1. Catalog Description of the Course. [Follow accepted catalog format.]

Prefix NRS  
Course# 241  
Title PSYCHIATRIC AND MENTAL HEALTH NURSING LABORATORY  
Units (2)  
6 hours lab per week  
Prerequisites Admission to clinical nursing program  
Corequisites NRS 200, NRS 201, NRS 203 and NRS 240  
Description Provides opportunities to incorporate therapeutic modalities with individuals experiencing anxiety, crisis, depression, and dysfunctional interpersonal relationships. Focuses on promotion of mental health from the system-based perspective in diverse clinical settings.

\[ \square \text{ Gen Ed} \quad \square \text{ CR/NC} \quad \square \text{ Repeatable for up to units} \]

Categories

\[ \square \text{ Lab Fee Required} \quad \text{A - Z} \quad \text{Total Completions Allowed 1} \]

2. Mode of Instruction.

<table>
<thead>
<tr>
<th>Component</th>
<th>CS # (filled in by Dean)</th>
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<tbody>
<tr>
<td>Lecture</td>
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<td>Seminar</td>
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<td>Laboratory</td>
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<tr>
<td>Activity</td>
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3. Justification and Learning Objectives for the Course. (Indicate whether required or elective, and whether it meets University Writing, and/or Language requirements) [Use as much space as necessary]

Required lower division course in the generic baccalaureate nursing program. Content required by the Board of Registered Nursing for licensure as a Registered Nurse. Students will be able to:

1. Use the Neuman Systems Model and the nursing process in providing therapeutic nursing care to acute and chronic psychiatric patients in a variety of settings.
2. Demonstrate therapeutic use of self and effective therapeutic communication with individuals and or families displaying stress and reactions to stress.
3. Apply principles of health promotion with emphasis on developmental, religious, environmental, socio-cultural, ethnic and community variables.

4. Is this a General Education Course  YES \[ \square \]  NO \[ \text{X} \]

If Yes, indicate GE category and attach GE Criteria Form:

A (English Language, Communication, Critical Thinking)
A-1 Oral Communication
A-2 English Writing
A-3 Critical Thinking

B (Mathematics, Sciences & Technology)
B-1 Physical Sciences
B-2 Life Sciences – Biology
B-3 Mathematics – Mathematics and Applications
B-4 Computers and Information Technology

C (Fine Arts, Literature, Languages & Cultures)
C-1 Art
C-2 Literature Courses
C-3a Language
C-3b Multicultural

D (Social Perspectives)
5. Course Content in Outline Form. [Be as brief as possible, but use as much space as necessary]

I. Neuman Systems Model and application of the nursing process to patients with various psychiatric disorders:
   Affective disorders; psychosis; substance abuse; personality disorders; eating disorders
II. Therapeutic use of self
III. Therapeutic communication
IV. Lifespan issues and interventions
V. Crisis intervention
VI. Suicide prevention and intervention
VII. Anger management
IX. Grief and loss

Does this course overlap a course offered in your academic program?  YES ☐ NO ☑
If YES, what course(s) and provide a justification of the overlap?

Does this course overlap a course offered in another academic area?  YES ☐ NO ☑
If YES, what course(s) and provide a justification of the overlap?
Signature of Academic Chair of the other academic area is required on the consultation sheet below.

6. Cross-listed Courses (Please fill out separate form for each PREFIX)
List Cross-listed Courses

Signature of Academic Chair(s) of the other academic area(s) is required on the consultation sheet below
Department responsible for staffing:

7. References. [Provide 3 - 5 references on which this course is based and/or support it.]

8. List Faculty Qualified to Teach This Course.
Nursing Faculty

a. Projected semesters to be offered:  Fall ☑ Spring ☐ Summer ☐

10. New Resources Required. YES ☐ NO ☑
    If YES, list the resources needed and obtain signatures from the appropriate programs/units on the consultation sheet below.
    a. Computer (data processing), audio visual, broadcasting needs, other equipment)

      b. Library needs
c. Facility/space needs

11. Will this new course alter any degree, credential, certificate, or minor in your program? YES ☐ NO ☑
    If, YES attach a program modification form for all programs affected.

Barbara Thorpe ___________________________ 11.1.05
Proposer of Course ___________________________ Date
Approvals

<table>
<thead>
<tr>
<th>Program Chair</th>
<th>Date</th>
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<tbody>
<tr>
<td>Curriculum Committee Chair</td>
<td>Date</td>
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<td>Dean</td>
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