



## Faculty of Nursing

# GENERAL SPECIFICATIONS

### Subject Data

**Name:**

ENFERMERÍA DE LA PERSONA ADULTA IV

**English name:**

ADULT NURSING IV (DLEX-ENGLISH)

**Code:**

303009213

**Type:**

OBLIGATORY

**Hours:**

60	Total	In class	Out class
<b>Time distribution</b>	150	60	90

**ECTS:**

Standard group	Small groups			
	Classroom	Lab	Practices	Computer classroom
3.42	0	2.58	0	0
Departments:	Knowledge areas:			
Nursing Department	Nursing			
Year:	Semester			
THIRD YEAR (Nursing Degree)	SECOND			

## TEACHING STAFF

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## SPECIFIC INFORMATION OF THE COURSE

### 1. Contents description:

#### 1.1 In English:

- Nursing intervention for adults to prevent or treat health disorders.
- Nursing techniques and procedures for the most prevalent health disorders.
- Nursing intervention in advanced or terminal illness.
- Organisational, care, technological and communication characteristics of critical care units.
- Specific care procedures in these units and technological support.

#### 1.2 In Spanish:

- Intervención de enfermería a las personas adultas para prevenir o tratar las alteraciones de salud.
- Técnicas y procedimientos enfermeros ante los procesos de alteración de salud más prevalentes.
- Intervención enfermera en situación de enfermedad avanzada o terminal.
- Singularidades organizativas, asistenciales, tecnológicas y comunicativas en las Unidades de Cuidados Críticos.
- Procedimientos de cuidados específicos de estas unidades y soporte tecnológico.

## **2. Background:**

### 2.1 Situation within the Degree:

Adult Nursing IV is a compulsory subject that is part of the Nursing Sciences module in the second semester of the third year of the Nursing Degree.

The Adult Nursing IV course aims to train qualified students to anticipate or detect problems and needs in critically ill patients with real or potential life-threatening conditions, and their families on an individualised basis, and to solve these problems effectively using knowledge based on the best available evidence. This subject also aims to prepare future professionals in patient and family education for health prevention and promotion and rehabilitation, as well as in adapting to new ways of life with illness. This introduces students to continuity of care between levels. Students are prepared to be able to accompany and respect people at the end of their lives, to acquire communication skills in difficult situations, and to know how to detect and respect the needs and preferences of patients and their families in a dignified manner in terms of treatment and care, as well as their rights, taking into account existing regulations. This subject also aims to enable students to coordinate, lead, or be part of multidisciplinary work teams. Finally, this subject will integrate the uses of high technology in critical care units or specialised areas, which contribute to the achievement of quality results, but will seek to balance this with dignified and humanised care based on communication.

The objective is person-centred care where the focus is on the patient and their family, and quality, safety and humanisation of care are essential requirements.

In Adult Nursing IV, the knowledge and skills acquired in other subjects in the degree programme will be interrelated with the aim of achieving the level of competence required to provide excellent care to seriously ill, multi-morbid and complex patients and their families or loved ones in critical or terminal situations, or after recovery, in chronic conditions.

Ultimately, the aim is to provide students with self-training tools. It will show them which sources of information are reliable, where to keep their knowledge up to date by selecting quality information in order to effectively assess and respond to the complex needs of patients and their families, the demands of a changing society and the challenges of technological advances, always prioritising dignity and humanisation in treatment and care.

### 2.2 Recommendations

It is advisable that students have acquired the basic and specific skills of the 1st and 2nd years, so that they can incorporate and interrelate them with this subject for maximum benefit.

Of particular importance are the subjects: Structure and Function of the Human Body I and II, Psychosocial Sciences I and II, Basic Care, Physiopathology and Life Support, Differences and Inequalities in Health and Health Promotion Strategies, Adult Nursing I, II, and III, Nursing Methodology and Standardised Language, Pharmacology and Therapeutic Procedures, Mental Health Nursing and Supporting Relationships.

### 3. Objectives (as result of teaching, or skills or abilities and knowledge):

Students who successfully complete the course will be able to:

- Describe, using established assessment resources, the most common health problems in adults, differentiating between the symptoms that appear in the different stages of the processes, as well as the unique characteristics of the reproductive stage.
- Select, justify with available evidence and implement, based on previously planned problem situations, the professional interventions that best respond to the needs of adults at different levels of health and in different contexts (institutional and community), guaranteeing the principle of safety, the right to dignity, confidentiality and decision-making capacity, taking into account age, gender, cultural differences, beliefs and values.
- Determine in concrete and identifiable terms the indicators that demonstrate a therapeutic relationship with sick people and their families.
- Describe, through previously established assessment resources, the health situations that require palliative care interventions and pain control to alleviate the situation of sick people, taking into account the context.
- Analyse and argue, based on previously selected problem situations, the indicators that demonstrate the different situations of loss that people suffer as a result of health and disease processes.
- Critically assess, based on the presentation of updated social data, the organisational, care and technological characteristics of critical care units and their relationship to the care needs of patients.
- Recognise and analyse, in a planned educational context, the indicators that demonstrate cooperative behaviour among members of the healthcare team.

### 4. Skills to be acquired

#### 4.1 Specific Skills:

**E24:** Understand health problems in adults, identifying the symptoms that appear in their different stages.

**E25:** Identify care needs arising from health problems. Analyse the data collected in the assessment, prioritise the adult patient's problems, establish and implement the care plan and evaluate it.

**E26:** Perform nursing care techniques and procedures, establishing a therapeutic relationship with patients and their families. Select interventions aimed at treating or preventing problems arising from health deviations. Have a cooperative attitude with the different members of the team.

**E37:** Provide care while guaranteeing the right to dignity, privacy, intimacy, confidentiality and decision-making capacity of the patient and family. Individualise care, taking into account the health status, age, gender, cultural differences, ethnic group, beliefs and values of individuals, as well as the different plans, strategies and/or processes developed by the public health administration.

**E39:** Understand palliative care and pain management in order to provide care that alleviates the suffering of people with advanced or terminal illnesses and their families, avoiding the unjustified use of therapeutic resources.

**EU 53:** Ability to assess a person's physical activity and functional capacity and select the resources, techniques and procedures that best suit their health needs, ensuring the highest level of independence and personal autonomy.

**EU 54:** Knowledge of the organisational, care and technological characteristics of critical care units and their relationship to patient needs, and the ability to plan, select and apply care in critical situations based on the principles of safety, individuality and dignity.

**EU 57:** Understand the regulatory frameworks that should inform professional practice (Comprehensive Plans, Programmes, Processes, etc.).

#### 4.2 General, Basic or Transversal Skills:

**G1:** Ability to analyse and synthesise.

**G13:** Ability to communicate with people who are not experts in the field.

**G17:** Ability to learn independently.

**G2:** Ability to apply knowledge in practice.

**G20:** Ethical commitment.

**G21:** Sensitivity to social, economic and environmental issues.

**G22:** Ability to apply a gender perspective in the analysis of reality.

**G3:** Ability to organise and plan.

**G7:** Ability to manage information.

**G8:** Critical and self-critical ability.

**G11:** Decision-making and problem-solving ability.

### 5. Training Activities and Teaching Methods

#### 5.1 Training Activities:

- Large group classroom activities.
- Small group seminars/laboratories.
- Small group simulation rooms.
- Scheduled individual and group tutorials: guidance, advice, feedback.
- Assessment tests.
- Study and personal work.
- Activities related to the use of the virtual platform, preparation of assignments, conducting research and document analysis, problem solving, case studies, self-managed work.
- Organisation of personal work for the assessment test.

## 5.2 Teaching Methods::

- Lectures and discussions, with or without the use of multimedia resources.
- Tutored self-learning using interactive software.
- Practical exercises in relation and application.
- Practical demonstrations.
- Guided training.
- Individual and group tutorials, both on demand and scheduled.
- Virtual tutorials.
- Chats, student/teacher, student/student.
- Self-managed study.
- Preparation of assignments involving: Data analysis and interpretation; Construction of algorithms and conceptual frameworks; Preparation of summaries; Documentary research and analysis; Problem solving and case studies.
- Facilitation techniques (Brainstorming, Phillips 66, etc.).
- Role-playing.
- Presentation of assignments.
- Discussion forums in real or virtual contexts.
- Visualisation of real or virtual scenarios, techniques and tools (videos, films, images). - Systematic observation.
- Self-criticism and hetero-criticism.
- Communication of experiences.

## 5.3 Development and Justification:

Through the use of varied teaching and learning methods and methodologies, adapted to face-to-face and/or virtual learning, the aim is for students to achieve the comprehensive skills required for the subject and expected of a student at the level of the second semester of the third year. The training activities offered seek to facilitate the development of these skills. Students are also expected to take ownership of their own learning and share their progress with teachers and classmates. They will use critical judgement and a reflective and analytical attitude throughout the process to ultimately be able to integrate the required skills, knowledge and attitudes.

In addition to the methodologies described above, active methodologies typical of advanced simulation (briefing-debriefing) and innovative and motivational teaching methods will be used in the classroom and on Moodle, based on gamification, which promote cooperative and interactive work, such as multimedia learning tools, self-assessment and interaction between peers and with teachers. Gamification dynamics that encourage critical analysis and interrelate concepts will also be used. Depending on the group, a portfolio or student diary will be requested. Students' self-study tasks may be guided, where necessary.

## **6. Detailed Contents**

- I. HUMANISATION OF CARE FOR CRITICALLY ILL PATIENTS AND THEIR FAMILIES. SAFETY AND QUALITY OF CARE**
  - 1. Characteristics of Critical Care Units. Quality of care.
  - 2. Humanised care. Person-centred care. Professional profile.
  - 3. General and specific care for critically ill patients and their families.
  - 4. Clinical safety. Communication. Care for pain, agitation and delirium in critical patients. Continuity of care. Chronicity and dependence.
  - 5. Ethical conflicts in critical care units. Dignified death. Decision-making.
  - 6. Laws: Autonomy, rights and guarantees of dignified death. Advance directives. Organ and tissue donation and transplantation. Regulation of euthanasia.
- II. NURSING CARE FOR CRITICAL PATIENTS WITH CARDIOVASCULAR DISORDERS. INTERVENTIONS. MONITORING AND RECORDING**
  - 1. Monitoring and recording in critical patients.
  - 2. Assessment and identification of the main arrhythmias of cardiac arrest and peri-arrest. Care and resolution.
  - 3. Basic Life Support, Advanced Life Support (BLS, ALS). Cardiorespiratory arrest (CRA). Ethics of CPR and post-resuscitation care. Interdisciplinary team.
  - 4. Interventions in chronic patients.
- III. CARE AND INTERVENTIONS FOR SEVERE TRAUMA**
  - 1. Care and attention for polytrauma patients (PLT).
  - 2. Review of shock. Types and care.
  - 3. Management of haemorrhagic shock and general guidelines for other types of shock. Action algorithms.
- IV. SPECIFIC CARE FOR CRITICAL PATIENTS WITH RESPIRATORY DISORDERS. MONITORING AND RECORDS**
  - 1. Nursing care and interventions in airway management.
  - 2. Invasive and non-invasive mechanical ventilation (MV). General information.
  - 3. Nursing interventions and care for patients on MV. Complications.
  - 4. Care and prevention of nosocomial pneumonia associated with MV.
- V. SEDOANALGESIA IN CRITICAL PATIENTS**
  - 1. Pain, assessment. Management, interventions and care.
  - 2. Agitation, assessment. Management, interventions and care.
  - 3. Delirium, assessment. Management, interventions and care.
- VI. CARE FOR PATIENTS IN SPECIAL CIRCUMSTANCES**
  - 1. Serious infections. Prevention and care of nosocomial infections. Care according to the location of the infection. Care for infections and multidrug-resistant bacteria in critically ill patients.
  - 2. Sepsis. Septic shock. Systemic inflammatory response syndrome (SIRS). Care.
  - 3. Care of the critically ill post-surgical patient.
  - 4. Nutritional care for the critically ill patient.

## 7. Bibliography

### 7.1 Basic Bibliography:

#### **BASIC BIBLIOGRAPHY FOR ENGLISH LANGUAGE LEARNING:**

- Murphy R. English Grammar in use. A self-study reference and practice book for intermediate students of English. 4th edition. Cambridge: Cambridge University Press; 2019.

#### **BASIC BIBLIOGRAPHY FOR ENGLISH IN NURSING AND HEALTH SCIENCES:**

- Lohumi, S. & Lohumi, R. *Communicative English for Nurses* (4th ed.). Elsevier; 2025.
- Zeff, B. B. *English Communication for Nursing*. Seed Learning / Tryalogue Education; 2024.

#### **CRITICAL CARE NURSING BIBLIOGRAPHY:**

##### HANDBOOKS

- NEDU. EKG | ECG Interpretation Made Easy: An Illustrated Study Guide For Students To Easily Learn How To Read & Interpret ECG Strips. Nurseedu.com; 2021.
- Baid H Creed F , Hargreaves J. Oxford Handbook of Critical Care Nursing - Oxford Handbooks in Nursing 2º edition. Oxford University Press; 2016.  
<https://doi.org/10.1093/med/9780198701071.001.0001>
- Goldsworthy S, Graham L. Compact Clinical Guide to Mechanical Ventilation. Foundations of Practice for Critical Care Nurses 1ª Edition. Springer Publishing; 2014.  
[https://www.cur.ac.rw/mis/main/library/documents/book\\_file/digital-67bada35b2bbd0.53317892.pdf](https://www.cur.ac.rw/mis/main/library/documents/book_file/digital-67bada35b2bbd0.53317892.pdf)
- Sole ML, Goldenberg Klein D, Moseley MJ. Introduction to Critical Care Nursing. Missouri: Elsevier-Saunders Editorial; 2021.
- Woodruff DW. Critical Care Nursing Made Incredibly Easy! 4RD EDITION. Lippincott Williams & Wilkins; 2016.

##### GUIDELINES

- Smyth MA, van Goor S, Hansen CM, et al. European Resuscitation Council Guidelines 2025 Adult Basic Life Support. Resuscitation. 2025;215 Suppl 1:110771. doi:10.1016/j.resuscitation.2025.110771. Available at:  
<https://www.resuscitationjournal.com/article/S0300-9572%2825%2900283-7/fulltext>
- Soar J, Böttiger BW, Carli P, et al. European Resuscitation Council Guidelines 2025 Adult Advanced Life Support. Resuscitation. 2025;215 Suppl 1:110769. doi:10.1016/j.resuscitation.2025.110769. Available at: [https://www.resuscitationjournal.com/article/S0300-9572\(25\)00281-3/fulltext](https://www.resuscitationjournal.com/article/S0300-9572(25)00281-3/fulltext)

- Lott C, Karageorgos V, Abelairas-Gomez C, et al. European Resuscitation Council Guidelines 2025 Special Circumstances in Resuscitation. *Resuscitation*. 2025;215 Suppl 1:110753. doi:10.1016/j.resuscitation.2025.110753. Available at: [https://www.resuscitationjournal.com/article/S0300-9572\(25\)00265-5/fulltext](https://www.resuscitationjournal.com/article/S0300-9572(25)00265-5/fulltext)
- Nolan JP, Sandroni C, Cariou A, et al. European Resuscitation Council and European Society of Intensive Care Medicine Guidelines 2025 Post-Resuscitation Care. *Resuscitation*. 2025;215 Suppl 1:110809. doi:10.1016/j.resuscitation.2025.110809. Available at: [https://www.resuscitationjournal.com/article/S0300-9572\(25\)00321-1/fulltext](https://www.resuscitationjournal.com/article/S0300-9572(25)00321-1/fulltext)
- Raffay V, Wittig J, Bossaert L, et al. European Resuscitation Council Guidelines 2025 Ethics in Resuscitation. *Resuscitation*. 2025;215 Suppl 1:110734. doi:10.1016/j.resuscitation.2025.110734. Available at: [https://www.resuscitationjournal.com/article/S0300-9572\(25\)00246-1/fulltext](https://www.resuscitationjournal.com/article/S0300-9572(25)00246-1/fulltext)
- Orcutt T and Glaser J. Trauma Resuscitation Guideline. Emergency Care Systems. Washington State. Department of Health; 2025. Available at: <https://doh.wa.gov/sites/default/files/2025-12/530322-TraumaResuscitationGuideline.pdf>
- Meitner C, Feuerstein RA, Steele AM. Nursing strategies for the mechanically ventilated patient. *Front Vet Sci*. 2023;10:1145758. doi:10.3389/fvets.2023.1145758. Available at: <https://www.frontiersin.org/journals/veterinary-science/articles/10.3389/fvets.2023.1145758/full>
- Hwang DY, Oczkowski SJW, Lewis K, et al. Society of Critical Care Medicine Guidelines on Family-Centered Care for Adult ICUs: 2024. *Crit Care Med*. 2025;53(2):e465-e482. doi:10.1097/CCM.0000000000006549. Available at: [https://journals.lww.com/ccmjournal/fulltext/2025/02000/society\\_of\\_critical\\_care\\_medicine\\_guidelines\\_on.20.aspx](https://journals.lww.com/ccmjournal/fulltext/2025/02000/society_of_critical_care_medicine_guidelines_on.20.aspx)
- Ning J, Cope V. Open visiting in adult intensive care units - A structured literature review. *Intensive Crit Care Nurs*. 2020;56:102763. doi:10.1016/j.iccn.2019.102763

## 7.2 Additional Bibliography:

- **American Heart Association (AHA)** <http://www.heart.org/HEARTORG/>
- **European Resuscitation Council** <https://www.erc.edu/>
- **American College of Surgeons** (Advanced Trauma Life Support) <https://www.facs.org/quality-programs/trauma/atls>
- **European Association of Critical Care Nursing Associations (EFCCNa)** <http://www.efccna.org/>

## 8. Systems and Assessment Criteria

### 8.1 System for Assessment:

- Written test: multiple-choice tests, short-answer questions or topics to be developed and case studies.
- Completion of activities programmed on the virtual platform.
- Practical tests.
- Oral tests.
- Analysis and evaluation of case studies.
- Completion and presentation of assignments.
- Contributions to forums and debates.
- Participation in scheduled group and individual tutorials.

### 8.2 Assessment Criteria and Marks:

#### 8.2.1 Examinations Convocatory I

The assessment of the subject will preferably be continuous, focusing on both the results and the teaching-learning process. It will have a dual function, i.e. guiding student learning and evaluating the results achieved. The assessment procedures are adapted to the comprehensive skills required for the care of critical patients and their families.

Assessment of learning outcomes: this corresponds to a grade that is based on the weighted assessment of all parts of the course. The results will be assessed through tests or written and/or oral documents in large or small groups. Specifically, they will be distributed as follows:

- Questionnaires or exams (maximum 6 points).
- Activities, cases and simulations in small groups (maximum 4 points). In the laboratory groups, comprehensive skills related to the content developed will be assessed from a practical approach. This will include a final group case study through which an OSCE (Objective Structured Clinical Examination) will be carried out in a clinical simulation scenario.

#### **Continuous assessment:**

- Written or oral questionnaires or exams: a written assessment test will be carried out using multiple-choice questions with 4 answer options. The formula 'correct answers - (errors / number of options - 1) x value of the question' will be applied.
- Assignments, cases and clinical simulation activities in small groups: 5 activities will be carried out in the laboratory groups:
  - Analysis and presentation of documentation (0.5 points).
  - Synthesis and presentation of action algorithms in one of the SVA scenarios under special circumstances (0.5 points).
  - Design and development through clinical simulation of a practical case in the context of the critical patient (0.5 points).
  - Discussion forum (0.5 points).
  - Final OSCE (2 points).

Attendance at laboratory group classes is compulsory in order to pass the course. Active student participation, teamwork skills, critical thinking and analytical, synthesis and deliberation skills, attitude and interest will be assessed through direct observation and analysis of individual/group activities or tasks that indicate achievements in the training process.

## **Final mark:**

This will be based on continuous assessment, with 60% of the grade coming from exams and 40% from individual/group work or activities in large and/or small groups. The mark obtained in the continuous assessment activities may be saved for the second and third exam sessions of that academic year, provided that any outstanding activities and work are submitted and any failed tests are retaken.

In order to pass the course, students must have passed the written test with a minimum grade of 5 points, as well as the small group activities.

Exceptionally, if a student has any justified absences from small group activities, they may be required to take an additional test or exercise depending on the content not passed in that session or sessions.

The assessment criteria are the same for exam sessions I, II and III.

The awarding of Honours (MH) will follow the UHU Assessment Regulations, which specify that students with a final grade of 9 or above will be eligible. In the event of a tie, the student's level of participation in class will be taken into account. This will be applied in all the different convocatories.

### **8.2.2 Examinations Convocatory II**

The same criteria as in the first exam period (convocatory I) will be followed.

In order to calculate the average, students must have submitted their assignments and group/individual tasks and completed the questionnaires or exams. The grade obtained in the continuous assessment activities may be saved for the second exam period of that academic year, provided that the outstanding assignments and tasks are submitted and the failed tests are retaken.

### **8.2.3 Examinations Convocatory III**

In exam session III, the same criteria will be used as in convocatory I and II. In order to calculate the average, students must have submitted all group/individual assignments and completed all questionnaires or exams. The grade obtained in the continuous assessment activities may be saved for exam session II of that academic year, provided that any outstanding assignments are submitted and any failed tests are retaken.

### **8.2.4 Extraordinary Convocatory**

The criteria are the same for all exam sessions. The same number of assignments, activities and tasks, written or oral, will be required. Students will take an oral and written test with multiple-choice and open-ended questions, which will account for 60% of the grade, as well as practical resolution of clinical cases and simulations, which will account for 40%. These methodologies will allow for the assessment of the required competencies.

### 8.3 Single Final Evaluation:

#### 8.3.1 Examinations Convocatory I

Students must request this assessment system from the course coordinator via university email within the first two weeks of the course.

This will exclude any other assessment system. (UHU Assessment Regulations, art. 8). The same number of assignments, activities and tasks, written or oral, will be required for the resolution of cases or critical situations.

- Oral test of practical resolution of three complex situations in person in the case simulation rooms, specifically on advanced life support and care for polytrauma patients, care for a typical and seriously ill patient such as a septic patient, and care for a person on mechanical ventilation, as well as general and specific care for the patient and family (4 points).
- Submission of 4 activities on the syllabus (2 points).
- Written test with 60 multiple-choice questions with 4 answer options (errors/number of options-1) worth 3 points and 2 open-ended questions on practical scenarios (1 point in total).
- All of this will be carried out and submitted on the date specified in the exam calendar. It is necessary to have passed 50% of the oral and written tests and assignments in order to achieve an average mark and pass the course.

#### 8.3.2 Examinations Convocatory II

The same criteria established for the final evaluation Convocatory I.

#### 8.3.3 Examinations Convocatory III

The same criteria established for the final evaluation Convocatory I and II.

#### 8.3.4 Extraordinary Convocatory

Candidates may choose between a written exam with multiple-choice questions and open-ended questions involving case studies or critical situations. Three assignments covering the main topics of the syllabus and a portfolio must be submitted.

- Oral exam consisting of the practical resolution of three complex situations in person in the case simulation rooms, specifically on advanced life support and care for polytrauma patients, care for a typical and seriously ill patient such as a septic patient, and care for a patient on mechanical ventilation, in addition to specific and general care for critical patients and their families (4 points).
- Submission of 4 activities on the syllabus (2 points).
- Written test with 60 multiple-choice questions with 4 answer options (errors / number of options-1) worth 3 points and 2 open-ended questions on practical scenarios (1 point in total).