Pearson's Concepts Solution

_Nursing: A Concept-Based Approach to Learning_ is the number one choice for schools of nursing that use a concept-based curriculum. It is the only true concept-based learning solution and the only concepts curriculum developed from the ground up as a cohesive, comprehensive learning system. The three-volume series, along with MyLab Nursing, provides everything you need to deliver an effective concept-based program that teaches students to think like a nurse and develops practice-ready nurses.

_Nursing: A Concept-Based Approach to Learning_, Third Edition, represents the cutting edge in nursing education. This uniquely integrated solution provides students with a consistent design of content and assessment that specifically supports a concept-based curriculum. Available as a fully integrated digital experience or in print format, this solution meets the needs of today's nursing student.

Starting with the cover, our goal for the Third Edition is to help students learn the essential knowledge they will need for patient care. The cover, a Möbius strip, represents the relationships among the concepts and how they are all interconnected. By understanding important connections of concepts, students are able to relate topics to broader contexts.

What Makes Pearson's Solution Different?

As demonstrated with the previous two editions of _Nursing: A Concept-Based Approach to Learning_, Pearson's program has successfully met the needs of tens of thousands of students and instructors in concept-based education programs. The Third Edition builds on our commitment to excellence: Every page, every word, every feature has been examined—all to help enhance the learning and teaching process. The result is an integration of content and features that you, our customer, have asked for and that you will not find anywhere else.

Pearson’s program includes:

- Everything instructors and students need in one package: all concepts, all exemplars, all assessment tools.
- Content designed by instructional designers for conceptual learning that includes learning and enabling objectives for every main section and measurable outcomes for each.
- Content that covers the lifespan from pregnancy and birth, through childhood and adolescence, and into young adulthood and middle and old age.

Why Teach Concept-based Learning?

University and college nursing programs across the United States have begun evaluating how their programs can meet the needs of today's nursing students. The vast array of new knowledge in the “information age” has left nursing students feeling overwhelmed by the quantity of knowledge and skills they must gain in order to become practicing nurses. In light of this, many programs are moving to the model of concept-based learning in an effort to meet the challenges facing nursing students and new nurses today. Aside from creating a streamlined approach in response to content overload/saturation in nursing education, there are a multitude of reasons for nursing programs to consider a concept-based program.

This model provides the impetus for educators to transition away from traditional methods of faculty-centered teaching and passive learning toward active, focused, participative, and collaborative teaching and learning. Pearson's _Nursing: A Concept-Based Approach to Learning_, Third Edition, is designed to assist nursing faculty in providing students with a broader perspective while promoting a deeper understanding of content across the lifespan in a focused, participative, and collaborative learning environment.

What are the benefits of conceptual learning? Some of the often-referenced benefits of conceptual learning in nursing programs are that it:

- Focuses on problems
- Fosters systematic observations
- Fosters understanding of relationships
- Focuses on nursing actions and interprofessional efforts
- Challenges students to be excellent learners.
Organization and Structure of the Third Edition

The basic structure of the Second Edition was retained for the Third Edition. There are:

- Five parts:
  I: The Biophysical Modules (in the Individual Domain)
  II: The Psychosocial Modules (in the Individual Domain)
  III: Reproduction (in the Individual Domain)
  IV: The Nursing Domain
  V: The Healthcare Domain
- Fifty-one concepts
- One hundred fifty-eight exemplars

The Concepts were chosen after surveying numerous concept-based curricula and finding the common elements. Some Concepts were added or revised in response to requests by users. The result is a comprehensive set of Concepts that cover the essentials of nursing education.

The Exemplars were chosen based on selected national models and initiatives such as those of the Institute of Medicine, Healthy People 2020, The Centers for Disease Control and Prevention, The Joint Commission, the National Institutes of Health, the National Institute of Mental Health, the NCLEX Test Plan, The Centers for Medicare and Medicaid, the Occupational Safety and Health Administration, and Quality and Safety Education for Nurses, among others. Prevalence rates were considered for the biophysical and psychosocial exemplars, with more common disorders prioritized over less common ones. Certain Exemplars were chosen because they lend themselves to teaching across concepts or across the lifespan. In the Third Edition, some Exemplars that focused on a particular stage of the lifespan, such as Diabetes in Children, have been folded into the Lifespan Considerations of another exemplar. Now there are two separate Exemplars on diabetes: one focusing on type 1 diabetes mellitus and the other focusing on type 2 diabetes mellitus. In the Third Edition, nine new/expanded Exemplars have been added:

- Cystic Fibrosis
- Delirium
- Environmental Quality
- Nurse Safety
- Patient Safety
- Sexual Dysfunction
- Traumatic Brain Injury
- Type 1 Diabetes Mellitus
- Type 2 Diabetes Mellitus

For the Third Edition, as shown in the Module Outline and Learning Outcomes listed at the beginning of each module, each main section has a dedicated learning outcome. Our editorial and instructional design teams worked to create consistent, accurate, challenging, achievable, and measurable objective statements based on objective-driven design practices to better engage students, improve performance, increase student gains, and promote deep learning.

Module Outline and Learning Outcomes

**The Concept of Acid–Base Balance**

- Normal Acid–Base Balance
  - 1.1 Analyze the physiology of normal acid–base balance.
- Alterations to Acid–Base Balance
  - 1.2 Differentiate alterations in acid–base balance.
- Concepts Related to Acid–Base Balance
  - 1.3 Outline the relationship between acid–base balance and other concepts.
- Health Promotion
  - 1.4 Explain the promotion of healthy acid–base balance.
- Nursing Assessment
  - 1.5 Differentiate common assessment procedures and tests used to examine acid–base balance.
- Independent Interventions
  - 1.6 Analyze independent interventions nurses can implement for patients with alterations in acid–base balance.

**Acid–Base Balance Exemplars**

- Exemplar 1.A Metabolic Acidosis
  - 1.A Analyze metabolic acidosis as it relates to acid–base balance.
- Exemplar 1.B Metabolic Alkalosis
  - 1.B Analyze metabolic alkalosis as it relates to acid–base balance.
- Exemplar 1.C Respiratory Acidosis
  - 1.C Analyze respiratory acidosis as it relates to acid–base balance.
- Exemplar 1.D Respiratory Alkalosis
  - 1.D Analyze respiratory alkalosis as it relates to acid–base balance.

**Collaborative Therapies**

- 1.7 Summarize collaborative therapies used by interprofessional teams for patients with alterations in acid–base balance.
Normal Presentation ... Each Concept starts with a review of normal, healthy function, including subsections on Physiology Review and Genetic Considerations where appropriate.

Physiology Review

Genetic Considerations

Alterations ... The second section of each Concept focuses on alterations, including subheadings on Alterations and Manifestations, Prevalence, and Genetic Considerations and Risk Factors. A standard feature in this section is the Alterations and Therapies table.

Alterations and Manifestations

Prevalence

Genetic Considerations and Risk Factors

Case Studies

Each Concept contains a three-part unfolding case study to help students apply what they are learning to a sample patient.

Case Study » Part 1

Case Study » Part 2

Case Study » Part 3
Painful conditions, such as swelling and skin reactions, often occur during immune response.

**Consequences Related to Immunity**

**Concept**

- **Comfort**
- **Infection**
- **Infammation**
- **Managing Care**

**Nursing Implications**

- Assess related symptoms, such as redness, rash, malaise, loss of appetite, and trouble sleeping.
- Be alert to topical and take allergies that could worsen symptoms.
- Anticipate: Additional assessments, comfort measures.
- Assess area of suspected infection (see Infection Assessment section in the module on Infection).
- Educate patients regarding the importance of immunizations and encourage their use.
- Educate patients regarding the importance of avoiding situations that could increase exposure to infection.
- Practice standard precautions, proper hand hygiene, and aseptic technique with all procedures.
- Assess complete blood count (CBC) results; be alert for elevated WBC count.
- Assess for fever, skin warmth and redness, edema, and generalized pain.
- Be alert for abscess formation, purulent exudate, and increased WBC count.
- Anticipate: Aspirin, antipyretics, cold packs.
- Assess the needs of patients to identify actual or potential problems related to care.
- Advocate for patients in relation to their care needs.

**Patient Teaching**

**Health Promotion for Cancer Prevention: Modifiable Risk Factors**

- Encourage smoking or use of other tobacco products. Emphasize the importance of protecting children and themselves from exposure to tobacco smoke. This is one of the most important health decisions an individual can make.
- Encourage patients, especially children, to consume a healthy diet. This should include a minimum of five servings of fruits and vegetables daily as well as whole grains, iron-rich foods, and foods that are rich in vitamin C. Teach patients to limit their consumption of processed meats, drink alcohol in moderation, and choose fewer high-calorie foods.
- Explain the importance of maintaining a healthy weight and being physically active. Physical activity helps to control weight. Together, these factors may lower the risk for various types of cancer.
- Teach patients effective ways to protect themselves from ultraviolet radiation. Early excessive exposure to sun and one or more severe sunburns during childhood increases the chances of skin cancers developing in adulthood. Patients who work outdoors, athletes, coaches, and others who spend time outside regularly should use sunblock daily SPF 15 or greater, regardless of the climate in which they live. Emphasize the importance of avoiding midday sun, when the sun’s rays are strongest. Instruct patients to cover exposed skin and wear a hat with a wide brim. They should avoid tanning beds and sunbaths.
- Explain the importance of avoiding risky behaviors. Practicing risky behaviors such as needle sharing or unsafe sexual contact can increase the risk of developing certain cancers.
- Suggest that patients have their homes tested for radon and explore their exposure to harmful chemicals. Patients may be exposed to hazardous substances in the home or in the workplace.
- Stress the importance of getting immunizations, receiving regular medical care, and avoiding self-medication. By protecting against certain viral infections, immunizations can decrease the risk of some cancers. Regular screenings and self-examinations increase the chance of early detection of cancer, allowing for a better chance of successful treatment (Mayo Clinic, 2015a).

**Oxygenation Assessment**

<table>
<thead>
<tr>
<th>ASSESSMENT/ METHOD</th>
<th>NORMAL FINDINGS</th>
<th>ABNORMAL FINDINGS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nasal Assessment</td>
<td>The nose should be malleable and symmetrical.</td>
<td>Asymmetry indicates trauma or surgery.</td>
</tr>
<tr>
<td></td>
<td>The septum should fall midline.</td>
<td>Nasal flaring in the nostrils may be indicative of respiratory compromise.</td>
</tr>
<tr>
<td></td>
<td>The mucous membranes should be pink and moist without areas of ulceration or crusting.</td>
<td>Nasal passages of neonates and small children are smaller than those of adults. Ensuring a clear nasal cavity may decrease the risk of respiratory infection.</td>
</tr>
<tr>
<td></td>
<td>Foreign bodies may be found in the nares, especially in infants, toddlers, and preschoolers.</td>
<td>Nasal passages of neonates and small children are smaller than those of adults. Ensuring a clear nasal cavity may decrease the risk of respiratory infection.</td>
</tr>
<tr>
<td></td>
<td>Purulent or watery nasal drainage is present.</td>
<td>Nasal passages of neonates and small children are smaller than those of adults. Ensuring a clear nasal cavity may decrease the risk of respiratory infection.</td>
</tr>
<tr>
<td></td>
<td>Nasal flaring is seen.</td>
<td>Nasal passages of neonates and small children are smaller than those of adults. Ensuring a clear nasal cavity may decrease the risk of respiratory infection.</td>
</tr>
</tbody>
</table>

**Respiratory Rate Assessment**

- Assess respiratory rate for one full minute, counting one inspiration and one expiration as one breath.
- Assess quality of breathing, determine regularity in timing, assess depth of inspiration, observe effort to breathe.
- Observe the chest during inspiration and expiration. Inspect the chest wall gently rises and falls with inspiration and expiration. Observe the chest motion during inspiration and expiration.
- Assess: At rest, the heart rate is normally 1:2. This cycle of inspiration and expiration should be followed by a resting period of which the volume of the respiratory system will initiate the next respiratory cycle. Normal breathing is referred to as eupnea.
- Shortness of breath
- Cyanosis
- Orthopnea
- Infants and children have shorter chest walls and depend more heavily on the diaphragm to breathe. Therefore, they exhibit what is known as “nasal” breathing, an indicator of severe distress.
- In older adults, breaths choose such as snoring can affect the quality of breathing, as can the development of respiratory diseases.

**Inspection of Thoracic Cavity**

- Anterior-posterior diameter of the lungs
- Inspiratory expansion
- Fixed lung zones
- Emphysema
- Pleural effusions
- Pleural friction rub
- Splinting
- Pneumothorax
- Apical descent
- Paradoxical breathing
- Tracheal deviation

**Nursing Assessment**

**Enhanced for the Third Edition**

For the Third Edition, the Concepts Related to section and feature are designed to help students make linkages between and among different Concepts.
Independent Interventions ... Emphasizes interventions that nurses can perform on their own, without an order from the healthcare provider. Examples of subsections include:

- Prevent Infection
- Promote Safety
- Sleep Hygiene

Collaborative Therapies ... Each Concept includes an overview of relevant therapies that require collaboration with the interprofessional team. A Medications feature covers the most common drugs used to treat alterations. Examples of subsections include:

- Surgery
- Pharmacologic Therapy
- Nonpharmacologic Therapy
- Complementary Health Approaches

REVIEW The Concept of Elimination

RELATE Link the Concepts

- Linking the concept of elimination with the concept of infection:
  1. What changes in urinary elimination indicate the presence of UTI?
  2. List the effects of medications on urinary elimination.

- Linking the concept of elimination with the concept of communication:
  3. How can therapeutic communication be beneficial when assessing patients with urinary or bowel elimination problems?
  4. Describe the importance of accurate documentation when caring for a hospitalized patient with urinary or bowel elimination problems.

READY Go to Volume 3: Clinical Nursing Skills

- Skill 1.10: Assessing: Antimicrobial Agents
  - Skill Levels 4.4-4.5: Collecting Specimen
  - Skill Levels 4.6-4.10: Elimination: Voiding Interventions

REFER Go to Pearson MyLab Nursing and eText

- Additional review materials
- Atlas: Anatomy and Physiology of Urinary Elimination

REFLECT Apply Your Knowledge

Tony Nonotnik is a 4-year-old boy in the second grade. He and his 4-year-old sister, Nyla, live at home with their mother, Diane Nonotnik. Ms. Nonotnik is a single parent who works in the cafeteria at the high school. Tony has a problem with wetting the bed occasionally and is too embarrassed to discuss it with anyone. Ms. Nonotnik thinks Tony wet the bed because of emotional problems caused by his father leaving them when he was so young. Ms. Nonotnik does not want to try anything new to help with the bedwetting because she is afraid it will cause Tony more embarrassment and emotional upset. She already tried night diapers and does not answer. Ms. Nonotnik asks the nurse to help her understand the problem.

Today, both children have an appointment for an annual physical examination with the nurse practitioner prior to starting the new school year. Tony is soft spoken and reserved when questioned about his normal health. Ms. Nonotnik is a good historian and offers complete answers about Tony’s health history. The nurse notices the odor of urine on Tony’s undergarments during the initial assessment. When questioned, Tony looks at his mother and does not answer. Ms. Nonotnik looks away and does not answer. The nurse remains silent, waiting for a response to the question.

After a period of silence, Ms. Nonotnik reassures Tony and offers complete answers about Tony’s health history. The nurse notices the odor of urine on Tony’s undergarments during the initial assessment. When questioned, Tony looks at his mother and does not answer. Ms. Nonotnik looks away and does not answer. Tony appears to trust the nurse because he helps his mother explain about the bedwetting.

1. What therapeutic communication techniques could the nurse use to facilitate a full disclosure of the problem?
2. What are some questions the nurse could ask Tony and his mother to obtain the most pertinent information about Tony’s situation? What nursing diagnosis would best describe the priority problem?
3. List four other possible nursing diagnoses the nurse may want to incorporate in the plan of care.
Structure and Features of the Exemplars

The structure of the Exemplars is picked up from the Second Edition. Note that each Exemplar has one main learning outcome with multiple enabling objectives.

Overview ... Sets the stage for the Exemplar and often includes information on the prevalence of the disorder.

Pathophysiology and Etiology ... Describes not only the pathophysiology and etiology of the disorder, but also risk factors and prevention methods.

Pathophysiology

Etiology

Risk Factors

Prevention

<table>
<thead>
<tr>
<th>Clinical Manifestations and Therapies</th>
<th>Chronic Obstructive Pulmonary Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ETOLOGY</strong></td>
<td><strong>CLINICAL MANIFESTATIONS</strong></td>
</tr>
<tr>
<td>Bronchitis:</td>
<td>Chronic cough with mucus production</td>
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<td></td>
<td>Dyspnea</td>
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<tr>
<td></td>
<td>Tachycardia</td>
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<td></td>
<td>Narrowed airway passages</td>
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<tr>
<td></td>
<td>Wheezing</td>
</tr>
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<td></td>
<td>Air trapping</td>
</tr>
<tr>
<td>Emphysema:</td>
<td>Air trapping</td>
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<tr>
<td></td>
<td>Dyspnea</td>
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<tr>
<td></td>
<td>Eosinophilia</td>
</tr>
<tr>
<td></td>
<td>Purse-lipped breathing</td>
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<tr>
<td>Cardiac dysfunction:</td>
<td>Chest pain</td>
</tr>
<tr>
<td></td>
<td>Poor perfusion</td>
</tr>
<tr>
<td></td>
<td>Arrhythmias, particularly premature</td>
</tr>
<tr>
<td></td>
<td>Ventricular contractions</td>
</tr>
<tr>
<td></td>
<td>Hypertension</td>
</tr>
<tr>
<td></td>
<td>Cardiac hypertrophy</td>
</tr>
<tr>
<td></td>
<td>Congestive heart failure</td>
</tr>
<tr>
<td><strong>CLINICAL THERAPIES</strong></td>
<td>Smoking cessation</td>
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<tr>
<td></td>
<td>Bronchodilators</td>
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<td></td>
<td>Corticosteroids</td>
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<td>Fluids to thin secretions</td>
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<td></td>
<td>Elevating the head of the bed</td>
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<td></td>
<td>Low-flow oxygen</td>
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<td></td>
<td>Monitoring of ABGs and oxygen</td>
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<tr>
<td></td>
<td>Mechanical ventilation if patient</td>
</tr>
<tr>
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<td>cannot meet oxygen demands</td>
</tr>
</tbody>
</table>

Clinical Manifestations ... Includes information on clinical manifestations the nurse might see in a patient with the disorder. The Clinical Manifestations and Therapies feature is an excellent tool for review.

Collaboration ... Outlines interprofessional interventions and therapies appropriate for patients with the disorder.

Diagnostic Tests

Surgery

Pharmacologic Therapy

Nonpharmacologic Therapy

Complementary Health Approaches
Lifespan Considerations ... New to the Third Edition, all specifics relevant to the lifespan are gathered in one section. Lifespan Considerations are provided as appropriate for both Concepts and Exemplars. Examples of subsections include:

- Considerations for Infants
- Considerations for Children and Adolescents
- Considerations for Pregnant Women
- Considerations for Older Adults

Nursing Process ... A detailed look at the nursing process helps students put together all of the content in the exemplar and learn the essentials of providing care to patients with the disorder.

- Assessment
- Diagnosis
- Planning
- Implementation
- Evaluation

**REVIEW** Exemplar ... As in the Second Edition, each exemplar ends with a Review that includes linking questions and a short case study with questions to help students apply their knowledge.

**REVIEW** Benign Prostatic Hyperplasia

**RELATE** Link the Concepts and Exemplars

Linking the exemplar of BPH with the context of sexuality:

1. What communication strategies would the nurse use to discuss the impact of BPH on sexuality without making an older man feel uncomfortable?
2. How can you assess his concerns, fears, and knowledge regarding the impact of BPH on his sexuality?
3. Linking the exemplar of BPH with the context of infection:
   1. What pathophysiology of BPH could increase the risk of UTIs?
   2. What nursing interventions will reduce the risk of UTIs?
4. What nursing interventions will reduce the risk of UTIs?

**READY** Go to Volume 3: Clinical Nursing Skills

**REFER** Go to Pearson MyLab Nursing and eText
- Additional review materials

**REFLECT** Apply Your Knowledge

Clifford Allen is a middle manager for a small manufacturing company where he has worked for the last 20 years. Overall, Mr. Allen is in good health, although he has been undergoing treatment recently for BPH. He has a history of depression, for which he does not seek treatment.

One evening while bowling, he notices that his bladder feels somewhat full. Mr. Allen calls to make an appointment to see his urologist for a follow-up examination. He has been taking flomax (Flomax) for the last 6 months but does not believe it has been particularly effective. He still has trouble urinating and believes that his symptoms are worse than before he started taking the drug. When he sees the urologist 2 weeks later, he reports that he often feels his bladder is full after voiding, he has difficulty starting his stream of urine, and his stream is weak once started. He gets up frequently at night to void. His score on the AUAQI is 28, which has increased from his score of 18 six months ago. The urologist confirms that the medication has not been effective and schedules further tests, including uroflowmetry, check postvoid residual, a PSA blood test, and a urinalysis. Results from the uroflowmetry and postvoid residual test show a significant obstruction of urinary flow. The serum PSA is normal, and the urinalysis is consistent with bladder inflammation. A TURP is recommended in the upcoming weeks.

1. To determine Mr. Allen’s understanding of the procedure, what will the nurse want to ask him upon admission to the surgical center?
2. What teaching will the nurse prepare regarding postoperative self-care?
3. Design a nursing plan of care for this patient postoperatively.
Additional Features

Additional features found throughout the program include numbered tables, figures, and boxes that contain content presented in visual formats, and the following highlighted features: Safety Alert, Stay Current, Evidence-Based Practice, Nursing Care Plan, Focus on Diversity and Culture, and Focus on Integrative Health.

Nursing Care Plan

A Patient with Asthma

Sarah Mitchell is a 35-year-old working mother with moderate persistent asthma. Her known triggers are allergies to dust, cockroach, grass, and tree pollen, and cockroach. She takes an inhaled corticosteroid once a week and takes maintenance medications daily. She works as a full-time preschool teacher.

Ms. Mitchell calls her allergist’s office asking to be seen because she is having a bad asthma flare. She reports having to use her rescue inhaler every 3–4 hours, that her chest is very tight, and that she is having trouble breathing. She has used her home peak flow meter three times since last year and has been in the yellow zone each time. She did not sleep last night because of her asthma symptoms.

On physical examination, Nurse O’Hara notes that Ms. Mitchell’s vital signs are as follows: T 37°C (98.6°F); R 36/min; BP 128/86 mmHg. Other assess-

MultiSystem Effects of Cystic Fibrosis

Respiratory

• Wheezing
• Chronic cough
• Increased respiratory rate
• Chronic nasal congestion
• Sinusitis
• Cyanosis
• Clubbing of fingers and toes
• Dyspnea
• Reduced capacity for exercise
• Repeated chest infections

Cardiovascular

• Cyanosis
• Dyspnea
• Paroxysmal nocturnal dyspnea
• Cyanosis
• Edema of extremities

Gastrointestinal

• Anorexia
• Nausea
• Vomiting
• Diarrhea
• Constipation
• Abdominal pain
• Gallstones
• Gastritis
• Intussusception

Musculoskeletal

• Back pain
• Joint pain
• Arthritis
• Osteoporosis
• Fractures

Metabolic Processes

• Diabetes
• Hypoglycemia
• Hyperglycemia

Reproductive

• Amenorrhea
• Delayed menarche
• Menorrhagia
• Menopause
• Dyspareunia
• Pelvic pain

Integumentary

• Skin dryness
• Excessive sweating
• Acne
• Hyperpigmentation

Neurologic

• Anxiety
• Depression
• Memory impairment
• Cognitive decline

Other...

• Fractures
• Osteoporosis
• Osteopenia
• Delayed growth and development
• Tubular bones
• Fibrosis
• Cysts
• Bronchiectasis

The MultiSystem Effects features have been redesigned for the Third Edition. Each one highlights the effects that a disorder has on various systems of the body.

Many exemplars contain Nursing Care Plans, and additional ones can be found in the Pearson eText in MyLab Nursing. The Nursing Care Plans follow the nursing process with sections on assessment, diagnosis, planning, implementation, and evaluation. They end with a series of Critical Thinking questions.
Focus on Diversity and Culture
Assessing for Cyanosis

When assessing for cyanosis, normal assessment findings vary depending on the individual’s skin tones. For example, in a white or light-skinned individual, cyanosis due to hypoxemia most often manifests as a bluish discoloration of the lips, oral mucosa, and nail beds. Among dark-skinned individuals, cyanosis may be difficult to detect and may actually cause the skin to appear darker. Typical manifestations of cyanosis in dark-skinned individuals include pallor or an ash-gray discoloration of the skin surrounding the mouth. Conjunctiva appear gray or blue-tinged among dark-skinned individuals. Among patients whose normal skin tone is yellowish, cyanosis may manifest as a gray-green skin discoloration (Sommers, 2011).

For the most part, care of patients from different cultures is covered in the basal text. Focus on Diversity and Culture features are used only for unique situations of which the nurse should be aware.

Focus on Integrative Health boxes use the full page to highlight the use of complementary health approaches in addition to traditional nursing practice.

SAFETY ALERT
Chronic cough and sputum are not normal occurrences. An individual experiencing chronic cough and sputum beyond 3–4 days should consult with a healthcare professional. Individuals with a smoking history as well as chronic cough and sputum production should have PFTs to determine lung function.

Stay Current: Visit the Safe to Sleep website at https://www.nichd.nih.gov/sts/Pages/default.aspx to learn more about SIDS prevention.

The goal of the Evidence-Based Practice features is to show students the necessity of evidence driving practice. Each starts with a problem, delves into the research, presents implications for the nurse, and ends with critical thinking questions for the student.

Evidence-Based Practice
Compliance with Safe to Sleep Recommendations

Problem
Compared to previous recommendations for preventing SIDS, current recommendations are more complex. For example, the Safe to Sleep guidelines address not only infant positioning but also maintaining a safe sleep environment and abstaining from co-sleeping and bed sharing. The increased complexity of the recommendations may lead to decreased parental compliance with current guidelines for the prevention of SIDS (Goodstein, Bell, & Huguenin, 2015).

Evidence
The Safe to Sleep recommendations include supine positioning during sleep, using a firm sleep surface, breastfeeding, room sharing without co-sleeping, routine immunizations, and the use of a pacifier (items that should be avoided include soft bedding, toys, layered clothing, and crib bumpers, 2015). Research suggests that parental adherence to current recommendations for the prevention of SIDS is significantly increased when nurses model the behaviors that are reflective of all current guidelines for preventing SIDS and obtain parental signatures on a document acknowledging receipt of education related to current guidelines (Goodstein et al., 2015).

Implications
Nurses should demonstrate endorsement of all current recommendations for reducing SIDS-related deaths, including modeling and implementing all recommendations as soon as the infant is clinically stable and up to discharge. Nurses working with parents of newborns must provide additional patient teaching and follow-up, as well as ensuring that parents understand the teaching. All parents should receive documented education on safe infant sleep practices, including voluntary acknowledgement forms indicating that education has been provided with regard to the specific current guidelines (Goodstein et al., 2015).

Critical Thinking Application
1. Identify barriers to educating parents and caregivers about current recommendations for preventing sleep-associated deaths.
2. Describe methods for evaluating parental understanding of the current guidelines for prevention of SIDS.
MyLab Nursing

MyLab Nursing is an online learning and practice environment that works with the text to help students master key concepts, prepare for the NCLEX-RN exam, and develop clinical reasoning skills. Through a new mobile experience, students can study Nursing: A Concept-Based Approach to Learning anytime, anywhere. New adaptive technology with remediation personalizes learning, moving students beyond memorization to true understanding and application of the content. MyLab Nursing contains the following features:

Dynamic Study Modules … New adaptive learning modules with remediation that personalize the learning experience by allowing students to increase both their confidence and their performance while being assessed in real time.

NCLEX-Style Questions … Practice tests with more than 3000 NCLEX-style questions of various types build student confidence and prepare them for success on the NCLEX-RN exam. Questions are organized by Concept and Exemplar.
Decision Making Cases ... Clinical case studies that provide opportunities for students to practice analyzing information and making important decisions at key moments in patient care scenarios. These case studies are designed to help prepare students for clinical practice.

Pearson eText ... Enhances student learning both in and outside the classroom. Students can take notes, highlight, and bookmark important content, or engage with interactive and rich media to achieve greater conceptual understanding of the Concepts and their Exemplars. Interactive features include audio clips, pop-up definitions, figures, questions and answers, the nursing process, hotspots, and video animations. Some examples of video animations include:

- **Fluid and Electrolyte Animations** provide students with the necessary information about the balance and imbalance of fluids and electrolytes to think, reason, and make clinical judgments.

- **Congenital Heart Defect Animations** illustrate the many congenital heart defects that may occur in newborns and provide students the opportunity to see, hear, and understand how congenital heart defects impair the correct functioning of the heart and how they may be corrected.
Resources

Instructor Resources
Instructor Resource Manual—with lecture outlines, large/small group, individual, and clinical activities
Classroom Response PowerPoints
Lecture Note PowerPoints
Image bank
Test bank

Student Resources
The following resources are available for course adoption or student purchase:
Concept Connections in Nursing app—available through the App store or Google Play
Comprehensive Review for NCLEX-RN app—9780134376325
RealEHRprep with iCare

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Concepts Editorial Board

Barbara Arnoldussen, MBA, BSN, RN, CPHQ
International Technological University
San Jose, CA

Barbara Callahan, MEd, RN, NCC, CHSE
Lenoir Community College
Kinston, NC

Linda K. Daley, PhD, RN, ANEF
The Ohio State University
Columbus, OH

Mark C. Hand, PhD, RN, MSN, CNE
East Carolina University
Greenville, NC

Pamela Phillips, PhD, RN
University of South Carolina Beaufort
Beaufort, SC

T. Kim Rodehorst, PhD, RN
University of Nebraska Medical Center
Scottsbluff, NE

Contributors

Michelle Aebersold, PhD, RN, CHSE, FAAN
University of Michigan
Ann Arbor, MI

Eleisa Bennett, RN, MSN
James Sprunt Community College
Kenansville, NC

Marlena Bushway, PhD, MSNEd, RN, CNE
New Mexico Junior College
Hobbs, NM

Barbara Callahan, MEd, RN, NCC, CHSE
Lenoir Community College
Kinston, NC

Linda Daley, PhD, RN
The Ohio State University
Columbus, OH

Christi Emerson, EdD, MSN, RN
University of Mary Hardin-Baylor
Belton, TX

Michele G. Hackney, EdD, MSN, RN, CNE
University of Mary Hardin-Baylor
Belton, TX

Elizabeth Johnston Taylor, PhD, RN
Loma Linda University
Loma Linda, CA

Amy Mitchell Kennedy, MSN, RN
Nursing Content Manager
Newport News, VA

Christine Kleckner, MA, MAN, RN
Minneapolis Community and Technical College
Minneapolis, MN

Juleann H. Miller, RN, PhD
St. Ambrose University
Davenport, IA

Jeanne Papa, MSN, MBE, ACNP
Neumann University
Aston, PA

Cynthia Parkman, PhD, RN
National University
San Diego, CA

Pamela Phillips, PhD, RN
University of South Carolina Beaufort
Beaufort, SC

T. Kim Rodehorst, PhD, RN
University of Nebraska Medical Center
Scottsbluff, NE

Judith Rolph, MSN, RN
MassBay Community College
Framingham, MA

Sharon Souter, RN, PhD, CNE
University of Mary Hardin-Baylor
Belton, TX

Patricia Vasquez, MSN, RN
Trinity Valley Community College
Kaufman, TX

Jacqueline M. Loversidge, PhD, RNC-AWHC, CNS
The Ohio State University
Columbus, OH
Reviewers

Folake Elizabeth Adelakun, RN, MSN, MBA-HC, DNP
Minneapolis Community and Technical College
Minneapolis, MN

Carol S. Amis, MSN, RN, CCRN
Minneapolis Community and Technical College
Minneapolis, MN

Barbara Arnoldussen, MBA, BSN, RN, CPHQ
International Technological University
San Jose, CA

Eleisa Bennett, RN, MSN
James Sprunt Community College
Kenansville, NC

Regina Burgin, MSN, RN-BC
Sampson Community College
Clinton, NC

Shelley Layne Blackwood, EdS, MSN, RN-BC, PCCN
University of Mary Hardin-Baylor Belton, TX

Karen Bledsoe, MSN, RN-C
University of Mary Hardin-Baylor Belton, TX

Tracy Booth, MSEd, BSN, RN
University of Mary Hardin-Baylor Belton, TX

Wendy Buchanan, RN, MSN-E
Southwestern Community College
Sylva, NC

Becky Bunn, MSN, RN
University of Mary Hardin-Baylor Belton, TX

Regina Burgin, MSN, RN-BC
Sampson Community College
Clinton, NC

Marlena Bushway, PhD, MSNEd, RN, CNE
New Mexico Junior College
Hobbs, NM

Marcy Caplin, PhD, RN, CNE
Kent State University
Kent, OH

Kristine Carey, MSN, RN
Normandale Community College
Bloomington, MN

Barbara E. Connell, RN, MSN
Southwestern Community College
Sylva, NC

Ann Crawford, RN, PhD, CNS, CEN, CPEN
University of Mary Hardin-Baylor Belton, TX

Diane Daddario, MSN, ANP-C, ACNS-BC, RN, BC, CMSRN
Pennsylvania State University
University Park, PA

Linda Daley, PhD, RN
The Ohio State University
Columbus, OH

Carrie Dickson, MS, APRN, CNM, CNE
Normandale Community College
Bloomington, MN

Barbara Dixon, MSN, RN
University of Mary Hardin-Baylor Belton, TX

Patricia Ann Durham-Taylor, RN, PhD
Truckee Meadows Community College
Reno, NV

Mary Ervi, MSN, RN, CNE
University of Mary Hardin-Baylor Belton, TX

Vicki Evans, MSN, RN, CEN, CNE
University of Mary Hardin-Baylor Belton, TX

Abimbola Farinde, PhD
Columbia Southern University
Orange Beach, AL

Pamela Fauskee, MN, RN, CNE
Anoka-Ramsey Community College
Cambridge, MN

James R. Fell, MSN, MBA, RN
The Breen School of Nursing, Ursuline University
Pepper Pike, OH

Judy Flowers, MSN, MS, RN
Catawba Valley Community College
Hickory, NC

Tobi Fuller, MSN, MS, RN
El Centro College
Dallas, TX

Frederick Gunzel
Independent Contractor
Farmingville, NY

Michele G. Hackney, EdD, MSN, RN, CNE
University of Mary Hardin-Baylor Belton, TX

Mark C. Hand, PhD, RN, MSN, CNE
Durham Technical Community College
Durham, NC
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