

University of Colorado, College of Nursing
 Graduate Course Syllabus

Course Number	Course Name			
NURS 6286	Foundations of Health Care Informatics			
			Didactic:	Clinical
Semester:	Fall 2022	Course Credits:	3	N/A
Course Website:	https://ucdenver.instructure.com/courses/496355			

Instructor(s):	Dr. Sharon Giarrizzo-Wilson (Dr. GW)	Class Meeting: Day/Times	Asynchronous
Phone:	303-724-8304	Class Location: Building/Room	Online
Email:	sharon.giarrizzo-wilson@cuanschutz.edu (Preferred: Canvas Inbox)	Lab Location: Building/Room (if applicable)	
Office Hours:	Virtual Office Hours by Appointment		

COURSE OVERVIEW

Welcome:

Welcome to Foundations of Health Care Informatics. I am pleased to be joining you in this journey on the importance of informatics as an essential skill for your practice.

University Course Catalog Description:

This introductory course focuses on core concepts, skills, tools that define the informatics field and the examination of health information technologies to promote safety, improve quality, foster consumer-centered care, and efficiency.

Course Overview:

This course will prepare the student to use informatics tools to facilitate evidence-based decision-making, provide safe quality care, actively engage patients/consumers in their health care, manage their practice, and effectively and efficiently participate in a learning health system.

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The first half of the course emphasizes the core concepts, skills and tools defining the informatics field and examines how informatics tools can help in becoming meaningful users of the technologies for better health and improved care quality at a lower cost. The second half of the course focuses on consumer engagement, the informatics tools used in this Connected Age of care delivery, and the responsibilities for taking a leadership role in the promotion and utilization of informatics in a learning health system.

Content Outline

- 1) Core Concept
 - a) Introduction - Defining Informatics
 - i) Medical
 - ii) Nursing
 - iii) Health Care
 - b) The Value of Informatics
 - i) Informatics Promise
 - ii) Vocabulary Dilemma
- 2) Core Skills & Tools
 - a) Data-Information-Knowledge Continuum
 - i) Knowledge-based care
 - ii) Clinical information management
 - iii) Capturing high quality clinical data
 - b) Putting data, information & knowledge into action:
 - i) Clinical decision support
 - ii) Quality improvement
- 3) Beyond Traditional Settings
 - a) Context

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- i) Federal Initiatives
- ii) Sorting the Terms
- b) Applications
 - i) Personal Health Records
 - ii) Access to Health Information
 - iii) E-Care management
 - iv) Emerging Technologies
 - v) Health 2.0
- 4) Professional Issues
 - a) Social, technical, political, organizational determinants of success
 - i) Critical success factors for HIT systems
 - ii) Nurses and nurse informatics specialists' roles
 - b) Legal, Ethical, Social and Public Policy Issues
 - i) Unintended consequences
 - ii) Privacy & security
 - iii) Secondary use of clinical data

Course Outcomes:

Upon completion of the course, the learner will be able to:

- Examine the use of health information and communication technologies to improve the quality, safety, and efficiency of patient care.
- Explain the relationships among acquiring and manipulating data, applying information for clinical decision making, and the generation of knowledge for evidence-based practice.
- Evaluate patient care technologies that enhance healthcare delivery to diverse populations (e.g., under-represented minorities, incarcerated, elderly, homeless) and communities (e.g., urban, rural, medically underserved).
- Communicate critical elements necessary for the selection and implementation of clinical systems.

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- Provide leadership in the examination of ethical, legal, social, and public policy issues associated with the use of current and emerging health information technologies.

Course Prerequisites:

None

Required Texts and Materials:

There is no textbook for this class. Readings provide you with up-to-date information as well as seminal articles. Required readings as well as recommended readings are posted within each module.

Module 1 Required Readings

Brennan, P. F., & Bakken, S. (2015). Nursing Needs Big Data and Big Data Needs Nursing. *Journal of Nursing Scholarship*, 47(5), 477-484. doi:10.1111/jnu.12159

Brennan, P. F., Chiang, M. F., & Ohno-Machado, L. (2018). Biomedical informatics and data science: Evolving fields with significant overlap. *Journal of the American Medical Informatics Association*, 25(1), 2-3. doi:10.1093/jamia/ocx146

Brenner, S. K., Kaushal, R., Grinspan, Z., Joyce, C., Kim, I., Allard, R. J., Degado, D & Abramson, E. L. (2016). Effects of health information technology on patient outcomes: A systematic review. *Journal of the American Medical Informatics Association*, 23(5), 1016-1036. doi:10.1093/jamia/ocv138

Campanella, P., Lovato, E., Marone, C., Fallacara, L., Mancuso, A., Ricciardi, W., & Specchia, M. L. (2016). The impact of electronic health records on healthcare quality: A systematic review and meta- analysis. *The European Journal of Public Health*, 26(1), 60-64. doi:10.1093/eurpub/ckv122

Despins, L. A., & Wakefield, B. J. (2018). The role of the electronic medical record in the intensive care unit nurse's detection of patient deterioration. *CIN: Computers, Informatics, Nursing*, 36(6), 284-292. doi:10.1097/cin.0000000000000431

Dykes, P. C., & Collins, S. A. (2013). Building linkages between nursing care and improved patient outcomes: The role of health information technology. *Online Journal of Issues in Nursing*, 18(3), 19. <https://doi.org/10.3912/OJIN.Vol18No03Man04>

Hardy, L. R. (2018). Using Big Data to Accelerate Evidence-Based Practice. *Worldviews on Evidence-Based Nursing*, 15(2), 85-87. doi:10.1111/wvn.12279

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Kruse, C. S., & Beane, A. (2018). Health Information Technology Continues to Show Positive Effect on Medical Outcomes: Systematic Review. *Journal of Medical Internet Research*. doi:10.2196/preprints.8793

Lee, M. S., Ray, K. N., Mehrotra, A., Giboney, P., Yee, H. F., & Barnett, M. L. (2018). Primary Care Practitioners' Perceptions of Electronic Consult Systems. *JAMA Internal Medicine*, 178(6), 782. doi:10.1001/jamainternmed.2018.0738

Mehta, N., & Pandit, A. (2018). Concurrence of big data analytics and healthcare: A systematic review. *International Journal of Medical Informatics*, 114, 57-65. doi:10.1016/j.ijmedinf.2018.03.013

Nelson-Brantley, H. V., Jenkins, P., & Chipps, E. (2019). Turning health systems data into actionable information. *Journal of Nursing Administration*, 49(4), 176-178. doi:10.1097/NNA.0000000000000734

Ozkaynak, M., Reeder, B., Hoffecker, L., Makic, M. B., & Sousa, K. (2017). Use of Electronic Health Records by Nurses for Symptom Management in Inpatient Settings. *CIN: Computers, Informatics, Nursing*, 35(9), 465-472. doi:10.1097/cin.0000000000000329.

Module 2 Required Readings

Bakken, S., Jia, H., Chen, E., Choi, J., John, R., Lee, N., et al. (2014). The Effect of a Mobile Health Decision Support System on Diagnosis and Management of Obesity, Tobacco Use, and Depression in Adults and Children. *The Journal for Nurse Practitioners*, 10(10), 774-780. doi.org/10.1016/j.nurpra.2014.07.017

Borum, C. (2018). Barriers for Hospital-Based Nurse Practitioners Utilizing Clinical Decision Support Systems: A Systematic Review. *Computers, Informatics, Nursing*, 36(4), 208. doi: 10.1097/CIN.0000000000000413

Hirschtick, R. E. (2006). Copy-and-paste. *Journal of the American Medical Association (JAMA)*, 295(20), 2335-2336. doi:10.1001/jama.295.20.2335

Jansen, K., Kim, T., Coenen, A., Saba, V. & Hardiker, N. (2016). Harmonising nursing terminologies using a conceptual framework. *Studies in Health Technology and Informatics*, 225, 471-5. DOI 10.3233/978-1-61499-658-3-471

Price-Haywood, E. G., Robinson, W., Harden-Barrios, J., Burton, J., & Burstain, T. (2018). Intelligent Clinical Decision Support to Improve Safe Opioid Management of Chronic Noncancer Pain in Primary Care. *Ochsner Journal*, 18(1), 30-35. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5855418/pdf/i1524-5012-18-130.pdf>

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Strudwick, G., & Hardiker, N. (2016). Understanding the use of standardized nursing terminology and classification systems in published research: A case study using the International Classification for Nursing Practice(®). *International Journal of Medical Informatics*, 94(2016), 215-21. doi: 10.1016/j.ijmedinf.2016.06.012.

Tsou, A. Y., Lehmann, C. U., Michel, J., Solomon, R., Possanza, L., & Gandhi, T. (2017). Safe practices for copy and paste in the EHR. Systematic review, recommendations, and novel model for health IT collaboration. *Applied Clinical Informatics*, 8(1), 12-34. doi: 10.4338/ACI-2016-09-R-0150.

Vesta, J., Garnnis, S. J., Haut, D. P., Halverson, P. K., & Manachemia, N. (2017). Using structured and unstructured data to identify patients' need for services that address the social determinants of health. *International Journal of Medical Informatics*, 107 (2017), 101–106. doi.org/10.1016/j.ijmedinf.2017.09.008

Welton, J. M., & Harper, E. M. (2016). Measuring Nursing Care Value. *Nursing Economics*, 34(1), 7- 14.
<https://ucdenver.instructure.com/courses/433571/files/folder/Articles?preview=11962591>

Welton, J. M., Kleiner, C., & Adrian, B. (2017). Time-referenced data. *Nursing Economics*, 35(3), 150- 151.
<https://ucdenver.instructure.com/courses/504998/files/folder/Articles?preview=17013390>

Module 3 Required Readings

Ancker, J. S. (2018). Delivering Patient Data to Patients Themselves. *eGEMs (Generating Evidence & Methods to improve patient outcomes)*, 6(1), 16. DOI: <http://doi.org/10.5334/egems.267>.

Arcia, A., Woollen, J., & Bakken, S. (2018). A Systematic Method for Exploring Data Attributes in Preparation for Designing Tailored Infographics of Patient Reported Outcomes. *eGEMs (Washington, DC)*, 6(1), 2. <http://doi.org/10.5334/egems.190>.

Chan, A. H. Y. & Honey, M. L. L. (2022). User perceptions of mobile digital apps for mental health: Acceptability and usability - an integrative review. *Journal of Psychiatric Mental Health Nursing*, 29, 147-168. doi: 10.1111/jpm.12744

Cohen, A. B., Mathews, S. C., Dorsey, E. R, Bates, D. W., & Safavi, K. (2020). Direct-to-consumer digital health. *The Lancet*, 2(4), E-163-165.
[https://doi.org/10.1016/S2589-7500\(20\)30057-1](https://doi.org/10.1016/S2589-7500(20)30057-1)

Delbanco, S., & Delbanco, T. (April 2018). Technology and Transparency: Empowering Patients and Clinicians to Improve Health Care Value. *Annals of Internal Medicine*, 168(8), 585–586. doi: 10.7326/M17-3269

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Demiris, G., Iribarren, S. J., Sward, K., Lee, S., & Yang, R. (2019). Patient Generated Health Data Use in Clinical Practice: A Systematic Review. *Nursing Outlook*, 67(4), 311-330. <https://doi.org/10.1016/j.outlook.2019.04.005>

Esch, T., Mejilla, R., Anselmo, M., Podtschaska, B., Delbanco, T., & Walker, J. (2016). Engaging patients through open notes: an evaluation using mixed methods. *BMJ Open* 6, e010034. doi:10.1136/bmjopen-2015-010034.

Gerard, M., Chimowitz, H., Fossa, A., Bourgeois, F., Fernandez, L., & Bell, S. K. (2018). The Importance of Visit Notes on Patient Portals for Engaging Less Educated or Nonwhite Patients: Survey Study. *Journal of Medical Internet Research*, 20(5), e191. <http://doi.org/10.2196/jmir.9196>

Giardina, T. D., Baldwin, J., Nystrom, D. T., Sittig, D. F., & Singh, H. (2018). Patient perceptions of receiving test results via online portals: a mixed-methods study. *Journal of the American Medical Informatics Association*, 25(4), 440-446. <https://doi.org/10.1093/jamia/ocx140>

Herrmann, M., Boehme, P., Mondritzki, T., Ehlers, J. P., Kavadias, S., & Truebel, H. (2018). Digital Transformation and Disruption of the Health Care Sector: Internet-Based Observational Study. *Journal of Medical Internet Research*, 20(3), e104. <http://doi.org/10.2196/jmir.9498>.

Jones, M., DeRuyter, F., & Morris, J. (2020). The Digital Health Revolution and People with Disabilities: Perspective from the United States. *International Journal of Environmental Research and Public Health*, 17(2), 381. doi:10.3390/ijerph17020381

Liu, N., Yin, J., Tan, S. S., Ngiam, K. Y., & Teo, H. H. (2021). Mobile health applications for older adults: A systematic review of interface and persuasive feature design. *Journal of the American Medical Informatics Association*, Sep 2, ocab151. doi:10.1093/jamia/ocab151

Lupton, D. (2017). Digital health now and in the future: Findings from a participatory design stakeholders workshop. *Digital Health*, 3,1-17. <https://doi.org/10.1177/2055207617740018>

Nazi K. M., Turvey C. L., Klein D. M., & Hogan T. P. (2018). A decade of veteran voices: Examining patient portal enhancements through the lens of user-centered design. *Journal of Medical Internet Research*, 20(7), e10413. <https://doi.org/10.2196/10413>

Skiba, D. (2018a). Consumer electronic show 2018: A focus on digital health tools. *Nursing Education Perspectives*, 39(3), 194-195. doi:10.1097/01.Nep.0000000000000332.

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Skiba, D. (2018b). The invisible health care professional: Exploring the intersection of data, devices, and artificial intelligence. *Nursing Education Perspectives*, 39(4), 264-265.

van Veen, T., Binz, S., Muminovic, M., Chaudhry, K., Rose, K., Calo, S., Rammal, J. A., France, J., & Miller, J. B. (2019). Potential of Mobile Health Technology to Reduce Health Disparities in Underserved Communities. *West J Emerg Med*, 20(5), 799-802. doi: 10.5811/westjem.2019.6.41911

Wickersham, K. E., Powell, K., Guterman, I., O'Malley, C., & Nahm, E. S. (2019). Innovative use of patient portals during cancer survivorship: A first step. *Journal of Oncology Navigation & Survivorship*, 10(3).
<http://jons-online.com/component/mams/?view=article&artid=2325:innovative-use-of-patient-portals-during-cancer-survivorship-a-first-step&Itemid=0>

Additional Resources for the Evaluating Digital Tools assignment

Kington, R. S., Arnesen, S., Chou, W. S., Curry, S. J., Lazer, D. Y., & Villarruel A. M. (2021). Identifying credible sources of health information in Social Media: Principles and attributes. *National Academy of Medicine (NAM) Perspectives*. Discussion Paper, National Academy of Medicine, Washington, DC.
<https://s3.amazonaws.com/nam.edu/uploads/Identifying+Credible+Sources+of+Health+Information+in+Social+Media.pdf>

Skiba, D. (2017). Evaluation tools to appraise social media and mobile applications. *Informatics*, 2017, 4(3), 32.
<https://doi.org/10.3390/informatics4030032>

CDC: Social Media Tools, Guidelines & Best Practices
<http://www.cdc.gov/socialmedia/tools/guidelines/index.html>

Hensher, M, Cooper, P., Dona, S. W. A., Angeles, M. R., Nguyen, D., Heynsbergh, N. Chatterton, M. L. & Peeters, A. (2021). Scoping review: Development and assessment of evaluation frameworks of mobile health apps for recommendations to consumers. *Journal of the American Medical Informatics Association*, 28(6), 1318–1329. <https://doi.org/10.1093/jamia/ocab041>

HIMSS (2012). Selecting a mobile app: Evaluating the usability of medical applications. mHIMSS App Usability Work Group. Retrieved from:
<http://s3.amazonaws.com/rdcms/himss/files/production/public/HIMSSguidetoappusabilityv1mHIMSS.pdf>

Medical Library Association. For health consumers and patients: Find good health information. <http://www.mlanet.org/resources/userguide.html>

U.S. National Library of Medicine. (2020, March 6). Evaluating internet health information: A tutorial from the National library of medicine. MedlinePlus.

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<https://medlineplus.gov/evaluatinghealthinformation.html>

U.S. National Library of Medicine. (2020, December 4). Evaluating Health Information (many resources)
<https://medlineplus.gov/evaluatinghealthinformation.html>

Module 4 Required Readings

Blizinsky, K., & Bonham, V. (2018). Leveraging the learning health care model to improve equity in the age of genomic medicine. *Learning Health System*, 2(1), e10046. <https://doi.org/10.1002/lrh2.10046>.

Dudding, K.M., Gephart, S.M., & Carrington, J.M. (2018). Neonatal Nurses Experience Unintended Consequences and Risks to Patient Safety with Electronic Health Records. *Computers, Informatics, Nursing*, 36(4), 167-76.
<https://doi.org/10.1097/CIN.0000000000000406>

Goldstein, B., Navar, A., Pencina, M. J., & Ioannidis, J. (2017). Opportunities and challenges in developing risk prediction models with electronic health records data: A systematic review. *Journal of the American Medical Informatics Association*, 24(1), 198–208 doi: 10.1093/jamia/ocw042

Howe, J. L., Adams, K. T., Hettinger, A. Z., & Ratwani, R. M. (2018). Electronic health record usability issues and potential contribution to patient harm. *Journal of the American Medical Association*, 319(12), 1276-8.
<https://jamanetwork.com/journals/jama/fullarticle/2676098>

Jones, S., Koppel, R., Ridgely, M. S., Palen, T. E., Wu, S. & Harrison. M. I. (2011, August). Guide to Reducing Unintended Consequences of Electronic Health Records. RAND Corporation, contract No. HHS2902006000171, Task Order #5. Agency for Healthcare Research and Quality.
<https://digital.ahrq.gov/sites/default/files/docs/publication/guide-to-reducing-unintended-consequences-of-electronic-health-records.pdf>

Kisekka, V., & Giboney, J. S. (2018). The Effectiveness of Health Care Information Technologies: Evaluation of Trust, Security Beliefs, and Privacy as Determinants of Health Care Outcomes. *Journal of Medical Internet Research*, 20(4), e107.
<http://doi.org/10.2196/jmir.9014>

Ostherr, K., Borodina, S., Bracken, R.C., Lotterman, C. Storer, E., & Williams, B. (2017). Trust and privacy in the context of user-generated health data. *Big Data and Society*, 4(1). <https://doi.org/10.1177/2053951717704673>.

Patterson, E. S. (2018). Workarounds to Intended Use of Health Information Technology: A Narrative Review of the Human Factors Engineering Literature. *Human Factors*, 60(3), 281–292.
<https://doi-org.proxy.hsl.ucdenver.edu/10.1177/0018720818762546>

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Smith, M., Saunders, R., Stuckhardt, L., & McGinnis, J. (2012, September). *Best care at lower costs: The path to continuously learning health care in America. Report brief.* Institute of Medicine. <https://www.nap.edu/resource/13444/BestCareReportBrief.pdf>

Smith, M., Saunders, R., Stuckhardt, L., & McGinnis, JM. (2012b, September). *Best care at lower costs: The path to continuously learning health care in America. Recommendations.* Institute of Medicine. https://www.nap.edu/resource/13444/Best-Care-at-Lower-Cost_Recs.pdf

Sulmasy, L., Lopex, A.M., & Horwitch, C. (2017). Ethical Implications of the electronic health record: In the service of the patient. *General Internal Medicine*, 32(8), 935-939. <https://doi.org/10.1007/s11606-017-4030-1>

Tang, T., Lim, M., Mansfield, E., McLachlan, A., & Quan, S. (2018). Clinician user involvement in the real world: Designing an electronic tool to improve interprofessional communication and collaboration in a hospital setting. *International Journal of Medical Informatics*, 110, 90-97. <https://doi.org/10.1016/j.ijmedinf.2017.11.011>

Additional Workflow Resources

Aarts, J., Ash, J. & Berg, M. (2007). Extending the understanding of computerized physician order entry: implications for professional collaboration, workflow and quality of care. *International Journal of Medical Informatics*, 76: Suppl 1:S4–13. doi: 10.1016/j.ijmedinf.2006.05.009

Kushniruk, A. , Triola, M. M., Borycki, E. M., Stein, B. & Kannry, J. L. (2005). Technology induced error and usability: The relationship between usability problems and prescription errors when using a handheld application. *International Journal of Medical Informatics*, 74:519–26. doi:10.1016/j.ijmedinf.2005.01.003

Koppel, R., Wetterneck, T., Telles, L. & Karsh, B. T. (2008). Workarounds to barcode medication administration systems: their occurrences, causes, and threats to patient safety. doi: 10.1197/jamia.M2616

Ozkaynak, , Brennan, P. F. (2013). An Observation Tool for Studying Patient-Oriented Workflow in Hospital Emergency Departments. *Methods Informatics Medicine*, 52(6):503–13. doi:10.3414/ME12-01-0079

Supplementary (optional) Texts and Materials:

Module 1 Supplemental Readings

Field, M., Fong, K., & Shade, C. (2018). Use of electronic visibility boards to improve patient care quality, safety, and flow on inpatient pediatric acute care units. *Journal of*



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Pediatric Nursing, 41, 69-76. Graduate Course Syllabus 2018-19

Graves, J. & Corcoran S. (1989). An overview of nursing informatics. Originally published as The Study of Nursing Informatics. *Image: Journal of Nursing Scholarship*, 21, 227- 231. <https://doi.org/10.1111/j.1547-5069.1989.tb00148.x>

Mihalko, M. (2012). Finding meaning in Meaningful Use: Understanding the Health Information Technology for Economic and Clinical Health Act and its impact on nursing practice. *Journal of Pediatric Nursing*, 27, 88-89. doi: 10.1016/j.pedn.2011.10.002

McQuade-Jones, B., Murphy, J., Novak, T. & Sarnowski, L. (2014). Nurse practitioners and Meaningful Use: Transforming health care. *The Journal for Nurse Practitioners*, 10, (10), 763- 768. <https://doi.org/10.1016/j.nurpra.2014.08.004>

Nelson, E. C., Dixon-Woods, M., Batalden, P. B., Homa, K., Citters, A. D., Morgan, T. S., Eftimovska, E., Fisher, E. S., Ovretveit, J., Harrison, W., Lind, D. & Lindblad, S. (2016). Patient focused registries can improve health, care, and science. *BMJ*, 354, i3319. <https://doi.org/10.1136/bmj.i3319>

Rouleau, G., Gagnon, M., & Côté, J. (2015). Impacts of information and communication technologies on nursing care: An overview of systematic reviews (protocol). *Systematic Reviews*, 4(1), 75. doi:10.1186/s13643-015-0062-y

Schenk, E., Schleyer, R., Jones, C. R., Fincham, S., Daratha, K. B., & Monsen, K. A. (2018). Impact of adoption of a comprehensive electronic health record on nursing work and caring efficacy. *CIN: Computers, Informatics, Nursing*, 36(7), 366. <https://doi:10.1097/01.ncn.0000542471.35832.7e>

Schick-Makaroff, K., & Molzahn, A. E. (2017). Evaluation of real-time use of electronic patient-reported outcome data by nurses with patients in home dialysis clinics. *BMC Health Services Research*, 17(1). 439-411. doi:10.1186/s12913-017-2377-y

Nelson, E. C., Dixon-Woods, M., Batalden, P. B., Homa, K., Citters, A. D., Morgan, T. S., . . . Lindblad, S. (2016). Patient focused registries can improve health, care, and science. *BMJ*, 354, i3319. <https://doi.org/10.1136/bmj.i3319>

Rouleau, G., Gagnon, M., & Côté, J. (2015). Impacts of information and communication technologies on nursing care: An overview of systematic reviews (protocol). *Systematic Reviews*, 4(1). doi:10.1186/s13643-015-0062-y

Schenk, E., Schleyer, R., Jones, C. R., Fincham, S., Daratha, K. B., & Monsen, K. A. (2018). *Impact of adoption of a comprehensive electronic health record on nursing work and caring efficacy. CIN: Computers, Informatics, Nursing*, 36(7), 366. doi:10.1097/01.ncn.0000542471.35832.7e

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Schick-Makaroff, K., & Molzahn, A. E. (2017). Evaluation of real-time use of electronic patient-reported outcome data by nurses with patients in home dialysis clinics. *BMC Health Services Research*, 17(1), 439-411. doi:10.1186/s12913-017-2377-y

Module 2 Supplemental Readings

Bellinger, G., Castro, D., & Mills, A. (2004). Data, information, knowledge, and wisdom. <http://www.systems-thinking.org/dikw/dikw.htm>

Capurro, D., Yetisgen, M., van Eaton, E., Black, R., & Tarczy-Hornoch, P. (2014). Availability of Structured and Unstructured Clinical Data for Comparative Effectiveness Research and Quality Improvement: A Multisite Assessment. *eGEMs (Generating Evidence & Methods to improve patient outcomes)*, 2(1). Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4371483/>

Einbinder, J. S., & Scully, K. (2001). Using a clinical data repository to estimate the frequency and costs of adverse drug events. *Proceedings - AMIA Symposium*, 9(90061), 154-138. <https://doi.org/10.1197/jamia.M1222>

Holden, R.J., Srinivas, P., Campbell, N. L., Clark, D.O., Bodke, K. S., Hong, Y., Boustani, M. A., Ferguson, D., & Callahan, C. M. (2019). Understanding older adults' medication decision making and behavior: A study on over-the-counter (OTC) anticholinergic medications. *Research in social & administrative pharmacy*, 15(1), 53-60. <https://doi.org/10.1016/j.sapharm.2018.03.002>

Hripcsak, G., Forrest, C., Brennan, P., & Stead, W. (2015). Informatics to support the IOM Social and Behavioral Domains and Measures. *Journal of the American Medical Informatics Association*, 22(4), 9214. doi: 10.1093/jamia/ocv035

Dunn Lopez, K., Gephart, S., Raszewski, R., Sousa, V., Shehorn, L., & Abraham, J. (2016). Integrative review of clinical decision support for registered nurses in acute care settings. *Journal of American Medical Informatics Association*, 24(2), 441–450. <https://doi.org/10.1093/jamia/ocw084>

McIlvennan, C. K., Thompson, J. S., Matlock, D. D., Cleveland, J. C., Jr., Dunlay, S. M., LaRue, S. J., et al. (2016). A multicenter trial of a shared decision support intervention for patients and their caregivers offered Destination Therapy for advanced heart failure: DECIDE-LVAD: Rationale, design, and pilot data. *Journal of cardiovascular nursing*, 31(6), E8-e20. <https://doi.org/10.1097/jcn.0000000000000343>

Rutherford, M. (2008). Standardized nursing language: What does it mean for nursing practice? *OJIN: The Online Journal of Issues in Nursing*, 13(1). <http://ojin.nursingworld.org/MainMenuCategories/ThePracticeofProfessionalNursing/Health-IT/StandardizedNursingLanguage.html>

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Whalen, K., Bavuso, K., Bouyer-Ferullo, S., Goldsmith, D., Fairbanks, A., Gesner, E., Lagor, C. & Collins, S. (2016). Analysis of nursing clinical decision support requests and strategic plan in a large academic health system. *Applied Clinical Informatics*, 7(2), 22737. doi:10.4338/ACI201510-RA0128

Module 3 Supplemental Readings

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Course Schedule:

Date	Topic	Required Reading	Assignment(s) Due
8/29/2022	Core Informatics Concepts & HIT Promise	Module 1 Required Readings	<ul style="list-style-type: none"> • Research Articles Sept. 11th @11:59 PM MT • Individual Position Statement Sept.25th @11:59 PM MT
September 5	<i>Labor Day (Classes Not in Session)</i>		
9/26/22	Core Skills & Tools	Module 2 Required Readings	<ul style="list-style-type: none"> • Group Discussion #1 Oct. 9th @11:59 PM MT • Team Paper Oct. 23rd @11:59 PM MT
10/24/22	Connected Care & Engagement	Module 3 Required Readings	<ul style="list-style-type: none"> • eHealth Evaluation Nov. 6th @11:59 PM MT • Clinical Note Nov. 20th @11:59 PM MT
11/21/22	Professional Issues	Module 4 Required Readings	<ul style="list-style-type: none"> • Group Discussion #2 Dec. 4th @11:59 PM MT • Clinical Workflow Analysis Dec. 16th @11:59 PM MT
November 24-25	<i>Thanksgiving Break (Classes not in Session)</i>		



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Semester Ends	Graduate Course Syllabus <i>December 16^m (Clinical Workflow Analysis assignment due)</i>
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Evaluation

- I. Assignments**
See Course Schedule
- II. Basis for Final Grade**

Assignment	Possible Points	Percent of Final Grade
Module 1: Research Articles	100	10%
Module 1: Individual Position Statement	100	20%
Module 2: Structured vs. Non-Structured Documentation Discussion	100	10%
Module 2: Team Paper	100	20%
Module 3: eHealth Networking Evaluation Criteria	100	5%
Module 3: Clinical Note	100	20%
Module 4: Privacy, Confidentiality, Security Discussion	100	5%
Module 4: Clinical Workflow Analysis	100	10%

I. Grading Scale

Grade Dissemination



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Letter Grade:	Points:	Percent:
A		94 -100%
A-		90 – 93%
B+		87 – 89%
B		84 – 86%
B-		80 – 83%
C+		77 – 79%
C		74 – 76%
C-		70 – 73%
D+		67 – 69%
D		64 – 66%
D-		60 – 63%
F		0 – 59%

Grades section in Canvas.
Final grades will be posted
in the UCD portal. Each
student will only see their
individual grade.

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Policies

Please refer to the University of Colorado, College of Nursing student handbook for detailed information about college policies and expectations.

Handbooks are located at: <https://nursing.cuanschutz.edu/student-life/student-handbooks>

Course Procedures

I. Course Policies: Grades

a. *Rounding of Final Course Grades*

- i. Final Course letter grades are calculated and submitted to the registrar based on whole numbers. A minimum standard of rounding in all courses is necessary to provide consistency and transparency to students. Only the final course grade that represents the completion of all coursework will be used for rounding purposes. The calculated final course grade will be rounded using the number in the tenth position after the decimal of the final grade calculations. Final course grades of 0.5 and higher will be rounded up to the next whole number. When the number at the tenth decimal place is less than 0.5 the grade is rounded down to the next whole number. For example, a final course grade of 87.52% will be rounded up to 88%. A final course grade of 87.49% will result in a final grade of 87%.

b. *Attendance Policy:*

- i. Class attendance and participation is a professional expectation.
 1. Take responsibility for keeping up with the readings and assignments for each scheduled class or content area.
 2. Class participation and completion of all learning activities is required for successful completion of this course.
 3. Participate in discussions (in class or online) to define, interpret, summarize, give examples, make conclusions, etc. about the concepts discussed and about what your classmates have discussed.

UC Denver Student Attendance and Absences Policy:

http://www.ucdenver.edu/faculty_staff/employees/policies/Policies%20Library/7XXX%20Student%20Affairs/7030%20-%20Student%20Attendance%20and%20Absences.pdf

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c. Late Work Policy:

- i. Due dates for assignments are clearly posted on the syllabus. It is your responsibility to submit these assignments on time and according to their defined critical elements. Late assignments turned in 24 hours after a posted deadline will not be graded and the student will receive a zero for that assignment unless previous arrangements have been made with the instructor.

d. Late work is defined as:

- i. An assignment turned in after the due date and time posted in the syllabus or, an assignment turned in after a due date and time that has been updated through previous arrangements made with the instructor.

e. The consequence for late assignments is:

- i. Late assignments turned in after a posted deadline will be subjected to 10% point deduction for each day the assignment is late unless previous arrangements have been made with the instructor.

f. Make-up Exam Policy: N/A

g. Extra Credit Policy:

- i. There will be no opportunity for extra credit in this course

h. Grades of Incomplete Policy:

- i. The current university policy concerning incomplete grades will be followed in this course. Incomplete grades are given only in situations where unexpected emergencies prevent a student from completing the course and the remaining work can be completed the next semester. Your instructor is the final authority on whether you qualify for an incomplete. Incomplete work must be finished by the end of the subsequent semester or the "I" will automatically be recorded as an "F" on your transcript.

i. Rewrite/Resubmit Policy:

- i. It is up to the faculty to determine if your paper does not meet standards in the course. They may ask you to resubmit the paper.

j. Group Work Policy:

- i. All members of the work should equally participate in the activity. Those with limited participation may receive a lower grade for the assignment.

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II. Course Policies: Technology

a. E-Mail Policy:

- i. Students and faculty must use University of Colorado assigned email addresses or Canvas for all email correspondence. The College of Nursing has the right to send communications to students via e-mail and the right to expect that those communications will be received and read in a timely fashion.
- ii. Not reading e-mail does not absolve a student from the responsibilities associated with communication sent to his or her official e-mail address.

CU CON Online Communication Policy:

<https://www1.ucdenver.edu/docs/librariesprovider2/student-resources/student-handbooks/all-student-handbook.pdf#page=27>

b. Canvas Policy:

- i. Canvas will be the primary tool used to access class notes, announcements and track your grade for this course. It is your responsibility to access Canvas frequently for announcements and class materials, as well as information about your clinical assignments. Any questions about access or utilities on Canvas should first be directed to Canvas help site.

c. Laptop and Mobile Device Usage Policy:

- i. Laptops are allowed in class during all class lectures, but must be turned off and stored during exams. Turn off or mute cell phones and pagers during class time. NO cell phone conversations or text messaging is permitted during class or exam time.

d. Classroom Devices Policy:

- i. A basic calculator for medication calculation exercises is allowed in class and during examinations. Please ask the specific lecturers regarding recording of their lectures.

e. Classroom Response Clickers:

- i. Responseware technology will be used throughout the course for interactive participation in class.

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III. Course Policies: Student Expectations

Students are expected to attend all class sessions and are responsible for all content and class work assigned and/or covered in class or online.

CU CON Policy Statement Professional Role Behaviors:
<https://www1.ucdenver.edu/docs/librariesprovider2/student-resources/student-handbooks/all-student-handbook.pdf#page=18>

a. Professional Role Behavior and Honor Code:

- i. Students are expected to engage in conduct that a) is consistent with designated policies and procedures of the course and college and b) demonstrates professional behaviors. Students are expected to have read and abide by the

CU-CON Policy Statement for Professional Role Behaviors and the Student Honor and Conduct code: “The health professions are based on a high degree of trust by the individuals they serve. Students entering the health professions have a particular obligation, therefore, to conduct themselves at all times in a manner that reflects honesty, integrity and respect for others” (Student Handbook).

b. Graduate Program Policies and Procedures:

- i. Please refer to the Student Handbook, which can be found online at the main College of Nursing webpage.
<https://nursing.cuanschutz.edu/student-life/student-handbooks>

c. Students Called for Military Duty:

- i. Please contact the course coordinator if you are called for military duty. Plans will be made according to the length of military service and class or clinical time missed.

d. Course Ethics:

- i. Merriam-Webster's online dictionary (2005) defines plagiarizing as: *To steal and pass off (the ideas or words of another) as one's own: use (another's production) without crediting the source...to commit literary theft: present as new and original an idea or product derived from an existing source.* (Merriam-Webster's Online Dictionary, <http://www.m-w.com>, accessed 08/26/07).

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- ii. The CU College of Nursing Student Honor and Conduct Code policy requires that course professors and fellow students who suspect plagiarism or other violations of the honor code must immediately report the incident to the Student Honor and Conduct Committee. This committee evaluates the situation and determines the appropriate consequences. Potential consequences include termination of the student's enrollment in the College of Nursing. If you are caught violating the honor code, faculty will recommend your dismissal to this committee and to the Dean.
- iii. Your personal integrity is something that takes you a lifetime to build, but only seconds to destroy. Faculty will expect that all work submitted by you is authentic; and that all online testing answers are your individual work, without any assistance from any other person, the Internet, or any other sources, unless I have stipulated that you may use a specific source to complete the assignment.

e. Professional Behavior:

- i. The expected outcomes of the student's ability to conduct oneself in a professional manner, and to lead and to engage in effective group interaction will be demonstrated by the student's professional behaviors in the classroom and to their peers. Successful achievement of these outcomes is based on the following critical elements: The student will:
 1. Adhere to the CON Guidelines for Professional Role Behaviors and the UCD Student Honor and Conduct Code.
 2. Be considerate of your classmates and faculty and help promote an effective learning atmosphere.
 3. Communicate to faculty and peers in a professional and respectful manner at all times.
 4. Email: Professional communication is expected in all emails sent to faculty or other students. Use of professional titles, appropriate subject lines, and proper written communication structure.
 5. Turn off or mute pagers and cell phones during class time. NO cell phone conversations or text messaging is permitted during class or exam time.
 6. Take responsibility for keeping up with the readings and assignments for each scheduled class or content area.

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7. Class participation and completion of all learning activities is required for successful completion of this course. Participate in discussions (in class or online) to define, interpret, summarize, give examples, make conclusions, etc. about the concepts discussed and about what your other classmates have discussed.
8. Children are not allowed in classrooms. Students must find alternative childcare during class time.
 - **Professional Behavior:** refer to the CU CON Policy Statement Professional Role Behaviors:
<https://www1.ucdenver.edu/docs/librariesprovider2/student-resources/student-handbooks/all-student-handbook.pdf#page=18>
 - CU CON Children in the Workplace and/or Classroom Policy:
<https://www1.ucdenver.edu/docs/librariesprovider2/student-resources/student-handbooks/all-student-handbook.pdf#page=33>

f. Civility:

- i. Our commitment is to create a climate for learning characterized by respect for each other and the contributions each person makes to class. We ask that you make a similar commitment.

g. Inclement Weather Policy:

<http://www.ucdenver.edu/anschutz/studentresources/student-assistance/organizations/senate/Documents/Inclement%20Weather%20Procedure-1.pdf>

UC Denver Emergency Weather: (877) 463-6070 or
www.ucdenver.edu/alert

CU CON Inclement Weather Policy (refer to the policy for Anschutz, AMC and South):

<https://www1.ucdenver.edu/docs/librariesprovider2/student-resources/student-handbooks/all-student-handbook.pdf#page=34>

h. Campus Assessment, Response & Evaluation (CARE):

- i. The purpose of the team is to assess whether individuals pose a risk to themselves or others and to intervene when necessary and, more generally, to identify and provide assistance to those

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- ii. in need. The team takes a preventive approach to risk assessment by offering resources, referrals, and support to both the concerning individual and those impacted by their behavior. Additional information regarding this resource may be found at: <http://www.ucdenver.edu/life/services/CARE/Pages/default.aspx>

i. Writing Center:

- i. Writing assistance is available through the Writing Center. Additional information regarding this resource may be accessed at: <https://clas.ucdenver.edu/writing-center/locations/writing-center-cu-anschutz>

j. Religious Observances:

- i. The University of Colorado Denver, Anschutz Medical Campus has a legal obligation to accommodate students who must be absent from an educational activity in order to observe religious holidays or other observances. Students should speak to the faculty member to request accommodations for religious observances in advance during the first week of class. Requests received by faculty must be kept confidential and should be considered unless they create an undue hardship. If the student and faculty member cannot agree on an accommodation, the matter should be referred to the Assistant Dean for Graduate Programs for resolution.

University Policies

I. Access

- I. **Disability Access:** the University of Colorado Anschutz Medical Campus is committed to providing equitable access to our programs for students with disabilities (e.g., psychological, attentional, learning, chronic health, sensory, and physical).
- II. To engage in a confidential conversation about the process for requesting reasonable accommodations in the classroom and clinical settings please contact **The Office of Disability, Access, and Inclusion** at: disabilityaccess@cuanschutz.edu or begin the process via the website: <https://www.cuanschutz.edu/offices/office-of-disability-access-and-inclusion>. Accommodations are not provided retroactively, therefore, students are encouraged to begin this process early.

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II. Nondiscrimination and Sexual Misconduct:

- I. The University of Colorado Denver is committed to maintaining a positive learning, working and living environment. University policy and Title IX prohibit discrimination on the basis of race, color, national origin, sex, age, disability, pregnancy, creed, religion, sexual orientation, veteran status, gender identity, gender expression, political philosophy or political affiliation in admission and access to, and treatment and employment in, its educational programs and activities. University policy prohibits sexual misconduct, including harassment, domestic and dating violence, sexual assault, stalking, or related retaliation.

Title IX requires the university to designate a Title IX Coordinator to monitor and oversee overall Title IX compliance. The University Title IX Coordinator is available to explain and discuss: your right to file a criminal complaint; the university's complaint process, including the investigation process; how confidentiality is handled; available resources, both on and off campus; and other related matters. Students may report allegations of discrimination or harassment through the Office of Equity: <http://equity.ucdenver.edu/>.

III. Academic Honesty

I. *Student Code of Conduct:*

- a. Students are expected to know, understand, and comply with the ethical standards of the university, including rules against plagiarism, cheating, fabrication and falsification, multiple submissions, misuse of academic materials, and complicity in academic dishonesty.
- b. For suggestions on ways to avoid academic dishonesty, please see the Academic Honesty Handbook at <https://clas.ucdenver.edu/writing-center/faculty/academic-honesty-turnitin-resources-faculty>

II. *Plagiarism*

- a. is the use of another person's ideas or words without acknowledgement. The incorporation of another person's work into yours requires appropriate identification and acknowledgement. Examples of plagiarism when the source is not noted include: word- for-word copying of another person's ideas or words; the "mosaic" (interspersing your own words here and there while, in essence, copying another's work); the paraphrase (the rewriting of another's work, while still using their basic ideas or theories); fabrication (inventing or counterfeiting

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- b. sources); submission of another's work as your own; and neglecting quotation marks when including direct quotes, even on material that is otherwise acknowledge.

III. Cheating

- a. involves the possession, communication or use of information, materials, notes, study aids, or other devices and rubrics not specifically authorized by the course instructor in any academic exercise, or unauthorized communication with any other person during an academic exercise. Examples of cheating include: copying from another's work or receiving unauthorized assistance from another; using a calculator, computer, or the internet when its use has been precluded;
- b. collaborating with another or others without the consent of the instructor; submitting another's work as one's own.

IV. Fabrication

- a. involves inventing or counterfeiting information - creating results not properly obtained through study or laboratory experiment. Falsification involves deliberate alteration or changing of results to suit one's needs in an experiment or academic exercise.

V. Multiple submissions

- a. involves submitting academic work in a current course when academic credit for the work was previously earned in another course, when such submission is made without the current course instructor's authorization.

VI. Misuse of academic materials

- a. includes: theft/destruction of library or reference materials or computer programs; theft/destruction of another student's notes or materials; unauthorized possession of another student's notes or materials; theft/destruction of examinations, papers, or assignments; unauthorized assistance in locating/using sources of information when forbidden or not authorized by the instructor;
- b. unauthorized possession, disposition, or use of examinations or answer keys; unauthorized alteration, forgery, fabrication, or falsification of academic records; unauthorized sale or purchase of examinations, papers, or assignments.

VII. Complicity in academic dishonesty

- a. involves knowingly contributing to or cooperating with another's act(s) of academic dishonesty.



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Important Dates to Remember

The College of Nursing academic calendar is available
at [https://nursing.cuanschutz.edu/student-
life/academic-calendar-and-resources](https://nursing.cuanschutz.edu/student-life/academic-calendar-and-resources)