normally only seeks medical attention when ill. In the second part of the video, three months has elapsed since the initial appointment for his elevated cholesterol. The goal of the second part of the video is to determine how the patient is managing recommended lifestyle changes and identify if further treatment is needed.

Case Setting: The case takes place in an ambulatory primary care setting.

Case Background Information for Faculty: Hamid Hassan presents to the clinic following a visit to a health fair at his place of employment. His wife was concerned with the results given his family history and made an appointment to establish care with the nurse practitioner. He has a long history of smoking since in high school and attempted to quit 10 years ago without any success. He states that he generally does not seek any health care unless he is ill and only recently has health insurance. Mr. Hassan reports no other health problems. He does relate that his father died at age 45 from a heart attack and had a history of smoking. He mentions that his dad did not have any prior history of heart problems before he died. His mother passed at age 60 from thyroid problems. His brother has high blood pressure and he recalls that one of his grandfathers died of a stroke when was in his sixties. A lipid panel was drawn at the first visit with the following results:

Total cholesterol: 210, HDL: 35, LDL: 160.

At this time, he is advised to make some dietary modifications, increase his physical activity and try to reduce the number of cigarettes he is smoking.

Three months later the patient returns to the clinic for an evaluation. The lab work is repeated with the following results:

Total cholesterol: 220, HDL 35, and LDL 170.

Case Simulation: Elevated Cholesterol (7:14 minutes)

h5p link: https://h5p.org/node/491550 YouTube link: https://youtu.be/zemSXkWa-CA

INTERACTIVE H5P CASE QUESTIONS*

- 1. In reviewing a patient's family history, which relatives would be important to include in a patient with a high cholesterol level? Select all that apply:
 - a. Parents
 - b. Adoptive parents
 - c. Siblings
 - d. Grandparents

All the relatives' history should be briefly reviewed. We tend to consider blood relatives for genetic predisposition for hypocholesteremia; however, if a patient has adoptive parents, lifestyle influence on diet could contribute to an elevated cholesterol level.

- 2. Which social/lifestyle history questions should now be asked? Select all that apply.
 - a. Marital status and children
 - b. Chest pain (Incorrect. Chest pain is a symptom and not part of social/lifestyle history.)
 - c. Smoking
 - d. Headache (Incorrect. Headache is a symptom and not part of social/lifestyle history.)
 - e. Physical activity
 - f. Educational level
 - g. Breathing difficulty (Incorrect. Breathing difficulty is not part of social/lifestyle history.)
 - h. Alcohol and other illicit substances
- 3. Which health promotion topics would be most beneficial for the nurse practitioner to advise the patient at this time?
 - a. Heart-healthy lifestyle modification
 - b. Cessation of smoking
 - c. Continue the current diet was eating and recheck cholesterol in 1 month (Incorrect. The patient has indicated that his diet comprises of mainly fast food and has changed since his arrival in the U.S.)
 - d. Moderate physical activity of 150 minutes a week
 - f. Advise generally adding strength training to his normal activities of daily living (Incorrect. Without advising a specific duration of cardio and other forms of exercise, the patient won't know the target goal.)

POSSIBLE DISCUSSION QUESTIONS

^{*}bolded responses are correct answers

- 1. What resources could the nurse practitioner provide the patient on options for treating smoking cessation? If this patient wanted to use medications to assist with quitting smoking, develop a management including prescribing information for smoking cessation.
- 2. What recommendations could the nurse practitioner give the patient on ways to increase physical activity and healthy eating?
- 3. How can this patient's care be culturally tailored to be more patient-centered and encourage adoption of lifestyle changes?
- 4. Following the second visit, what would you recommend at this time for the patient for managing his hypercholesterolemia? In your management plan, include, include full prescribing information, any follow up laboratory tests (with timing of labs and purpose of tests), patient education, and timing of next follow-up office visit.
- 5. How would you quantify this patient's cardiovascular risk using the ASCVD calculator?

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