

The Advanced Series for Practicing Medical Professionals

Critical Care/Rapid Response Topics

Contact Hours: 13.5 CE

Introduction

Two days of instruction are devoted to the many situations health care professionals deal with which involves astute assessment skills and rapid collaborative interventions. The pathophysiologic conditions covered are applicable to all personnel from the emergency room, to critical care, to medical-surgical nurses and extended care personnel.



The first day starts with assessment components across the lifespan from pediatrics to geriatrics and also trauma patients. Various cardiovascular and respiratory conditions are covered using a physiologic approach to enhance assessment skills. Etiology, pharmacologic and nonpharmacologic aspects, diagnostic studies and lab abnormalities are covered. Case studies are used to enhance learning. The conditions covered include:

- Angina
- Acute myocardial infarction
- Pericardial tamponade
- Congestive heart failure
- Lethal dysrhythmias
- Pulmonary embolus
- Pulmonary edema
- Respiratory failure

Alterations in the neurological condition, an overview of burns, types of shock, the inflammatory response system and sepsis are covered on the second day. A beginning understanding of multisystem organ dysfunction is also included with a review of the potential complications such as ARDS, DIC, hepatic and renal failure, pancreatitis, myocardial depression, and cerebral dysfunction.

Objectives

1. State the components of, and observations made, during the primary and secondary assessments used in the evaluation of acutely ill pediatric patients, adult patients, and trauma victims.
2. Verbalize the pathogenesis of coronary artery disease and the relationship to angina and myocardial infarction.
3. State the pathophysiology, clinical manifestations, diagnostics, and management of patients with myocardial ischemia and infarction.
4. State the appropriate manifestations and treatment for disorders of the pericardium.

5. Relate the pathophysiology, clinical manifestations, and diagnostic findings in the various classifications of heart failure.
6. State the appropriate treatment modalities used in the management of congestive heart failure.
7. State the appropriate pharmacologic and electrical treatment of specific lethal dysrhythmias.
8. State the clinical components affecting ventilation and oxygenation and the findings noted on assessment and evaluation of the patient.
9. Verbalize the clinical manifestation and appropriate treatment for patients with a suspected pulmonary embolism.
10. Verbalize the clinical manifestations and appropriate treatment for a patient with pulmonary edema.
11. Verbalize the clinical manifestations seen with respiratory failure.
12. Relate the clinical manifestations to the physiologic causes of altered cerebral perfusion.
13. Discuss the clinical manifestations, treatment, complications, and interventions in brain attack victims.
14. State the pathophysiology, clinical manifestations, and interventions utilized in spinal cord injured victims.
15. State the clinical manifestations seen in burn victims and appropriate interventions.
16. Differentiate the major types of shock and state the causes, clinical manifestations and treatment of each.
17. Discuss the system involvement, clinical symptoms, and initial management in multisystem organ dysfunction.

***Recent seminar participants had this to say about
“Critical Care/Rapid Response Topics”.***



“What a great review! I think all ER and ICU nurses should take this class every couple of years. Great outline to help during the session and for future reference.”

“I have worked emergency room for a number of years. This seminar reinforced so many important points and knowledge I had forgotten. I will definitely be a more effective nurse for my patients.”

“As a medical nurse, I could listen to this once a year to improve the care I give my patients.”

“I would take your class anytime! You talk using words that are easy to understand. Case studies were excellent in bringing everything together.”



Cynthia Liette,
MS, ARPN, ACNS-BC, CCRN

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P.O. Box 55
Coldwater, OH 45828
Phone: 419-305-3043
Email: cindy@edconcepts.net
Web site: www.edconcepts.net