

7<sup>th</sup>  
EDITION

AACN

**Core Curriculum**  
*for* **High Acuity,**  
**Progressive, *and***  
**Critical Care Nursing**

**Tonja M. Hartjes**  
EDITOR

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AMERICAN  
ASSOCIATION  
of CRITICAL-CARE  
NURSES

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# Core Curriculum *for* High Acuity, Progressive, *and* Critical Care Nursing

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AACN CORE CURRICULUM FOR HIGH ACUITY, PROGRESSIVE,  
AND CRITICAL CARE NURSING, SEVENTH EDITION

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# PREFACE

Since the early 1970s, the American Association of Critical-Care Nurses (AACN) and its core curriculum have stood at the forefront during the continuing evolution of critical care nursing to better meet the highly specialized needs of the patients they serve. JoAnn Grif Alspach became editor of the *Core Curriculum's* first commercially published edition, continuing in this role for six editions. I am sure she could not have imagined the impact of this work decades later: to *define* the nursing practice of caring for critically ill adults and their families.

The *Core Curriculum for Critical Care Nursing* was last published in 2006; since that time much has changed in the way we care for patients. Seeking to maintain the reputation of the *Core* as the source of all things critical care, AACN issued an online survey, and the organization and I participated in a focus group. Our goal was to gather information to ensure that the new edition kept pace with the expanding role of nurses in the critical care profession. Participants confirmed the many ways the *Core Curriculum* is used: as a clinical reference in caring for high acuity and critical care patients, as a resource for CCRN certification exam preparation, for the creation of critical care courses and curricula, as a cornerstone for new nurse orientation, and in the development of competency content. Several nurses with whom we spoke stated that the *Core Curriculum* was their “critical care bible,” affirming that after all these years, the book was still actively sought after within critical care nursing practice.

We confirmed that the purpose of the *Core Curriculum* remains as it always was: to articulate the knowledge base that underlies high acuity, progressive, and critical care nursing practice. Each edition of this work attempts to redefine that knowledge base for nurses who practice in this ever-expanding specialty area. Two large changes you have no doubt already discovered are a change in the editor and a change in the title of the text.

As the new editor, I am humbled to take the reins from Dr. Alspach, who has led the way in the education of critical care nurses. Watching participants in our focus group ask to be photographed with Grif or waiting in line just to talk to her made me realize that the legacy of editing this volume was a responsibility that had been handed down to me. I follow in the footsteps of a great nursing leader whose shoes are difficult to fill, but I accept the challenge, knowing that I have many nurses and patients to serve with this invaluable content.

The seventh edition has been retitled the *AACN Core Curriculum for High Acuity, Progressive, and Critical Care Nursing*. Critical care practice and nursing itself have evolved over the past decade. High acuity patients are treated in many units of the hospital, from the Medical-Surgical floor to the progressive or intermediate care unit and elsewhere. Patients requiring critical care are also found outside of the intensive care unit. Specialty nursing units have been created to meet these evolving health care needs; critical care nurses and patients are found in cardiac catheterization labs, emergency departments, and tele-ICUs. Sometimes they are even found at home awaiting heart transplant with inotropic medications and a left ventricular assist device. Changing the title of the text as we have done brings it more in line with the varied settings in which we find high acuity patients, and it signals to readers outside the traditional ICU that they are included in our base of readers.

Several similarities still exist between the sixth and seventh editions. The current edition continues to use the CCRN examination blueprint and task statements as a starting point for determining relevant content and its apportionment throughout the book. We continue with the embellished outline format, and body systems are again used to segregate the major content areas into chapters. Subsections related to physiologic anatomy, pathophysiology, and patient assessment; generalized patient care and unique characteristics of specific disorders also have been retained.

Readers can still find the AACN Synergy Model for Patient Care woven throughout this edition. When it was developed in the late 1990s, it became the conceptual framework for certified practice in critical care and has since been widely incorporated across critical care. Chapter 1 describes the model in detail, and each chapter includes in the assessment section a reminder of the model's prevalence. A key premise of the Synergy Model is that patient characteristics drive the competencies that nurses need to provide holistic, healing care that achieves optimal patient outcomes. A knowledge base of critical care nursing underlies clinical practice and reflects a foundational requirement for the development of these nursing competencies.

To keep pace with the expanding role of high acuity, progressive, and critical care nursing practice and the evolving healthcare arena, the following items have been added or updated:

- All chapters, tables, figures, boxes, and terminology are based on the most-current AACN/ANA Scope of Practice and Standards of Care.
- Topics included in the October 2015 CCRN blueprint; the updated Essentials of Critical Care Orientation version 3.0; the 2017 edition of the *AACN Procedure Manual for High Acuity, Progressive, and Critical Care*; 2016 AHA and ACLS guidelines; and other appropriate guidelines of care are included for current best practice (e.g., target temperature management).
- Quality and safety education in nursing content has been incorporated within chapters of the text.
- Multisystem trauma, pain, palliative, and end-of-life care content was found among many chapters in the text. Now the content for each topic can be found in new, separate chapters.
- The new Sepsis 3 content has been added to chapter 9.
- Nutritional support for the critically ill patient using A.S.P.E.N. guidelines has been added in the gastrointestinal chapter.
- End-organ disease and transplant content has been added for each chapter, as appropriate.
- AACN and the Society of Critical Care Medicine initiatives have been included (e.g., healthy work environment, pain agitation and delirium protocol, post intensive care syndrome).
- Bundles of care were added (e.g., ABCDE bundle, ventilator-associated pneumonia, catheter-associated urinary tract infection, and central line-associated blood stream infection).
- References now represent current evidence-based practice articles with high levels of evidence, published within the previous 3 years.
- References representing national or international guidelines or standards of care have also been used.
- Online references with primary websites have been provided for further reading and should provide the most up-to-date guidelines of care.
- The pediatric chapter has been removed.
- Nursing diagnoses and its terminology have been removed.

#### Other Embellishments

- A colorful index tab has been created down the edge of the book's pages to distinguish between chapters and major subheadings.
- Headings and subheadings are bolder and easier to identify.
- Addition of "Clinical Pearls" for each chapter provides highlighted boxes, identifying important care at the bedside.
- Addition of "Key Concepts" for each chapter provides highlighted boxes, identifying important overarching content for a topic.
- Use of a larger font
- A detailed cross-referenced index with many relevant entries has been created to assist in quick location of information.
- Colorful tables, figures, and boxes are used to clarify complex topics and illustrate processes for readers to better understand the content.
- Each chapter was carefully reviewed by AACN clinical practice specialists, as well as a physician and/or nurse in current critical care or allied health practice. A clinical pharmacist also reviewed all medications for correct indication and dosages.

All the contributors, reviewers, AACN clinical practice specialists, and I have worked hard and made every attempt to provide the most-current and relevant knowledge base of information related to high acuity, progressive, and critical care nursing. I welcome your comments related to this edition and your suggestions for the next edition of the *AACN Core Curriculum*.

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