BLOOMSBURG UNIVERSITY

N.

P.

Department of Nursing

NURSE PRACTITIONER
STUDENT HANDBOOK

STUDENT HANDBOOK
2021-2022

Bloomsburg University
Department of Nursing
Primary Care Student Nurse Practitioner Handbook

This handbook is a supplement to the current *Bloomsburg University Department of Nursing Graduate Student Handbook,* which can be found at https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf

Phttps://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf Please carefully review both of these handbooks as they can answer many of your academic questions.

The University Graduate Office website is also very informative and be found at the following link http://www.bloomu.edu/gradschool .

The Pilot https://intranet.bloomu.edu/documents/middlestates/E_72.pdf provides information about the University, its mission and goals, academic programs, resources, facilities, and policies and practices.

Included in this Nurse Practitioner Student Handbook is information about our accreditation status, academic advising information, typical programs of study for full and part-time students choosing the nurse practitioner program, and the preliminary planning required prior to enrollment in clinical practicum courses and ongoing requirements throughout those clinical practicum courses. In addition, information about Nurse Practitioner (NP) certification upon graduation is included as well as other information related to the role of the NP student. The appendices include sample forms used in planning and navigating your way through your program of study. The hope is that the information provided in this handbook contributes to an enjoyable and successful personal and academic journey for you at Bloomsburg University.

Bloomsburg University has a long history of preparing nurse practitioners. The Nurse Practitioner (NP) program offers two hybrid program options in primary care at the MSN level: family nurse practitioner (FNP) and adult-gerontology primary care nurse practitioner (AGPCNP). Clinical courses are now being offered at Bloomsburg University, and the Dixon Center in Harrisburg, PA. The department of nursing is accredited by the Commission on Collegiate Nursing Education (CCNE). CCNE can be reached at 655 K Street, NW, Suite 750 Washington, DC 20001, P: (202) 887-6791; F: (202) 887-8476.

Graduates from the Adult-Gerontology Primary Care and Family NP programs are eligible to sit for national certification examination through either the American Nurses Credentialing Center or the American Academy of Nurse Practitioners. The Adult Gerontology Primary Care and Family Nurse Practitioner programs are fully approved by the Pennsylvania State Boards of Nursing and graduates of these programs are eligible to apply for certification (licensure) by the Pennsylvania State Board of Nursing.

The NP Program has an outstanding cadre of full and adjunct faculty who are experts in teaching, clinical practice, and scholarship. All of our NP faculty are board certified and engage in clinical practice and each is committed to mentoring the next generation of NP students. Four lead faculty for these programs are:
Dr. Kimberly Olszewski (ANP) Program Director, Dr. Jennifer Sheaffer, (FNP), Dr. Lori Parke (FNP), and Dr. Cheryl Jackson (FNP).

The faculty believes that learning is a continuing process that involves changes in knowledge, attitudes, and behaviors. Consistent with this belief, the faculty provides learning experiences that foster critical thinking and believe that students are accountable for their own learning. The faculty believes that they have a responsibility to assist students to advance in the community of nursing scholars, specifically in the area of advanced practice. The faculty of the Department of Nursing exemplifies, through teaching, research, and clinical practice, the

personal and professional characteristics they seek to develop in students. They serve as catalysts for student learning, contributors to nursing's expanding body of knowledge, and role models in clinical practice.

NOTICE

The provisions of this handbook are not to be regarded as an irrevocable contract between the department and the student. The Department of Nursing reserves the right to amend any academic, administrative, or disciplinary policy or regulation (or fee) described in this handbook. A notice will be provided to students affected.

Requirements for graduation, as well as curricula, may change throughout the student's matriculation. Such changes will not be retroactively required.

Exceptions may be necessary when changes in professional certification or licensure standards mandate revisions in academic requirements.

TABLE OF CONTENTS

Note: Components of this handbook have been taken from the following student handbook University of San Diego, Hahn School of Nursing and Health Science, DNP and MSN Nurse Practitioner Student Handbook. Retrieved on July 11, 2013.

Faculty Contact Information

<u>Graduate Coordinator & Director Nurse Practitioner Programs</u>

Dr. Kim Olszewski
Phone: 1-570-389-4613
Email: kolszews@bloomu.edu

<u>Nurse Practitioner Graduate Nursing Faculty</u>

Dr. Cheryl Jackson, CRNP, FNP
Phone: 1-570-389-4602
cjackso2@bloomu.edu

Dr. Jennifer Sheaffer, CRNP, FNP
Phone: 1-570-389-3786
jsheaffe@bloomu.edu

Dr. Lori Parke, CRNP, FNP
lparke@bloomu.edu

<u>Adjunct Graduate Nurse Practitioner Faculty</u>

Ms. Cindy Kline, CRNP
ckline@bloomu.edu

Ms. Jennifer Dufford, CRNP
jdufford@bloomu.edu

Dr. Alison Mowery, CRNP
amowery@bloomu.edu

Ms. Dale Gustitus, CRNP
dgustitu@bloomu.edu

Ms. Janine Gerringer, CRNP
jgerringer@bloomu.edu

BLOOMSBURG UNIVERSITY GRADUATE PROGRAM GOALS

The Goals of this program are to assist students in selected areas of differentiated advanced nursing practice to:

1. Analyze, synthesize, and translate knowledge from a variety of resources and experience to develop an evidence-based, comprehensive, and ethical approach to health care delivery in a global society.

2. Employ critical thinking and ethical clinical decision-making skills to provide quality, cost effective, and safe health care for diverse client populations in a variety of settings.

3. Use effective communication skills in the enactment of multifaceted professional roles in accord with standards of practice and AACN Essentials.

4. Navigate across the healthcare system to integrate safe care services.

5. Demonstrate personal quality and professional behaviors to reflect life-long learning and the ability to build and lead collaborative interprofessional care teams.

GRADUATE PROGRAM OUTCOMES AND COMPETENCIES

As a nurse in select areas of advanced practice, the graduate of this program will:

1. Recognize, apply, and integrate scientific knowledge from nursing and related fields to provide clinical prevention and ethical population care, across diverse settings to improve the health of clients.

2. Use advanced skills in critical thinking and problem solving to provide high quality, safe, and cost-effective health care delivery for diverse client populations in a variety of settings.

3. Use effective communication skills, interprofessional collaboration, and patient care technology to improve the delivery and management of client health outcomes.

4. Translate and integrate research findings as a basis for clinical and organizational decision-making.

5. Assume an organizational and system leadership role in the design, implementation, and evaluation of human, fiscal, and physical health care resources in a variety of health care systems to promote high quality and safe client care.

6. Employ personal qualities and professional behaviors to participate in the profession and influence the healthcare outcomes for clients and systems through both indirect and direct care interventions.

STANDARDS OF EDUCATION FOR NURSE PRACTITIONERS

The National Organization of Nurse Practitioner Faculty (NONPF) has developed core competencies that the student must successfully achieve to perform the NP role. These include knowledge of scientific foundations; leadership; quality; practice inquiry; technology and information literacy; policy; health delivery system; ethics; and independent practice. These competencies are then reflected in domains of practice and specific population focus competencies (Family and Adult Gerontology Primary Care Nurse Practitioner's). All nurse practitioners should demonstrate these core competencies and domains at graduation (NONPF 2006, 2012, 2017).

The core competencies are reflected in the seven domains identified by NONPF:

- Management of patient health/illness status
- The nurse-patient relationship
- The teaching-coaching function
- Professional role
- Managing and negotiating health care delivery systems
- Monitoring and ensuring the quality of health care practices
- Cultural competence

The following link will take you to the Overall Core Competencies put forth by NONPF (2017):

https://cdn.ymaws.com/www.nonpf.org/resource/resmgr/competencies/20170516_NPCoreCompsContentF.pdf

The following link will take you to the competencies for the Adult-Gerontology Primary Care NP (2016):

https://cdn.ymaws.com/www.nonpf.org/resource/resmgr/competencies/NP_Adult_Geri_competencies_4.pdf

The following link will take you to the competencies for the Family NP (2013):

https://cdn.ymaws.com/www.nonpf.org/resource/resmgr/Competencies/CompilationPopFocusComps2013.pdf

PROGRAM DESCRIPTION

In the NP programs, students build on their broad-based undergraduate nursing education and prior practice experience and move forward within the profession to a higher level of expertise in an area of advanced practice. Students are expected to have formulated their goals for graduate education prior to admission. The selection of either the Family (FNP) or Adult-Gerontology Primary Care (AGPCNP) NP program option(s) of study should be determined prior to the time of admission so an appropriate curricular plan of study can be established and early planning can be done to arrange appropriate coursework and clinical placements that support the individual student's educational and career goals.

The NP curriculum is based on nursing and related health science mid-range theories, clinical evidence, and models of health care. Emphasis on community, health promotion, disease prevention, along with a strong focus on evidenced-based practice, differential diagnosis, and primary care management, combine to prepare the student as a primary care NP.

Development of a knowledge base concerning both the family and individual across the life span is part of the NP core segment of the curricula. This focus on families and individuals at different developmental stages and from diverse cultural backgrounds and socioeconomic levels assists the student in learning how to assess and meet the needs of the family unit, as well as those of individual family members. This knowledge is applied as the student progresses through courses that focus on individual and family health promotion and the management of individuals with identified acute or chronic illnesses or conditions.

The AGPCNP program focuses on provision of primary care including health promotion and assessment and management of acute and chronic health problems in adolescents (13 years and older) and older adults, including the frail elderly in a variety of settings. The AGPCNP content builds on concepts related to the trajectory of chronic illness and its impact on individuals and families.

The FNP program focuses on provision of care to all ages in the primary care setting. This includes the diagnosis and management of acute and chronic illnesses, health promotion and disease prevention throughout the lifespan including pregnant women. The FNP content builds on concepts related to the trajectory of both wellness and chronic illness and its impact on the family and individuals of those families.

ACADEMIC POLICIES AND PROCEDURES

Students are responsible for reading and reviewing Bloomsburg University's Academic Integrity Policy

https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf[CJ1]

Students are responsible to read and review the NP Student Handbook, in particular any policies or procedures that are contained within specific to the NP program. They will be held accountable for the contents of the Handbook and no excuses will be accepted if the student fails to abide by the policies and procedures contained herein. A copy of the agreement is appended to this handbook (Appendix F) and will be signed and dated by each student and will be placed in the Student's Program personnel file.

Code of Conduct / Disciplinary Actions
https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf[CJ2]

Probation / Dismissal
Graduate Academic Progress, Probation, and Dismissal information is located in the Bloomsburg University MSN Handbook: https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf[CJ3]

Probation - Removal of Clinical Privileges
A student may be removed from the clinical practicum and placed on clinical probation for a 30 – 60-day period for the following reasons:

- Compromising patient safety
- Poor judgment or application of the accepted standards of care
- Failure to demonstrate satisfactory clinical progress

A student will face immediate expulsion if they are involved in actions so egregious that they jeopardize patient safety or are involved in unsafe clinical practice. As such, a single event will warrant immediate probation with suspension of privileges and may be grounds for dismissal.

Dismissal Criteria - Removal from Program
A student may be dismissed from the Nurse Practitioner Program for the following reasons:

- Employment as a nurse practitioner by title or function
- Failure to comply with terms for removal of probationary status communicated to the student by the faculty or Program Director in writing
- Unsafe clinical practice
- Violation of a clinical organizations policy on substance abuse
- Stealing medications, organizations or departmental property for use or sale
- Failure to maintain current licensure as a Registered Nurse
- Revocation of or ineligibility for licensure as a Registered Nurse
- Conviction of a felony
- Receiving a "B or lower" in any clinical course
- Dismissal from Bloomsburg University for any reason

Grievance Procedure
Please refer to Page 63-64 PRP 3592 Academic Grievance Procedure of the Bloomsburg University MSN Handbook:
https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf

Integrity of Scholarship
Please refer to page 74 of the Bloomsburg University MSN Handbook found at:
https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf

Social Media Statement

Supported by the Code of Conduct and Department Code of Professional Conduct

Purpose: To educate students on the impact and implications of social media use on their current and future career as a professional nurse.

Use of social media including but not limited to Facebook, Twitter, Instagram, group texts, Google Docs and the internet, in general, is very clearly an opportunity to communicate with family and friends in your personal life. However, as part of Bloomsburg University, the Department of Nursing and in preparing for a professional, licensed role of a registered nurse it is necessary to be mindful of what you share publicly. The need to be respectful regarding the department, university, affiliated clinical sites and potential future employers is required.

As a student seeking licensure, the nursing student is held to a higher standard as a professional healthcare provider who will protect and care for the public. Just as nursing students are held to the standards of the Health Information Portability and Accountability Act (HIPAA), so too, the laws of illegal substance, underage drinking, and public defamation* apply to the nursing student. This is not intended, in any way, to punish the nursing student but rather prepare students for the professional role that they will assume upon graduation. Should any healthcare organization conduct a review of any candidate they seek to employ and find unfavorable postings in social media, the student may compromise his/her potential employment directly following graduation or in the distant future. Nurses, as well as nursing students, should understand that patients, colleagues, organizations, and employers may view postings: recent or from the past. Therefore, as recommended by the American Nurse Association (ANA): do not make disparaging remarks in any social media format, about patients, employers, or co-workers, even if they are not specifically identified.

Therefore, as a student of the nursing department at Bloomsburg University, inappropriate use of social media may result in disciplinary action and/or dismissal from the program or university. Internet communication allows for embellishment and magnification to "go viral" and personal intentions become irrelevant. Therefore, it is necessary for education in this area and the prevention of said activity.

*Defamation is defined as an act of communication that causes someone to be shamed, ridiculed, held in contempt or lowered in the estimation of the community: it refers to the damage done to a person's reputation. (Glasgow, Dreher and Oxholm, 2012).

Resources:
- American Nurses Association (2019). https://www.nursingworld.org/social
- Glasgow, M., Dreher, H. M., Oxholm, C. (2012). Legal issues confronting today's nursing faculty. FA. Davis: Philadelphia, PA.
- Yoder v. University of Louisville, No. 32009cv00205 (W.D. Ky. 2009)
- Byrnes V. University Johnson County Community College, (D. Kan. 2010)
- McGuire, Tom, Director, Media Relations, Bloomsburg University; personal communication, October 2018 and February 2019.

ACADEMIC ADVISING

Each semester, you should contact your advisor, Dr. Kim Olszewski, to confirm the courses you plan to take in the upcoming semester. She can be contacted at the following email kolszews@bloomu.edu or 1-570-389-4613. Dr. Olszewski is also available to meet with you to discuss your practice experience, interests and goals, as well as the Department of Nursing policies regarding the NP program included in this Handbook and the Graduate Student Nursing Handbook which can be accessed at this link https://intranet.bloomu.edu/documents/nursing/MSN_Handbook.pdf[CJ4]
.

The Program Director will send out a letter to alert students to the need for advisement prior to each semester. This letter will advise all students about dates and times for all courses to be offered in the upcoming semester. Advisement will also include discussion on the master schedule of course offerings and course prerequisites to assist in planning for completion of the program within a targeted timeframe. Your program plan is a schedule of the courses you will take each semester and is either the adult-gerontology primary care (AGPCNP) or family nurse practitioner (FNP) option (see Appendix A for course planning sheets used in advising NP students). All initial program plans must be confirmed with Dr. Olszewski, who keeps an up-to-date database to facilitate course planning. You should request a copy of your course-planning sheet for your own records.

All course registration is done by the Department of Nursing. This ensures that courses you need will be offered when you are scheduled to take them. Students should schedule an appointment to meet with the Program Director at least once a year.

PROGRAM CURRICULA

The NP Program curricula have been designed to meet the learning needs of students pursuing an advanced practice-nursing role in **primary care** at the master's degree level.   Therefore, the courses provide the current knowledge necessary to prepare a safe and competent nurse practitioner for independent practice in primary care in ambulatory care and other community settings. The course sequencing sheets for both the FNP and AGPCNP options in the MSN program can be found in Appendix B. Please refer to these when discussing your trajectory of study with the Program Director.
The clinical courses of the NP program are held synchronous online/on-campus one day a week during the Fall and Spring semesters. Students in a practicum course must be available two other days each week for practicum hours each semester. The Bloomsburg University class schedule for the following semester becomes available by the middle of the current semester (e.g. in mid-October for Spring classes and in mid-March for Summer and Fall classes) so students have three to five months lead time to arrange adjustments to their work and/or child care scheduling.

Coursework

The courses that make up the NP Program represent the theoretical and practicum focuses necessary for providing **primary care** to appropriate age groups in each type of setting (ambulatory and/or community). These courses utilize case studies as well as the traditional lecture/discussion format. Case studies require students to be highly self-motivated, reflective, and active learners. The rationale for the use of case studies is that the most important learning during your NP program are not only the "facts" about the diagnosis and management of common health problems, but the critical reflection, diagnostic reasoning, and clinical judgment skills that underlie clinical care. The knowledge base needed to provide primary care is changing so fast that every clinician needs to become a life-long learner. Case studies facilitate the ability to identify individual

learning needs and efficiently solve problems. Case studies have been demonstrated to be effective in facilitating NP student's ability to develop differential diagnoses and the specific knowledge base and skills needed to practice safely and competently (see Appendix C for case study format guidelines and case study rubric).

Prior to enrollment in Nursing 504, Pathophysiology Across the Lifespan for the Advanced Practice Nurse, students are required to successfully complete an online course pre-requisite requirement on anatomy and physiology. The pre-requisite requirement is adapted from a Bloomsburg University Library resource: Primal Pictures. Primal Pictures has 20 interactive modules covering every body system with accurate and interactive 3D anatomy and media rich physiology content that brings this complex subject to life. The modules also include case studies, geriatric/aging sections, and interactive quizzes. The Primal Picture course modules are located on the Bloomsburg University Library webpage. The link "Databases A-Z", and go to "P" for Primal Pictures. Nursing students are expected to view this material prior to the start of the course. Students are required to take a quiz at the start of the Nursing 504 course to demonstrate adequate knowledge of normal anatomy and physiology. This quiz will be worth 10% of their final grade.

Courses with Practicum Components

The NP clinical management courses (NURSING 508, 515, 516, 517, 529, 534, & 541) provide students with the opportunity to integrate and apply the knowledge base learned in the classroom in a variety of practice settings. The identification of practicum settings and preceptors is a collaborative process between students and faculty. This takes place in advance of enrollment in each clinical management course. Students will work with local health care agencies to identify clinical preceptors, and then work with course faculty to finalize placement. As a reminder, each agency has their own clinical scheduling process!

NP students need to be active, self-directed learners, especially in the practicum component of their program. The clinical management theory course sequence does not always coincide with the knowledge a student needs to have in specific practice settings. Therefore, NP students often need to prepare themselves on their own regarding what they need to know in their clinical placement without waiting until it can be discussed in class. They need to learn early how to search out needed clinical information and the resources (e.g., appropriate clinical management manuals, drug references, etc.) they need to take with them to their clinical experiences for quick reference as necessary.

During each clinical practicum, students develop and nurture advanced practice clinical skills under the guidance and supervision of NP faculty, as well as experienced on-site NP or physician preceptors. For this reason, the selection of practicum sites and preceptors is a very important part of the student's plan of study that requires careful preplanning.

PRACTICUM EXPERIENCE REQUIREMENTS

The amount of practicum time required during the program is a total of 920 clock hours for FNP and 720 clock hours in the AGPCNP. This practicum must take place in direct clinical experience to prepare the graduate for collaborative NP practice. See Appendix C for course descriptions and required practicum hours in each.

Preceptors
The practicum portion of the NP program is often the most intense yet rewarding part of the program. It is a time when the student is testing new skills and knowledge while developing a new advanced practice role. The practicum courses involve integration of the skills of gathering health history data, performing an appropriate

physical examination, using critical thinking skills to arrive at differential diagnoses regarding the clients' health risks and problems, and developing and implementing a comprehensive health promotion and illness management plan. This is the part of the program in which the student learns to operate at a new level of risk taking, develops a new professional self-image and begins to practice in the health care arena as a more advanced provider of comprehensive primary care. All students are expected to demonstrate knowledge, critical thinking, and clinical skills within the practice setting.

Preceptors are experienced primary care providers who volunteer to mentor NP students. This means taking on a responsibility over and above the heavy demands of their health care provider role. In general, students who are in their early clinical semesters require more supervision and mentoring time than those in their final practicums. However, it is a big commitment for any preceptor to make, especially in the current era of cost-cutting and increased productivity expectations in most health care settings. Therefore, both students and faculty need to demonstrate unfailing courtesy and consideration in their interactions with actual or potential preceptors. For example, agreed upon days and times for clinical experiences should not be changed in any way without prior notification and approval of the preceptor. Students should be considerate in all their dealings with their preceptors and, at the end of their experience, send a thank-you note expressing their appreciation for the time and energy the preceptor has invested in their professional development in the NP role. Both faculty and students are important ambassadors for the University and the NP profession in all their contacts with preceptors.

Practicum preceptors may be qualified nurse practitioners and/or physicians from medical center clinics, or private solo or group practice settings. Physician's Assistants may not serve as preceptors. See guidelines for identifying potential preceptors in Appendix D. A signed contract, current preceptor biographical data sheet (and/or curriculum vita), a signed letter of agreement, and any required agency paperwork **must be on file prior to the student entering the first day of practicum experience.**

NP program faculty are available to provide general direction for the identification and selection of preceptors. A master list of preceptors used successfully in the past is kept on file by all faculty. However, there is a continual need to develop new clinical sites/preceptors. We encourage students to identify appropriate preceptors and request that they provide that person's contact information to the faculty. Meetings with nurse practitioners in the community, peer contacts, and colleagues in the work setting are all opportunities for students to identify additional preceptors for practicum experiences. The process of preceptor selection must start at least one semester prior to enrolling in each practicum course. Arrangements for each practicum placement must be completed at least three (3) months prior to the start of that clinical course.

Important Considerations in Developing a Practicum Experience:

1. Practicum courses may not be taken out of sequence and must start with NURSING 508 Lifespan Health Assessment. Students should have completed or can concurrently take with clinical courses the required core courses (NURSING 504 Lifespan Pathophysiology and NURSING 507 Lifespan Pharmacology).

2. NURSING 507 Lifespan Pharmacology is to be taken immediately after taking NURSING 504 Lifespan Pathophysiology

3. By mid-semester, identify possible preceptors for clinical course(s) to be taken the following semester. Consult as necessary with the NP faculty in charge of that course to identify the best preceptor(s) for your learning needs in the clinical course you will be taking the next semester. The lead course faculty member will make the first contact with the agency/preceptor to obtain verbal agreement(s) regarding your placement(s). He/she can thus prevent multiple students from contacting the same preceptor.

4. There **must** be an **official administrative contract** signed and in place for clinical to occur at a site. That is why seeking out practicum sites in advance is imperative, since contracts can take up to 6 months to complete. When the contract is in place and the faculty member confirms that the preceptor is willing to have a student the student will then be notified that he/she can contact this preceptor to make specific arrangements for his/her practicum experiences, including discussing individual learning objectives and arranging days and times for the experience. If a contract is needed please fill out the "Contract Form" (see Appendix D) and return to the faculty assigned to the clinical management course to start the process of developing a contract.

5. A signed letter of agreement for each clinical placement must be on file prior to start of that clinical semester (of which the course faculty initiates); otherwise the student cannot legally begin the clinical experience. No clinical time can be counted toward the required number of clinical hours for the course until the signed written agreement is on file. If a student plans to spend more than one day with an MD/DO or NP at his/her clinical site who is not his/her designated preceptor, the student must contact the faculty so that an additional preceptor letter of agreement can be drawn up and signed.

6. If requested by the potential preceptor (or their agency's administrative team), make an appointment for an on-site meeting to review your nursing experience background/strengths and individual needs/learning objectives for the coming semester, and to assess whether the site and preceptor can enable you to achieve them. Potential days and times for your weekly clinical experiences can also be negotiated at this time. Before meeting with a potential preceptor, it is helpful to prepare a letter of introduction and to be ready to share with the potential preceptor the following:

   a. Your learning objectives for the particular clinical course,
   b. An updated resume with:
      1. A summary of your experience as a RN
      2. Your areas of nursing experience and special competencies. Be prepared to be interviewed, e.g., wear professional attire and be ready to present yourself as a competent nurse and highly motivated and independent learner with the ability to exercise initiative appropriately while being a team player.

7. Students need to take into consideration the following minimum commitments associated with the clinical course semesters so they can plan ahead:
   - NURSING 508 – 60 hours/semester are required and take place in the last 7-8 weeks of the semester. This is due to the fact the student needs to master health history taking and both complete and focused physical examinations prior to starting clinical.
   - NURSING 529 – 60 hours/semester, which take place over a 12-week summer session following NURSING 515.
   - For all other clinical courses (NURSING 515, 516, 517, 534, 541) 200 hours/semester over 15 weeks to complete. This equals approximately 12-16 hours per week or 1.5 -2 full days over the course of the 15 weeks to complete.
   *** Please note the four hours of classroom sessions do not count towards these hours.

8. NP students are visited by NP clinical faculty twice a semester, virtually or in person. As much as possible, we try to arrange site visits on the day(s) students are at their clinical site. When this is not possible, it is important that the faculty and/or student and preceptor can be flexible to arrange for a visit on an alternate day.

9. **Incompletes** in either theory or practicum courses can be allowed only in cases where the majority of requirements have been completed, but unforeseen problems, crises, etc. interfere with a student's ability to meet the remaining course requirements prior to the end of the term and when arrangements are made with the lead course faculty in advance of the end of the semester. Incompletes in a practicum

course must be removed prior to the start of the next clinical course. For example, if a student is granted an incomplete for a Fall practicum course and plans to take the next course in the clinical course sequence the following Spring, the Fall clinical course requirements must be completed satisfactorily and a grade submitted before Spring classes begin. No other clinical course credits can be taken in the meantime.

10. Each student needs to spend the majority of his or her clinical experience time in **general primary care** settings e.g., general pediatrics, family practice, internal medicine, women's health, or geriatric settings seeing a good overall mix of age groups across the lifespan (FNP) or with adults and older adults including the frail elderly (AGPCNP) with a broad range of health promotion, disease prevention, and acute and chronic health problem assessment and management needs.

11. Students should aim for continuity, as well as sufficient variety in their clinical placements. Moving around to too multiple clinical sites during any one semester, and/or over the course of the program will prevent the student from being able to gradually assume the kind of responsibility and accountability for patient care management and gain the collaborative practice skills needed for successful NP practice.

12. Students should complete their hours in one clinical setting per course if possible. It may also be possible to gain more continuity by using the same general primary care site for more than one semester (e.g., the same family practice or internal medicine office or clinic) but no more than two semesters. This is highly recommended if the site is deemed a good learning experience mutually by faculty and student and can provide access to appropriate clients for both courses.

13. In family practice settings, a majority of the patient's students see should be inclusive of the age range in the concurrent clinical management theory course. However, students can see some patients in other age groups that prior clinical management semesters have addressed. In addition, students should aim to have experience in a variety of types of settings (e.g., private practices, HMOs, community clinics, hospital-based clinics, etc.) over the course of their program.

14. Each student should work with both NP and physician preceptors over the course of the program so as to work directly with NP role models and have the opportunity to develop skill in interdisciplinary collaboration with physicians. Physician Assistants may not serve as preceptors.

15. Practicum placements must be arranged during Monday-Friday daytime hours (e.g. between 8 AM-5 PM) with rare exceptions. There are two main reasons for this: 1) primary care experiences are very difficult to access in the evenings and on weekends; and 2) faculty are not expected to make clinical site visits during evening or weekend hours. There may be rare exceptions to this policy and a faculty member must be willing to make the required clinical supervision visits during these off hours. Such placements require the special approval of the faculty. <u>For legal reasons, and to assure NP faculty availability for supervision, clinical days must be scheduled within the dates of the term for which the student is registered for each clinical practicum.</u> Practicum experiences are usually scheduled on a continuing basis throughout the term for which the student is enrolled in each clinical course to allow for maximum opportunity to integrate classroom learning with clinical application. However, there can be some flexibility in special circumstances. If any student has a justifiable need to complete the experience within a shorter time frame during the semester, he/she should obtain approval from the faculty.

16. Students must have at least two-three days free a week for daytime practicum experience each semester once they start taking the clinical management course sequence. A student who has no flexibility to arrange practicum days during the week cannot complete the practicum portion of the program. Students need to plan for this with their families and employers as necessary and explore all possible options.

17. Students may not use their worksites or relative's practices for practicum experiences, even if the patient population, etc. is appropriate. This causes role confusion for the student and the staff in that setting and experience has shown that this does not usually provide an appropriate learning environment.

The expectation is that students will progress from requiring close supervision in the first full practicum semester (NURSING 515 Diagnosis and Management of the Adult & Aged I) to seeing a full load of clients in the final practicum semesters (NURSING 534 Adult Gerontology Primary Care Nurse Practitioner Seminar or NURISNG 541 Family Primary Care Nurse Practitioner Seminar) independently (with support from the preceptor).

*Please refer to the MSN Progression Policy in the MSN Handbook

The following are expectations delineated to the clinical level of student. Each builds on the prior:

First Clinical Semester (Nursing 515)
- Gather comprehensive health history
- Accurately conduct physical examination appropriate for comprehensive and focused examinations
- Utilize additional resources to gather pertinent information (family members, medical records, etc.)
- Beginning development of differential diagnosis for presenting the problem
- Beginning suggestions for ordering diagnostic testing relevant to presenting problem
- Beginning suggestions for evidenced-based interventions and referrals for presenting problems
- Complete, legible, and accurate SOAP documentation
- Articulation of the role of the nurse practitioner
- Prioritization of presenting patient problems and clinical findings
- Use of practice guidelines and other resources in the care of the patient
- Maintenance of patient confidentiality
- Professional behavior, demeanor, and presentation

Second Clinical Semester (NURSING516) Through the Semester Prior to Final Semester NURSING 516 or 517)
- Improvement in use of time and resources
- Increased efficiency in obtaining history and physical examination
- Differential diagnosis obtained with less input from preceptor
- Greater depth and breadth of clinical knowledge
- Improved ability to prioritize and coordinate care
- Greater comfort with presentation of cases to preceptor and/or consultants

Final clinical semester (NURSING 534 or NURSING 541)
- Performs all role functions in efficient, organized, and independent manner
- Demonstrates professionalism and grasp of nurse practitioner role
- Engages in interdisciplinary collaboration and consultation

HESI Examination Upon completion of the final clinical courses in both the Adult Gerontology Primary Care or the Family Nurse Practitioner programs, the student will take a comprehensive examination based on the American Nurses Credentialing Center National Examination and the American Academy of Nurse Practitioner Certification Examination. This examination will not be included as part of the final course grade of NURSING 534 or 541 but must be taken at the conclusion of the final clinical course. It is anticipated that the examination will mirror the multiple-choice format used in the national certification examination. The comprehensive examination will meet both the Department of Nursing and University guidelines for a culminating event for non-thesis master's degree programs.

Pass = attaining at least a HESI score of 750

Failure to obtain a 750 or higher on the HESI exam will require that the student provide documentation that they registered and attended a <u>live</u> review course. Audio, book, or online review courses will not be accepted.

CLINCIAL ATTIRE & EQUIPMENT

Advanced Practice Nursing Students at Bloomsburg University should present themselves in a professional manner when in their clinical practicum sites. The following dress code has been established for all NP students.

1. Identification badge with name and Bloomsburg University displayed. Some facilities require both student and facility badges or may allow either student or facility.

2. Business casual dress. In alignment with the professional attire requirements, at no time should offensive or derogatory remarks be present on any article of clothing worn. No jeans, cutoffs, flip flops, low necklines or short tank tops.

3. Lab coat may be worn depending on the culture of the clinical setting.

4. Clean, low-heeled, leather shoes, with closed toes and closed heels. Clogs must have a closed back. No sandals or flip-flops.

5. Jewelry: Only wedding or simple rings and limited to one per hand. No piercings (no tongue/body jewelry/ear gauges) or jewelry/hardware may be evident other than one small stud earring per ear. No bracelets.

6. Hair color must fall within natural occurring shades, be neat, and if long enough to rest on shoulders it must be secured back. Facial hair must be neatly trimmed.

7. Tattoos must always be covered in the clinical & community setting.

8. Fingernails must be trimmed short. Light or clear polish without chips is acceptable. No artificial or acrylic nails or components thereof are permitted.

9. Make up is to be worn in moderation.

10. No perfumes or scented lotions. Attendance to personal hygiene is required

Required Equipment: A high quality stethoscope will make a significant difference in your ability to discriminate higher and lower pitched breath, heart, and abdominal sounds (e.g., a genuine Littman or Sprague-Rappaport stethoscope with diaphragm and bell). Much cheaper imitations are available, some of which approximate to some extent the sound quality of genuine Littman or S-R stethoscopes and some of which do not--so try to make a wise investment for the long term! There are now some high-tech models that provide increased amplification of breath, heart and abdominal sounds.

In addition, it is essential both to yourself and the NP clinical faculty, and therefore mandatory, that you have a voice mail, phone answering machine, and email address in operation during your clinical semesters. This makes it much easier for faculty to communicate with you in a timely manner and saves a lot of time that

otherwise needs to be spent playing telephone tag with students.

Books: Since the price of books continues to escalate, the NP faculty make every effort to require and recommend only the best and latest editions of textbooks for each of the NP courses to keep the cost reasonable. These texts are an important investment; they will comprise the beginning of a professional resource collection that you will need to continue building after you finish the program. Many resource texts will be useful in more than one course. It is not required for text to be eBook therefore the decision to buy an electronic textbook is fully the student's decision.

REQUIRED DOCUMENTS FOR CLINCIAL

All NP students must meet specific health and professional criteria before they can begin the clinical coursework and then each year while in clinical coursework. This policy assures practicum facilities that BU NP students meet minimum standards regarding health, liability, and licensure/certification.

Each student is responsible for having their required documents with them on each clinical day should the clinical agency request them. Only the student can request a copy of the required documents from the Department of Nursing. The Department of Nursing will not provide required documents to a clinical agency.

The following documents are required prior to starting the initial clinical course NURSING 508 Lifespan Health Assessment. All forms required for the following can be found under the MSN Student Handbook starting on page 86 http://www.bloomu.edu/documents/nursing/MSN_Handbook.pdf

Professional Resume/CV – this should include your educational experience and work experience as an RN along with any professional organizations or community service you perform.

Criminal background check - (Choose Dept. Of Human Services). This must be completed on a yearly basis.

Child abuse clearance - This must be completed on a yearly basis.

Fingerprinting - via Indentogo Code: **1KG756 - DHS-Employee >=14 Years Contact w/ Children** – This must be completed on a yearly basis.

10 Panel Drug Screen - All students must verify a negative ten (10)-panel drug (this is not a rapid drug test) screen to enter practicum. You cannot use a "recent" drug screen from a current job this needs to be performed specifically for your schooling. The 10- panel drug screen is required annually.

Health Requirements: Proof of immunization (or titer) for influenza (if applicable to the organization in which clinical occurs), measles (rubeola), mumps, rubella, pertussis, varicella, diphtheria, TdaP, hepatitis B, physical examination and tuberculin skin test or chest x-ray is required prior to beginning clinical courses and each year there after, A form to document physical exam is available in the Graduate Student Handbook. http://www.bloomu.edu/documents/nursing/MSN_Handbook.pdf . If any health requirements are not up-to-date, the student will not be allowed to begin practicum. Should the student elect not to have the influenza immunization they will need to follow the policy of the clinical institution for staff that decline influenza vaccination. Any NP student who has a potentially communicable illness (including colds and flu) should not go to clinical. If in doubt, confer with preceptor. The form is to be completed and sent to the Department of Nursing **Documentation of physical exam and 2 Step TB screening/QuantiFERON-TB Gold Test/T-Spot is required annually throughout the student's program.**

Proof of Health Insurance: All NP students must hold active health care insurance and make available a copy of the coverage for verification.

RN Licensure: All NP students, must hold an active **up to date** RN license in Pennsylvania. It is the student's responsibility to provide an updated RN License to the Department of Nursing each time it is renewed.

BLS Certification: All NP students are required to hold a current Basic Life Support (BLS) certification by the American Heart Association and should provide documentation of this. Any student who does not have current BLS certification must obtain it prior to enrolling in any clinical course.

Malpractice Insurance: All students must acquire their own malpractice insurance listed as a "Student Nurse Practitioner" in their specialty, either family or adult gerontology primary care nurse practitioner. Your RN malpractice insurance **will not** suffice. The malpractice insurance must be in place and dated prior to beginning practicum and be a minimum of $1,000,000 to $6,000,000. It needs to be renewed **yearly** and the student will be responsible for providing a renewed copy of the policy to the Department of Nursing. There are two insurance companies recommended by the faculty: Nurses Service Organization http://www.nso.com/ or MARSH Insurance Group https://www.marsh.com/ca/en/services/financial-professional-liability/professional-liability.html

HIPAA Training: All Nurse Practitioner Students will be required to complete annual HIPPA training. This training will be provided in a self-directed learning module as outlined by the Graduate Nursing Department.

https://www.healthit.gov/providers-professionals/guide-privacy-and-security-electronic-health-information

Please note a student may be removed from the clinical experience at any time for unsafe or unprofessional behavior, which violates the Departmental Code of Academic and Professional Conduct. Students may also be dismissed from a clinical site for a violation of agency policy by the agency itself as referenced in the Graduate Nursing Handbook http://www.bloomu.edu/documents/nursing/MSN_Handbook.pdf[CJ5]

In summary, the clinical practicum is a key component of the NP Program. Applying theory to practice, developing collegial relations with other health care providers, experiencing risk-taking, and gaining knowledge and skill as a provider of primary health care are all part of preparing for advanced nursing practice in ambulatory care settings. Early and individualized consultation between the student and his/her faculty following admission and each semester while the student is in the program is recommended. Periodic faculty advisement regarding course registration and long-range planning for practicum selection is an important and necessary prerequisite for meaningful clinical learning experiences.

REQUIRED CLINCIAL PAPERWORK
Record of Clinical Experiences: A Clinical file is initiated for each NP student beginning in NURSING 508 Lifespan Health Assessment and added to during each subsequent clinical semester. This file will be kept within an electronic tracking system. They contain the following documents:

1. Student's Individual Learning Objectives for each semester (beginning and end).
2. Summary of Clinical Hours via the tracking system software for each semester and then total program clinical hours to be handed in at the final clinical course.
   > ***clinical time is the time spent directly with the clinical preceptor and does not include travel or preparation time.**
3. Clinical Log Summary, which is a reflection on clinical experiences for the clinical week. This log will be signed by your clinical preceptor to verify hours.
4. SOAP notes as required by the clinical course.

You need to keep your own files updated in the tracking system, but each student is responsible for submitting a

copy of the required materials to his/her faculty by the end of each clinical week for inclusion in his/her file. Your course grade will not be posted until these materials are filed.

Clinical Logs: The NP program requires all students to purchase the required online application to electronically document clinical logs and journals and is compatible on most smartphones, Apple iPhone, iPad, iTouch, any laptop, or PC/Mac. Purchasing a mobile device is optional but suggested as it serves as a tool for accessing up-to-date clinical reference information in the clinical settings. Entries are required for each patient you see during each clinical day throughout the program. An orientation to completing clinical log entries will be provided in your first clinical course. You are expected to submit reports of your clinical hours and patient encounter types (DM, COPD, URI, etc.) to your clinical instructor weekly and a summary of total hours and types of patient encounters at the end of the semester

*clinical time is the exact time in practice (may include case discussion, rounding with preceptor). Time driving and preparation for clinical are not to be included. Students will provide a printed copy of clinical hours signed by their preceptor(s) at the completion of their clinical hours.

Reflections on Clinical Experience: The purpose of your narrative reflections in the clinical summary for each clinical course is to facilitate your learning and integration of all aspects of the NP role. *"Clinical Log Summary"* on your clinical experience can be found in Appendix F and can be used to jog your thinking about what were the most important aspects of that days experience on which to reflect in relation to your learning goals. Each log entry should be a minimum of two to three substantive, multi-sentence paragraphs. These are to be entered into the electronic tracking system on a weekly basis along with the patient log.

SOAP Guidelines: Criteria for writing and evaluating SOAP notes are distributed to each NP student in NURSING 508 Lifespan Health Assessment (see Appendix E for evaluation criteria). Students are required to submit to their clinical faculty SOAP notes weekly, per course requirements. **NOTE:** It is a HIPPA violation to remove, copy, or photograph any aspect of a patient's chart and remove it from the clinical agency. If this violation occurs it is grounds for dismissal from the NP program.

PROCESS FOR STUDENT EVALUATION BY NP FACULTY & PRECEPTOR
Once students enroll in a clinical course, they are mentored and evaluated by their APN (NP or CNM) or MD/DO preceptor and a BU clinical faculty who is assigned to them at the beginning of each semester. Students will meet their clinical faculty during the first class of the semester. Faculty are experienced NPs who grade the student's written work (SOAP notes, clinical logs, and reflections; in general, faculty will review the student's written work within one week). Students are encouraged to consult with faculty by e-mail about their progress throughout the semester. In the event that a student encounters challenges that have the potential to make it difficult for them to successfully meet the clinical objectives for the course, the student is responsible for initiating communication with the faculty in order to raise awareness and promote mutual discussion of potential resolutions.

Faculty also maintain contact with students and preceptors throughout the semester to determine whether the student's learning needs are being met in their clinical setting and to monitor the student's clinical progress. This includes a mid-term evaluation and a final clinical evaluation (see your clinical faculty for copy of the clinical evaluation). Visits to student clinical practice sites are completed twice a semester by faculty. One of these visits may be completed by a virtual method and is to include both preceptor and student. Midterm and final evaluations of clinical progress will be complete to evaluate the clinical site, preceptor-student relationship, and student progress. Virtual visits may include online (ie: Skype, Zoom) or speaker phone.

During these visits, faculty provides the student with teaching, mentorship, and supervision during patient encounters. This process is collegial with the recognition by faculty that the NP student is an adult learner who

is capable of critical self-reflection, open to constructive feedback, and responsible for his or her own learning. Expectations for clinical performance correlate with the stage of the student's learning, with greater clinical expertise anticipated as the student progresses through the NP program specific sequence of coursework.

At the end of each clinical semester, each student's Preceptor(s) also completes a written evaluation of his/her performance and progress. The preceptor is asked to review this with the student before sending it to the student's faculty.

If any changes occur in the clinical setting that could interfere with the site offering a positive and appropriate learning experience for the student, he/she should inform his/her faculty as soon as possible.

OPPORTUNITIES FOR LEARNING EXPERIENCES RELATED TO SPECIAL ADVANCED TECHNICAL PROCEDURES (MICROSCOPY, BASIC X-RAY INTERPRETATION & SUTURING)
The NP faculty include as much experience in advanced technical procedures as possible within the NP curriculum. We recommend that students who anticipate needing preparation in these skills immediately upon graduating from the NP Program (beyond what is included in the program) should seek continuing education opportunities in these areas while they are enrolled in the NP Program. It is our experience that when these skills are not used regularly they are lost and if they are needed in the future you will need to be retooled in them anyway. NP Program alumnae who later find that they need further preparation in particular technical skills can seek appropriate formal or informal continuing education opportunities at that time. Those who choose to seek this preparation and include performance of any or all of these skills in their future NP practice, need to be aware that they will be held legally accountable for obtaining the appropriate level of preparation for performance of them according to protocols and/or community standards of practice.

The NP program provides both basic x-ray interpretation seminar and a suturing seminar within the last year prior to the student's graduation.

NP JOB OPPORTUNITIES, CE PROGRAMS, AND PROFESSIONAL ORGANIZATIONS
Information concerning employment opportunities, CE programs, and professional organizations are emailed to students by the program faculty as they become available. National NP job postings are available at the American Academy of Nurse Practitioner website Recent Jobs - AANP JobCenter | NP Jobs and Pennsylvania employment opportunities are posted on the Pennsylvania Coalition of Nurse Practitioner website http://www.pacnp.org/networking/

It is also highly recommended that you join the Pennsylvania Coalition of Nurse Practitioners (PCNP). They offer a student rate and this rate lets you attend and be part of the "Greater Susquehanna Valley Nurse Practitioners" which encompasses a seven county region in the Susquehanna Valley (Montour, Columbia, Snyder, Union, Northumberland, Lycoming, Schuylkill counties). If you live in the Philadelphia, Lehigh Valley, or Scranton/Wilkes Barre region(s) you can then join your local NP group as well. As a student these groups are a great networking resource for clinical sites, CEU's and eventually job placement. You can become a member of PCNP at https://www.pacnp.org/

CERTIFICATION & STATE BOARD OF NURSING INFORMATION

NP program graduates will need to seek credentials from the Pennsylvania State Board of Nursing or the state in which they plan to relocate to. Upon graduation if you plan on remaining in the state of Pennsylvania to practice

you will be required to have national certification from a professional certifying body.

Certification Bodies and State Board Information:
You will need an official BU transcript sent to whatever certifying body examination you decide to take. Please know that if a May graduate, transcripts are often not complete and sent until late May or early June and if you are a December graduate transcripts are not sent until the university reopens after the holiday break in early January. Both certifying bodies listed below allow early registration and you can pre order transcripts to be sent as soon as possible.

American Nurses' Association Certification: The Family and Adult-Gerontology -Primary Care NP Programs meet the guidelines for the graduates to sit for the ANCC (American Nurses Credentialing Corporation) Family NP and Adult-Gerontology Primary Care NP, certification examinations respectively. National Certification is required for practice as an NP in PA and to be eligible for direct Medicare reimbursement in all states. ANCC exams have been computerized since 1999 and can be taken at designated test sites throughout PA at any time by appointment. The link to their website is American Nurses Credentialing Center | ANCC (nursingworld.org)

American Academy of Nurse Practitioners (AANP) Certification: The Family and Adult- Gerontology Primary Care NP Programs meet the guidelines for graduates to sit for the AANP Family or Adult-Gerontology Primary Care NP certification exams respectively. The AANP exams can be taken at designated test sites throughout PA at any time by appointment. The link to their website is The American Academy of Nurse Practitioners Certification Board (aanpcert.org)

State Board of Nursing Information for Nurse Practitioners in PA:
The Pennsylvania State Board of Nursing (BON) reviewed and approved our updated and revised FNP and AGPCNP Programs in Fall of 2013. This indicates that the curriculum and support services of the program meet the state requirements. BON approval enables graduates of our NP program to apply to the BON for the privilege to be a nurse practitioner in Pennsylvania once national certification is obtained.
The Pennsylvania BON grants CRNPs authority to practice and regulates their practice. A CRNP performs the expanded role in collaboration with a physician. Collaboration is defined as a process in which a CRNP works with one or more physicians to deliver healthcare services within the scope of the CRNP's expertise. The CRNP's scope of practice (SOP) is defined in statutes and regulations. CRNPs are recognized as Primary Care Providers (PCPs) by the Department of Public Welfare and many insurance companies, but there are some managed-care companies who do not recognize CRNPs as PCPs. The Pennsylvania Department of Health Regulations authorizes a hospital's governing body to grant and define the scope of clinical privileges to individuals with advice of the medical staff.

Only applicants who have completed an accredited Nurse Practitioner program, who are currently certified as a nurse practitioner from a Board-recognized national certification organization (noted above), and who hold an active unrestricted Registered Nurse license in the Commonwealth of Pennsylvania may apply. If you do not meet these requirements, you may not complete the online application. The link to the online application is located on the PA SBON PALS website.

Please note: There is a form within the on-line application titled "VERIFICATION OF NURSE PRACTITIONER PROGRAM" (proof from school of program completion). Do **NOT** send this form into the SBON. This form is completed by the NP Program Director at BU, notarized and sent via US mail to the SBON upon completion of all requirements of the NP program.

It can take anywhere from 4-10 weeks after the date the degree is granted to receive your certificate from the BON. During this interim you may not use the title CRNP nor can you practice as an NP. Do not call yourself

an NP or put those initials on any signs or business cards until you have your certificate/license from the BON.

SBON Prescriptive Authority Privileges in PA:
The BON confers prescriptive authority, including Schedules II-V controlled substances, to CRNPs with a collaborating physician. Regulations allow a CRNP to prescribe and dispense drugs if the CRNP has successfully completed a minimum of 45 hours of course work specific to advanced pharmacology and if the prescribing and dispensing is relevant to the CRNP's area of practice, documented in a collaborative agreement, and not from a prohibited drug category and conforms with regulations. The CRNP may write a prescription for a Schedule II controlled substance for up to a 30-day supply. CRNPs may prescribe Schedules III-IV medications for up to a 90-day supply; Schedule V is not restricted. CRNPs are authorized to request, receive, and dispense pharmaceutical sample medications. Prescription blanks must include the name, title, and Pennsylvania certification number of the CRNP. The collaborative agreement is a signed, written agreement between the CRNP and a collaborating physician in which they agree to the details of their collaboration including the elements in the definition of Collaboration. This privilege may be applied for any time after receiving your CRNP certification from the SBON. Knowledge of the current law regulating nurse practitioners functioning in this capacity is the responsibility of each graduate. The link can be found at http://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/Nursing/Documents/Applications%20and%20Forms/CRNP%20application%20for%20prescriptive%20authority.pdf

There is a form within the prescriptive authority application titled "VERIFICATION OF ADVANCED PHARMACOLOGY" and "VERIFICATION OF OPIOID EDUCATION". Do **NOT** send these forms into the SBON. These forms are completed by the NP Program Director at BU, notarized, and sent via US mail to the SBON upon completion of all requirements of the NP program.

DEA Application
The Federal Drug Enforcement Administration (DEA) monitors all healthcare providers who write prescriptions for controlled substances. NPs in Pennsylvania are now able to obtain a DEA registration number as noted above. The link to the DEA application is
https://www.deadiversion.usdoj.gov/webforms/jsp/regapps/common/newAppLogin.jsp

PROGRAM EVALUATION
The evaluation process for the NP Program options includes obtaining input regarding the program curriculum, faculty, clinical agencies, and students. This process assists the Department of Nursing to: 1) keep its programs focused on the health trends in society, with curricula that address the major health problems of the population, 2) assess faculty strengths, 3) monitor the students' progression through the program, and 4) identify areas where program improvement is needed.

Internal Review:
The NP Program is comprehensively evaluated by the faculty every 1-3 years and fully evaluated every 5 years. NP students are encouraged to take part both as current students and later as alumni. The curriculum is evaluated as part of the program. In addition, individual courses are evaluated each semester. Faculty, likewise, are evaluated by students enrolled in their courses each semester and by their peers through the Professional Development, Tenure, Promotion and/or 5 -year review committees.

Students:
Students' performance is evaluated in each course as they progress through the program. The evaluation covers both theoretical learning as well as the application of clinical knowledge and the demonstration of clinical skills

both at mid-term and at the conclusion of the program. Both clinical faculty and preceptors evaluate each student in each succeeding semester of enrollment in clinical courses. Performance expectations increase with each successive clinical management semester. These evaluations are maintained in each student's file. Acceptable progress in clinical performance must be demonstrated throughout the program in order to graduate. Refer to the Graduate Nursing Handbook for the grading policy regarding the minimum overall GPA that must be maintained.

Course/Faculty/Clinical Setting:

At the end of each semester, students are asked to evaluate each course, the classroom, and both theory and clinical faculty who taught it. This is another part of program evaluation that is ongoing in the Department of Nursing. The data are reviewed, and changes are made when they are feasible and will strengthen the course/program. Again, the lead faculty member will distribute the course and faculty evaluations at the completion of the course.

Preceptor/Site Evaluation: At the end of each clinical semester, **every** NP student must fill out a preceptor site *Evaluation Form* for each preceptor/site where he/she has had practicum experience. This completed form should be given to the lead course faculty member. It does not belong in the student's clinical file. This feedback provides important information to guide future clinical placement decisions. Students must also evaluate their clinical course and both seminar and clinical instructors. The lead faculty member will distribute the preceptor/site evaluation for completion at the end of the clinical practicum rotation each semester.

Alumnae/Alumni:

Within 12 months of graduation as well as 3 years post-graduation, NP Program alumni will receive a questionnaire requesting information concerning their initial NP position after graduation and certification status. This provides essential information regarding program outcomes for evaluation of our NP Program and for the purposes of responding to national NP education surveys and seeking federal or state funding for program development.   It is crucial that each alumnus complete and return this questionnaire so that our recent alumni database is complete!

External Review

Accrediting Bodies:

In Fall 2011 the Department of Nursing's programs (BSN and MSN) were approved by the Commission on Collegiate Nursing Education (CCNE) and granted full accreditation to the for the maximum period of 10 years (through October 2021). The Nurse practitioner programs are also approved by the State Board of Nursing of Pennsylvania and are evaluated every year and require a compliance report to the SBON every three years.

FINANCIAL ASSISTANCE AVAILABLE TO NP STUDENTS

Many forms of financial aid exist for college students. These include sources from within Bloomsburg University and those provided by various private and public agencies. We encourage you to explore any all options with the Financial Aid Office at http://www.bloomu.edu/aid .

APPENDICES

Appendix A
Course Planning Sheets

MSN PROGRAM
COURSE PLANNING FOR ADULT-GERONTOLOGY PRIMARY CARE NURSE
PRACTITIONER

STUDENT: _____   FT/PT (circle)

ADVISOR: _____   DATE BEGAN: _____

I. Core Courses: (24 Credits)   Date Taken

NURSING 501 Theoretical Bases for Role Development in Advanced
Nursing Practice (3 crs.)   _____

NURSING 502 Epidemiology: Concepts for Advanced Nursing Practice
(3 crs.)   _____

NURSING 503 Bases of Research for Advanced Nursing Practice (3 crs.)   _____

NURSING 504 Pathophysiology Across the Lifespan for the Advanced
Practice Nurse (3 crs.)   _____

NURSING 507 Pharmacology Across the Lifespan for the Advanced
Practice Nurse (3 crs.)   _____

NURSING 508 Lifespan Health Assessment and Promotion for Advanced
Nursing Practice (6 crs.) (60 clinical hours)   _____

NURSING 520 Community Assessment and Planning (3 crs.)   _____

II. Clinical Sequence: (21 Credits)

NURSING 515 Diagnosis and Management of the Adult & Aged I
(6 crs.) (200 clinical hours)   _____

NURSING 529 Comprehensive Assessment of the Older Adult
(3 crs.) (60 clinical hours)   _____

NURSING 516 Diagnosis and Management of the Adult & Aged II
(6 crs) (200 clinical hours)   _____

NURSING 534 Adult-Gerontology Primary Care Practicum & Seminar
(6 crs.) (200 clinical hours)   _____

TOTAL CREDITS = 45

Revised 12/00, 8/10, 6/11, 7/12, 6/13

BLOOMSBURG UNIVERSITY
Bloomsburg, Pennsylvania
Department of Nursing

MSN PROGRAM
COURSE PLANNING FOR FAMILY PRIMARY CARE NURSE PRACTITIONER PROGRAM

STUDENT: _____   FT/PT (circle)
ADVISOR: _____   DATE BEGAN: _____

I. Core Courses: [27] Credits)   Date Taken

   NURSING 501 Theoretical Bases for Role Development in Advanced
          Nursing Practice (3 crs.)   _____

   NURSING 502 Epidemiology: Concepts for Advanced Nursing Practice
          (3 crs.)   _____

   NURSING 503 Bases of Research for Advanced Nursing Practice (3 crs.)   _____

   NURSING 504 Pathophysiology Across the Lifespan for the Advanced   _____
          Practice Nurse (3 crs.)

   NURSING 507 Pharmacology Across the Lifespan for the Advanced   _____
          Practice Nurse (3 crs.)

   NURSING 508 Lifespan Health Assessment and Promotion for Advanced   _____
          Nursing Practice (6 crs.) (60 clinical hours)

   NURSING 520 Community Assessment and Planning (3 crs.)   _____

   NURSING 522 Family Theory Across the Lifespan (3 crs.)   _____

II. Clinical Sequence: [27] Credits)

   NURSING 515 Diagnosis and Management of Adult and Aged I   _____
         (6 crs.) (200 clinical hours)

   NURSING 529 Comprehensive Assessment of the Older Adult   _____
         (3 crs.) (60 clinical hours)

   NURSING 516 Diagnosis and Management of Adult and Aged II   _____
         (6 crs.) (200 clinical hours)

   NURSING 517 Diagnosis and Management of Children & Preg. Women   _____
         (6 crs.) (200 clinical hours)

   NURSING 541 Family Practicum and Seminar
         (6 crs.) (200 clinical hours)   _____

TOTAL CREDITS = 54

Revised 12/00, 8/10, 6/11, 7/12

Appendix B
Sequencing Sheets

Adult-Gerontology Primary Care Nurse Practitioner Program (AGPCNP)
Full-Time Sequence of Study

	FALL	SPRING	SUMMER
Yr 1	NURSING 504 Pathophysiology Across the Lifespan for the Advanced Practice Nurse 3 cr. NURSING 508 Lifespan Health Assessment & Promotion for the Advanced Practice Nurse (60 clinical hours) 6 cr. NURSING 501 Theoretical Bases 3 cr. TOTAL 12 cr.	NURSING 507 Pharmacology Across the Lifespan for the Advanced Practice Nurse 3 cr. NURSING 515 DX & MG Adult & Aged I (200 clinical hours) 6 cr. TOTAL 9 cr.	NURSING 529 Comp Assess of Older Adult (60 clinical hours) 3 cr. TOTAL 3 cr.
Yr 2	NURSING 503 Bases of Research 3 cr. NURSING 516 DX & MG Adult & Aged II (200 clinical hours) 6 cr. NURSING 520 Community Assess & Planning 3 cr. TOTAL 12 cr.	NURSING 502 Epidemiology 3 cr. NURSING 534 ANP/GNP Practicum & Seminar (200 clinical hours) 6 cr. TOTAL 9 cr.	

.

Part-Time Sequence of Study

	FALL	SPRING	SUMMER
Yr 1	NURSING 501 Theoretical Bases for Development in Adv. Nursing Practice 3 cr. NURSING 520 Community Assessment and Planning 3 cr. TOTAL 6 cr.	NURSING 503 Nursing Research for Advanced Nursing Practice 3 cr. NURSING 502 Epidemiology: Concepts and Principles for Adv. Nursing Practice 3 cr. TOTAL 6 cr.	
Yr 2	NURSING 504 Pathophysiology Across the Lifespan for the Advanced Practice Nurse 3 cr. TOTAL 3 cr.	NURSING 507 Pharmacology Across the Lifespan for the Advanced Practice Nurse 3 cr. TOTAL 3 cr.	
Yr 3	NURSING 508 Lifespan Health Assessment & Promotion for the Advanced Practice Nurse (60 hours of clinical) 6 cr. TOTAL 6 cr.	NURSING 515 DX & MG Adult & Aged I (200 clinical hours) 6 cr. TOTAL 6 cr.	NURSING 529 Comp Assess of Older Adult (60 clinical hours) 3 cr. TOTAL 3 cr.
Yr 4	NURSING 516 DX & MG Adult & Aged II (200 clinical hours) 6 cr. TOTAL 6 cr.	NURSING 534 ANP/GNP Practicum & Seminar (200 clinical hours) 6 cr. TOTAL 6 cr.	

NOTE: For students able to take only a single course per semester, the program would be lengthened by one year.

TOTAL CREDITS FOR AGPCNP Program = 45   Clinical hours total = 720

REVISED 6/02, 7/12, 9/12

Family Nurse Practitioner Program (FNP)
Full-Time Sequence of Study

	FALL	SPRING	SUMMER
Yr 1	NURSING 504 Pathophysiology Across the Lifespan for the Advanced Practice Nurse 3 cr. NURSING 508 Lifespan Health Assessment (60 clinical hours) 6 cr. NURSING 501 Theoretical Bases 3 cr. TOTAL 12 cr.	NURSING 507 Pharmacology Across the Lifespan for the Advanced Practice Nurse 3 cr. NURSING 515 DX & MG Adult & Aged I (200 clinical hours) 6 cr. NURSING 522 Family Theory Across the Lifespan 3 cr. TOTAL 12 cr.	NURSING 529 Comp Assess of Older Adult (60 clinical hours) 3 cr. TOTAL 3 cr.
Yr 2	NURSING 503 Bases of Research 3 cr. NURSING 516 DX & MG Adult & Aged II (200 clinical hours) 6 cr. TOTAL 9 cr.	NURSING 502 Epidemiology 3 cr. NURSING 517 DX & MG of Children and Pregnant Women (200 clinical hours) 6 cr. TOTAL 9 cr.	
Yr 3	NURSING 541 Family Practicum & Seminar (200 clinical hours) 6 cr. NURSING 520 Community Assess & Planning 3 cr. TOTAL 9 cr.		

Part-Time Sequence of Study

	FALL	SPRING	SUMMER
Yr 1	NURSING 501 Theoretical Bases 3 cr. NURSING 520 Community Assess and Planning 3 cr. TOTAL 6 cr.	NURSING 503 Bases of Research 3 cr. NURSING 502 Epidemiology 3 cr. TOTAL 6 cr.	
Yr 2	NURSING 504 Pathophysiology Across the Lifespan for the Advanced Practice Nurse 3 cr. TOTAL 3 cr.	NURSING 507 Pharmacology Across the Lifespan for the Advanced Practice Nurse 3 cr. NURSING 522 Family Theory 3 cr. TOTAL 6 cr.	
Yr 3	NURSING 508 Lifespan Health Assessment (60 hours of clinical) 6 cr. TOTAL 6 cr.	NURSING 515 DX & MG Adult & Aged I (200 clinical hours) 6 cr. TOTAL 6 cr.	NURSING 529 Comp Assess of Older Adult (60 clinical hours) 3 cr. TOTAL 3 cr.
Yr 4	NURSING 516 DX & MG Adult & Aged II (200 clinical hours) 6 cr. TOTAL 6 cr.	NURSING 517 DX & MG of Children and Pregnant Women (200 clinical hours) 6 cr. TOTAL 6 cr.	
Yr 5	NURSING 541 FNP Practicum & Seminar (200 clinical hours) 6 cr. TOTAL 6 cr.		

TOTAL CREDITS FOR FNP Program = 54 credits   Clinical Hours 920 hours

REVISED 6/02, 7/12, 9/12, 11/12

Appendix C
Course Descriptions

Adult Gerontology Primary Care Nurse Practitioner (AGPCNP) Program

NURSING 515 Diagnosis and Management of the Adult and Older Adult I

(6 credits- 200 hours clinical)

Focuses on the diagnosis and management of health problems in young adults (including late adolescents and emancipated minors}, adults, and older adults (including young-old and old-old adults} in the primary care setting. Emphasis is placed on developing knowledge related to the most common diagnoses and health problems across the entire adult-older adult age spectrum in primary care. These include, but are not limited to, cardiac, respiratory, endocrine, mental health, and renal diagnoses and problems. In addition, the course addresses issues related to the role of the nurse practitioner and provides opportunities to discuss these as the student begins the transition to this advanced practice nursing role in primary care. Prerequisites: NURSING 502, NURSING 507, NURSING 508

NURSING 516 Diagnosis and Management of the Adult and Older Adult

(6 credits- 200 hours clinical)

Focuses on the diagnosis and management of health problems in young adults (including late adolescents and emancipated minors), adults, and older adults (including young-old and old-old adults). Emphasis is placed on developing knowledge related to the most common diagnoses and problems across the entire adult-older adult age spectrum in primary care. These include, but are not limited to, ears, eyes, nose, throat, abdomen, neurological, musculoskeletal, and reproductive diagnoses and health problems. In addition, the course addresses issues related to the role of the nurse practitioner and provides opportunities to discuss these as the student continues the transition into the advanced practice nursing role in primary care. Prerequisites: NURSING 515

NURSING 529 Comprehensive Assessment of the Older Adult

(3 credits - 60 hours clinical)

Prepares the advanced practice nurse for provision of comprehensive, quality, and cost effective primary care for older adults. Theories of physical aging, normal physical changes of aging, psychosocial needs, and the economic, political, socio-cultural, legal, and ethical issues of aging will be explored. Through both the theory component and clinical practicum the student will learn to recognize, evaluate, and manage geriatric syndromes prevalent in the older adult population. Atypical presentation of illness and clinical issues unique to frail older adults will also be explored.

NURSING 534 Adult-Gerontology Primary Care Nurse Practitioner Practicum and Seminar

(6 credits - 200 hours clinical)

Provides an opportunity for the student to apply knowledge gained throughout the program while gaining entry-level competence in the clinical area. Both clinical and professional role issues are addressed in the theory seminar. Clinical issues will include management of complex patients. Professional issues to be addressed will include assessment of organizations as practice settings, quality of care and risk management, and professional responsibilities of practice. These issues include the influence of, and on, health policy, continuing education, the health education of the community, and clinical research. The focus of the course throughout is on developing confidence and competence as an adult/gerontology primary care nurse practitioner. Prerequisite: NURSING 516

Family Nurse Practitioner Primary Care (FNP) Program Core Courses

NURSING 515 Diagnosis and Management of the Adult and Older Adult I
(6 credits- 200 hours clinical)
Focuses on the diagnosis and management of health problems in young adults (including late adolescents and emancipated minors}, adults, and older adults (including young-old and old-old adults} in the primary care setting. Emphasis is placed on developing knowledge related to the most common diagnoses and health problems across the entire adult-older adult age spectrum in primary care. These include, but are not limited to, cardiac, respiratory, endocrine, mental health, and renal diagnoses and problems. In addition, the course addresses issues related to the role of the nurse practitioner and provides opportunities to discuss these as the student begins the transition to this advanced practice nursing role in primary care. Prerequisites: NURSING 502, NURSING 507, NURSING 508

NURSING 516 Diagnosis and Management of the Adult and Older Adult II
(6 credits- 200 hours clinical)
Focuses on the diagnosis and management of health problems in young adults (including late adolescents and emancipated minors), adults, and older adults (including young-old and old-old adults). Emphasis is placed on developing knowledge related to the most common diagnoses and problems across the entire adult-older adult age spectrum in primary care. These include, but are not limited to, ears, eyes, nose, throat, abdomen, neurological, musculoskeletal, and reproductive diagnoses and health problems. In addition, the course addresses issues related to the role of the nurse practitioner and provides opportunities to discuss these as the student continues the transition into the advanced practice nursing role in primary care. Prerequisites: NURSING 515

NURSING 517 Diagnosis and Management of Children and Pregnant Women
(6 credits- 200 hours clinical)
Focuses on the assessment, diagnosis, and management of infants, toddlers, children, and pregnant women with common episodic and chronic conditions within the context of their families, social environment, and culture. Emphasis is on the developmental stages, age appropriate primary and secondary prevention and risk reduction strategies using evidence-based guidelines. In addition, the course addresses issues related to the role of the nurse practitioner and provides opportunities to discuss these as the student begins the transition to the family nurse practitioner role in primary care.

NURSING 522 Family Health Nursing Theory
(3 credits)
Provides the student with a broad, systematic perspective on human functioning through analysis and comparison of contrasting models and theories of family health and family nursing. Concepts are than applied to the understanding and assessment of the stages of the normal life-cycle from a multi-cultural, multi-generational perspective upon which to base clinical practice. Students will apply family system concepts and methods to problems related to health and illness faced by families including families experiencing physical and/or mental alterations in health. Relevant research is discussed throughout.

NURSING 529 Comprehensive Assessment of the Older Adult
(3 credits - 60 hours clinical)
Prepares the advanced practice nurse for provision of comprehensive, quality, and cost-effective primary care for older adults. Theories of physical aging, normal physical changes of aging, psychosocial needs, and the economic, political, socio-cultural, legal, and ethical issues of aging will be explored. Through both the theory component and clinical practicum the student will learn to recognize, evaluate, and manage geriatric syndromes prevalent in the older adult population. Atypical presentation of illness and clinical issues unique to frail older adults will also be explored.

NURSING 541 Family Nurse Practitioner Practicum and Seminar
(6 credits- 200 hours clinical)
Provides the student an opportunity to apply knowledge gained throughout the program while gaining entry-level competence in the clinical area. Both clinical and professional role issues within the context of the family are addressed. This is the concluding course for the family primary care nurse practitioner program. Clinical issues will include management of complex patients across the lifespan. Professional issues to be addressed will include assessment of organizations as practice settings, quality of care and risk management, and professional responsibilities of practice in relation to the family as a unit of care. These issues include the influence of, and on, health policy, continuing education, the health education of the family and community, and clinical research. The focus of the course throughout is on developing confidence and competence as a family primary care nurse practitioner.

Required three "P" courses all advanced practice nurse students must take:

NURSING 504 Pathophysiology Across the Lifespan for the Advanced Practice Nurse
(3 credits)
Provides the central concepts of physiology and pathologic mechanisms of disease that serve as a major component in the foundation for clinical assessment and management of individuals across the lifespan. The focus of the course is on etiology, pathophysiology, clinical manifestations, evaluation, and treatment of commonly encountered acute and chronic clinical conditions of children, adults, and older adults. Evidence- based research regarding pathological changes in disease states is synthesized and applied to current advanced nursing practice. In addition, major lab studies useful for verifying abnormalities are discussed.

NURSING 507 Pharmacology Across the Lifespan for the Advanced Practice Nurse
(3 credits)
Provides the fundamentals of pharmacokinetic and pharmacodynamic properties of drugs across the lifespan affecting all body systems. Proper prescribing and monitoring procedures for various drug regimens used to treat common disease states are presented. Classification of pharmaceuticals will be reviewed in relation to indications for use and evidence of efficacy. Clinical usage of select drugs and rationale for drug therapy based on the relationship of physiologic factors of disease processes and drug mechanisms will be discussed. Adverse reactions, interactions, problems related to nutritional, developmental, and health status will be explored. Legalities and regulations of prescriptive privileges, sociocultural implications of drug therapy, and patient teaching are addressed Prerequisite: NURSING 504.

NURSING 508 Lifespan Health Assessment and Promotion for Advanced Nursing Practice
(6 credits – 60 hours of clinical)
This course focuses on developing the student's competence in performing health/physical assessment across the lifespan. Learning experiences are provided for synthesizing cognitive knowledge with psychomotor skills. Throughout the course emphasis is placed on the importance of communication and observational skills in conducting a holistic assessment for the purpose of developing a thorough understanding of this individual in order to determine appropriate and effective health care, including health promotion strategies across the lifespan. This assessment includes genetic, social, environmental, functional, cultural, spiritual, psychosocial, developmental and comprehensive physical examination.

All Master students including NP students take the following core courses:

NURSING 520 Community Assessment and Planning
(3 credits)
Provides students with knowledge and skills to perform a comprehensive community assessment and develop a program for an identified health need or problem. Students use concepts from nursing theory, epidemiology, cultural principles and research to identify a community need or problem, develop a proposed solution and plan of action. Preparation of a grant proposal will be a major focus of the plan of action. Class format is seminar and collaborative group work.

NURSING 503 Bases for Research for Advanced Nursing Practice
(3 credits)
Builds on previous knowledge of research and statistics to enhance student application, use, and development of nursing research to improve the quality of health and health care delivery. Principles and strategies inherent in scientific inquiry, critical evaluation and the research process are applied. Focuses on identification of a researchable problem in clinical nursing practice, review and critique of relevant literature, selection of a conceptual or theoretical framework and identification of an appropriate research design and methodology to study the problem. Students plan, develop and present a research prospectus using appropriate scholarly format and style.

NURSING 502 Epidemiology: Concepts and Principles for Advanced Nursing Practice
(3 credits)
Focuses on conceptual orientation and knowledge of techniques from epidemiology as a basis for all aspects of population-based practice in advanced nursing. Epidemiological perspective presented as a framework for assessing the well-being of populations and designing, implementing, and evaluating strategic nursing and health care interventions. Students apply basic epidemiologic research designs in the investigation, analysis, and proposed solutions to observed patterns of health states in contemporary populations.

NURSING 501 Theoretical Bases for Role Development in Advanced Nursing Practice
(3 credits)
This course focuses on examination of philosophical and theoretical constructs related to role development in advanced nursing practice. Advanced Practice domains of clinical practice, teaching and coaching, consultation, intra and interprofessional collaboration, care coordination, conflict resolution, research, nursing theory, leadership, quality improvement advocacy, and ethical decision-making are explored. The reciprocal interrelationships among theory, theoretical frameworks and conceptual models, domains of practice, and research as integral components of nursing science development, evidence-based advanced nursing practice, education, and leadership are investigated. Theory development and strategies for the evaluation and testing of theories are explored. The student will identify concepts, principles and strategies inherent in a variety of nursing and related theories, (i.e., systems, change, professional socialization, leadership, chaos, complexity, organizational, etc.) to serve as a framework for the development and enrichment of own advanced practice roles. The student will analyze and apply the tenets of a conceptual model or theory of nursing to own philosophy of advanced nursing practice and potential practice issues/situations.

Appendix D
Preceptor Selection

Appendix D
Bloomsburg University
Department of Nursing
GUIDELINES FOR PRECEPTOR SELECTION

Guidelines to assist the student in selecting a preceptor for clinical supervision during enrollment in the following courses: NURSING 515, 516, 517, 534, & 541.
The preceptor should be:

1. A nurse practitioner who is certified by a national credentialing, or a physician (with appropriate Board Certification preferred), practicing in the State of Pennsylvania

2. Masters preparation required, doctoral preparation preferred, or equivalent (e.g., DNP, M.D.).

3. Able to provide a practice setting and patient population that facilitates student learning and achievement of course objectives.

4. Able to provide adequate space in the clinical facility to allow learning to occur and not interfere with patient flow.

5. Able and willing to precept the student in the clinical setting for the required number of hours within the timeframe of the clinical course.

6. Able to make available time to periodically review the student's learning objectives and provide the student with direction related to his/her achievement in that setting.

7. Willing to critically evaluate the student's progress during and at the end of the clinical experience.

8. Willing to participate in the student's evaluation of the learning experiences provided.

9. Willing to meet with BU NP faculty member(s) during their periodic site visits to discuss the student's progress and to communicate with them by phone as needed during the semester to facilitate the student's progress.

10. The clinical site must be approved by course faculty and a contract with the clinical site must be established prior to the beginning of the start of the clinical course.

Appendix D
Suggestions for Identifying Potential Preceptors

Who should you consider?

• Known health care providers (MD, DO, NP & CNM)
• References from family & friends
• Classmates who may be able to provide:
      current &/or former work colleagues
      current &/or former health care providers
• Members of professional organizations (see below)

Steps to take in the months leading up to the clinical course:

• Identify potential preceptor & obtain contact information (phone & fax numbers, email
  address) see form on the next page.
• Forward this information to faculty assigned to the clinical course, via email and the
  faculty will contact the potential preceptor.
• Once approved (i.e. preceptor is willing & available &, where necessary,
  "administrative" approval has been received), you will be notified by the faculty
  member.

Local NP professional organizations:

• Pennsylvania Coalition of Nurse Practitioners (PCNP) is a great site available to students
  For posting clinical needs the link to the site is   http://www.pacnp.org/

Private Practice/Agency/School
Affiliation Agreements

CHECK ONE:

☐   Private Practice (PP)

☐   Agency (A)

☐   School (S)

CHECK ONE:

☐   Graduate

☐   Undergraduate

☐   Agency Data Form completed for U/G clinical sites only/ SBN

Today's Date: _____

Semester Agreement Needed: SPRING   SUMMER   Fall

Faculty Member's Name Initiating This:_____

Name of Student(s) at PP/A/S:_____

Contact Person

Contact Person's Name at PP/A/S: _____

(This is the person the letter/affiliation agreement will be addressed to)

Address: _____

_____

Phone # (____) _____

Preceptors

Preceptor's Name_____

License # (MD, NP, License and/or Certificate)_____

Population focus (& Specialty) area of practice	Certification- specify type & Certifying body	Years of practice in current specialty	# of students precepted concurrently

*Please provide additional information on the back if more than one preceptor is on site

Clinical Site

Clinic's Name_____

Type of Site		Ages of Patients
Geriatrics PED/OB Family Internal Med	|	0-13 14-21 21-up

Please circle all applicable options above

Have you verified the above Private Practice/Agency/School is not covered under another Affiliation Agreement?
(Ex. Geisinger, Susquehanna Health Systems, Bloomsburg Hospital, etc.)

☐ YES   ☐ NO

ADDITIONAL COMMENTS/INFO:_____

Appendix E

Clinical Log Summary Guidelines
&
SOAP Note Guidelines

Appendix E

Bloomsburg University
Department of Nursing
GUIDELINES FOR CLINICAL LOG SUMMARY ON EACH CLINICAL DAY

Reflection will be a part of your weekly clinical log assignment and will begin in NURSING 508 and continue through to the last clinical course. You are expected to reflect weekly so that you and your clinical faculty will be able to evaluate your progress into the role of nurse practitioner.

To assist you in writing a brief narrative concerning your reflections on your daily/weekly clinical experiences, the following list of questions has been compiled to help you to focus on pertinent aspects of your experience. Choose one or more areas from the list, or from your own ideas, to give an overview of your thoughts and feelings about each clinical experience. Ideally, over time, your reflections will respond to all or most of these questions.

I. General

    A. Was today easy, challenging, satisfying, frustrating, etc. and why?

    B. What learning goals were the focus of the day? Describe progress made or difficulties encountered.

    C. Was today's experience positive overall? If not, was this due to performance, setting, patients, preceptor, or other factors?

II. Clients

    A. Any new challenges? Any returning patients: improvement or worsening status?

    B. What cultural barriers did you perceive in your interactions with patients; did they hinder the care giving process? Were you able to overcome them or what new things did you learn about factors that influence the health and wellbeing of your patients and their families?

    C. To what extent was current knowledge/experience applicable versus needed to Consult others about assessment/management?

    D. How well were you able to present each client to the preceptor - and is this process getting any easier?

    E. To what extent were you able to contribute to the management plan?

    F. To what extent were you able to involve the patient in self-responsibility for health and self-care?

    G. In what way did you "make a difference"?

III. Role Development

    A. Describe and discuss communication with your preceptor today.

    B. How did you communicate needs of patients and your learning needs?

    C. What kind of feedback did you get from your preceptor?

    D. What was the feeling from other team members today?

IV. Miscellaneous

    A. What information from lecture/seminar/readings was particularly useful today

    B. What information from your preceptor or setting should be shared with other students and/or faculty?

Department of Nursing
Bloomsburg University
Nurse Practitioner Program
SOAP NOTE GUIDELINES

For All NP Clinical Courses

The initiation of SOAP format charting will begin in NURSING 508 Lifespan Health Assessment and will continue throughout all clinical courses.

The SOAP format of charting is a communication tool that serves to reflect your clinical thinking process and transmit an accurate picture of a patient's problem, diagnosis, and plan of care. The note should facilitate good continuity of care between providers and help the practitioner to practice safely. The purpose of the SOAP note assignments is to develop your ability to concisely and accurately document pertinent information (S and O) from your encounter with a patient in an organized manner and critically analyze patient information to develop a differential diagnosis (A) and an appropriate plan (P) of care.

See the next page for Evaluation Criteria for SOAP Notes.

EVALUATION CRITERIA FOR GRADING SOAP NOTES

In each clinical course (508,515, 516, & 517) the student will be required to hand in SOAP notes per clinical course requirements.

I. **Organized according to standard SOAP format with all pertinent information complete.**

II. **Subjective Data: Only** include info pt. Tells you which is pertinent to the particular problem (s) being addressed.

   A. **Date of encounter**

   B. **Identifying Data and Chief Complaint**- Start note with age, gender, and ethnicity of the patient (and if applicable, note presence of other persons in exam room with pt.) Then list chief complaint (or main reason for this visit) in patient's own words or words of parent. (Remove any identifying information! Medical records are confidential.)

   C. **HPI**- include **ONLY** the following **PERTINENT** to history of present illness written in narrative form in a brief paragraph: **O**nset; **L**ocation; **D**uration; **C**haracteristics- (quality and severity of sx); **A**ggravating/**A**ssociated factors; **R**elieving factors; **T**reatment- this includes both pharmacological and non-pharm tx, plus whether it was helpful; **S** (severity); **ROS**: only information concerning body systems pertinent to age, gender and Chief Complaint and your diagnostic hypothesis. Be concise; include pertinent negatives & positives; **Effect on ADLs**: of current problem, if any (e.g., cannot sleep at night, unable to work and/ and/or school; **PMH**: history significant to current problem. For infants & children, include birth history & developmental milestones; (for adolescents, use HEADSS interview format.); **Medication, Food & Environmental** or lift children, etc.) For children include appetite, sleep, play/sports Allergies**; Health Maintenance**: screening/vaccines that factor into dx or tx. of current problem (e.g. last PAP if problem gyn, flu vaccine or pneumovax if respiratory, etc.) For children, always document immunization status; **FH**: family hx pertinent to current problem(s); **Psychosocial Hx**: Developmental issues, lifestyle, support systems etc. pertinent to problem(s).

   D. **Current Medication and Therapies Used**: Include prescription and nonprescription meds and treatments (e.g., humidifier, vitamins, garlic caps and other health food remedies). List medication allergies.

III. **Objective Data**: As appropriate to the presenting problem(s).
   (Only write what you observed, not what the pt. tells you they noted.)

   A. **VS**: T,P,R,BP, ht, wt, (& head circumference if 2 yrs. or younger).
   B. **General Appearance**: (e.g., "Face flushed, fussy, difficult to calm even with bottle," or "Alert, cooperative, moves onto exam table slowly, guarding abd.")
   C. **Physical Findings**: all that are pertinent to age, gender, chief complaint(s) and any other significant findings.
   D. **Diagnostic Test Results**: (including stat reports and chart data) pertinent to current and other significant health problem(s)(e.g., quick strep, EKG, X-Rays, PFT's, KOH or wet mount slide, etc.).
   E. **Use Standard Medical Terminology and abbreviations**. Be concise, yet descriptive. Do not use "appropriate or within normal limits (WNL)" in your objective section.

This is the end of needed SOAP components for NURSING 508. All other clinical courses will also include the

following:

IV.   **Assessment:** List diagnosis(es) using appropriate diagnostic term, or symptom.

Assessments may be qualified with differential diagnosis probabilities/possibilities if unsure of the etiology (i.e.#1-Diarrhea- probable infectious origin versus possible colitis, or #2- Migraine type H/A, possible rxn to Cardura). The appropriate qualifier(s) should be added to clarify your differential diagnoses and/or to indicate your assessment of disease status and/or causation and health maintenance needs (e.g., HTN-well controlled; unstable angina; non-resolving viral URI w/possible bacterial superinfection, acute vs. chronic sinusitis, recurrent UTI).

V. **Plan:** Appropriate format should include the following **done separately for each identified problem**. For example, if only one problem was identified in this encounter, only one plan (A,B,C,D,E) is written. However, if there is more than one problem a separate plan should be outlined for each problem.

A.   **Diagnostic Plan:** list lab, x-rays, tests ordered, or state none needed

B.   **Therapeutic Plan**: list all prescriptions exactly as written, including OTC meds and non-pharm. remedies (e.g. "Salt H2O gargles", "Back exercises", D/C all caffeine in diet", "Reassurance given that findings were normal", etc.) Write out/facsimile drug furnishing orders for any prescription drugs included in treatment plan (using form included at end of SOAP guidelines)

C.   **Patient Education**: document oral and written teaching, including handouts (e.g., "Pt ed. Done re: low cholesterol diet and realistic exercise plan. Sheet on low chol. Diet given.").

D.   **Follow-Up/Referrals**: When to return to clinic, and reason for F/U. Include instructions for adjusting plan as needed and criteria for this (e.g., "Call provider if fever>101° persists>48 hrs." Or "Pt. Will be phoned if Dilantin level indicates dosage needs adjustment before F/U in 2 weeks.", or "To ER if continued or increased wheezing/ SOB.")

VI. **Additional Comments**: Would you have handled anything differently in your own practice? Please explain.

Appendix E
EVALUATION CRITERIA FOR WELL HISTORY & COMPLETE PHYSICAL EXAM
SOAP NOTES

This format will be used in NURSING 508 and then whenever a complete H&P is warranted.

I. **Organized according to standard SOAP format with all pertinent information complete**. (1 point) If possible, try to do your well physical exam SOAP note on a person/child without a lot of ongoing health problems who presents for a periodic check-up/CPE. Synthesize information according the ABC's of good writing: accuracy, brevity and clarity.

II. **Comprehensive Subjective Data**
A. **Patient Initials and Date of Visit**: Indicated on top of page 1.

B. **Reason for Visit:** Examples include, "Here for annual PE with PAP smear." PE required by new employment.", "My dad just died of a heart attack, so I thought I'd better be checked.", "Well child check-up."

C. **Past Medical History:** Include as appropriate: injuries, hospitalizations, surgeries, major or chronic illness, past tx for ongoing problems and allergies. For children, include birth history, newborn screening, developmental milestones.

D. **Current Medication and Therapies Used**: Include prescription and nonprescription meds and treatments (e.g., humidifier, vitamins, garlic caps and other health food remedies). List medication allergies

E. **Family History**: Significant health problems of family members that could affect the health of the patient.

F. **Lifestyle Risk Assessment**: Focus on areas most likely to impact health. g., ETOH, caffeine, smoking, exercise, sleeping, diet, high stress or physically hazardous occupation, etc. For adolescents, use HEADSS interview.

G. **Health Maintenance/Promotion**: Immunizations, results & dates of dx tests and screenings

H. **Review of Systems** (for infants over 6 mo. throughout adulthood): Concise review of all systems covering the last 6 months, with more detail as needed, depending on positive findings in the history or assessment. After the first 2 SOAP notes in each course (and with approval of clinical instructor), the form used by your clinical site, including checklists, may be used. (Note: If a c.c. is addressed within a H & P visit include relevant ROS segments in HPI and do not repeat that information here- just refer back to HPI.

III. **Complete Objective Data:** Only write what you actually observed, not what the patient tells you they noted.

A. **VS/General Appearance**: For example, "Extremely active, easily distracted, but cooperative." "Well-groomed, anxious Caucasian male." "Moves onto exam table with unsteady balance.", or "Fussy but consolable."

B. **Physical Findings**: Document complete PE findings from any screening tests done in office, such as hearing, vision, Hgb, RBG, urine, vaccine record, last TB test, etc.

C. **Diagnostic Test Results**: Document results from any screening tests done on office, such as hearing, vision, Hgb, urine, vaccine record, last TB test etc. **Note:** Use standard terminology and abbreviations. Be concise, yet descriptive.

Do not use "appropriate" or "within normal limits (WNL)" in your objective section.

II. **Assessment: List** assessment of problem(s) found during well exam, and list any ongoing health problems which are significant in relation to current medical condition. If no problems found, then assess that the patient is in good health (e.g., "Good overall health; pending Pap and PPD reading", "Well child").

V. **Plan**:
   A. **Diagnostic Plan**: Labs, tests, and extra screening if indicated

   B. **Therapeutic Plan**: List all prescriptions including OTC meds and nonpharmacy remedies (e.g. "soy formula trial for 2 weeks", "Back exercises per instructions", "D/C all caffeine in diet". Etc.) Also list any immunizations ordered. Write out/facsimile drug furnishing orders for any prescription drug included in the treatment plan (use form included at the end of SOAP guidelines)

   C. **Patient Education**: Documentation of oral and written teaching and anticipatory guidance (Peds.), including handouts given (e.g., "Pt. Ed. Done re: low cholesterol diet, and realistic exercise plan.", "Diet sheet on low chol. Diet given", or "Mom educ. On safety issues, weaning pt. From breast, and skin care.")

   D. **Referral/Follow-Up**: referrals to other professional/agencies, when to return to clinic, and reasons for F/U (e.g., "Next CHDP due 5/96", "Pt. To make appt. With Dr. Goldsmith, cardiology, and make F/U appt. Clinic after work-up completed", or "RTC in 2 days for PPD skin check").

VI. **Additional Comments**: Would you have handled anything differently in your own practice? Please explain.

Appendix F
Student Agreement

Appendix F

Student Agreement

I, the undersigned student, hereby understand and agree that as a condition of my enrollment in the Bloomsburg University Nurse Practitioner Program, I must fulfill the requirements of the entire program.

I further indicate by my signature below, that I have received a copy of the Student Handbook and will review all the policies and procedures contained in this Handbook at my earliest convenience. Failure to do so will not excuse me from being held accountable for them.

If for any reason I consider withdrawal from the Nurse Practitioner Program before completion of the course of study, I agree to make such considerations known to the Nurse Practitioner Program Director, without delay, and agree to keep an appointment with him/her before I carry out any of the steps of withdrawal. All financial obligations must be met before leaving.

_____   _____
Signature of Student   Date

_____   _____
Witness   Date