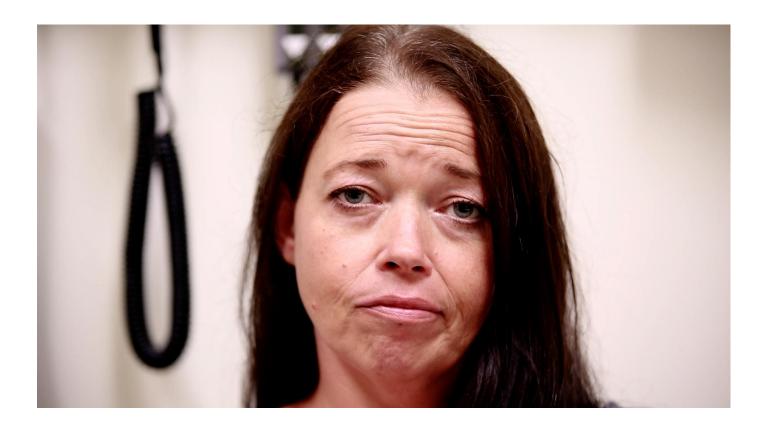


Faculty Guide

Fatigue and Headache



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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 <u>H5P.com</u> and start a 30 days free trial. You should make sure your Canvas admin is ready to <u>set up the LTI integration</u>. 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 <u>import/export instructions</u>.

Moodle: See these <u>instructions for using h5p.org with Moodle</u>.

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, **"Fatigue and Headache,"** presents primary care nurse practitioner learners an opportunity to develop their ability to screen for and recognize domestic violence in the primary care setting. Learners can discuss and collaborate to develop an appropriate approach and safety plan for patients who are affected by domestic violence. 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 that would include effective interventions and cooperative networking with local support agencies.

LEARNING OBJECTIVES

This video case simulation prepares learners to:

- 1. Recognize the importance of adult developmental transitions in delivering care.
- 2. Promote safety and risk reduction self-care strategies to prevent further incidence of domestic violence.
- 3. Advocate for the patient's rights regarding health care decision making.
- 4. Identify differential diagnosis in a patient presenting with chronic fatigue and headaches.
- 5. Select interventions designed to reduce risk future incidences with domestic violence.

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).

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,
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.
1.3e Synthesize current and emerging evidence to Influence practice.
Person-Centered Care
2.1 - Engage with the individual in establishing a caring relationship.
2.1d Promote caring relationships to effect positive outcomes.
2.1e Foster caring relationships.
2.2 Communicate effectively with individuals.
2.2g Demonstrate advanced communication skills and techniques using a variety of modalities with diverse
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.
Scholarship for the Nursing Discipline
4.1 - Advance the scholarship of nursing.
4.1h Apply and critically evaluate advanced knowledge in a defined area of nursing practice.
Professionalism
9.2 - Employ participatory approach to nursing care.
9.2k Model professional expectations for therapeutic relationships

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*. <u>https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf</u>

Concepts for Nursing Practice

- **Clinical Judgment**
- Communication
- **Compassionate Care**

Diversity, Equity, Inclusion

Ethics

Evidence-Based Practice

Social Determinants of Health

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)

CASE OVERVIEW

Case: Mary Smith is a 35-year-old Caucasian female with chief complaint of constantly being tired, lacking energy, and headaches. This is a case of intimate partner violence.

Case Setting: A 35-year-old female presents to clinic to see the nurse practitioner for headaches and lack of energy. Patient states, "I'm constantly tired, lack energy, and have been having headaches. This is a focused visit in a primary care setting.

Case Background Information for Faculty: Mary Smith states she has been experiencing headaches that have worsened over the last few days. She has also had difficulty sleeping and has only been sleeping for a few hours every night, waking up several times. She reports that her head hurts all over and that she has not felt like going to work. She reports that her head pain is dull, steady, not pounding, but aggravating. She reports that she fell down steps the other day and sprained her wrist, also stating that she may have tripped over something. She reported that an X-ray has been done at the ED and it is feeling better. This patient has been to the ED several times due to abuse from her husband. The most severe incident happened around 6 months ago and resulted in a broken rib and black eye.

Physical findings and vital signs: ***This information is <u>not available</u> in the H5P video with embedded interactive questions or YouTube video. Faculty can provide the students with these physical findings and vital signs or develop their own for in-class or small group discussion/activities.

- A. Vital Signs: BP: 110/70 P: 80 OT: 98.6 orally
- B. General: Overall health is good
- C. General Appearance: Flat affect, dull expression, in moderate pain with headache.
- **D. HEENT:** No nasal congestion or sinus tenderness. Tender in muscles in temporal area and at back of head.
- E. Musculoskeletal: Tender at base of thumb and index finger on bandaged left hand.
- F. Mental Status Exam: Normal except for slightly flat affect
- G. Gastrointestinal: WNL
- H. Genitourinary: N/A
- I. Gyn: N/A

J. Breasts: N/A

- K. Respiratory: WNL
- L. Peripheral Vascular: WNL
- M. Cardiovascular: WNL
- N. Neurologic: N/A

Case Simulation: Fatigue and Headache (4:28 minutes)

- Interactive video h5p link: <u>https://h5p.org/node/448513</u>
 - YouTube link: <u>https://youtu.be/52p-muF6syg</u>

INTERACTIVE H5P CASE QUESTIONS*

- 1. Given the patient's initial complaint of headaches, which of the following questions should be asked to gather more information for the history of present illness. Check all that apply.
 - a. Describe the type of pain you are experiencing
 - b. Can you rate the headache of a scale of 1-10?
 - **c.** Do you have a family history of headache (information would go under family history)?
 - d. Are you experiencing any vision lost, vomiting, numbness?
- 2. Often when patients present with headaches the patient can identify precipitating factors? Given the presentation thus far, which of the following questions would it be appropriate for the nurse practitioner to ask? Check all that apply
 - a. Are you having any difficulty sleeping?
 - b. Are there any stressful events that may be contributing to your headache?
 - **c.** What medication have you tried in the past that has helped your headache? (alleviating factor, not precipitating)
 - d. Do you notice headaches associated with change in menstrual cycle?
- **3.** Now that the patient has shared the domestic violence incident, what questions would be appropriate for the nurse practitioner to ask of the patient.
 - a. Are you afraid to be home with your husband?
 - b. Are you concerned about your daughter's safety?
 - **c.** Have you assaulted your husband? (Nurse practitioner is concerned first about the patient's safety
 - **d.** Have you asked anyone else to intervene when you suspect you might be assaulted? (Nurse
 - e. practitioner's role in this case is first for the safety of the patient.

- 4. Patients experiencing domestic violence need information about community resources. Which of the following resources might the nurse practitioner suggest to this patient given the repeated episodes of domestic violence? Check all that apply
 - a. Safety planning assistance
 - b. Legal assistance and referrals for obtaining protection order
 - c. Obtaining emergency child custody
 - d. Counseling and support groups for survivors and their children;
 - e. Help applying for public assistance and housing subsidies;
 - f. Transitional housing
 - g. Referrals to counseling and mental health services.

*bolded responses are correct answers

POSSIBLE DICUSSION QUESTIONS

- 1. What are the pertinent positives and negatives learned from the practitioner's engagement with the patient?
- 2. How would you describe the communication style of the NP in the video?
- 3. What role does communication style play in interacting with patients that are affected by domestic violence?
- 4. What would an appropriate safety plan look like for this patient?
- 5. What information would you have wanted to know about the patient that was not discussed in the video?

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