CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
DEPARTMENT OF NURSING

GRADUATE NURSING STUDENT
POLICY HANDBOOK

2016-2018
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Section I. Overview of the Department and Program
A. Introduction

California State University Bakersfield (CSUB) opened in September 1970 as the 19th member of the 23-campus CSU system. Its vision is to become the leading campus in the CSU system in terms of faculty and academic excellence and diversity, quality of the student experience and community engagement.

CSUB is located at the southern end of the San Joaquin Valley approximately 110 miles north of Los Angeles. CSUB, the only four-year institution within a 100-mile radius, is located in the city of Bakersfield, a commercial, medical and educational center for the area. The university serves a regional population of over 800,000 including the city and unincorporated areas. The campus, located on a 375-acre site that was donated from the private sector, sits on the growing western edge of metropolitan Bakersfield. Thirty buildings provide classroom, laboratory, administrative, and technical support facilities. Enrollment in the University for Fall 2015 is approximately 8,520 undergraduate and 710 graduate students, who are served by over 800 faculty and staff members. As of August 2016, the University operates on a 16-week semester schedule as part of a system wide initiative to align academic schedules, conserve resources, and improve student success. CSUB has 39 bachelor’s degree programs, 6 credential programs, 19 master’s degree programs, and a doctoral program in education in partnership with Fresno State University.

The University is fully accredited by the Western Association of Schools and Colleges (WASC), with six programs also accredited by national organizations. Accreditation by WASC was reaffirmed in 2011-2012, and the university’s next comprehensive review will be held in 2019-2020.

CSUB is a comprehensive regional University and is committed to excellence in its four schools: Arts and Humanities, Business and Public Administration, Natural Sciences, Mathematics and Engineering (NSME), and Social Sciences and Education. The Department of Nursing (DON) is one of eight departments in the School of NSME.

B. Overview of the Department of Nursing

Undergraduate Program: The DON has offered the BSN degree since the University first opened its doors in 1970. Over the past 45 years, more than 2,400 students have completed a BSN at CSUB. CSUB remains the only public university in the region where students can earn a BSN. Non-licensed students can obtain a BSN and eligibility for permission to take the National Council Licensure Examination (NCLEX-RN) through the Traditional BSN Program, a rigorous 3-year experience. Registered nurses can earn a bachelor’s degree through the RN-BSN Program, which features a predominantly online curriculum. As of December 2015, there are 423 pre-nursing students, 155 Traditional BSN students, and 82 RN-BSN students enrolled at CSUB. As a result of heavy demand, the Traditional BSN Program and the RN-BSN Program have both been granted Impacted Status designation from the CSU Chancellor’s Office. In the CSU system, a program is granted Impacted Status when the number of applications received exceeds program capacity. At CSUB, admissions standards and ranking criteria for the Traditional BSN and RN-BSN programs are established by the Undergraduate Program Committee (UPC), and cohorts are comprised of the top-ranking candidates. Graduates of the Traditional BSN and RN-BSN Programs have provided an excellent pool of candidates for admission to the Master of Science in Nursing (MSN) program at CSUB.
The majority of the RN-BSN Program is delivered in an online format. The RN-BSN program had been offered on-campus for many years, but in 2009 the DON began utilizing the Blackboard Learning Management System (LMS) to provide improved access to higher education for nurses in the region. All of the nursing didactic courses are offered online and do not require on-campus attendance. The program’s one clinical course, Community Health Practicum, requires 100 hours of clinical experience.

The BSN Program earned continuing approval from the California state Board of Registered Nursing (BRN) in Fall 2011. The BSN program’s accreditation by the Commission on Collegiate Nursing Education (CCNE) was successfully renewed in Spring 2012. A Continuous Improvement Progress Report (CIPR) is due in December 2017, and the next on-site evaluation is planned for Spring of 2022.

**Graduate Program:** The DON opened the MSN program in 1987 with a graduate degree in Nursing Administration, and secured National League for Nursing (NLN) accreditation in 1991. After the implementation of the Family Nurse Practitioner (FNP) Track in 1996, the BSN and MSN programs transitioned successfully to CCNE accreditation in 1998. Additional MSN Tracks were also introduced and discontinued over the years, based on student demand and available resources. Between 1990 and 2010, the MSN program graduated 114 FNPs and 87 Clinical Nurse Leaders, Clinical Nurse Specialists, Nurse Educators, and School Nurses. Most MSN graduates have remained in Kern County and are leaders within the local healthcare community.

Between 2010 and 2014, leaders within our community and on campus monitored the trends within the healthcare system, our community’s needs, and the professional goals of our current and prospective students. A feasibility study was conducted, which indicated a tremendous need for more FNPs; a healthy MSN/FNP program is a critical resource for the Central Valley of California. The MSN Program with an FNP Track reopened in Fall 2014 with full approval by the California BRN, and is accredited by the CCNE. The first cohort of 15 students completed the program in June 2016, and a new cohort of 18 students entered in August 2016.

The University will be transitioned from the quarter system to a semester calendar in Fall 2016. For this reason, no new MSN enrollments were planned for Fall 2015 to avoid having a full cohort in the middle of their curriculum during the transition.

Between 2010 and 2014, leaders within our community and on campus monitored the trends within the healthcare system, our community’s needs, and the professional goals of our current and prospective students. A feasibility study was conducted, which indicated a tremendous need for more FNPs; a healthy MSN/FNP program is a critical resource for the Central Valley of California. The MSN Program with an FNP Track reopened in Fall 2014 with full approval by the California BRN, and is now seeking to reestablish accreditation from the CCNE through the standard new program process. The current cohort of 15 students will be completing the program in June 2016, and a new cohort of 18 students is planned to enter in August 2016.

The University will be transitioning from the semester system to a semester calendar in Fall 2016. For this reason, no new MSN enrollments were planned for Fall 2015 to avoid having a full cohort in the middle of their curriculum during the transition.
Nursing Faculty
The Department’s nursing faculty are highly qualified nurse scholars and educators prepared in research and practice of their respective nursing disciplines. Faculty members meet the California Board of Registered Nursing expectations for clinical competence, the University and the Commission on Collegiate Nursing Education’s expectations for scholarship, teaching, practice and leadership.

Resources
The Department maintains three technical areas for nursing students in the Romberg Nursing Education Center (RNEC) on the CSUB campus: a nursing skills laboratory, a computer laboratory, and a simulation center with an attached smart classroom to support multiple forms of technology-assisted classroom instruction. The nursing arts laboratory has 13 patient care learning stations, and the computer lab contain videotapes, PCs and Macintosh computers, instructional software, and multimedia software.

Community Partners
Students practice their nursing skills at many locations in Bakersfield and in the surrounding Kern Country area. These facilities include hospitals, physicians’ offices, health clinics, schools, public health agencies, homeless shelters, hospices, and specialty care centers.

CSUB Non-Discrimination and Non-harassment Policy
The Department of Nursing follows the CSUB policy on non-discrimination and non-harassment and does not discriminate on the basis of race, religion, sex, age, handicap, color, marital status, sexual or national origin.  [http://www.csub.edu/compliance/_files/nonediscriminationnotice.pdf](http://www.csub.edu/compliance/_files/nonediscriminationnotice.pdf)

Approved by Faculty Organization May 13, 2010; Revised 12/2015; 12/16

C. California State University, Bakersfield Mission Statement

California State University, Bakersfield is a comprehensive public university committed to offering excellent undergraduate and graduate programs that advance the intellectual and personal development of its students. An emphasis on student learning is enhanced by a commitment to scholarship, diversity, service, global awareness and life-long learning. The University collaborates with partners in the community to increase the region's overall educational attainment, enhance its quality of life, and support its economic development.

D. Department of Nursing Mission, Vision, and Values

Mission
The Department of Nursing provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced nursing education. The faculty provides a collaborative, inclusive, and interactive learning environment committed to excellence in teaching, scholarship, service, and practice. The Department of Nursing accomplishes the mission through collaboration with the communities of interest.

The Department of Nursing fosters an environment that encourages lifelong learning and advancement within the profession. Graduates will have the acquired knowledge, skills, attitudes, and values
essential to the practice of advanced professional nursing. As professional nurses, our graduates will engage in evidence-based practice in an interprofessional healthcare environment. In recognition of the health needs of a multicultural society, advanced professional nurses who are graduates of CSUB will address healthcare issues and needs of their community.

**Vision**
The CSUB Department of Nursing pursues innovative ways to advance nursing practice and address the growing complexities associated with creating a healthier population in California’s Central Valley.

**Values**
The Department’s values align with those of the university, including academic excellence, freedom of inquiry and statement, global awareness and cultural sensitivity, diversity, honesty and fairness, democratic governance, community engagement, and personal responsibility. The DON embraces professionalism and a respect for the inherent ethical values of altruism, autonomy, human dignity, integrity, and social justice as fundamental to the discipline of nursing.

**E. Goals of the Department of Nursing**
The DON goals reflect professional nursing standards. These standards are provided in the following documents, which serve as a foundation for the curricula and policies of the DON:

1. Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (CCNE, 2013)
2. The Essentials of Master’s Education in Nursing (AACN, 2011)
5. Population-Focused Nurse Practitioner Competencies (NONPF, 2013)
6. Essential Genetic and Genomic Competencies for Nurses with Graduate Degrees (ANA, 2012)
7. Quality and Safety Education for Nurses Graduate Competency KSAs (QSEN, 2012)
8. Quality and Safety Education for Nurses (QSEN, 2007)
11. ANA Scope and Standards of Practice (ANA, 2010)
12. California Code of Regulations (CCR) pertaining to nursing education (California BRN)

In addition, the Goals of the DON are responsive to the nursing regulations provided by the California Board of Registered Nursing (BRN), the CCNE Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (2013), and the Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012).

Based on the statements in the philosophy, the overall goal of the Department of Nursing is the continuing development and preparation for graduation of individuals who will provide professional nursing through clinical practice, leadership, research and education. To realize this overall goal, it is imperative that the following specific goals, objectives, and key strategies to be achieved by the Department of Nursing over the next 5 years:
Strategic Goals and Objectives
The following major objectives and key strategies will be achieved by the Department of Nursing over the next 5 years:

1. Demonstrate student outcomes that reflect program excellence through ongoing and consistent Program Evaluation to determine efficiency and effectiveness.
   a. Expand the capacity of the Traditional BSN Program.
      i. Maintain NCLEX first attempt pass rates of >85%.
      ii. Student attrition rates of <20%.
      iii. Monitoring of student performance on ATI exams.
      iv. Achieve employment rates of 70% within one year of graduation.
      v. Maintain Impacted Status for the Traditional BSN Program.
      vi. Increase enrollment to meet the needs of the community with two entry points per year.
   b. Increase RN-BSN Completion Program graduation rate to 70% within 3 years of entry.
      i. Increase student advisor to full-time to facilitate outreach advising prior to program entry.
      ii. Establish each incoming cohort of students as a learning community to foster student success and elevate graduation rates to > 70%.
      iii. Maintain Impacted Status for the RN-BSN Completion Program.
   c. Sustain an FNP/Non-Clinical MSN program that meets CCNE and BRN approval criteria.
      i. Maintain a graduation rate of XX
      ii. Achieve national FNP certification first time exam pass rates of 80%.
      iii. Achieve a 70% employment rate within one year of graduation.
      iv. Develop a non-clinical MSN program for CSUB approval.
      v. Increase enrollment to meet the needs of the community by accepting a cohort every year.
      vi. Establish an MOU with another CSU based on 2020 DNP/Educator requirements.

2. Recruit and retain highly qualified faculty.
   a. Increase proportion of doctorally-prepared faculty in full-time positions to 50% (currently 30% on Aggregate Faculty Outcomes Grid).
   b. Achieve salaries competitive with the profession.
   c. Improve website and faculty recruitment materials.
   d. Facilitate pursuit of doctoral degrees for current nursing faculty members through encouragement, information sharing, mentoring, and release time when possible.
   e. Value diversity in the search and screening process.
   f. Increase the ratio of tenure-track/tenured faculty to 50%.

3. Deliver technology-mediated instruction in a manner that is effective and student-centered.
   a. Establish departmental standards for best practices in online education in accordance with the DON Philosophy for Online Education.
   b. Develop faculty expertise and capacity to teach online.
   c. Hire an Information Technology staff person to maintain website and assist with technology needs.
   d. Create a process for annual updates from the Teaching Learning Center (TLC) regarding innovations in online teaching.

4. Advance development of faculty in teaching, scholarship, service, practice, and leadership.
   a. Reassign workload of faculty by providing reassigned time for full-time lecturers to facilitate participation in curriculum development, program evaluation, and promotion of student success activities.
   b. Pursue a full-time faculty position for the Simulation Center and Skills Laboratory Director.
c. Support faculty grant-writing including funding for attending workshops and pursuing grants.
d. Continue to refine the faculty leadership development plan for the DON.
e. Support and encourage faculty sabbaticals.

5. Promote healthy behaviors and disease prevention within the Central Valley, while increasing the visibility of the CSUB DON.
   a. Increase visibility of CSUB DON community-focused health promotion activities through a campaign that highlights community service activities through press releases and scholarly work.

6. Collaborate with university departments interested in creating interprofessional learning courses.
   a. Create online and hybrid courses with interprofessional appeal to university departments.
   b. Co-teach and coordinate interdisciplinary projects with other departments on campus.

Approved by Faculty Organization on February 2, 2006; April 24, 2014 Revised May 13, 2010; revised April 2014, revised November 3, 2016
**F. University and Department Mission Congruence**

*Taken from [http://www.csub.edu/strategicplan/](http://www.csub.edu/strategicplan/) April 16, 2015

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<td>California State University, Bakersfield is a comprehensive public university committed to offering excellent undergraduate and graduate programs that advance the intellectual and personal development of its students.</td>
<td>“… to provide a collaborative and interactive learning environment … committed to excellence in teaching, scholarship, service, and practice.” The outstanding faculty provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced education. The Department of Nursing fosters mutual collaboration with the community of interest. Graduates will have acquired knowledge, skills, attitudes, and values essential to the practice of professional nursing. As professional nurses, our graduates will make autonomous and collaborative judgments in a variety of healthcare situations and will be accountable for their practice.</td>
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<td>An emphasis on student learning is enhanced by a commitment to scholarship, diversity, service, global awareness and life-long learning.</td>
<td>“In recognition of the health needs of a multicultural society, professional nurses who are graduates of CSUB will address healthcare issues and needs of their community of interest.” Teaching/learning practice provides the student with opportunities to care for individuals, families and communities. The student comes to the learning situation with a specific cultural and ethnic background. Each student’s learning style, strengths, and goals have evolved out of past interactions between innate characteristics and the environment. With the assistance of the faculty, it is the student’s responsibility to strive to identify personal strengths and weaknesses and to achieve self-understanding, which enhances personal and professional growth.**</td>
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<td>The University collaborates with partners in the community to increase the region’s overall educational level, enhance its quality of life, and support its economic development.</td>
<td>“The Department of Nursing fosters mutual collaboration with the community of interest.” The effectiveness of the program is measured ultimately by the extent to which students: demonstrate achievement of the program’s terminal objectives; … and make significant contributions to the improvement of healthcare and the profession of nursing.**</td>
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**From the Philosophy of the Teaching Learning Process and Professional Education.**

Approved by Faculty Organization May 13, 2010
Revised March 1, 2012; April 16, 2015; May 12, 2016
G. Philosophy of Nursing

The outstanding faculty of the CSUB Department of Nursing has designed the departmental philosophy and curriculum around the Nursing metaparadigm concepts of client, environment, health and the nurse.

We assume nursing is a scientific discipline and as a discipline makes a distinctive contribution to the maintenance and promotion of health. This contribution is achieved through facilitating maximum functional health status by collaborating with individuals, families, groups and the community. Activities to accomplish nursing goals are viewed as congruent with society’s expectations and needs.

Professional nursing draws upon the related disciplines of natural and social sciences, humanities and nursing science for its theory as a foundation for practice. In addition, nursing continues to develop and refine its knowledge base through scientific inquiry into its theory and practice. Critical thinking, progressive inquiry, and decision-making skills are emphasized through the use of the nursing process, which is directed toward achievement of maximum functional status for the client. The use of this process results in complex independent judgments based on accurate data and knowledge. We believe that the ability to engage in this process necessitates a baccalaureate level of nursing education. Such education is the essential preparation for beginning professional nursing practice.

Client

The client of nursing is the recipient of nursing care and may include the person across the lifespan, family, group or community. The faculty believes in the integrity, dignity, and worth of the person as an open, goal-directed, humanistic being. We assume each person as an open system includes distinct, but integrated physiological, psychological and socio-cultural systems. The person as an open system actively engages in interchange of energy with the environment and tends to achieve a balance among the various forces operating within and upon it. As an open system, the individual attempts to achieve balance with respect to these forces by utilizing, conserving, and replenishing energy in order to function effectively and efficiently. The motivating energy underlying this interchange with the environment is assumed to be present from conception through the lifespan. Developing through the process of adaptation, each person is engaged in modification through interaction with the environment. Effective adaptation during development can be defined as momentary periods of balance and maximum functional status. Genetic factors, spiritual orientation, education, occupation, and cultural/ethnic group membership influence individualized development. Although individuals strive to achieve balance and maximum functional status, they also actively seek new experiences that may disturb their balance at least temporarily. These new experiences may require variable behavioral modifications to re-establish balance. Further, we believe that individuals are rational, ever-changing, and capable of making critical choices.

Within our philosophical framework, the person across the lifespan, as an open system, interacts with, is part of, and influences other systems. The family is a dynamic social system which responds to the needs and desires of its members and the community in which it is located. As the primary reference group for the individual, the family serves to protect, educate, and nurture. Individuals or sub-populations sharing a common purpose or problem are the group/aggregate clients of nursing. A community, also a client of nursing, interacts with individuals, groups and institutions for their mutual protection and common good. Because we believe in the value of relationships, linking people to each of the above social systems, we view the individual not in isolation, but as an integral part of the larger
whole. These relationships are significant because they influence the individual’s development, systems stability, functional status and health.

Environment
The environment may be defined as a composite of all the conditions and elements that make up the internal and external surroundings and influence the development of individuals. Additionally, the environment may be conceptualized as human, social, political, economic, geographic and physical factors influencing each other. We view society as the network of dynamic relationships that links individuals to other systems such as family, other individuals, group/aggregates, community, nation and the universe. The individual and society are linked to and part of the environment. Further, individuals, society, and the environment mutually influence each other through exchange of energy. One aspect of the interaction of these multiple factors is their influence on health.

Health
Health can be defined as a state of maximum wellness/functional health status at a given point in time. The concept of maximum wellness has been classically defined as an “integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable within the environment where he is functioning” (Dunn, 1959, p. 18). Hence our belief that health consists of the ability to function optimally within an ever-changing environment and that health influences one’s growth and development. Health is composed of multiple factors, some of which include the presence or absence of a disease state and the ability to adapt to internal and external stressors. Personal responsibility for an individual’s health is assumed by virtue of the individual’s health promoting behaviors.

Nurse
We believe the professional nurse works autonomously and collaboratively with others to promote the health of individuals, families, and communities. Nurses are individually accountable to the public they serve. As a patient advocate and change-agent, the nurse works with others to facilitate growth and needed changes in the healthcare delivery system by evaluating and utilizing research findings. The professional nurse not only interacts with patients/clients during the provision of care but also supervises and coordinates the care given by others. Advanced communication, education, leadership, research and clinical skills are used to carry out these nursing functions. Professional nurses provide nursing services to individuals of all ages and to families in a wide variety of healthcare settings where they function with various degrees of independence and complexity. Increasingly, evolving nursing roles in the healthcare delivery system will require even greater independent decision-making, accountability, and autonomy of practice. Scientific and technological advances necessitate commitment to life-long learning and may include higher education. While ensuring the welfare of the public, the nurse also has the added responsibility to enhance the welfare of the profession of nursing. This is accomplished by being actively involved with political and social forces impacting upon the profession.

Approved by Faculty Organization May 13, 2010; Updated 2/06; 9/15
H. Philosophy of the Master of Science Degree Program in Nursing

The faculty of the Department of Nursing is committed to the belief that higher education in nursing is built on the philosophy of nursing and Baccalaureate nursing education which emphasizes the person as a humanistic being actively interacting with the environment to maintain or regain a maximum state of wellness.

A Master of Science Program in Nursing is built on a body of knowledge which includes concepts, facts, principles, conceptual models and theories of nursing, health sciences, behavioral sciences, the humanities, and natural sciences. Students entering a Master’s program should provide evidence of a basic knowledge of professional nursing and competent performance at the Baccalaureate level. Individualization and flexibility in the graduate program stem from this common base.

We believe that graduate education in nursing provides experiences which enable students to explore a variety of resources in depth. These experiences will facilitate analysis, synthesis, and application to practice the knowledge from various disciplines appropriate to nursing. Students constantly engage in scientific inquiry processes which emphasize independent thought and action leading to behavioral change. Through these specific processes, students acquire advanced knowledge in nursing, develop expertise in an area of advanced nursing, and develop skill in a functional role area as well as in research. Students in the Family Nurse Practitioner program are prepared to provide primary care. In addition, we believe that a reciprocal relation exists between the area of advanced clinical nursing and the roles of teaching, administration, clinical leader, and nurse practitioner.

This relation becomes apparent when students apply knowledge gained through advanced clinical nursing in their functional role performance. Further, graduate students prepared to demonstrate advanced nursing skills in functional roles and research, are able to function within the changing patterns of nursing care and healthcare systems. Therefore, this graduate program in nursing will reflect emerging patterns of healthcare at the local, state and national levels, and the nursing and health needs of society.

The faculty assume that the professional nurse approaches advanced clinical nursing with a generalist background in nursing (Baccalaureate level education). Upon completion of advanced clinical nursing education, the graduate will have recognized expertise as a family nurse practitioner, school nurse, or clinical nurse leader. The faculty views advanced clinical nursing as grounded in theory and research necessary to establish a basis for such practice. Nursing theory, practice, and research are interrelated. Advanced clinical skills develop as both practical and theoretical knowledge are applied, refined, and extended in practice situations (Benner, 1984; Benner, Tanner & Chesla, 1996).

I. Philosophy of the Teaching Learning Process and Professional Education

Learning is an active, experiential process that is lifelong, dynamic, continuous, and growth-producing. This faculty views teaching as a deliberate endeavor to guide a learning situation in order to bring about a desired learning outcome. We believe that our goal as professional nursing educators is to provide experiences for students to become mature, skilled, responsible practitioners of nursing who arrive at independent, complex judgments. These judgments are based on complete and accurate data coupled with theory and knowledge, not only from nursing, but also from the liberal arts and sciences. Because
of the complexity of the evolving body of knowledge we believe that professional nursing education is a life-long process.

Development of the student in the acquisition of nursing knowledge takes place through the student’s interaction with the environment. The nature of the learning environment is therefore a significant factor in learning. The Department of Nursing structures the learning environment that proceeds from simple to complex experiences. Teaching/learning practice provides the student with opportunities to care for individuals, families and communities. The student comes to the learning situation with a specific cultural and ethnic background. Each student’s learning style, strengths, and goals have evolved out of past interactions between innate characteristics and the environment. With the assistance of the faculty, it is the student’s responsibility to identify personal strengths and weaknesses and to achieve self-understanding, which enhances personal and professional growth.

We view faculty members as educators and facilitators of learning with the goal of stimulating student interest and encouraging students to assume responsibility for their own learning. We recognize that the faculty member’s expertise, perceptions, beliefs and expectations influence the learning process. The faculty member exposes students to attitudes, experiences, skills, and knowledge, encouraging students to discover meaningful relationships relevant to nursing practice. The faculty member serves as a role model to the student by demonstrating a variety of nursing skills, not the least of which is sensitivity in human relationships. The elements of openness, trust and caring in the student-faculty relationship are critical to the establishment of an environment conducive to learning.

Creativity and flexibility in teaching allow for responsiveness to changing environmental and societal needs. Thus, we recognize various instructional methods in promoting learning. Individual needs of the student, based on their cultural and ethnic backgrounds, available experiences, content to be learned, and environmental conditions all influence the Department of Nursing choice of instructional methodology. We believe that the most effective methods are those which actively involve the student with the material to be learned. In addition, the faculty utilizes academic and personal counseling as well as the campus educational support system which provides assessment and tutorial help.

A planned nursing curriculum, subject to ongoing evaluation by faculty, students, and the community of interest, is essential to guide students in becoming professional nurses. The curriculum is designed to foster behaviors consistent with professional standards and guidelines. The intent of the curriculum is to stimulate intellectual curiosity, analytical ability, critical thinking, ethical reasoning, and individual creativity in all settings. The effectiveness of the program is measured ultimately by the extent to which students: (1) demonstrates achievement of the program’s terminal objectives; (2) are valued by patients/clients and employers; (3) derive satisfaction from their nursing activities; and (4) make significant contributions to the improvement of healthcare and the profession of nursing.
J. Graduate Program Description

The purpose of this master’s program is to prepare nurses with advanced nursing theory and clinical experiences in the advanced practice nursing role of Family Nurse Practitioner (FNP). Students are prepared to assess the health needs and health risks of all family members, apply family theories, and analyze legal, ethical, economic, leadership, and professional issues pertinent to nurse practitioners. Graduates from this program will be qualified to practice in primary care practice settings within the changing patterns of health care; assume leadership roles in multidisciplinary health groups; and practice family nursing in primary and secondary health care settings. Graduates will be prepared to apply for doctoral programs in nursing.

The content of this program includes advanced health assessment, advanced pathophysiology, and advanced pharmacology; analysis, utilization, and evaluation of theories of nursing; research methodology; role development; care of vulnerable populations; health care policy and delivery systems; leadership; and application of advanced knowledge in providing nursing care for clients representing a variety of cultural and ethnic backgrounds in both urban and rural community settings. Students complete a culminating experience which demonstrates their competence in the conduct of scientific inquiry related to clinical problem solving. Students must complete the requirements for the Master’s degree before they can pursue FNP certification from the CA BRN.

The MSN/FNP Option has been approved by the CSU Chancellor’s office and has been accredited by the Western Association of Schools and Colleges (WASC). The program is seeking accreditation from the Commission of Collegiate Nursing Education (CCNE) according to their routine procedures. The Bachelor of Science in Nursing (BSN) already holds CCNE accreditation. For further information about the accreditation status of the FNP program, please contact the Department of Nursing office or the Commission of Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036-1120, phone (202) 887-6791.

K. Master’s Degree Program Objectives

The program objectives are to prepare students for graduation who can:

1. Expand knowledge and evaluate nursing theories and theories from related disciplines as a basis for advanced roles and nursing practice.
2. Utilize nursing concepts, theories, and knowledge to support advanced practice roles and evidence-based nursing practice.
3. Demonstrate expertise in advanced roles in nursing.
4. Apply evidence-based research findings to advanced roles and nursing practice.
5. Utilize the steps of scientific inquiry to evaluate and integrate research, theory, and practice.
6. Advance practice through the development and implementation of strategies for improving nursing care and initiating changes in the health care system.
7. Actively engage in collaborative relationships with other members of the health care team to improve health care and influence health care policies.
8. Assume responsibility for contributing to the advancement of the nursing profession.
9. Utilize technology to enhance the effectiveness of managing client and clinical information.
10. Acquire a foundation for doctoral study in nursing.
L. Family Nurse Practitioner Program Overview

The Family Nurse Practitioner program at CSUB is a 2-year full-time program, which leads to a Master of Science degree in Nursing with a Family Nurse Practitioner (FNP) specialization.

There are four advanced practice registered nurse (APRN) roles: certified registered nurse anesthetist (CRNA), certified nurse midwife (CNM), clinical nurse specialist (CNS), and nurse practitioner (NP). The FNP Program at CSUB prepares APRNs in the role of nurse practitioners (NP). Family nurse practitioners provide care for individuals and families across the lifespan. The FNP role includes preventative healthcare as well as assessment, diagnosis and treatment of acute and chronic illness for individuals and families (NONPF, 2013). Emphasis is placed on health promotion, disease prevention, and management of common health conditions. Graduates are prepared to provide high-quality, evidence-based, and family centered care to infants, children and adults across the lifespan and from diverse backgrounds.

Graduates of the FNP Program are:

- Qualified to be certified as NPs by the State of California
- Qualified to earn their furnishing number from the State of California
- Prepared to take national FNP certification exams
- Prepared to enter a doctoral program in nursing or related field

The FNP Program curriculum is a 2-year, full-time schedule of courses. Clinical hours are completed through preceptorships with local primary care providers in a variety of healthcare settings.

The first semester of the program includes Pharmacotherapeutics for Advanced Practice Nursing, Pathophysiology for advanced practice nurses, and an Advanced Health Assessment course, which prepares students to conduct comprehensive history and physical exams. The first of five clinical nurse practitioner courses begins in the second semester. Students continue to take didactic courses at CSUB during the time they are completing their clinical requirements. An outline of the required courses is included.

Clinical experience, defined as direct client care to individuals/families and/or communities, is a required component of the nurse practitioner curriculum. Clinical experience gives students the opportunity to apply theory in the clinical situation, develop an understanding of the nurse practitioner's role, function as a member of an interdisciplinary team, and demonstrate the ability to mobilize and coordinate available community resources in the management of client health and illness states. Students develop their clinical reasoning skills and test their philosophy of practice throughout clinical experience. This opportunity to apply in practice, the theory, research, and technical skills they are learning must be sufficient to enable the student to develop the competencies necessary for practice.

The FNP Faculty members are accountable for the final evaluation of students; however, preceptors are vital members of the teaching team and are clinically expert individuals with whom students have the opportunity to work.
M. Family Nurse Practitioner Program Objectives

Upon graduation or entry to advanced practice, the Family Nurse Practitioner should demonstrate competence in the following:

1. Synthesize theoretical, scientific, and contemporary clinical knowledge for the assessment and management of both health and illness states for the purposes of health promotion, health protection, disease prevention, and treatment of the individual, the family, aggregate groups, and the community.
2. Demonstrate a personal, collegial, and collaborative approach which enhances the Family Nurse Practitioner’s effectiveness in patient care.
3. Function as a licensed independent practitioner by using best available evidence to continuously improve quality of clinical practice.
4. Demonstrate a commitment to the implementation, preservation, and evolution of the Family Nurse Practitioner role.
5. Implement clinical reasoning and build collaborative, interdisciplinary relationships to provide optimal health care to the patient.
6. Oversee and direct the delivery of clinical services within an integrated system of health care to achieve improved health outcomes for patients, communities, and systems.
7. Ensure quality of health care through consultation, collaboration, continuing education, certification, and evaluation (eligible for state and national certification upon completion of the program).
8. Provide culturally competent care, deliver patient care with respect to cultural and spiritual beliefs, and make health care resources available to patients from diverse cultures.

(Adapted from the Nurse Practitioner Core Competencies, Amended 2012. NONPF, April 2011)
### The Department of Nursing Mission Congruence with the Master’s Program Objectives

<table>
<thead>
<tr>
<th>DEPARTMENT MISSION EXCERPTS</th>
<th>MSN PROGRAM OBJECTIVES to prepare MSN graduates who can:</th>
</tr>
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<tbody>
<tr>
<td>• “In recognition of health needs of a multicultural society, advanced professional nurses address healthcare issues and needs of their community.”</td>
<td>6. Advance practice through the development and implementation of strategies for improving nursing care and initiating changes in the health care system.</td>
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<tr>
<td>• “The mission of the Department of Nursing is to provide a collaborative and interactive learning environment.”</td>
<td>7. Actively engage in collaborative relationships with other members of the health care team to improve health care and influence health care policies.</td>
</tr>
<tr>
<td>• “The outstanding faculty provides nursing education to undergraduate and graduate students seeking entry into professional nursing or advanced education.”</td>
<td>1. Expand knowledge and evaluate nursing theories and theories from related disciplines as a basis for advanced roles and nursing practice.</td>
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<td></td>
<td>2. Utilize nursing concepts, theories, and knowledge to support advanced practice roles and evidence-based nursing practice.</td>
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<td>3. Demonstrate expertise in advanced roles in nursing including the provision of primary healthcare across the lifespan.</td>
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<td></td>
<td>4. Apply evidence based research findings to advanced roles and nursing practice.</td>
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<td>9. Utilize technology to enhance the effectiveness of managing client and clinical information.</td>
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<tr>
<td>• “Graduates will have acquired knowledge, skills, competencies, and values essential to the practice of professional nursing. Professional nurses make autonomous and collaborative judgments in a variety of healthcare situations and are accountable for their practice.”</td>
<td>8. Assume responsibility for contributing to the advancement of the nursing profession.</td>
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</tbody>
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The model for the graduate nursing curriculum represents the student's progression from generalist to advanced practice nurse. The nurse generalist refers to the nurse who is prepared at the Baccalaureate level and has the basic nursing skills and theoretical knowledge required for beginning graduate education. Nurse generalist will either hold a Baccalaureate degree in nursing or a non-nursing Baccalaureate degree with additional Baccalaureate nursing course content. Graduate nursing education at CSUB Department of Nursing is guided by curriculum based in theory, research, and practice. Advanced practice relates to the development of clinical or role competencies of the nurse in advanced adult or family health nursing. Theory and research are incorporated into specialty practice course content. The graduate of the Master of Science degree has the competencies to practice advanced clinical nursing in family health.

Revised March 2014
P. Student Representation on Departmental Committees

A student representative is elected by each class in the Nursing Department to departmental committees such as Faculty Organization, Graduate Program Committee, Program Evaluation Committee, and various ad hoc committees. It is the responsibility of the student representative to attend or send an alternate, and to report back to the nursing students. It is also the responsibility of the students to provide the elected representatives with input so that they may adequately represent their colleagues. The voting privileges of student representatives on faculty committees are spelled out in the Faculty Bylaws.

Q. Student Opinionnaire on Courses and Instruction (SOCI)

Evaluation of specific nursing courses by students is done during each course in the nursing curriculum as part of the Program Evaluation Plan. In addition, evaluation of the course and faculty member’s teaching is done in a formal manner through the SOCI (Student Opinionnaire on Courses and Instruction). Students in each regular class offered at the University are asked to fill in questionnaires which report their assessment of the course content and the instruction in that class. These SOCIs are used both by individual faculty members and the University administration in a continuing effort to insure that California State University, Bakersfield’s instructional program is as effective as possible. The SOCI is administered during the last week of the semester prior to finals.

R. California State Board of Registered Nursing Policies

Policies of the California State Board of Registered Nursing can be found at www.rn.ca.gov. Included you will find information on impaired nursing students, guidelines for schools of professional nursing on ethical practices, transfer and challenge policies, and information on how to file a complaint with the Board of Registered Nursing.
Section II.  Admission, Progression, and Graduation Policies
A. Admission Procedures for the Master of Science Degree Program

The Department of Nursing Graduate Program Committee (GPC) makes decisions about the admission of graduate students into the MSN program, and on classification status. The GPC makes decisions on exceptions for admission, progression, and graduation but must follow University requirements in these areas.

1. Interested students contact the Department of Nursing to meet with the Graduate Program Advisor. The Graduate Program Advisor will evaluate the student’s educational background, discuss any possible prerequisite courses necessary for admission, and provide students with information about the Master of Science Degree Program in Nursing. Students will be referred to the Offices of Admission, Financial Aid, and Testing.

2. At the Admissions Office, the students will complete a California State University Graduate Application for Admission. Students declare nursing as their major on this form. Students must supply the Admissions Office with official transcripts of all undergraduate and graduate studies completed. The application is forwarded to the Department of Nursing once it has been evaluated by the admissions office, or the student may apply online at www.csumentor.edu.

3. In addition, to qualify for admission into the Master of Science in Nursing program, students must have one copy of all official college transcripts, including all completed work to date, and a completed Application for Admission to the Master of Science Degree Program in Nursing sent to the Department of Nursing, Romberg Nursing Education Center, 29RNC, 9001 Stockdale Highway, Bakersfield, California 93311-1022. The application form is the last section of the program information packet which can be obtained on the Department of Nursing homepage at http://www.csub.edu/nursing/programs/MSN.

4. A student file containing all admission documents will be developed by the Graduate Advisor. It is the student’s responsibility to make certain that his/her file is complete by the application deadline.

5. Student files will be forwarded to the Graduate Program Committee for consideration. Students will be notified of the Committee’s decision regarding admission status.

6. Transfer Credit. If accepted by the Graduate Program Committee, graduate credit from another accredited institution may be applied toward the Master’s degree or graduate program.

7. Second Master’s Degree. Students seeking a Master’s degree or concentration may substitute program requirements, but unit requirements remain the same. Students must reapply for admission into second degree programs and obtain approval from the Department of Nursing, Graduate Program Committee, and the Dean of Graduate Studies and Research.

8. Further information on admission can be found in the current California State University, Bakersfield catalog.
B. Family Nurse Practitioner Program Admission Requirements

1. Eligibility Requirements
   a. Applicants must meet the following minimum eligibility requirements to be considered for the MSN program:
      i. Be a graduate of an accredited baccalaureate nursing program
      ii. Be in good standing at the last college/university attended
      iii. Have an overall baccalaureate GPA of at least 3.0
      iv. Hold an active, unrestricted California RN license
      v. Have a current American Heart Association BLS certification
      vi. Have the equivalent of 1 year of full-time RN experience in the past 3 years
      vii. Apply, and be eligible for, fall admission to CSU Bakersfield as a graduate student
      viii. Submit a complete graduate nursing application during the application submission period.

2. Admission Requirements
   a. Once accepted, students must complete the following requirements to be fully admitted and progress, in the MSN program:
      i. Initial Requirements
         1. Complete a background check
         2. Complete a drug screen
         3. All Annual Requirements

3. Background Check
   a. All nursing students must complete a background check at their own expense prior to the first week of classes. Students must use the independent company selected by the CSUB nursing department; background checks completed by another company WILL NOT BE ACCEPTED. Access to Background Check information is limited to the Nursing Department Chair, or an appointed designee. Background Check information remains confidential. If an area of concern is identified on the background check:
      i. The chair will notify the individual nursing student.
      ii. The nursing student may elect to have a second background check completed by a company approved by the Department of Nursing.
      iii. The nursing student has the right to correct any misinformation from the background check with the company that completed it.
      iv. Background check results may be released to: a) CSUB Human Resources, b) Clinical agency Human Resources, and/or the BRN.

CSUB nursing students are assigned to clinical agencies that have included students in the category of individuals that must complete background checks. As a result, the background check requirement for nursing students is a necessary component of Joint Commission accreditation for these clinical agencies (BRN, EDP-I-33, 2010).

When a nursing student’s background check reveals a criminal offense, this information is shared in a confidential manner with the identified contact person for the clinical agency to which the student has been assigned. Based on the number, type, severity, and recency of offenses, the clinical agency may decline to accept the
nursing student for clinical placement based on the agency’s policy. The clinical agency’s right to deny a nursing student’s placement is recognized by the California Board of Registered Nursing (BRN, EDP-I-33, 2010).

In the event that a nursing student is denied clinical placement at a clinical agency, the Department of Nursing will attempt to place the student in another existing clinical group at a different location. If no clinical agency will accept a nursing student’s placement, then the student would not be able to complete the required clinical course objectives and would be administratively dropped from the CSUB Nursing Program.

4. **Drug Screen**
   a. Initial Non-NIDA drug screening is required for all graduate students. This is completed one time for each new student entering the nursing program. Drug testing will be done at the student’s expense at an off-campus site contracting with the Student Health Services (SHS). Drug testing MUST be completed prior to the beginning of the semester in which the student is admitted. Information about obtaining drug testing will be available through SHS. Results from the laboratory will be sent directly to, and only to the SHS at CSUB. The Department of Nursing Chair, or an appointed designee, will be notified of the results. Results will not be noted on the health clearance form. Repeat drug testing may be required, if the student exhibits suspicious behavior in the clinical setting, at the discretion of the clinical instructor or the clinical agency. The repeat drug test will be at the student’s expense.

5. **Annual Requirements (Submitted each June)**
   a. Health Clearance for newly-admitted and continuing graduate nursing students from the CSUB Student Health Center, including TB test
   b. Maintain the physical and mental qualifications necessary for clinical setting (Essential Functions form)
   c. Maintain a clear, active California RN license
   d. Maintain an American Heart Association BLS Certification
   e. Purchase, and maintain CSU Bakersfield Student Professional Liability Insurance
   f. Submit evidence of a completed Respiratory Fit (Mask Fit) testing
   g. Submit a copy of personal health insurance
   h. Pertussis and Influenza Vaccination Status form
C. Physical and Mental Qualifications

The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. A student with a disability must have the disability verified by the Services for Students with Disabilities office at CSUB. It is to the student’s advantage to do this as soon as possible in the semester to ensure that approved accommodations can be granted in a timely manner. Students requesting accommodations must demonstrate their ability to meet the Essential Functions.

If, after admission to the nursing program, a student develops a physical or mental disability that limits his/her ability to meet the Essential Functions, it is the student’s responsibility to bring this information to the attention of the clinical faculty before he or she begins the clinical course. If unable to meet the clinical course objectives, the student will not be allowed to participate in clinical activities. The student must provide documentation from his or her physician prior to returning to clinical which states that the student is able to meet the Essential Functions.

The Essential Functions form must be signed dated and submitted to the Department of Nursing prior to start of your classes. You will complete this form annually certifying that you are able to meet the essential functions required by the Department of Nursing.

D. Essential Functions for Graduate Nursing Students

There are essential functions or abilities necessary for admission and progression in the complex discipline of nursing at CSU Bakersfield. The candidate must be able to perform all of the essential functions each semester. The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. These essential functions include, but are not limited to, the following:

A. Critical Thinking:
   A student must demonstrate critical thinking ability sufficient for clinical judgment.
   1. Make effective clinical decisions.
   2. Identify cause and effect relationships with clinical data.
   3. Develop nursing care plans.
   4. Perform math calculations requisite to safe dosage calculations and medication administration.
   5. Read, synthesize, analyze, evaluate, and integrate material in the classroom and the clinical setting.

B. Professional-Ethical Conduct:
   A student must possess the ability to reason morally and practice nursing in a professional and ethical manner.
   1. Demonstrate integrity, honesty, responsibility and tolerance.
   2. Abide by professional standards of practice.
   3. Deliver compassionate care to all patient populations.
C. Interpersonal Skills:
A student must demonstrate appropriate interpersonal abilities while interacting with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.
   1. Communicate effectively and sensitively with other students, faculty, staff, patients, families, and other professionals.
   2. Demonstrate willingness and ability to give and receive feedback.
   3. Develop mature, sensitive and effective relationships with clients.
   4. Establish trust and rapport with clients and colleagues.

D. Communications
A student must have the ability to clearly communicate in oral and written forms, and to effectively interpret communication with others.
   1. Use appropriate grammar, vocabulary, and syntax.
   2. Effectively communicate nursing actions.
   3. Appropriately interpret client responses.
   4. Initiate health teaching.
   5. Demonstrate accurate nursing documentation.
   6. Accurately report patient information to members of the health care team.

E. Mobility and Stamina:
A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective nursing care in all health care settings.
   1. Perform basic life support, including BLS.
   2. Function in an emergency situation.
   3. Safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed).
   4. Calibrate and use equipment.
   5. Perform treatments and procedures.
   6. Apply pressure to stop bleeding.
   7. Manipulate diagnostic instruments to adequately perform all aspects of a physical assessment.
   8. Sit, stand, and move about in patient environments for 12 hour periods.

F. Tactile:
   1. Perform palpation and other functions necessary for a physical exam.
   2. Assess texture, shape, size and vibration.
   3. Note temperature changes in skin and equipment.
   4. Perform therapeutic functions (e.g., inserting a urinary catheter or IV, change dressings, give medications).

G. Auditory:
A student must have sufficient auditory ability to effectively monitor and assess health needs of patients.
   1. Hear cries for help.
   2. Hear alarms on equipment and overhead codes.
3. Hear auscultatory sounds using a stethoscope.
4. Hear and interpret verbal communication from patients.
5. Communicate over the telephone.

H. Visual:
A student must possess visual ability for observation and assessment necessary in nursing care.
1. Observe patient responses (e.g., changes in skin color, grimaces).
2. See drainage on dressings and note characteristics of body fluids.
4. Read gauges that monitor patient progress (e.g., sphygmomanometer).
5. Discriminate colors for diagnostic purposes.
6. Assess movements of patients.
7. Observe patient behavior (e.g., in rehab or psychiatric facilities).

I. Behavioral-Emotional Health:
A student must possess the emotional health required for full use of his or her intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities attendant to the care of patients.
1. Maintain mature, sensitive, and effective relationships with patients, students, staff, faculty and other professionals under even highly stressful situations.
2. Experience empathy for the situations and circumstances of others and effectively communicate that empathy.
3. Be willing to examine and change his or her behavior when it interferes with productive individual or team relationships.
4. Prioritize competing demands.
5. Function in stressful circumstances.
6. Separate own needs and experiences in order to maintain objectivity and client-centered care.
7. Adjust to changing circumstances.
8. Plan effectively and complete all assigned duties carefully.
E. Graduate Student Classification Status

Classified Standing in the Master’s Degree Program in Nursing
For classified status, the student must meet all the eligibility and admission requirements.

Conditionally Classified Graduate Standing
An applicant may be admitted as a Conditionally Classified Graduate Student if, in the judgment of the graduate admissions committee, the applicant has a potential for successful completion of all the “conditions” specified by the faculty for admission as a Classified Graduate Student and potential for successful completion of all the requirements for the graduate program. Upon satisfactory completion of all “conditions” specified by the faculty, the student’s status will be administratively changed to Classified Graduate Student.

Advancement to Candidacy
The candidate must have all of the following:

1. Attained Classified status.
2. Completed 22 units of graduate courses in the Plan of Student and required elective courses with a GPA of 3.0 or better (on a scale of A=4.0).
3. Filed a petition for Advancement to Candidacy with the Department of Nursing Graduate Program Director.

F. Grading Scale/Policies and Procedures

Graduate nursing students must have a GPA of 3.0 (on a scale of 4.0=A) to be admitted to Candidacy status.

Grading Scale: The grading scale for nursing courses is:

A = 93-100  B- = 80-82  D+ = 67-69
A- = 90-92  C+ = 77-79  D = 63-66
B+ = 87-89  C = 73-76  D- = 60-62
B = 83-86  C- = 70-72  F = 59 or below

Grading Policy
Students must obtain a minimum grade of “C” in all graduate Core Courses and a minimum grade of “B” in all graduate Specialty Courses in order to progress in the program (see Course Requirements for the Master of Science in Nursing Degree Program). A student may not advance to candidacy status without an overall GPA of 3.0 (on a scale of 4.0=A).

A student who did not achieve a minimum grade of “C” in a graduate Core Course and / or a minimum grade of “B” in a graduate Specialty Course may request reentry into the program (based on seat availability and approved by the GPC) to repeat the course one time. N6290: Culminating Experience must be successfully completed with a grade of “credit.”
Procedures for Changing Grades
Once a final grade has been assigned, it can be changed only in the case of a declared clerical error or through the auspices of a student academic grievance procedure. The definition of a clerical error is an error made by the instructor in grade estimating or posting. No grade change may be made as a result of work completed or presented following the close of the grading period except for completion of work when an “I” or “SP” or “RP” was issued, or, in cases of emergency, as approved by the Dean.

Grade changes are made by completing the “change of grade” form. The “change of grade” form is a multi-copy form and after the grade changes have been made and properly recorded, a copy of the form is sent to each of the following: student, instructors, department of major (student’s advisory file), Admissions & Records.

Failure to Assign a Grade
If an instructor of record fails to assign a final grade, then the department in which the course was offered or in the case of interdisciplinary courses the department in which the instructor serves, should select, by majority vote, a qualified member of the faculty who will determine the appropriate grade and instruct the registrar to assign the grade thereby determined.

G. Program Standards and Progression
According to the policies of the CSUB Department of Nursing, students must meet the standards set by the program. Program standards are based on the policies of contracted clinical agencies, the California Board of Registered Nursing, the ANA Code of Ethics, state and federal laws, and the profession of Nursing. Students whose professional performance and behavior does not meet these standards may be dismissed from the CSUB nursing program regardless of their academic performance. This includes, but is not limited to:

1) Social Media policy violations
2) Breaches of patient confidentiality standards under HIPAA
3) Academic Integrity violations, including but not limited to cheating, unauthorized possession of an examination, or dishonesty in academic matters or patient care
4) Falsification of patient records or academic documents
5) Unauthorized access to clinical agency facilities, equipment, supplies, or medical records
6) Scope of practice violations, including performance of RN-level patient care activities outside of authorized clinical hours
7) Drug or alcohol related offenses
8) Theft
9) Other criminal activities substantially related to the qualifications, functions, and duties of a registered nurse
10) Inability to meet the Essential Physical and Mental Qualifications of the nursing program
11) Disruptive or violent behavior, under the CSUB Zero Tolerance policy
12) Severe maladaptation to the educational process as evidenced by a pattern of:
   a. Inadequate classroom or clinical preparation
   b. Late completion of assignments
   c. Poor communication and/or irresponsible behavior
   d. Absence from scheduled classroom or clinical hours
e. Incivility during classroom or clinical hours that disrupts the teaching and learning environment

A student who is dismissed due to failure to meet CSUB nursing program standards will be notified by the Department Chair. The student may request to have this decision reviewed by the Graduate Program Committee.

H. Comprehensive Exam Grading Policy

To Receive a “Credit” in N6290: Culmination Experience: Comprehensive Examination

To receive a “Credit” in N6290, the student must complete and pass both portions (Part A and Part B) of the Comprehensive FNP Exam.

Part A:
Students must purchase the Family Nurse Practitioner Certificate Exam by Fitzgerald Health Education Associates. The Student must take and pass the proctored Fitzgerald Comprehensive FNP Exam with a 70% benchmark. Students will have the opportunity to repeat the Fitzgerald Comprehensive FNP Exam one additional time (a total of 2 attempts). If the student does not pass the Fitzgerald Comprehensive FNP Exam on the second attempt, the student will not receive credit for N6290.

Part B:
Students must complete and pass the Graduate Nursing Comprehensive Examination for Advanced Practice Students in the FNP Program. The Student must submit an original paper that addresses a clinical question and incorporates the FNP roles(s). The Graduate Nursing Comprehensive Examination paper will be submitted to SafeAssign and blindly reviewed by two randomly assigned faculty members. In the event of a Pass and a Fail grade, a third faculty member will evaluate the exam. If the Student paper receives a failing grade from two readers, the student will have to redo that part of the examination. If the student had problems with. One retake is allowed. Retakes will be scheduled during the later part of the fifth semester. If the student does not pass the Graduate Nursing Comprehensive Examination after the retake, the student will not receive credit for N6290.

The course may be repeated once, upon approval from the Graduate Program Committee.

I. Assignment of a Grade of “Incomplete”

The grade of “Incomplete” can only be assigned according to all of the following criteria:
• at the discretion of the instructor, and
• when a majority of the course has been satisfactorily completed by the student with a "C" or better, and
• when the student is unable to complete the coursework on time due to unforeseen and fully justified reasons, and
• when completion of the remaining coursework does not require unreasonable Department of Nursing resources.
A clinical grade of "I" cannot be assigned to make up clinical hours unless clinical supervision will be available under existing scheduled sections of the same course. A grade of “I” may prevent the student from continuing in nursing courses until the “I” is replaced with a passing grade through satisfactory completion of the remaining coursework according to the student/instructor contract. The “I” grade will automatically convert to an “F” if the student fails to complete the contract within one semester. A grade of "I" cannot be assigned as a way for a student who is failing a course to earn additional points through additional coursework.

J. **Withdrawal from the Graduate Nursing Program or University**

Withdrawal from a nursing course will be considered a nursing course failure if the student was not passing the graduate core course with a “C” or better, or the specialty course with a “B” or better at the time of withdrawal. Although the University transcript may reflect a “W,” the course will be viewed as a nursing course failure by the Department of Nursing.

K. **Re-entry Request**

Students who wish to re-enter the graduate nursing program must make a formal request in writing. Letters are addressed to the Graduate Program Committee (GPC). Requests are granted based on academic history, professional performance, and seat availability. Students who are dismissed due to non-adherence to program standards will also be evaluated based on the seriousness of the violation(s).

L. **Policy Statement for Clinical Refresher**

After being granted permission to re-enter the graduate nursing program by the GPC, the student will be required to enroll in a clinical refresher course. The clinical refresher course is an independent study course designed to update the individual student’s clinical skills. The student is strongly encouraged to audit and attend the course bonding theory. The student will contract with a specified clinical faculty regarding the requirements of the course and the activities that the student will be responsible for completing. The student will be responsible for completion of the agreed upon contract within a predetermined time frame to receive credit. The faculty will provide guidance and coordination for selected activities outlined in the refresher course syllabus.

Failure to complete required course activities, excessive or unexcused absences, or patient safety concerns will result in a clinical warning and may lead to a no credit grade for the course. Failure of the student to demonstrate skills consistent with the specific nursing course tool will result in no credit for the course and the student may not progress in the nursing program. A No Credit grade in a clinical refresher course will be counted as a nursing failure.

M. **Student Complaint and Grievance Procedures**

The formal Student Complaint and Grievance Procedure requires that students first attempt to address their concern through informal meetings within the appropriate lines of authority. Faculty, including those in leadership positions within the DON, are introduced to incoming students at the New Graduate Student Orientation and can be contacted as needed for additional concerns and information. Students can arrange for specific appointments or utilize faculty designated office
hours to express their views or complaints. If students are unable to resolve their complaints with a course instructor, they are encouraged to meet with the team leader of the course. If there is no resolution at this level, the student and instructor are encouraged to meet with the FNP Program Director, Graduate Program Director, or Chair of the DON. Students who remain unsatisfied can meet with the Dean of the School and the Vice-President for Student Affairs. An on-campus Ombudsperson is available to students and serves as an objective mediator who helps resolve conflicts which arise from disagreements. Dr. Maria Paleologou, the current CSUB Ombudsperson, is recognized as an excellent resource for CSUB students and the DON.

Students are encouraged to utilize the informal procedures, including meeting with the Ombudsperson. If no resolution can be achieved through these discussions, a student may elect to file a formal grievance through the University procedures as outlined on the Academic Programs website.

Information on student complaint and grievance procedures and forms can be found on the web via the University’s Grievance and Complaint page at http://www.csub.edu/academicprograms/Complaints%20and%20Grievances/.

**N. University Policies Related to Progression in the Nursing Master’s Program and Graduation**

1. **Scholastic Expectations**
   A candidate for a Master’s degree must earn at least a 3.0 GPA average in all graduate work in graduate standing and in the degree program.

   Students performing below the minimum standard will be placed on academic probation. Students who fail to correct deficiencies within a reasonable time period will be suspended. Unclassified post-Baccalaureate students must maintain a 2.5 cumulative GPA. No course with a grade lower than “C” may apply toward the fulfillment of degree requirements.

2. **Leave of Absence**
   Planned Educational Leave for Graduate Students: Graduate students who have been formally admitted to a Master’s degree program and who are making satisfactory progress in the completion of their plan of study may qualify for a planned educational leave of absence for periods of up to two years and still maintain continuing student status. For further information, contact the graduate program coordinator.

3. **Non-active Standing**
   A student who has been absent from the program more than two consecutive semesters without an approved Leave of Absence or without Continuous Registration will be reclassified as non-active. The student must file a new application for admission and pay appropriate fees to continue graduate studies.
4. **Re-enrollment of Continuing Graduate Students**
   A former student returning to the university after an absence of more than two consecutive semesters must file a new application for admission and pay the application fee. This application will not receive any special consideration in the admission process.

5. **Graduate Writing Competency Requirement**
   All graduate nursing students must demonstrate upper division writing competencies within the first year of beginning classes. If the student has completed the requirement during the Baccalaureate program with a score/grade which meets the minimal requirements specified by the graduate program, the verification of the upper-division writing competency will be accepted. Students who have not yet completed this requirement may register for and pass the Upper Division Writing Competency Examination which is offered at CSUB at least three times each academic year, or may enroll in and satisfactorily complete one of the courses recognized by the University (refer to current course schedule or General Catalog).

6. **Completion of the Comprehensive Examination.**
   You must have been advanced to candidacy (see Classification Status: Advancement to Candidacy) to register for Comprehensive Examination Units. This exam may be repeated one time.

7. **Application for Graduation**
   All graduate students are encouraged to file an application for graduation at least one full semester before they plan to graduate because a response to the application from the Evaluations Office may take six to eight weeks. If the Evaluations Office notifies the student of any deficiencies in graduation requirements for the Master's degree program, the student must make up the deficiencies and reapply for graduation.

8. **Time Limit to Complete Requirements for Graduate Degrees**
   The California Administrative Code, Title 5, Education, specifies that all the requirements for a Master's degree be completed within a seven-year (7) period.

   This time limit requirement means that no more than seven years may elapse between the start of the term of the earliest dated course approved for the Plan of Study and the date the application for graduation is formally approved. The student may formally petition the graduate coordinator for an extension of the time limit or for the appropriate substitution of other appropriate course work.

9. **Change of Address or Name**
   All graduate and post-Baccalaureate students who have a change in address or name must report the change to the Office of the Registrar by submitting the appropriate form with the new name or address and the Nursing Department office. Such changes also should be reported to the graduate program coordinator.
10. **Readmission to Nursing Program**
Students need to reapply to the University and to the Department of Nursing through the Graduate Program Committee (GPC).

Students who wish to re-enter the nursing program must make a formal request in writing. Letters are addressed to the Graduate Program Committee (GPC). Requests are granted based on seat availability. Letters to the GPC should include a) the course that was failed, b) circumstances surrounding that failure, and c) the student’s proposed actions to correct those circumstances.

11. **Health Requirements**
Health Clearance requirements must be completed and reported to the Student Health Center prior to beginning nursing courses each year. The physical examination may be done at the CSUB Student Health Center prior to Fall classes, or it may be done by a physician of the student’s choice at the student’s expense. The Student Health Center provides the Health Clearance form.

() **Graduation Requirements for the Master of Science Degree in Nursing**
The Master of Science degree in Nursing requires completion of the specified number of core and option specific semester units of required courses with a grade point average of at least 3.0 (B).

Students must meet the upper division writing requirement of the University for advancement to candidacy. The student should complete this requirement during the first year of graduate course work. At least one semester before the student plans to graduate, the student should apply for graduation at the University evaluations office and complete the concentration outline with the advisor.

P. **Support Services and Resources**
A number of support services and resources are available to all students at CSUB. The library provides regular orientation tours to acquaint students with the library services. Students can obtain textbooks and supplies from the bookstore. The University Cafeteria and Student Union are available for meals and refreshments. The Children’s Center provides daycare for children two to five years of age.

Counseling services are available to students. In addition, testing services are available for national admissions tests, career, aptitude and personality tests, English and Math placement tests, and the Graduate Writing Assessment exam. Special services are available for students with disabilities. The Student Health Center provides on-campus healthcare. A centralized placement service is maintained through the Career Planning and Placement Center. Students needing tutorial assistance can contact the Academic Advancement Center.

Student Financial Services and Accounting Operations staff are available to assist students with financial account and tuition fee services. Tuition, student forms, and frequently asked questions may be found on their website at: [https://www.csub.edu/bas/fiscal/studaccount/](https://www.csub.edu/bas/fiscal/studaccount/) .
The University Academic Calendar is regularly maintained and may be found at: [http://www.csub.edu/facultyaffairs/Academic_Calendars/index.html](http://www.csub.edu/facultyaffairs/Academic_Calendars/index.html).

**Q. Financial Aid and Scholarships**

**Nursing Student Loans**
Nursing student loans are available for students in the graduate program. In addition, there is a Nursing Student Emergency Loan Fund (the Sue Fujiki Fund) described further on in this document.

**Traineeships**
There are federal traineeships frequently available for full-time students in the graduate program.

**Scholarships**
Various organizations make money available to nursing students, including graduate students based on certain eligibility criteria.

**Grants**
Grants for nursing research are also available from various funding agencies. For more information on such grants, contact the reference librarian or the graduate program coordinator.

Sigma Theta Tau, International, Xi Epsilon Chapter at CSUB provides grants for graduate project endeavors. See the Xi Epsilon Research and Awards Committee Chair.

For additional information contact the Office of Financial Aid and Scholarships of the Graduate Program Coordinator (or access the information on the web at [www.csub.edu/finaid](http://www.csub.edu/finaid)). Applications for financial aid and scholarships are to be submitted directly to the Financial Aid Office. Additional applications may be required for specific scholarships on special forms.

**Sue Fujiki Nursing Student Emergency Loan Fund**

The application form can be found in the “Forms” section of this handbook.

Criteria for use of the loan fund by nursing students:

A. **Eligibility**
   a. Students must be enrolled in a program in the Department of Nursing.
   b. To demonstrate eligibility, students must obtain a referral form, with signature, from a member of the Department of Nursing, Recruitment, Outreach, Scholarship and Awards (ROSA) Committee.

B. **Specifications of the Loan**
   a. The usual limit of the loan will be $200.00. A student may borrow up to $500.00 with permission of the ROSA Committee, if sufficient funds are available.
   b. No interest will be charged, but there will be a processing fee from the CSUB Foundation Office.
c. The loan must be repaid in two months, with possible extension up to four months with the permission of the ROSA Committee.
d. Late payment — If repayment is late, student will not be eligible for another loan until 30 days after repayment.
e. Unpaid loans — Students who are more than 30 days overdue in repaying the loan will be contacted by the Foundation Office. If there is no response, or no arrangement for repayment, the Department of Nursing ROSA Committee will be notified for a decision on further action.
Section III. General Policies
A. Health Requirements: Graduate Students

The Health Requirements for both newly admitted and continuing graduate nursing students can be located on the Graduate Nursing Program homepage at www.csub.edu/nursing/programs/MSN.

B. Student Individual Health Insurance

It is recommended that each student be responsible for obtaining individual health insurance. Neither the University nor clinical agencies can be held responsible for the student's health benefits.

C. Injury Policy (CSUB)

The single most important response action in the case of student, visitor or employee injury is to contact University Police to ensure that emergency medical services are made available to the injured person(s) as quickly as possible.

Students, visitors, and others should report incidents and/or accidents by contacting University Police or Risk Management in non-Emergency situations. Students should report to the Faculty supervising during the time of the incident if the incident occurs during class or laboratory session. Risk Management will follow up with the responsible University staff regarding the reported Accident/Incident. Serious Incidents / Incidents Must Be Reported to University Police Department as soon as possible and will be assigned a UPD case number.

- Faculty and Staff should complete the California State STD 268 within 48 hours of the accident.
- Student and visitors should file a campus Incident Report.

Based upon the nature of the incident/accident, Risk Management will investigate and may provide recommendations or request repairs, notify insurers, and ensure full documentation of the incident for purposes of prevention of future injuries and for managing any claims that may result.

If injured on the job, employees are to report (where, when, and how the accident happened) and get immediate treatment. Employees will contact their supervisor and the Human Resources Department to get authorized medical treatment. Employees will be required to fill out all necessary paperwork for work related injuries. If there is an immediate emergency, employees are to get the best treatment available and then report the injury to the appropriate supervisor and the Human Resources Department as quickly as possible.

California State University, Bakersfield Safety and Risk Management website http://www.csub.edu/BAS/srm/ (2015)
The following forms can be found at http://www.csub.edu/bas/srm/ under “Employee and Supervisors Injury and Illness Reporting”:

- Student and Visitor Injury or Accident Report (student)
- Incident and Accident Reporting Form (employee)
- Supervisors Report of Injury Form (employee supervisor)

In the event of blood-borne pathogen exposure, complete the BBP Post-Exposure Report Form available at http://www.csub.edu/BAS/srm/_files/BBP%20Exposure%20Report.pdf and Fax the form to (661) 654-2299.

1) Faculty member will provide the DWC 1 Form, available at http://www.csub.edu/foundation/_files/_HR_Files/Workers Comp/DWCForm1.pdf to the student to complete lines 1-8 within 24 hours of the injury.
2) Faculty will submit the original Supervisor Report of Injury Form and the DWC 1 Form to Tim Ridley, Director, Safety and Risk Management within 3 days.
3) Faculty member will counsel student as appropriate to determine how injury could have been prevented and to recommend counseling services as appropriate.

Additional Notes:
Employee Health Nurse at clinical site may be in contact with the student/faculty.

Details on the Injury and Illness Prevention Programs can be found at the following website: http://www.csub.edu/bas/srm/Injury%20and%20Illness%20Prevention%20Programs/index.html

Revised and approved by UPC 1/20/12, updated 9/15 JHP; updated LL 12/15; GPC 11/16

D. Annual Health and Safety Requirements

All students will receive a letter from the Department over the summer with information on the requirements which must be met by the first day of the class of the fall semester.

NP students will be required to submit copies of current BLS card, health clearance (including TB test), and malpractice insurance sealed in an envelope clearly labeled with the student’s name. NP students will be required to submit a signed Annual Health & Safety Requirements form documenting that they have met the OSHA requirements. The sealed envelope must be submitted by the first day of the class of the fall semester. In addition, the NP student must upload all required documents to the Typhon System. Students who have not met the requirements will not be allowed in the clinical setting. The maintenance of these records is the responsibility of the student. The Annual Health & Safety Requirements can be found at www.csub.edu/nursing/programs/MSN.

A master checklist will be maintained by the Nursing office documenting receipt of the required documents. The copies of the documents will be placed in the student files. Faculty will be
responsible to check the master list to verify that students in their assigned clinical sections have met the requirements prior to allowing the student to enter into the clinical area.

E. Mask Fit Testing

Rationale: CSUB students learn the skills required for nursing in many clinical sites in Kern County and surrounding areas. These clinical sites protect their health workers against exposure to various organisms, including the tubercle bacillus, the organism that causes Tuberculosis (TB).

Policy: OSHA’s policy is that all health care organizations verify that each worker is protected through an annual mask fit test. The health care institutions have, in turn, indicated that all faculty and nursing students will be mask-fit tested annually.

F. Malpractice Insurance

Malpractice insurance, providing protection up to $1,000,000 liability for each incident and $3,000,000 aggregate for the individual nursing student, must be in force before the student begins course work in the nursing program. This insurance covers the student during clinical laboratory portions of the program. The Family Nurse Practitioner students must purchase the policy specific to the FNP option.

The University makes available blanket coverage at a nominal cost to the individual student. This insurance may be purchased at the Cashier’s Office through the California State University, Bakersfield, 9001 Stockdale Highway, Bakersfield, California 93311-1022.

Coverage obtained through other sources must provide an amount of coverage at $1,000,000/incident and $3,000,000 aggregate. Family Nurse Practitioner students must obtain insurance specific to the FNP role which may have a higher premium. If purchased privately, a copy of the face sheet of the policy detailing coverage amount and dates of coverage must be in the student’s file. The private malpractice face sheet or CSUB receipt for malpractice must be obtained annually and presented to the Graduate Coordinator during the first week of Fall Semester prior to beginning graduate nursing courses. A copy of the blanket policy is available for perusal in the Nursing Department office. A copy of the policy is on reserve in the library under the Nursing Department section.

G. RN License

Students must have a current, clear, and active license as a registered nurse in California on admission and the license must remain current, clear, and active during enrollment in the nursing graduate program. Verification of the RN license will be obtained by the Graduate Coordinator.

H. BLS Healthcare Provider Card

Students must maintain a current BLS Healthcare Provider card. This must include infant, child, 1-person, 2-person, adult. Students must provide a copy of the current card to the Department of Nursing office.
I. Uniforms

Graduate students wear business casual, closed toe shoes, and white laboratory coats as appropriate in the clinical agency or healthcare setting. A photo identification badge identifying the student as a graduate student from CSUB Department of Nursing must be worn.

J. Required Identification

All graduate nursing students need to contact the CSUB Department of Nursing in order to have a photo identification badge made. The badge will include:

First line:  <Student Name>, RN <Other information as space allows per student request>
Second line:  Family Nurse Practitioner Student <for FNP students>

Third line:  Department of Nursing, CSUB

K. Occupational Safety and Health Requirements

The federal OSHA requirements must be met annually by all personnel providing direct patient care in healthcare agencies. The California State University, Bakersfield academic calendar of three semesters per year and the variety of clinical agencies used by the Department of Nursing could result in agencies having overlapping/duplicate requirements for students and faculty. Therefore, the CSUB nursing faculty will assume responsibility for providing the annual OSHA information to students and faculty.

For continuing nursing students, the OSHA requirements will be provided early in the fall semester. For new RN students, graduate students, and transfer or returning nursing students, the OSHA requirements will be provided in the first clinical course taken during the academic year.

Each student will complete the OSHA requirements as indicated on the Annual Health and Safety Requirement form. This will be signed by the faculty member. The original will be collected by the faculty member for inclusion in the student’s file. A copy of the form will be given to the student. The student may be requested to show or provide a copy of this form to health agency personnel. A copy of the form can be printed from www.csub.edu/nursing/programs/MSN.

L. The CSUB Nursing Student Honor Commitment

The Honor Commitment is a personal commitment to honor and integrity which is self-imposed and not enforced by an outside authority. All students in the Department of Nursing pledge to follow the Honor Commitment.

The Honor Commitment form can be found in the “Forms” section of this handbook.
## Ethical Standards

A hallmark of professional practice is a Professional Code of Ethics. Ethical codes for professional nursing practice have been developed and revised by the American Nurses Association (ANA):

<table>
<thead>
<tr>
<th>Provision</th>
<th>Definition</th>
<th>Interpretive Statements</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provision 1</strong></td>
<td>1.1 Respect for Human Dignity</td>
<td>The nurse practices with compassion and respect for every person.</td>
<td>Establishing relationships of trust with patients and colleagues; supporting the patient’s right to make decisions about their healthcare, following Advance Directives.</td>
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<td>1.2 Relationships with Patients</td>
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<td>1.3 The Nature of Health</td>
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<td>1.4 The Right to Self-Determination</td>
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<td>1.5 Relationships with Colleagues and Others</td>
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<td><strong>Provision 2</strong></td>
<td>2.1 Primacy of the Patient’s Interests</td>
<td>The nurse’s primary commitment is to the patient; family, group, community, or population.</td>
<td>Collaborate to provide high-quality patient-centered health care, avoid intimate relationships with patients.</td>
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<td>2.2 Conflict of Interest for Nurses</td>
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<td>2.3 Collaboration</td>
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<td>2.4 Professional Boundaries</td>
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<td><strong>Provision 3</strong></td>
<td>3.1 Protection of the Rights of Privacy and Confidentiality</td>
<td>The nurse promotes, advocates for, and protects the rights, health and safety of the patient.</td>
<td>Not talking about patients in the elevator, cafeteria, or at home. No talking about patients or their situation on any social media site.</td>
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<td>3.2 Protection of Human Participants in Research</td>
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<td>No patient identifiers on care plan or any other documents.</td>
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<td>3.3 Performance Standards and Review Mechanism</td>
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<td>Report errors. Notify if another student has made an error. (Condoning errors through silence is unacceptable.)</td>
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<td>3.4 Professional Responsibility in Promoting a Culture of Safety</td>
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<td>3.5 Protection of Patient Health and Safety by Acting on Questionable Practice</td>
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<td>3.6 Patient Protection and Impaired Practice</td>
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<td>Provision 4</td>
<td>4.1 Authority, Accountability, and Responsibility</td>
<td>The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.</td>
<td>Maintaining sterile technique when performing procedures. Not performing procedures for which you have not been trained. Notifying the Professor and Preceptor if you need further supervision.</td>
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<td>4.2 Accountability for Nursing Judgments, Decisions, and Actions</td>
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<td>4.3 Responsibility for Nursing Judgments, Decisions, and Actions</td>
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<td>4.4 Assignment and Delegation of Nursing Activities or Tasks</td>
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<td>Provision 5</td>
<td>5.1 Duties to Self and Others</td>
<td>The nurse owes the same duties to self as to others.</td>
<td>Leading a healthy lifestyle. Never abandon a patient. Commitment to lifelong learning and education in the nursing profession.</td>
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<td>5.2 Promotion of Personal Health, Safety, and Well-Being</td>
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<td>5.3 Preservation of Wholeness of Character</td>
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<td>5.4 Preservation of Integrity</td>
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<td>5.5 Maintenance of Competence and Continuation of Professional Growth</td>
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<td>5.6 Continuation of Personal Growth</td>
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<td>Provision 6</td>
<td>6.1 The Environment and Moral Virtue</td>
<td>The nurse establishes, maintains, and improves the ethical environment of the work setting that are conducive to safe, quality health care.</td>
<td>Giving pain meds on time. Giving reassurance to patients and their families.</td>
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<td>6.2 The Environment and Ethical Obligation</td>
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<td>6.3 Responsibility for the Healthcare Environment</td>
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<td>Provision 7</td>
<td>7.1 Contributions through Research and Scholarly Inquiry</td>
<td>The nurse, in all roles, advances the profession through research and scholarly inquiry, professional standards.</td>
<td>Nursing research must conform to ethical standards.</td>
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<td>7.2 Contributions through Developing, Maintaining, and Implementing Professional Practice Standards</td>
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<td>7.3 Contributions through Nursing and Health Policy Development</td>
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<td>Provision 8</td>
<td>8.1 Health is a Universal Right</td>
<td>The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.</td>
<td>If child abuse is suspected, mandatory reporters of abuse. Offer immunizations.</td>
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<td>8.2 Collaboration for Health, Human Rights, and Health Diplomacy</td>
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<td>8.3 Obligation to Advance Health and Human Rights and Reduce Disparities</td>
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<td>8.4 Collaboration for Human Rights in Complex, Extreme, or Extraordinary Practice Settings</td>
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<td>Provision 9</td>
<td>9.1 Articulation and Assertion of Values</td>
<td>The profession of nursing, through its professional organizations, must articulate nursing values, maintain integrity and integrate social justice into nursing.</td>
<td>Apply hospital rules fairly for all patients/families. Treat other healthcare professionals respectfully.</td>
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</tbody>
</table>

### N. Code of Academic Conduct

All members of the academic community are responsible for the academic integrity of the CSUB campus. Existing policies forbid cheating on examinations, plagiarism, and other forms of academic dishonesty. (1) Academic dishonesty is contrary to the purposes of the University and is not to be tolerated. High standards of behavior must be in place to support the community.

Examples of academic misconduct include:

- Receiving or providing unauthorized assistance on examinations
- Using unauthorized materials during an examination
- Plagiarism – using materials from sources without citations
- Altering an exam and submitting it for re-grading
- Fabricating data or reference
- Using false excuses to obtain extensions of time

The ultimate success of a code of academic conduct depends largely on the degree to which it is willingly supported by students themselves.
Q. Attendance Policy

Lecture Attendance

1. Class attendance is expected of all students enrolled at the University. The instructor in each course sets the standard expected in this regard. When students are absent from classes, it is their responsibility to inform instructors of the reason for the absence and to arrange to make up missed classwork and assignments. Absence of more than 15% of the class attendance will result in a course failure, unless due to a serious and compelling reason has been approved by the faculty.
2. Students' guests are allowed in lectures only with special permission from the instructor.
3. Students must obtain permission prior to using tape recorders in the classroom.
4. Children are not permitted in the classroom.

P. Clinical Warning Policy

In the event that a student is not performing at the expected standards, as outlined in the course objectives for the FNP Program, a clinical warning will be given.

A clinical warning can be given in the event of, but not all inclusive of:
1. Unprofessional conduct in the clinical practice setting.
2. Failure to meet the objectives of the course during the semester.
3. Failure to submit a schedule of clinical hours and dates to Typhon at the start of the semester; and/or update the schedule as changes and new dates are scheduled.
4. Failure to communicate in an appropriate time frame to your instructor for schedule changes, missing assignments, etc.
5. A repetitive pattern of late assignments submissions, three or more.

Clinical warnings may result in a clinical course failure.

Q. Late Assignment Policy

Points will be deducted for all late assignments submitted after the due date and time. Ten percent (10%) of the grade will be deducted for each day late including weekends and holidays.

R. Professionalism Policy

It is expected that the graduate student will conduct themselves in a professional and responsible manner both in class and in their clinical setting.

Professional Conduct in the Advanced Practice Nursing Role:
- **Respect for Persons:** Compassion, Respect, dignity; Responsibility & Accountability for health promotion and optimal care of patients and themselves. Collaborates with the health care team to protect human rights and promote health. Behaves in a non-offensive and non-discriminatory manner in all settings.
- **Respect for Confidentiality:** Keep all clinical/patient data confidential. Clinical/patient data used in in all school work, papers, presentations, research findings and in the clinical
setting must be used in a manner that is accurate, truthful, and confidential. Patient data must have a justifiable reason for its presence. Acknowledge real data gaps that may exist in written work.

- **Honesty:** Be truthful in verbal and in written communications; do not cheat, plagiarize, or otherwise act dishonestly. Maintain accurate, honest records of patient care.
- **Integrity:** adherence to a code of conduct and professionalism and the American Nurse's Association's Code of Ethics for Nurses; Acknowledge your errors of omission and commission to patients, peers, Faculty, Preceptors, and staff.
- **Decision Making:** Make patient care decisions based on patients' needs and desires as well as evidenced based practice.
- **Professionalism:** Appearance, dress, professional behavior follow generally accepted professional norms; Establishes, maintains, and improves the ethical environment of the work setting demonstrated through their professional behavior.
- **Responding to supervision:** Accepts and incorporates feedback in a non-resistant and non-defensive manner; Accepts responsibility for failure or errors.
- **Demonstrating dependability and appropriate initiative:** Completes tasks in a timely fashion (papers, reports, examinations, appointments, patient documentation).
- **Recognizing limits & when to seek help:** Appears aware of own inadequacies; correctly estimates own abilities or knowledge with supervision; Recognizes own limits, and when to seek help.

S. **Social Media Policy**

All cell phones and social media devices should be turned off during class and clinical time. This includes no text messaging or postings on Facebook, Twitter, or any other social media sites during class or clinical time. Cell phones may only be used during breaks and meal time (if meal time is not utilized as part of clinical time for conference).

There is no such thing as a “private” social media site. Search engines can locate items many years after the publication of the original post. Comments can be forwarded or copied. It is often wise to delay posting until you are clear headed, even if you feel angry or passionate about a particular subject. If you are unsure about posting something, ask your faculty.

No inappropriate content should be text messaged, or posted on Facebook, Twitter or on any other social media networks; this includes responding to another student’s post. If you wouldn’t say it in an elevator, you shouldn’t put it online. Inappropriate content includes but is not limited to: patient information, stories or pictures related to patients or families cared for during clinical, and information related to health care agencies, co-workers, faculty and/or managers. Information should not be shared with family members, friends, or posted on social media even if names or other identifying information are not used. Absolutely no pictures should be taken, saved, forwarded or posted of patients or family members, even if you have their permission. Patient confidentiality must be upheld at all times.
Future employers hold you to the highest standards of behavior. Ensure that your online image is the same as your in-person image. Employers are conducting Web searches on potential job candidates long before they extend job offers.

You can be fined for a HIPAA violation, and/or sued independently for breaching of confidentiality or for ruining the reputation of patients, family members, faculty, or co-workers. You are legally liable for what you post. Please see the Undergraduate Nursing Student Policy Handbook for further information regarding patient’s rights to privacy and confidentiality. Please note, this includes emails, over unsecured networks, containing patient information to peers, staff, and/or faculty.

Failure to follow these guidelines related to use of social media may result in grade reduction, course failure, and/or dismissal from the nursing program.

Approved by Undergraduate Program Committee 9/16/10, Faculty Organization 10/2010, Updated 9/2015

1. Simulation Center & Skills Laboratory Rules

These rules are designed to promote safe and efficient use of the Simulation Center and Skills laboratory. The Simulation Center and Skills laboratory setting is intended to simulate the agency environment. The equipment in the Simulation Center is quite expensive and must be treated with respect. It is expected that behavior in the Simulation Center and Skills laboratory will reflect an understanding of proper behavior in the clinical setting. The following rules apply to individuals or groups using the Simulation Center and Skills laboratory:

1. Food and drink are NOT allowed in the Simulation Center and Skills laboratory.
2. Students must wear their CSUB identification badge, and appropriate street clothes when in the skills lab. White laboratory coats are to be worn during assigned clinical simulation time.
3. Students are not allowed in the Simulation Center and Skills laboratory without faculty supervision, unless given express consent by the Skills Lab Coordinator.
4. Replace chairs, bedside tables, mannequins, and beds and privacy curtains to their proper location.
5. Faculty must supervise the use of equipment in the locked cabinets. Students may use their own laboratory equipment on scheduled lab day and by pre-arrangement with faculty. All equipment must be returned to the area designated by the Skills Laboratory Coordinator at the end of each laboratory session. Faculty will supervise the return of equipment and ensure the laboratory is locked after use.
6. The simulation equipment (mannequins, models) requires gentle handling and students must be supervised by a faculty member. The Computerized Patient Simulators are to be handled by trained faculty ONLY.
7. Sitting or lying on the beds is prohibited, except for specified simulation laboratory experiences. Never wear shoes while in or on the beds. The beds are not intended for naps- if you are ill, go to the Student Health Center.
8. Report any safety or equipment problems to the faculty, Skills Lab Coordinator or the nursing office.
9. Simulation exercises demand the same privacy as would be accorded a patient in the Agency.
10. Trash and used disposable equipment should be placed in the proper containers before you leave. Contaminated equipment should be disposed of following specific policies.
11. Simulation Center and Skills Laboratory equipment and supplies are for use only for clinical lab course work.
12. Syringes and needles can only be used in the skills laboratory or lecture room when faculty is available to supervise. Syringes and needles cannot be signed out or taken out of the nursing building by students. The supervising faculty is responsible for the correct disposal of used syringes and needles.

Revised January 2010, Revised GPC 11/16
U. Policy for Students Practicing Procedures on Each Other

In the course of the nursing program, when learning new skills, it is often useful for students to take the role of the patient. This enhances the learning experience in several ways:

1. For the practicing students in that a live “patient” gives them a more realistic experience.
2. For the student “patient” since it gives her/him an idea of what the procedure is like from the patient’s perspective and should help her/him be a more sensitive care-giver.

In asking the individual student to take on the patient role, the student’s right to privacy and right to refuse a given procedure will be protected. Faculty will make every effort to protect students’ privacy by making sure other students follow the same guidelines they would use in the hospital to avoid exposure to the patient. In the case of some procedures, such as baths, students will be given the opportunity to bring bathing suits or other appropriate clothing.

If a student chooses not to be a “patient” for a particular skill, such as an injection or bath, the instructor will arrange a simulated experience for that student’s practice, unless another student is willing to take his/her turn as patient. Students will demonstrate IV insertion in the skills lab. Faculty must be notified of special requests a minimum of four (4) days prior to the assigned exercise.

Certain procedures may be deemed by the faculty to be unsuitable or potentially dangerous for students to practice on each other. Each faculty team or the total faculty will make this decision when the occasion arises.

Students may not practice any invasive procedure on another student unless there is faculty supervision and it is in the skills laboratory. At no time is an invasive procedure to be performed on any person or client outside of the nursing classes or clinical area unless supervised by a faculty member.

Please sign and return one copy to your clinical faculty.

My signature indicates that I have read and understand the above policy and that I will not hold CSUB or any faculty member liable.

Print Name: ____________________________
Signature: ____________________________
Date: ________________________________

Approved by Faculty Organization Committee June 13, 2002
V. Nursing Computer Lab Guidelines

1. The Nursing Computer lab is reserved for students currently enrolled in the nursing program.
2. Students must wear their current CSUB ID badge while using the computers.
3. No programs are to be downloaded or installed. The computer background screen, screen saver, desktop icons, links, etc. should not be altered or deleted.
4. Students must provide their own paper to use the printer.
5. Students must be working on nursing related work to use the computers; no Facebook, instant messaging, blogging, twittering, etc.
6. No food or drink is permitted near the computers. The tables in the middle of the room have been designated for that purpose.
7. Do not try and fix the printer if there is a problem. Report all problems to one of the department administrative staff.
8. Viewing pornography or any other inappropriate images or text will not be tolerated and you will be asked to leave. Downloading illegal material is a violation of University policies and will result in student discipline.
9. A stapler, three-hole punch, and a pencil sharpener have been placed in the lab for your convenience. Please treat these items with respect, as the Nursing Department budget does not allow for replacement of these items. Please do not ask to use the department equipment. DO report to one of the administrative staff if the stapler is out of staples.
10. Children are not allowed in the computer lab.

Students must demonstrate professional behavior and respect for the study environment. Students who are socializing or disrupting the environment will be asked to leave.

W. Student Representation on Departmental Committees

Each nursing class will identify a representative to attend the Nursing Department Committee meetings, including Faculty Organization, Graduate Program Committee, Program Evaluation Committee, and Recruitment, Outreach, Scholarships, and Awards Committee. It is the responsibility of the student representative to attend or send an alternate, and to report back to the nursing students. It is also the responsibility of the students to provide the elected representatives with input so that they may adequately represent their colleagues at the meetings. Topics to be discussed at meetings must be addressed with the Departmental Committee Chair prior to the meeting for the item to be placed on the agenda.

X. Student Feedback

Student evaluation of specific courses, faculty, and level objectives is sought at many points during the nursing program as part of the Program Evaluation Plan. Course, Level and Program evaluations are submitted using surveys through Blackboard. In addition, evaluation of the faculty member’s teaching is done in a formal manner through the SOCI (Student Opinionnaire on Courses and Instruction). Students in each regular class offered at the University are asked to fill in questionnaires which report their assessment of the course content and the instruction in that class. These SOCIs are used both by individual faculty members and the University administration in a continuing effort to ensure that California State University, Bakersfield’s instructional
program is as effective as possible. The SOCI is administered during the last week of the semester prior to finals.

Y. Lines of Communication

If students are having academic difficulty or other problems in any course, they should first ask their instructor for help to resolve the problem. If this does not result in resolution of the problem, the student needs to seek the assistance of the Team Leader for the course. If the difficulty and/or problems still persist, the student may then seek the assistance of the Undergraduate Program Director for problem resolution. If there is still a problem, the student should then seek the help of the Department of Nursing Chair.

Any unresolved issues can be referred to the CSUB ombudsman: http://www.csub.edu/counselingcenter/ombudsman/index.html
Section IV. Written Work Policies & Culminating Activity
A. Nursing Department Style for Written Assignments

1. All formal papers must be typed.

2. The Department of Nursing has adopted the 6th edition APA guidelines as a standard for all written work. The APA Manual is available for purchase from the university bookstore and is a required textbook for each theory course.
   a. Refer to the Nursing Policy on APA for Department of Nursing specific modifications.

3. Students should use the APA guidelines for grammar, format, and style.
   a. Failure to correctly cite sources will result in a point deduction
   b. Students should demonstrate mastery of professional writing by using correct punctuation, spelling and grammar.

4. Students are expected to turn in original work. Papers may be submitted using plagiarism detection software. If inadequate referencing/plagiarism is identified, a plagiarism/theory course warning will be issued. A copy will be placed in the student file.
   a. Penalty can range from a point deduction on the assignment to course failure depending on the severity of the violation.

B. Nursing Department Policy on APA Publication Manual

The CSUB Department of Nursing requires that student papers, thesis, and reports with citations be prepared according to the American Psychological Association Publication Manual. Students are required to use the latest version of the manual. The Department of Nursing and individual faculty members will advise students of any accepted variations from the manual. The APA Style Guide to Electronic References, published electronically, may be recommended by Faculty for their courses. The most current Department APA Policy and Resources can be found on the CSUB Nursing Communication Center page on Blackboard.

The following check list is adapted from the APA Publication Manual, Sixth Ed. (2011) and the APA Style Guide to Electronic References, Sixth Ed. (2012).
General Information

Format (8.03)
- Type on 8 1/2 x 11 inch white paper
- Times New Roman, 12 font
- Double space entire paper, including title page, text, and reference page (8.03)
- Pages numbered in sequence, starting with the title page (8.03)
- Margins on all pages 1” top, bottom, right, and left from body of text to edge of paper (8.03)
- Title page includes 4 elements: (this varies from APA 6th Edition)
  - Title page information located in upper half of first page (2.01)
  - Page number, upper right-hand corner (8.03)
  - Title less than 12 words (2.01)
  - Author’s name (2.02)
  - Institution (California State University, Bakersfield) (2.02)
  - Do not put an author’s note or abstract on the Title Page (CSUB Nursing Department policy)
- No running head (CSUB Nursing Departmental Policy)
- Put page header on all pages- use shortened version of title, no names of people.
- No author note (CSUB Nursing Departmental Policy)
- Page 2 text begins with full title, centered, no boldface- not Level1 heading (Figure 2.1)
- Do not label “Introduction” on page 2; it is understood (Figure 2.1)
- Level 1 headings begin following introductory paragraph(s)
- Levels of heading reflect the organization of the paper (3.03, Table 3.1)
- Paragraph length: longer than one sentence but less than one manuscript page (3.08)
- Abbreviations are only used when necessary, and when used for the first time in the paper, are written out entirely (explained) (4.22-4.30)
- Paraphrased information requires author(s) and year in the in-text citation (1.10, 6.03-6.10)
- Quotations require author(s), year, and page or paragraph number in the in-text citation (6.03)
- Seriation in a sentence has a specific format (3.04) – p. 63-64

References (2.11, 6.11-7.07)
- Fresh page, next page number in sequence
  Title “References” – no longer bolded.
- Double space every line, NOT single spaced, NO extra spaces
- Alphabetize by name of primary author (first author listed)
- Prominent publishing cities do not require states on reference list
- States are abbreviated
- Publishers, Co., or Inc. are omitted, Books & Press are retained
- Omit personal communications from reference page; cited in text only (6.20)
- Online Sources (6.31)
  o Provide full web address so that another person may easily locate same article
  o Do not add symbols to address
  o Include URL and DOI for each article or web resource
7.01 Periodicals
   Articles start on p. 187. Examples begin on p. 198 (Examples 1-3)
7.02 Books
   See p. 203. Examples 19 & 20 and PowerPoint
7.03 Technical and Research Reports
   Corporate/Government/Organization Websites on p. 205 (Examples 31-33)
7.11 Internet Message Boards, Electronic Mailing Lists, & Other Online Communities
   See p. 215. Examples 76 & 77 and PowerPoint

Headings p. 62-63
   The introduction does NOT carry a heading label, do not use it to title the introduction—
      it’s understood (2.05)
   - Organization of Manuscript with Headings (3.03) examples are provided
   - Levels of Headings (3.03) Table 3.1
   - Level 1 Centered, Boldface, Uppercase and Lowercase Heading
   - Level 2 Flush Left, Boldface, Uppercase and Lowercase Heading
   - Level 3 Indented, boldface, uppercase first word only and lowercase paragraph ending
      with a period.
   - Level 4 Indented, boldface, italicized, uppercase first word and lowercase paragraph
      heading ending with a period.
   - Level 5 Indented, italicized no boldface, uppercase first word and lowercase paragraph
      heading ending with a period.
   - Most faculty prefer only Level 1 and Level 2 Headings.

Sample Papers

The Publication Manual (6th edition) provides sample papers and examples of references in
   (Chapter 2, pp. 41-59).

Technical and Writing Errors

Carefully proofread for:
   - it’s and its
   - there, their, and they’re
   - use of citation in the paper but it is not listed on the reference list & vice versa
   - correct use of numbering, underlining, and lines in tables and figures
   - single sentence paragraph or very long paragraphs
   - overuse of the same word in a sentence or throughout a paragraph
   - use of a numerical figure when a number starts a sentence, should be written out
   - consistent use of “%” symbol or word “percent”
   - consistent use of same tense within a sentence and whenever possible within a paragraph
   - use past tense for results based on completed studies
   - avoid use of first person unless it is necessary and permitted by instructor
   - check authors’ and publication year of all in-text citations against reference page
Additional Help

Internet resources:


Online Writing Lab (OWL) at Purdue University: http://owl.english.purdue.edu/

KnightCite Citation Service web-form provided by Hekman Library Calvin
http://www.calvin.edu/library/knightcite

The Writing Center at The University of Wisconsin, Madison:

Other:
http://www.apastyle.org
http://www.indiana.edu/~wts/pamphlets.shtml
http://www.nwmissouri.edu/library/citing/citing.htm
http://www.crossref.org

Reference:


C. Academic Integrity Violation Process

The principles of truth and integrity are recognized as fundamental to a community of teachers and scholars. Students are expected to do all work assigned to them without unauthorized assistance and without giving unauthorized assistance. Students must adhere to the University’s Academic Integrity Policy found in the current online CSUB Catalog and at the Office of Student Rights and Responsibilities (OSRR) website. Academic dishonesty is a broad category of actions that involve fraud and deception to improve a grade or obtain course credit. There are certain forms of conduct that violate the University's policy of academic integrity. These forms include but are not limited to:

*Cheating:* a broad category of actions that involve fraud and deception to improve a grade or obtain course credit e.g. submission of the same paper, or essentially the same paper for credit in a different courses or intentionally utilizing someone else's work.

*Plagiarism:* consists of the misuse of publications or unpublished works of another by claiming them as one's own. Plagiarism may consist of handing in someone else's work as one's own, copying or purchasing a pre-written composition and claiming it as one's own, using paragraphs, sentences, phrases, words or ideas written by another without giving appropriate citation, or using data and/or statistics compiled by
another without giving appropriate citation. Reuse of student’s own work is also considered plagiarism.

**Fabrication:** intentional falsification of information on class assignments or presentations.

**Unauthorized Collaboration:** means working with others without the specific permission of the instructor on assignments that will be submitted for a grade. This rule applies to in-class or take-home tests, papers, labs, or homework assignments. Student may not collaborate without faculty authorization.

In the Department of Nursing, Academic Integrity Violations will be handled in the following ways:

1. *Minor violations* will be documented using the “Notification of Violation of Academic Integrity Policies” form. A student who violates the academic integrity policy can receive a deduction in points or an assignment grade of zero. A copy of the notification will be placed in the student file along with a copy of the paper and/or assignment. The second minor violation in subsequent assignments and/or courses will be treated as a major violation and referred to the OSRR.

2. *Major violations* will be documented using the “Notification of Violation of Academic Integrity Policies” and “Academic Integrity Violation Reporting” forms. A copy of the notification will be placed in the student file along with a copy of the paper and/or assignment. These violations will be reported to the OSRR for adjudication to determine additional disciplinary sanctions.

December 2010 DW/MK; 9/1
CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing

Notification of Violation of Academic Integrity Policies in Written Assignments

Student Name_________________________________________ Date: _____

Course: ___________________________________________________ Semester/Year:

**Minor Violation:** The paper you submitted for this course has the following minor problem(s). A copy of your paper will be placed in your student file. If a minor violation occurs in subsequent assignments and/or courses, then you will receive a major violation warning and referred to the Office of Student Rights and Responsibilities (OSRR):

- _____ Direct quote without one or two of the following:
  - _____ author
  - _____ year
  - _____ page number
  - _____ quotation marks

- _____ Paraphrasing without citation

- _____ Excessive use of reference material and little or no original student writing.

The following action has been taken:

- _____ Deducted points for the assignment (see grading rubric or grading criteria)
- _____ Assigned a grade of zero for the assignment

**Major Violation:** The paper you submitted for this course has the following major problem(s). A copy of your paper will be placed in your student file. In addition to this warning, an Academic Integrity Violation Report Form will be completed and forwarded to the OSRR for further action:

- _____ Direct quote without three or four of the following:
  - _____ author
  - _____ year
  - _____ page numbers
  - _____ quotation marks

- _____ Use of a paper (or essentially the same paper) you submitted in another course

- _____ Use of another student’s paper or a purchased paper

- _____ Previous minor violation documented

The following action has been taken:

- _____ Deducted points for the assignment (see grading rubric or grading criteria)
- _____ Assigned a grade of zero for the assignment
- _____ Assigned a grade of F for the course
- _____ Student Violation letter given/Academic Integrity Violation Report Form submitted to OSRR

This warning will be placed in your Department of Nursing student file and will represent notification of your violation of academic integrity policies. Please refer to the University’s Academic Integrity Policy found in the current online CSUB Catalog under Section XI Academic Information.

_________________________________________ Date ________________
Faculty Signature

_________________________________________ Date ________________
Student Signature

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Rev. 9/11
Section V.  FNP Program Policies & Information
A. Course Requirements for the Master of Science in Nursing MSN) Degree Program

Core Courses
N5200 Advanced Health Assessment (Theory)
N5201 Advanced Health Assessment (Clinical)
N5220 Theoretical Foundations of Nursing
N5230 Educational Principles and Methodology Applied to Nursing (Elective)
N5240 Human Diversity & Health Care Policy
N5250 Transformational Leadership and APRN Role Development
N6260 Advanced Nursing Research
N6290 Culminating Experience: Comprehensive Examination
N6300 Pathophysiology for Advanced Practice Nurses
N6310 Pharmacotherapeutics for Advanced Practice Nurses

Specialty Courses
Family Nurse Practitioner Track
N6320 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Theory)
N6321 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Clinical)
N6330 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Theory)
N6331 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Clinical)
N6340 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Theory)
N6341 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Clinical)
N6351 Advanced Practice Practicum (Clinical)

B. Course Descriptions

NURS 5200 Advanced Health Assessment (Theory) (2) Advanced knowledge and skills needed for performing comprehensive health assessments will be explored. Emphasis on analysis and synthesis of all relevant physiological, pathophysiological, psychopathological as well as physical and psychosocial data. Individualized, comprehensive, and holistic protocols for client care management based on best available evidence will be developed. Focus on the identification of health risk factors, health promotion, and disease prevention. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program. Corequisite: NURS 5201.

NURS 5201 Advanced Health Assessment (Clinical) (1) Comprehensive health histories for individuals of all ages will be conducted using advanced knowledge and skills learned in the theory class. Data acquired through interviewing, physical assessment, and clinical laboratory tests will be used to assess the health status of the individual, identify client problems, formulate, implement, and evaluate individualized nursing care plans at an advanced level of nursing practice. Following a comprehensive health appraisal, students will plan for individualized client care management including health counseling, health education, and referral. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program. Corequisite: NURS 5200.
NURS 5220 Theoretical Foundations of Nursing (2) A seminar dealing with the relationships between philosophy, theory, research, and practice in nursing. An historical analysis of nursing’s professional progress to its present theoretical state provides the background for analysis, discussion, and evaluation of different nursing theories. Included will be analysis of relevant mid-range theories form a wide range of disciplines. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 5230 Educational Principles and Methodology Applied to Nursing (2) The focus of the course is on the use of a variety of teaching skills and strategies to help nursing staff, students, and other health care workers establish policies and standards. These skills enable the advanced practice nurse to influence attitudes and understanding about nursing health care. Students in this course develop and present programs or classes for nursing staff development, education of nursing students, or programs of health education for consumers and other health care providers. Prerequisite: Senior standing in BSN program or Post-Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 5240 Human Diversity and Health Care Policy (3) Exploration of health care policy, organization and financing of health care systems in order to provide the basis for leadership in the planning of provision of quality cost-effective care. Includes as an essential foundation for the delivery of health care services: examination of legislation, regulation, distributive justice and the social determinants of health that cause (or contribute to) health disparities in vulnerable populations; comparison of various care delivery systems; exploration of various modes of health care financing; consideration of culture, ecology, and epidemiology. Prerequisite: Senior standing in BSN program or Post Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 5250 Transformational Leadership and APRN Role Development (3) Role development in advanced practice nursing from historical, economic, political, legal, and ethical perspectives. Discussion of role definition, transition, ambiguity and development. Concepts of collegial practice, inter-professional and intra-professional relationships, legal issues, healthcare policy, organizations, and financing will be emphasized. Prerequisite: Senior standing in BSN program or Post Baccalaureate status with permission of instructor, or Admission to the MSN Program.

NURS 6260 Advanced Nursing Research (2) In-depth study of selected research strategies commonly used in nursing such as clinical case study, experimental, quasi-experimental, historical, ethnographic, ex-post-facto, and survey methods. Identification and clarification of nursing problem statements and related hypotheses. Admission to the MSN Program and successful completion of the Graduate Writing Assessment Requirement (GWAR) of the university.

NURS 6290 Culminating Experience: Comprehensive Examination (3) The comprehensive examination will allow the student to demonstrate mastery of the subject matter including: client assessment, diagnostic reasoning, and clinical reasoning in developing a treatment and management plan. The comprehensive examination will include a multiple choice examination preparing the student for the national certification examination for the Family Nurse Practitioner. The comprehensive examination will include a written component that will incorporate nursing
theory, nursing leadership, nursing research, educational principles, and patient care management. Prerequisites: Candidacy status in the MSN program. Completion of all MSN/FNP courses except NURS 6351.

**NURS 6300 Pathophysiology for Advanced Practice Nurses (3)** Physiology based course focusing on the pathogenesis of human disease as a consequence of abnormalities and alterations of normal physiologic function based on a cellular and systems-oriented framework. Regulatory and compensatory mechanisms that aim at maintaining and restoring homeostasis in response to changes in the internal and external environment are explored. Synthesis of current research regarding pathophysiologic patterns and it application to primary care are emphasized. Prerequisite: Admission to the MSN Program.

**NURS 6310 Pharmacotherapeutics for Advanced Practice Nurses (3)** Designed to meet the California Board of Registered Nursing requirement for nurse practitioners to furnish drugs and/or devices pursuant to the Business and Professions Code including utilizing standardized procedures. Content of focused discussion and testing includes, but is not limited to: pharmacokinetics, pharmacodynamics, medication dosing; recognizing and managing side effects; interactions with medications, foods, and dietary supplements; ethical and legal issues related to the furnishing process. Emphasis is on achieving optimal drug therapy outcomes as well as preparation for application for a furnishing license. Prerequisite: Admission to the MSN Program.

**NURS 6320 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Theory) (3)** The roles of the Advanced Practice Nurse in the primary health care management of individuals and families across the lifespan are introduced. Disease prevention, and health and wellness care in rural, urban, and multi-ethnic and culturally diverse populations across the lifespan are emphasized. Theoretical models of family, aggregate, and community systems as they relate to health promotion, risk reduction, and health restoration are explored. Prerequisites: NURS 5200, 5201, 6300, 6310. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6321.

**NURS 6321 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan I (Clinical) (3)** Development and utilization of disease protocols for intervention and management are emphasized. Emphasis is placed on data gathering, conducting routine health histories, physical examinations, and health promotion/risk reduction activities in rural, urban, and multi-ethnic and culturally diverse populations across life span. Prerequisites: NURS 5200, 5201, 6300, 6310. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6320.

**NURS 6330 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Theory) (3)** Family Nurse Practitioner concepts in family assessment, diagnosis, and management in primary care and community based settings are explored. The diagnosis, management, and evaluation of treatment outcomes of common health problems to families and individuals across lifespan are examined. Care of individuals and families across the lifespan with acute self-limiting illness and chronic illness are emphasized. Prerequisites: NURS 6320, 6321. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6331.
NURS 6331 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan II (Clinical) (2) Application of Family Nurse Practitioner concepts and skills in assessment, diagnosis, and management in primary care and community based settings. Pathophysiological and pharmacological concepts are applied in clinical decision making process. Supervised clinical practice emphasizes on using best evidence to formulate diagnosis and management plan for the common acute self-limiting illness and chronic illness in individuals and families across lifespan with the guidance of preceptors. Prerequisites: NURS 6320, 6321. Classified status in the MSN Program and the FNP option. Corequisite: NURS 6330.

NURS 6340 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Theory) (3) Family Nurse Practitioner concepts in family assessment, diagnosis, and management in primary care and community based settings are explored. The diagnosis, management, and evaluation of treatment outcomes of common health care problems to families and individuals across lifespan are examined. Care of individuals and families across the lifespan with complex acute illness, chronic multi-system illness, and psychological/behavioral problems are discussed. The theoretical base for provision of care to older adults is emphasized. Prerequisites: NURS 6330, 6331. Candidacy status in the MSN Program and the FNP option. Corequisite: NURS 6341.

NURS 6341 Advanced Practice Nursing Care for Individuals and Families Across the Lifespan III (Clinical) (4) Application of Family Nurse Practitioner concepts and skills in assessment, diagnosis, and management in primary care and community based settings. Pathophysiological, pharmacological, psychosocial concepts are applied in clinical decision making process. Supervised clinical practice emphasizes on using best evidence to formulate diagnosis and management plan for complex acute illness and chronic multisystem illness in individuals and families across lifespan with the guidance of preceptors. Prerequisites: NURS 6330, 6331. Candidacy status in the MSN Program and the FNP option. Corequisite: NURS 6340.

NURS 6351 Advanced Practice Practicum (4) Supervised nurse practitioner role development practice with a preceptor and faculty guidance in a primary care and community-based setting. Problem solving strategies as they apply to multiethnic clients and culturally diverse client/systems are implemented through the utilization of theoretical models and research across practice settings. Emphasis is placed on advanced competency in the formation and evaluation of comprehensive evidence based plans of care for complex and multisystem disorders. Extensive clinical experiences prepare the student to assume the role and professional responsibilities of the entry level FNP. Prerequisites: NURS 6341. Candidacy status in the MSN Program and the FNP option.

C. Standards Used in Developing the Family Nurse Practitioner Course Content:

1. California Code of Regulations, Title 16, Section 1484: Nurse Practitioner Programs (Board of Registered Nursing [BRN], updated 2011). BRN approval is required in order for the FNP program to operate in the State of California.

2. Standards for Accreditation of Baccalaureate and Graduate Nursing Programs (Commission on Collegiate Nursing Education [CCNE], 2013). CCNE accreditation is
required in order for FNP graduates to become licensed, certified, and eligible for reimbursement.

3. *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force [NTF] on Quality Nurse Practitioner Education, 2012). CCNE accreditation requires demonstration that the *NTF Criteria* have been met.

4. *The Essentials of Master’s Education in Nursing* (American Association of Colleges of Nursing [AACN], 2011). CCNE accreditation requires demonstration that the *Essentials* have been met.


The NONPF (2013) guidelines address the nine domains of curricular content:

1. Scientific Foundation Competencies
2. Leadership Competencies
3. Quality Competencies
4. Practice Inquiry Competencies
5. Technology and Information Literacy Competencies
6. Policy Competencies
7. Health Delivery System Competencies
8. Ethics Competencies
9. Independent Practice Competencies

Available at:

Revised Graduate Program Committee 2016
### D. List of Courses and Units for FNP Option

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course</th>
<th>Units</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>N5200 Advanced Health Assessment (Theory) *</td>
<td>2</td>
</tr>
<tr>
<td>Fall</td>
<td>N5201 Advanced Health Assessment (Clinical) *</td>
<td>1</td>
</tr>
<tr>
<td>Fall</td>
<td>N6300 Pathophysiology for Advanced Practice Nurses *</td>
<td>3</td>
</tr>
<tr>
<td>Fall</td>
<td>N6310 Pharmacotherapeutics for Advanced Practice Nurses *</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Spring</td>
<td>N5220 Theoretical Foundations of Nursing *</td>
<td>2</td>
</tr>
<tr>
<td>Spring</td>
<td>N6260 Advanced Nursing Research *</td>
<td>2</td>
</tr>
<tr>
<td>Spring</td>
<td>N6320 Advanced Practice Nursing Care for Individuals and Families</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Across the Lifespan I (Theory)</td>
<td></td>
</tr>
<tr>
<td>Spring</td>
<td>N6321 Advanced Practice Nursing Care for Individuals and Families</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Across the Lifespan I (Clinical)</td>
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<td></td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Summer</td>
<td>N5240 Human Diversity &amp; Health Care Policy *</td>
<td>3</td>
</tr>
<tr>
<td>Summer</td>
<td>N6330 Advanced Practice Nursing Care for Individuals and Families</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Across the Lifespan II (Theory)</td>
<td></td>
</tr>
<tr>
<td>Summer</td>
<td>N6331 Advanced Practice Nursing Care for Individuals and Families</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Across the Lifespan II (Clinical)</td>
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<tr>
<td></td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Fall</td>
<td>N5250 Transformational Leadership and APRN Role Development *</td>
<td>3</td>
</tr>
<tr>
<td>Fall</td>
<td>N6340 Advanced Practice Nursing Care for Individuals and Families</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Across the Lifespan III (Theory)</td>
<td></td>
</tr>
<tr>
<td>Fall</td>
<td>N6341 Advanced Practice Nursing Care for Individuals and Families</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Across the Lifespan III (Clinical)</td>
<td></td>
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<td></td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Spring</td>
<td>N5230 Educational Principles and Methodology Applied to Nursing *</td>
<td>2</td>
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<tr>
<td></td>
<td>(elective)</td>
<td></td>
</tr>
<tr>
<td>Spring</td>
<td>N6290 Culminating Experience: Comprehensive Examination</td>
<td>3</td>
</tr>
<tr>
<td>Spring</td>
<td>N6351 Advanced Practice Practicum (Clinical)</td>
<td>4</td>
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<tr>
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<td>7 (9)</td>
</tr>
</tbody>
</table>

**Total Units** 44  
(46 w/N5230)  
Clinical Experience (Direct Patient Care)  
Minimum Requirements:  
BRN 12 units  
CCNE 500 hours  
*MSN Core Courses
### E. Clinical Course Timetable

<table>
<thead>
<tr>
<th>Semester 1</th>
<th>Semester 2</th>
<th>Semester 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall First Year</strong></td>
<td><strong>Spring First Year</strong></td>
<td><strong>Summer Session</strong></td>
</tr>
<tr>
<td>Students attend classes at CSUB, including 3 hours per week of clinical laboratory time.</td>
<td>Students attend classes at CSUB and spend approximately 135 hours with preceptor.</td>
<td>Students attend classes at CSUB and spend approximately 90 hours with preceptor.</td>
</tr>
<tr>
<td><strong>Fall Second Year</strong></td>
<td><strong>Spring Second Year</strong></td>
<td><strong>Semester 4</strong></td>
</tr>
<tr>
<td>Students attend classes at CSUB and spend approximately 180 hours with preceptor.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### F. Guidelines for Student Progress

#### End of First Semester (N5201)

In addition to the successful completion of theory requirements, the student will:
1. Complete an adequate screening physical exam.
2. Use their instruments properly.
3. Demonstrate necessary interviewing and communication skills for patient encounters.
4. Consider the patients’ growth and development as part of assessing, planning and intervening.
5. Develop basic procedural skills commonly performed by nurse practitioners in primary care setting.

#### End of Second Semester (N6321 - First Clinical Rotation)

The emphasis in this Semester will be on data gathering, conducting routine H & P’s, and health promotion/risk reduction activities. The student will:

1. Perform a thorough and complete screening history and physical, including developmental health history, psycho-social assessment.
2. Perform a focused history and physical on the common "walk-in" patient problems and report the findings to the preceptor. In doing focused histories and physicals, it is expected that the student will cover at least what is needed, but probably make the error of gathering too much data.
3. Demonstrate basic communications skills including active listening, acknowledging concerns of the patients, responding and using appropriate language, and avoiding medical jargon.
4. Recall and elicit through interviewing a review of systems for major organ systems. For example, if a patient comes in complaining of a respiratory complaint, the student will be able to state what the basic respiratory ROS he or she would obtain.

5. Develop and use diverse protocols as a basis for intervention and management of common health problems.

6. Plan appropriate health promotion/discuss prevention interventions. For example, if a patient has a history of smoking, the student will be able to encourage smoke cessation.

7. Assess family structure and support mechanisms as well as identify community resources.

8. Demonstrate a beginning level in interpretational laboratory findings.

9. Evaluate the assessment data to provide a preliminary diagnosis of health and developmental problems.

10. Be aware of their limitations. They have to be able to acknowledge areas of limited knowledge and say: "I don't know." The corollary of this is that they request appropriate preceptor help depending on the clinical problem at hand.

11. Continue to develop basic procedural skills commonly performed by nurse practitioners in primary care setting.

End of Third Semester (N6331)

Emphasis this semester will be on health promotion, disease prevention and management of patients with acute self-limiting illnesses across the life span. The student will start incorporating referrals to other health care professionals in their plan of care and understand the implications of this dimension in terms of coordinating primary care. The student will:

1. Collect a focused data base on common self-limiting and acute health problems including: bronchitis, otitis media, conjunctivitis, pharyngitis, chest pain, etc.

2. Make accurate assessments and differential diagnoses for common acute problems seen in the primary care setting.

3. Demonstrate basic counseling skills and improved communication skills with patients and their families.

4. Elicit and record developmental health history, psycho-social assessment and nutritional assessment.

5. Make consistent and accurate problem lists for all patients they see.

6. Order and interpret appropriate diagnostic tests, including radiology tests, and initiate and evaluate treatments, including pharmacotherapy, for health problems that have been covered in class or by standardized procedures.


8. Perform, when required, special physical exam techniques, for example, checking for jugular venous distension, testing for ascites, etc.
9. Provide an oral presentation to the preceptor or faculty member, in which the student gives pertinent positives and negatives for patient problems encountered.
10. Refine procedural skills commonly performed by nurse practitioners in primary care setting.

End of Fourth Semester (N6341)

Emphasis during this semester will be consolidation of prior skills, the management and follow up of patients with chronic diseases across the life span. The student will be expected to apply pathophysiological concepts to clinical practice and have knowledge of common differential diagnoses and develop sound assessments. The student will continue to emphasize risk reduction and health promotion activities. The student will:

1. Collect a focused data base on common chronic diseases, including: hypertension, diabetes, COPD, congestive heart failure, rheumatoid arthritis, coronary artery disease, and cerebral vascular disease.
2. Make accurate assessments and differential diagnoses for common chronic health problems.
3. Evaluate patients with common chronic diseases and, with preceptor consultation recommend appropriate pharmacological and non-pharmacological interventions. Provide appropriate follow up care.
4. Develop greater depth in determining the need to order laboratory tests and in interpreting those tests.
5. Refine oral presentation skills, in which the student gives pertinent positives and negatives for patient problems encountered in an organized and concise fashion.
6. Initiate and provide emergency treatments. For example, if a patient comes in with an allergic reaction, the student will provide initial treatment.
7. Continue to refine procedural skills commonly performed by nurse practitioners in primary care setting.

End of Fifth Semester (N6351)

Emphasis this Semester will be on the refinement of clinical skills. The student should be able to collect a focused database on patients with chronic multi-system disease, for example, COPD with underlying coronary artery disease, poorly controlled hypertension with underlying diabetes mellitus, etc. Any deficiency in depth or breadth of clinical experiences will be corrected by the end of the semester. The student will:

1. Compose condensed H & P notes and appropriate, but brief, SOAP notes.
2. Assess, diagnose, and treat common problems with some level of preceptor consultation.
3. Complete focused history and physicals, limited to the problem.
4. Evaluate patients with common chronic disease and acute self-limiting illness across the life span.
5. Develop greater depth in laboratory interpretation, Pharmacotherapeutics, and nutrition.
6. Refer and consult with other health professionals and specialists.
7. Complete any outstanding requirements for graduation.
9. Demonstrate patient follow up skills, especially regarding patients with chronic multi-system disease.
10. Focus on the professional aspects of the nurse practitioner’s role, including legal and ethical implications of advanced practice.

Note to Preceptors: The student is responsible for working with you and your office staff in choosing appropriate patients to meet these requirements. The number of patients seen will depend upon the complexity of the patients' problems and the students' familiarity with the condition. Students are expected to be thorough and complete. Student productivity is expected to increase as the student progresses in the program. Typically, students see an average of 3-4 patients per day during their first clinical rotation (N6321), and 5-6 patients per day in their second semester (N6331) and gradually increasing in the subsequent semesters (N6341 and N6351).

G. Typhon Patient Log Records

Typhon is a clinical data management system that will aide in the student clinical experience and job search after graduation. Students pay a one-time fee to register for Typhon and can use the system through the clinical courses and after graduation. Typhon will be used to log clinical experiences, create an electronic student portfolio, manage external documents (resume, clinical schedule), generate reports of clinical experiences, administer evaluations, and store site and preceptor information. This electronic logging system becomes part of the student’s permanent file and substantiates the Director’s recommendation of the student in applying for certification upon graduation.

Account Information
- You will receive an email from the Typhon system with your account information. You must set up your account within 24 hours of receiving this email.
- The first time you log in, you will be prompted to pay the site fee and complete your account information. At this time, change your password from the default as well. You will also need to accept the end-user license agreement.
- When completing your account information you will need to select “Sample, Preceptor” and “Sample Clinical Site” as the “Required Defaults” the first time so you are able to move to the main menu. Once you get to the main menu you will be able to add your preceptor and clinical site (this is explained in section “Adding a Preceptor/Clinical Site”) and go back in and change your preceptor and clinical site defaults.

Adding a Preceptor/Clinical Site
- Please note that you must submit a separate request for your preceptor and clinical site.
• Go to “Setup Default Choices” under “Your Account” on the main menu. Under the “Required Defaults” you will notice a link to the side of the preceptor and clinical site drop down menus that says “REQUEST ADDITION.” Click this link and enter in the required information.

• Requests are approved in 1-2 business days. Once the addition is verified and approved, you will receive an email notifying you that your preceptor and/or clinical site have been added to the directory. At this point you will be able to select the preceptor/clinical site as your default setting or when inputting a case log.

• Note: you will need the preceptor/clinical site contact information including an address, phone number, and email address. Preceptor evaluation links are sent to the email address that you provide, so please ensure that the email address that you submit is your preceptor’s preferred email address.

Entering a Case Log

• Go to “Add New Case Log” from the main menu. Input the “Date of Encounter” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Then click “Save Data.”

• Input all relevant and required information and then click “Save Data” located in the center of the screen.

• At any point you can delete the case. That option is located in the bottom right hand corner. You can also save the case and begin a new one or go to the next case in your case log list by clicking on those options in the bottom left hand corner.

Reviewing Faculty Case Log Comments

• Go to “Case Log Highlights (by Day/Week/Month)” under “Case Log Reports” on the main menu. Input the “Date of Case Logs” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. You may also select the option to see the week, month, or daily totals incorporating that date by checking the corresponding box below. Then click “Apply Filters.” Any CFA comments will appear in the first column in red next to the case log number.

Entering a Time Log

• Go to “My Time Logs” from the main menu. Click on “Add a Daily Time Log” and input the “Date of Time Log” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Make sure your “Course” is listed correctly, then click “Save Data.”

• Input the number of hours and/or minutes for your clinical shift that day and click “Save Data.”

• You may also check the box “Display patient, consult & conference time” if you would like those totals made available on the screen. If you want to see your shift time parallel to your patient time, go to “My Hours by Course” under the “Other Activities & Reports” heading. You may also go into “My Time Logs” and select a date range and check the “Display patient, consult & conference time,” box in the top left corner, then hit "Apply Filters."

Completing an Evaluation
• Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Click on the appropriate link to complete the evaluation. Make sure you hit the “Submit Evaluation” button when finished.

Viewing Evaluations Completed About You
• Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Evaluations completed about you are listed on the bottom portion of the page.

Uploading External Documents
• Go to “My External Documents” under “Other Activities & Reports” on the main menu. Then click “Add a Document.”
• When uploading documents for your CFA to view, please select “Word” or “PDF” for category. CFAs are not able to view documents with the category of “My Portfolio.”

Missing Information
• The “Missing Information” link on the main menu will have a flashing red arrow next to it if any of your case logs are incomplete. You would simply click on “Missing Information,” view the entry and input the required data.

Instructions & Video Tutorials
• Helpful tutorials related to your use of Typhon can be accessed under the “Help” section on the main menu. Please view these tutorials prior to starting a clinical course.

Clinical logs are due each week of clinical. Please refer to your course syllabus for specific due date information.
Submission of a clinical log for each patient encounter into the Typhon system is a mandatory expectation of the clinical experience. Each student is responsible for maintaining his or her own clinical experience logs. All patient encounters, whether seen independently, in collaboration with preceptor, or as observation, require an entry into Typhon.

Every entry will include demographic information for the patient. You must select three patient encounters on each clinical day that will be entered as abbreviated SOAP notes. You may attach the SOAP notes as external documents (in Typhon). The remaining patient encounters will be entered as clinical summaries.

Weekly log entries should include the following components:

1. The following five pieces of demographic information must be entered for each patient encounter:
   • Demographic information (age, sex, race)
   • Chief complaint
   • ICD-10 Code
   • CPT code
• Level of student participation

2. Enter 3 abbreviated SOAP notes for each clinical day.
   • Select 3 patients from each clinical day and write an abbreviated SOAP note for each one as described below.
   • Each of the 3 entries for the day should be for a different chief complaint.
   • Do not repeat the same chief complaints each week. Aim to write a SOAP note that you have not entered into Typhon in the past. This will allow faculty to provide valuable feedback about content specific to that chief complaint/system.
   • Write notes about patient encounters that assist you in meeting your current course objectives.
     • For example:
       - N6321 focus on patient encounters that entailed annual physical exams, well visits and prevention, risk assessment, counseling (eg. Smoking cessation)
       - N6331 focus on patient encounters for chronic illness management
       - N6341 focus on patient encounters regarding acute illness management
       - N6351 focus on complex case presentations
   • Note: Clinical faculty may request that additional SOAP notes be written for each clinical day based on need to refine SOAP writing skills or to demonstrate other clinical competencies. This need will be determined on an individual basis.

3. For all other encounters, include a Clinical Summary containing 1-2 sentences in the “Clinical Notes” section detailing the following information:
   a. Presenting Complaint
   b. Assessment(s)/Diagnosis(es) List
   c. Plan

Example: 52 yo white female presented for low abdominal pain and dysuria. Dx with UTI, prescribed Bactrim DS 1 PO Q12 x 3 days.

Abbreviated SOAP Guidelines:

Documentation in clinical logs does not need to be as thorough as charting in patient’s medical record. Entries should be abbreviated summaries of the visit. Please add pertinent information related to the chief complaint, pertinent (+) and (-) ROS, VS, pertinent normal and abnormal findings on physical exam, assessment, and plan to include medications prescribed and teaching/counseling provided. These records are considered confidential, but should not overtly identify a client by name.
Example abbreviated SOAP notes:

Example 1

S: 66 yo Asian female presents with c/o pain to R ear and sore throat for one week. Pt wears a hearing aid in R ear. Pain reported 5/10 and is constant. She notes that the pain is worse when she is wearing her hearing aid. Pt has taken Ibuprofen with some relief. No drainage from ear. No fever.

O: T 100.2 BP 128/72 P 82 WT 132 BMI 22 R auditory canal erythematous with mild edema. R TM cloudy. No bulging or retraction. R pinna tender to palpation. L ear pearly gray with positive light reflex. Oropharynx mildly erythematous. No uvular deviation. No exudates or lesions noted. CV – RRR without murmur, rubs, or gallops. Lungs CTA bilaterally without rales or ronchi.

A: Otitis Externa

P: Ciprodex gtts. 2 gtts to R ear BID for 7 days. Warm salt gargles. Discussed how to clean hearing aid. Call if condition worsens or persists.

Example 2


O: T 98.2 BP 126/76 P 74 WT 142 BMI 25.6. Neck: supple, FROM. Thyroid smooth nontender, no masses noted. CV: S1S2 RRR no M/R/C

Lungs: CTA

Abdomen: soft, nontender, positive bowel sounds, no HSM.

Breast exam: symmetrical, nontender with no visible lesions, retractions or dimpling. No nipple discharge. Tissue dense, no palpable masses or lymphadenopathy.

Pelvic exam:


A: Annual gyn exam

P: Await pap results and will call with abnormal results. Counseled regarding importance of health screening. Schedule mammogram and refer to GI for initial
colonoscopy. Encouraged SBE monthly.

Example 3

S: 17 yo WM presents for physical and clearance for soccer. Pt states he generally feels well, but experiences dizziness when stands quickly. Symptoms present for 6 months. Denies acute illness in the past 6 year. PMH – strep multiple times as child and teen. PSH – neg Meds – occ Tylenol prn headache 1---2 times per month. FH – GF with lung CA. Immunizations --- no Gardasil/otherwise UTD. SOC – denies ETOH/drugs/sexual activity.

ROS – HEENT – Headache frontal and temporal. 1---2 times per month for 3 years. No aura. Otherwise ROS unremarkable.


EKG – abnormal T wave changes CMC/Chem 12 --- WNL

A: Vertigo with abnormal EKG

P: Schedule echocardiogram. RTC in one week to review. ER if experiencing palpitations, SOB, chest pain or pressure. Discuss need for Gardasil with patient/parents at f/u visit. Defer clearance for sports physical pending further work-up.

Example 4

S: 44 yo AA F presents with sx of vaginal itching, burning, and white d/c for 2 days. Pt. states she has had yeast infections in the past and this feels similar. No noted exacerbating or relieving factors. She has not tried any OTC treatments. Pt is married, monogamous relationship and is not concerned about the possibility of STDs. Denies fever, chills, blood in the urine, pelvic pain or tenderness. No medications. LMP 20 days ago.

O: T 98.8    P 82    BP 118/72    WT 131    BMI 23.36. GI – WNL. GU: external vulvovaginal, vaginal canal and cervix with white curd like d/c. No odor. Adenexa without masses or tenderness. CV – RRR. Lungs CTA. Abd – nontender, nondistended with BS x4.

A: Vaginitis
**P**: Culture of vagina and cervix obtained. Empirically treat for vaginal candidiasis with fluconazole 150 mg – 1 tab by mouth. Can repeat in 3 days if remains symptomatic. RTC if symptoms do not improve

**H. Summary of Minimum Clinical Requirements for FNP Students**

**Introduction**
The following information is intended to serve as a guide for the student’s *selection of clinical experiences* required of the FNP courses: N6321, N6331, N6341, and N6351. It is recognized that patient problems encountered in the clinical setting do not always coincide with the order of gaining didactic knowledge through the scheduled classes and assignments. However, the student is expected to gather complete subjective and objective data, even though the student may not currently be able to *fully assess the problem or to develop a complete treatment plan*. At any given time, the student will be responsible for the diagnoses and treatment of only those conditions covered didactically in the FNP courses.

Each patient seen will be recorded on the Typhon Patient Log Record. Level of responsibility (LOR) is to be recorded along with other pertinent information. Patients designated with a LOR of 1 (observed care) will count as clinical time, but not as a Minimal Clinical Requirement. Only patients seen in categories 2-4 (level of responsibility) may be counted toward the MCR. In addition, only the problems addressed by the student should be recorded, even though the patient may have additional problems on their problem list. All problems addressed by the student should be recorded each time the patient is seen. Typhon Patient Log Records are reviewed on a weekly basis by faculty. Students must tally their clinical hours information on a weekly basis on the *Clinical Hours Log* and provide a copy to faculty and preceptor. This will assure faculty and preceptor alike that the student is making timely progress.

**Level of Responsibility (LOR)**

**LEVEL 1 Observation Only**: Student observes provider or "assists" peripherally in procedure. Utilized when student observes surgery or other procedures without scrubbing. Can be recorded on Patient Log Records but not MCRs.

**LEVEL 2 Major Consultation**: Preceptor rechecks almost all of history and or exam and provides most of the assessment and plan. Utilized for students very early in the Program or for a patient with very complex or potentially life-threatening problems.

**LEVEL 3 Dual Responsibility**: Approximately half FNP student responsibility; utilized for beginning students or complex patient problems.

**LEVEL 4 Complete Encounter**: The student sees a patient without preceptor consultation during the patient visit. However, the student must briefly present the patient's case to the preceptor prior to the patient leaving.
OR

Brief Consultation: The student utilizes the preceptor for less than 5 minutes, usually for presentation or to confirm positive exam findings. The student is responsible for assessment and plan with preceptor approval.

IMPORTANT:
Students are expected to write the progress note on the chart for Levels 2-4, although preceptor may write an additional note for patients who require consultation for potentially life-threatening problems. This is a legal requirement.

Minimum Clinical Requirements (MCR)
The impetus for using the MCR is twofold:

1. Provide necessary record keeping of depth and breadth of nurse practitioner student experiences as mandated by the Board of Registered Nursing.
2. Assure a broad foundation of clinical experience that is oriented to primary health care of families.
## MINIMUM CLINICAL REQUIREMENTS
For Family Nurse Practitioner Students

<table>
<thead>
<tr>
<th>Encounter refers to one client. The detail of requirements can be counted in two areas or twice in the same area but not more than twice</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pediatrics</strong> (less than 18 years old): 10 or more encounters, including 5 or more encounters in well baby/child visits or sports physicals. These may count for other disease categories as well.</td>
</tr>
<tr>
<td><strong>Respiratory – ENT:</strong> 20 or more encounters, including but not limited to COPD, asthma, rhinitis, bronchitis, pneumonia, otitis media, otitis externa, or sinusitis.</td>
</tr>
<tr>
<td><strong>Eye:</strong> 5 or more encounters including but not limited to performing fundoscopic examination, conjunctivitis, foreign body or wood lamp.</td>
</tr>
<tr>
<td><strong>Cardiovascular:</strong> 20 or more encounters including but not limited to congestive heart failure chest pain, valve disease, hypertension, or CAD.</td>
</tr>
<tr>
<td><strong>GI:</strong> 15 or more encounters including but not limited to abdominal pain, hepatitis, duodenal ulcer, GERD, appendicitis, pancreatitis, biliary disease or other acute abdomen.</td>
</tr>
<tr>
<td><strong>Musculo-Skeletal:</strong> 10 or more encounters, including but not limited to extremity injury, joint disease, or low back pain.</td>
</tr>
<tr>
<td><strong>Neurology:</strong> 10 or more encounters including but not limited to headache, vertigo, CVA/TIA, head trauma, movement or sensory disorders.</td>
</tr>
<tr>
<td><strong>Endocrine:</strong> 10 or more encounters including but not limited to diabetes, thyroid disorders, parathyroid disorders, hypothalamus or pituitary disorders, or amenorrhea.</td>
</tr>
<tr>
<td><strong>GU:</strong> 10 or more encounters including but not limited to prostate exams, urinary tract infection, BPH, renal stone, or pyelonephritis.</td>
</tr>
<tr>
<td><strong>Dermatology:</strong> 10 or more encounters including but not limited to acne, eczema/atopic dermatitis, contact dermatitis, actinic keratosis, tinea/candidiasis, cellulitis or abscess.</td>
</tr>
<tr>
<td><strong>OB/GYN:</strong> 10 or more encounters, including but not limited to PAP Smears, pelvic exam, STD, contraception, obstetric care, intrapartum or postpartum care.</td>
</tr>
<tr>
<td><strong>Psychiatry:</strong> 10 encounters including but not limited to situational/individual/family crises, anxiety, depression, bipolar, schizophrenia, drug/alcohol dependency or abuse.</td>
</tr>
</tbody>
</table>

**Total of 585 hours of clinical practice are required in the Family Nurse Practitioner program.**

**A balance in clinical experience is important. The desirable distribution of adult health, women’s health and child health should be 60%, 20% and 20%.**

**FNP student must complete a minimum of 120 hours with a nurse practitioner, and a minimum of 120 hours in state or nationally designated medically under-served areas.**
**Student Responsibilities:**
The student is responsible for indicating the level of responsibility for each patient encounter:

1. Student practitioner observes care given by preceptor.

2. Extensive preceptor consultation on any/all aspects of the case. Less than shared responsibility.

3. Equal responsibility between student nurse practitioner and preceptor with some review of history and/or physical examination.

4. Primary responsibility for patient encounter (>50%).

Patient encounters in category 1 will not be counted in these clinical requirements. Only patient contacts in categories 2 through 4 will be accepted as meeting the requirement.

It is expected that approximately 1/4 of these requirements will be completed each semester, from the second to the fifth semester.

It is anticipated, however, that overlap will occur and that students may see fewer patients in the second and third Semesters but considerably more in the remaining semesters as their efficiency and ability to manage more complex patients improves.

**HOW TO DETERMINE IF A PATIENT ENCOUNTER WOULD BE ACCEPTABLE TO COUNT TOWARDS THE MCR**

1. Patient cannot just be observed. LOR must be 2-4 (if you are watching your preceptor handle the encounter, you may not count it).

2. The encounter must be diagnosis specific for the MCR counted e.g., if the MCR is contact dermatitis, the diagnosis must state contact dermatitis not rule out contact dermatitis or contact dermatitis vs. psoriasis.

3. The SOAP must contain questions (i.e., Review of Systems, HPI) about the MCR, a physical exam of the part, an assessment with the diagnosis (which is the same as the MCR) and a treatment plan for the diagnosis.
# Required BRN Curriculum Content

Indicate where in the curriculum each of the following subject areas are addressed. [Title 16, CCR Section 1484(d) (12)]

<table>
<thead>
<tr>
<th>Subject Area</th>
<th>Course Number(s)</th>
<th>Theory Hours</th>
<th>Clinical Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Normal growth and development</td>
<td>N5200 N6320</td>
<td>4</td>
<td>20*</td>
</tr>
<tr>
<td>B. Pathophysiology</td>
<td>N6300</td>
<td>30</td>
<td>20*</td>
</tr>
<tr>
<td>C. Interviewing &amp; communication skills</td>
<td>N5200</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>D. Eliciting, recording &amp; maintaining a developmental health history</td>
<td>N5200 N6330 N6340 N6351</td>
<td>3 4 4 4</td>
<td>10 15*</td>
</tr>
<tr>
<td>E. Comprehensive physical examination</td>
<td>N5200</td>
<td>10</td>
<td>24</td>
</tr>
<tr>
<td>F. Psycho-social assessment</td>
<td>N5200 N6320 N6330 N6340 N6351</td>
<td>2 7 2 2 4</td>
<td>10 25*</td>
</tr>
<tr>
<td>G. Interpretation of laboratory findings</td>
<td>N5200 N6320 N6330 N6340 N6351</td>
<td>2 7 2 4 4</td>
<td>25*</td>
</tr>
<tr>
<td>H. Evaluation of assessment data to define health &amp; developmental problems</td>
<td>N5200 N6320 N6330 N6340 N6351</td>
<td>2 7 8 4 12</td>
<td>6 50*</td>
</tr>
<tr>
<td>I. Pharmacology</td>
<td>N6310 N6320 N6330 N6340 N6351</td>
<td>48 5 8 6 10</td>
<td>40*</td>
</tr>
<tr>
<td>J. Nutrition</td>
<td>N5200 N6320 N6330 N6340 N6351</td>
<td>2 2 2 2 5</td>
<td>20*</td>
</tr>
<tr>
<td>K. Disease management</td>
<td>N6320 N6330</td>
<td>3</td>
<td>155*</td>
</tr>
<tr>
<td>L. Principles of health maintenance</td>
<td>N6340</td>
<td>N6351</td>
<td>N6300</td>
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<td></td>
<td>N6340</td>
<td>2</td>
<td>N6351</td>
</tr>
<tr>
<td>M. Assessment of community resources</td>
<td>N5240</td>
<td>N5250</td>
<td>N6320</td>
</tr>
<tr>
<td></td>
<td>N6340</td>
<td>30</td>
<td>3</td>
</tr>
<tr>
<td>N. Initiating &amp; providing emergency treatments</td>
<td>N6340</td>
<td>4</td>
<td>N6341</td>
</tr>
<tr>
<td>O. Nurse practitioner role development</td>
<td>N5240</td>
<td>N5230</td>
<td>N6351</td>
</tr>
<tr>
<td></td>
<td>N5230</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>P. Legal implications of advanced practice</td>
<td>N5240</td>
<td>N5230</td>
<td>N5200</td>
</tr>
<tr>
<td></td>
<td>N6331</td>
<td>2</td>
<td>N6341</td>
</tr>
<tr>
<td></td>
<td>N6351</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Q. Health care delivery system</td>
<td>N5240</td>
<td>N5230</td>
<td>N5250</td>
</tr>
<tr>
<td></td>
<td>N6340</td>
<td>2</td>
<td>N6351</td>
</tr>
</tbody>
</table>

*Clinical experience in N5201, N6321, N6331, N6341, N6351

J. **FNP Preceptor Program**

Preceptor Policies and Procedures (based on California BRN Regulations for Preceptorships)

1. **Definition:** The Graduate Preceptor Program at California State University, Bakersfield (CSUB) is a component of the Nursing Program that includes a teaching strategy designed to provide students with learning experiences that are guided by a Primary Health Care Provider who may also be an expert in his or her area of specialty.

2. **Selection of Preceptors**
   a. A preceptor must have:
      i. A current license to practice in the state of California
      ii. at least one year of clinical experience
b. With the advance permission of the clinical instructor, a relief preceptor, who meets the qualifications specified by CSUB Nursing Department, shall be available on the designated preceptor’s days off to:
   i. Ensure continuity of the student’s precepted learning experience.
   ii. Ensure that a preceptor is present and available on the patient care unit at all times while the student is providing care/nursing services.

3. The student shall be enrolled in the designated CSUB course in which he/she is assigned to a preceptor and will not be compensated by the clinical facility where the clinical rotation occurs.

4. Over the course of the program, the student must have an APRN as a preceptor

5. The Preceptor Program files shall be kept in the CSUB Nursing Department office and includes the following information for the designated semester/year assigned:
   a. Dates of preceptorship
   b. Preceptor’s name
   c. Preceptor’s current licenses
   d. Preceptor responsibilities (as designated by the assigned course)

6. Preceptorship Orientation
   a. The Preceptor Handbook orients preceptors and serves as the written guidelines regarding the program, courses, role, and responsibilities of Nursing Faculty (Course Team Leader, Clinical Instructor), Preceptor, and Student and the required forms.
   b. The Preceptor Handbook and syllabus are kept on file in the Nursing Department for all graduate clinical courses.
   c. Clinical faculty orient the preceptor to ensure adequate identification of performance expectations and goals/objectives for the students’ learning experience.
   d. Faculty/Graduate Student ratio shall not exceed 1:6.
K. Roles and Responsibilities

1. Graduate Nursing Student

   The Students are responsible for being self-directed in identifying initial and ongoing learning needs, for seeking learning opportunities to meet identified needs, and for being accountable for their performance in advanced practice nursing. The Student responsibilities include:

   a. Provide the preceptor with the preceptor handbook
   b. Present the preceptor with a copy of the student’s resume and clinical objectives
   c. Review the clinical objectives and negotiate clinical schedule with the preceptor prior to actual clinical experience
   d. Maintain a clinical log online through Typhon Group Software For NP clinical
   e. Track clinical hours in Typhon and have all clinical hours verified by the preceptor using the Clinical Hour Verification form. Clinical hours should be initialed by the preceptor at the end of each clinical day.
   f. Demonstrate progressive independence and competency in the advanced practice role in accordance with one’s academic progression
   g. Arrive at clinical sites on time and prepared to perform in accordance with the assigned learning activities in accordance with the course
   h. Perform the advanced practice role under the supervision of the preceptor recognizing the limitations of educational preparation and complying with professional standards, clinical site policies, and advanced practice protocols
   i. Demonstrate Professional behavior of the advanced practice nurse
   j. Demonstrate Accountability for thoroughness and timeliness in completing assigned role responsibilities
   k. Actively seek input into the evaluation process and participate in self-evaluation of strengths and identified areas for professional growth with preceptor and clinical faculty
   l. Contact clinical faculty if faculty assistance is necessary
   m. Respect Patient confidentiality at all times during the clinical experience
   n. Complete Preceptor and clinical site evaluations at the end of the clinical rotation
   o. Ensure patient safety
   p. Seek guidance from preceptor and clinical faculty advisor

   (Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)
   Revised by GPC 11/16

2. Clinical Faculty

   a. Collaborates with the Graduate Nursing Student and the Preceptor to ensure adequate identification of performance expectations and goals/objectives for the student’s learning experience. This includes assisting with the assessment, planning, implementation, and evaluation of the student’s individualized learning experience.
   b. Provides guidance and learning materials or tools to assist in identifying and meeting the student’s learning needs.
c. Serves as a resource to the Graduate Nursing Student and to the Preceptor; assisting as needed with the implementation of an action plan to address identified areas for improvement of the student’s performance.

d. Provides reliable contact information to preceptors and students. Maintains availability by phone with prompt message return.

e. Performs site visits to evaluate both clinical placement sites and student performance.

f. Provides feedback and assigns grades for all required written assignments and on-campus conference participation/performance.

g. Completes student’s evaluation with input from the Preceptor and the graduate nursing student.

3. Preceptor

a. The preceptor serves as a mentor to the students. The preceptor will support students by:

b. Assist the student by arranging opportunities and resources to obtain learning experiences appropriate to the course and individual learning objectives.

c. Assign patients as appropriate to the daily or course objectives.

d. Assign patients consistent with the education and experience level of the student.

e. Enable The student to perform comprehensive and focused history and physical exams, rechecking any history or physical assessment as necessary.

f. Guide the student in developing appropriate patient management plans including pharmacologic and non-pharmacologic management

g. Guide the student to develop differential diagnosis for patients

h. Encourage the student to investigate and participate in clinical inquiry or research.

i. Contact the clinical faculty advisor if any problems arise.

j. Complete the student evaluation at mid-term and upon completion of the semester, verify Clinical hours at the end of each clinical day by signing the Clinical Hour Verification form.

k. Complete Preceptor Evaluation of Preceptor Experience at the end of the term.

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013), Revised by GPC 11/16
L. Dress Code Policy

CSUB nursing students must follow CSUB and agency policy regarding uniform dress and professional behavior.

Dress
CSUB nursing students represent the University and the Department of Nursing when interacting with patients, their families, staff, and others in the health care environment. The way students dress demonstrates respect for the University they represent and for the patients and families they serve. Students purchase and wear a lab coat throughout their clinical experiences, unless the clinical instructor advises otherwise. Casual attire, such as shorts, jeans, or short midriff tops are not permissible in the clinical setting at any time. Faculty may have additional requirements for specific clinical areas.

Identification Badge
The CSUB Identification badge includes: student picture, student name and title “Graduate Nursing Student” in a minimum of 18-point font. This complies with a Board of Registered Nursing requirement. The identification badge must be worn above the waist. The identification badge must be worn at all times during clinical hours at agencies, and in the CSUB Nursing Skills/Sim Lab(s) and Computer Lab(s).

Footwear
Wear clean closed toe shoes.

Hair
Hair is neatly maintained and clean. Any extreme look or color is not permitted. Men may choose a neatly trimmed mustache or beard. Facial hair is maintained in short style to insure adequate seal for respiratory isolation masks/particulate respirators. No handle bar style mustaches or long beards are acceptable.

Makeup
Makeup is fresh and natural. Extremes in color, glitter, or amount are not acceptable.

Nails
No acrylic nails, extenders, polish or long nails are permitted. Hands and nails are clean and free of any stains.

Perfume
Close contact with patients and staff requires students to not wear fragrance/perfume or after shave.
**Sunglasses**
Sunglasses may be perceived as blocking interpersonal communication. Do not wear them indoors; however, polarized glasses that tint light gray in bright light are acceptable.

**Jewelry**
The following jewelry is allowed: a) One small post earring (with no dangles) in each ear; b) One small ring; c) Small necklaces and neck chains inside the uniform; d) ankle chains that are not visible or audible; and e) small wrist watches with second hands. No other jewelry and/or visible body piercing is allowed in the clinical area. (Please do not assume because the pierced ornament is in your tongue that it is invisible. It is not acceptable professional dress).

**Tattoos**
No visible tattoos are permitted. Cover any tattoos that may be visible.

**Hygiene**
Personal hygiene must be of high standards. Absence of body, mouth and clothes odor is necessary. Do not chew gum or smokeless tobacco while in clinical areas. Students may smoke only in the designated areas during assigned meal or break time.

**Exceptions**
Requests for exceptions must be submitted to the Clinical Instructor and/or agency in writing a minimum of five working days prior to the day of the clinical experience.

The guidelines, established by CSUB students and nursing faculty, will be enforced for all students in the Nursing program. Any student failing to comply will be asked to leave the clinical area and may not return until modifications are made. Any desired deviation from this code must be presented to the Clinical Instructor for their consideration. Students should be aware that additional dress restrictions and infection control policies might be required in specific departments of agencies, clinical sites, or hospitals.

Revised Graduate Program Committee 2014, Revised GPC 11/16
Section VI. Forms
A. Honor Commitment

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing
Family Nurse Practitioner Program

Honor Commitment

The Honor Commitment is a personal commitment to honor and integrity which is self-imposed and not enforced by an outside authority. All students in the Department of Nursing pledge to follow the Honor Commitment.

The commitment reads as follows:

A unique aspect of higher education is its attempt to instill in the student a sense of honor and high principles that includes but extends beyond academics. An essential feature of the Department of Nursing at California State University, Bakersfield, is its commitment to an atmosphere of integrity and ethical conduct. As a nursing student at CSUB, I accept as my personal responsibility the vigorous maintenance of high standards of honesty, truth, fairness, civility, and concern for others. My devotion to integrity establishes that I will not cheat in academic work and that I will adhere to the established and required community code of conduct. According to the dictates of my own conscience, I will report behavior in the violation of such established standards. In addition and beyond the requirements of any code or law, I confirm my own commitment to personal honor and integrity in all matters large and small. Even though the idea of honor is an abstract one, by implementing this ideal, I join the men and women of the Department of Nursing at California State University, Bakersfield, in making the concept of honor a reality.

(Adapted from the Honor Commitment of Duke University)

I have read, received, and will abide by the Nursing Honor Commitment.

Print Your Name: ______________________________________

Signature: ____________________________________________

Date: ________________________________________________
B. Essential Functions Form

California State University, Bakersfield
Department of Nursing

Essential Functions: Physical and Mental Qualifications

A student with a disability has to have the disability verified by the Disability Services office at CSUB. It is to the student's advantage to do this as soon as possible in the semester to assure that approved accommodations can be granted in a timely manner.

Essential Functions

There are essential functions or abilities necessary for admission and progression in the complex discipline of nursing at CSU Bakersfield. The candidate must be able to perform all of the essential functions each semester. The Department of Nursing follows the CSUB nondiscrimination policy, and students requesting accommodations should contact the Disability Services office. These essential functions include, but are not limited to, the following:

A. Critical Thinking:

A student must demonstrate critical thinking ability sufficient for clinical judgment.

1. Make effective clinical decisions.
2. Identify cause and effect relationships with clinical data.
3. Develop nursing care plans.
4. Perform math calculations requisite to safe dosage calculations and medication administration.
5. Read, synthesize, analyze, evaluate, and integrate material in the classroom and the clinical setting.

B. Professional-Ethical Conduct:

A Student must possess the ability to reason morally and practice nursing in a professional and ethical manner.

1. Demonstrate integrity, honesty, responsibility and tolerance.
2. Abide by professional standards of practice.
3. Deliver compassionate care to all patient populations.

C. Interpersonal Skills:

A student must demonstrate appropriate interpersonal abilities while interacting with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.
1. Communicate effectively and sensitively with other students, faculty, staff, patients, families, and other professionals.
2. Demonstrate willingness and ability to give and receive feedback.
3. Develop mature, sensitive and effective relationships with clients.
4. Establish trust and rapport with clients and colleagues.

D. Communication:

A student must have the ability to clearly communicate in oral and written forms, and to effectively interpret communication with others.

1. Use appropriate grammar, vocabulary, and syntax.
2. Effectively communicate nursing actions.
3. Appropriately interpret client responses.
4. Initiate health teaching.
5. Demonstrate accurate nursing documentation.
6. Accurately report patient information to members of the health care team.

E. Mobility and Stamina:

A student must possess sufficient gross and fine motor skills and endurance to provide safe and effective nursing care in all health care settings.

1. Perform basic life support, including BLS.
2. Function in an emergency situation.
3. Safely assist a patient in moving (e.g., from wheelchair to commode, from chair to bed, lift and transfer from gurney to bed).
4. Calibrate and use equipment.
5. Perform treatments and procedures.
6. Apply pressure to stop bleeding.
7. Manipulate diagnostic instruments to adequately perform all aspects of a physical assessment.
8. Sit, stand, and move about in patient environments for 12 hour periods.

F. Tactile:

1. Perform palpation and other functions necessary for a physical exam.
2. Assess texture, shape, size and vibration.
3. Note temperature changes in skin and equipment.
4. Perform therapeutic functions (e.g., inserting a urinary catheter or IV, change dressings, give medications).

G. Auditory:
A student must have sufficient auditory ability to effectively monitor and assess health needs of patients.
1. Hear cries for help.
2. Hear alarms on equipment and overhead codes.
3. Hear ausculatory sounds using a stethoscope.
4. Hear and interpret verbal communication from patients.
5. Communicate over the telephone.

H. Visual:

A student must possess visual ability for observation and assessment necessary in nursing care.

1. Observe patient responses (e.g., changes in skin color, grimaces).
2. See drainage on dressings and note characteristics of body fluids.
4. Read gauges that monitor patient progress (e.g., sphygmomanometer).
5. Discriminate colors for diagnostic purposes.
6. Assess movements of patients.
7. Observe patient behavior (e.g., in rehab or psychiatric facilities).

I. Behavioral-Emotional Health:

A student must possess the emotional health required for full use of his or her intellectual abilities, the exercise of good judgment, and the prompt completion of all responsibilities attendant to the care of patients.

1. Maintain mature, sensitive, and effective relationships with patients, students, staff, faculty and other professionals under even highly stressful situations.
2. Experience empathy for the situations and circumstances of others and effectively communicate that empathy.
3. Be willing to examine and change his or her behavior when it interferes with productive individual or team relationships.
4. Prioritize competing demands.
5. Function in stressful circumstances.
6. Separate own needs and experiences in order to maintain objectivity and client-centered care.
7. Adjust to changing circumstances.
8. Plan effectively and complete all assigned duties carefully.

I, _______________________________________ have read, understand, and comply with the Essential Functions list (A-I). I acknowledge the physical and mental requirements for the Masters of Science in Nursing program and I meet all of these requirements.

Sign _______________________________________ Date ____________________
### Verification of Contract for Family Nurse Practitioner Placement

Department of Nursing  
Family Nurse Practitioner Program

#### Verification of Contract for Family Nurse Practitioner Placement

<table>
<thead>
<tr>
<th>Name of Student:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Number:</td>
<td></td>
</tr>
<tr>
<td>Clinical Instructor:</td>
<td></td>
</tr>
<tr>
<td>Semester/Year:</td>
<td></td>
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<tr>
<td>Name of Agency:</td>
<td></td>
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<tr>
<td>Address of Agency:</td>
<td></td>
</tr>
<tr>
<td>Telephone/Agency:</td>
<td></td>
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<tr>
<td>Fax/Agency:</td>
<td></td>
</tr>
<tr>
<td>Name of Preceptor:</td>
<td></td>
</tr>
</tbody>
</table>

(for the Administrative Support Coordinator at the Department of Nursing to complete)

 Verification of Contract: Yes _____ No _____ Initiated but not signed _____

 Date of Contract: ________________

 Expiration Date of Contract: ________________

 Verified by: _________________________________ Date: ____________________

Please return to instructor after verification of contract has been completed by Nursing Department staff.

<table>
<thead>
<tr>
<th>Name of Instructor:</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Signature of Instructor:</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>
D. Confirmation of Agreement to Precept

Department of Nursing
Family Nurse Practitioner Program

Confirmation of Agreement to Precept

I, ___________________________________________ (Printed name of Preceptor) have met with the graduate student regarding a preceptorship at this agency. I have reviewed the preceptorship agreement, and we have discussed the course objectives, clinical requirements, and the FNP Student Evaluation document for ___________ (course name) and agree to act as Clinical Preceptor to ______________________ RN (Printed name of Graduate Student) as part of his/her enrollment in the CSUB Graduate Nursing Program clinical course. I am aware that I will need to confer with the Clinical Instructor during and at the end of the semester to provide any information I believe is necessary regarding the student’s progress in the clinical practicum. A written evaluation of the student, on the provided form should be submitted at the end of the semester.

I meet the following minimum qualifications to precept this student:

- Possession of a current California license to practice as a physician or nurse practitioner.
- A copy of my California License to Practice is available at my facility.
- At least one year of clinical experience either as a physician or nurse practitioner providing primary care.
- In a group practice, any other provider participating in supervision of the student must also meet the same qualifications with regard to education and clinical experience.

I am willing to serve and be available as a preceptor for this student enrolled in the above named course during the period of _______________ (semester), in ____________ (year).

I am also aware that I must complete the FNP Student Evaluation document prior to the end of the semester in which this student is enrolled.

Preceptor (Print): ____________________________________________________________

Telephone: ________________________________ FAX: __________________________

Most convenient time to call: ________________________________

Email: ________________________________

Agency: ___________________________________________________________________

Address: ___________________________________________________________________

City/State: ________________ Zip: __________________________

______________________________________________     __________________________

Preceptor’s Signature  Date
E. Preceptor Profile Form: Biography/Curriculum Vitae

Family Nurse Practitioner Program

Preceptor Profile Form: Biography/Curriculum Vitae

Name: ____________________________________________
Credential(s): ____________________________________
License # ________________________________
Expiration Date: ________________________
Area of Specialization: _________________________
Years of Experience: _________________________
Facility: ____________________________ Business Address: ________________________________________
Work Phone: ____________________________ Work Fax: ____________________________
Email Address: ________________________________________________________________________

**Education**: List your basic medical/nursing education/advanced education as a physician or in nursing or other fields

<table>
<thead>
<tr>
<th>Name of College</th>
<th>Location</th>
<th>Degree Earned</th>
<th>Dates of Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

**Certifications**: List any certifications that you hold.

<table>
<thead>
<tr>
<th>Name of Certification</th>
<th>Organization Providing Certification</th>
<th>Dates of Certification</th>
</tr>
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<tbody>
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</table>

**Clinical Experience**: List your most recent clinical experience other than your present employment.

<table>
<thead>
<tr>
<th>Name of Employer</th>
<th>Job Title/Responsibilities</th>
<th>Dates of Employment</th>
</tr>
</thead>
<tbody>
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</table>

**Professional Honors and Awards**: List any special professional honors/awards you have received (e.g., Sigma Theta Tau and other professional organizations; conference presentations; scholarships; publications; recognition).

<p>| |</p>
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</table>

**Preceptor Experience**: List prior preceptor experience with CSUB, other colleges, hospitals, & health care organizations

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Type of Student</th>
<th>Dates/Length of Preceptorship</th>
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</table>

*In lieu of completing this section, attach your curriculum vitae documenting this information.

PLEASE RETURN TO: California State University, Bakersfield
Attn: Administrative Support
Department of Nursing 29 RNC
9001 Stockdale Highway
Bakersfield, CA 93311-1022
**F. Clinical Attendance Record**

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD  
Department of Nursing  
Family Nurse Practitioner Program

Student Name: _______________________________

Term - Please Check One:  
☐ Fall  
☐ Spring  
☐ Summer  
☐ Year: _________

Course Number- Please Check One:  
☐ N 6321 Advanced Practice: Care for Individual & Families Across Lifespan I  
☐ N 6331 Advanced Practice: Care for Individual & Families Across Lifespan II  
☐ N 6341 Advanced Practice: Care for Individual & Families Across Lifespan III  
☐ N 6351 Advanced Practice Practicum

<table>
<thead>
<tr>
<th>Preceptor Name</th>
<th>Preceptor Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Name</td>
<td>Agency Phone Number</td>
</tr>
<tr>
<td>Agency Address</td>
<td></td>
</tr>
</tbody>
</table>

**Student Schedule**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Number of Hours</th>
<th>Cumulative Hours</th>
<th>Preceptor</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Preceptor Name: _______________________________

Preceptor Signature: ___________________________  Date: ________________
Evaluation of Student at the Clinical Site

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing
Graduate Program

Evaluation of Student at the Clinical Site

Student Name: ________________________
Faculty Evaluator ______________________
Date of Evaluation ____________________

Course Number- Please Check One:
☐ N 6321 Advanced Practice: Care for Individual & Families Across Lifespan I
☐ N 6331 Advanced Practice: Care for Individual & Families Across Lifespan II
☐ N 6341 Advanced Practice: Care for Individual & Families Across Lifespan III
☐ N 6351 Advanced Practice Practicum

<table>
<thead>
<tr>
<th>Preceptor Name</th>
<th>Preceptor Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Name</td>
<td>Agency Phone Number</td>
</tr>
</tbody>
</table>

1. Skill in performance of patient assessment or community assessment:

2. Accuracy and completeness of patient records (subjective/objective data, diagnosis plan-initial and follow-up) or agency documentation:

3. Meeting with preceptor to discuss student progress/problems:

4. Review with student the faculty member's perception of their current level of functioning/progress:

5. Suggestions for other or additional objectives/goals.

Comments:

Revised 5/02 Program Evaluation Committee
Reviewed by GPC 03/2014
H. Midterm and Final Evaluation Forms

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
Department of Nursing
Family Nurse Practitioner Program

Midterm and Final Evaluation Forms

Student Name: ___________________________________

Course Number- Please Check One:

☐ N 6321 Advanced Practice: Care for Individual & Families Across Lifespan I
☐ N 6331 Advanced Practice: Care for Individual & Families Across Lifespan II
☐ N 6341 Advanced Practice: Care for Individual & Families Across Lifespan III
☐ N 6351 Advanced Practice Practicum

<table>
<thead>
<tr>
<th>Preceptor Name</th>
<th>Preceptor Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Name</td>
<td>Agency Phone Number</td>
</tr>
</tbody>
</table>

Midterm Evaluation
Please review the descriptions of the student’s clinical rotation listed above. Based on the stated objectives, please answer the following questions for the student you are precepting:

<table>
<thead>
<tr>
<th></th>
<th>Below Expectations</th>
<th>Meets Expectations</th>
<th>Exceeds Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student is progressing towards meeting clinical objectives this term.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The student is progressing towards safe, clinical practice.</td>
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<tr>
<td>The student exhibits an appropriate level of professionalism.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Given the student’s level in the program, does she/he have skills that are satisfactory given the level in the program?</th>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Do you have any concerns about the student meeting the clinical objectives for this term? Please provide details if you answered “Yes”</th>
<th></th>
<th></th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Would you like to speak with the student’s Clinical Faculty Advisor regarding the student?</th>
<th></th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Do you have any further concerns or feedback that you would like to provide at this time?</th>
<th></th>
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<th></th>
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</thead>
</table>

Midterm Evaluation

Student Signature: _____________________________ Date: ____________

Preceptor Signature: ___________________________ Date: ____________
Final Evaluation
Preceptor: Using the scale below, please indicate the student’s capacity to meet the following Family Nurse Practitioner (FNP) competencies:

**Scale:**
1. Does not meet expectations
2. Inconsistently meets expectations
3. Meets expectations
4. Sometimes exceeds expectations
5. Always exceeds expectations
(NA) Not applicable/Not Assessed

<table>
<thead>
<tr>
<th>Criteria</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student critically analyzes data and evidence to improve advance practice nursing, patient care, and promotion of evidenced based practice.</td>
<td></td>
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<tr>
<td>The student integrates the FNP role into their multi-disciplinary team, maximizing the attributes of a FNP.</td>
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<tr>
<td>The student seeks opportunities to assume increasing levels of independence in the clinical setting.</td>
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<tr>
<td>The student maintains professional demeanor and performance.</td>
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<tr>
<td>The student utilizes evidenced based resources to facilitate the identification of the best plan of care for the patient.</td>
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<tr>
<td>The student considers the patient’s access to care, cost, quality and safety in their provision of care.</td>
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<tr>
<td>The student is able to translate new knowledge into practice to improve patient outcomes across the lifespan.</td>
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<tr>
<td>The student utilizes appropriate technologies for clinical learning, patient management and improving health care outcomes.</td>
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<tr>
<td>The student is able to assess the health literacy of the patient and their family when discussing diagnoses and treatment options related to the plan of care.</td>
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<tr>
<td>The student is able to work within the culture of the health care delivery system when making referrals to specialists and ordering diagnostics tests related to acute and chronic conditions.</td>
<td></td>
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<tr>
<td>The student is able to understand the role of the health care delivery system and utilize all of the available resources within the system related to patient care across the lifespan.</td>
<td></td>
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<tr>
<td>The student assesses access to care, equity, quality, and cost effective health care.</td>
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<tr>
<td>The student utilizes effective verbal and non-verbal communication skills during patient encounters and communicates with the interdisciplinary team.</td>
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<tr>
<td>Criteria</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>NA</td>
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<tr>
<td>The student collects relevant and appropriate subjective data related to the chief complaint.</td>
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<tr>
<td>The student integrates advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.</td>
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<tr>
<td>The student develops appropriate differential diagnosis and assessment of problems/needs based on history, physical exam and the interpretation of diagnostic data. <em>(For N607 students please select N/A).</em></td>
<td></td>
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<tr>
<td>The student integrates health promotion and disease prevention into patient care management that is mutually agreed upon by the patient and the practitioner.</td>
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<tr>
<td>The student creates plans of care that utilize appropriate diagnostic testing, pharmacological interventions, and non-pharmacological therapies. <em>(For N607 students please select N/A)</em></td>
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<tr>
<td>The student maintains a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust and respect.</td>
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<tr>
<td>The student incorporates the patient’s cultural and spiritual preferences, values, and beliefs into the plan of care.</td>
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<tr>
<td>The student records data in a complete, concise and well-organized format.</td>
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<td>The time the student spends with the patient is consistent with level of experience.</td>
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<td>The student utilizes his/her time effectively when not seeing patients.</td>
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<tr>
<td>The student’s verbal patient presentation to the preceptor is organized and inclusive of appropriate data.</td>
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<td>The student requests the preceptor’s assistance when encountering new, unfamiliar, and complicated situations.</td>
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<td>The student accepts constructive criticism.</td>
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<tr>
<td>The student evaluates and revises objectives with preceptor.</td>
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<tr>
<td>The student takes initiative to schedule mid-term and final evaluation review with preceptor, and secure a written evaluation.</td>
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<tr>
<td>The student arrives on time and is present for the entire scheduled clinical day.</td>
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<tr>
<td>The student notifies the preceptor/agency and Clinical Faculty within an appropriate time frame with anticipated tardiness or absence from the clinical site.</td>
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<tr>
<td>Your overall satisfaction with this student’s ability to meet FNP competencies. <em>(See Preceptor Handbook-Population Focused Nurse Practitioner Competencies).</em></td>
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Overall Evaluation

If you answered (1) Does not meet expectations or (2) Inconsistently meets expectations, for any of the above items, please explain in the space provided below.

[Blank space for explanation]

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>The student maintains a safe practice environment.</td>
<td></td>
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</tbody>
</table>

If you answered no, please explain in the space provided below and contact the Clinical Faculty.

[Blank space for explanation]

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)
Revised GPC 11/16

Final Evaluation

Student Signature: ____________________________ Date: __________

Preceptor Signature: ____________________________ Date: __________
I. Preceptor Evaluation of Clinical Preceptor Experience

California State University, Bakersfield
Department of Nursing

Preceptor Evaluation of Clinical Preceptor Experience

Term - Please Check One:
- Fall
- Spring
- Summer
- Year: _________

Course Number - Please Check One:
- N 6321 Advanced Practice: Care for Individual & Families Across Lifespan I
- N 6331 Advanced Practice: Care for Individual & Families Across Lifespan II
- N 6341 Advanced Practice: Care for Individual & Families Across Lifespan III
- N 6351 Advanced Practice Practicum

Instructions: Please rate each item below on a 5-point scale; note your additional comments or suggestions in the area provided. Place your completed Evaluation Form in the envelope provided and return it to the graduate student for delivery to the CSUB Department of Nursing.

Rate the following items by circling the appropriate number (1 = Strongly Disagree, 3 = Neutral, 5 = Strongly Agree).

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<tbody>
<tr>
<td>1. Review of the Graduate Preceptor Handbook helped me understand my role.</td>
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<tr>
<td>2. The course objectives were relevant for use in my clinical area and level of practice.</td>
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<tr>
<td>3. The course objectives increased my understanding of FNP student performance expectations.</td>
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<tr>
<td>4. Ongoing communication with the CSUB nursing faculty increased my ability to identify appropriate learning experiences for FNP students.</td>
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<td>5</td>
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<tr>
<td>5. The course expectations seemed appropriate for preparing the student to function in an advanced practice nursing role.</td>
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<td>5</td>
</tr>
<tr>
<td>6. I am able to contact the CSUB nursing faculty when necessary to fulfill my role as a preceptor.</td>
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<tr>
<td>7. Overall, I have had a positive experience as a preceptor.</td>
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<td>5</td>
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</table>

8. In order to improve the effectiveness of the clinical experience, I suggest the following:

___________________________________________________________

Preceptor Name
Agency Name
J. Student Evaluation of Preceptor

California State University Bakersfield
Department of Nursing
Graduate Program
Student Evaluation of Preceptor

Purpose: To evaluate the appropriateness and effectiveness of the preceptor at the end of each semester.

Course Number- Please Check One:
- N 6321 Advanced Practice: Care for Individual & Families Across Lifespan I
- N 6331 Advanced Practice: Care for Individual & Families Across Lifespan II
- N 6341 Advanced Practice: Care for Individual & Families Across Lifespan III
- N 6351 Advanced Practice Practicum

Semester/Year________________________ Name of Preceptor____________________________

Agency/Location___________________________________ ______________________________

Completed by_____________________________ Date_________________________

Instructions: Check appropriate column and provide comments and/or examples as needed.

<table>
<thead>
<tr>
<th></th>
<th>Always</th>
<th>Usually</th>
<th>Seldom</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Is available to the student?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Demonstrates understanding of the Advanced Practice Nurse role?</td>
<td></td>
<td></td>
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<tr>
<td>3.</td>
<td>Utilizes student’s strengths and knowledge?</td>
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<tr>
<td>4.</td>
<td>Serves as a good role model?</td>
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<tr>
<td>5.</td>
<td>Demonstrates effective rapport with clients?</td>
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<tr>
<td>6.</td>
<td>Assists student in identifying appropriate goals and needs for experience (relative to that particular semester)?</td>
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<tr>
<td>7.</td>
<td>Considers student’s limits according to level of training?</td>
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<tr>
<td>8.</td>
<td>Provides constructive feedback on student’s performance throughout the day?</td>
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<tr>
<td>9.</td>
<td>Leads student through decision making process and facilitate differential diagnoses?</td>
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<tr>
<td>10.</td>
<td>Reviews and co-signs each documentation/note (if appropriate)?</td>
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<tr>
<td>11.</td>
<td>Offers constructive comments on student's progress, ie, documentation or procedure?</td>
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<td></td>
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<tr>
<td>12.</td>
<td>Encourages questions from student?</td>
<td></td>
<td></td>
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<tr>
<td>13.</td>
<td>Thoughtfully reviews diagnosis and differential diagnosis with student?</td>
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<td>14.</td>
<td>Discusses alternative management with the student?</td>
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<tr>
<td>15.</td>
<td>Allows student opportunities to suggest drug of choice, calculate dosages, suggest lab and/or radiology to be ordered?</td>
<td></td>
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<tr>
<td>16.</td>
<td>Communicates clinical knowledge well with the student?</td>
<td></td>
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</tbody>
</table>

Comments and or examples:
K. Student Clinical Site Evaluation

California State University Bakersfield
Department of Nursing
Graduate Program
Student Clinical Site Evaluation

**Purpose:** To evaluate appropriateness and effectiveness of the clinical agency for student learning.

Course Number- Please Check One:

- □ N 6321 Advanced Practice: Care for Individual & Families Across Lifespan I
- □ N 6331 Advanced Practice: Care for Individual & Families Across Lifespan II
- □ N 6341 Advanced Practice: Care for Individual & Families Across Lifespan III
- □ N 6351 Advanced Practice Practicum

Semester/Year________________________ Name of Preceptor________________________________

Agency/Location_______________________________________________________________________

Completed by_________________________ Date_________________________

**Instructions:** Check appropriate column and provide comments and/or examples as needed.

<table>
<thead>
<tr>
<th></th>
<th>Always</th>
<th>Usually</th>
<th>Seldom</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Is adequate time given to see clients?</td>
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</tr>
<tr>
<td>2.</td>
<td>Are there sufficient numbers of clients with varied ages, types of problems, etc.?</td>
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<tr>
<td>3.</td>
<td>Are students allowed to select clients according to their needs?</td>
<td></td>
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<tr>
<td>4.</td>
<td>Is student given the opportunity to follow-up with clients and/or problems of interest?</td>
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<tr>
<td>5.</td>
<td>Are reports from lab and/or radiology available for student to review?</td>
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<tr>
<td>6.</td>
<td>Are support staff helpful to student and accepting of the student’s role?</td>
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<tr>
<td>7.</td>
<td>Is the philosophy of the clinic to provide health promotion and disease prevention, and disease diagnosis and management?</td>
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<tr>
<td>8.</td>
<td>Are instructional materials available for clients to supplement their learning (such as pamphlets)?</td>
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<tr>
<td>9.</td>
<td>Are community resources, other agencies, and professional disciplines involved with client welfare?</td>
<td></td>
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</tbody>
</table>

Comments and or examples:

<table>
<thead>
<tr>
<th>Travel</th>
<th>Mileage to site?</th>
<th>Travel time from CSUB?</th>
</tr>
</thead>
<tbody>
<tr>
<td>How far away is site from CSUB?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Accessibility to public transportation?
L. Sue Fujiki Emergency Loan Application Form

CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
DEPARTMENT OF NURSING
ROSA Committee

Sue Fujiki Emergency Loan Application Form

To: CSUB Foundation Office

Subject: Sue Fujiki Nursing Student Emergency Loan Fund Application

This is to verify that _____________________________________ is enrolled in the ________________ class in the CSUB Department of Nursing, is eligible for a loan according to the criteria of the loan fund, and has been approved by the ROSA Committee to borrow $__________________ from the fund. The student agrees to pay back the loan by ________________ or seek an extension from the Committee.

__________________________________________ (Date)
Faculty Signature

__________________________________________ (Date)
Student Signature
Section VII. APPENDICES
A. NONPF Core & Family/Across the Lifespan Nurse Practitioner Competencies

I. Core Scientific Foundation Competencies
   a. Critically analyzes data and evidence for improving advanced nursing practice.
   b. Integrates knowledge from the humanities and sciences within the context of nursing science.
   c. Translates research and other forms of knowledge to improve practice processes and outcomes.
   d. Develops new practice approaches based on the integration of research, theory, and practice knowledge.

II. Core Leadership Competencies
   a. Assumes complex and advanced leadership roles to initiate and guide change.
   b. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care.
   c. Demonstrates leadership that uses critical and reflective thinking.
   d. Advocates for improved access, quality and cost effective health care.
   e. Advances practice through the development and implementation of innovations incorporating principles of change.
   f. Communicates practice knowledge effectively both orally and in writing.
   g. Associated Family/Across the Lifespan Competencies
      1. Works with individuals of other professions to maintain a climate of mutual respect and shared values.
      2. Engages diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs.
      3. Engages in continuous professional and interprofessional development to enhance team performance.
      4. Assumes leadership in interprofessional groups to facilitate the development, implementation and evaluation of care provided in complex systems.

III. Core Quality Competencies
   a. Uses best available evidence to continuously improve quality of clinical practice.
   b. Evaluates the relationships among access, cost, quality, safety and their influence on health care.
   c. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.
   d. Applies skills in peer review to promote a culture of excellence.
   e. Anticipates variations in practice and is proactive in implementing interventions to ensure quality.

IV. Core Practice Inquiry Competencies
   a. Provides leadership in the translation of new knowledge into practice.
   b. Generates knowledge from clinical practice to improve practice and patient outcomes.
   c. Applies clinical investigative skills to improve health outcomes.
   d. Leads practice inquiry, individually or in partnership with others.
e. Disseminates evidence from inquiry to diverse audiences using multiple modalities.

V. Core Technology and Information Literacy Competencies
   a. Integrates appropriate technologies for knowledge management to improve health care.
   b. Translates technical and scientific health information appropriate for various users’ needs.
      1. Assesses the patient’s and caregiver’s educational needs to provide effective, personalized health care.
      2. Coaches the patient and caregiver for positive behavioral change.
   c. Demonstrates information literacy skills in complex decision making.
   d. Contributes to the design of clinical information systems that promote safe, quality and cost effective care.
   e. Uses technology systems that capture data on variables for the evaluation of nursing care.

VI. Core Policy Competencies
   a. Demonstrates an understanding of the interdependence of policy and practice.
   b. Advocates for ethical policies that promote access, equity, quality, and cost.
   c. Analyzes ethical, legal, and social factors influencing policy development.
   d. Contributes in the development of health policy.
   e. Analyzes the implications of health policy across disciplines.
   f. Evaluates the impact of globalization on health care policy development.

VII. Core Health Delivery System Competencies
   a. Applies knowledge of organizational practices and complex systems to improve health care delivery.
   b. Effects health care change using broad based skills including negotiating, consensus-building, and partnering.
   c. Minimizes risk to patients and providers at the individual and systems level.
   d. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.
   e. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.
   f. Analyzes organizational structure, functions and resources to improve the delivery of care.

VIII. Core Ethics Competencies
   a. Integrates ethical principles in decision making.
   b. Evaluates the ethical consequences of decisions.
   c. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.

IX. Core Independent Practice Competencies
   a. Functions as a licensed independent practitioner.
   b. Demonstrates the highest level of accountability for professional practice.
   c. Practices independently managing previously diagnosed and undiagnosed patients.
      1. Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end of life care.
2. Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
3. Employs screening and diagnostic strategies in the development of diagnoses.
4. Prescribes medications within scope of practice.
5. Manages the health/illness status of patients and families over time.
d. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.
   1. Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.
   2. Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.
   3. Incorporates the patient’s cultural and spiritual preferences, values, and beliefs into health care.
   4. Preserves the patient’s control over decision making by negotiating a mutually acceptable plan of care.

X. Associated Family/Across the Lifespan Competencies
   a. Obtains and accurately documents a relevant health history for patients of all ages and in all phases of the individual and family life cycle using collateral information, as needed.
   b. Performs and accurately documents appropriate comprehensive or symptom-focused physical examinations on patients of all ages (including developmental and behavioral screening, physical exam and mental health evaluations).
   c. Identifies health and psychosocial risk factors of patients of all ages and families in all stages of the family life cycle.
   d. Identifies and plans interventions to promote health with families at risk.
   e. Assesses the impact of acute and/or chronic illness or common injuries on the family as a whole.
   f. Distinguishes between normal and abnormal change across the lifespan.
   g. Assesses decision-making ability and consults and refers, appropriately.
   h. Synthesizes data from a variety of sources to make clinical decisions regarding appropriate management, consultation, or referral.
   i. Plans diagnostic strategies and makes appropriate use of diagnostic tools for screening and prevention, with consideration of the costs, risks, and benefits to individuals.
   j. Formulates comprehensive differential diagnoses.
   k. Manages common acute and chronic physical and mental illnesses, including acute exacerbations and injuries across the lifespan to minimize the development of complications, and promote function and quality of living.
   l. Prescribes medications with knowledge of altered pharmacodynamics and pharmacokinetics with special populations, such as infants and children, pregnant and lactating women, and older adults.
   m. Prescribes therapeutic devices.
   n. Adapts interventions to meet the complex needs of individuals and families arising from aging, developmental/life transitions, co-morbidities, psychosocial, and financial issues.
   p. Plans and orders palliative care and end-of-life care, as appropriate.
   q. Performs primary care procedures.
r. Uses knowledge of family theories and developmental stages to individualize care provided to individuals and families.

s. Facilitates family decision-making about health.

t. Analyzes the impact of aging and age-and disease-related changes in sensory/perceptual function, cognition, confidence with technology, and health literacy and numeracy on the ability and readiness to learn and tailor interventions accordingly.

u. Demonstrates knowledge of the similarities and differences in roles of various health professionals proving mental health services, e.g., psychotherapists, psychologist, psychiatric social worker, psychiatrist, and advanced practice psychiatric nurse.

v. Evaluates the impact of life transitions on the health/illness status of patients and the impact of health and illness on patients (individuals, families, and communities).

w. Applies principles of self-efficacy/empowerment in promoting behavior change.

x. Develops patient-appropriate educational materials that address the language and cultural beliefs of the patient.

y. Monitors specialized care coordination to enhance effectiveness of outcomes for individuals and families.

B. Typhon Instructions

1. Getting Started
   - You will receive an email from the Typhon system with your account information. You should set up your account within 24 hours of receiving this email. If your temporary password has expired, you can generate a new temporary password yourself by going to the login page and clicking “Forgot login or password”.
   - The first time you log in, you will be prompted to pay the site fee and complete your account information. At this time, change your password from the default as well. You will also need to accept the end-user license agreement.

2. Instructions & Video Tutorials
   a. Helpful tutorials related to your use of Typhon can be accessed under the “Help” section on the main menu. Please view these tutorials prior to starting a clinical course. The videos are somewhat lengthy and you may want to space them out, watching one or two a day so that you can absorb all of the information.

3. Adding a Preceptor/Clinical Site
   a. Go to “Setup Default Choices” under “Your Account” on the main menu. Under the “Required Defaults” you will notice a link to the side of the preceptor and clinical site drop down menus that says “REQUEST ADDITION.” Click this link and enter in the required information.
   b. Once the addition is verified and approved, you will receive an email notifying you that your preceptor and/or clinical site have been added to the directory. At this point you will be able to select the preceptor/clinical site as your default setting or when inputting a case log.
   c. Note: you will need the preceptor/clinical site contact information including an address, phone number, and email address. Preceptor evaluation links are sent to the email address that you provide, so please ensure that the email address that you submit is your preceptor’s preferred email address.

4. Entering a Case Log
   a. Go to “Add New Case Log” from the main menu. Input the “Date of Encounter” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Then click “Save Data.”
   b. Input all relevant and required information and then click “Save Data” located in the center of the screen.
   c. At any point you can delete the case. That option is located in the bottom right hand corner. You can also save the case and begin a new one or go to the next case in your case log list by clicking on those options in the bottom left hand corner.

5. Reviewing Faculty Case Log Comments
   a. Go to “Case Log Highlights (by Day/Week/Month)” under “Case Log Reports” on the main menu. Input the “Date of Case Logs” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. You may also select the option to see the week, month, or daily totals incorporating that
date by checking the corresponding box below. Then click “Apply Filters.” Any faculty comments will appear in the first column in red next to the case log number.

6. Entering a Time Log
   a. Go to “My Time Logs” from the main menu. Click on “Add a Daily Time Log” and input the “Date of Time Log” by clicking on the calendar icon or by clicking the “TODAY” link, which will input the current date for you automatically. Make sure your “Course” is listed correctly, then click “Save Data.”
   b. Input the number of hours and/or minutes for your clinical shift that day and click “Save Data.”
   c. You may also check the box “Display patient, consult & conference time” if you would like those totals made available on the screen. If you want to see your shift time parallel to your patient time, go to “My Hours by Course” under the “Other Activities & Reports” heading. You may also go into “My Time Logs” and select a date range and check the “Display patient, consult & conference time,” box in the top left corner, then hit “Apply Filters.”

7. Completing an Evaluation
   a. Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Click on the appropriate link to complete the evaluation. Make sure you hit the “Submit Evaluation” button when finished.

8. Viewing Evaluations Completed About You
   a. Go to “My Evaluations & Surveys” under “Other Activities & Reports” on the main menu. Evaluations completed about you are listed on the bottom portion of the page.

9. Uploading External Documents
   a. Go to “My External Documents” under “Other Activities & Reports” on the main menu. Then click “Add a Document.”
   b. When uploading documents for your faculty to view, please select “Word” or “PDF” for category. Your faculty is not able to view documents with the category of “My Portfolio.”

10. Missing Information
    a. The “Missing Information” link on the main menu will have a flashing red arrow next to it if any of your case logs are incomplete. You would simply click on “Missing Information,” view the entry and input the required data.

(Adapted from Georgetown University AG-ACNP/CNS Preceptor Handbook, 2013)
Revised GPC 11/16
C. Resources

General Instructions and Application Requirements for California Nurse Practitioner (NP) Certification


Instructions for Applying for a Nurse Practitioner Furnishing Number

Application Process for AANP certification
https://www.aanpcert.org/ptistore/control/certs/process

Application process for AANC certification
http://www.nursecredentialing.org/FamilyNP