

SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE
School of Nursing

Alumni Hall
Edwardsville, IL 62026-1066

STUDENT HANDBOOK

GRADUATE PROGRAM IN NURSING

(618) 650-3975
FAX: (618) 650-3854
www.siu.edu/nursing

The School of Nursing is fully accredited by the
Commission on Collegiate Nursing Education (CCNE)
and in compliance with the State of Illinois
Department of Professional Regulation

Academic Year 2011 – 2012



All nursing programs are fully accredited by the Commission on Collegiate Nursing Education (CCNE).

Information can be obtained from the:

Commission on Collegiate Nursing Education (CCNE)
One DuPont Circle, NW
Suite 530
Washington, DC 20036-1120

Phone: (202) 877-6791

Fax: (202) 877-8476

Website: www.aacn.nche.edu/accreditation

The Nurse Anesthesia Specialization is fully accredited by the Council on Accreditation (COA) of Nurse Anesthesia Educational Programs.

Information can be obtained from the:

Council on Accreditation of Nurse Anesthesia Programs (COA)
222 South Prospect Avenue
Suite 304
Park Ridge, IL 60068-4010

Phone: (847) 692-7050

Fax: (847) 692-7137

Website: <http://www.aana.com/>

TABLE OF CONTENTS

INTRODUCTION	1
SECTION I: MISSION AND GOVERNANCE	
University Mission, Vision & Values	3
University Statement on Diversity	4
SIUE Long-Term Goals.....	4
SIUE Goals of Graduate Student Learning.....	4
School of Nursing Mission	5
The Illinois Department of Financial and Professional Regulation: Statement Of Definition of Advanced Practice Nursing Functions	5
School of Nursing Organizational Chart.....	6
SECTION II: ADMINISTRATION, STAFF & FACULTY	
School of Nursing Contact Information	8
School of Nursing Administration and Staff	8
School of Nursing Faculty Office, Telephone and Email List	13
Graduate Faculty Research Interests & Expertise 2011-2012.....	14
SECTION III: STUDENT RESOURCES	
University Student Support Services & Resources: Contact Information	22
Financial Assistance	23
Online Tuition & Fee Billing.....	23
Assistance With Logging on to Blackboard or With Revision of Your Password	23
SECTION IV: GENERAL INFORMATION	
School of Nursing Overview.....	25
School of Nursing Website and E-Mail	25
Student Addresses Telephone Numbers & Emergency Information	26
Lab Coats and Patches.....	26
Name Badges	26
Parking.....	26
School Pins	26
Convocation & Commencement Ceremonies.....	27
Sigma Theta Tau International Nursing Honor Society.....	27
Phi Kappa Phi Honor Society	27
Student Participation on School of Nursing Committees	27
Student Participation on University-wide Committees	27
SECTION V: CURRICULUM	
Nursing Paradigm	29
Curricular Themes	30
Master's Student Outcomes.....	31

Master's Program Curriculum	32
Master's Nursing Core Content.....	32
Advanced Practice Core Content.....	32
Specialty Curriculum Content	32
Master's Program Courses	32
Nurse Anesthesia Progression	34
Family Nurse Practitioner Part-Time Progression.....	35
Health Care & Nursing Administration Progression	36
Nurse Educator Progression.....	37
Post-Master's Certificate.....	38
Dual Specializations.....	38

SECTION VI: COURSE RELATED INFORMATION

Face to Face, Web Enhanced, Hybrid, and Online Course Formats	40
Hardware and Software Recommendations	40
Course Registration Process	40
Dropping Courses	41
Course Fees	41
Course Syllabi	41
Textbooks	42
Requesting Clinical Preceptors and Clinical Practicum Sites	42
Professional Liability Insurance	42
Grading Scale	42
Grade Information	42
Incomplete Grades.....	43
Independent Study.....	43
Written Work of Students.....	43
Master's Terminal Project Guidelines (for students admitted prior to Fall 2011)	43
Change of Committee Members	50
Master's Terminal Project Guidelines (for students admitted beginning 2011).....	50
Electronic Portfolio Evaluation of Reflections Rubric	53
Graduation Requirements.....	55
Final Approval for Graduation	55

SECTION VII: HEALTH & RELATED INFORMATION

Professional Nursing Requirements and Verification.....	57
Criminal Background Check	57
Drug Test	58
Immunization Tracker (Magnus Health Portal)	58
University Health Service.....	61
Immunizations Not Covered Under CDC Guidelines.....	61
Immunization Exemptions	62

SECTION VIII: STANDARD PRECAUTIONS AND GUIDELINES FOR CLINICAL EXPERIENCES

Standard Precautions for All Students in Clinical Agencies	64
Steps to Prevent Infection.....	66
Student Responsibilities Related to Clinical Incident Guidelines	67
Guidelines for Personal Safety During Clinical Nursing Experiences	67

SECTION IX: UNIVERSITY AND SCHOOL OF NURSING POLICIES RELATING TO THE GRADUATE NURSING PROGRAM

Statement for Academic Integrity	70
Academic Ethics	70
School of Nursing Student Academic Code.....	71
Academic Dishonesty Offenses and Sanctions	72
Student Rights and Responsibilities	74
Student Grievance	74
Students' Right of Access to Records.....	74
Equal Opportunity and Affirmative Action	74
Americans With Disabilities Act (ADA).....	74
School of Nursing Statement on Diversity	75
School of Nursing Background Checks of Students and Faculty Policy	76
Mandatory Drug Screening Policy	83
Policy for the Illicit Use of Controlled Substances, Prescribed Controlled Substances, and Over-the-counter Drugs	88
Minimum Technical Standards Policy for Admission and Matriculation.....	92
Policy for the Use of Digital Media	97
Intellectual Property Information Process	98
University Retention Policy	99
School of Nursing Policy on Removal of a Student From School of Nursing Academic Program Based on Course Grades.....	99
Retention Policy Based Upon GPA.....	99
Clinical Courses	99
Clinical Probation	100
Academic Intervention	101
Student Absence Policy	101
Leave Of Absence For Temporary Disability/Pregnancy Or Personal Reasons.....	102
Graduate Re-admission Policy	103
Application for Re-admission	103
Transfer of Credits	103

SECTION X: NURSE ANESTHESIA SPECIALIZATION INFORMATION

Nurse Anesthesia Progression	105
Nurse Anesthesia Faculty	106
Terminal Specialization Course Objectives	107
Academic Policies.....	110

Clinical Guidelines	111
Attendance Policy	113
Meetings	114
Nurse Anesthesia Practicum	
Guidelines for Clinical Practicum	114
Clinical Practicum Experiences	115
Clinical Affiliation Criteria	116
Condition of Instruction and Supervised Experiences	117
Patient Safety	118
Specific Practicum Guidelines	118
Work Related Injuries	120
Absences as a Result of Illness	121
Guidelines for Call Experiences	
Purpose	121
Objectives	121
Time Commitment	122
Clinical Affiliate Call Guidelines	122
Relationship to Students While Assigned to Clinical Practicum	123
Clinical Objectives – Specialty Rotations	
Cardiothoracic Anesthesia	124
Pediatric Anesthesia	125
Obstetrical Anesthesia	127
Purpose	127
Overall Objectives	128
Specific Terminal Objectives	128
Clinical Evaluation of Students	129
Visits to Affiliations	130
Records	130
Expenses	130
Attire	130
Lockers	131
Evaluation Process	131
Student Evaluations	131
Faculty Evaluation	132
Program Evaluation	133
Tuition and Expenses	134
Records	135
Requirements for Graduation	136
Procedure for Writing the Certification Examination	136
Clinical Sites	137
Forms for Anesthesia Students	
Formal Daily Evaluation and Expectations for the Appropriate Level	
Nurse Anesthesia Clinical Evaluation Form	142
Level I Expectations	144
Level II Expectations	145
Level III Expectations	146
Level IV Expectations	147
Level V Expectations	148
Critical Incident Report	149

Unsatisfactory Performance Card.....	150
Commendation Card.....	151
American Association of Nurse Anesthesia (AANA) 2011 Record of Clinical Experiences.....	153

SECTION XI: DOCTORATE OF NURSING PRACTICE SPECIALIZATION INFORMATION

DNP Program Introduction.....	155
Doctoral Student Outcomes.....	155
Graduate Student Policies	155
DNP Curriculum	156
DNP Timeline for Important Milestones	157
DNP Final Project Guidelines	158
Sample DNP Project Outline.....	160
Sample Title Page for Final Project	161
School of Nursing PICO Form	162
DNP Final Project Committee Form.....	163
Final Project Idea/Title Approval Form.....	164
Residency and DNP Final Project Site Information Form	165
Final Project Design Approval Form	167
Human Subjects Approval	168
Procedure for Submitting the Application for Approval of Project Involving Human Subjects	168
Project Management for Final Project.....	169
Scope Statement Form	170
DNP Practicum and Residency.....	171
DNP Practicum Transfer Hours Form	173
DNP Practicum Hours Spreadsheet	173
DNP Residency Hours Plan Form	176
DNP Electronic Portfolio	177
DNP Comprehensive Examination	179
Request to Take the DNP Written Comprehensive Examination.....	180

SECTION XII: FORMS FOR ALL STUDENTS

Graduate Program Academic Improvement Plan	182
Clinical Site Preceptor Request Form.....	184
Graduate Student Request Form.....	187
Application for Graduation	189
Application for Approval of Research Project Involving Human Subjects.....	190
Incomplete Form.....	194
Report of Injury	197

INTRODUCTION

This handbook has been designed to provide supplemental information about policies, procedures, and regulations in the School of Nursing to students enrolled in the graduate program, as well as general information. Information will also be sent to students using the SIUE e-mail listserves. The School of Nursing will use the SIUE student email address as the only official email address for electronic communication. Only approved SIUE staff and faculty have access to the listserves. It is the responsibility of the student to report to the School of Nursing and the SIUE Service Center of all address, phone number, and name changes. If updated addresses, phone numbers, and names are not provided, students may not receive needed information and will bear full responsibility. **Please remember to check your SIUE e-mail account frequently for announcements and information.**

The most recent version of general policies and standards for graduate students can be found by accessing the Internet: <http://www.siu.edu/policies/>. Important policies include the **Student Academic Code** (SIUE, 2004) online at <http://www.siu.edu/policies/3c2.shtml>, the **Student Conduct Code**, (SIUE, 2002) online at <http://www.siu.edu/policies/3c1.shtml>, and the **Student Grievance Code**, (SIUE, 1998), online at <http://www.siu.edu/policies/3c3.shtml>. These documents can also be obtained from the offices of the Vice Chancellor of Student Affairs, Provost and Vice Chancellor of Academic Affairs, the Graduate School, or Admissions and Records.

The SIUE Graduate Catalog 2010-2011 is available online at http://www.siu.edu/graduatestudents/catalog/Graduate_Catalog_Home.shtml

THIS PUBLICATION IS NOT A CONTRACT OR OFFER TO CONTRACT. THE BOARD OF TRUSTEES, EXECUTIVE OFFICERS, AND THEIR AGENTS, AS WELL AS THE SCHOOL OF NURSING RESERVE THE RIGHT TO CHANGE INFORMATION CONTAINED HEREIN WITHOUT NOTICE WHEN CIRCUMSTANCES WARRANT SUCH ACTION.

IT IS THE RESPONSIBILITY OF THE STUDENTS TO BECOME FAMILIAR WITH THE POLICIES OF THE SCHOOL OF NURSING AND TO COMPLY WITH THEM.

SECTION I.

MISSION AND GOVERNANCE

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

UNIVERSITY MISSION

Southern Illinois University Edwardsville is a public comprehensive university dedicated to the communication, expansion, and integration of knowledge through excellent undergraduate education as its first priority and complementary excellent graduate and professional academic programs; through the scholarly, creative, and research activity of its faculty, staff, and students; and through public service and cultural and arts programming in its region.

UNIVERSITY VISION

Southern Illinois University Edwardsville, as a premier Metropolitan University, will be recognized nationally for the excellence of its programs and development of professional and community leaders.

UNIVERSITY VALUES

Recognizing public education as the cornerstone of a democracy, SIUE carries out its mission based on certain fundamental, shared values. We value:

Citizenship

- Social, civic, and political responsibility, globally, nationally, locally, and within the University
- Active partnerships and a climate of collaboration and cooperation among faculty, staff, students, and the larger community
- Environmental stewardship

Excellence

- High quality student learning
- Continuous improvement and innovation
- Outstanding scholarship and public service
- Standards consonant with the premier status to which we aspire

Integrity

- Accountability to those we serve and from whom we receive support
- Honesty in our communications and in our actions

Openness

- Inclusion of the rich diversity of humankind in all aspects of university life
- Respect for individual differences
- Intellectual freedom and diversity of thought
- Access for all who can benefit from our programs

Wisdom

- Creation, preservation, and sharing of knowledge
- Application of knowledge in a manner that promotes the common good
- Life-long learning

UNIVERSITY STATEMENT ON DIVERSITY

All societies and peoples have contributed to the rich mix of contemporary humanity. In order to achieve domestic and international peace, social justice, and the development of full human potential, we must build on this diversity. SIUE nurtures an open, harmonious, and hospitable climate that facilitates learning and work. Each member of the University is responsible for contributing to such a campus environment.

SIUE is committed to education that explores the historic significance of diversity in order to understand the present and to better enable our community to engage the future. Integral to this commitment, SIUE strives for a student body and a workforce that manifests diversity.

ACHIEVING THE VISION: SIUE LONG-TERM GOALS

The primary focus of SIUE's long-term goals is student learning. Achieving the following goals will help students become lifelong learners and effective leaders in their professions and communities:

1. Engaged Students and Capable Graduates – Attract a diverse student body, including traditional, non-traditional, commuter, and residential scholars, and nurture, educate, and graduate students who achieve the objectives for baccalaureate, graduate, and professional degrees.
2. Innovative High Quality Programs – Develop, deliver, and continually improve high quality academic programs appropriate for a Metropolitan University.
3. Committed Faculty and Staff – Recruit and support a diverse faculty and staff known for providing the highest quality educational opportunity, scholarship, and service.
4. Harmonious Campus Climate – Foster a harmonious student-centered campus characterized by integrity, cooperation, open dialogue, and mutual respect among individuals with different backgrounds, cultures, and perspectives.
5. Active Community Engagement – Achieve an integral and indispensable relationship with Illinois and the St. Louis metropolitan area; work cooperatively within SIU to make the whole greater than the sum of its parts.
6. Sound Physical and Financial Assets – Develop, maintain, and protect the University's assets in a financially, aesthetically, and environmentally responsible manner.
7. Excellent Reputation – Participate and excel in actions that earn national recognition for quality.

SIUE GOALS OF GRADUATE STUDENT LEARNING

1. Demonstrate breadth and depth of knowledge in the discipline.
2. Effectively communicate knowledge in the discipline.
3. Demonstrate an ability for analytical thinking in the discipline.
4. Exhibit the best practices, values, and ethics of the profession.
5. Apply knowledge of the discipline.

SCHOOL OF NURSING MISSION

We inspire our students and faculty to embody the creativity to teach, the curiosity to learn, the courage to serve, and the compassion to care for others in this diverse and complex world, forever exemplifying nursing excellence in action!

Approved by Faculty 9/06

THE ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION: STATEMENT OF DEFINITION OF ADVANCED PRACTICE NURSING FUNCTIONS

"Advanced practice nurse" or "APN" means a person who has met the qualifications for a (i) certified nurse midwife (CNM); (ii) certified nurse practitioner (CNP); (iii) certified registered nurse anesthetist (CRNA); or (iv) clinical nurse specialist (CNS) and has been licensed by the Department. All advanced practice nurses licensed and practicing in the State of Illinois shall use the title APN and may use specialty credentials after their name.

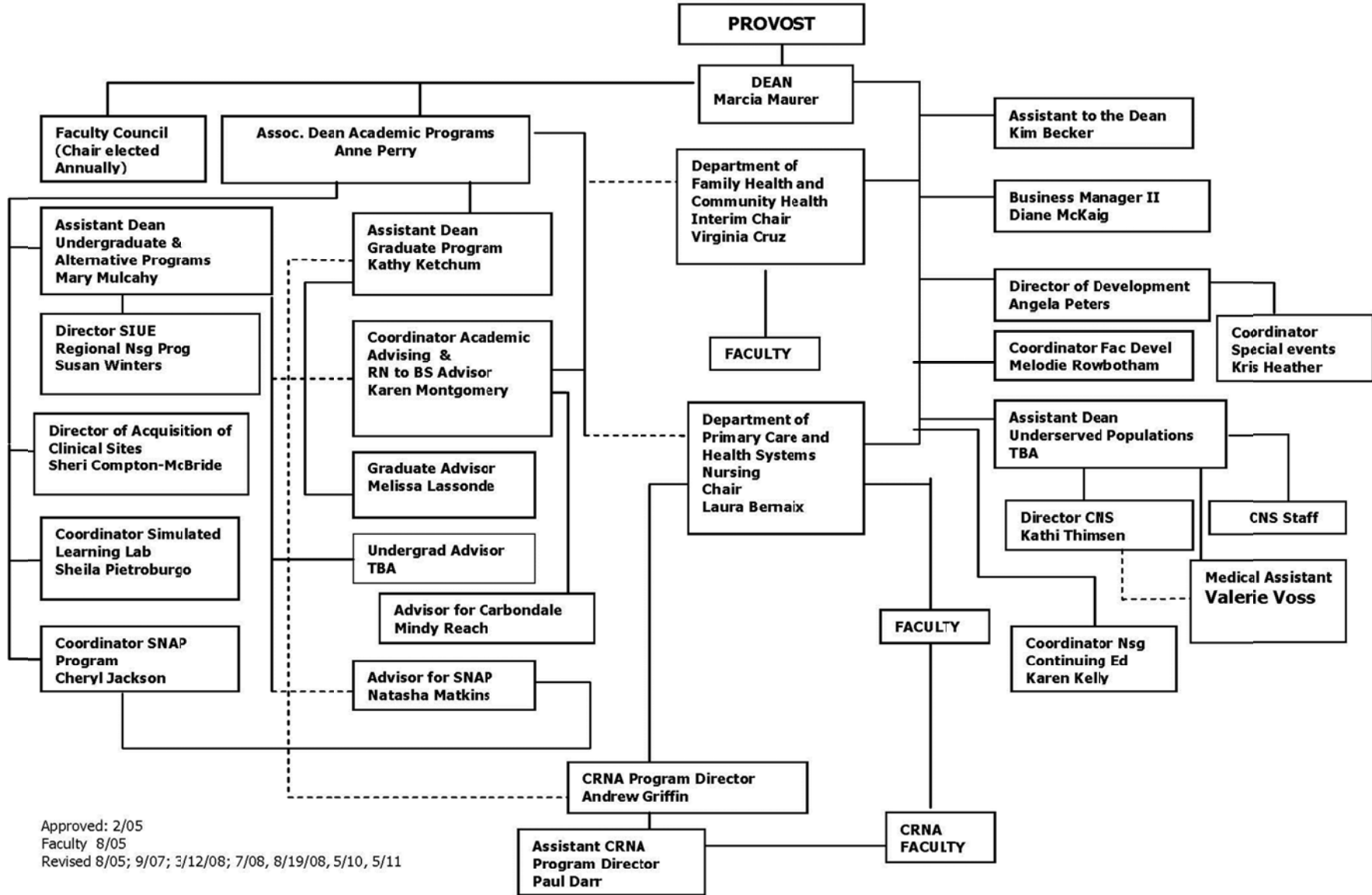
SOURCE: Practice Act 95-639, eff. 10-5-07.

- (a) Advanced practice nursing by certified nurse practitioners, certified nurse anesthetists, certified nurse midwives, or clinical nurse specialists is based on knowledge and skills acquired throughout an advanced practice nurse's nursing education, training, and experience.
- (b) Practice as an advanced practice nurse means a scope of nursing practice, with or without compensation, and includes the registered nurse scope of practice.
- (c) The scope of practice of an advanced practice nurse includes, but is not limited to, each of the following:
 - (1) Advanced nursing patient assessment and diagnosis.
 - (2) Ordering diagnostic and therapeutic tests and procedures, performing those tests and procedures when using health care equipment, and interpreting and using the results of diagnostic and therapeutic tests and procedures ordered by the advanced practice nurse or another health care professional.
 - (3) Ordering treatments, ordering or applying appropriate medical devices, and using nursing medical, therapeutic, and corrective measures to treat illness and improve health status.
 - (4) Providing palliative and end-of-life care.
 - (5) Providing advanced counseling, patient education, health education, and patient advocacy.
 - (6) Prescriptive authority as defined in Section 65-40 of this Act.
 - (7) Delegating selected nursing activities or tasks to a licensed practical nurse, a registered professional nurse, or other personnel.

Source: Practice Act 95-639, eff. 10-5-07.

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

SCHOOL OF NURSING ORGANIZATIONAL CHART



Approved: 2/05
 Faculty 8/05
 Revised 8/05; 9/07; 3/12/08; 7/08, 8/19/08, 5/10, 5/11

SECTION II

ADMINISTRATION, STAFF & FACULTY

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING CONTACT INFORMATION**

Mailing Address:

Southern Illinois University Edwardsville
School of Nursing
Campus Box 1066
Alumni Hall
Edwardsville, IL 62026

Phone and Fax Numbers:

Edwardsville Reception Desk Phone:	618 650-3956
Edwardsville Fax Administration	618 650-3854
Edwardsville Fax Faculty	618 650-2522
Springfield Reception Desk Phone:	217 545-7140
Springfield Fax:	217 545-7149

Community Nursing Services:

East St. Louis Higher Education Center
601 James R. Thompson Blvd., Bldg. D, Suite 2015
East St. Louis, IL 62201
Telephone: 618 482-6959
Fax: 618 482-8311

Springfield Campus Address:

409 W. Calhoun Ave.
PO Box 19673
Springfield, IL 62794-9673

SCHOOL OF NURSING ADMINISTRATION, STAFF & FACULTY

Administration

Marcia C. Maurer, PhD, RN
Dean and Professor
Alumni Hall, Rm. 2109
Telephone: 618-650-3969
e-mail: mamaure@siue.edu

Anne Perry, EdD, RN, FAAN
Associate Dean for Academic Programs
Alumni Hall, Rm. 2110
Telephone: 618-650-3972
e-mail: saperry@siue.edu

Sheila Pietroburgo, MSN, RN
Coordinator of the Simulated Learning Center
Alumni Hall, Room 2203
Telephone: 618-650-2470
e-mail: spietro@siue.edu

Academic Advisors

Karen Montgomery, MBA
Coordinator of Advisors
Advisor for RN to BS Program, Advisor for School Nurse Certification Program
Alumni Hall, Rm. 2123
Telephone: 618-650-3904
e-mail: kmontgo@siue.edu

Melissa Lassonde, MA
Graduate Advisor
Alumni Hall, Rm. 2122
Telephone: 618-650-3930
e-mail: mlasson@siue.edu

TBA
Undergraduate Advisor
Alumni Hall, Rm. 2121
Telephone: 618-650-3974
e-mail:

Natasha Matkins Smith, MBA
Student Nurse Achievement Program (SNAP) Advisor
East St. Louis Higher Education Center
Telephone: 618-482-6921
e-mail: nmatkin@siue.edu

Support Staff

Administrative Assistant to the Dean
Kim Becker
Alumni Hall, Room 2108
Telephone: 618-650-3969
e-mail: kbecker@siue.edu

Office Administrator for the Associate Dean for Academic Programs
Sandy Compton
Alumni Hall, Room 2117
Telephone: 618-650-3957
e-mail: sacompt@siue.edu

Office Support Specialist for Graduate Programs
Pat Koehne
Alumni Hall, Room 2117
Telephone: 618-650-3975
e-mail: pkoehe@siue.edu

Office Support Specialist for Dept. of Primary Care and Health Systems
Doris Davis
Alumni Hall, Rm. 2340
Telephone: 618-650-3960
e-mail: dordavi@siue.edu

Office Support Specialist for Dept. of Family and Community Health Nursing
Annette Musenbrock
Alumni Hall, Rm. 2340
Telephone: 618-650-3958
e-mail: amusenb@siue.edu

Receptionist, School of Nursing
Linda Kusmanoff
Alumni Hall, Room 2117
Telephone: 618-650-3956 or 1-800-234-4844
e-mail: lkusman@siue.edu

Program Administrative Assistant, School of Nursing, Springfield Building
Sue Mathews
Springfield Campus
Telephone: 217-545-7140
e-mail: sumathe@siue.edu

Special Events Facilitator
Kristine Heather
Alumni Hall, Room 2304
Telephone: 618-650-2551
e-mail: kheathe@siue.edu

Office Support Specialist to the Assistant Dean for Undergraduate and Alternative Programs
Nancy Newman
Alumni Hall, Rm. 2117
Telephone: 618-650-3964
e-mail: nnewman@siue.edu

Statistical Clerk and Web Page Content Manager
Pam Donahue
Alumni Hall, Rm. 2118
Telephone: 618-650-3961
Fax: 618-650-3854
e-mail: pdonahu@siue.edu

Business Manager
Diane McKaig
Alumni Hall, Room 2113
Telephone: 618-650-3588
e-mail: dmckaig@siue.edu

Faculty Office, Telephone & Email List

Unless otherwise specified, all telephone numbers have a 618 area code with a 650 prefix. All offices are located in Alumni Hall.

Graduate Nursing Faculty			
Room Number	Name	Phone	E-Mail
3321	Alford, Linda	3980	lialfor@siue.edu
3321	Boyd, Rita Arras	3980	rarras@siue.edu
2327	Baier, Marjorie	5986	mbaier@siue.edu
2332A	Bernaix, Laura	3926	lbernai@siue.edu
3330	Comrie, Rhonda	3935	rcomrie@siue.edu
2323	Cruz, Virginia	3998	vcruz@siue.edu
3334A	Durbin, Christine	5672	cdurbin@siue.edu
3335A	Gaehle, Kay	3976	kgaehle@siue.edu
2332B	Griffin, Andrew	2182	agriffi@siue.edu
3335	Harrison, Roberta	3999	roberha@siue.edu
3333	Jewell, Donna	5637	djewell@siue.edu
2326	Kelly, Karen	3908	kkelly@siue.edu
2124	Ketchum, Kathy	3936	kketchu@siue.edu
2331A	Luebbert, Rebecca	3993	rluebbe@siue.edu
3334	Lyerla, Frank	5974	flyerla@siue.edu
2109	Maurer, Marcia	3959	mamaure@siue.edu
2120	Mulcahy, Mary	3934	mmulcah@siue.edu
Springfield	Mulcahy, Mary	(217) 545-7148	mmulcah@siue.edu
2317	Newland, Pam	2972	pnewlan@siue.edu
2110	Perry, Anne	3972	saperry@siue.edu
3332	Popkess, Ann	3992	apopkes@siue.edu
2330	Riley, Marguerite	5836	mriley@siue.edu
3331	Rowbotham, Melodie	5319	mrowbot@siue.edu
2333	Schmidt, Cindy	3921	caschmi@siue.edu
2335A	Shelton, Ann	3283	ashelto@siue.edu
3336	White, Kim	3495	kiwhite@siue.edu
2329	Yancey, Valerie	2588	vyancey@siue.edu
Additional Faculty Teaching in the Graduate Program			
2336	Ampadu, Jerrica	3988	jerphil@siue.edu
2318	Behrhorst, Virginia	5873	vpetrof@siue.edu
2321A	Darr, Paul	5318	pdarr@siue.edu
2308	Griffin, Valerie	3392	vgriffi@siue.edu
2321A	Griffith, Kyle	5318	kygriff@siue.edu
2321B	Hamilton, Megan	5318	mehamil@siue.edu
3321	Seabaugh, Dianne	3980	dseabau@siue.edu
2321B	Smith, Don	5592	donsmit@siue.edu
3302	Sobczak, Bernadette	3922	lstelly@siue.edu
2321B	Stein, Kevin	5320	kstein@siue.edu



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
GRADUATE FACULTY

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Alford, Linda		I	x3980 AH3321 lialfor@siue.edu		
Marjorie Baier, PhD, RN,	Associate Professor	II	x5986 AH2327 mbaier@siue.edu	Psychiatric Nursing, Historical Research	Qualitative Research, Non-Parametric Statistics
Laura Bernaix, RN, PhD	Associate Professor	II	x3926 AH2332A lbernai@siue.edu	Breast-Feeding Promotion, Maternal Behaviors, Teen Pregnancy Prevention, Maternal-Newborn Nursing, Parenting, Prenatal Blood Lead Testing	Research Design and Data Analysis, Education, Literature Review
Rita Arras Boyd, PhD, RN, MSN	Associate Professor	I	x3980 AH3321 rarras@siue.edu	Diabetes, Health Behavior, Health Promotion Disease Prevention	Interventions, Public Health, Health Promotion, Health Counseling
Rhonda Comrie, PhD, RN	Associate Professor	II	x3935 AH3330 rcomrie@siue.edu	Nursing education, Asthma, Student Development, Hope, Ethics, Medical Surgical nursing	Education, Medical-Surgical, Qualitative Methods
Virginia Cruz, RN, PhD	Associate Professor	I	x3998 AH2323 vcruz@siue.edu	ADRD Family Caregivers, Older Adult-Depression, Long Term Care	Gerontological Nursing, Nursing Administration, Nursing Education
Christine Durbin, PhD, JD, RN	Assistant Professor	I	x5672 AH3334A cdurbin@siue.edu	Health Law, Medical-Surgical Nursing	Advance directives.



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
GRADUATE FACULTY

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Kay Gaehle, RN, PhD	Associate Professor	II	x3976 AH3335A kgahle@siue.edu	Breast Cancer Detection - Women's Health, Medical Surgical, Cancer Survivorship	Medical Surgical, Nursing Education
Andrew Griffin, CRNA, MS, APN	Assistant Professor	I	x2182 AH2332B agriffi@siue.edu	General Surgery, Vascular, OB	Nurse Anesthesia
Roberta Harrison, PhD, RN, CRRN	Assistant Professor	II	x3999 AH 3335 roberha@siue.edu	Combined lifestyle interventions, diabetes, informatics	Rehabilitation, nursing administration, shared governance
Donna Jewell, PhD, RN, CCM	Assistant Professor	I	x5637 AH3333 djewell@siue.edu	Nursing care of the obese	Use of technology in nursing
Karen Kelly, EdD, RN, CNAA, BC	Associate Professor	II	x3908 AH2326 kkelly@siue.edu	Autism, Nursing Administration, Professional Nursing Development	Nursing Autonomy, Nursing Administration, Continuing Education, Policy and Politics, Professional Development
Kathy Ketchum, RN, PhD	Associate Professor	II	x3936 AH2124 kketchu@siue.edu	Trauma patients and families, intravenous therapy and blood drawing, medication safety, nursing informatics; Emerging Educational Technologies	Research design, Statistics, Computer Technology, SPSS; Evidence-based practice
Rebecca Luebbert, PhD, PMHCNS-BC	Assistant Professor	I	x3993 AH 2331A rluebbe@siue.edu	psychiatric/ mental health nursing	human subject protection, informed consent, vulnerable populations



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
GRADUATE FACULTY

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Frank Lyerla, PhD, RN	Assistant Professor	II	x5974 AH 3334 flyerla@siue.edu	Nursing Informatics	Nursing Informatics
Marcia Maurer, RN, PhD	Professor & Dean	II	x3959 AH2109 mamauer@siue.edu	Pre-term labor, Role Socialization of Faculty or Professor or Student GRE as Predictor of Graduate School Success	Qualitative Design – Method: Grounded Theory
Mary Mulcahy, RN, EdD	Associate Professor and Assistant Dean for Undergraduate & Alternative Programs	I	x3934 AH2120 mmulcah@siue.edu	Differentiated Practice	Curriculum development and evaluation; Adult Learning
Pamela Newland, RN, PhD, CMSRN	Assistant Professor	I	x2972 AH 2317 pnewlan@siue.edu	Health Support, Neurology, Multiple Sclerosis, Pain Symptoms, Symptom Management	Medical-Surgical Nursing, Clinical Nursing Practice, qualitative and quantitative methods related to symptom cluster research
Anne Perry, EdD, RN, FAAN	Professor & Associate Dean	II	x3972 AH 2110 saperry@siue.edu	Adult Critical Care, Weaning from Mechanical Ventilation, Nursing Language Development: Surveillance Diagnosis	Instrument Development: Qualitative and Quantitative methods related to instrument development, refinement, and outcome measures.



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
GRADUATE FACULTY

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Ann Popkess, RN PhD	Assistant Professor	I	x3992 AH 3332 apopkes@siue.edu	Nursing Administration/Education	Nursing Education, Student Engagement, Active Learning Strategies, Quality Improvement and Safety Initiatives
Marguerite Riley, RN, PhD	Associate Professor	II	x5836 AH2330 mriley@siue.edu	Health Promotion, Curriculum Development, Breast & Prostrate Cancer, Chronic Pain, Professional Image	Medical-Surgical Nursing, Nursing Practice/Education
Melodie Rowbotham, PhD, RN, CNE	Assistant Professor	II	x5319 AH 2302 mrowbot@siue.edu	Nursing Education, Classroom Environment, Teaching Perspectives, Teacher and Student Self-efficacy.	Nursing Education, Classroom Environment, Teaching Perspectives, Teacher and Student Self-efficacy.
Cindy Schmidt, RN, PhD	Professor	II	x3921 AH2333 caschmi@siue.edu	Children with Type I Diabetes, Hospitalized Children's Perceptions of Nurses, Prenatal Lead Levels	Qualitative Methods, Pediatric Nursing, Education Practice
Ann Shelton, PhD, RN	Assistant Professor	I	x3283 AH2335a ashelto@siue.edu	Ethics, Informed Consent, Genetics & Genomics, Geriatrics	Ethics, Informed Consent, Genetics & Genomics, Geriatrics
Kim White, PhD, RN, CRRN	Clinical Assistant Professor	I	x3495 AH3336 kiwhite@siue.edu	Community Health, Lead Poisoning; risk reduction behavior, perceptions of risk; Alzheimer's Disease & related dementias	Community Health, Orthopedic/ Neurological Rehabilitation, Public Health, Lead Poisoning, Health Risks



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
GRADUATE FACULTY

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Valerie Yancey, RN, PhD	Associate Professor	II	x2588 AH2329 vyancey@siue.edu	Nursing Theory, Health Care Ethics, Holistic Nursing Palliative Care, Intensive Care Nursing, Death and Dying, Spirituality and Health; stress management and psychoneuroimmunology	End of Life Care; Palliative Care/Nursing Models for Care Delivery/Veteran Spiritual Care and Recovery from Trauma



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH TEMPORARY GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Jerrica Ampadu, PhD(c), MSN, RN	Instructor	Temp	x3988 AH2336 jerphil@siue.edu		
Virginia Behrhorst, APRN-C, MS	Instructor	Temp	x5873 AH2318 vpetrof@siue.edu	Nurse Practitioner Issues, Adult Health, Domestic Violence, Geriatrics, Women's Health	Primary Health, Adult Medical/Surgical, Nurse Practitioner
Paul A. Darr, MSN, CRNA, APN, FAAPM	Lecturer	Temp	x5318 AH2321 pdarr@siue.edu	Retrospective studies to outcome comparisons and CQI, Anesthesia	Anesthesia focused on outpatient, critical access rural anesthesia, pain management issues, simulation in anesthesia education
Valerie Griffin, MSN, PNP-BC, FNP-BC	Instructor	Temp	x3392 AH2308 vgriffi@siue.edu		Childhood obesity/nutrition; Pediatric Primary Care; Developmental assessment of the pediatric patient
Kyle Griffith, MS, CRNA	Lecturer	Temp	x5318 AH2321A kygriff@siue.edu	Anesthesia	Anesthesia
Megan Hamilton, MS, CRNA	Lecturer	Temp	X5320 AH2321B mehamil@siue.edu	Anesthesia	Anesthesia
Dianne Seabaugh, MS, FNP-BC	Instructor	Temp	X3980 AH3321 dseabau@siue.edu	Herbal Medicine	Herbal Medicine



SIUE SCHOOL OF NURSING 2011-2012 FACULTY RESEARCH INTERESTS AND EXPERTISE
GRADUATE FACULTY

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Don Smith, CRNA, MS	Lecturer	Temp 2010-2013	x5592 AH2321B donsmit@siue.edu	Anesthesia	Nurse Anesthesia
Sobczak, Bernadette, RN, MSN, CPNP-PC	Lecturer	Temp 2010-2013	x3922 AH 2302 bsobcza@siue.edu	Childhood obesity, physical activity and nutrition, stress and coping, and infertility	Pediatric Nurse Practitioner of sick and well children, and public health nursing especially immunizations and communicable disease.
Stein, Kevin, CRNA, MS, APN	Lecturer	Temp	x5320 AH2321B kstein@siue.edu	Anesthesia	Nurse Anesthesia

SECTION III
STUDENT RESOURCES

University Student Support Services & Resources: Contact Information

Unless otherwise specified, all telephone numbers are 618 area code with a 650 prefix.

	Contact Person	Building	Room #	Phone #
Blackboard/Web Troubleshooting	Staff M-F 8:00am – 6:00 pm or leave voicemail http://www.siu.edu/its/bb/index.htm	Lovejoy Library	0005	5500
Bursar	Staff www.siu.edu/bursar	Rendleman Hall	1101	3123
CBI – Background Check & Drug Screen	www.CertifiedBackground.com Customer Service: (888) 666-7788 ext.1 customerservice@certifiedbackground.com Billing: (888) 666-7788 ext.4 billing@certifiedbackground.com			
CougarNet	https://ssb.siu.edu/pls/BANPROD/twbkwbis.P_GenMenu?name=homepage			
Financial Aid	Linda Hahn http://www.siu.edu/financialaid/ or http://www.siu.edu/studentemployment/	Rendleman Hall	2308	3880
General SIUE Policies	http://www.siu.edu/policies/			
Graduate Records – Graduation, Transcripts, Posting of Transfer Credit, Verif. of Degree, etc.	Jodi Olson Start at Service Center - Below Chris Wasson http://www.siu.edu/registrar/about/graduate.shtml or http://www.siu.edu/registrar/	Rendleman Hall	1207	3167 2263
Graduate School Administrative, Research, and Prosp. Grad Students	www.siu.edu/graduate www.siu.edu/research www.siu.edu/graduatestudents Linda Skelton – IRB Erin Miles – Graduate Assistantships	Rendleman Hall	2202	3010
Health Service Univ. Clearance	Sue Grimes, RN Fax: 618-650-5839 http://www.siu.edu/healthservice/	Rendleman Hall	0214	2849
Information Technology Services (ITS) (Email & Internet)	Staff http://www.siu.edu/its/students/index.html	Lovejoy Library	0005	5500
Lovejoy Library Information Svcs.	Ms. Juliet Kerico http://www.siu.edu/lovejoylibrary/	Lovejoy Library	3 rd Floor	3828
Magus Health Portal – Student Immunization Tracker	Magnus Health Portal – Attn: Medical Records 327 W. Morgan Street Raleigh NC 27601 Fax: (919) 827-0142 Customer Service: (888) 723-4263 ext. 7168 https://secure.magnushealthportal.com/index.jsf			
Parking Services	Staff http://www.siu.edu/parking/	Rendleman Hall	1113	3680
Semester Schedules	http://www.siu.edu/registrar/schedules			
Service Center: All Graduate Admissions & Graduate Records Services	Staff http://www.siu.edu/registrar/about/service_center.shtml START HERE	Rendleman Hall	1309	2080
Speech Center	http://www.siu.edu/is/speechcenter/	Alumni Hall	3323	3085
Student ID	Staff http://www.siu.edu/COUGARCARD/	Rendleman Hall	1309	2080
Writing Center	Chad Verbais http://www.siu.edu/IS/WRITING/	Peck Hall	1419	2045

FINANCIAL ASSISTANCE

Students in need of financial assistance should seek advice from the Office of Student Financial Aid in Rendleman Hall, Room 2308. Students are encouraged to apply by March 1st for the following academic year. This will allow time to process an application. Sources for funds for financial assistance include local banks, church and fraternal organizations, the Armed Forces ROTC programs, and Illinois Guaranteed Loans.

The Office of Student Financial Aid may also have part-time student positions for qualified applicants. The student is urged to consult the Office of Student Financial Aid for full information. Students are also encouraged to monitor the SIUE Graduate School website to find out about opportunities for financial assistance.

Some information about additional financial support opportunities will be communicated via the student list serve.

ON-LINE TUITION AND FEE BILLING

Billing for tuition and fees by the University can be found on CougarNet. It is the responsibility of the student to access CougarNet for bills for tuition and fees. Paper bills will not be sent.

ASSISTANCE WITH LOGGING ONTO BLACKBOARD OR WITH REVISION OF YOUR PASSWORD

Student needing assistance logging onto Blackboard or revising their password from home may call Information Technology Services at (618) 650-5500. Office hours are from 7:30 AM until 10:00 PM Monday – Thursday, 7:30 AM until 8:00 PM Friday and 7:30 AM until 1:00 PM Saturday. If you need assistance at other times, call that number and leave a message with your name and a telephone number that you can be reached at during office hours and someone will call you back as soon as possible. “Off-campus” students can get assistance with passwords by contacting the Registrar’s Office at (618) 650-3770.

SECTION IV
GENERAL INFORMATION

SCHOOL OF NURSING OVERVIEW

The Graduate Program in Nursing has programs for advanced practice advanced nursing roles or for a doctorate in nursing practice. Master's degrees and Post-Master's Certificates are awarded in the specializations of Health Care and Nursing Administration, Nurse Anesthesia, Nurse Educator, and Family Nurse Practitioner. Specific information regarding the Doctor of Nursing Practice degree can be found later in this handbook.

Graduate nursing education builds upon baccalaureate nursing education and emphasizes development of leadership skills and the expertise necessary to assume complex, specialized roles while providing direct and indirect nursing care to individuals, groups, and families. We focus on knowledge of community resources and the aspects of primary, secondary, and tertiary modalities in health care. Clinical experience in community agencies and hospitals is an integral part of the program. Knowledge and experience related to advanced practice in nursing are incorporated into the program. Clinical practicum experiences are required and are individualized according to the student's professional experience, interest, and academic needs. Faculty act as facilitators while creating a supportive learning community.

The program for the Master of Science degree in nursing consists of 35 semester hours for Health Care and Nursing Administration, 72 semester hours for Nurse Anesthesia, 36 semester hours for Nurse Educator and 54 semester hours for the Family Nurse Practitioner Specialization.

Courses from previous master's degree programs in Nursing will be evaluated on an individual basis to determine their applicability to the Post-Master's certificate requirements.

Post master's certificates require 22-35 semester hours in Health Care and Nursing Administration; 41-72 hours in the Nurse Anesthesia specialization ; 13-36 semester hours in Nurse Educator and 24-54 semester hours for Family Nurse Practitioner specializations.

SCHOOL OF NURSING WEBSITE AND EMAIL

Information which may affect graduate students will be communicated via SIUE email and may be posted on the SIUE School of Nursing website at <http://www.siu.edu/nursing>. It is the responsibility of the student to be informed. **The School of Nursing will use the SIUE student email address (E-ID) as the only official email address for electronic communication.** Students may activate their E-ID at: http://www.siu.edu/its/eid_support.shtml once they have student status (i.e. accepted into the nursing program). Only approved SIUE staff and faculty have access to, and may post to, the listserves.

- **THE STUDENT E-ID MUST BE ACTIVATED AT LEAST ONE WEEK PRIOR TO THE FIRST DAY OF CLASS.**
- **STUDENTS MUST SUBMIT THEIR E-ID TO THE GRADUATE SECRETARY (pkoehne@siue.edu) IMMEDIATELY AFTER ACTIVATING.**
- **STUDENTS ARE RESPONSIBLE FOR CHECKING THEIR SCHOOL OF NURSING EMAIL (including Listserve messages) DAILY.**

STUDENT ADDRESSES, PHONE NUMBERS AND EMERGENCY INFORMATION

In order for BOTH the School of Nursing and the University to have current student addresses, phone numbers and emergency information, students are required to do BOTH of the following:

1) Submit their current or changes of addresses, phone numbers, or name changes and emergency contact information to the Graduate Program Secretary, Pat Koehne (618) 650-3975, pkoehe@siue.edu in the School of Nursing.

2) Submit the same information as in Item #1 to the SIUE Service Center. Forms are available at <http://www.siue.edu/registrar/forms/>. If updated addresses, phone numbers, and names are not provided, students may not receive needed information and will bear full responsibility.

LAB COATS & PATCHES

All School of Nursing graduate students are required to purchase and wear lab coats for all clinical rotations. School of Nursing patches will be sewn/heat pressed on the left upper sleeve of all lab coats. The School of Nursing will provide one patch free of charge to each student. Charges will be incurred for additional or replacement patches.

NAME BADGE

Official School of Nursing clinical name badges will be worn on the upper right portion of the uniform or lab coat. One picture name badge will be provided free of charge to each School of Nursing graduate student. Charges will be incurred for additional or replacement name badges.

Students must wear their SIUE clinical name badge for any clinical practicum program activity.

PARKING

If you drive to the Edwardsville campus, you must purchase and display a valid parking permit. Parking Services information may be found at <http://www.siue.edu/parking>.

SCHOOL PINS

Upon graduation, graduate students may purchase SIUE nursing pins if they so desire from the University Bookstore. A pin authorization form signed by the Associate Dean for Academic Programs is required.

CONVOCATION AND COMMENCEMENT CEREMONIES

Graduate students who have completed all degree requirements are eligible to attend both the School of Nursing Convocation and the University Commencement ceremonies. Commencement ceremonies are held at the end of each academic term. Students who will graduate must be cleared by the Graduate Records Office, Financial Aid Office, Registrar, Bursar and the School of Nursing before they can participate in these ceremonies.

Graduate students receive their Master's Degree academic hoods at the School of Nursing Convocation. Convocation is held at the end of fall and spring semesters only.

SIGMA THETA TAU INTERNATIONAL NURSING HONOR SOCIETY

The Epsilon Eta Chapter of Sigma Theta Tau International was chartered in 1980 at SIUE. It is open to nursing students who meet established academic and professional criteria both at the graduate and undergraduate level and to community nursing leaders. The Society is concerned with the advancement of professional nursing through scholarship, research, and practices. If you are interested in further information about the Society, contact the Sigma Theta Tau Secretary in the School of Nursing, (618) 650-3958.

PHI KAPPA PHI HONOR SOCIETY

The University has a local chapter of Phi Kappa Phi. The primary objectives of the Honor Society of Phi Kappa Phi are to promote the pursuit of excellence in all fields of higher education and to recognize achievement by students, faculty, and other through election to membership, and through various awards for distinguished achievement. Each year graduate students who meet the academic criteria are invited to apply for membership. Awards are also made to students who successfully win paper competitions.

STUDENT PARTICIPATION IN SCHOOL OF NURSING COMMITTEES

Graduate students will be requested to volunteer to serve as student representatives on four School of Nursing Standing Committees: the Graduate Curriculum Committee, the Graduate Student Affairs Committee, the Nursing Program Quality Improvement Committee (NPQIC) and the Emerging Technology in Education (ETEC). Additional opportunities for students to serve on committees will be communicated to students via the SIUE Email Listserve system as they arise.

STUDENT PARTICIPATION IN UNIVERSITY-WIDE COMMITTEES

The Kimmel Leadership Center is the center of student involvement and campus life at SIUE. Students interested in getting involved can choose from more than 200 student organizations. Students also have the opportunity to serve on University-wide committees. Currently, there are over fifteen University-wide committees that have student representatives. A few examples are the General Education Committee, Curriculum Council, Graduate School Council, Textbook Service Advisory Committee, and the University Center Board. Through the Kimmel Leadership Center and Student Government, students can participate in a variety of student activities, leadership opportunities, and volunteer experiences that promote growth, leadership abilities, and prepare students for life-long learning. For additional information on these opportunities, go to www.siue.edu/kimmel or contact the Kimmel Leadership Center at 650-2686.

SECTION V

MASTER'S CURRICULUM

**The Master's Curriculum Plans included in this
2011-2012 Graduate Student Handbook
apply to all students admitted to cohorts
starting in
Summer 2011 and Fall 2011.**

NURSING PARADIGM

A paradigm describes the focus for a body of knowledge. These four concepts comprise a framework for study in the discipline of nursing and reflect the philosophic beliefs of the faculty and the School of Nursing.

PERSON can refer to individuals, families, aggregates, or populations. The person is characterized by wholeness, purpose, promise, potential, and complexity. While people are unique, they share a common identity, connection, and interdependence with each other. People are autonomous beings, capable of choice, and are entitled to respect for their human dignity. (Consensus Statement on Emerging Nursing Knowledge)

ENVIRONMENT refers to physical, psychosocial, spiritual, economic, and cultural factors that contribute to health status (Kleffel, 1991). Persons are in constant interaction with the dynamic environment.

HEALTH is defined as physical, mental, spiritual and social well-being and not merely the absence of disease. Health is multidimensional, dynamic and is influenced by functional capacity, adaptation, behavior, and access to quality healthcare (adapted from the WHO, 1948 and US Department of Health and Human Services, 2000).

NURSING is the protection, promotion and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations (ANA, Social Policy Statement, 2003)

Learning

Learning is an active search for meaning by the learner, construction and reconstructing knowledge rather than passively receiving it, shaping as well as being shaped by experiences. Learning involves social interaction that promotes a process of becoming a member of a sustained community of practice.

Adapted from the Joint Task Force on Student Learning, 1998, quoted in Huba, M.E. and Freed, J.E. (2000). *Learner-centered assessment on college campuses: Shifting the focus from teaching to learning*. Boston: Allyn & Bacon.

Approved by School of Nursing Faculty: May, 2004

CURRICULAR THEMES

Themes for the curriculum are derived by faculty from an assessment of University and School of Nursing statements of mission and goals. Once the themes are determined for a curriculum, they are used to systematically plan and develop course direction, content and outcome expectations.

ANALYTICAL REASONING

Outcome focused thinking that includes the ability to analyze information, make inferences, draw logical conclusions, and critically evaluate all aspects and consequences of an action.

COMMUNICATION

A complex, ongoing, interactive process that involves oral, written and nonverbal interactions.

ROLE

A set of social and personal characteristics that includes the nurse as a provider, manager, designer and coordinator of care, and a member of a profession.

HUMAN DIVERSITY

Differences in race, ethnicity, national origin, religion, age, gender, sexual orientation, ability/disability, social and economic status or class, education, beliefs, and related attributes of people (adapted from Andrews and Boyle, *Transcultural concepts in nursing care*, 1999).

ETHICS

The application of a value system in making decisions about the rightness and/or wrongness of an action or situation.

HEALTH POLICY / SOCIAL CONSCIOUSNESS

Health Policy: Guidelines developed by the public, governmental, and/or third-party participants and health care institutions / professions that influence and shape health care delivery.

Social Consciousness: The awareness and appreciation of the social variables that impact the health of individuals, groups, and populations.

PRACTICE

The planning, providing and evaluating of nursing care for individuals, groups, and populations, including prevention, health promotion, and care of the ill, the injured and the dying, through the application of theory and science.

Approved by School of Nursing Faculty. September 8, 2008

Integrated Concepts for curriculum

Life span perspective of human development takes into account all phases of life, not just childhood or adulthood, and is embedded in social and cultural contexts. (Adapted from Berger, K. (2005). *The developing person through the life span*, 6th edition)

Citizenship refers to being a responsible member of local, national and global community where in one participates, collaborates and contributes openly and freely toward improving the life conditions of the community.

Community is viewed as a group who share common interests, who interact with each other and who function collectively within a defined social structure to address common concerns (Clark, 2003).

Approved by School of Nursing faculty: May, 2004

MASTER'S STUDENT OUTCOMES

Using a learner-centered paradigm, Southern Illinois University Edwardsville Graduate Program in Nursing will be a leader in preparing compassionate and caring nurses who will:

Use evidence to synthesize, refine, and evaluate interventions to improve health care.

Assume advanced nursing practice roles to address societal health needs.

Demonstrate effective communication skills, including information technology, in advanced nursing practice roles.

Provide and advocate for culturally congruent care.

Model and facilitate ethical decision making and ethical practice.

Influence policy development and implementation to improve the health of populations.

Provide evidence-based, relationship-centered, and compassionate nursing care, within the context of interdisciplinary collaboration.

Approved by Faculty: 11/20/06

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
MASTER'S PROGRAM CURRICULUM**

Through the consensus-building process used by the AACN Task Force, general agreement on the outline of a master's nursing curriculum evolved. The master's curriculum is conceptualized as having three components. These are:

1. **Master's Nursing Core Content:** foundational curriculum content deemed essential for all students who pursue a master's degree in nursing regardless of specialty or functional focus.
 - I. Research
 - II. Policy, Organization, and Financing of Health Care
 - (1) Health Care Policy
 - (2) Organization of the Health Care Delivery System
 - (3) Health Care Financing
 - III. Ethics
 - IV. Professional Role Development
 - V. Theoretical Foundations of Nursing Practice
 - VI. Human Diversity and Social Issues
 - VII. Health Promotion and Disease Prevention

2. **Advanced Practice Core Content:** essential content to provide direct patient/client services as at advanced level.
 - I. Advanced Health/Physical Assessment
 - II. Advanced Physiology and Pathophysiology
 - III. Advanced Pharmacology

3. **Specialty Curriculum Content:** those clinical and didactic learning experiences identified and defined by the specialty nursing organizations.

MASTER'S PROGRAM COURSES:

Core Courses

N500, Theoretical Foundations of Nursing (3 cr. hrs.)
N504, Research in Advanced Nursing Practice (3 cr. hrs.)
N505, Health Policy and Advanced Nursing Practice (3 cr. hrs.)
N507, Emerging Role in Advanced Nursing Practice (3 cr. hrs.) *
PAPA 412/PAPA 420, SPSS/Quantitative Analysis (3/1 cr. hrs.)

* Advanced Nursing Role content for HCNA and NE students is integrated into their respective specialization courses.

Advanced Practice Core Courses

N501, Studies in Genomics and Ethics (3 cr. hrs.)
N510, Health Care Informatics (3 cr. hrs.)

- N513, Advanced Health Assessment & Practicum (4 cr. hrs.)
- N514, Advanced Human Physiology (4 cr. hrs.)
- N515, Advanced Human Pathophysiology (4 cr. hrs.)
- N516, Pharmacology for Advanced Nursing Practice (3 cr. hrs.)
- N517, Applications of Epidemiology in Advanced Nursing Practice (3 cr. hrs.)
- N520, Diagnostic Tests & Interpretation, and Procedures for Nurse Practitioners (3 cr. hrs.)

Master's Nursing Specialization Courses

- N529, Orientation to Nurse Anesthesia Practicum (2 cr. hrs.)
- N563, Pharmacology Related to Anesthesia (3 cr. hrs.)
- N564, Chemistry and Physics Applied to Anesthesia (3 cr. hrs.)
- N565a, Theoretical Foundations of Nurse Anesthesia I (5 cr. hrs.)
- N565b, Clinical Practicum in Nurse Anesthesia I (1 cr. hr.)
- N566a, Theoretical Foundations of Nurse Anesthesia II (5 cr. hrs.)
- N566b, Clinical Practicum in Nurse Anesthesia II (1 cr. hr.)
- N567a, Theoretical Foundations of Nurse Anesthesia III (5 cr. hrs.)
- N567b, Clinical Practicum in Nurse Anesthesia III (1 cr. hr.)
- N568a, Theoretical Foundations of Nurse Anesthesia IV: Clinical Correlations (2 cr. hrs.)
- N568b, Clinical Practicum in Nurse Anesthesia IV (4 cr. hrs.)
- N569a, Theoretical Foundations of Nurse Anesthesia V: Clinical Correlations (3 cr. hrs.)
- N569b, Clinical Practicum in Nurse Anesthesia V and Completion of Terminal Project (6 cr. hrs.)
- N571, Clinical Management of Adults in Primary Health Care I and Practicum (4 cr. hrs.)
- N572, Clinical Management of Adults in Primary Health Care II and Practicum (4 cr. hrs.)
- N573, Advanced Management of Women's Health and Practicum (3 cr. hrs.)
- N576, Advanced Management of the Pediatric Client & Practicum (3 cr. hrs.)
- N577, Advanced Practicum and Role Synthesis and Completion of Terminal Project (3 cr. hrs.)
- N580, Teaching and Learning Theory, Development and Socialization in Nursing Education (3 cr. hrs.)
- N581, Curriculum Theory, Design & Program Evaluation in Nursing Education (3 cr. hrs.)
- N582, Instructional Design, Assessment, & Evaluation for Nursing Education (4 cr. hrs.)
- N585, Synthesis of Teaching in the Nurse Educator Role and Completion of the Terminal Project (3 cr. hrs.)
- N586, Advanced Specialty Nursing Practice for Nurse Educators Seminar (3 cr. hrs.)
- N590, Organizational Theory and Behavior in Nursing (3 cr. hrs.)
- N591, Foundations for the Advanced Leadership Role in Health Care and Nursing Administration (3 cr. hrs.)
- N592, Finance and Budgeting in Health Care and Nursing Administration (3 cr. hrs.)
- N593, Management of Diverse Human Resources in Health Care and Nursing (3 cr. hrs.)
- N594, Synthesis of Health Care and Nursing Administration, Practicum and Completion of the Terminal Project (4 cr. hrs.)

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
GRADUATE MASTER'S PROGRAM IN NURSING
Nurse Anesthesia Full-Time Progression**

Classes are offered if a minimum enrollment of ten students is met. If your class is not offered for the semester shown on your progression sheet, a new progression plan will be required.

		Semester Hours	Post-Master's	Clinical Hrs. (Minimum)
Semester 1 (Summer Year One)				
Nurs 500	Theoretical Foundations of Nursing	3	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	<u>1</u>	**	
		7		
Semester 2 (Fall Year One)				
Nurs 514	Advanced Human Physiology	4	**	
Nurs 515	Advanced Human Pathophysiology	4	**	
Nurs 564	Chemistry and Physics Applied to Anesthesia	<u>3</u>	3	
		11		
Semester 3 (Spring Year One)				
Nurs 504	Research in Advanced Nursing Practice	3	**	
Nurs 513	Advanced Health Assessment & Practicum	4	**	90
Nurs 516	Pharmacology for Advanced Nursing Practice	<u>3</u>	**	
		10		
Intersession				
Nurs 529	Orientation to Nurse Anesthesia Practicum	<u>2</u>	2	90
		2		
Semester 4 (Summer Year Two)				
Nurs 563	Pharmacology Related to Anesthesia	3	3	
Nurs 565a	Theoretical Foundations of Nurse Anesthesia I	5	5	
Nurs 565b	Clinical Practicum in Nurse Anesthesia I	<u>1</u>	1	264
		9		
Semester 5 (Fall Year Two)				
Nurs 505	Health Policy and Advanced Nursing Practice	3	**	
Nurs 566a	Theoretical Foundations of Nurse Anesthesia II	5	5	
Nurs 566b	Clinical Practicum in Nurse Anesthesia II	<u>1</u>	1	512
		9		
Semester 6 (Spring Year Two)				
Nurs 507	Emerging Role in Advanced Nursing Practice	3	**	
Nurs 567a	Theoretical Foundations of Nurse Anesthesia III	5	5	
Nurs 567b	Clinical Practicum in Nurse Anesthesia III	<u>1</u>	1	512
		9		
Semester 7 (Summer Year Three)				
Nurs 568a	Theoretical Foundations of Nurse Anesthesia IV: Clinical Correlations	2	2	
Nurs 568b	Clinical Practicum in Nurse Anesthesia IV	<u>4</u>	4	440
		6		
Semester 8 (Fall Year Three)				
Nurs 569a	Theoretical Foundations of Nurse Anesthesia V: Clinical Correlations	3	3	
Nurs 569b	Clinical Practicum in Nurse Anesthesia V and	<u>6</u>	6	520
		9		
Total Credits		72	Varies by Individual	2,428 Hours

****Prerequisite or Co-requisite and/or approval by the Assistant Dean**

The Nurse Anesthesia Specialization is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs. Ongoing accreditation was awarded by the Council on Accreditation of Nurse Anesthesia Educational Programs in May 2002. The next accreditation review will be in 2009. There is no binding agreement between the student and the University and School of Nursing as to the nature of the enrollment contract. The University retains the right, opportunity, and privilege to update the curriculum using varying modes of instruction, change the standards for progression, adjust the tuition and fees and modify the credit hours and course requirements.

All nursing programs at SIUE are fully accredited by: Commission on Collegiate Nursing Education, Washington, D.C.

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
GRADUATE MASTER'S PROGRAM IN NURSING
Family Nurse Practitioner Part-Time Progression**

Classes are offered if a minimum enrollment of ten students is met. If your class is not offered for the semester shown on your progression sheet, a new progression plan will be required.

		Semester Hours	Post-Master's	Clinical Clock Hrs
Semester 1 (Fall Year One)				
N500	Theoretical Foundations of Nursing	3	**	
N514	Advanced Human Physiology	<u>4</u>	**	
		7		
Semester 2 (Spring Year One)				
N515	Advanced Human Pathophysiology	4	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	<u>1</u>	**	
		8		
Semester 3 (Summer Year One)				
N504	Research in Advanced Nursing Practice	<u>3</u>	**	
		3		
Semester 4 (Fall Year Two)				
N516	Pharmacology for Advanced Nursing Practice	3	**	
N517	Applications of Epidemiology in Advanced Nursing Practice	<u>3</u>	**	
		6		
Semester 5 (Spring Year Two)				
N507	Emerging Role in Advanced Nursing Practice	3	**	
N520	Diagnostic Tests & Interpretation, and Procedures for Nurse Practitioners	<u>3</u>	3	
		6		
Semester 6 (Summer Year Two)				
N513	Advanced Health Assessment & Practicum	<u>4</u>	4	90
		4		
Semester 7 (Fall Year Three)				
N505	Health Policy and Advanced Nursing Practice	3	**	-
N571	Clinical Management of Adults in Primary Health Care I & Practicum	<u>4</u>	4	90
		7		
Semester 8 (Spring Year Three)				
N572	Clinical Management of Adults in Primary Health Care II & Practicum	4	4	90
N576	Advanced Management of the Pediatric Client & Practicum	<u>3</u>	3	90
		7		
Semester 9 (Summer Year Three)				
N573	Advanced Management of Women's Health & Practicum	<u>3</u>	3	90
		3		
Semester 10 (Fall Year Four)				
N577	Advanced Practicum and Role Synthesis	<u>3</u>	3	270
		3		
	Total Credits	54	Varies by Individual	720 Hours

****Prerequisite or Co-requisite and/or approval by the Assistant Dean**

There is no binding agreement between the student and the University and School of Nursing as to the nature of the enrollment contract. The

University retains the right, opportunity, and privilege to update the curriculum using varying modes of instruction, change the standards for progression, adjust the tuition and fees and modify the credit hours and course requirements.

All nursing programs at SIUE are fully accredited by: Commission on Collegiate Nursing Education, Washington, D.C.

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
GRADUATE MASTER'S PROGRAM IN NURSING**

Health Care and Nursing Administration Part-Time Progression

Classes are offered if a minimum enrollment of ten students is met. If your class is not offered for the semester shown on your progression sheet, a new progression plan will be required.

		Semester Hours	Post-Master's	Clinical Hours
Semester 1 (Fall Year One)				
Nurs500	Theoretical Foundations of Nursing	3	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	<u>1</u>	**	
		7		
Semester 2 (Spring Year One)				
Nurs504	Research in Advanced Nursing Practice	3	**	
Nurs590	Organizational Theory and Behavior in Nursing	<u>3</u>	3	
		6		
Semester 3 (Summer Year One)				
Nurs505	Health Policy and Advanced Nursing Practice	<u>3</u>	**	
		3		
Semester 4 (Fall Year Two)				
Nurs510	Health Care Informatics	3	3	
Nurs591	Foundations for the Adv. Leadership Role in Health Care & Nursing Administration	<u>3</u>	3	
		6		
Semester 5 (Spring Year Two)				
Nurs592	Finance and Budgeting in Health Care and Nursing Administration	3	3	
Nurs593	Management of Diverse Human Resources In Health Care and Nursing	<u>3</u>	3	
		6		
Semester 6 (Summer Year Two)				
Nurs501	Studies in Genomics and Ethics	<u>3</u>	3	
		3		
Semester 7 (Fall Year Three)				
Nurs594	Synthesis of Health Care & Nursing Administration, Practicum	<u>4</u>	4	90
		4		
		Total Credits	35	Varies by Individual
				90

****Prerequisite or Co-requisite and/or approval by the Assistant Dean**

There is no binding agreement between the student and the University and School of Nursing as to the nature of the enrollment contract. The University retains the right, opportunity, and privilege to update the curriculum using varying modes of instruction, change the standards for progression, adjust the tuition and fees and modify the credit hours and course requirements.

All nursing programs at SIUE are fully accredited by: Commission on Collegiate Nursing Education, Washington, D.C.

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
GRADUATE MASTER'S PROGRAM IN NURSING**

Nurse Educator Part-Time Progression

Classes are offered if a minimum enrollment of ten students is met. If your class is not offered for the semester shown on your progression sheet, a new progression plan will be required.

Semester 1 (Fall Year One)		Semester Hours	Post-Master's	Clinical Hours
Nurs500	Theoretical Foundations of Nursing	3	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	<u>1</u>	**	
		7		
Semester 2 (Spring Year One)				
Nurs504	Research in Advanced Nursing Practice	3	**	
Nurs515	Advanced Pathophysiology	<u>4</u>	**	
		7		
Semester 3 (Summer Year One)				
Nurs505	Health Policy and Advanced Nursing Practice	<u>3</u>	**	
		3		
Semester 4 (Fall Year Two)				
Nurs516	Advanced Pharmacology	3	**	
Nurs580	Teaching and Learning Theory, Development and Socialization In Nursing Education	<u>3</u>	3	
		6		
Semester 5 (Spring Year Two)				
Nurs581	Curriculum Theory, Design & Program Eval. in Nursing Education	3	3	
Nurs582	Instructional Design, Assessment & Evaluation for Nursing Education	<u>4</u>	4	
		7		
Semester 6 (Summer Year Two)				
Nurs586	Advanced Specialty Nursing Practice for Nurse Educators: Seminar	<u>3</u>	3	90
		3		(Proposed)
Semester 7 (Fall Year Three)				
Nurs585	Synthesis for Teaching in the Nurse Educator Role (1 hour practicum, 2 hour didactic)	<u>3</u>	3	90
		3		
		Total Credits	36	Varies by Individual
				180

****Prerequisite or Co-requisite and/or approval by the Assistant Dean**

There is no binding agreement between the student and the University and School of Nursing as to the nature of the enrollment contract. The University retains the right, opportunity, and privilege to update the curriculum using varying modes of instruction, change the standards for progression, adjust the tuition and fees and modify the credit hours and course requirements.

All nursing programs at SIUE are fully accredited by: Commission on Collegiate Nursing Education, Washington, D.C.

POST MASTER'S CERTIFICATE

Those who hold a prior master's degree in nursing may apply for admission to a post-master's certificate program in any of the available nursing degree specializations. The requirements for completion of the certificate program vary by specialization, but generally include the specialization courses, electives, and additional courses as appropriate for the respective certification areas. The graduate program nursing academic advisor can provide current information on the requirements for the post-master's certificates or you can find this information at <http://www.siu.edu/nursing/academic/index.shtml>. Credit hours vary according to specialization, please see Progression Plans.

DUAL SPECIALIZATIONS

The student choosing to complete a dual specialization must complete a second Graduate School application to add the second specialization and submit it to the University Graduate Admissions Office.

Each student must meet all of the course/clinical requirements for each specialization chosen and the Graduate School's requirements prior to being permitted to graduate unless approved by the Assistant Dean for Graduate Programs.

The student will be expected to complete all requirements for the Degree within the time defined in the University Graduate Catalog.

SECTION VI

COURSE RELATED INFORMATION

FACE-TO-FACE, WEB ENHANCED, HYBRID AND ONLINE COURSE FORMATS

Some graduate courses are offered in the traditional face-to-face classroom format. Many are being offered through Blackboard (SIUE's course management system) as web enhanced, hybrid or online course formats. It is essential that the student plans for computer and internet access appropriate to the course.

- Web Enhanced Courses: Uses Blackboard to make some of the resources for the students available on the web.
- Hybrid Courses: Combines classroom and online lessons using Blackboard.
- Online Courses: Provides 80% or more of the course sessions online and the remainder in the classroom.

If students are unsure of the planned format of the course, they should contact the faculty assigned to teach the course.

HARDWARE AND SOFTWARE RECOMMENDATIONS

All graduate students should have a computer with soundcard, webcam, printer, and headset (defined as microphone and headphones) to access email, CougarNet, Blackboard, Wimba, and course paperwork. Computers may be a desktop or a laptop based on personal preference. We recommend a fast processor, at least 2 gigabytes (GB) of random access memory (RAM), and over 40 GB free disk space. An internet service provider (ISP) is required and can be hardwired, wireless, or satellite. A CD/DVD ROM may be useful; however, more software/applications are now available as direct downloads. A USB flash drive may be helpful for back-ups and bringing presentations to class. However, all students have access to a virtual hard drive via Blackboard (located under the "My Content" tab of Blackboard). Software should include:

- a word processing program that is compatible with Microsoft Word
- a presentation software program, such as Power Point or Keynote
- antiviral software if using personal PC
- free software such as Quicktime, RealPlayer, etc...

Nurse practitioner and nurse anesthesia students should have a pocket-sized mobile device (cellphone, PDA, or iPod) for clinical practicum experiences that has access to drug information. Other valuable applications are available that would be beneficial. Cell phones may **NOT** be used for personal phone calls and texting during practicum experiences.

The Information Technology Services (ITS) is the department on campus that can help with connectivity issues or troubleshooting other problems. They can be reached at 618-650-5500. Additional ITS information is available at <http://www.siu.edu/its/students/index.shtml>. If you have any technical problems with services offered by ITS, please contact them.

If you have any technical concerns or problems, please contact Dr. Kathy Ketchum, kketchu@siue.edu, 618-650-3936.

COURSE REGISTRATION PROCESS

A list serve email is sent to all graduate students informing them of the enrollment period for the next semester(s). **Students are responsible for initiating the actual registration process**

with the Graduate Academic Advisor. If the student wishes to continue to enroll according to the signed progression plan in his/her file, he/she must obtain an enrollment pin number from the graduate advisor for every enrollment period or request that the Advisor enroll him/her in the specific courses listed on the progression plan. If error messages occur while registering, please notify the Graduate Academic Advisor.

No student will be allowed to register if any health/certification requirements are outstanding (See Section VII). If a student becomes non-compliant after registration has occurred, they may be dropped from their classes by the Graduate Academic Advisor.

If you wish to make changes to your progression plan, you must contact the Graduate Academic Advisor and the Assistant Dean for Graduate Programs to request approval of such a change. ANY CHANGE IN THE STUDENT PROGRESSION PLAN MAY RESULT IN THE STUDENT LOSING THE POSITION IN HIS/HER ENROLLMENT COHORT OF STUDENTS AND DIFFICULTY / INABILITY TO COMPLETE THE PROGRAM. Class sizes, class availability, and/or pre-requisites may prohibit changes to your progression plan.

For instructions on how to self-register, please refer to the registrar's website at <http://www.siu.edu/registrar>, under Ready to Register, click on power point presentation or html version.

DROPPING COURSES

All graduate students must notify the Graduate Academic Advisor in the School of Nursing prior to dropping any course. The University policy on grades assigned to dropped courses as outlined in the SIUE 2010- 2011 Graduate Catalog will be adhered to. After the start of the semester, all withdrawals/drops must be conducted through the Service Center, in writing. During Fall and Spring semesters, drops during weeks 6-8 require the signature of the instructor and the Graduate Academic Advisor. After week 8, no drops or withdrawals are allowed. Please check Summer deadlines as they may vary according to the course.

COURSE FEES

Additional course fees assigned to the nursing courses range from \$0.00 to \$4,600.00 per semester. Course fees are evaluated annually in March by the Department Chairs and the Assistant Dean for Graduate Programs. Recommendations are conveyed to the Dean of the School of Nursing on the adjustment of fees. This recommendation is forwarded to the Board of Trustees through the Provost and Chancellor for approval prior to implementation of the fee change.

COURSE SYLLABI

Graduate students are either given course syllabi for graduate nursing courses at the first class session or they can retrieve syllabi from Blackboard.

Occasionally, graduates of our programs contact the school requesting copies of syllabi from courses that they completed during their enrollment here. The School of Nursing is unable to maintain, over the years, copies of the syllabi for all of the courses. It is the responsibility of students to maintain copies of their course syllabi as they progress through the graduate program and after graduation for any future needs. The School of Nursing maintains current syllabi only.

TEXTBOOKS

Books for graduate courses may be purchased in person or online (<http://www.siu.edu/muc/bookstore.shtml>) through the SIUE Campus Bookstore or at Matthews Bookstore, Springfield, Illinois. Textbooks are usually available 2 – 3 weeks prior to the first day of the semester.

REQUESTING CLINICAL PRECEPTORS AND CLINICAL PRACTICUM SITES

Clinical site and clinical preceptor requests are made by students in all nursing majors except by those students enrolled in the Nurse Anesthesia specialization courses. However, Nurse Anesthesia students will request sites for N513 – Advanced Health Assessment & Practicum. The guidelines and forms related to this process are available in Section XI: FORMS of this handbook (under the label “Clinical Preceptor Forms”) or online at http://www.siu.edu/nursing/currentstudents/graduate/clinical_information.shtml. If you have questions regarding the content or completion of the aforementioned, please contact Sheri Compton-McBride, Director of Clinical Acquisition in the School of Nursing at (618) 650-3341 or shcompt@siue.edu. All forms must be sent to Ms. Compton-McBride 3-6 months in advance of the clinical practicum.

PROFESSIONAL LIABILITY INSURANCE

Professional liability insurance is provided at no direct cost to the student, by the University, for all graduate nursing students while participating in clinical experiences and under the general supervision of an SIUE employee to meet the requirements of the educational program in nursing.

This coverage is effective only for University-related functions within the scope of the nursing program. If a student performs outside nursing care or employment, she/he should consult her/his own employer for their requirements. Students who work for pay for any health agency may need to obtain malpractice insurance at their own expense.

GRADING SCALE

The Graduate Program in Nursing will use the following grading scale:

93 - 100%	A
86 - 92%	B
76 - 85%	C
70 - 75%	D
Below 70%	F

GRADE INFORMATION

University Grade reports are available to students at the end of each semester via CougarNet. Individual faculty may report grades to students in a manner that protects confidentiality. Secretaries are not permitted to report grades to students.

INCOMPLETE GRADES

The purpose of granting a grade of “Incomplete” (I) to a student is to provide the student with additional time to complete the requirements for a course that could not be completed during the semester. **IT IS THE STUDENT’S RESPONSIBILITY TO REQUEST A GRADE OF “INCOMPLETE” AND THE FACULTY MEMBER’S RIGHT TO EITHER APPROVE OR DENY THE REQUEST.**

If a grade of “Incomplete” is granted, it is the responsibility of the student to negotiate with the faculty member the date by which the remaining coursework must be completed and submitted to the faculty member. This information must be documented and signed on the “Incomplete Form” which is available from the Graduate Student Advisor or the Graduate Program Secretary. Unless the instructor has specified a shorter period of time, an incomplete grade which is not completed within one year will automatically be changed to an “F”. It is the student’s responsibility to meet/communicate with the faculty member and sign the “Incomplete” form concerning stipulations of the “Incomplete” grade. This completed and signed form must be submitted to the Assistant Dean for Graduate Programs for signature, and will be placed in the student’s file.

INDEPENDENT STUDY

An independent study may be requested by a student, and is initiated by the student in consultation with a faculty member with expertise in the student’s area of interest. The student and faculty member negotiate the objectives, content, course requirements, and grading criteria, and number of credits (not to exceed 3 credit-hours). The student must obtain the “Independent Study” form from the Graduate Student Advisor, complete the form, and submit it to the faculty member for approval and signature. It is then submitted to the Graduate Student Advisor and to the Assistant Dean for Graduate Programs for final approval.

The form must include the objectives for the independent study as well as the course activities, grading criteria, and outcomes to achieve the objectives. After the Assistant Dean for Graduate Programs approves the plan, the student may enroll in NURS 598 (Independent Study) for no more than three (3) hours credit. Copies of the approved independent study form are made for the student and the faculty member and a copy is placed in the student file.

WRITTEN WORK OF STUDENTS

Any written work submitted as a part of class assignments or Master’s Terminal Project to the School of Nursing will become the property of the School of Nursing and may be used for program evaluation purposes.

MASTER’S TERMINAL PROJECT GUIDELINES (For students admitted prior to 2011)

All graduate students seeking a Master of Science degree in nursing must successfully complete the following requirements according to the deadlines posted on the School of Nursing website. The components of a graduate project include:

- Preparation of a manuscript suitable for publication. While the manuscript must be of publishable quality, it does not need to be submitted or accepted for publication for the student to graduate. Prior to developing the content, the student must choose committee

members to guide manuscript development and serve as reviewers. The manuscript will demonstrate the student's integration of theoretical and/or clinical knowledge and expertise. See Section I for detailed guidelines.

- Oral presentation of the manuscript using a Power Point presentation. Once the student has successfully completed the manuscript, the student will give an oral presentation of the manuscript at the SIUE School of Nursing Master's Terminal Project Presentation Day. Project Presentation Day is scheduled at the end of each semester approximately two weeks before commencement. Students will be required to complete an Exit Evaluation packet at this time. See Section II for detailed guidelines.

I. Choosing Committee Members and Manuscript Development

A. Choosing the Project Committee Members

1. Students will select a project chair who is on faculty at the School of Nursing and who holds permanent graduate faculty status. Project chairs work closely with students in the development of manuscripts and serve as the main reviewers of the multiple manuscript drafts. Students are encouraged to select a project chair with advanced knowledge of, or who has conducted research on the topic the student has chosen. While project chairs do not have to be in the same specialization as the student, they should share similar interests. Students must select a project chair during the first year in the master's program to ensure sufficient time for project completion. The project chair should sign the pink Master's Terminal Project card that the student obtains from the graduate secretary. This card must be on file by the end of the first year in the program. Because faculty members are typically on many committees, students are encouraged to contact their desired project chair early.
2. Students should also select a reader who will review the manuscript drafts and provide feedback. The reader must have permanent or temporary graduate faculty status. Choosing a reader with expertise in the topic is encouraged. The reader also signs the pink Master's Terminal Project card.

B. Choosing a Manuscript Topic.

Students are encouraged to select a topic of interest to them that would add to the body of nursing knowledge within their specialty area. The final topic selected should be approved by both the project chair and the reader.

C. Selection of the Journal/Query Letter

With the assistance of project chairs and readers, students must select one journal for submission of the manuscript, using the journal's "author's guidelines" for manuscript preparation. In collaboration with the project chair, students should compose a query letter to the editor of the chosen journal if the manuscript is being submitted. See attached sample query letter.

D. Manuscript Deadlines

1. All deadlines for graduate project submissions are posted on the School of Nursing (SON) website (<http://www.siu.edu/nursing/>) under Current Students → Graduate → Project Presentation Day. The student should discuss deadlines with the project chair and develop a schedule for submission of the required materials. Occasionally, faculty members' responsibilities take them off campus near the time of the posted

deadlines. Therefore, it may be necessary for the student to submit the manuscript earlier than the posted deadlines. Failure to meet manuscript deadlines will delay graduation.

2. Students must be prepared to submit repeated manuscript drafts to the project chair and reader. The project chair will determine when the manuscript can be submitted to the reader. The final draft of the manuscript must be received by the project chair and reader by the posted deadlines or the student will be unable to graduate.

E. General Manuscript Guidelines

Manuscript topics should reflect an area of interest in the student's specialization and be approved by the project chair and reader. Types of manuscripts may include, but are not limited to: a concept analysis, a clinical topic, a policy analysis, a report of a small research/quality improvement project, or a manuscript on administration or teaching strategies. Whatever the topic, the manuscript should reflect the integration of knowledge from the graduate program through a thorough analysis and critique of the existing literature.

1. The format of the manuscript must follow the author's guidelines for the selected journal, especially editorial format and manuscript length.
2. Students should begin the outline for the manuscript and bring it to the Writing Center to obtain guidance prior to starting the actual writing (unless this requirement is waived by the project chair). The staff at the Writing Center will help students in all phases of the writing experience, but they will not proofread or edit the manuscript. Instead, Writing Center staff will assist students understand their weaknesses and build on their strengths so that the student can produce a polished manuscript. Students who are off-campus can contact the Writing Center for assistance with distance learning; however, going to the Writing Center physically will most likely result in more direct assistance.

F. Manuscript Drafts

1. The initial manuscript draft should be submitted to the project chair one year prior to the expected date of graduation. Students should allow faculty a 2 to 3 week turn-around time on all drafts. Submission of the manuscript to the reader is negotiated at the beginning of the process with the project chair and the reader.
2. Students use the feedback received from the project chair and reader to revise the manuscript.

G. Final Manuscript

1. Students may submit the manuscript to the editor of the selected journal at the discretion and approval of the project chair.
2. Three copies of the final manuscript should be provided by the student, one to the project chair, one to the reader, and a file copy to the graduate program secretary (which should be provided via email).
3. The student should provide the committee members with the final draft of the manuscript by April 1, July 1, or November 1, depending upon the semester of graduation, to be eligible for graduation.

H. Academic Integrity.

The School of Nursing's Graduate Program policy on academic integrity will be followed. Please refer to the Policy Section of this School of Nursing Graduate Program Student Handbook.

I. Student/Faculty Authorship

The student will retain the rights to be the first author on the submitted manuscript. If the project chair and/or reader had minimal input into the writing and editing of the document, the student should be the sole author. If the project chair and/or reader provided original writing and/or new material within the manuscript, then the faculty member(s) may be listed as the second author(s). Editing of the manuscript by the faculty member does not qualify for joint-authorship.

II. **Oral Presentation of the Master's Terminal Project**

A. Project chairs approve student participation in the Master's Terminal Project Presentation Day.

B. The following information should be emailed to the SON Graduate Program Secretary according to deadlines posted on the School of Nursing website or presented via email:

1. The **Master's Terminal Project Abstract Form** (available from the Graduate Program Secretary). This form includes the student's name, graduate program specialization, the names of project chair and the reader, and the manuscript **abstract**. The abstract form must be approved by the Project Chair and should be electronically submitted at least two weeks prior to the Master's Terminal Project Presentation Day.
2. The student's **Power Point presentation** of the graduate project (see below). The power point presentation must be approved by the project chair and should be submitted electronically at least one week prior to the Master's Terminal Project Presentation Day.

C. Preparation of the Power Point Presentation

1. The presentation should be developed in collaboration with the project chair.
2. The final set of slides should be approved by the project chair.
3. The presentation is limited to 15 minutes, with five minutes for questions and answers. Power point presentations usually contain 15-20 slides.

D. Presentation Day

1. The computer and projector for the presentation will be supplied. The student's presentation will be loaded onto a computer by a SON representative.
2. The student's attire should be business professional.
3. The student may provide optional handouts for the audience.
4. Students are encouraged to invite family, friends, and colleagues.
5. Students may give a brief acknowledgement during the presentation to their mentors, faculty, family, and colleagues who supported them as they attained their degree(s).
6. Students will receive a packet of Exit Evaluation Forms. Students who fail to complete and return the exit evaluation forms will not be allowed to graduate on the planned date. The exit evaluation forms should be completed by the student and returned to the graduate program secretary immediately following the student's presentation. Final graduation approval will not be sent to the Graduate School until these forms are received by the Graduate Secretary.

III. Helpful Tips for Writing the Manuscript

A. Form.

1. Format - margins, spacing, abbreviations, pagination, footnotes, quotations, and other details should be consistent with APA (latest edition) or the format of the journal to which the student chooses to submit. References should be appropriate, accurate, and written in correct APA format.
2. Grammar - appropriate professional terminology, complete sentence structure, congruent verb tenses, proper punctuation, correct spelling, and clarity.
3. Idea Development - the degree of discussion devoted to the specific sections of the manuscript is appropriate (e.g., introduction, review of the literature, discussion, conclusion).
4. Organization - the manuscript flows logically from the introduction to the summary. Subheadings must be used. A summary must be included, and the internal organization of the manuscript must be consistent with sections as listed.
5. Appearance – typed double-spaced, with appropriate cover page, reference list, and any appendices.

B. Resources.

1. Journal Articles - students may be asked to provide a copy of each journal article, book chapter, or electronic document cited in the manuscript. These copies will **not** be returned to the student.
2. Diversity of Resources - a variety of pertinent scholarly nursing, psychiatric, allied health, and other literature must be included. For some topics, health industry trade magazines may be appropriate resources (e.g., "Hospitals and Healthcare Networks"). For a policy analysis manuscript, lay literature, such as newspapers and weekly news magazines may be appropriate resources since the latest legislative information may not appear in the professional literature for three to six months because of publication lags. Personal interviews must be noted as to the qualifications of the person(s) interviewed and must be appropriate and experts on the topics. Interviewees and/or references must be recognized by faculty as acceptable.
3. Internet References - internet references are kept to a minimum and if used, come from a scholarly (as appropriate) and reputable source (e.g., government agencies such as the CDC or NIH, professional nursing organizations, internet journals). Personal webpages and product websites (e.g., drug companies, equipment vendors) are not appropriate.
4. Current – refrain from using literature over five years old unless it is a "classic," original work upon which other concepts or theories are based (e.g., Nightingale's "Notes on Nursing") or if writing on an historical topic.
5. Adequacy – Approximately 20 to 30 references are recommended for the graduate project. An excessive number of references (40-50) is not acceptable for a manuscript that usually does not exceed 12-17 pages. Journal guidelines may provide more specific guidelines for the number of references allowed.

C. Content.

1. Title – should be clear, concise, and descriptive;
2. Abstract – should be specific, representative of the manuscript, and in the correct format.

3. Introduction - defines specific topic precisely enough to allow in-depth coverage, explains rationale for selecting the topic (including its applicability to nursing), and delineates subjects areas to be discussed in the manuscript.
 4. Review of the Literature.
 - a. Citations should be less than five years old, except when citing classics or historical information. Students should provide precise information pertinent to subject area under discussion. The literature review should provide enough background information to adequately describe the topic under discussion. Review includes enough data and discusses a full and sufficient variety of view-points to validate the conclusion. Current literature from nursing and related fields must be included. Tables and figures compliment the text, as appropriate.
 - b. Inclusion and discussion of relevant research as it pertains to the topic. The student is expected to place an emphasis on articles that report on evidence-based practice. The synthesis and interpretation of research is accurate.
 - c. Direct quotations will be used sparingly.
 5. Discussion.
 - a. Presents a clear, concise analysis of the problem as it relates to nursing by synthesizing clinical experiences, personal experiences, didactic content, etc.
 - b. Demonstrates knowledge and understanding of the topic under discussion by realistically identifying implications for action related to client, self, nursing, and other professionals. Identifies strategies for change, professional issues involved, and strategies to address the issues.
 6. Conclusion - presents a concise and accurate condensation of relevant elements from both resource data and discussion segments of the manuscript. Itemized major suggestion, changes, and recommendations from the rationale for the manuscript and as inferred by the body of the manuscript.
- D. Originality.
The information should be current and useful to the reader with material presented in a creative manner.

07/24/07 Ad Hoc Committee, Graduate Master's Terminal Project
09/24/07 Graduate Curriculum Committee
10/1/07 Faculty Council
2/8/08 Faculty Council (journal submission changes)

MASTER'S TERMINAL PROJECT SAMPLE QUERY LETTER

May be sent as an email or as an attachment to an email to the editor

Check the journal's online information to ensure that the correct name of the editor is used.

Date

Editor name

Editor, Name of Journal

Address

(Include the above information only if query letter is sent as an attachment to an email.)

Dear Dr. XXXX or Ms./Mr. XXXX:

I am preparing a manuscript for that may be appropriate for publication in (journal name). The title of the manuscript is (title). This manuscript (brief description of the content to be covered). I believe that this will be an important manuscript for (target audience, e.g., educators, managers or nurse practitioners) because (why will this publication be important).

I have attached a preliminary abstract of the manuscript for your review. ***(only should be 3-5 sentences since the manuscript is not completely written)*** I look forward to your reply and would appreciate any suggestions or guidance you can offer.

Sincerely,

Student name

Home address

Telephone number

Email address

Approved by Faculty: 5/7/07

Change of Committee Members

If the student should need to change membership of the committee, the student should take the following steps:

1. If the individual being requested to step off the committee is not the Chair, the student should confer with the Chair before proceeding to step 2.
2. The student should meet with the faculty member involved and request the change, explaining the rationale for this request. If the faculty member agrees, the name should be changed on the Electronic Terminal Project Committee Form in the student file.
3. If the faculty member does not agree to step off the committee, the student may submit a written appeal to the Assistant Dean for Graduate Programs who will take the request to the Graduate Student Affairs Committee for final decision.

Master's Terminal Project

Master's Electronic Portfolio, Final Course Synthesis Project, and Oral Presentation (for Students who begin Master's programs beginning in 2011)

Graduate students in the School of Nursing demonstrate synthesis of their coursework and educational experiences and attainment of the master's student outcomes in three ways: (1) an electronic portfolio developed throughout the program, (2) a synthesis project, completed in the specialization synthesis course in the final semester, and (3) a final oral presentation, offered to faculty and students, in a formal conference setting.

- 1) **Electronic Portfolio** – Working with a faculty chairperson, students begin development of an electronic portfolio during the first semester of course work and make submissions every semester throughout the program. At the end of each semester, students submit a structured reflection (approximately 5 pages) that demonstrates their progress toward meeting the master's student outcomes. Portfolio entries include electronic submissions of significant works from their semester's courses (e.g. papers, projects, or personal/practicum experiences) that give evidence of student development and learning. In the final semester reflection, students summarize their overall achievement of the master's student outcomes. The portfolio does not carry course credit, but instead provides faculty members and learners with an opportunity to track students' professional formation and growth in their advanced nursing practice roles. For program assessment purposes, the chairperson evaluates the progress of the student in meeting the master's student outcomes each semester (formative assessment) and achievement of the outcomes in the final semester of the program (outcome assessment). The portfolio is evaluated using ratings of "exceeds expectations," "meets expectations," or "does not meet expectations."
- 2) **Synthesis Project** – In the final semester of study, all graduate nursing students take a specialization synthesis course in which they complete a synthesis project appropriate for the specialization. The course faculty member grades the synthesis projects using a point-based rubric that incorporates the master's student outcomes. Project grades are calculated into the final course grade. The projects provide students with an opportunity to create a rigorous, scholarly product that incorporates a broad review of the literature from nursing and related fields.

- 3) Oral Presentation – In the last semester of the program, students provide an oral presentation to students and faculty at the formal SON Presentation Day conference. The presentation describes their growth, professional formation, and attainment of master's student outcomes and includes information about their final synthesis project, citing appropriate scholarly references. For purposes of program assessment, unbiased faculty volunteers will evaluate the oral presentations using an established rubric based on the master's student outcomes.

Faculty Responsibilities

1. The Assistant Dean for Graduate Programs ensures that each student selects a chairperson during the first month after entry into the program. A list of graduate faculty areas of expertise is available to all students. The Assistant Dean makes every effort to ensure an equitable distribution of students among faculty, taking into consideration the student's area of interest and mentor availability.
2. The chairperson meets with the student 2 to 3 times per semester to assure progress in portfolio development. The chairperson validates documentation towards the attainment of the master's student outcomes by reviewing the documentation in the portfolio, including electronic evidence (e.g. significant course papers, projects, or personal/practicum experiences) and the student's reflections that indicate how the outcomes were achieved through course learning activities. The chairperson notifies the student in writing if more detailed explanations are needed. If the portfolio is not completed each semester, the faculty member will notify the Assistant Dean for Graduate Programs who will counsel the student.
3. The chairperson provides guidance in critical thinking, reflective learning, and learning synthesis and helps students produce a meaningful portfolio that reflects attainment of master's student outcomes. Faculty members in the SON are familiar with portfolio development as professional portfolios have been used successfully for the undergraduate program Senior Assignment for several years.
4. Faculty members in the final specialization courses develop a project assignment that uniquely reflects the key characteristics of advanced nursing roles of their specialization. The students complete the project and are graded using the rubric designed for that specialization assignment.
5. In the student's last semester of the program, the chairperson will verify student readiness to graduate, along with the Assistant Dean for Graduate Programs. The students are then invited to present a formal presentation about their learning journey and final synthesis project at Presentation Day. All faculty and graduate students are invited to attend and participate in the presentation.

Student Responsibilities

1. Initiate contact (email, face to face, Skype, or phone) with chairperson at planned intervals throughout program, preferably 2 to 3 times per semester.
2. Develop an electronic portfolio documenting growth and synthesis of knowledge throughout the program. The portfolio must contain more than just the "raw data" accumulated in course work. That is, students must reflect on how course/practicum

work helps them meet program outcomes, provide exemplars of pivotal learning moments, identify achievements and growing edges in their professional formation, and give evidence of synthesized learning in their reflection narratives. Students also include references to scholarly source documents that aided their learning that semester.

3. Develop a final synthesis project as directed by the faculty member teaching the final synthesis course. Students use their individually designed projects to demonstrate end-of-program knowledge, skill, and professional development as advanced nursing practice students.
4. Initiate meeting with chairperson in final semester to discuss content for the 20-minute final oral presentation (15 minutes with 5 minutes question and answer session) describing how the student has transformed throughout the program, citing specific examples of meeting the master's student outcomes. Students will also prepare a final portfolio reflection (approx. 5 pages) that addresses their formation and growth through the entire program and their achievement of the master's student outcomes.

Contents of Electronic Portfolio

The electronic portfolio is located on the Blackboard Course Management System and should contain the following:

1. Curriculum vita
2. Semester and Final Program Reflections
 - A. Developed based on progress towards meeting the master's student outcomes.
 - B. Reflect knowledge, experiences, and values based on coursework, assignments, practicum experiences, and discussions with healthcare professionals.
3. Selected coursework and practicum assignments
4. Electronic Portfolio Evaluation Form

Approved by SON Faculty 1/5/11

**Southern Illinois University Edwardsville
School of Nursing**

Master's Electronic Portfolio Evaluation of Reflections Rubric

FM – Fails to Meet Expectations, M – Meets Expectations, EE – Exceeds Expectations

(Some outcomes may not be addressed each semester. Areas under Master's Student Outcomes are just examples.)

Student Name: _____ **Specialization:** _____

<u>Master's Student Outcomes</u>	Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	Sem 6	Sem 7	Sem 8	FINAL
Use evidence to synthesize, refine, and evaluate care. - Evaluates and includes appropriate references. - Appropriate analysis & synthesis of information, constructs valid inferences and conclusions.									
Assume advanced nursing practice roles. - Appraises advanced nursing role of specialization. - Formulates individual advanced nursing role expectations. - Evaluates how advanced skills in specialty area have improved based on new knowledge. - Evaluates application of advanced nursing skills in practicum settings.									
Demonstrate effective communication skills. - Uses effective oral communication, computer skills, and written assignments. - Identifies own communication skills for continuing improvement.									
Provide and advocate for culturally congruent care. - Values differences among diverse populations. - Selects actions that could improve care for culturally diverse individuals, families, and communities. - Analyzes methods for advocating for quality health care for all. -Collaborates effectively with members of a diverse workforce.									

<u>Master's Student Outcomes</u>	Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	Sem 6	Sem 7	Sem 8	FINAL
Model and facilitate ethical decision making/practice. - Appraises ethical decisions in complex situations in practicum and classroom situations.									
Influence policy development and implementation. - Analyzes policy issues related to specialization. - Selects areas in need of policy development. - Exhibits political activism by advocating for individuals, families, communities, or institutions.									
Provide EBP care with interdisciplinary collaboration. - Evaluates APN provision of care specific to specialization. - Appraises own delivery of direct or indirect care and selects areas for improvement. - Explains collaborative efforts involved with providing care appropriate to the advanced role specialty in the practicum setting. -Analyzes strategies for incorporating EBP and collaboration into teaching.									
Evidence of Integrated Learning - Provides evidence (course papers, projects, reflections) and describes how course work and clinical experiences contribute to APN role formation. -Articulates how key references and source documents have shaped learning and role formation.									
Overall Portfolio Development - Materials well-organized and creatively reflective of increasing complexity and depth of learning.									

OVERALL ASSESSEMENT OF ELECTRONIC PORTFOLIO:
 (Complete overall assessment in final semester. Send information to Grad Secretary.)

- Fails To Meet Expectations**
- Meets Expectations**
- Exceeds Expectations**

Faculty Signature: _____

Date: _____

GRADUATION REQUIREMENTS

Each candidate for the Master of Science degree in nursing or a Post-Master's Certificate in Nursing is required to meet University and School of Nursing specialty credit hour requirements.

At the end of each semester, a Project Presentation Day is scheduled; graduating students are required to present their work to faculty and students and to respond to questions from the attendees. During this event, graduating students will receive a packet of evaluation forms which must be completed and returned to the Graduate Program Secretary.

FINAL APPROVAL FOR GRADUATION

It is the student's responsibility to provide the required copies of the completed project by the appropriate deadline. The student should provide one photocopy each to the chairperson and the committee member(s) and an electronic copy should be sent to the Graduate Program Secretary . Upon receipt of all completed evaluation forms, the Graduate Program Secretary will forward all necessary paperwork to the Graduate School. **GRADUATION PAPERWORK WILL NOT BE SUBMITTED TO THE GRADUATE SCHOOL UNTIL ALL OF THESE REQUIREMENTS ARE MET.**

SECTION VII
PROFESSIONAL NURSING REQUIREMENTS AND
VERIFICATIONS

PROFESSIONAL NURSING REQUIREMENTS AND VERIFICATION

The School of Nursing has enlisted the help of an outside agency, CastleBranch, Inc. (CBI) to process our criminal background checks and drug tests and to keep track of our health-related requirements for all new students. All fees for these services are the responsibility of the student. Students will need to complete the “**Background Check Package**” with CBI no later than the due date specified in their admission packet. The package includes all of the following:

- Criminal Background Check
- Certified Drug Test
- Immunization Tracker (Magnus Health Portal) which includes:
 - o Physical exam with Urinalysis and Medical History
 - o Immunization History
 - o TB Skin Test
 - o Health Insurance Form and Card
 - o CPR with AED
 - o ACLS & PALS certification (CRNA students only)
 - o Unencumbered Illinois and Missouri RN licenses (only CRNA and Edwardsville FNP students must submit Missouri licenses)
 - o Unencumbered Out of State or Advanced Practice RN licenses (if applicable)

In Fall semesters, the Immunization Tracker will also include an annual flu vaccine.

Each new student receives a Student Instruction Card with their admission letter describing the CBI login process. After logging in, information will be provided on how to order the package. When ordering the package, SIUE email addresses **must** be used. The package code for the appropriate specialization is located on the bottom of the Student Instruction Card. Please be diligent about keeping track of usernames and passwords. If lost, students will be responsible for contacting CBI directly since the School of Nursing does not have access to this information. Usernames and passwords will be needed throughout the program to view background check and drug screen information and for continued access to student’s Health Tracker accounts so that required documents and updates can be added throughout the program.

Criminal Background Check

CBI will perform a criminal background check after the order is placed. Complete instructions as well as a “Demo” are available on the website.

Drug Test

The Background Check Package contains a drug test. Students will register for the drug test by emailing required information to CBI (instructions are provided on the site). A confirmation email from CBI will be sent along with a separate email containing a Chain of Custody form which must be taken to the appropriate lab facility. The name and address of the closest facility will be supplied in the registration email. If the Chain of Custody form is misplaced and the registration email cannot be accessed, the student must contact CBI Customer Service.

Contact Information for Certified Background Check:

www.Certified Background.com

Customer Service: (888) 666-7788 ext. 1
customerservice@certifiedbackground.com

Billing: (888) 666-7788 ext. 4
billing@certifiedbackground.com

Immunization Tracker (Magnus Health Portal)

All information on immunizations, physical exam, insurance, licenses and certifications will need to be uploaded, by their respective due dates, into the Magnus Health Portal. At the end of the background check order process, students are prompted to go to the Magnus Health Portal secure website to create an individual "Immunization Tracker." Instructions for uploading records are provided after logging in to the Magnus website.

The Immunization Tracker (Magnus Health Portal) includes:

- Physical exam dated within 1 year of program start (form available on the website).
- Medical History (form available on the website)
- Immunization History (Included on Physical form)
 - Rubeola (Measles or Red Measles): 2 vaccinations **OR** a titer showing immunity **OR** date of disease verified by a physician. **A copy of the lab report for the titer is required.**
 - Mumps: 2 vaccinations **OR** a titer showing immunity **OR** date of disease verified by a physician. **A copy of the lab report for the titer is required.**

- Rubella: 2 vaccinations **OR** a titer showing immunity **OR** date of disease verified by a physician . **A copy of the lab report for the titer is required.**
 - Rubella Antibody Titer (3-day German Measles): **A copy of the lab report is required.**
 - Varicella Antibody (IGG) Titer: **A copy of the lab report is required.** If you received 2 Varicella vaccinations within the last 3 months you are exempt from needing the titer, but you must provide proof of vaccination.
 - Hepatitis B Vaccination: 3 doses or an antibody titer showing immunity. If you have recently completed the Hep B series you must have a titer drawn 1-2 months after the 3rd shot and the titer must show immunity. You must complete the first and second shots (spaced 1 month apart) prior to beginning your program. This allows temporary clearance. All 3 shots must be completed by the end of the second semester of attendance. **A copy of the lab report is required.**
 - Tetanus/Diphtheria/Pertussis (TDAP). Submit documentation of vaccination within the last 10 years. Must be updated every 10 years.
- Tuberculin Skin Test (PPD/Mantoux). Please use the following guidelines in completing the TB Test:

A 2 step TB test should be used by students taking the test for the first time (2 separate tests spaced 1 – 3 weeks apart). If you have received 2 separate tests within a 12 month time period, this can also be counted as a 2 step. *Annual updates are required.

A Quantiferon (or TB T-Spot) blood test may be used in place of the 2 step skin test. A copy of the lab test results must be submitted to CBI. *Annual updates are required.

If you are currently receiving annual TB testing, documentation of 2 consecutive years of negative TB skin testing (one year being current) is acceptable. *Annual updates are required.

If you have a documented past positive TB skin test **AND** a documented negative chest x-ray, you will need to complete the Signs/Symptoms TB

Assessment form annually (form available on the website). Copies of the positive TB skin test & x-ray results must be uploaded initially with the signs/symptoms TB assessment form.

*For annual updates, a 1 step skin test or one of the above blood tests may be used.

- Both a 1) Health Insurance Verification Form (available on the website) and 2) Copy of current insurance card must be submitted to CBI. A new Health Insurance Verification form and copy of insurance card are required every academic year. If coverage changes or expires during the current academic year, a new form and card must be submitted within 1 week of the change.
- CPR with AED certification. A copy of the card is required. Certification must include adult, child, and infant plus instruction on Automated External Defibrillation (AED) devices. This certification must be renewed every 1 or 2 years depending on the course taken. Required courses include **ONLY** American Heart Association (AHA) “Health Provider Course” (2 year certification) **OR** the American Red Cross “CPR for the Professional Rescuer” course (1 year certification). A letter from the provider is acceptable to show proof of requirement prior to the card being received.
- ACLS and PALS certification (only CRNA students): A copy of the card is required. Certification is for 1 or 2 years depending on course taken. A letter from the provider is acceptable to show proof of requirement prior to the card being received.
- Unencumbered Illinois and Missouri RN licenses (only CRNA and Edwardsville FNP students must submit Missouri licenses). A copy of the actual license must be uploaded. Printouts from the Missouri DIFP website are also required for Missouri license. Online students must show evidence of an unencumbered RN license for the state in which they are working and/or doing clinicals in.
- Unencumbered Out of State or Advanced Practice RN licenses (if applicable). Required for students working or doing clinicals in that state.

In Fall semesters, an annual flu shot requirement will be added to the Immunization Tracker. Students receive an email from CBI with the deadline date.

Employees from CBI monitor each student’s Immunization Tracker and will email the student with any requirements which are expired, about to expire or not sufficient.

Weekly emails will be sent until all requirements are complete. Thirty (30) days prior to the expiration of a requirement, daily emails will begin to be sent until the requirement is completed. If a requirement has been rejected by a member of the CBI Review Team that you think should not have been rejected, please contact the Graduate Program Secretary at (618) 650-3975 or pkoehe@siue.edu.

Documents can be mailed, faxed or uploaded to:

Magnus Health Portal – Attn: Medical Records
327 W. Morgan Street
Raleigh, NC 27601
Fax: (919) 827-0142
<https://secure.magnushealthportal.com/index.jsf>

Students are responsible for uploading and attaching each required document. **If you have any difficulty with your online order or with uploading any of your requirements, please contact CBI Customer Service at 888-723-4263 ext. 7168.**

CBI assesses an annual fee of \$20 for use of the Magnus Health Portal. This fee is the responsibility of the student.

UNIVERSITY HEALTH SERVICE

In addition to the items that need to be uploaded to the Magnus Health Portal, some of these same items are required by University Health Service in order for a student to be in good standing at SIUE. Students are required to submit their Immunization history for Rubeola, Rubella, and Mumps, as well as a Tetanus/Diphtheria/Pertussis vaccine within the last 10 years. Please contact University Health Service at (618) 650-2849 with any questions or if you need additional information on these requirements.

IMMUNIZATIONS NOT COVERED UNDER CDC GUIDELINES

The School of Nursing policies regarding immunizations and communicable disease exposure, diagnosis and treatment are developed following the guidelines from the Center for Disease Control and Prevention (CDC). Additional guidelines will be added if requested by clinical agencies being used by the School of Nursing for student clinical experiences or other appropriate agencies (such as health departments, health services, State of Illinois).

IMMUNIZATION EXEMPTIONS

It is the responsibility of the student who wishes to be exempt from immunizations to complete the “Religious Exemption Form” and/or the “Physician Statement for Medical Exemption.” These forms are available on the CBI website (Immunization Tracker), the SIUE Health Services website or in the handbook appendix (see Section XI: Forms). The completed and signed exemption forms must be uploaded to the Magnus Health Portal.

All students must meet all the mandates listed above by the date specified in the admission materials or School of Nursing communications in order to attend nursing courses. These requirements must be kept current throughout the entire program. **This is a student responsibility.** Failure to do so will result in an unexcused absence from the assigned course and/or clinical (See Absence Policy).

SECTION VIII

STANDARD PRECAUTIONS & GUIDELINES
FOR CLINICAL EXPERIENCES

STANDARD PRECAUTIONS FOR ALL STUDENTS IN CLINICAL AGENCIES

The single most important measure to control the transmission of Hepatitis B virus (HBV) and human immunodeficiency virus (HIV) is to treat all human blood and other potentially infectious materials as if they were infectious for HIV and HBV. Application of this approach is referred to as “Universal Precautions.” Blood and other infectious materials from all patients should be considered as potentially infectious materials. These fluids cause contamination, defined as, “the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.”

Blood means human blood, blood products, or blood components. Other potentially infectious materials include human body fluids such as semen; vaginal secretions; cerebrospinal, synovial, pleural, pericardial, peritoneal, and amniotic fluids; saliva in dental procedures; body fluid visibly contaminated with blood; unfixed tissues or organs; HIV-containing cell or tissue cultures; and HIV or HBV-containing culture medium or other solutions. Since the risk of transmission of HIV or HBV from some fluids or material is low risk or nonexistent, they are not routinely included in the list unless they contain visible blood. These are: feces, nasal secretions, sputum, sweat, tears, urine, and vomit. Good judgment should be used under all circumstances. Students shall follow these guidelines developed and recommended by the Centers for Disease Control and Prevention and additional guidelines of clinical agencies.

1. Wear appropriate gloves when contact with blood, mucous membranes, non-intact skin, or potentially infectious materials is anticipated; when performing vascular access procedures; and when handling or touching contaminated items or surfaces.
2. Replace disposable, single-use gloves as soon as possible when contaminated, or if torn, punctured, or barrier function is compromised.
3. Wash hands when gloves are removed and as soon as possible after contact with blood or other potentially infectious materials.
4. The use of personal protective equipment helps prevent exposure to infectious materials. Such equipment includes, but is not limited to, gloves, gowns, laboratory coats, face shields or masks, and eye protection. Personal protective equipment is considered appropriate only if it does not permit blood or other potentially infectious materials to pass through clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.
5. Use full face shields or face masks with eye protection, goggles, or eye glasses with side shields when splashes of blood and other bodily fluids may occur and when contamination of the eyes, nose, or cough can be anticipated (e.g., during invasive and surgical procedures).
6. Minimize splashing, spraying, spattering, and generation of droplets when performing procedures.
7. Remove protective equipment before leaving the work area and after a garment becomes contaminated.

8. Place used protective equipment in appropriately designated areas or container when being stored, washed, decontaminated, or discarded.
9. To prevent injury from needles, sharp instruments, broken glass or other items that could cause a cut or puncture wound:
 - Do not bend, recap, or remove contaminated needles
 - Do not shear or break contaminated needles
 - Discard contaminated needles and sharp instruments in closable, puncture-resistant, leak proof, red or biohazard labeled containers. Do not overfill.
 - Do not remove a needle from a disposable syringe by hand.
 - Use forceps, or a one-handed technique to recap or remove contaminated needles.
10. Use RED, or affix biohazard labels to, containers to store, transport or ship blood or other potentially infectious materials, such as lab specimens.
11. Use puncture-resistant, leak-proof containers to collect, handle, process, store, transport, or ship blood specimens and potentially infectious materials. Use care not to contaminate the outside of the containers used for collecting specimens.
12. Do not eat, drink, smoke, apply cosmetics, or handle contact lenses in areas of potential exposure (note: use of hand lotions is acceptable).
13. Do not store food or drink in refrigerators or on shelves where blood or potentially infectious materials are present.
14. Handle contaminated laundry as little as possible and with a minimum of agitation. Use appropriate personal protective equipment when handling contaminated laundry. Place wet contaminated laundry in leak-proof labeled or color-coded containers before transporting. Bag contaminated laundry at its location of use. Never sort or rinse contaminated laundry in areas of its use.
15. Blood spills should be cleaned using specific hospital disinfectants or decontaminates. Follow the policy of the institution where clinical practice is being done.
16. When students have a percutaneous (needle stick or cut) or mucous membrane (splash to eye, nasal mucosa, or mouth) exposure to body fluids or have a cutaneous exposure to blood when the student's skin is chapped, abraded, or otherwise non-intact, they will immediately and thoroughly wash the area. Students are then responsible for notifying the faculty member of the incident.

The faculty member is responsible for informing the appropriate agency authority. Guidelines from the agency and the School of Nursing will be followed.

- A. The history of the client shall be reviewed for high-risk category.
- B. Client shall be notified and written consent shall be obtained. Written informed consent is not required of the source client in the State of Illinois as mandated in House Bill 4005. Written consent is required of the source client in the State of Missouri.
- C. The client shall be tested following written consent.
- D. The student shall be tested serologically to establish a baseline. Testing shall include:
 - 1) HIV
 - 2) HBs Ag
 - 3) Anti-HBs Ag
- E. The student who had been exposed to blood and body fluids shall be retested according to the following schedule:
 - 1) Six weeks
 - 2) Three months
 - 3) Six months
- F. Students are to report and seek medical evaluation if any of the following symptoms are experienced in the next 12 weeks:
 - 1) Unexplained fatigue
 - 2) Malaise
 - 3) Appetite loss
 - 4) Weight loss
 - 5) Febrile illness
 - 6) Unexplained infections
 - 7) Chronic or recurrent diarrhea
- G. The cost of the student's testing shall be the responsibility of the student.
- H. Students will be counseled on the risks and recommendations for preventing transmission of disease. The School of Nursing will notify the University Health Service of the incident and refer the student to the University Health Service.
- I. If students refuse to submit to the above listed testing procedures, no adverse action can be taken on that ground alone since the procedures are designed for the benefit of the exposed student.

Since clinical facilities may have additional recommended precautions, students should review and adhere to the policies and procedures at the clinical agency.

Steps to Prevent Infection

- Keep hands clean. Always wash hands for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizing gel or liquid.
- Treat cuts, scrapes, and abrasions immediately. Keep wounds covered until healed. If a red, swollen, "spider bite" appears, get immediate medical attention.

- Avoid contact with other people's wounds or bandages.
- Shower after physical activity. Bacteria grow best in warm, moist environments such as those created after physical activity.
- Avoid sharing personal items such as towels or razors.
- Sanitize gym equipment before and after use. To effectively kill MRSA (Methicillin Resistant Staphylococcus Aureus), use an EPA registered disinfectant. For a list of products effective against MRSA, go to <http://epa.gov/oppad001/chemregindex.htm>.

STUDENT RESPONSIBILITIES RELATED TO CLINICAL INCIDENT GUIDELINES

If a student is involved in an incident during clinical practicum, such as incidents related to patient care, medication errors, falls, etc, he/she must complete a special form obtained from the faculty assigned to the course and return the original to the Associate Dean for Academic Programs within 24 hours of the incident (48 hours if the incident occurs on a weekend). If you have questions, please call the Assistant Dean at (618) 650-3972.

GUIDELINES FOR PERSONAL SAFETY DURING CLINICAL NURSING EXPERIENCES

Students are in a variety of community settings during their clinical experiences. Using common sense safety precautions to protect personal safety in everyday life is a concept that is life-long. Safety during clinical experiences is really just an extension of these principles and practices. The following are some safety reminders especially pertinent for students at agency or community settings:

1. If you are injured, e.g. needle sticks, blood/fluid exposure, fall, at the clinical site, please complete the Report of Injury Form, <http://www.siu.edu/emergencymanagement/> and return it to the Associate Dean's office within one week. This form is also located in the Section XI. Forms section of this handbook.
2. Make sure cars are in good repair (and full of gas) and not likely to break down.
3. Always lock cars and do not leave things of value in locked cars where they can be seen.
4. Double check to make sure keys don't get locked in cars.
5. Have keys in hand when returning to cars to avoid delay.
6. Look inside vehicles before entering.
7. Avoid flashy jewelry and carrying money where it can be seen.
8. Stand tall, walk confidently, and know your destination.
9. Avoid shortcuts in unfamiliar areas.

10. Try not to carry a purse, only I.D. (driver's license), necessary papers, and change which can be carried in pockets or waist packs.
11. If making a purchase or buying lunch or gas, never flash money.
12. In agency work, always let instructors know destinations and return times.
13. In community observation experiences, let someone know destinations and approximate return times (this is common sense safety practice).
14. In case of an accident or if a victim of a crime, notify both the police and instructor of the School of Nursing.
15. If someone wants something from you, GIVE IT TO THEM.
16. Avoid corners and places where groups congregate and ignore catcalls.
17. Do not linger in any neighborhood, do your business and leave.
18. In making home visits, use judgment about approaching and entering a building; trust intuition.
19. Be very cautious about dogs. If in doubt, go to a pay phone and call the client or agency which is planned to be visited.
20. Always carry enough change to make a phone call and have the telephone number of instructor and/or agency.
21. Avoid being alone in an unfamiliar place after dark.
22. Do not stop the car to give a stranger a ride or lower the window to respond to someone who approaches the car.
23. Keep the doors locked when driving.
24. When stopping the car at a stop sign or light, stay one car-length behind the next car to be able to safely pull away if necessary.
25. When approached by someone asking (begging) for money or asking for directions, state that there is no money and keep walking.
26. Consider carrying a fully charged cell telephone.

SECTION IX:

**UNIVERSITY AND SCHOOL OF NURSING POLICIES
RELATING TO THE GRADUATE NURSING PROGRAM**

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING**

SIUE STATEMENT OF ACADEMIC INTEGRITY

Southern Illinois University Edwardsville is dedicated to learning and research, and hence is committed to truth and accuracy. Integrity and intellectual honesty in scholarship and scientific investigation are of paramount importance. The faculty, staff, and students are responsible for maintaining high ethical standards of professional integrity.

SIUE considers any of the following to be a breach of professional standards of competence and responsibility: 1. Fabrication or falsification of data, including intentionally misleading selective reporting. 2. Plagiarism, breach of confidentiality with respect to unpublished material, violations of accepted standards regarding submission and publication of scholarly works, and other misrepresentations of originality. 3. Failure to comply with research regulations, such as those applying to human subjects, laboratory animals, and standards of safety. 4. Any other conduct which seriously conflicts with accepted ethical standards in research and scholarship. See www.siu.edu/policies/1q5.shtml for more information.

Source: SIUE 2010-2011 Graduate Catalog, http://www.siu.edu/graduatestudents/catalog/ch1/student_rights.shtml

ACADEMIC ETHICS

Cheating, plagiarism, and dishonesty of any kind are very serious matters and will incur serious consequences. Any student involved in dishonesty or academic misconduct may incur failure in the course or dismissal from the program of study, and a letter to that effect will be sent to the Office of Student Affairs, the Dean of the School, and the Director of the Department. The University policies on plagiarism and academic misconduct as outlined and defined online at <http://www.siu.edu/policies/3c1.shtml>.

Acts of academic misconduct for which students are subject to sanctions include (without limitations) plagiarism, cheating, failure or refusal to follow clinical practice standards, falsifying or manufacturing scientific or educational data and/or representing manufactured data to be the result of scientific or scholarly experiment or research, and soliciting, aiding, abetting, concealing, or attempting such acts.

Plagiarism is defined as including, without limitation, the act of representing the work of another as one's own. Plagiarism may consist of copying, paraphrasing, or otherwise using written or oral work of another without proper acknowledgment of the source or presenting oral or written material prepared by another as one's own. This can be found online at <http://www.siu.edu/policies/3c1.shtml>

Instructors may impose sanctions for academic cheating in accordance with Student Conduct and Student Grievances: Rights and Responsibilities available online at <http://www.siu.edu/POLICIES/3cl.html>. In case of plagiarism, the minimum sanction of the first instance of plagiarism is disciplinary probation; for the second instance of plagiarism, the minimum sanction is separation from the University for one term; and for a third instance of plagiarism, the minimum sanction is permanent separation from the University.

SCHOOL OF NURSING STUDENT ACADEMIC CODE

The SIUE School of Nursing adheres to the University's Student Academic Code (<http://www.siue.edu/policies/3c2.shtml>). The University gives high priority to matters of academic ethics and abhors all types of cheating, including plagiarism.

The School believes that academic integrity and honesty are necessary as a solid foundation for intellectual development and believes that intellectual honesty is the foundation of all learning. To show intellectual honesty each student must produce work through one's own individual effort. Any work submitted as part of a requirement as designated by the course instructor must honestly and accurately indicate each individual student's academic efforts. This may include projects, papers, reports, presentations, examinations, clinical paper work, content in reflective journals, or contents of portfolios. Collaborative student efforts on projects should follow guidelines as designated in each course syllabi.

Acts of academic misconduct include acts of cheating, plagiarism, fabrication, facilitation of academic dishonesty, and willful failure or refusal to follow clinical practice standards.

Definitions for those acts of misconduct follow:

1. **Cheating:** Using another source to demonstrate mastery of a subject. It includes dishonestly obtaining help or using materials not explicitly approved by the instructor. The use of notes, electronic devices or interacting with others is prohibited in certain academic exercises. Acquiring and sharing unauthorized exams prior to testing is considered cheating.
2. **Plagiarism:** Including, without limitation, the act of representing the work of another as one's own. Plagiarism may consist of copying, paraphrasing, or otherwise using the written, electronic, or oral work of another without proper acknowledgment or consent of the source or presenting oral, electronic, or written material prepared by another as one's own. Plagiarism also includes using information from electronic resources, including the Internet, without the use of proper citations.
3. **Fabrication:** Creating, inventing, falsifying or manufacturing scientific or educational data for as part of an academic requirement. Fabrication includes instances of representing manufactured data as the result of scientific or scholarly experiments or research, fabricating sources, or using citations in a misleading way. Altering or falsifying student records are one type of fabricated information.
4. **Facilitation of academic dishonesty:** Knowingly or negligently allowing work to be used by another or aiding others in academic dishonesty. It includes acts of soliciting, aiding, abetting, concealing, sabotaging another's work, or attempting to be dishonest. Dishonesty is facilitated when students do not participate in group projects or allow one member to produce the work and represent it as the group's effort.
5. **Failure or refusal to follow clinical practice standards:** Acting in a manner that does not meet the practice standards in the treatment of patients or clients as determined by the School, the clinical setting, or through the direction of the clinical instructor/supervisor. This includes violations of HIPAA regulations of patient information and falsifying of clinical patient records.

ACADEMIC DISHONESTY OFFENSES AND SANCTIONS

Academic integrity is expected of all students at SIUE School of Nursing. Any violation of academic integrity is a serious offense and subject to sanctions. Violations at SIUE School of Nursing are classified into four levels based on the nature of the offense.

Examples follow below and are not all inclusive. Violations of the SIUE Student Academic Code/SIUE School of Nursing Statement for Academic Integrity may be recorded in the student file in the School of Nursing, reported to the School of Nursing Student Affairs Committee and for levels two – four violations will be reported to the University Office of Student Affairs, in compliance with University policy, where a disciplinary file on the student will be maintained.

Violations at levels one through three are primarily those encountered in the classroom, violations at level four are those encountered in both classroom and clinical settings.

Level One Violation

These types of violations may occur as a result of lack of knowledge or experience with the principles of academic integrity. Level one violations are infractions that involve a small percent of the course work, are not extensive and/or occur on a small assignment. The following are examples:

1. Working with another student on a laboratory, clinical or homework assignment when collaboration is prohibited.
2. Failure to footnote or proper citation.– (reported at discretion of faculty)
3. Failure to report academic dishonesty of fellow students. (protocol to be developed)

Recommended sanctions for level one violations are listed below. One of these must be chosen and a report placed in the student file in the School of Nursing, at the discretion of the faculty member.

1. An assigned paper or research project on a relevant topic.
2. A paper on academic integrity or ethics.
3. A make-up assignment at a higher level than the original assignment.
4. No credit given for the original assignment with no make up allowed.

Level Two Violations

Level two violations are of a more serious nature as they effect more of the student's coursework. The following are examples.

1. Quoting directly or paraphrasing, to a moderate extent, without source acknowledgement.
2. Unauthorized multiple submission.
3. Unauthorized collaboration on an on-line or take home exam.
4. Receiving assistance from sources with special expertise for an area that is a core element in the project without acknowledgement. (Examples include statistical, research, clinical practice area, and/or computer programming.)
5. Not contributing to a graded group project.

The recommended sanction for level two violations is a failing grade for the assignment. In the case of cheating on a take home or online final the penalty is failure in the course.

Level Three Violations

Level three violations are more serious in nature than level one and two violations. Examples include:

1. Copying another student's exam.
2. Plagiarizing major portions of a written assignment.
3. Allowing someone to copy during an exam.
4. Using books, notes, PDAs, calculators and other items prohibited by course faculty in an exam.
5. Altering exams for more points.
6. Acquiring and sharing of unauthorized exams prior to the exam.
7. Use of purchased papers or other materials.
8. Use of the work of others as your own.
9. Inventing sources and or data or altering materials for use in papers or projects.
10. Submitting false accusation of cheating by student.

The recommended sanction is a failing grade for the course and filing a report as required by University policy.

Level Four Violations

These are the most serious violations and have potential to cause harm and thus carry the heaviest penalties. Examples include:

1. Any violation that occurs after return from suspension for a previous violation.
2. Forging a grade, stealing an examination, buying an examination, falsifying a transcript.
3. Having a substitute take an exam or take an exam for someone else.
4. Fabrication of evidence, falsification of data.
5. For graduate students presenting another's ideas as one's own in a project or thesis, scholarly articles, presentations or other works.
6. Sabotaging another student's work through actions designed to prevent completion of an assignment.
7. Willful violation of the ethical code or nursing or a nursing specialty.
8. Violation of HIPPA regulations.
9. Falsifying clinical data and patient records.
10. Knowingly failing to report a change in patient condition, or an error to the faculty or nursing personnel.

The recommended sanction for a level four violation is a failing grade for the course. A report is made to the School of Nursing Student Affairs Committee. Further sanction will be in accord with University policy.

Students can institute a grievance as provided in the University's Academic Code. Sanctions endorsed in this document are to be considered, additional sanctions are at the discretion of the faculty member and the School of Nursing.

Approved by Faculty – May, 2005

SIUE STUDENT RIGHTS AND RESPONSIBILITIES

STUDENT GRIEVANCE

If students feel that they have been unfairly treated, the School of Nursing faculty encourage students to attempt to resolve the issue informally prior to filing a formal charge at the university level. The line of communication is as follows: meet with the faculty member, then if necessary submit a formal written letter to the Graduate Student Affairs (GSA) committee. After the GSA has provided their decision, the student can then appeal to the Assistant Dean for Graduate Programs, the Associate Dean for Academic Programs, and lastly, the Dean of the SON. If the student is not satisfied after following this informal process, then the formal University grievance policy is available (which must be done within 60 days).

Any student dispute with a faculty member, administrator, or staff member should first be addressed through the informal process outlined in the University's Student Grievance Code. If the dispute is not resolved at this level, the student will follow the procedure as outlined in the University Student Grievance Code (<http://www.siu.edu/policies/3c3.shtml>)

STUDENTS' RIGHT OF ACCESS TO RECORDS

Students have the right to examine their files in the School of Nursing. To do so, the student must notify the Dean in writing requesting access to the Student File in the Advisor's Office. The School has 30 days in which to comply. The written request to see the student file will be filed in the student file.

EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION

Southern Illinois University Edwardsville is committed to equal educational and employment opportunity and affirmative action. SIUE endeavors to administer its programs, services, and employment opportunities without regard to race, ethnicity, color, sex, creed or religion, national origin, age, handicap, veterans' status, or other prohibited categories while maintaining its commitment to affirmative action.

AMERICANS WITH DISABILITIES ACT (ADA)

Information about the American's With Disabilities Act is available at the following website: <http://www.ada.gov/> . Further information can be obtained in the Disability Support Services office at Rendleman Hall, Room 1218, Campus Box 1611, Edwardsville, IL 62026, Phone: (618) 650-3726, (V/T): (618) 650-3782, Fax: (618) 650-5691 disabilitysupport@siue.edu .

SCHOOL OF NURSING STATEMENT ON DIVERSITY

The School of Nursing (SON) defines diversity as the ability to accept, value, and celebrate similarities and differences among individuals in terms of race, ethnicity, national origin, religion, age, gender, sexual orientation, ability/disability, social and economic status or class, education, beliefs, and related attributes of all people.

The SON is committed to providing equal opportunity access to resources that promote success among all students, staff, and faculty.

The SON is committed to fostering diversity by:

- Actively seeking and admitting students from underrepresented, diverse populations within the region;
- Mentoring, retaining, and facilitating progression of students who are admitted to the SON;
- Preparing professional nurses who are competent in providing culturally specific care to diverse populations;
- Responding to the educational needs of a diverse student body;
- Recruiting, hiring, and retaining persons from underrepresented populations for positions as nursing faculty and staff in the SON;
- Creating an environment where all members of the SON interact in a positive manner. All SON policies, procedures, and programs will be compatible with and supportive of diversity;
- Encouraging the exploration and expression of beliefs, ideas, thoughts, and perspectives in a safe and supportive environment.

Approved by Faculty Council April 2008

Diversity_Statement_rev_apr08.doc

Diversity_Statement_rev_feb10.doc

SCHOOL OF NURSING BACKGROUND CHECKS OF STUDENTS AND FACULTY POLICY

- I. The SIUE School of Nursing (“School”) includes as part of its curriculum student learning experiences at various clinical affiliates in Illinois and Missouri. The clinical affiliates require background checks of SIUE students before the students can enter the clinical site and perform the duties of a nursing student. Faculty of the School are also subject to a background check before entering the clinical site. Additionally, the Joint Commission on Accreditation of Healthcare Organizations recommends that students and faculty be subject to the same screenings as staff who provide care, treatment and services.

Therefore, as part of its enrollment process, the School is requiring background checks, including criminal background checks, for all of its students. The same checks shall be completed for faculty supervising all clinical sites. All incoming graduate and undergraduate students must order a criminal background check from CBI. Faculty entering the School must complete the Authorization for Release of Information form prior to hire. Only those students with a background check demonstrating backgrounds in compliance with this policy will be allowed to enroll into the School. Only those faculty with a background check demonstrating backgrounds in compliance with this policy will be allowed to supervise students in clinical affiliates. The check shall be minimally intrusive, but may include checks for offenses or other matters, as required by the clinical sites, not specifically included in this policy.

- II. Students should be aware that many health care employers require all job applicants to complete a background check before beginning their employment. Additionally, all students taking the National Council Licensure Examination (“NCLEX”) must complete a background check and most states require background checks for licensure as a nurse.
- III. The CBI background check will include the following checks:
 1. Illinois Statewide Criminal Records;
 2. Residency History – upon searching the Residency History, if any county appears outside of the state of Illinois, CBI will search that individual out of state county criminal records to make sure the full criminal record is searched nationwide;
 3. Nationwide Sexual Offenders Registry; and
 4. Unlimited County Criminal Records
 5. Other lists maintained by federal or State governmental entities as required by the individual clinical affiliate.
- IV. As part of the enrollment process into the School, the student must order a background check package from CBI. Students will be responsible for all costs relating to the background check.
- V. Faculty must complete the Authorization for Release of Information form prior to hire. Faculty will be responsible for all costs relating to their background check.

- VI. Students and faculty must disclose each State in which they have resided for the last ten (10) years. With respect to Students and faculty less than 28 years of age, the student and faculty need only disclose the States in which they have resided since they attained 18 years of age. Generally, the School will only consider criminal convictions which have occurred within the last ten (10) years, but depending on the nature and number of the convictions and other factors, may consider and take action based on convictions more than ten (10) years old.
- VII. Generally, two background checks will be sufficient for the student's tenure in the School: the first check must be completed upon conditional admission into the School before beginning any clinical experience; and the second check must be completed for all undergraduate students taking the NCLEX. With respect to faculty, one background check should be sufficient for the duration of the faculty member's employment with the School. However, if a clinical affiliate requires an updated check or an additional check not included in the original check, the Students and faculty shall be subject to the additional check before entering the clinical affiliate.
- VIII. With respect to students, if a background check demonstrates a finding of a positive criminal disposition described in this policy, the Associate Dean for Academic Affairs shall notify the student and provide the student with a copy of the finding. Following notification, the Associate Dean shall meet and discuss the finding with the student. The student shall have the opportunity to present information to the Associate Dean relating to the finding. Within fifteen (15) days, the Associate Dean shall make a decision whether the finding precludes the student from admission into the School. In reaching this decision, the Associate Dean may consult with its clinical affiliates. If the student wishes to appeal the decision, the student may file a grievance pursuant to the Student Grievance Code.
- IX. With respect to faculty, if a background check demonstrates a finding of a positive criminal disposition described in this policy, the Chair of the faculty member's department shall notify the faculty member and provide the faculty member with a copy of the finding. Following notification, the Chair shall meet and discuss the finding with the faculty member. The faculty member shall have the opportunity to present information to the Chair relating to the finding. Within fifteen (15) days, the Chair shall make a decision whether the finding precludes the faculty from entering the clinical site. In reaching this decision, the Chair will consult with the School of Nursing's Dean and Associate Dean, and may consult with clinical affiliates. The finding may impact the faculty member's employment with the School of Nursing. If the faculty member wishes to appeal the decision, the faculty member may file a grievance pursuant to the Faculty Grievance Procedure.
- X. Record Retention

The background check documentation provided to the School of Nursing by CBI is retained on the CBI server until the student graduates from the program. The School of Nursing shall provide copies of the documentation to the faculty member. However, the documentation shall not be retained by the School of Nursing as part of the student's or faculty member's permanent file.

XI. Criminal Convictions which will Disqualify the Student

This list constitutes the criminal offenses in Missouri and Illinois for which students and faculty may be disqualified from participation in clinical experiences or other direct patient care. There may be additional federal or state and criminal offenses which disqualify students not specifically included in this list.

Missouri State Criminal Offenses

Chapter 565

Offenses Against the Person

Sections:

565.020	First degree murder, penalty-person under sixteen years of age not to receive death penalty.
565.021	Second degree murder, penalty
565.023	Voluntary manslaughter penalty-under influence of sudden passion, defendant's burden to inject
565.024	Involuntary manslaughter, penalty
565.050	Assault first degree, penalty
565.060	Assault, second degree, penalty
565.065	Unlawful endangerment of another, penalty
565.070	Assault in the third degree
565.072	Domestic assault first degree, penalty
565.073	Domestic assault second degree, penalty
565.074	Domestic assault third degree, penalty
565.075	Assault while on school property, penalty
565.081	Assault of a law enforcement officer or emergency personnel in the first degree, definition, penalty
565.082	Assault of a law enforcement officer or emergency personnel in the second degree, definition, penalty
565.083	Assault of a law enforcement officer or emergency personnel in the third degree, definition, penalty
565.084	Tampering with a judicial officer, penalty
565.090	Harassment
565.092	Aggravated harassment of an employee, penalty
565.100	Lack of consent in kidnapping and crimes involving restraint
565.110	Kidnapping
565.120	Felonious restraint
565.130	False imprisonment
565.150	Interference with custody, penalty
565.153	Parental kidnapping, penalty
565.156	Child abduction, penalty
565.165	Assisting in child abduction or parental kidnapping, penalty
565.180	Elder abuse in the first degree, penalty
565.182	Elder abuse in the second degree, penalty
565.184	Elder abuse in the third degree, penalty
565.188	Report of elder abuse, penalty, false report, penalty, evidence of prior convictions

- 565.200 Skilled nursing facility residents, sexual contact or intercourse with, penalties-consent not a defense
- 565.225 Crime of stalking-definitions, penalties
- 565.252 Invasion of privacy, first degree, penalty
- 565.253 Crime of invasion of privacy, second degree, penalties
- 565.300 Infant's protection act, definitions, crime of infanticide, penalty, exception: application of law
- 565.350 Tampering with a prescription or a drug prescription order, crime

Chapter 566

Sexual Offenses

Sections:

- 566.030 Forcible rape and attempted forcible rape, penalties
- 566.032 Statutory rape, first degree, penalties
- 566.034 Statutory rape, second degree, penalty
- 566.040 Sexual assault penalties
- 566.060 Forcible sodomy, penalties
- 566.062 Statutory sodomy, first degree, penalties
- 566.064 Statutory sodomy, second degree, penalty
- 566.067 Child molestation first degree, penalties
- 566.068 Child molestation, second degree, penalties
- 566.070 Deviate sexual assault penalty
- 566.083 Sexual misconduct involving a child, penalty
- 566.090 Sexual misconduct first degree, penalties
- 566.093 Sexual misconduct, second degree, penalties
- 566.095 Sexual misconduct, third degree, penalty
- 566.100 Sexual abuse, penalties
- 566.111 Unlawful sex with an animal, penalties treatment
- 566.145 Sexual contact with an inmate, penalty, consent not a defense
- 566.151 Enticement of a child, penalties

Chapter 569

Robbery. Arson. Burglary and Related Offenses

Sections:

- 569.020 Robbery in the first degree
- 569.025 Pharmacy robbery in the first degree, definitions, penalty
- 569.030 Robbery in the second degree
- 569.035 Pharmacy robbery in the second degree, definitions, penalty
- 569.040 Arson in the first degree
- 569.050 Arson in the second degree
- 569.055 Knowingly burning or exploding
- 569.060 Reckless burning or exploding
- 569.065 Negligent burning or exploding
- 569.067 Fire, negligence in setting or allowing to escape on cropland grassland, marsh, prairie, woodland
- 569.070 Causing catastrophe
- 569.072 Water contamination, penalty
- 569.080 Tampering in the first degree

569.090	Tampering in the second degree
569.095	Tampering with computer data, penalties
569.097	Tampering with computer equipment, penalties
569.099	Tampering with computer users, penalties
569.100	Property damage in the first degree
569.120	Property damage in the second degree
569.140	Trespass in the first degree
569.150	Trespass in the second degree
569.155	Trespass of a school bus, penalty, schools to establish student behavior policy, when
569.160*	Burglary in the first degree
569.170	Burglary in the second degree
569.180	Possession of burglar's tools

Chapter 198

Convalescent. Nursing and Boarding Homes

Sections:

198.070.3	Abuse or neglect of residents, reports, when, by whom, contents of report, failure to report. Penalty, investigation. referral of complaint removal of resident, confidentiality of report, immunity exception, prohibition against retaliation, penalty, employee list, self-reporting of incidents, investigations, when
-----------	--

Chapter 568

Offenses Against the Family

Sections:

568.020	Incest
---------	--------

Chapter 210

Child Protection and Reformation

Sections:

210.900	Definitions
210.903	Family care safety registry and access line established, contents
210.906	Registration form, contents, violation, penalty, fees, voluntary
210.909	Department duties, information included in registry, when registration, notification
210.912	Right to appeal, procedure
210.915	Departmental collaboration on registry information, rulemaking authority
210.918	Toll-free telephone service maintained for access to information
210.921	Release of registry information, when, limitations of disclosure, immunity from liability, when
210.922	Use of registry information by certain departments, when
210.924	Rulemaking authority
210.927	Annual report, when, contents
210.930	Report to general assembly, when, content
210.933	Registration qualifies as compliance with other background check requirements, elder-care workers, when
210.936	Registry information deemed public record

2. Illinois State Criminal Offenses

State of Illinois Criminal Code of 1961 (720 ILCS 5)

Sections:

8-1.1	Solicitation of Murder
8-1.2	Solicitation of Murder for Hire
9-1	First Degree Murder
9-1.2	Intentional Homicide of an Unborn Child
9-2	Second Degree Murder
9-2.1	Involuntary Manslaughter of an Unborn child
9-3	Involuntary Manslaughter and Reckless Homicide
9-3.1	Concealment of Homicidal Death
9-3.2	Involuntary Manslaughter and Reckless Homicide of an Unborn Child
9-3.3	Drug Induced Homicide
10-1	Kidnapping
10-2	Aggravated Kidnapping
10-3	Unlawful Restraint
10-3.1	Aggravated Unlawful Restraint
10-4	Forcible Detention
10-5	Child Abduction
10-7	Aiding and Abetting Child Abduction
11-6	Indecent Solicitation of a Child
11-9.1	Sexual Exploitation of a Child
11-19.2	Exploitation of a Child
11-20.1	Child Pornography
12-1	Assault
12-2	Aggravated Assault
12-3	Battery
12-3.1	Battery of an Unborn child
12-3.2	Domestic Battery
12-3.3	Aggravated Domestic Battery
12-4	Aggravated Battery
12-4.1	Heinous Battery
12-4.2	Aggravated Battery w/ Firearm
12-4.2-5	Aggravated Battery w/ Machine Gun or Silenced Weapon
12-4.3	Aggravated Battery of a Child
12-4.4	Aggravated Battery, unborn child
12-4.5	Tampering with Foods, Drugs or Cosmetics
12-4.6	Aggravated Battery of a Senior Citizen
12-4.7	Drug Induced Infliction of Great Bodily Harm
12-7.4	Aggravated Stalking
12-11	Home Invasion
12-13	Criminal Sexual Assault
12-14	Aggravated Criminal Sexual Assault
12-14.1	Predatory Criminal Sexual Assault of a Child
12-15	Criminal Sexual Abuse
12-16	Aggravated Criminal Sexual Abuse
12-19	Abuse and Criminal Neglect of Long-Term Care Facility Resident
12-21	Criminal Abuse or Neglect of an Elderly or Person w/ Disability

12-21.6	Endangering Life or Health of Child
12-32	Ritual Mutilation
12-33	Ritualized Abuse of Child
16-1	Theft
16-1.3	Financial Exploitation of an Elderly or Person w/ Disability
16-2	Theft of Lost or Mislaid Property
16A-3	Retail Theft
16G-15	Financial Identity Theft
16G-20	Aggravated Financial Identity Theft
17-3	Forgery
18-1	Robbery
18-2	Armed Robbery
18-3	Vehicular Hijacking
18-4	Aggravated Vehicular Hijacking
18-5	Aggravated Robbery
19-1	Burglary
19-3	Residential Burglary
19-4	Criminal Trespass to a Residence
20-1	Arson
20-1.1	Aggravated Arson
20-1.2	Residential Arson
24-1	Unlawful Use of Weapon
24-1.1	Unlawful Use or Possession of Weapon, Felon or Persons in Custody
24-1.2	Aggravated Discharge of Firearm
24-1.2-5	Aggravated Discharge of Machine Gun or Silenced Weapon
24-1.5	Reckless Discharge of Firearm
24-1.6	Aggravated Unlawful Use of a Weapon
24-3.2	Unlawful Discharge of Firearm Projectiles
24-3.3	Unlawful Sale or Delivery of Firearms on School Premises
33A-2	Armed Violence

Wrongs to Children Act (720 ILCS 150)

Section

5.1 Permitting Sexual Abuse of a Child

Criminal Jurisprudence Act (50 ILCS 735)

(Repealed)

Cannabis Control Act (720 ILCS 550)

Sections

5	Manufacture of Delivery of Cannabis
5.1	Cannabis Trafficking
5.2	Delivery of Cannabis on School Grounds
7	Persons Under 18 Years of Age, Delivery
9	Calculated Criminal Cannabis Conspiracy

Illinois Controlled Substances Act (720 ILCS 570)

Sections

401	Manufacture or Delivery Unauthorized by Act
402	Possession Unauthorized by Act
401.1	Controlled Substance Trafficking
404	Look-Alike Substances
405	Calculated Criminal Drug Conspiracy
405.1	Criminal Drug Conspiracy
407	Delivery of Controlled, Counterfeit or Look-Alike Substances
407.1	Persons 18 or older using, Engaging or Employing Persons Under 18 to Deliver Controlled, Counterfeit or Look-Alike Substances (unless the applicant or employee obtains a waiver pursuant to Section 40).

Illinois Credit Card and Debit Card Act (720 ILCS 250)

Sections

4	Receiving Card of Another
5	Receiving Lost or Mislaid Card
6	Sale or Purchase of Card without Issuer's Consent
8	Prohibited Uses
17.02	Fraudulent Use of Electronic Transmission

Nursing and Advanced Practice Nursing Act (225 ILCS 65)

Section

10-5 Prohibited Acts

Effective: January 1, 2005

Approval: Executive Committee 6/14/05
 Marcia Maurer, Dean 6/16/05

MANDATORY DRUG SCREENING POLICY

I. Policy

The SIUE School of Nursing believes that its students must place patient safety as their top priority at all times. In order to provide safe care, students must be cognitively unimpaired. Moreover, some of the clinical sites used by the School of Nursing require drug screenings of students and faculty before they can enter the clinical site and perform the duties of a nursing student and faculty member. Additionally, the Joint Commission on Accreditation of Healthcare Organizations recommends that students and faculty be subject to the same screenings as staff employed by the healthcare organization. To meet its ethical concerns regarding safe patient care as well as meeting clinical site and healthcare accreditation standards, the School of Nursing is imposing mandatory drug screening of its students and faculty. Effective for the Spring semester 2005, the School of Nursing will require all incoming graduate and undergraduate students to take a drug screen and be free of the drug substances listed in this policy before they can be fully admitted into the School of Nursing. Additionally, all faculty who are supervising students at clinical sites must take a drug screen and be free of the drug substances listed in this policy before they can enter the clinical site.

The drug screening shall be minimally intrusive and use the most effective screening methods reasonably available.

II. Procedure for Implementation

1. All incoming School of Nursing students must order a drug screening test through CBI. The screen must be performed on all incoming students between the date of their admission letter and the first day of class. The School of Nursing may establish a deadline date for test results which is prior to the first day of class. However, for students admitted late or as warranted by other circumstances, the drug screen may be performed after this deadline. At present, the screen is required only for incoming students and is not mandatory for continuing students in good standing in the School of Nursing. However, if a particular clinical site requires additional or more recent drug screens, continuing students will be subject to additional screening. In addition, all students are subject to the SIUE Student Conduct Code, Student Alcoholic Beverages Policy and School of Nursing Substance Abuse policy which provides for drug and alcohol testing upon reasonable suspicion that the student is using or under the influence of drugs or alcohol.
2. Undergraduate and graduate nursing students, who leave the program for at least one year, must be drug screened in the same manner as newly admitted nursing students.
3. All faculty supervising students at clinical sites that require drug testing must arrange to be drug screened at a screening facility approved by the School of Nursing before entering any clinical site. The facilities currently approved are: Gateway Regional Medical Center, Glen Carbon and Granite City, IL, Memorial Hospital, Springfield, IL, Work Safety Institute, Mount Vernon, Irvington, Salem, Benton and Carlyle, IL, Anderson Hospital, Maryville, IL, St. Anthony's Health Center, Alton, IL or other facilities approved in advance by the Associate Dean for Academic Affairs. The screen must be performed within thirty (30) days before entering the clinical site. However, if warranted by other circumstances, the drug screen may be performed after this deadline. Generally, the drug screen is required for faculty only once and faculty are not subject to additional drug screens after the initial screening. However, if a particular clinical site requires additional or more recent drug screens, the faculty member will be subject to additional screening.
4. If an agency requires drug testing, faculty working for the School of Nursing on an interim basis must be drug screened in the same manner as faculty newly assigned to a clinical site, if more than nine (9) months has elapsed since the faculty member's previous clinical assignment.
5. The drug screen must include the following drugs: THC (delta-9-tetrahydrocannabinol, substance commonly found in marijuana); Cocaine; Opiates; Amphetamine; Barbiturates; Benzodiazepines; Methadone, Methaqualone; Propoxyphene; and PCP (phencyclidine).

6. If a student has a legal prescription for any of the above listed drugs, the student will be asked to provide the prescription information to the Medical Review Officer if the drug test is positive.
7. If a faculty member has a legal prescription for any of the above listed drugs, the faculty member should notify his/her Chair in advance of the drug screen and must be medically cleared in advance for participation in the clinical experiences by his/her health care provider. The faculty member shall provide a copy of the legal prescription to his/her Chair prior to the drug screen. Such copies shall be maintained in the individual faculty member's personnel file in the Office of the Dean in the School of Nursing.
8. A student's drug test report is securely posted on the CBI website and is available only to the student and the school requiring the test. Students can be confident that the results will never be viewed by unwarranted outside sources. The School of Nursing will not accept screening results delivered by the student or any other third party, other than CBI. If a student has completed a CBI drug test associated with another university, then the student can send the results to the School of Nursing for approval by the Associate Dean for Academic Programs.
9. The faculty member must consent to allow the screening facility to mail the screen results directly to the following address: Office of the Dean, SIUE School of Nursing, Campus Box 1066, Edwardsville, IL 62026-1066. The School of Nursing will not accept screening results delivered by the faculty member or any other third party, other than the screening facility itself.
10. Students are encouraged to have their drug test completed by the established deadline date to avoid any disruption of course enrollment. Drug screens that are not received in a timely manner by the School of Nursing may result in the student's removal from their nursing courses and/or clinical site. Any clinical days lost by the student will be made up by the student at the convenience of the clinical site and supervising faculty.
11. Faculty members are encouraged to have the results of the drug screen sent to the School as early as possible to avoid any disruption of course scheduling.
12. The students or faculty members being tested are responsible for the cost of all drug screenings.
13. If a student refuses to submit to a drug screen, the student's enrollment in the School will be withdrawn. The Office of Student Affairs will be notified.
14. If a faculty member refuses to submit to a drug screen, the faculty member is subject to discipline.
15. Various clinical sites may require additional drug screenings and if a student or faculty member is placed with such a clinical site, the student or faculty member may be required to undergo additional drug screenings and screenings for other

substances after the initial drug screening. Generally, one initial drug screening will be sufficient for the clinical sites. In addition, various clinical sites may impose random drug screens upon students and faculty. However, the cost of such random drug screens shall be borne by the clinical site.

16. If the student's drug screen is negative, the student may commence all course and clinical assignments. If the faculty member's drug screen is negative, the faculty member may supervise students at clinical sites.
17. If the student's drug screen is positive, a CBI Medical Review Officer (MRO) will contact the student to verify if there is a prescription and notify the appropriate School of Nursing secretary by email that the results are being reviewed. If the student does not return the phone calls from the MRO within five (5) business days of the first contact, the test will be released as a positive result with the note of NO CONTACT meaning that the student never responded. The student may still call and send in prescription documentation after the fact and get the results overturned. If the student has a prescription for the drug in question, it must be sent to the MRO. The MRO will verify it and send it through as a negative result if the prescription is valid. If the prescription is not valid, the drug test result will be sent through as a positive test. The student will then be contacted by the Associate Dean for Academic Programs as soon as possible and shall meet with the Associate Dean to discuss the positive drug screen. The Associate Dean shall provide a copy of the positive drug screen to the student. The student shall be allowed to respond to the Associate Dean concerning the drug screen and may request a second drug screen to be performed within 2 days of notification to the student. If possible, the second drug screen should test the remaining sample from the student. The Associate Dean has the discretion to allow a second drug screen with a new sample if the original remaining sample is no longer available or other circumstances warrant. The Associate Dean may consult with the clinical site concerning the positive drug screen. The Associate Dean shall make a final decision if the student has violated this policy. If the policy has been violated, all clinical course enrollments within the School of Nursing shall be cancelled and at the discretion of the Associate Dean all didactic course enrollments may also be cancelled. The Associate Dean shall notify the Dean of Students of the violation. Thereafter, student shall not be allowed to re-enroll in any clinical course in the School of Nursing for a period of one year. The student may continue to enroll and attend other non-nursing courses within SIUE. The Associate Dean may request the student complete (at the student's cost) a chemical dependency evaluation and further treatment, if recommended by the assessment process, and any other additional stipulations. Additionally, the student will be encouraged to seek assistance to address the drug use and referred to SIUE Counseling Center or such other counseling as appropriate. The Associate Dean may report any positive drug screen to the SIUE Office of

Student Affairs and the Illinois and Missouri State Boards of Nursing for information and possible action.

18. After one academic year, the student with a prior positive drug screen may apply for re-admission into the School of Nursing upon completion of all the stipulations imposed by the Associate Dean including a chemical dependency evaluation and further treatment, if recommended by the assessment process and a negative drug screen. The application for re-admission will be considered by the appropriate committee within the School of Nursing who shall make a recommendation on the re-admission decision to the Associate Dean. The Associate Dean shall have the discretion to admit or reject the student based on the Associate Dean's judgment whether this student can successfully complete the School of Nursing program. If the student is not satisfied with the Associate Dean's decision, the student may file a grievance pursuant to the SIUE Student Grievance Code.
19. If a faculty member's drug screen is positive, the faculty member will be notified by the faculty member's Chair as soon as possible and shall meet with the Chair to discuss the positive drug screen. The Chair shall provide a copy of the positive drug screen to the faculty member. The Chair shall notify the Dean of the finding. The faculty member shall be allowed to respond to the Chair concerning the drug screen and may request a second drug screen to be performed within 2 days of notification to the faculty member. If possible, the second drug screen should test the remaining sample from the faculty member. The Chair has the discretion to allow a second drug screen with a new sample if the original remaining sample is no longer available or other circumstances warrant. The Chair may consult with the clinical site concerning the positive drug screen. The Chair shall make a recommendation to the Dean whether the faculty member has violated this policy. If the policy has been violated, the faculty member shall not be allowed to supervise any students in any clinical sites and may be subject to discipline including termination as a result of the finding. The Chair shall notify the Provost of the violation. At the Dean's discretion, the faculty member may teach and perform other services within the School of Nursing. The Dean may request the faculty member complete (at the faculty member's cost) a chemical dependency evaluation and further treatment, if recommended by the assessment process, and any other additional stipulations. Additionally, the faculty member will be encouraged to seek assistance to address the drug use and referred to Employee Assistance Program, the SIUE Counseling Center or such other counseling as appropriate. The Dean may report any positive drug screen to the Illinois and Missouri State Boards of Nursing for information and possible action.
20. After one year, the faculty member with a prior positive drug screen may be considered by the Dean, in consultation with the Chair, for one or more course assignments supervising students in clinical sites upon completion of all the stipulations imposed by the Dean including a chemical dependency evaluation and further treatment, if recommended by the assessment process and a negative drug screen. The Dean shall have the discretion to make such an

assignment based upon the Dean's judgment whether the faculty member can successfully supervise students in a clinical setting. If the faculty member is not satisfied with the Dean's decision, the faculty member may file a grievance pursuant to the SIUE Faculty Grievance Procedure.

21. The School of Nursing or designee may retain documentation of the drug screen results and shall provide the copies of the screen to the student or faculty, upon request. However, the drug screen results shall not be retained by the School of Nursing as part of the student's or faculty member's permanent file.

Effective: January 1, 2005

Approval: Executive Committee 6/14/05
Marcia Maurer, Dean 6/16/05

POLICY FOR THE ILLICIT USE OF CONTROLLED SUBSTANCES, PRESCRIBED CONTROLLED SUBSTANCES, AND OVER-THE-COUNTER DRUGS

I Policy

It is the policy of the School of Nursing and the Office of the Provost and Vice Chancellor for Academic Affairs that at all times during enrollment in clinical practicum courses students be both physically and mentally fit for the practice of nursing and free of the influence of drugs and/or alcohol. Any degree of impairment of a clinical practicum student due to controlled substances, whether illegal or prescribed, over-the-counter medications, or alcohol, compromises patient safety, violates professional ethical standards, and shall not be tolerated. All violations of this policy will be addressed in the School of Nursing, or, if appropriate, referred to the Office of the Vice Chancellor for Student Affairs for adjudication pursuant to the Student Conduct Code or other relevant procedures. Disciplinary sanctions, up to and including dismissal from the School of Nursing program and/or separation from Southern Illinois University Edwardsville, may be imposed upon any School of Nursing student found to be in violation of the law or policies relating to the unlawful possession, use, or distribution of drugs and/or alcohol, including impairment during a clinical practicum.

II Drug Screening For Clinical Placement

Most clinical affiliates of the School of Nursing have policies that require clinical practicum students to submit to drug screening prior to or at any time during the clinical practicum. The screening may test for the presence of following substances and others:

- Amphetamines
- Barbiturates
- Benzodiazepines
- Cannabinoids
- Cocaine

Ethanol
Methadone
Methaqualone
Opiates (including Fentanyl, Sufentanil, Hydrocodone and Oxycontin)
Phencyclidine
Propoxyphene

Costs for such screening are to be paid by the student or the clinical affiliate. The School of Nursing supports this requirement, where applicable, as a condition of the legal affiliation agreements executed between the School or its programs and the affiliate sites.

III Use Of Prescribed And/Or Over-The-Counter Drugs

Any student enrolled in a clinical course and taking a prescribed or non-prescribed drug that falls within any of the drug classifications listed above must immediately notify, in writing, the Associate Dean for Academic Affairs regarding the medication taken and the expected duration of therapy. Participation in the clinical course experience shall be dependent upon the decision of the Department of Nursing at the clinical site to which the student is assigned. Should the clinical site refuse to allow the student access to the clinical area, the School of Nursing will make a reasonable effort to relocate the student. Failure to comply with the notification requirement of this policy may result in dismissal from the program or other disciplinary action.

IV Drug Screening For Cause

If reasonable suspicion exists during the period of enrollment in any clinical practicum course that a student is using or under the influence of drugs or alcohol use, abuse, or diversion, the student shall be subject to screening for drugs or alcohol. Reasonable suspicion, as determined by the School for Nursing or the clinical affiliate, shall be based on student behaviors, observed or reported, of objective, quantifiable symptoms, including but not limited to alcohol on breath, slurred speech, flushed face, dilated pupils, mood swings, motor incapacities, deterioration of academic or work performance, and/or absenteeism, that suggest impairment of a student's ability to meet standards of performance, competency, and safety in the clinical setting, office, or classroom due to the influence of a drug.

Procedure

This procedure is to be followed at the clinical site where a faculty member is present or where the student is under the direct or indirect supervision of a clinical representative. If a suspicious behavior, as defined above, is observed or reported, the following steps will be taken:

1. Remove the student from patient care.
2. Contact the Associate Dean for Academic Affairs in the School of Nursing. If unable to contact the Associate Dean directly, contact either the faculty member

- for the course, the Assistant Dean for the Undergraduate or Graduate Program as appropriate for the student, or the Department Chair.
3. Inform the student of the behavior or performance issue observed. This meeting with the student, to be conducted in a private and confidential setting, should be attended and observed by a second faculty member or clinical representative.
 4. The student will be asked to disclose any alcohol or drugs (prescribed, illicit, or over-the-counter) which he/she may be taking.
 5. Substance abuse screening, if necessary, will be done at the student's expense. The chain-of-custody screening process must be used.
 6. If screening is available at the clinical facility, the faculty member/clinical representative will accompany the student to the appropriate location to conduct the drug screen or testing. If screening/testing is not available at the clinical facility, the faculty member/clinical representative will inform the student that he/she must be tested/screened with a urine test at an accredited health care agency, approved by the School of Nursing, within 5 hours of leaving the facility. A valid ID will be required at the testing site. The results of this testing must be provided to the School of Nursing Associate Dean's office as soon as the results are available.
 7. If the student refuses testing or refuses to release the results to the School of Nursing, the result may be deemed a positive test and the student may be subject to immediate dismissal or other disciplinary action.

V Drug Screening Documentation Procedure

When reasonable suspicion of drug is observed or reported, the faculty member or clinical representative will document, in writing, the behavior(s) or the performance issues/concerns observed. A detailed description of the observation should be provided, including dates, times and names of all parties involved. This written documentation should be collected by the faculty member or faxed to the School of Nursing Associate Dean, with the original documentation then provided to the faculty member. All written documentation and drug testing results shall be treated confidentially and placed in the student's School of Nursing file and sent to the Office of the Provost and Vice Chancellor for Academic Affairs.

The Associate Dean for Academic Affairs in the School of Nursing will inform the student that he/she will be temporarily suspended from any clinical experience until the issues are resolved and approval is granted by the Associate Dean for Academic Affairs in the School of Nursing to resume clinical experiences. If the Drug Screen results are negative, and no further issues or questions remain to be addressed, the Associate Dean for Academic Affairs will approve an appropriate plan for the student to return to the clinical course. If the Drug Screen results are positive or if the student refuses to submit to the Drug Screen, the Associate Dean for Academic Affairs shall call for an official hearing in the School of Nursing.

VI School Of Nursing Hearing Panel

The Associate Dean for Academic Affairs in the School of Nursing shall appoint a hearing panel to be Chaired by the Assistant Dean consistent with the student's enrollment level (Undergraduate or Graduate Program). The voting members of the

panel shall include four School of Nursing faculty members from the Professor and/or Associate Professor ranks, two faculty who regularly teach in clinical courses, and the Director of Recruitment, Admission, Progression and Retention in the School of Nursing. Members of the panel shall have access to all documentation relevant to the case.

A hearing shall be conducted within 15 days of receipt of a positive Drug Screen by the Associate Dean for Academic Affairs or of a refusal by a student to submit to a Drug Screen. The Hearing Panel will follow the School of Nursing Hearing Procedure, resulting in a written recommendation to the Associate Dean for Academic Affairs in the School of Nursing.

VII Hearing Panel Procedure

The Hearing shall be conducted in a manner to provide the student with all of the information contained in the charge(s) against him/her as well as the opportunity to address and provide evidence in response to the charge(s). The clinical course faculty member responsible for the student shall be present and will testify as well as other relevant individuals. The student may invite an Advocate to accompany him/her to the hearing. The student and Advocate may confer with each other, but only the student may speak directly to the Panel. After all parties acknowledge that they have been given ample opportunity to provide information to the Panel, the Panel will be allowed to ask all parties specific questions relative to the case under review. When the Panel members agree that they have no more questions, and the student, Advocate and other relevant parties agree that they have provided all of their desired evidence, they are dismissed from the room. The Panel may then deliberate in private and develop their recommendation(s).

Recommendation(s) will be sent to the Associate Dean for Academic Affairs in the School of Nursing by the Panel Chair no later than 7 days following the Hearing. Panel members having minority recommendations may forward them in writing to the Associate Dean for Academic Affairs in Nursing within the same timeframe.

VIII Sanctions And/Or Readmission

The Associate Dean for Academic Affairs in the School of Nursing shall inform the student and the Hearing Panel of the final decision. The student may be subject to disciplinary action which may include suspension or dismissal from the School of Nursing and/or referral to the Office of the Provost and Vice Chancellor for Academic Affairs.

IX Appeal Of The Decision

The student may appeal the final decision to the Dean of the School of Nursing. The appeal must be received, in writing, within 15 days of receipt of the final written decision from the Associate Dean for Academic Affairs. The Dean shall conduct a thorough administrative review of the facts of the appeal and issue a final decision on the appeal within 15 days. The decision of the Dean may be appealed to the Provost and Vice Chancellor for Academic Affairs

X Re-Admission Drug Screening

Applicants for re-admission to the School of Nursing programs following dismissal for violation of this policy must test negative in a secured re-admission drug screen test in order to qualify for admission to their program. Screening test results will be reviewed by the Associate Dean for Academic Affairs in the School of Nursing. At that point, the need for a formal Hearing in the School of Nursing, repeat testing, a decline in admission or re-admission, referral to the Provost and Vice Chancellor for Academic Affairs, or any other appropriate action will be determined.

Approved by faculty in SON: May 7, 2007

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE SCHOOL OF NURSING

Minimum Technical Standards Policy for Admission and Matriculation

The SIUE School of Nursing is mindful of the unique nature of the nursing curriculum in that students admitted to the SIUE School of Nursing must meet both academic and performance requirements. Applicants must possess the skills and abilities that will allow them to successfully complete the course of study and receive the full benefit of the education. Academic requirements are described in the Graduate and Undergraduate University Catalogs and the Student Handbooks. In addition to the academic requirements, nursing students must, with or without reasonable accommodation, satisfy performance standards. The student is required to perform and supervise nursing care to patients in a safe and timely manner, and this nursing care may include treatments that occur under emergency situations. Because the School of Nursing has the responsibility of ensuring patient safety, the student must be able to meet the designated technical standards.

Competencies and Performance Standards

Cognitive Capacity. The student must be able to measure, calculate, memorize, analyze, reason, integrate, and synthesize. The student must be able to comprehend three dimensional spatial relationships and read and understand graphs of various sizes and types. The student must have critical thinking ability sufficient to exercise sound judgment and problem solving in a timely manner.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to identify cause and effect relationships in clinical situations;
- ❖ The ability to predict outcomes and interpret situational contexts;
- ❖ The ability to use reasoning skills sufficient to perform deductive/inductive thinking for nursing decisions;

- ❖ The ability to set and reorganize priorities based on changes in a patient's condition.

Communication and Interpersonal Relationships. The student must be able to read, write, speak, understand, and use English in a facile and timely way that ensure appropriate care and patient safety. The student must demonstrate communication abilities sufficient for effective and sensitive interaction with individuals, families, other professionals, and groups from a variety of social, emotional, cultural, and intellectual backgrounds in both verbal and written English. The student must be able to convey or exchange information at a level allowing development of a health history, identify problems presented, explain treatment options and alternative solutions, answer questions and give directions during treatment and post-treatment. The student must demonstrate the ability to operate information technology systems. The student must be able to establish rapport with patients and colleagues. The student must be able to work cooperatively on interdisciplinary health teams. The student must be able to accept constructive feedback on their own performance.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to explain treatment procedures;
- ❖ The ability to initiate health teaching;
- ❖ The ability to document and interpret nursing actions, interventions, and patient responses;
- ❖ The ability to interview patients;
- ❖ The ability to take verbal directions;
- ❖ The ability to understand emergency verbal information and act promptly;
- ❖ The ability to communicate effectively with each member of the healthcare team;
- ❖ The ability to retrieve information from texts and lectures and to communicate concepts via written examinations;
- ❖ The ability to use patient documentation systems;
- ❖ The ability to communicate learned concepts when documenting patient care.

Motor Skills. The student must be able to demonstrate physical abilities, including gross and fine motor skills, sufficient to provide safe and effective nursing care. The student must be able to demonstrate sufficient mobility skills to be able to move from room to room, maneuvering in small places, and to access all clinical sites.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to demonstrate and independently use gross and fine motor skills sufficient to provide the full range of safe and effective nursing care activities, including transfer of a patient from a bed to a chair or from a stretcher to a bed in different positions and situations;
- ❖ The ability to perform basic life support including cardiopulmonary resuscitation;
- ❖ The ability to position patients;
- ❖ The ability to obtain and process specimens;
- ❖ The ability to move about in densely occupied locations, such as patient rooms, work spaces, and treatment areas;
- ❖ The ability to demonstrate and independently use fine motor skills sufficient to perform manual psychomotor skills such as inserting intravenous catheters, drawing up medications into a syringe, and administering parenteral medications;
- ❖ The ability to calibrate instruments, operate equipment, and prepare and administer medications.

Physical Endurance and Strength. The student must be able to demonstrate physical stamina sufficient to perform patient care activities for the entire length of the work-related educational experience. The student must be able to demonstrate the physical strength sufficient to perform the full range of required patient care activities.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to remain standing or walking for a prolonged period of time;
- ❖ The ability to remain alert for the entire length of a work-related educational experience;
- ❖ The ability to lift heavy weights in excess of 20 pounds;
- ❖ The ability to assist patients of varying weights to move.

Hearing. The student must be able to demonstrate the auditory ability sufficient for accurate observation, assessment, and therapeutic interactions and actions necessary in nursing care.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to have sufficient auditory ability for physical monitoring and assessment of patient healthcare needs;
- ❖ The ability to promptly detect and distinguish alarms, emergency signals, verbal directions, cries for assistance, and auscultatory sounds, and respond appropriately.

Vision. The student must be able to demonstrate visual ability that is sufficient for accurate observation, assessment, therapeutic interactions, and treatment necessary in nursing care. The student must be able to act on visual cues in a timely and safe manner.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to accurately read graphs, scales, computer screens, monitors, and use microscopes in a timely manner;
- ❖ The ability to observe patient responses;
- ❖ The ability to prepare and administer medications;
- ❖ The ability to recognize emergency signals.

Tactile. The student must demonstrate the tactile ability sufficient for physical assessment and monitoring of healthcare needs.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to perform palpation;
- ❖ The ability to assess heat and cold;
- ❖ The ability to perform physical examination;
- ❖ The ability to provide therapeutic interventions, such as the insertion of a catheter and the administration of medications.

Smell. The student must demonstrate the olfactory ability sufficient to detect significant environmental and patient odors.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to detect odors of wound infection, gastrointestinal bleeding, incontinence, emesis, fire, etc.

Emotional Stability. The student must demonstrate the emotional health sufficient to fully use his/her intellectual abilities, exercise good judgment, and promptly complete all responsibilities attendant to the assessment, diagnosis, care, and evaluation of patients. The student must be able to demonstrate the development of mature, sensitive, and effective therapeutic relationships with patients. The student must be able to demonstrate the ability to assume responsibility and accountability for actions.

Examples of necessary activities include but are not limited to the following:

- ❖ The ability to demonstrate the capacity to develop mature, sensitive, and effective therapeutic relationships with patients;
- ❖ The ability to function effectively under stress;
- ❖ The ability to tolerate physically taxing workloads;
- ❖ The ability to function in the face of uncertainty inherent in the clinical problems of patients;
- ❖ The ability to accept criticism and respond by appropriate modification of behavior;
- ❖ The ability to demonstrate ethical behavior including adherence to the Professional Nursing and Student Honor Code.

Other Essential Behavioral Attributes. The student must demonstrate the ability to engage in activities consistent with safe nursing practice without demonstrating behaviors of addiction to, abuse of, or dependence on alcohol or other drugs that may impair judgment. The student must be able to demonstrate responsibility and accountability for actions as a student in the School of Nursing and as a developing professional nurse.

Policy and Procedure

All professional nursing students must be able to actively participate in clinical practice. Any disability that precludes full and active participation in providing complete nursing care to patients may result in failure in clinical courses. All incoming students are required to read and sign that they fully understand the Competencies and Performance Standards for the School of Nursing. Failure to meet these basic competencies will result in clinical failure.

It is the responsibility of the student to notify the Assistant Dean of Undergraduate Programs or the Assistant Dean of the Graduate Program in the School of Nursing of any existing disability, either physical or otherwise. Such disclosure is necessary before any accommodations may be made in the learning environment or in School of Nursing policies and procedures. Information about disabilities is handled in a confidential manner.

It is the policy of the School of Nursing to comply with federal and state guidelines regarding students with disabilities so they can meet these required performance standards. Whether or not a requested accommodation is reasonable will be determined on an individual basis. Students should submit any requests for accommodations in writing prior to admission, allowing sufficient time for action on these requests. If a student becomes disabled after admission, the student should submit the request as soon as possible after admission. Written documentation of the disability that a student discloses must be provided. Determining what is reasonable

accommodation is an interactive process that the student should initiate with the School of Nursing. The School of Nursing will provide reasonable accommodations, but is not required to make modifications that would fundamentally alter the nature of the program or provide auxiliary aids that would present an undue burden to the School of Nursing or our cooperating agencies. Accommodations cannot violate patient confidentiality or safety standards.

Certification: I certify that I have read the **Minimal Technical Standards Policy for Admission and Matriculation** of the School of Nursing and understand that as part of the School of Nursing curriculum I will be required to meet all of the above stated technical standards with or without reasonable accommodation.

Check one and sign.

- I do not have any disability that requires accommodation.
- I have a disability that will require accommodation (Please see the Assistant Dean of Undergraduate Programs or the Assistant Dean of the Graduate Program for further procedures).

Date: _____ Print Name: _____
Applicant's Signature: _____

Directions: Please sign and return this form immediately together with your application to the School of Nursing to:

Southern Illinois University Edwardsville
School of Nursing
Box 1066
Edwardsville, Illinois 62026

Attn: Academic Advising Center

11/29/00

POLICY FOR THE USE OF DIGITAL MEDIA

The SIUE School of Nursing policy on digital media applies to all graduate and undergraduate students.

The SIUE School of Nursing retains all the rights of ownership to any and all digital media.

At no time shall video, pictures, and/or audio recordings include or use SIUE or School of Nursing logos or uniforms without the written consent of the Dean of the School of Nursing. At no time shall any video and/or audio recording with SIUE or School of Nursing logos and/or

uniforms appear on any website, including but not limited to YouTube or Facebook, without the written consent of the Dean of the School of Nursing and the SIUE Marketing and Communications Department. At no time shall any video and/or audio recording of any client or client's family appear on any website, including but not limited to YouTube or Facebook.

All written consents must include the School of Nursing's rights of ownership of the recording, the explicit and intended use of the recording in the present or in the future, any editing that may occur to the recording in the present or in the future, and the disposal rights and retention rights of the recording.

Recording of a client is permitted only with all the following:

- a. Written consent from the client or legal guardian.
- b. Written consent from the client's physician, which shall also describe the client's capacity to consent to any video and/or audio recording.
- c. Written consent from the facility where the video and/or audio recording occurs.
- d. Written consent from the Dean of the School of Nursing.

Approved Faculty Council, 4/28/10

INTELLECTUAL PROPERTY INFORMATION PROCESS

Faculty are encouraged to check all student papers for plagiarism using the Turnitin intellectual property verification tool within the Blackboard course management system. This information must be clearly described in the syllabus if the faculty intends to use this tool for any paper submissions. Both students and faculty can check the plagiarism scores for submitted papers as long as the "student viewable" option is selected. Students found guilty of plagiarism will be handled according to SON Academic Integrity Policy.

Specific information for faculty about the Turnitin tool:

1. Any SIUE SON faculty can use the Turnitin in their course if they choose.
2. This program identifies statements/sections of student papers that are attributable to other sources; it does NOT check for grammar, spelling, or APA, etc.
3. The number of times a student may submit a draft can be decided as a school or by each individual faculty.
4. Each submission will generate a report showing the sections/sentences that are reportedly attributable to other sources.
5. Some statements or portions of a paper may be incorrectly flagged as being attributable to other sources, so faculty should review the report carefully.
6. A faculty may scrutinize any paper, regardless of the Turnitin report.
7. Students can submit their papers multiple times as a draft and get a report. When submitting the paper for the final time, **DO NOT** select the draft button and the paper will be submitted into the institutional database.
8. There are tutorials and references on the SIUE ITS webpage for both faculty and students at www.siu.edu/its/turnitin/index.shtml.

Approved Faculty Council, 4/ 28/10, Editorial Changes 5/9/2011

UNIVERSITY RETENTION POLICY

The standing of any student whose cumulative grade point average falls below the appropriate required minimum will be reviewed by the Graduate Registrar. The Assistant Dean for Graduate Programs is notified by Graduate Records when a student's grade point average falls below the required minimum. If the degree-seeking student is permitted to continue, the conditions for continuance will be put in writing in a memorandum to Graduate Records by the Assistant Dean for Graduate Programs and, upon concurrence of the Graduate School Dean, communicated to the student. If "...a graduate student's grade point average falls below 3.0 (4.0 scale), the status of the student will be reviewed by the Dean of Graduate Studies and Research and the student's graduate adviser. If the student is permitted to continue, the conditions for continuance will be put in writing by the student's adviser and, upon concurrence of the Dean of Graduate Studies and Research, communicated to the student. In any case, if, after 15 semester hours of work in a degree program, a student has earned 6 or more hours of C or below in 400 or 500-level courses, not balanced by A in 400 or 500-level courses, the student will be dropped and ordinarily is not again admissible to a degree program." (From SIUE Graduate Student Catalog 2010-2011). The status of students in nursing are also subject to the School of Nursing Progression and Retention Policy

SCHOOL OF NURSING POLICY ON REMOVAL OF A STUDENT FROM A SCHOOL OF NURSING ACADEMIC GRADUATE PROGRAM BASED ON COURSE GRADES

A Graduate Student may not earn more than one grade of "C" or lower during enrollment in the Graduate Program. If a second grade of "C" or lower is earned, the student is automatically removed from the Graduate Program in Nursing, regardless of the student's cumulative GPA. Repeating a course in which there is originally a grade of "C" or lower does not eliminate the original course grade of "C" or lower from being applied toward this exclusion policy. For more information on the Southern Illinois University Edwardsville Graduate School Retention Policy, please refer to the Graduate Handbook located at http://www.siu.edu/graduatestudents/catalog/ch1/policies_academic.shtml.

RETENTION POLICY BASED UPON GPA

Graduate Students in the School of Nursing Graduate Program are expected to maintain a cumulative GPA of 3.0 or above. If, after the completion of 15 semester hours, the cumulative GPA falls below 3.0, the School of Nursing will comply with the University Graduate School policy on retention.

CLINICAL COURSES

The nature of clinical nursing courses is such that the student may be involved in the direct delivery of patient care services. When direct patient care is involved in the learning experience, the safety and well being of patients are of paramount concern. Clinical agencies may require drug screening and criminal background checks.

1. Clinical evaluation of student performance consists of both formative and summative methods of evaluation. Regular written and verbal evaluation sessions between the

student and faculty and/or clinical preceptor will occur. These evaluations are used to determine progress and detect trends in performance. At the end of each academic term of clinical practicum, the faculty, utilizing a clinical evaluation tool, evaluates the student.

2. Nursing clinical courses are structured so that, as the student progresses through the program, he/she is expected to demonstrate increasing independence and competence in providing nursing care. A student must maintain satisfactory performance in the clinical practicum to progress in the specialization. If at any time the clinical faculty member determines that the student is not progressing satisfactorily or is demonstrating a pattern of suboptimal behavior, he/she may recommend to the Assistant Dean for Graduate Programs and the Graduate Student Affairs Committee that the student be placed on clinical probationary status.
3. The student may be relieved from the clinical practicum immediately if, in the instructor's professional judgment, the student is unable to provide safe patient care and/or if this deficit is so serious that it cannot be remedied in the given clinical time within the limits of available faculty supervision.
4. In some cases, the Graduate Student Affairs Committee may hold a special meeting to evaluate a clinical incident. If the Graduate Student Affairs Committee recommends termination of a student's enrollment in the specialization, the student forfeits the right to voluntarily withdraw.
5. The student will meet with the Assistant Dean for Graduate Programs and the course faculty, as well as the clinical preceptors (if appropriate) to discuss clinical performance and behavior that are problematic.

CLINICAL PROBATION

1. Decisions to place a student on clinical probation shall be the prerogative of the Graduate Student Affairs Committee based on recommendations from the faculty member who evaluated the student's performance and Assistant Dean for Graduate Programs and/or the Dean, School of Nursing.
2. The faculty member and the student will develop a formal plan of remediation.
3. A student placed on clinical probation may request to meet with the Graduate Student Affairs Committee to explain any unusual or extenuating circumstances concerning his/her performance in the clinical area.
4. The student will be notified in writing of the initiation of Clinical Probation, selected plan of remediation, and a time line for completing the required remediation.
5. During the clinical practicum, faculty/clinical preceptors will closely supervise the student and regular written evaluations will be completed on the student.

6. The student will meet with the faculty member weekly, as specified in the student's remediation plan during the period of clinical probation. At this time, clinical evaluations and classroom grades will be utilized to assist the faculty member when determining successful progress.
7. The period of probation will be for 30 days but will not extend beyond the academic grading period in which the clinical probation was initiated. At the completion of the 30-day period, the appropriate faculty and clinical preceptors will make a recommendation to the Graduate Student Affairs Committee regarding disposition of the student.
8. The recommendation to the Graduate Student Affairs Committee will be:
 - a. Restore the student to good standing.
 - b. Extend the probationary period for an additional period of 30 days to allow time for additional remediation.
 - c. Recommend to the Graduate School that the student be dismissed.
9. The student is referred to the most recent University policy information online at <http://www.siue.edu/policies>. A copy can be obtained from the offices of the Vice Chancellor for Student Affairs, Provost and Vice Chancellor of Academic Affairs, Graduate School, or Admissions and Records.

ACADEMIC INTERVENTION

The Academic Intervention process is initiated within the first seven weeks of a graduate class, and anytime thereafter, by the faculty member who judges the student's academic or clinical performance to be a "C" grade level (or below). An Academic Intervention Form is completed by the student and faculty member teaching the class and forwarded to the Assistant Dean for Graduate Programs. A copy will be placed in the student's file.

The faculty member must identify the areas of weakness and offer suggestions for remediation. The student must meet with the faculty member and complete a plan for remediation to be submitted to the Assistant Dean for Graduate Programs.

STUDENT ABSENCE POLICY

It is expected that the student will attend all classes in the courses registered for in any given semester. This is the "work" of the student enrolled in the School of Nursing. The School of Nursing strictly adheres to the University policy on attendance as follows:

Upon registration, students accept the responsibility for attending classes and completing course work. It is the responsibility of students to ascertain the policy of instructors with regard to absence from class, and to make arrangements satisfactory to instructors with regard to missed course work. Students are advised that it is particularly important to attend, beginning with the first class meeting to obtain information about the course. Failure of a student to attend the first session of a course may result in removal from the course by the faculty member.

Failure to adhere to attendance policies will jeopardize the student's ability to satisfactorily meet the course requirements.

LEAVE OF ABSENCE FOR TEMPORARY DISABILITY/PREGNANCY OR PERSONAL REASONS

Depending upon the clinical experience in the particular program of study some limitations may be placed by the School of Nursing in regard to student enrollment when temporarily disabled or pregnant. Students may request to take a leave of absence from the program for temporary disability, pregnancy, or personal reasons and will be reinstated to the same academic status held when the leave began, depending on the availability of courses and space in the specific program of study. In some instances, the School of Nursing may recommend that the student take a leave of absence.

To request a Leave of Absence (LOA), a written request to the Graduate Student Affairs Committee must be submitted with the rationale for the request and the anticipated date of return. The Graduate Student Affairs Committee will grant final approval/disapproval based upon the academic status of the student and the availability of space and courses. No LOA will be approved for more than two (2) consecutive terms. If a student does not return within this time, they will have to re-apply to the University and the School of Nursing.

In the case of a temporary disability or pregnancy, the student must notify their course instructors and the Assistant Dean for Graduate Programs. The instructor will review the clinical assignment for the upcoming semester and will assist the student in making any appropriate accommodations because of the temporary disability or pregnancy.

The student should provide the course instructors with the following information, and a copy must also be received by the Office of the Associate Dean of Academic Programs:

- Name, telephone number, and address of physician, nurse practitioner or certified nurse midwife caring for the student.
- If applicable, expected date of delivery.
- Emergency contact name and phone number of a responsible relative or friend.
- A letter from the physician, nurse practitioner or certified nurse midwife that clearly states that the health status of the student will not be jeopardized by enrollment in classes or clinical rotation. It should also state that the student's health status will not impair his/her ability to function safely in the classroom and clinical practicum experience.

This information must be updated at least one week before the beginning of any semester during which the student is temporarily disabled or pregnant.

GRADUATE READMISSION POLICIES

APPLICATION FOR READMISSION

1. Students who were previously removed from the Graduate Program for academic or personal reasons may apply for readmission. Such applications will be reviewed on a case-by-case basis by the Graduate Student Affairs Committee.
2. Consideration for readmission of a student to the graduate program in nursing is contingent upon (re)admission to the University.
3. Any consideration for a re-admission of students into the graduate program will include consideration of space availability.
4. Any student attempting readmission to the program must meet all current graduate program admission requirements including cumulative GPA (minimum of 3.0 on a 4.0 scale), prerequisite course work GPA (minimum of 3.0), and fulfillment of individualized education plan as stated in the School of Nursing Academic Improvement Plan.
5. For students reapplying to the School of Nursing who have been previously enrolled in a nursing program, past experience in course work and clinical work will be evaluated for readmission. The School of Nursing specifically reserves the right to reject any applicant.

TRANSFER OF CREDITS

All courses transferred in to meet program requirements must be approved by the Assistant Dean of the Graduate Program. Students who enroll in courses at other institutions are warned to obtain approval for transfer prior to course enrollment. All requests for transfer credit are reviewed on an individual basis following a request by the student to the Graduate Student Affairs Committee.

Students use the "Graduate Student Request Form", available from the Graduate Academic Advisor or online at http://www.siu.edu/graduate/current/pdf/GSRF_fillable_09.pdf and in the Graduate Records Office, to request transfer of credit. Students must submit this completed form and the necessary course information to the Graduate Academic Advisor to initiate this request. Requests should be submitted early in your program as opposed to later.

The request includes an official transcript showing completion of the course involved and must be on file in the Graduate Records Office. Requests to transfer credit for some courses must be accompanied by syllabi or other descriptive materials that help to define the nature or content, as well as by documentation showing satisfactory completion of course requirements. Examples of courses requiring such descriptive materials include those with no published description, which are identified by titles such as "Independent Study", "Special Topics", "Readings", or which were completed at institutions that do not issue a graduate catalog or are not listed in the indexes of standard accrediting agencies.

Up to 1/3 of the total number of credit hours required for the degree, may be transferred from another University. No transfer credit is approved for work bearing a grade below "B". Only credits earned with course grades of "B" or above within the previous six (6) years will be transferred unless approved by the Graduate Student Affairs Committee.

SECTION X
NURSE ANESTHESIA
SPECIALIZATION INFORMATION

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
GRADUATE MASTER'S PROGRAM IN NURSING
Nurse Anesthesia Full-Time Progression

Classes are offered if a minimum enrollment of ten students is met. If your class is not offered for the semester shown on your progression sheet, a new progression plan will be required.

		Semester Hours	Post-Master's	Clinical Hrs. (Minimum)
Semester 1 (Summer Year One)				
Nurs 500	Theoretical Foundations of Nursing	3	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	$\frac{1}{7}$	**	
		7		
Semester 2 (Fall Year One)				
Nurs 514	Advanced Human Physiology	4	**	
Nurs 515	Advanced Human Pathophysiology	4	**	
Nurs 564	Chemistry and Physics Applied to Anesthesia	$\frac{3}{11}$	3	
		11		
Semester 3 (Spring Year One)				
Nurs 504	Research in Advanced Nursing Practice	3	**	
Nurs 513	Advanced Health Assessment & Practicum	4	**	90
Nurs 516	Pharmacology for Advanced Nursing Practice	$\frac{3}{10}$	**	
		10		
Intersession				
Nurs 529	Orientation to Nurse Anesthesia Practicum	$\frac{2}{2}$	2	90
		2		
Semester 4 (Summer Year Two)				
Nurs 563	Pharmacology Related to Anesthesia	3	3	
Nurs 565a	Theoretical Foundations of Nurse Anesthesia I	5	5	
Nurs 565b	Clinical Practicum in Nurse Anesthesia I	$\frac{1}{9}$	1	264
		9		
Semester 5 (Fall Year Two)				
Nurs 505	Health Policy and Advanced Nursing Practice	3	**	
Nurs 566a	Theoretical Foundations of Nurse Anesthesia II	5	5	
Nurs 566b	Clinical Practicum in Nurse Anesthesia II	$\frac{1}{9}$	1	512
		9		
Semester 6 (Spring Year Two)				
Nurs 507	Emerging Role in Advanced Nursing Practice	3	**	
Nurs 567a	Theoretical Foundations of Nurse Anesthesia III	5	5	
Nurs 567b	Clinical Practicum in Nurse Anesthesia III	$\frac{1}{9}$	1	512
		9		
Semester 7 (Summer Year Three)				
Nurs 568a	Theoretical Foundations of Nurse Anesthesia IV: Clinical Correlations	2	2	
Nurs 568b	Clinical Practicum in Nurse Anesthesia IV	$\frac{4}{6}$	4	440
		6		
Semester 8 (Fall Year Three)				
Nurs 569a	Theoretical Foundations of Nurse Anesthesia V: Clinical Correlations	3	3	
Nurs 569b	Clinical Practicum in Nurse Anesthesia V and	$\frac{6}{9}$	6	520
		9		
Total Credits		72	Varies by Individual	2,428 Hours

****Prerequisite or Co-requisite and/or approval by the Assistant Dean**

The Nurse Anesthesia Specialization is accredited by the Council on Accreditation of Nurse Anesthesia Educational Programs. Ongoing accreditation was awarded by the Council on Accreditation of Nurse Anesthesia Educational Programs in May 2002. The next accreditation review will be in 2009. There is no binding agreement between the student and the University and School of Nursing as to the nature of the enrollment contract. The University retains the right, opportunity, and privilege to update the curriculum using varying modes of instruction, change the standards for progression, adjust the tuition and fees and modify the credit hours and course requirements.

All nursing programs at SIUE are fully accredited by: Commission on Collegiate Nursing Education, Washington, D.C.

Updated 5/12/11, Effective Summer 2011 Cohort

Nurse Anesthesia Faculty

Andrew Griffin, CRNA, PhD, APN
Program Director
Clinical: Community Memorial Hospital, Staunton
SIUE Office: 618-650-2182
Cell: 618-218-0115
Alumni Hall, Room 2332B
Email: agriffi@siue.edu

Paul A. Darr CRNA, MSN, APN, FAAPM
Assistant Program Director, Instructor
Nurse Anesthesia Clinical Liaison
Anesthesia Lab Coordinator
Clinical: Community Memorial Hospital, Staunton
SIUE Office: 618-650-5318
Cell: 618-444-3666
Alumni Hall, Room 2321A
Email: pdarr@siue.edu

Donald Smith, CRNA, MS, APN
Lecturer
Clinical: St. Joseph's Hospital, Highland
SIUE office: 618-650-5592
Cell: 618-581-9613
Alumni Hall, Room 2321B
Email: dsmith@siue.edu

Kevin Stein, CRNA, MS, APN
Lecturer
Clinical: Memorial Hospital, Belleville
SIUE Office: 618-650-5320
Cell: 618-960-1185
Alumni Hall, Room 2321B
Email: kstein@siue.edu

Kyle Griffith, CRNA, MS, APN
Lecturer
Clinical: St. Joseph's Hospital, Highland
SIUE Office: 618-650-5318
Cell: 314-504-5140
Alumni Hall, Room 2321A
Email: kygriffi@siue.edu

Megan Hamilton
Lecturer
Clinical:
SIUE Office: 618-650-5320
Cell:
Alumni Hall, Room 2321B
Email: mehamil@siue.edu

TERMINAL SPECIALIZATION COURSE OBJECTIVES

In accordance with the goals and objectives of the Graduate Program in Nursing and compliance with both the Council on Accreditation of Nurse Anesthesia Educational Programs and Council on Certification of Nurse Anesthetists the Anesthesia Nursing Specialization has adopted the following terminal objectives.

Upon completion of the eight-semester course of study at Southern Illinois University Edwardsville School of Nursing Nurse Anesthesia Specialization, the graduate shall be able to:

- I. Perform a pre-anesthetic evaluation of the patient to include:
 - a) Evaluation of patient history, physical findings, laboratory, radiologic and additional diagnostic data.
 - b) Patient interview to establish rapport, gain additional information and prepare the patient psychologically for anesthesia and surgery by discussing anesthetic options.
2. Develop a plan of anesthesia care commensurate with patient needs and consistent with the overall medical and nursing regimen.
3. Identify pathologic, physiologic or pharmacologic problems that might complicate anesthetic management and adapt the anesthesia care plan to accommodate patient needs.
4. Select, test and assembles equipment necessary for the safe conduct of anesthesia, repairing or replacing defective devices. Conducts a comprehensive equipment check.
5. Prepare the patient physically for induction of anesthesia as evidenced by:
 - a) Apply appropriate monitoring devices such as EKG monitor, BP monitoring devices, pulse oximeter, capnographic monitor, temperature monitoring device and other monitors required by the patient's physical condition and the surgical or obstetrical care required.
 - b) Accurately interpret data provided by these devices to provide the patient with increased optimization of anesthesia care.

- c) Calculate, initiate, and manage replacement fluid therapy and blood components for the patient using physiologic principles of fluid management and electrolyte therapy.
 - d) Interpret and utilize data obtained from various non-invasive and invasive monitoring modalities to include but not limited to arterial lines, central venous pressure lines and pulmonary artery catheters.
 - e) Recognize and appropriately respond to anesthetic complications that occur during the peri-anesthetic period.
 - f) Pass the Council on Certification of Nurse Anesthetists' (CCNA) certification examination in accordance with CCNA policies and procedures.
6. Provide general anesthesia for all ages and categories of patients for a variety of surgical, obstetrical, and medically related procedures as evidenced by the:
- a) Administration of anesthetic induction agents for routine and emergency/trauma cases ensuring a rapid and safe induction of anesthesia.
 - b) Selection and utilization of all current anesthesia techniques, agents, adjunctive drugs and equipment in providing anesthesia care.
 - c) Safe discontinuation of all anesthetic agents utilizing appropriate reversal of adjunctive drugs at the termination of the procedure to ensure a smooth emergence from anesthesia.
7. Recognize developing conditions and potential complications, taking appropriate actions with reference to complications that may arise during the course of anesthetic management, seeking consultation with CRNA preceptors/mentors and physicians whenever necessary.
8. Demonstrate skill in airway management as evidenced by:
- a) Assessing respiratory status and ensuring airway patency, implementing measures to correct obstruction.
 - b) Performing atraumatic endotracheal intubation when patient's condition, position or surgical procedure indicates such a method of airway management.
 - c) Effective use of respiratory physiology and pathophysiology using the interpretation of blood gas analysis and pulmonary function testing to manage the ventilatory care of patients during anesthesia.
 - d) Utilizing objective criteria to assess respiratory status prior to extubation of the trachea both in the perioperative and critical care clinical settings, thus enhancing patient safety.
9. Administer and/or manage a variety of regional anesthesia techniques including but not limited to subarachnoid blocks, epidural anesthesia and analgesia, brachial plexus blocks, and intravenous regional anesthesia.

10. Utilize appropriate principles of basic and behavioral sciences in protecting patients from iatrogenic complications as evidenced by:
 - a) Positioning or supervising positioning of patients to assure optimal physiologic function and patient safety.
 - b) Ensuring the safety of the patient and operating room personnel by checking anesthesia equipment and supportive devices.
 - c) Acting as patient advocate and manager of critical incidents for patients undergoing anesthesia and surgery.
 - d) Establishing optimum communication and rapport with other health care team members vital to the patient and the conduct of anesthesia care.
 - e) Recognizing the need for, and participating in, the peer review process, concurrent and retrospective auditing of anesthesia care, and risk management programs, to assure the quality of patient care.
11. Function as a team leader/member in cardiopulmonary resuscitation. Maintain Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), and CPR certification.
12. Participate in the education of patients and the community of interest.
13. Function within appropriate legal requirements as a licensed professional nurse, accepting responsibility for his/her own practice.
14. Utilize commonly accepted infection control standards and precautions.
15. Demonstrate personal and professional integrity and the ability to interact on a professional level as evidenced by:
 - a) Effectively communicating with all individuals influencing patient care
 - b) Utilizing appropriate verbal, nonverbal and written communication in the delivery of peri-anesthetic care.
16. Be vigilant in the delivery of patient care.
17. Deliver culturally competent peri-anesthetic care throughout the anesthesia experience.
18. Apply theory to practice in decision-making and problem solving.
19. Provide nurse anesthesia care based on sound principles and research evidence.
20. Develop a professional role as evidenced by:
 - a) Participation in activities that improve anesthesia care

- b) The ability to function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice
- c) Interaction on a professional level with integrity
- d) Teaching / Educating others
- e) Participation in continuing education activities to acquire new knowledge and improve his or her practice
- f) Participation in state and national professional associations to prepare for active involvement as an advanced practice professional nurse

Academic Policies

1. Student Registered Nurse Anesthetists [hereby referred to as SRNAs] are responsible for policies in the current SIUE School of Nursing Graduate Handbook and SIUE Catalog including those described in this section that addresses specific requirements unique to the Nurse Anesthesia Specialization.
2. Students will observe the scheduled semester breaks and holidays of SIUE (see SIUE website for dates). Absence from the classroom or clinical practica may result in “incomplete” or unsatisfactory course grades and/or the deferral of graduation until the time is made up.
3. Students are responsible for all classroom material covered during any absence. Generally **NO** make-up exams are allowed.
4. The Nurse Anesthesia program recommends that students not be employed when they begin their clinical rotations. Students who chose to be employed **MUST** maintain satisfactory performance in both didactic and clinical areas. If a student does work,

THE STUDENT WILL NOT:

- a. work 11-7 shift prior to a clinical day. A minimum of ten (10) hours of free time must be ascertained prior to reporting to class or clinical.
- b. be allowed to miss a scheduled class or clinical because of work schedules.
- c. accept employment as a nurse anesthetist or represent himself or herself as a nurse anesthetist while enrolled in the specialization.
- d. perform any function deemed to be strictly interpreted as being within the scope of practice of a Certified Registered Nurse

Anesthetist when not participating in an Nurse Anesthesia Specialization Clinical Practicum.

5. Attire and professional demeanor: Personal appearance reflects the standards of the School and University; therefore, the importance of neatness and cleanliness in the clinical setting cannot be overemphasized. **Students should dress consistent with the guidelines at the clinical site in which they are assigned.**

Street clothes may be worn outside the Operating Room under a clean white lab coat. Dress codes in the operating room suite are to be followed at all times. If scrub clothes are to be worn outside the OR, a lab coat must be worn over them unless the assigned institution policy indicates otherwise. Operating room attire may not be worn outside the hospital. The hospital policies on infection control must be followed at all times.

Clinical Guidelines

1. Students are expected to follow all personnel policies of the assigned clinical site.
2. All student anesthetists will be in scrubs no later than 6:00 AM unless directed otherwise by the institution clinical coordinator or designee.
3. Induction of anesthesia will not be started unless the following minimum events have occurred:
 - a. Interview, assessment, evaluation, and counseling of the patient and significant or appropriate family members.
 - b. Formation and discussion of patient care plan and management with the instructor (CRNA or attending anesthesiologist) is mandatory.
 - c. Acquisition of equipment and drugs necessary for safe anesthetic management
4. The following procedures will be adhered to while in the OR suite:
 - a. Where appropriate, masks will be worn at all times in the operating room when sterile packs are open. SRNAs must adhere to Operating Room policy established at each clinical site.
 - b. Gloves and goggles will be worn in accordance with policies at each clinical site and OSHA guidelines.

- c. Masks should be changed, at a minimum, at the end of each procedure.
 - d. Shoe covers or dedicated shoes will be worn at all times in the operating room or in accordance with clinical affiliation policy.
 - e. Surgical hats must be worn when in the operating rooms, with all hair covered.
 - f. Hands must be washed between patients and more often as necessary.
5. All patients coming to and leaving the OR will be safeguarded by side rails and/or by a litter strap.
 6. All patients will have a stethoscope, EKG, blood pressure monitor, and pulse oximeter in place during any anesthetic procedure performed by an SRNA. End-Tidal CO₂ and the O₂ analyzers must be used in all general anesthetic procedures.
 7. All students are expected to see their assigned in-patients no later than the early evening of the day prior to the scheduled surgery or as dictated by the clinical site.
 8. Students will be released from the clinical area by 3:30 PM on most days. If the student's case will be completed by 5:00 PM the student is expected to complete the case. The clinical coordinator or designee has the authority to negotiate whether the student will stay later than 5:00 PM to finish the case. Compensatory time can be awarded to the student if he or she elects to complete the case. The SRNA must obtain confirmation from the appropriate personnel (typically the clinical preceptor) that he/she is free to leave the facility for the day.
 9. All students will follow their patients postoperatively, seeing all inpatients at least once in the first 24 hours if the student is in the clinical site. The student will document the visit using clinical affiliation guidelines. The appropriate preceptor will be notified of the patient's status.
 10. Care plans are a requirement of the AANA Council on Accreditation of Nurse Anesthesia Educational Programs and serve as a meaningful educational tool. Written anesthesia care plans are to be completed and ultimately turned in to SIUE faculty on every patient to which the SRNA has been assigned for administration of an anesthetic, or when directly involved in the anesthesia care during level I and II clinical rotation. During level III and IV clinical rotation, a daily written care plan should be turned in on the most complex case of the day. At level V, students are expected to complete anesthesia care plans when confronted with a new,

challenging or complex clinical situation. Care plans should be given to the preceptor prior to administering the planned anesthetic. Due to the increasing number of outpatient procedures and same day admits, it may be impossible to have a complete written care plan prior to the morning of surgery. In these instances, the anesthetic plan must be formulated and discussed with the clinical preceptor before induction. The clinical preceptor will review the care plan making appropriate written comments and signing the form. The care plan serves as a means of verifying the preceptor's concurrence with the planned technique. Completed care plans are to be submitted to the SIUE Anesthesia faculty.

Attendance Policy

Nurse anesthesia students are expected to demonstrate an excellent record of attendance and punctuality in the clinical area. Repeated tardiness, frequent requests for early dismissal or chronic failure to adhere to the absence policy are not acceptable and may be causes for disciplinary action.

Class attendance is similar to any other occupation. Your occupation while a student is to attend class, complete assignments in a timely fashion, and participate in the class following external preparation. Classroom preparation is designed to provide each student with basic information and foundational material to become an entry-level practitioner. Every class is important or it would not be presented.

If a student must be absent because of illness or injury, telephoning the faculty-of-record before the class begins is a minimum courtesy as a professional. Arrangements must be made to secure information presented in the class. The student continues to be responsible for all material presented.

Sufficient breaks are included in the nurse anesthesia specialization program. If there is an emergency, close contact with the faculty-of-record is essential. Students are to be present and prepared for lecture/discussion or clinical assignments at all scheduled times unless excused by the Program Coordinator or the Assistant Program Coordinator. Excused absences can be granted for illness, emergent, or special circumstances.

Frequent tardiness will affect the individual's ability to gain clarification of key instructional points and will negatively impact learning. Punctuality and preparation are key attributes of a professional and must be demonstrated consistently. If a student misses a specific clinical experience or rotation, the experience or practicum may be rescheduled at the discretion of the Program Coordinator or Assistant Program Coordinator.

MEETINGS

ALL SRNAs are REQUIRED to attend one state (Illinois or Missouri) Anesthesia meeting or Advanced Practice Nursing meeting each year (minimum total of 2). Students in their last year of study are REQUIRED to attend at least 1 of the following 3 meetings:

1. Assembly of School Faculty (typically held in late February)
 - This meeting is primarily for those interested in Nurse Anesthesia education. It is the required meeting for any student requesting a teaching elective rotation in N569b. Student must be granted clearance from the Program Director prior to choosing this option.
2. Mid-Year Assembly (typically held the 3rd week of April)
 - This meeting is primarily for those interested in Nurse Anesthesia political issues.
3. American Association of Nurse Anesthetist (AANA) Annual Meeting (typically held in August during semester break)
 - This meeting is the largest and most general meeting.

While the Nurse Anesthesia faculty work to keep costs down and to facilitate sponsorship moneys, ultimately students are responsible for transportation and accommodation expenses for the above named meetings.

Nurse Anesthesia Practicum

Guidelines for Clinical Practicum

The Nurse Anesthesia Specialization and all affiliating agencies are in complete compliance with the Council on Accreditation of Nurse Anesthesia Educational Programs 2004 Standards for Accreditation. The program of study has been developed to ensure that all students meet and/or exceed the minimum requirements for completion of the Nurse Anesthesia Specialization as defined by these standards, while fulfilling all of the requirements for graduation for the Master of Science degree, Nurse Anesthesia. Upon graduation, the student will meet or exceed the Council on Certification of Nurse Anesthetist's requirements for both clinical and didactic educational experiences to be eligible to sit for the National Certifying Examination.

All anesthesia clinical preceptors are Certified Registered Nurse Anesthetists (CRNAs) or anesthesiologists licensed in the appropriate jurisdictions and credentialed by the appropriate agencies to provide care to patients in the surgical, obstetrical, and critical care environments prior to becoming involved in the clinical instruction of Student Registered Nurse Anesthetists (SRNAs). The clinical preceptors are responsible for clinical instruction, including the evaluation of student performance in the clinical setting. The evaluation includes assessment of the student's acquisition of knowledge, demonstration of the student's understanding of anatomy, physiology, pathophysiology,

chemistry, physics, pharmacological principles and agents, interpretation of data received from all available sources, synthesis and application of principles of anesthesia, and the demonstration of acquired technical skills. Students at no time should be precepted by an Anesthesiologist Assistant (AA).

Clinical Practicum Experiences

Purpose:

Affiliation contracts have been developed to provide rich clinical experiences for the SRNAs. Clinical experiences enable the SRNA to develop increased proficiency and confidence in the selection and management of anesthetic techniques, and the management of patients care in multiple facilities including rural hospital locations. These experiences offer the student opportunities to learn additional anesthetic techniques and strategies for care in different environmental settings, among different cultural groups under varying conditions and situations.

Objectives:

1. Develop communication and interpersonal skills.
2. Develop autonomy and independence while identifying interdependence of all members of the care team.
3. Observe anesthesia departmental management roles and identify duties and responsibilities of all members of the anesthesia team within the facility's care model.
4. Develop skills in managing acute and chronic pain situations.
5. Develop an awareness of billing practices and requirements for reimbursement from third-party payers including government and private insurers.
6. Develop nurse anesthesia patient care skills.

All students are expected to be present at all clinical assignments unless excused by the Program Coordinator or Assistant Program Coordinator and Clinical Coordinator for clinical site.

All students are expected to be prepared to provide nursing care for the patient(s) to whom they are assigned and to have completed all assignments that constitute preparation for activities in which they are going to engage.

Each clinical preceptor has a right and obligation to remove a student from a clinical setting/agency if the student is not prepared for the practicum experience. Students who are repeatedly unprepared will face potential disciplinary action, failure of the course, or removal from the program of study. Students assume responsibility and are liable for their own actions. Students are also responsible for maintaining the confidentiality of patient information.

In the clinical setting/agency the Clinical Coordinator assumes responsibility for the assignment of students to all patients and clinical experiences.

Students are expected to achieve all identified minimum clinical objectives within the allotted time. In order to accomplish objectives, students are expected to attend every clinical session in its entirety. Failure to do this will jeopardize the student's progression and potential for success in the Nurse Anesthesia Specialization.

Clinical Affiliation Criteria

While assigned to a given clinical affiliation, the SRNA will be expected to:

1. Recognize and adhere to the organizational culture of the particular facility:
 - a. Follow rules and regulations established for the agency.
 - b. Follow rules and regulations established for the affiliations.
 - c. Understand and utilize the proper "Chain of Command" in a variety of circumstances.
 - d. Become familiar with the accepted procedures for communications (telephones, beepers, computers).
2. Prepare the environment for safe, rapid, flexible management of the patient:
 - a. Assemble and check anesthesia equipment and monitors.
 - b. Organize the prescribed room/rooms in an efficient manner for the planned case/cases to include emergency interventions.
 - c. Become familiar with the surrounding environment to include retrieving supplies and equipment.
 - d. Become familiar with the policies and procedures that govern anesthetic care delivery.
3. Plan the appropriate anesthetic management pre-operatively, intra-operatively, and post-operatively:
 - a. Assess patients for classifications, organ systems, drug and fluid therapy, diagnostic and consultative study results, previous anesthesia experiences, NPO status, and full stomach.

- b. Calculate fluid and blood replacement.
 - c. Plan for appropriate types of inductions, awake vs. rapid sequence vs. modified rapid sequence, nasal vs. oral intubations, and fiberoptic intubations.
 - d. Evaluate patient physiologic data, and planned procedures to determine the appropriate need for non-invasive or invasive monitoring.
 - e. Operate and describe routine equipment utilized in emergency cases and major surgical procedures including arterial lines, CVP, Swan Ganz catheters.
 - f. Evaluate a patient and administer anesthesia for an emergency procedure without a formal, written anesthetic management care plan.
4. Analyze the various facilities and determine information regarding the following:
- a. Composition of the Anesthetic Care Team.
 - b. Departmental management strategies regarding policies, organizational culture, budget, finances, scheduling, inservice.
 - c. Utilization of other health care providers and support personnel.
 - d. Care and ordering of anesthesia supplies, equipment, and resources.
 - e. Care and recording policies for narcotics and other anesthesia related drugs.
 - f. Required information needed on anesthetic records, billing cards, other patient reports.
 - g. Protocols for various procedures.
 - h. Infection control protocols in various facilities.
 - i. Policies governing banked blood and blood products.

Conditions of Instruction and Supervised Experience

1. The clinical affiliation site in conjunction with SIUE Nurse Anesthesia Faculty will appoint a Clinical Coordinator.
2. The Clinical Coordinator along with the Program Coordinator and Clinical Liaison will endeavor to assure that the learning objectives are met.
3. An orientation will be provided for the SRNA at the beginning of the affiliation experience. This orientation will include, but not be limited to, the affiliating institution's policies, procedures, and patient safety rules.
4. The SRNA's daily assignments will be made by the Clinical Coordinator or designee, keeping in mind the objectives of the affiliation rotation.

5. Specific requests may be made by the SRNA if a certain case type is needed to meet the Council on Accreditation minimum numbers and to meet the objectives of the affiliation.
6. Each student will receive a written evaluation of his/her clinical performance upon completion of the rotation from the Clinical Coordinator or designee.
7. Disciplinary problems will be reported to the Program Coordinator for evaluation in accordance with college policies.
8. SRNAs will comply with the existing rules and regulations of the Department of Anesthesia to which they are assigned.

Patient Safety

The nature of clinical nursing courses is such that students are involved in the direct delivery of patient care services. The primary purpose of any course is to provide education for students. However, when direct patient care is involved in the learning experience, the safety and well-being of patients are of paramount concern. Clinical nursing courses are structured so that as students progress through the program, they are expected to demonstrate increasing competence and independence in providing nursing care to assigned patients.

Students are expected to demonstrate achievement of clinical course objectives by the end of a clinical course, completing the course of instruction in the allotted time (end of the specific semester). **IN THE UNUSUAL CIRCUMSTANCE THAT, IN THE INSTRUCTOR'S PROFESSIONAL JUDGMENT, A STUDENT IS UNABLE TO PROVIDE SAFE NURSING CARE TO PATIENTS AND, IF THIS DEFICIT IS SUCH THAT IT CANNOT BE REMEDIED DURING THE IMMEDIATE GIVEN CLINICAL TIME WITHIN THE LIMITS OF AVAILABLE FACULTY SUPERVISION, THE STUDENT WILL BE REMOVED FROM THE CLINICAL SETTING.**

Within 72 hours of the incident requiring removal of the student from any clinical facility, the Nurse Anesthesia Specialization Faculty will be convened to discuss the incident and make recommendations to the Program Coordinator regarding the student's disposition. This recommendation will be forwarded to the Graduate Student Affairs Committee, Southern Illinois University Edwardsville School of Nursing for a final decision regarding the student's status in the course. The student will not return to a clinical practicum (at any location) until the final decision is made.

Specific Practicum Guidelines

1. There will be a CRNA or anesthesiologist immediately available to the SRNA in each anesthetizing area at all times.

The Council on Accreditation of Nurse Anesthesia Programs interprets "immediately available" to mean that either a CRNA or anesthesiologist with staff privileges will be within the suite of rooms in which the student is performing an anesthetic and will be free to respond to a summons by the student. Lack of immediate assistance and consultation by a CRNA or anesthesiologist in all anesthetizing areas at all times when a student is administering anesthesia shall be cited as a critical weakness.

At no time during an anesthesia clinical rotation will a SRNA be precepted by an Anesthesia Assistant or any other non-specified care provider.

2. The ratio of student to instructor in the clinical area at any given time shall not exceed 2:1 and shall be directly related to:
 - a. The student's period of enrollment in the program and his/her readiness to assume responsibility.
 - b. The physical status of the patient.
 - c. The complexity of the anesthetic and/or surgical procedure.
 - d. The ability of the instructor.
 - e. A CRNA or anesthesiologist must be physically present and directly supervising the SRNA's during induction and emergence in all pediatric cases through all phases of the program.
3. The student shall be involved in the total anesthesia management of the patients assigned to his/her care.

Restriction of a student's clinical participation in total anesthesia management, impeding his/her opportunity to develop as a competent, safe, nurse anesthesia practitioner capable of functioning in all type of practice settings, constitute a critical weakness.

- a. SRNA's management of the patient shall include, but not be limited to:
 - 1) Preoperative evaluation of the patient including the interview, physical assessment, and review of appropriate patient records.
 - 2) Development of a written or verbal anesthetic care plan which demonstrates that planning of the anesthesia process is occurring prior to each anesthesia administration.

- 3) Administration of the anesthetic.
 - 4) Participation in and decision making during the anesthesia management.
 - 5) Implementation and maintenance of an accurate complete anesthesia record.
 - 6) Participation in immediate postanesthesia care.
 - 7) The conduction of post-anesthesia evaluation
 - 8) Appropriate and accurate documentation of controlled substances and their return to the appropriate area.
4. Basic principles of anesthesia practice shall be identified for each clinical practice setting and included in an orientation to the practicum:
- a. Pre- and post-anesthesia evaluation of the patient.
 - 1) Interview techniques
 - 2) Evaluation of the patient's chart
 - 3) Physical assessment of the patient
 - b. Charting
 - c. Monitoring of Vital Signs
 - d. Familiarization with basic anesthesia equipment available at the clinical site
 - e. Overview of anesthetic agents and accessory drugs available.
 - f. Departmental philosophy and ethical position relative to the provision of anesthesia care.

Work related injuries

1. Any accident of injury that occurs at an affiliation clinical agency when the SRNA is assigned to that facility must be reported **immediately** to the agency's appropriate department manager (CRNA or anesthesiologist) and to one of the SIUE program faculty (program coordinator, assistant program coordinator or Clinical Liaison). The incident/injury must be reported to the University Risk Management Office with in 24 hours. The SRNA should then follow SIUE School of Nursing policy and procedure for students involved in an incident / injury in a clinical agency. The cost of

any appropriate medical care or lab tests will be the responsibility of the student.

2. It is mandatory that the SRNA follow the CDC recommendations that evaluation of a needle stick or exposure to other potentially infectious materials must occur **within one hour** from the time of exposure. SRNAs are expected to comply with all applicable federal laws issued by the United States Occupational Health and Safety Administration (OSHA) regarding safety standards applicable to their domain of clinical practice.

Absences as a result of illness

If a student is going to miss a clinical day due to illness, he or she is responsible for notification of all of the following individuals, no later than 6:00 am the morning of, or preferably the evening before, the scheduled assignment.

Two (2) telephone calls are required, to notify the following individuals:

- 1) Nurse Anesthesia Clinical Liaison, or Anesthesia Program Coordinator/Assistant Program Coordinator (if it is during the night and not an emergency, please email the individual and follow with a phone call at an appropriate time later the same day)
- 2) Clinical Coordinator or designee at the clinical site

Guidelines for Call Experience

Purpose

The growth and development of the student is aided by the selection of specific learning experiences. The purpose of the call experience is to assist the student in refining skills, and developing self-confidence and competency in the management of emergent, unscheduled procedures. These procedures often include patients who may not be ideally prepared for anesthesia and surgery, such as pediatric patients, medical and surgical emergencies, obstetrical emergencies, and trauma in patients of all ages and ASA categories.

Objectives

Upon completion of the call experience the student will be able to:

1. Apply theoretical knowledge and prior clinical learning to select optimum techniques of anesthesia in the emergency surgical and obstetrical patient.

2. Participate as a member of the hospital health team in such areas as cardiopulmonary resuscitation, patient assessment, and management of critical respiratory emergencies.
3. Use effective communication skills, practicing professionalism and courtesy in anesthetist-physician, anesthetist-nurse, and anesthetist-patient interactions.

Time Commitment

1. All students will rotate on call when Nurse Anesthesia Specialization Faculty, by clinical evaluation and input from clinical preceptors, determine that the student is ready to participate in the experience.
2. Students will be responsible for checking dates of call and being present for all scheduled call experiences.
3. Weekend call = 24 hour experience 7:00 AM - 7:00 AM.
4. Weekday call = 16 hour experience 3:00 PM - 7:00 AM.
5. Each student, while on call, will be supervised by either a CRNA or anesthesiologist during all procedures.

Clinical Affiliate Call Guidelines:

1. The clinical site must assure patient safety, student learning, and adherence to the standards and guidelines for clinical practice. The SRNA may not take call without a CRNA or anesthesiologist physically present and immediately available when the SRNA is caring for a patient.
2. Established policies and procedures at each clinical site and agency will outline the specific call expectations of the students.
3. The Clinical Coordinator at each clinical site will clarify call room locations, break rooms, study rooms, communication procedures, attire, etc.
4. The Clinical Coordinator at each respective will adhere to the Nurse Anesthesia Specialization policy relative to the Call Experience.
5. The student will not be scheduled for a clinical call experience that exceeds 16 hours on weekdays and 24 hours on weekends without the following day (post call day) free of clinical commitments.

6. All SRNA's must have a minimum of 10 hours of non-clinical time before returning to the clinical area.
7. It is the responsibility of the staff anesthesiologist and/or CRNA to determine which emergency cases the nurse anesthesia student will participate in during the call experience.
8. The Clinical Coordinator will identify the clinical responsibilities of the student during the call experience (i.e. responses to ER, OB, and CPR/Resuscitation Team).
9. The student must notify the preceptor before **EACH AND EVERY CASE OR PROCEDURE.**
10. The Clinical Coordinator, at the respective clinical site, will ensure compliance with guidelines for supervision outlined in the Clinical Practicum Guidelines in the Nurse Anesthesia Specialization Mandatory Activity Packet.
11. No student will be scheduled for call experience on class days or the day before class during all semesters of the program.
12. The affiliating agency will provide CRNAs and anesthesiologists committed to teaching students, and study time for the SRNA to prepare for clinical assignments and responsibilities.
13. The clinical affiliation site will provide quarters for students while on in-house call at the facility without charge to the SRNA or SIUE School of Nursing.

Relationship to Students While Assigned to a Clinical Practicum

1. The Program Coordinator or Assistant Program Coordinator is responsible for coordinating the clinical experiences for the SRNA:
 - a. Scheduling students for practicum experiences
 - b. Coordinating clinical experience expectations with the affiliating clinical coordinator
 - c. Making visits at affiliating agencies at a minimum of once a year while students are physically present at the agency
 - d. Reviewing each student's evaluation of the experience with the affiliating clinical coordinator at the conclusion of the student's rotation.
2. While on affiliation rotation, the SRNA will immediately notify the Program Coordinator and Assistant Program Coordinator of any problems during the affiliation. If an unacceptable daily evaluation is received, the SRNA

must notify their assigned nurse anesthesia faculty advisor within 24 hours.

Clinical Objectives - Specialty Rotations

Cardiothoracic Anesthesia

Upon completion of the four week rotation in Cardiothoracic Anesthesia the student will be able to:

1. Relate the major concepts of cardiac physiology as they apply to anesthesia delivery. Emphasis should be placed on the following areas:
 - a. Coronary circulation
 - b. Control of cardiac output
 - c. Factors modifying ventricular function
 - d. Factors influencing myocardial oxygen balance
2. Detail the monitoring requirements for patients undergoing thoracic procedures. Special consideration should be directed to the use of central venous catheters and pulmonary artery catheters (indications, insertion techniques, complications, and data interpretation).
3. Discuss the alterations of respiratory and cardiac physiology in caring for the patient undergoing surgery in the lateral decubitus position and with an open chest.
4. Describe the indications, technique, equipment and ramifications of "one-lung anesthesia".
5. Delineate preoperative assessment and laboratory data that provide information about cardiac function and performance.
6. Describe the pathophysiology and attendant anesthetic considerations in patients with valvular heart disease, including specifically mitral stenosis, mitral regurgitation, aortic insufficiency, and aortic stenosis.
7. Understand the anesthetic considerations involved in caring for the patient with congenital heart disease involving atrial and ventricular septal defects.
8. Detail the various philosophies of premedicating patients with cardiac disease.

9. Discuss the hemodynamic consequences when the following drugs are administered in patients with cardiac disease: inhalation anesthetics, narcotics, muscle relaxants, hypnotics and tranquilizers.
10. Review the concept of cardiopulmonary bypass including arrangement of extracorporeal apparatus, physiology of coronary bypass, hemodynamic changes consequent to bypass, and patient preparation for initiation and discontinuation of bypass.
11. Relate the peri-bypass pharmacological interventions employed in the pre-pump and post-pump period with specific consideration to vasodilators, noncatecholamine inotropes and catecholamine based inotropes.
12. Understand and defend the use of antibiotic prophylaxis in certain cardiovascular disease states.
13. Appreciate the risk involved in caring for a patient who has sustained a perioperative myocardial infarction. Identify the factors that correlate with increased risk of perioperative MI and guidelines to follow in planning the anesthetic care for patients who have experienced MI.
14. Delineate the pathophysiology and anesthetic implications of the patient with asymptomatic ischemic heart disease.
15. Assemble and calibrate equipment for pulmonary artery catheters, arterial lines and central venous pressure monitoring.
16. Efficiently insert invasive monitoring lines.
17. Utilize the fiberoptic laryngoscope to verify endotracheal tube placement.
18. Understand the principles and develop expertise in the mechanics of endobronchial tube placement for either a right or left lung procedure.
19. Assess the patient scheduled for cardiothoracic procedures.
20. Plan and implement appropriate anesthetic management for a variety of cardiothoracic procedures.

Pediatric Anesthesia

Upon completion of the four-week rotation in pediatrics the student will be able to:

1. Perform a comprehensive preoperative evaluation of the pediatric patient.

2. Describe common premedicant drugs, write sample orders with the appropriate dosage and route of administration.
3. Describe the preanesthetic fluid and NPO orders and justify those decisions relative to the patient's age, physical habits, etc.
4. Relate hazards peculiar to anesthesia for infants. These should include small airway size, short trachea, funneling of larynx, small blood volume, rapid circulation time, high oxygen consumption, organ immaturity, irregularity of the signs of anesthesia, variability of response to muscle relaxants and physiological hazards such as autonomic immaturity, thermoregulatory imbalance and increased metabolic rate.
5. Select the proper size of mask, oropharyngeal airway, and endotracheal tube in both length and diameter.
6. Identify appropriate monitoring strategies and equipment for the pediatric patient.
7. Demonstrate the use of the heated humidifier in both the circle and nonrebreathing systems and outline its clinical efficiency.
8. Describe methods for preservation of body temperature in an infant or child undergoing surgery giving the advantages and disadvantages of each and outline the physiologic sequelae of hypothermia.
9. Skillfully perform an inhalation induction, detailing the physical (i.e. concentration effect) and physiological principles (i.e. changes in minute ventilation and cardiac output) fundamental to safe anesthetic delivery.
10. Plan and/or implement an anesthetic technique for the following surgical procedures or disease states:
 - a. Infants under one month of age
 - (1) Intestinal obstruction
 - (2) Omphalocele
 - (3) Gastroschisis
 - (4) Diaphragmatic hernia
 - (5) Tracheoesophageal fistula
 - (6) Imperforate anus
 - (7) Meningocele
 - (8) Pyloric stenosis
 - (9) Pierre-Robin syndrome

- b. Infants under one year of age
 - (1) Inguinal hernia
 - (2) Cleft lip and palate repair
 - (3) Cystic hygroma and other tumors or abscesses located around the neck
 - (4) Hydrocephalus for pneumoencephalogram or shunt procedure
 - c. Children greater than one year of age
 - (1) Tonsillectomy and adenoidectomy
 - (2) Myringotomy
 - (3) Circumcision
 - (4) Hernia repair
 - (5) Orthopedic procedures
 - (6) Cerebral palsy
 - (7) Mental retardation
 - (8) Abdominal surgery
10. Demonstrate the skill of orotracheal or nasotracheal intubation. Identify characteristics of the pediatric airway as compared to adult airways and identify the advantages, disadvantages and indications of endotracheal intubation.
 11. Calculate crystalloid replacement on the basis of patient weight, amount of exposed field, insensible water loss, length of procedure and state of hydration. Blood volume/replacement strategies will be detailed. Determine blood/fluid volumes in neonates, infants and children.
 12. Describe the management of the child with croup/epiglottitis.
 13. Articulate the management of a cardiac arrest in the infant/small child in the operating room.
 14. Demonstrate the use of a variety of general anesthetic techniques in the pediatric patient population to include inhalation, intravenous, dissociative, and balanced anesthesia.
 15. Describe the pathophysiology, predisposing factors, anesthetic management and treatment of malignant hyperthermia.

Obstetrical Anesthesia

Purpose

The purpose of this clinical practicum is to provide the SRNA with added educational and professional experiences in anesthesia and analgesia for the

obstetrical patient, fetus, and/or neonate during all aspects of labor, vaginal delivery, or Cesarean section.

Overall Objectives

In addition to the objectives outlined for the Nurse Anesthesia Specialization, the student will be able to:

1. Assess the physiologic changes peculiar to the mother and fetus during the various phases of pregnancy and labor.
2. Evaluate and interpret the direct and indirect effects of the pharmacologic agents used by anesthesia providers on the mother, fetus, and/or neonate.
3. Compare and contrast the risks and benefits of various anesthetic techniques and agents on the parturient, fetus, and/or the neonate.
4. Before administering an anesthetic to the parturient evaluate the significance of obstetrical complications and analyze the most advantageous plan for anesthetic management.

Specific Terminal Objectives

Upon the completion of the rotation in obstetric anesthesia, the SRNA will be able to:

1. Outline an obstetrical preoperative visit and note how it differs from routine surgical preoperative interviews, to include classic physiologic changes associated with pregnancy.
2. Plan and or implement anesthetic plan for the administration of anesthesia for the following obstetric emergencies: abruptio placenta, placenta previa, fetal distress, retained placenta, tetanic uterine contractions, amniotic fluid embolus.
3. Provide a rational plan of anesthetic management for routine and emergency C-sections under general or regional anesthesia.
4. Describe the pharmacokinetic/pharmacodynamic profile of the following local anesthetics: lidocaine, mepivacaine, bupivacaine, tetracaine, and chlorprocaine.
5. Describe and demonstrate the technique of regional anesthetics including anatomical and physiological considerations, indications and

contraindications for; continuous epidural, single-dose epidural and subarachnoid blocks.

6. Detail the specifics of infant resuscitation, including appropriate drugs and dosages.
7. Articulate the anesthetic considerations for pre-eclampsia, and eclampsia to include potential drug interactions, and pertinent physiology.
8. Describe the effects of anesthetic agents/adjuncts on uterine activity, blood flow, and the progress of labor.
9. Detail Mendelson's syndrome and treatment regimes applicable to the parturient.
10. Outline the anesthetic considerations for the pregnant patient (preterm) presenting to the anesthetist for non-obstetrical surgery. Include teratogenicity of agents, monitoring of fetus, implications of maternal hemodynamic changes.
11. Describe the etiology, physiologic course and treatment for supine hypotensive syndrome.
12. Describe the indications and contraindications for vasopressor use in the obstetrical population.
13. Discuss the systemic effects of IV analgesics/sedatives in the parturient and the newborn.

Currently the obstetrical anesthesia experience is not accomplished through one site and is not formally assigned as a single rotation. The O.B. experience is facilitated through many clinical sites as the opportunity comes available.

Clinical Evaluation of students

Each student is evaluated daily by the clinical instructor(s) supervising the student to include all individual cases. These daily evaluations are used primarily to provide feedback to the student regarding his/her performance, and to demonstrate progression in learning. At the end of each rotation the clinical coordinator is encouraged to consult with all clinical instructors who have worked with the student and complete a summative evaluation. These evaluations are compiled by the Program Coordinator, Assistant Program Coordinator or their designee. The clinical coordinator may issue a comment card (Green=Commendation, Yellow=Unsatisfactory Performance or Red=Critical incident) related to an event or group of events if such seems warranted. A nurse anesthesia care plan must be completed for each case. Case evaluations must be turned in by Tuesday of the

week following the clinical experience. All the above are taken into account when assigning a final grade for each clinical course.

Visit to Affiliations

The Nurse Anesthesia Clinical Liaison, Program Coordinator or the Associate Program Coordinator will visit the affiliating institution at least once a year while students are present.

Records

1. **EACH STUDENT IS RESPONSIBLE FOR KEEPING HIS/HER OWN RECORDS OF CLINICAL EXPERIENCES IN ACCORDANCE WITH ESTABLISHED REQUIREMENTS OF THE NURSE ANESTHESIA SPECIALIZATION AND SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE SCHOOL OF NURSING.**
2. **CURRENTLY A WEB-BASED CASE REPORTING SYSTEM (MEDHARBOR) IS USED. EACH SRNA WILL BE ASSIGNED A CODE WITH WHICH TO ACCESS THE SITE AND ENTER DATA. DATA MUST BE ENTERED FOR THE PRECEDING MONTH BY THE 10TH OF THE CURRENT MONTH.**
3. **THESE DATA ARE DIRECTLY SUBMITTED TO THE AANA UPON COMPLETION OF THE NURSE ANESTHESIA PROGRAM. THIS STUDENT SUBMITTED DATA PROVIDES EVIDENCE THAT THE SRNA HAS COMPLETED THE PROGRAM MINIMUM REQUIREMENTS TO ALLOW HIM OR HER TO WRITE THE CERTIFICATION EXAMINATION.**

Expenses

SRNAs are responsible for their own expenses.

Attire

1. SRNAs shall comply with the existing rules of the affiliating institution.
2. A nametag designating the student's name and status will be worn when interacting with patients or performing tasks associated with the affiliation.
3. Attire in the operating suite or labor and delivery suite will be provided and designated by the affiliating institution.

Lockers

Each affiliating institution will designate an area for securing the student's personal items.

Evaluation Process

Evaluation is an ongoing process by which levels of performance and progress are determined. The Nurse Anesthesia Specialization within the Graduate Program in Nursing includes ongoing assessment of all aspects of the program to insure continuing growth and development of the program, its students and faculty. All students in the program are required to complete a variety of evaluations relating to the general program, academic and clinical coursework. Evaluation forms will be distributed in person and electronically with information about timelines for submission. It is both a faculty and student responsibility to ensure that these evaluations are completed in a timely manner as prescribed by the accreditation requirements of the Council on Accreditation (COA).

Student Evaluation

Evaluation of students is used to guide behavioral changes in the process of the student becoming a safe, competent, professional nurse anesthetist. Measurement of the student's ability to master skills, knowledge of procedures and attitude necessary for the safe practice of anesthesia is a vital part of the program. Strategies utilized in the evaluation include:

1. **Self-Evaluation**—Each student shall evaluate his/her performance on each clinical case. This self evaluation shall be documented on the Nurse Anesthesia Clinical Evaluation Form (See pages 38-39 in this Handbook). All students will complete two Self-Evaluation Exams (SEE) offered by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA) during the program. The first one will be taken at the end of the completion of the fourth semester of study (August/September) and the second one will be completed at the end of the seventh semester of study (August/September). The results of the first SEE exam will be used by students and faculty to identify areas needing further study. The second SEE exam results will be included as part of the formal grading process in NURS 569a, the final didactic course in the program. A cumulative scaled score equal to or higher than the average scaled score for all examinees nationally must be achieved by each student in order to successfully pass NURS 569a without further remediation (See NURS 569a Syllabus for details).
2. **Care Plans** - All students shall complete care plans on a daily basis. Care plans are turned in to the clinical instructor for review and comment prior to the induction of anesthesia. The care plans are also reviewed periodically by the Program Coordinator.

3. Clinical Evaluation - Each student is evaluated daily by the clinical instructor(s) supervising the student to include all individual cases. These daily evaluations are used primarily to provide feedback to the student regarding his/her performance, and to demonstrate progression in learning. At the end of each rotation the clinical coordinator is encouraged to consult with all clinical instructors who have worked with the student and complete a summative evaluation. These evaluations are compiled by the Nurse Anesthesia Clinical Liaison, Program Coordinator, Assistant Program Coordinator or their designee. Clinical grades are a percentage of the overall course grade a student achieves. In order to pass a course the student must successfully complete the clinical practicum

It is the SRNA's responsibility to provide each clinical preceptor a daily evaluation form prior to the start of cases each day and to make all possible efforts to ensure that the forms are completed by the preceptor(s). Completed clinical evaluations are attached to the care plan with both the SRNA and preceptor signatures and placed in the SRNA's file. There must be a clinical evaluation for each case in which the SRNA is involved.

4. Special Emphasis Cards – These cards are given to all clinical coordinators and available to all clinical preceptors. They may be issued to students if their performance falls well outside of the normal parameters expected for the clinical level.

A **Green Card** is issued as a special commendation related to student performance above and beyond what is expected. A **Yellow Card** represents a problem in student performance that needs to show significant improvement. A **Red Card** is issued when an incident with a student occurs that could or would have caused significant morbidity or mortality without intervention or if a student has created an unacceptable workplace environment.

Anytime a special Emphasis Card is issued, it will be followed up with further communication between the clinical coordinator and the Coordinator or the Assistant Coordinator of the anesthesia major. It will also necessitate a meeting between the student and the Coordinator or the Assistant Coordinator of the anesthesia major. Documentation of the events will be placed in the students file.

Faculty Evaluation

Evaluation of faculty is employed to assist in the development of each faculty member, provide feedback concerning the conduct of the specialization, and aid in the ongoing process of course development and curricular improvements. Strategies utilized in evaluation of faculty include:

1. Self-evaluation - Each member of the clinical and academic faculty shall evaluate his/her own performance in either the clinical setting, classroom or both, if appropriate. Faculty should strive to identify areas of strengths as well as areas in which there is room for improvement.
2. Didactic Faculty Evaluation - Each individual participating in classroom instruction in the Nurse Anesthesia specialization will be evaluated by the students at the end of each semester using the School of Nursing tool for student evaluation of classroom teaching.
3. Clinical Faculty Evaluation - Clinical preceptors will be evaluated by the students at the end of each clinical course and in December during their exit interview. Students will complete a Clinical Faculty evaluation form for instructors they have worked with in the clinical area. Information from these evaluations will be compiled by the Program Coordinator and reviewed by the Graduate Student Affairs Committee. A copy of the evaluation will be provided to the clinical preceptor.

Program Evaluation

Evaluation of the program is an ongoing process designed to assess the present status of the program, determine future goals, and identify methods of achieving those goals. Methodologies employed for program evaluation include:

1. Course evaluation - Students complete a Course Evaluation at the conclusion of each course in the Nurse Anesthesia Specialization. These evaluations are compiled by the secretarial staff, and reviewed by the Program Coordinator and Graduate Advisory Committee.
2. Student Evaluation of the Program - Annual program evaluation is conducted in December. Students are asked to provide feedback using the same tool utilized by the Council on Accreditation of Nurse Anesthesia Educational Programs in conducting accreditation review. Information obtained from these evaluations is shared with both the academic and clinical faculty, as well as the Graduate Student Affairs Committee. Goals for improving and strengthening the specialization are derived in part from student feedback via this mechanism.
3. Faculty Evaluation of the Program - Each year in December clinical and academic faculty are asked to evaluate the program using the same format employed by the Council on Accreditation of Nurse Anesthesia Educational Programs when conducting an accreditation review. Information obtained from these evaluations is compiled by the Program Coordinator and reviewed by the Graduate Advisory Committee. Goals

for improving and strengthening the specialization are derived in part from faculty feedback via this mechanism.

4. Clinical Agency Evaluation - Students and faculty shall evaluate each clinical agency where students participate in learning.
5. Self-evaluation Examination Scores (SEE) - Students will take the Self-evaluation Examination at the end of year-1 prior to starting year-2 and at the end of Year-2. Data from these exam scores along with other evaluation data will be utilized for curriculum development and in determining program effectiveness in meeting terminal objectives.
6. Employer Evaluation of Graduates - Employers of graduates of the Nurse Anesthesia Specialization will be surveyed at one-year post graduation to determine their perceptions of how well the graduate was prepared by the program for practice. Information from these evaluations will be incorporated with other feedback to develop modifications which will improve the effectiveness of the program.
7. Graduate Evaluation of Program - Graduates of the Nurse Anesthesia Specialization will be surveyed one year after completion of the program to solicit feedback regarding their perceptions of how well the program prepared them for practice.

TUITION AND EXPENSES

1. In addition to regular tuition and fees the Nurse Anesthesia specialization assesses a clinical charge each semester the student is enrolled in a clinical course. The fee is reviewed annually and subject to change as required. Students will be notified of any changes in the assessment fee prior to implementation. The current fee is \$4,600.00 per clinical semester beginning with the Summer-Year 2 Clinical Practicum and continuing each semester until graduation.
2. Book costs for the program are estimated to be approximately \$2500 to \$3200. Students **must** purchase the books required for each course.
3. Anesthesia related Professional Liability insurance for students enrolled in the Nurse Anesthesia Specialization will be provided through the Southern Illinois University Edwardsville self-insurance program.
4. **SEE Exam:** All students will be taking the Self-Evaluation Examination (SEE) from the Council on Certification of Nurse Anesthetist (an evaluation of the student's knowledge and preparation to take the National Certifying Examination). It is offered by the Council on Certification of Nurse Anesthetists. This test will be taken twice during the program, at the end of the first and 2nd years of study. The results of the first SEE exam will be used by students and faculty to identify areas needing further study. The second SEE exam results will be included as part of the formal grading process in NURS 569a, the final didactic course in the program. A cumulative scaled score equal to or higher than the

average scaled score for all examinees nationally must be achieved by each student in order to successfully pass NURS 569a without further remediation (See NURS 569a Syllabus for details).

5. Certification examination fees are the responsibility of the student and are approximately \$700.00. This fee is adjusted annually by the Council on Certification of Nurse Anesthetists.
6. Current associate membership in the American Association of Nurse Anesthetists (AANA) is required. This fee is subject to change by the AANA. Cost to the student is \$100.00 for the duration of the program. The student will receive all publications of the AANA and is eligible for reduced registration fees at all AANA meetings.
7. The student is responsible for purchasing a laboratory coat, goggles or safety glasses and shoes to be worn in the operating room.
8. The AANA does have an emergency loan fund. Funds are available in the amount of \$500 for emergency purposes to students who have completed at least 1 full year of their respective program. Applications can be made through the AANA at www.aana.com.
9. SRNAs are REQUIRED to attend one state (Illinois or Missouri) Anesthesia meeting or Advanced Practice Nursing meeting each year (minimum total of 2). Students in their last year of study are REQUIRED to attend at least 1 of the following 3 meetings:
 - Assembly of School Faculty (typically held in late February)
This meeting is primarily for those interested in Nurse Anesthesia education. It is the required meeting for any student requesting a teaching elective rotation in N569b.
 - Mid-Year Assembly (typically held the 3rd week of April)
This meeting is primarily for those interested in Nurse Anesthesia political issues.
 - American Association of Nurse Anesthetist (AANA) Annual Meeting (typically held in August during semester break)
This meeting is the largest and most general meeting.

While the Nurse Anesthesia faculty work to keep costs down and to facilitate sponsorship moneys, ultimately students are responsible for transportation and accommodation expenses for the above named meetings.

RECORDS

The Program Coordinator is the custodian of all records concerning the American Association of Nurse Anesthetists and its Councils. All student records will be retained until the student passes the Certification Examination. These records are maintained in the Program Coordinator's or Assistant Program Coordinator's or School of Nursing Student Files. Records relating to possible litigation may be retained in the SIUE legal department.

By direction of the Council on Accreditation of Nurse Anesthesia Educational Programs, records of individual students are kept in the School until successful completion of the certification exam and shall include:

1. Application for admission
2. Interview Letter
3. Acceptance Letter
4. Academic records
5. Completed Periodic, End-of-Semester, and Summary Evaluation Forms
6. Clinical case records
7. Corrective action forms and decisions
8. Copies of transcripts and application for the Certification Examination

Student's records that will be kept indefinitely include any records that may relate to litigation, final case records, summative student evaluations, Council on Certification of Nurse Anesthetist (CCNA) transcripts and grievances.

REQUIREMENTS FOR GRADUATION

In addition to the University and School of Nursing policies regarding requirements for graduation, students enrolled in the Nurse Anesthesia Specialization must satisfy the following requirements:

1. Completion of 72 semester hours of required course work in accordance with the progression and retention policy (SIUE School of Nursing).
2. Administration of anesthesia for a minimum of 550 cases (recommended 650 cases) in the categories described by the Council on Accreditation of Nurse Anesthesia Educational Programs (COA).
3. Completion of all terminal educational objectives of the program and recommendation by the faculty that such have been met in a satisfactory manner.

PROCEDURE FOR WRITING THE CERTIFICATION EXAMINATION

All students graduating from the Nurse Anesthesia Specialization will be eligible to write the National Certifying Examination offered by the Council on Certification of Nurse Anesthetists.

APPLICATION FOR THE NATIONAL CERTIFYING EXAMINATION IS THE RESPONSIBILITY OF THE GRADUATING STUDENT. THE PROGRAM COORDINATOR AND ASSISTANT PROGRAM COORDINATOR PROVIDE SUPPORT TO THE STUDENT. HOWEVER, EACH STUDENT IS RESPONSIBLE FOR THE ACCURACY OF ALL RECORDS AND APPLICATION FORMS.

A certified check or money order must accompany each application. The Candidate Handbook from the Council on Certification of Nurse Anesthetists has current information on the fee for the Certification examination. The current fee is \$725.00.

CLINICAL SITES

Clinical Site	Clinical Coordinator	Anesthesia Director	Student Level	Specialty/rotation Emphasis
Anderson Hospital 6800 State Route 162 Maryville, IL 62062 (non-active)	Currently Non-active	Dr. James Powell 618-650-5257w	III, IV, & V	General/ Thoracotomies or Pulmonary Cases
Blessing Hospital P. O. Box 7005 Quincy, IL 62305 217-223-1200 Ext. 6330	Karen Wilson 217-223-8400w Ext. 6330 217-440-9036c	Dr. Joe Kuhlman 217-223-8400w Ext. 6336	I,II,III,IV,V	General, Neuro, O.B./ Emergency Cases & Thoracic Epidurals
Community Memorial Hospital 400 Caldwell, Staunton, IL 62088	Paul A. Darr 618-444-3666c 618-635-4310w pdarr@siue.edu	Paul A. Darr 618-444-3666c 618-635-4310w pdarr@siue.edu	III, IV, & V	Outpatient General, MAC, Airway Management Skills, Pain mgmt., Independent practice
Cross Roads Hospital #8 Doctors Park Road Mt. Vernon, IL 62864	Don Bertschi 618-244-5500w 618-204-8710c	Dr Brad Bernstein Email babmjb@pol.net	O,I II	General, Independent practice/ Special Airway Management Techniques & Neuroskeletal
Gateway Regional Medical Center 2100 Madison Avenue Granite City, IL 62040	Neal Patterson 618-798-0066c 618-798-3057w Neal_pat@hotmail.com	Dr. Charles Bishop 618-798-3057w	O,I II,III,IV,V	General, O.B.
Herrin Hospital 201 South 14th Street Herrin, IL 62948	Rick Boren 618-303-6541c 618-942-2171w rboren@msn.com	Dr. Kinney 618-942-2171w	O,I,II,III,IV,V	General Independent practice/ Regional Anesthesia

Hillsboro Area Hospital 1200 East Tremont Hillsboro, IL 62049 217.532.6111	Bart Wetzel 217-556-0868c	Bart Wetzel 217-556-0868c Theresa Rapp Dir of Surgical Svcs. 217-532-4272w theresarapp@hillsboroareahospital.org	III, IV, V	Outpatient General, MAC, Airway Management Skills, Pain mgmt., Independent practice
Jersey Community Hospital 400 Maple Summit Road Jerseyville, IL 62052	John Woodward 618-946-4464c 618-498-8420w woodardj@yahoo.com	Larry Rawlings 618-498-8420w	O,I,II,III,IV,V	General Independent practice/ Special Airway Management Techniques & Regional Anesthesia
Memorial Hospital Belleville 4500 Memorial Drive Belleville, IL 62223	Jennifer Jobe 618-257-4076w	Dr Sander 618-257-4076w	O,I,II,III,IV,V	General, Neuro Cardiac/ Vascular & Anesthesia for Craniotomies and other Neuro
Memorial Hospital of Carbondale 405 West Jackson Carbondale, IL 62901-1467 618-549-0721	James Wade 618-967-4100c Laylawade1@hotmail.com	Dr. Gar Kenny 618-549-0721w Ext. 65850	I, II, III, IV, V	General, Regional, O.B. Pediatrics, Neuro/ Regional, Craniotomies, Pulmonary-Thoracotomies
Memorial Medical Center 701 North First Springfield, IL 62781 217-788-3000	Jayne Fiaush 217-467-1202p 217-553-8209c Fiaush.jayne@mhsil.com or Fiaush@comcast.net Dana Flatley 217-691-2058c 217-492-2540p Flatly.Dana@mhsil.com	Lori Bruntjen-Carter Director of Anesthesia Services 217-788-3752w 217-467-5050p Bruntjen-Carter.lori@mjsil.com Melony Ellis Anesthesia Manager 217-788-3509w 217-492-3443p Ellis.Melony@mhsil.com	O,I,II,III,IV,V	General, Neuro, Cardiac, Peds
Passavant Area Hospital 1600 West Walnut Jacksonville, IL	John Gregory 217-245-9541w	Dr Peter Roodhouse 217-245-9541w ext 3127	III, IV, & V	General, O.B.

SSM DePaul Health Center 12203 DePaul Drive Bridgeton, Missouri 63044	Nick Curdt 314-322-6997	Dr Alan Schneider 314-344-7049 Gr_nwanesthesialtd@msn.com	O,I,II,III,IV,V	General, Neuro, some O.B./ ECTs
St. Anthony's Health Center Saint Anthony's Way P.O. Box 340 Alton, IL 62002-0340 618-474-6180	Emily Dix 314-707-4120c emrapp@hotmail.com	Dr Figueroa 618-465-6489w	O,I,II,III,IV,V	General, O.B./ Ortho
St Anthony's Hospital 503 North Maple Effingham, IL 62401 217-347-1576	Mary Bryant 217-419-2858c marybryant@me.com	Dr. Sandy Hecht 217-342-2121 217-347-1361 shecht@sae.hshs.org Chief CRNA Justin Smith 731-803-8873 slyone77@gmail.com	III, IV, & V	General, O.B./ Regional - Spinal
St Anthony's Medical Center 10010 Kennerly Road St Louis, Missouri 63128	Kristy Zimmer 314-323-8710	Dr Wilkinson 314-525-1969	O,I,II,III,IV,V	General, Neuro, O.B
St Elizabeth's Hospital 211 South Third Street Bellville, IL 62220 618-324-2120	Danny Geib 618-222-7352h 618-234-2120 ext, 1822 dannycat@aol.com	Dr Edward Schuessler 618-234-2120w Ext. 1822 or 2888 eschuessler@sebh.org	O,I,II,III,IV,V	General, Neuro/ Regional, Craniotomies, Pulmonary- Thoracotomies
St Johns Hospital 800 East Carpenter Street Springfield, IL 62769 217-544-6464 Ext. 44350	Rebecca Collier 217-492-7104p 217-246-5917c becjo74@hotmail.com Stacey Bonner 217-492-7102p sbonner@gmail.com	Dr Frederick Gehrmann Anesthesia office 217-525-5643w	O,I,II,III,IV,V	General, Neuro, Cardiac, Peds

St. John's Mercy Hospital 901 E. Fifth Street Washington, MO 63090	Robert Brand 636-390-7468c 636-399-6412w rbrand64@att.net	Dr. Robert Moore 636-399-6412w	O,I,II,III,IV,V	General, O.B./ Regional & Ortho
St. John's Mercy Medical Center 615 S. New Ballas Road St. Louis, MO 63141	James J. Gibbons MD 314-540-6772c gibbonsjim@aol.com	Dr. Donald Arnold	III, IV, & V	General, Peds (select)/ Burn Cases
St. Joseph Hospital 1515 Main Street Highland, IL 62249 618-526-5439	Donald Smith, CRNA 618-651-2680w 618-581-9613c justasmith@yahoo.com	Donald Smith, CRNA 618-651-2680w 618-581-9613c justasmith@yahoo.com	O, I, II, III, IV, V	Rural, Independent Practice, General, Regional
Touchette Regional Hospital 5900 Bond Avenue Centerville, IL 62207	Dr Brad Bernstein babmjb@pol.net	Dr Brad Bernstein Email babmjb@pol.net	I,II,III,IV,V	General, O.B./ Spinals, Emergency Cases

AFFILIATIONS COULD BE DROPPED OR ADDED TO BEST FACILITATE THE SRNA'S LEARNING EXPERIENCES

The Program reserves the right to revise the number and/or capacity of clinical affiliations at any time, thereby potentially changing the location and number of sites through which the SRNAs may be required to rotate. Each individual SRNA does not rotate through all sites, but every effort is made to provide each student with a similar clinical experience.

THE PROGRAM RESERVES THE RIGHT TO CHANGE THE CLINICAL AND DIDACTIC FORMAT DESCRIBED HERE AS REQUIRED IN ORDER TO MEET THE EDUCATIONAL OBJECTIVES OF THE STUDENTS.

**Forms
for
Anesthesia Students**

School of Nursing

Nurse Anesthesia Clinical Evaluation Form

3 = Good	Performance in clinical is that which is expected at the students current semester in the program
2 = Below Average	Performance in clinical is less than expected at the students current semester in the program.
1 = Poor	Performance in clinical does not meet basic minimum acceptable practice, principles and guidelines.

Objectives		1	2	3
1.	Demonstrate a working knowledge of the routine monitoring equipment required to provide anesthesia care according to established standards and guidelines.			
2.	Demonstrate working knowledge of anesthesia machines as evident by... <ul style="list-style-type: none"> ▶ Proper preoperative anesthesia machine check. ▶ Proper ventilator management of the patient under general anesthesia. 			
3.	Demonstrate safe nurse anesthesia practice as applies to OSHA and hospital regulations.			
4.	Demonstrate adequate organizational skills as displayed in room preparation. <ul style="list-style-type: none"> ▶ Medication setup ▶ Airway setup ▶ Emergency equipment ▶ Additional equipment required for specific cases 			
5.	Perform a complete preanesthetic evaluation. <ul style="list-style-type: none"> ▶ Recognizes significant pathology. ▶ Recognized pharmacologic agents that may influence the choice and course of anesthesia. ▶ Recognize abnormal test results. 			
6.	Formulate an appropriate nursing anesthesia care plan. <ul style="list-style-type: none"> ▶ Selection of anesthetic technique ▶ Selection of agents and adjunctive drugs ▶ Calculation of fluid requirements. 			
7.	Provide appropriate nurse anesthesia care. <ul style="list-style-type: none"> ▶ Allow the patient to express fears and concerns ▶ Proper patient positioning for procedures. ▶ Demonstrating basic communication skills. ▶ Education of patient regarding type of anesthesia and risk factors. 			
8.	Administration of anesthetic to a patient: <ul style="list-style-type: none"> ▶ Induction ▶ Selection of anesthetic agents and adjunctive drugs compatible with physical status and current drug therapy. ▶ Monitors patient intraoperatively to maintain anesthetic depth. 			
9.	Demonstrate a working knowledge of the various anesthetic agents and adjunctive drugs.			
10.	Accurate completion of anesthesia records.			
11.	Safely transport the patient to the recovery room after proper evaluation of condition, report the course of anesthesia and any events that occurred or could occur to appropriate personnel.			
12.	Demonstrate nurse anesthesia skills & techniques <ul style="list-style-type: none"> ▶ Airway management /intubation ▶ Recognition of potential and actual airway complications ▶ Regional techniques ▶ Central & arterial line placement. 			
				N/A
				N/A
13.	Demonstrates appropriate professional behavior. <ul style="list-style-type: none"> ▶ Works affectively with preceptor and other members of OR team. ▶ Open to constructive feedback. ▶ Accept responsibility for his/her behavior. 			

Instructor's Comments: Please comment on 1's or 2's:

Student Self-Evaluation	1	2	3

Surgery	Anesthesia Choice	ASA
1.		
2.		
3.		
4.		
5.		
6.		
7.		

_____ was evaluated while providing anesthesia for case number _____ Listed above.
Student

 Clinical Preceptor Signature

 Student Signature

 Facility

 Date

Level I: At the conclusion of the third month in the clinical practicum, the student will be able to:

1. Demonstrate a working knowledge of monitoring equipment utilized in providing anesthesia care to include:
 - A. Basic monitoring modalities for vital signs
 - B. Oxygen analyzer
 - C. Pulse oximeter
 - D. End-tidal CO₂ monitor
 - E. Agent Monitors
 - F. Peripheral nerve stimulators
 - G. Spirometer
 - H. Ventilator alarms.
2. Demonstrate an understanding of the physical laws of electricity as they apply to safe anesthesia practice.
3. Organize equipment:
 - A. Organize and set up the following equipment and supplies prior to the induction of anesthesia:
 - (1) Anesthesia machine
 - (2) Anesthetic agents and accessory drugs
 - (3) Equipment for airway management
 - (4) Appropriate intravenous equipment and fluids
 - B. Organize all equipment and material to initiate an intravenous infusion
4. Perform a preanesthetic evaluation, assigning the appropriate physical status classification:
 - A. Demonstrating basic communication skills, both verbal and non-verbal
 - B. Recognizes significant pathology that impacts on the anesthetic management of the patient
 - C. Recognizes EKG abnormalities
 - D. Recognized pharmacologic agents that may influence the choice and course of anesthesia
 - E. Recognize abnormal and normal laboratory data and their importance with respect to the anesthesia plan
5. Formulate an appropriate anesthesia care plan for an ASA Class I or II patient incorporating physiologic principles based on preoperative assessment, conference with clinical faculty and proposed surgical procedures.
6. Appropriately provide anesthesia nursing care to an ASA Class I or II patient during the perioperative period.
 - A. Properly identifying the patient
 - B. Allow the patient to express fears and concerns demonstrating understanding and compassion
 - C. Successfully perform IV catheter insertion
 - D. Apply basic monitoring equipment and recognize gross abnormalities
 - E. Properly position the patient for anesthesia and surgery.
7. Appropriately administer an intravenous and/or inhalation anesthetic to an ASA Class I or II patient:
 - A. Induce the patient, safely utilizing intravenous or inhalation techniques
 - B. Selection of anesthetic agents and adjunctive drugs compatible with patient's physical status and current drug therapy
 - C. Demonstrate proper airway management with a mask
 - D. Perform uncomplicated oral and nasal intubations
 - E. Recognize airway obstruction and implement measures to correct obstruction
 - F. Monitor patient intraoperatively to maintain anesthetic depth
8. Demonstrate a working knowledge of the various anesthetic agents and adjunctive drugs including signs of anesthetic depth, minimal alveolar concentration (MAC), mechanism of action, side effects, dosage and elimination.
9. Calculate the fluid requirements of an ASA Class I or II patient and apply physiologic principles in evaluating fluid and electrolyte status and blood loss before, during and after anesthesia and surgery.
10. Record all pertinent information accurately and legibly on anesthesia records.
11. Safely transport the patient to the recovery room after proper evaluation of condition, report the course of anesthesia and any events that occurred or could occur to appropriate personnel.
12. Demonstrate a basic understanding of the use of mechanical ventilators intra-operatively and post-operatively.
13. Conduct a post anesthesia visit within 72 hours documenting pertinent information.
14. Accept responsibility for his/her own behavior.

Level II: At the conclusion of the sixth month in the clinical area the student will, in addition to refining Level I objectives be able to:

1. Demonstrate an understanding of all monitoring equipment utilized in providing anesthesia care to include:
 - A. Basic monitoring modalities for vital signs
 - B. Oxygen analyzer
 - C. Pulse oximeter
 - D. End-tidal CO₂ monitor
 - E. Agent Monitors
 - F. Peripheral nerve stimulators
 - G. Respirometer
 - H. Ventilator alarms
 - I. Arterial lines
 - J. Central Venous Catheters
 - K. Pulmonary artery catheters
 - L. Doppler ultrasound

2. Appropriately provide anesthesia nursing care to an ASA Class I, II and III patient during the perioperative period:
 - M. Properly identifying the patient
 - N. Allows the patient to express fears and concerns. Demonstrates understanding and compassion
 - O. Successfully perform IV catheter insertion
 - P. Apply basic monitoring equipment and recognize gross abnormalities
 - Q. Properly position the patient for anesthesia and surgery

3. Appropriately administer an intravenous and/or inhalation anesthetic to an ASA Class I, II, or III patient:
 - R. Induce the patient safely, utilizing intravenous or inhalation techniques
 - S. Selection of anesthetic agents and adjunctive drugs is compatible with patients physical status and current drug therapy
 - T. Demonstrate proper airway management with a mask
 - U. Perform uncomplicated oral and nasal intubations
 - V. Recognize airway obstruction and implement measures to correct obstruction
 - W. Monitors patient intraoperatively to maintain anesthetic depth

4. Demonstrate increasing proficiency in the administration of general anesthesia exercising sound clinical judgment in adjusting the anesthetic to meet patient needs and surgical requirements.

5. Demonstrate beginning competency in the administration and management of regional anesthesia. Including but not limited to: SAB, brachial plexus block and IV regional techniques

6. Discuss theories of anesthesia uptake, distribution and elimination explaining how specific disease states modify these principles.

7. Understands the need for cooperation with medical and nursing staff.

Level III: At the conclusion of the tenth month in the clinical area the student will, in addition to continuing to refine the skills identified in Levels I and II objectives will be able to:

1. Demonstrate synthesis of didactic instruction with clinical application:
 - A. Identification of problems and implementation of appropriate interventions during anesthetic management of ASA Category I, II, III, and IV patients
 - B. Accurately assess and manage the perioperative needs of the patient
 - C. Evaluate and integrate laboratory data in developing the anesthesia care plan
 - D. Demonstrates increasing skill in minimizing or correcting airway difficulties with minimal assistance
 - E. Demonstrate refinement of skills in the utilization of mechanical ventilation during the perioperative course
2. Discuss the anatomic and physiologic principles during case reviews identifying situations in which anesthesia care must be modified for the following types of clinical problems in both adult and pediatric clients:
 - A. Cardiovascular disease
 - B. Respiratory disease
 - C. Central nervous system disease
 - D. Peripheral vascular disease
 - E. Hepato-renal disorders
 - F. Endocrine disorders
 - G. Neurologic disorders
3. Recognize advantages and disadvantages of specific methods and techniques as they apply to the patient's physical status and proposed surgical procedure.
4. Demonstrate increasing proficiency in the administration and management of regional anesthesia (SAB, brachial plexus block and IV regional techniques).
5. Interpret ECG abnormalities and identify appropriate intervention.
6. Administer physiologically sound anesthesia for ASA Category I, II, III, and IV patients, utilizing techniques that are compatible with the condition of the patient:
 - A. Integrates learning from other areas of medicine and nursing into a plan for anesthesia care
 - B. Demonstrates sound clinical judgment, based on scientific principles when confronted with problems during the anesthetic process
 - C. Justifies and provides rationale for selection of anesthetic techniques, methods and procedures
 - D. Understands principles and indications for complex monitoring systems
 - E. Formulates and initiates a plan to terminate anesthesia and safely emerges the patient with minimal assistance
 - F. Performs complicated oral and nasal intubations with minimal assistance.

Level IV: At the conclusion of the fourteenth month in the clinical area the student will, in addition to continuing to refine the skills identified in Levels I, II and III objectives will be able to:

1. Demonstrate self-confidence in providing anesthesia care.
2. Accept constructive criticism from instructors, peers and other members of the health care team.
3. Administer physiologically sound anesthesia for all ASA Classification patients, utilizing techniques that are compatible with the condition of the patient:
 - A. Integrates learning from other areas of medicine and nursing into a plan for anesthesia care
 - B. Demonstrates sound clinical judgment, based on scientific principles when confronted with problems during the anesthetic process
 - C. Justifies and provides rationale for selection of anesthetic techniques, methods and procedures
 - D. Understands principles of and indications for complex monitoring systems
 - E. Formulates and initiates a plan to terminate anesthesia and safely emerges the patient with minimal assistance
 - F. Performs complicated oral and nasal intubations with minimal assistance
4. Demonstrates increasing skill in the administration of a variety of regional techniques to include epidural analgesia and anesthesia.
5. Perform skillfully and diversely during emergency and stressful situations.
6. Formulate, implement and evaluate a plan of anesthesia care for the obstetrical patient.
 - A. Applies knowledge of the physiology of pregnancy when determining anesthetic requirements and selecting techniques for vaginal delivery and cesarean sections
 - B. Analyzes complications of labor and delivery and their impact on anesthetic management
 - C. Integrates learning from other areas of medicine when evaluating and treating anesthetic complications and problems associated with OB anesthesia
7. Provide physiologically sound anesthesia for an increasingly diverse population of patients recognizing the special needs of each group to include:
 - A. Adults
 - B. Geriatrics
 - C. Pediatrics
 - D. All ASA categories
 - E. Emergencies

Level V: At the conclusion of the eighteenth month in the clinical area the student will, in addition to continuing to refine the skills identified in Levels I, II, III, and IV objectives will be able to:

1. Utilize deductive reasoning when solving problems during the anesthetic process.
2. Demonstrate knowledge of the anesthetists' responsibilities during emergencies inside and outside the operating room.
3. Demonstrate proficiency in intubation of both the adult and pediatric patient.
4. Exercise creativity in the planning of anesthesia care.
5. Apply advanced principles and knowledge of pharmacology in anesthetic practice.
6. Select and implement appropriate means of ventilation that meet the individual respiratory needs of the patient.
7. Evaluate the effectiveness of respiratory therapy for which the anesthetist is responsible.
8. Understand and utilize pulmonary function tests and blood gas analysis in the anesthetic management of patients.
9. Perform skillfully when managing the special anesthetic requirements of the patient who presents for emergency surgery.
 - A. Identifies the unique problems associated with providing anesthesia care to the emergency patient
 - B. Formulates and implements an appropriate plan of care for emergency surgery
 - C. Recognizes potential complications in the emergency patient that may occur perioperatively
10. Utilizes principles of safe anesthesia practice when functioning in areas outside the operation suite.
11. Comprehensively assesses patient preoperatively in preparation for anesthesia and surgery.
12. Develop an anesthetic care plan that reflects an understanding of anatomy, physiology, and pathology as it relates to the underlying disease state and identify implications for anesthetic management.
13. Administer a safe, physiologically sound anesthetic utilizing a wide variety of general and regional techniques.
14. Manage respiratory care outside the operating suite.
15. Assume responsibility for continuing education in anesthesia by attendance at conferences and seminars.

CRITICAL INCIDENT REPORT

The focus of this card is an incident that could or would have caused significant morbidity or mortality without intervention or has created an unacceptable workplace environment.

Student Name

Preceptor Signature

Date

Signature of Site Clinical Coordinator

Please attach a written explanation of the incident and mark the appropriate box on the back.

Please mark the appropriate incident and attach a written explanation.

- PRE-OP EVALUATION
- ROOM SETUP
- AIRWAY MANAGEMENT
- DRUGS
- FLUIDS
- INTRA-MANAGEMENT
- MACHINES
- BREATHING CIRCUITS
- UNPROFESSIONAL BEHAVIOR
- UNRECOGNIZED/MIS-MANAGED OTHER PROBLEMES

COMPLETE ALL SIGNATURES ON REVERSE

**This is a copy of the Critical Incident Report Card.
It will be printed on Red paper**

**COMMENDATION
CARD**

The focus of this card is to give the Preceptor an opportunity to make comments of commendation relative to the student's performance. If needed, append a letter.

Student Name

Preceptor Signature Date

Signature of Site Coordinator

COMMENTS

**This is a copy of the Commendation Card
It will be printed on Green paper**

**American Association
of
Nurse Anesthetist
(AANA)**

2011

**Record of
Clinical Experiences**

2011 Record of Clinical Experience

Affix School Seal or Notary
if separate page

Codes: () = Minimum Required Cases [] = Preferred Number of Cases

Review the academic and clinical experience records to make sure that all information and numbers are accurate and achievable. The minimum didactic and clinical requirements must be met or the candidate will not be eligible to write the National Certification Examination.

Candidate Name: _____ AANA ID # _____ Program Code # _____

	Number		Number
I. Total Number of Anesthesia Cases (550)		IX. Methods of Anesthesia	XX
II. Total Hours of Anesthesia Time		A. General anesthesia (350)	
III. Total Clinical Hours		B. Induction, maintenance, emergence	XX
IV. Patient Physical Status	XX	1. Intravenous induction (200)	
A. Class I		2. Inhalation induction [25] (10)	
B. Class II		3. Mask management [40] (25)	
C. Class III & IV (100)		4. Laryngeal mask airways [40] (25)	
D. Class V [5]		(or similar devices)	XX
V. Special Cases	XX	5. Tracheal intubation	XX
A. Geriatric 65+ years [10] (50)		a. Oral (200)	
B. Pediatric	XX	b. Nasal [10]	
a. 2-12 years [7] (25)		6. Total intravenous anesthesia [25] (10)	
b. under 2 years [2] (10)		7. Emergence from anesthesia (200)	
c. Neonate (under 4 weeks) [5]		C. Monitored anesthesia care [50] (25)	
C. Trauma/Emergency [5] (30)		D. Regional techniques	XX
D. Ambulatory/Outpatient (100)		1. Management (30)	
E. Obstetrical Management [4] (30)		2. Administration (Total of a, b, c) (25)	
1. Caesarean delivery [1] (10)		a. Spinal [50]	
2. Analgesia for labor [1] (10)		b. Epidural [50]	
VI. Position Categories	XX	c. Peripheral [40]	
A. Prone (20)		X. Arterial Technique	XX
B. Lithotomy (25)		A. Arterial puncture/catheter insertion (25)	
C. Lateral (5)		B. Intra-arterial blood pressure monitoring (25)	
D. Sitting (5)		XI. Central Venous Pressure Catheter	XX
VII. Anatomical Categories	XX	A. Placement (Total of a, b) [10] (5)	
A. Intra-abdominal (75)		a. Actual	
B. Extrathoracic (15)		b. Simulated	
C. Extremities (50)		B. Monitoring (15)	
D. Perineal (15)		XII. Pulmonary Artery Catheter	XX
E. Head	XX	A. Placement [5]	
1. Extracranial (15)		B. Monitoring [10]	
2. Intracranial [2] (5)		XIII. Other	XX
3. Oropharyngeal (20)		A. Intravenous catheter placement (100)	
F. Intrathoracic [4] (15)		B. Mechanical ventilation (200)	
1. Heart [1] (5)		C. ACLS – Provide expiration date: month ____ year ____	
2. Lung (5)		D. PALS – Provide expiration date: month ____ year ____	
3. Other		E. Pain management (acute/chronic) [10 cases]	
G. Neck [1] (5)		F. Alternative airway management techniques	XX
H. Neuroskeletal (20)		(Total of 1, 2) [40] (10)	
I. Vascular [2] (10)		1. Fiberoptic techniques	XX
J. Other		(Total of a, b, c) [15] (5)	
VIII. Pharmacological Agents	XX	a. Actual placement	
A. Inhalation agents (200)		b. Simulated placement	
B. Intravenous induction agents (200)		c. Airway assessment	
C. Intravenous agents – muscle relaxants (200)		2. Other techniques [25] (5)	
D. Intravenous agents – opioids (200)			

SECTION XI

DOCTOR OF NURSING PRACTICE
STUDENT INFORMATION

All policies pending faculty approval, Fall 2011

Doctor of Nursing Practice Program Introduction

The SIUE Post-Master's DNP program is designed for nurses holding a nursing master's degree in an advanced nursing practice specialty area or in health care administration. Guided by faculty mentors, DNP candidates enrich and deepen their specialty practice by engaging in transformative educational activities. Through experiential learning, self assessment and reflection, community engagement, interprofessional relationships and scientific inquiry, nurses emerge as leaders, transforming their practice and health care in self-identified areas of concern and influence. The program culminates in a doctoral practice project that reflects a synthesis of the knowledge and skills gained throughout the candidate's educational experience.

To facilitate learners' access to DNP education, the program is offered primarily online with intermittent, scheduled face-to-face intensive learning experiences. Educational strategies focus on the development of meaningful relationships and scholarship competencies needed at the highest level of nursing practice. These competencies are based upon the eight essentials in the *Essentials of Doctoral Education for Advanced Nursing Practice* from the American Association of Colleges of Nursing (2006), <http://www.aacn.nche.edu/dnp/pdf/essentials.pdf>. Coursework and experiences throughout the program culminate in student achievement of the Doctoral Student Outcomes.

Doctoral Student Outcomes

- Use creative reasoning, critical thinking, self-reflection, and scientific inquiry as a foundation for clinical investigative competencies.
- Critique and selectively translate science to guide decision making in practice settings.
- Appraise and use information systems and technologies.
- Use a interdisciplinary approach to improve health outcomes for individuals and populations.
- Provide organizational and system leadership to continuously improve quality of health care.
- Demonstrate leadership in the care of diverse, underserved, and vulnerable populations.
- Evaluate and shape policy that improves the health of individuals and populations.
- Collaborate with individuals, groups, and communities to promote health, prevent illness, and improve health outcomes.

Graduate Student Policies

Doctoral students are subject to all policies located in the Graduate Student Handbook, unless the policy specifies that it pertains only to masters or nurse anesthesia students. Therefore, students should read through the entire Graduate Student Handbook.

DNP Curriculum Plan*

The curriculum plan for the post-master's DNP at SIUE School of Nursing requires that students complete 33 - 36 credit hours. In addition to completing the required credit hours, students must complete 1000 practicum hours. Upon admission to the program, the Assistant Dean for Graduate Programs will review prior coursework in completed master's programs to determine the amount of clinical practicum hours that can be transferred into the program. Up to 500 practicum hour will be accepted from prior master's programs. Students who are deficient in clinical practicum hours may need to take additional residency hours to graduate with 1000 practicum hours. DNP students must attend on-campus intensive experiences for one week at the beginning of year one and for 3 days at the beginning of year 2. The intensive experiences provide students with opportunities for networking; workshops on available technologies that help to facilitate the educational process; and introductions to courses, faculty, potential faculty chairs, and other DNP students. Dates of the intensive experiences will be announced each year as early as possible to facilitate travel arrangements.

Semester 1 (Fall Year One)	Semester Hours
Nurs 600 Theory Guided Practice	3
Nurs 617 Advanced Applications of Epidemiology in Practice 3	
Nurs 695a Health Care Innovations Seminar **	<u>1</u>
	7
Semester 2 (Spring Year One)	
Nurs 620 Health Care Informatics	3
Nurs 604 Evaluating Evidence for Improving Practice/Health Care Outcomes 3	
Nurs 695c Doctoral Practice Project**	<u>2</u>
	8
Semester 3 (Summer Year One)	
Nurs 691 Organizational and Systems Leadership in Health Care	3
Nurs 695b DNP Residency***	<u>3-6</u>
	6-9
Semester 4 (Fall Year Two)	
Nurs 605 Health Policy and Finance for Advanced Nursing Leadership	3
Nurs 601 Studies in Genomics and Ethics	3
Nurs 695c Doctoral Practice Project**	<u>2</u>
	8
Semester 5 (Spring Year Two)	
Nurs 695c Doctoral Practice Project**	<u>4</u>
	4
Total Credits	33-36

*The curriculum plan may be subject to change, however, no additional hours can be added.

**Planning for the doctoral project begins in Fall Year 1 with 695a and continues throughout the progression of study as N695c (total of 8 Doctoral Practice Project credit hours).

***Individualized residency goals (N695b) and plan for completion must be established during Spring Year One. The majority of students will only require 3 credit hours for the residency course.

DNP Timeline for Important Milestones

Due	Milestone
Fall, Year One	<ul style="list-style-type: none"> - Attend week-long Intensive Experience on campus (Sunday through Friday) - Meet with Assistant Dean for Graduate Programs to discuss total number of clinical hours needed throughout program. (complete form) - Complete N600, N617, and N695a - Begin Electronic Portfolio development and share with project chair. Track hours. - Refine PICO question for Final Project. Complete PICO form, submit to Chair. - Select project chair by mid-semester. Email name of chair to Assistant Dean. - Begin to identify external stakeholder for Final Project. - Begin project management file. Start charter and scope statement, as well as begin developing initial tasks. - Begin review of literature for Final Project.
Spring, Year One	<ul style="list-style-type: none"> - Complete N620, N604, N695C (2 of 8 credits) - Complete CITI Tutorial - Continue work on Electronic Portfolio - Identify all committee members by 3rd week of semester. Complete Final Project Committee Form. - Complete Residency & DNP Final Project Form with approval of project chair for each site for project and for proposed residency. Complete Residency Plan form. - Convene meeting with all committee members to obtain approval of project idea and title before end of semester. Complete Final Project Idea/Title Approval Form - Begin writing introduction and literature review for Final Project - Continue work on charter, scope statement, and tasks
Summer, Year One	<ul style="list-style-type: none"> - Complete N691 and 695b - Continue work on Electronic Portfolio - Refine introduction and literature review for Final Project - Develop draft of Project Design - Begin work on IRB Proposal(s) for Graduate School and institution where project will be completed, if needed - Refine project tasks, milestones, and dependencies (work breakdown structure)
Fall, Year Two	<ul style="list-style-type: none"> - Participate in 3 day (2 night) on-campus immersion at beginning of semester - Complete N605, N601, and N695c (2 of 8 credits) - Secure approval by all committee members of final project plan. Meet with committee either during immersion or a scheduled date later in semester. Submit charter and scope statement with plan. - Submit IRB proposal to Assistant Dean for Grad Programs & Graduate School - Begin project implementation after IRB approval - Apply for graduation if planned for May of Year Two. Apply semester before graduation. - Apply for Written Comprehensive Exam (form) to be held in Spring, Year Two
Spring, Year Two	<ul style="list-style-type: none"> - Complete N695c (remaining 4 of 8 credits) - Take Written Comprehensive Examination - Complete implementation of project - Finalize complete draft of Final Project

Due	Milestone
	<ul style="list-style-type: none"> - Present project summary in public oral presentation - Submit electronic final copy to Graduate Secretary for permanent files - Attend nursing convocation for hooding and University graduation

DNP Final Project Guidelines

I. Introduction

The development and completion of a scholarly final DNP project is required of all SIUE School of Nursing DNP students. This project is designed to demonstrate a synthesis of the student's DNP coursework and mastery of an advanced specialty within nursing practice. The purpose of the final DNP project is to implement an evidence-based project that improves patient and healthcare outcomes for a specific population. In particular, the student will identify a clinically relevant problem in nursing and use a systematic approach to design, execute, and evaluate the project. Conducting the project will lay the groundwork for the student's future scholarship and practice.

II. Definition of DNP Final Project

The final DNP project is designed to address an identified need of a group, population, and/or community through a systematic evidence based approach that is supported by stakeholders. The project must evolve over the course of the curriculum. Upon completion of the project, the student will demonstrate:

1. advanced clinical reasoning consistent with their practice specialty
2. sophisticated expertise in designing quality, safe, and ethical healthcare delivery systems
3. advanced levels of systems thinking
4. interprofessional collaboration in the analysis of complex organizational issues
5. advanced skills in translating evidence for the improvement of healthcare outcomes
6. visionary leadership in the development and implementation of health policy at an institutional, local, state, federal, and/or international level

III. Committee Selection and Composition

Prior to the selection of the project committee chair and committee members, the Assistant Dean of the Graduate program will provide advisement to each student.

Committee Composition:

The committee for the DNP Final Project shall consist of a minimum of three members. The committee project chair must be a doctorally prepared SIUE School of Nursing faculty member with Graduate II status and interest or expertise in the student's project. One additional committee member must be a doctorally-prepared faculty member from SIUE, but may or may not be a School of Nursing faculty member. The third committee member will be external to the University and may be from a clinical agency or be an expert related to the project's topic of interest, methodology, or clinical focus. If desired, a fourth committee member with related expertise to the project topic may be added, in consultation with the project chair. At least one of the committee members must be from the student's practice specialization. The chair must approve all committee members.

Role of Committee Project Chair: The chair will serve as the leader of the student's committee; this will include helping the student refine the topic of the project and mentoring the student in the development, implementation, and evaluation of the project.

Role of Committee Members: Consistent with their expertise, committee members will provide advisement and critical critique throughout the project process.

Timeline:

The student will secure a committee project chair by mid-semester of Fall, year one.

The student will collaborate with the project chair to identify the additional committee members; these final committee members should be identified by the third week of Spring semester, Year One, with a meeting of all committee members before the end of the same semester. (This meeting may involve tele-conferencing by some members). The project chair must approve all committee members.

Final approval of the project topic must be obtained by all committee members by the end of Spring semester, Year One.

An oral defense of the project proposal shall be made to the project committee during the Fall semester, Year Two.

Dissolution of Committee:

Any changes to the project committee after starting the project must be discussed with the project chair and committee members, and approved by the Assistant Dean for Graduate Programs. Changes in the project committee must be submitted in writing to the Dean for Graduate Programs and a new Final Project Committee Form completed and signed.

IV. Written and Oral Exams

- A. A written comprehensive exam will be administered at the completion of all didactic coursework to assess synthesis of course content.
- B. An oral presentation of the project will be presented at the completion of the project. This oral defense includes a formal presentation lasting 30 minutes; it should include a description and summary of the project, as well as project implications and limitations. All committee members are expected to be in attendance. The presentation is open to the public; students, faculty, project stakeholders are encouraged to attend.

IV. Links to sample titles and abstracts of DNP projects (subject to change)

- A. <http://sn.umdj.edu/academics/dnp/CompletedCapstoneList.pdf>
- B. http://www.nursing.uiowa.edu/academic_programs/graduate/dnp/abstracts.htm

Sample DNP Project Outline

TITLE PAGE
COPYRIGHT PAGE
EXECUTIVE SUMMARY
ACKNOWLEDGEMENTS
TABLE OF CONTENTS
LIST OF TABLES
LIST OF FIGURES
LIST OF APPENDICES

Section

- I. Foreground of the Problem
 - a. Problem Statement
 - b. Background of the Problem
 - c. Project Significance
 - d. Definition of Terms
 - e. PICO Question
- II. Review of Evidence
 - a. Methodology for search and review
 - b. Integrative Summary
 - a. Limitations (of Search)
 - b. Conclusions, Gaps (based on the evidence)
- III. Theoretical Framework or Conceptual Model
- IV. Project Design (IRB approval process as appropriate)
 - a. Stakeholders
 - b. Setting and Population
 - c. Needs Assessment (if necessary)
 - d. Outcome Measurements
 - e. Timeline
 - f. Required Resources
 - g. Analysis/Evaluation Plan
- V. Project Implementation
- VI. Project Findings and Results
 - a. Discussion of Results
 - b. Evaluation of Results Related to the Literature
- VII. Limitation, Recommendations, and Implications for Change
 - a. Limitations of the Project
 - b. Recommendations from the Project
 - c. Implications for Change and Unintended Consequences
 - d. Implications for Nursing Practice
 - e. Summary

REFERENCES

APPENDICES

- a. IRB Approval (if needed)
- b. Letters of Support
- c. Data Collection Instruments

SAMPLE TITLE PAGE FOR FINAL PROJECT

DNP Final Project Title

By
Jane Doe, MSN, RN

Submitted to the Faculty and the School of Nursing at
Southern Illinois University Edwardsville
in partial fulfillment of the requirements for the degree of
Doctor of Nursing Practice

Project Chair

Committee Member

Committee Member (if applicable)

External Member

Date Final Project Accepted

SIUE School of Nursing
PICO Form

Evidence-based practice (EBP) begins with asking a focused question that will facilitate an efficient search of the literature. Appropriate PICO questions arise from clinical practice, quality improvement initiatives, or from an organization's administration or strategic plan. Searching the literature for what is known about a clinical issue helps the scholar identify gaps, or what is not known, in nursing practice. The following questions guide in the development of a good PICO question.

<p>What is the practice area? Describe setting.</p>
<p>What is the practice issue? Identify issue briefly.</p>
<p>How was the practice issue identified? Some possibilities include:</p> <ul style="list-style-type: none"> • Safety/risk management concerns • Unsatisfactory patient outcomes • Wide variations in practice • Significant financial concerns • Difference between hospital and community practice • Clinical practice issue of concern • Current procedure or process wastes time or effort • Clinical practice issue has no scientific basis
<p>What is the scope of the problem? Individual, population, or institution/system</p>
<p>What are the PICO components? P (patient, population or problem): I (intervention): C (comparison with other treatments or no treatment): O (outcomes):</p>
<p>What types of evidence must be gathered? Possibilities include</p> <ul style="list-style-type: none"> • Library database literature search • Standards (regulatory, professional, community) • Guidelines • Expert opinion • Client preferences • Clinical expertise • Financial analysis
<p>State the full search question in narrow manageable terms:</p>



DNP FINAL PROJECT COMMITTEE FORM (due by 3rd week Spring Semester, Year One)

Section 1: To be completed by Student (return by email to the Graduate Program Secretary)

Student's Name _____

Home Address _____

Email Address: _____
(SIUE) (HOME)

Home/Cell phone # _____ Work # _____

Proposed Chair: _____ Proposed SIUE Member: _____

Proposed External Stakeholder: _____ Phone: _____

Address: _____ Email: _____

Proposed Project Title _____

Anticipated Graduation Date _____

Section 2: To Be Completed by Chair (return by email to the Graduate Program Secretary)

Please confirm your agreement to serve on the DNP Final Project Committee for the student indicated above by typing your name and today's date and selecting the appropriate button.

I _____ Agree Do Not Agree

To act as Chair of the above-named student's DNP Final Project Committee

Date _____

Section 3: To Be Completed by SIUE Committee Member (email to the Graduate Program Secretary)

Please confirm your agreement to serve on the DNP Final Project Committee for the student indicated above by typing your name and today's date and selecting the appropriate button.

I _____ Agree Do Not Agree

To act as the second committee member of the above-named student's DNP Final Project Committee

Date _____

Section 4: To Be Completed by External Stakeholder (email to the Graduate Program Secretary)

Please confirm your agreement to serve on the DNP Final Project Committee for the student indicated above by typing your name and today's date and selecting the appropriate button.

I _____ Agree Do Not Agree

To act as the external stakeholder for the above-named student's DNP Final Project Committee

Date _____





Final Project Idea/Title Approval Form
(Due Year One, End of Spring Semester)

Student Name: _____ Date: _____

Title of Project:

Brief One Paragraph Summary:

Approval of Project Title and Idea

Signatures:

Student: _____ Date: _____

Project Chair: _____ Date: _____

Committee Member: _____ Date: _____

External Member: _____ Date: _____

Additional Member: _____ Date: _____

Please send completed form with signatures to Graduate Secretary.



RESIDENCY & DNP FINAL PROJECT SITE INFORMATION FORM
(DUE BY END OF SPRING, YEAR ONE)

Directions: Please complete one of these forms for each external site used.

Student Information

Date: _____

Name: _____

Address: _____

City, State, Zip Code: _____

Home Telephone: _____ Work Telephone: _____

Cell Telephone: _____ SIUE E-Mail: _____

Student's Current Employer & Work Area: _____

Clinical Site Information

Facility Name: _____

Address: _____

City, State, Zip Code: _____

Main Phone Number: _____

Do we have a current field practice/agreement (aka: contract) with this agency? If not, to whom should a contract be sent? (Please provide name of the 'contract authority' for the facility, this is often the CEO/COO/CFO, Dir of Educ, or Dir of Nursing. This is the person responsible for signing contracts for the facility.)

Person Responsible: _____

Contact Information: _____

Do you have approval of your Project Chair regarding external stakeholder/preceptor & site selection?

_____ Yes _____ No

If yes, please list the name of the Project Chair:

Please return to: Ms. Sheri Compton-McBride and
Director of Clinical Acquisitions
SIUE School of Nursing
Campus Box 1066
Edwardsville IL 62026-1066
Fax: 618-650-5037
Email: shcompt@siue.edu

Ms. Pat Koehne
Graduate Program Secretary
SIUE School of Nursing
Campus Box 1066
Edwardsville IL 62026-1066
Fax: 618-650-3854
Email: pkoehne@siue.edu

EXTERNAL STAKEHOLDER/RESIDENCY PRECEPTOR INFORMATION

Directions: Please complete this form for the external stakeholder for the final project and for any preceptors for the residency.

Date: _____

Student Name: _____

External Stakeholder/Preceptor Name & Credentials: _____

Position/Title: _____

Cell/Beeper No.: _____

Work Address: _____

Work Phone: _____ E-Mail: _____

Parent Corporation Affiliation: _____ Yes _____ No

If 'Yes', List name and address: _____

Please return to:

Ms. Sheri Compton-McBride
Director of Clinical Acquisitions
SIUE School of Nursing
Campus Box 1066
Edwardsville IL 62026-1066
Fax: 618-650-5037
Email: shcompt@siue.edu

and **Ms. Pat Koehne**
Graduate Program Secretary
SIUE School of Nursing
Campus Box 1066
Edwardsville IL 62026-1066
Fax: 618-650-3854
Email: pkoehne@siue.edu



**Final Project Design Approval Form
(submit Year Two, Fall semester)**

Student Name: _____ Date: _____

Title of Project:

Required Sites for IRB Submission:

(1) SIUE IRB (required for all projects)

(2) Institution #1 Name: _____

(3) Institution #2 Name: _____

Approval of Project Design

Signatures:

Student: _____ Date: _____

Project Chair: _____ Date: _____

Committee Member: _____ Date: _____

External Member: _____ Date: _____

Additional Member: _____ Date: _____

Please send completed form with signatures to Graduate Secretary.

Human Subjects Approval

In order to comply with federal regulations, projects that involve human subjects, animals, biohazards, or recombinant DNA must be cleared by the appropriate University Committee and approved by the Graduate Dean before data collection begins. These include, for example, the systematic examination of educational practices, educational testing, surveys, interviews, observation, secondary analysis, and the examination of records, charts, or any data on human subjects. This approval must be obtained before the student can begin the research.

All students who complete projects that fall into the above guidelines must complete the *Human Subjects Online Tutorial* course developed by the University of Miami through its CITI program. Completion of the computer-based training program meets the certification requirements for a period of three years for all faculty, staff, and students at SIUE who engage in research using human subjects. When you have successfully completed the training course, you will be awarded a Certificate of Completion of Human Subjects Training. This Certificate must be included with any protocols submitted to the IRB. The online site is: www.citiprogram.org. Click on the "Register for Course" link. On the next page, select "Southern Illinois University Edwardsville" from the pull-down menu labeled "All Others." The site will then guide you through the remainder of the registration procedure. Once you have registered you can enter the web site. You need to complete only the Basic Course to be certified for the use of Human Subjects at SIUE. If you have questions, please contact Linda Skelton in the Office of Research and Projects (618) 650-2958 or lskelto@siue.edu.

Procedure for Submitting the Application for Approval of Project Involving Human Subjects

Prior to submission of the Application for Approval of Project Involving Human Subjects, if required, the student must ensure that all committee members concur with the proposed research plan. When submitting the Application for Approval of Project Involving Human Subjects, the following items must be included:

1. The completed IRB application, signed by the student and committee Chair (http://www.siue.edu/ORP/IRB/irb_forms.html).
2. A copy of all questionnaires and/or data collection instrument.
3. Letter(s) of consent
4. Human Subject Certificate

The application packet is submitted to, and signed by, the student's Committee Chair. These materials are then forwarded for approval and signature to the Assistant Dean for Graduate Programs. The packet is returned to the Graduate Program Secretary, who processes it to the Office of Research and Projects for approval by the SIUE IRB and the Dean of the Graduate School. Data collection can begin **only** after the SIUE IRB approves the study.

Project Management for Final Project

Doctoral students will use project management techniques to manage the development, implementation, and evaluation of the final project in a timely, efficient manner. Comprehensive use of project management skills reflects advanced preparation in two of the doctoral essentials, leadership and informatics. Nurse leaders are able to develop care delivery models that improve patient safety and provide quality outcomes. This can be done efficiently using productivity tools that promote advanced knowledge of information systems/technology. Doctoral students at SIUE School of Nursing will utilize project management software during the initial week-long immersion, with use continuing until graduation. This provides students with a method for outlining purposes of the project, describing goals and objectives, identifying stakeholders, establishing a work breakdown structure (WBS), maintaining a strict schedule of implementation activities and meetings, and evaluating outcomes.

Each year, faculty will provide new doctoral students with the specific project management software, instructions on how to use the software, and information on project management techniques that will facilitate management of the final project. Students will then begin to develop the charter and scope for the project during the first year of the program. The charter is a 5 to 10 page written narrative defining the purpose of the project, project goals and objectives, expected timeline, expectations of committee members, needs assessment, assets of organization where project to be completed, deliverables, assumptions/constraints/risks, costs, and required resources. The project scope statement is a shorter, more concise statement defining the project that is signed by all members of the project committee. This is due when the final project plan is submitted to the committee in fall of the second year.

Charter (Order of items may differ with each project)

- Purpose of the Project
- Project Goals and Objectives
- Listing of Committee Members and Expectations
- Needs Assessment
- Organizational Assets
- Assumptions/Constraints/Risks
- Required Resources
- Timeline
- Projected Costs
- Projected Deliverables



Scope Statement Form

Student Name: _____ Date: _____

Affiliate Organization: _____

Brief Definition and Purpose of Project:

Specific Goals and Objectives:

Signatures:

Student: _____ Date: _____

Project Chair: _____ Date: _____

Committee Member: _____ Date: _____

External Member: _____ Date: _____

Additional Member: _____ Date: _____

DNP Practicum and Residency

Practicum:

The practicum is an experience designed to empower students to integrate practice and theory in the delivery of complex health care within their specialty competencies and specific populations. A minimum of 1000 practicum hours are required. Students may transfer in a maximum of 500 hours from their masters level specialty practicum as approved by the Southern Illinois University Edwardsville (SIUE) School of Nursing (SON) graduate program. Throughout the practicum, nurses synthesize and utilize best practices which are then demonstrated through practice competencies and successful completion of a Doctoral Practice Project.

Practicum hours may include:

- **CLINICAL:** Approved mentored direct and indirect clinical hours
- **RESIDENCY:** Approved percentage of residency hours
- **MEETINGS:** Approved meetings, symposiums, and/or conference hours
 - Only actual meeting time will be considered
 - Does not include travel and lodging time
 - Meeting hours applied to practicum must not exceed 5% of total
- **LIT REVIEW:** Project literature review immersion hours
 - Literature review hours must not exceed 10% of total
- **COURSE:** In some cases, approved specialized course work
 - Does not include normal DNP coursework
 - Must be a course related directly to the student's practice project
 - Must be at a graduate level
 - Can be an approved independent study
 - A maximum of two courses directly related to the student's project may be approved; hours approved for each course cannot exceed the course's weekly contact hours times the number of weeks in the semester (i.e., a fall 3 credit course equals 3 hours x 15weeks = 45 accepted practicum hours).
- **PRESENTATIONS:** Approved hours for presentations related to project topic at a professional conference or other similar venue.
 - Does not include travel and lodging time
- **INTENSIVE:** Approved Intensive Hours
 - Students will be allowed to document hours for attendance to select sessions of the required Intensives during the DNP program. Intensive materials will identify these approved hours.

Clinical Practicum instructions:

- Students must be a licensed registered nurse in the state where the clinical site is located as required by law. It is the student's responsibility to meet licensure requirements.
- A written agreement between the SIUE SON and the clinical agency must be in place prior to any clinical practicum experience.
- Arrangements must be made with the students mentor to secure an agreement well in advance of a proposed clinical experience time.
- If appropriate, the student is responsible to obtain IRB approval from SIUE and the sponsoring agency.

Residency:

The Doctor of Nursing Practice (DNP) residency is a crucial component of advanced nursing practice training and education actualized during matriculation through the DNP program. The purpose of the DNP residency is to provide an individualized intensive immersion experience based on students' learning goals and the anticipated Doctoral Practice Project. The DNP residency consists of supervised practicum and advanced scholarly experiences, leading to the generation of new practice knowledge. Individualized residency goals and related outcomes are determined by each student and his or her faculty mentor in the course of study and documented on the DNP residency Plan Form (available on the website). The hours of practicum experience completed during the residency are to be documented in the student's electronic portfolio.



DNP Practicum Transfer Hours Form

Student Name: _____ Date of Entry: _____
Expected Graduation: _____

Practicum Hours Transferred from Previous Programs

SITE #1:

University Name: _____ Hours: _____
Degree Specialty: _____
Graduation Date: _____

SITE #1:

University Name: _____ Hours: _____
Degree Specialty: _____
Graduation Date: _____

SITE #1:

University Name: _____ Hours: _____
Degree Specialty: _____
Graduation Date: _____

Total Previous Hours: _____

Total Required Practicum Hours to Complete in DNP Program

Hours: _____

“I will complete the required number of practicum hours while in the DNP program. These hours will be recorded on the Practicum Hours Spreadsheet and posted in my electronic portfolio on Blackboard. “

Student Signature : _____ Date: _____

Assistant Dean for Graduate Programs: _____ Date: _____



DNP Residency Hours Plan Form

Student Name: _____ Date: _____

Semester expected to complete Residency: _____

Proposed Experiences (Please complete DNP Residency Site Information Form for each experience)

Experience #1

Description:
Objectives:
Anticipated Hours:
Proposed Site:

Experience #2

Description:
Objectives:
Anticipated Hours:
Proposed Site

Experience #3

Description:
Objectives:
Anticipated Hours:
Proposed Site:

Student Signature: _____ Date: _____

Chair Signature: _____ Date: _____

Assistant Dean for Graduate Programs: _____

Date: _____

**Southern Illinois University Edwardsville
School of Nursing
DNP Electronic Portfolio**

Purpose

The purpose of the electronic portfolio is to document student progression and individual achievement of the SIUE School of Nursing Doctoral Student Outcomes and the AACN *Essentials of Doctoral Education*, monitor professional growth, and follow the trajectory of student work. Reflection on knowledge gained and individual growth is a vital part of the educational process and enhances deeper learning. Reflective journaling allows students to develop linkages between the personal self and the professional role which can increase professional development and confidence in thoughts and actions (Langely & Brown, 2010).

Student Responsibilities:

1. Initiate and maintain contact (email, face to face, Skype, or phone) with the chairperson at planned intervals throughout the program, preferably 2-3 times per semester.
2. Develop an electronic portfolio documenting growth and synthesis of knowledge throughout the program. The portfolio must contain more than just the “raw data” accumulated in course work. Students will write a 4 to 5 page reflection each semester on how the course/practicum work helps them meet program outcomes, provides exemplars of pivotal learning moments, identify achievements and growing edges in their professional formation, and provide evidence of synthesized learning contributing to achievement of the Doctoral Student Outcomes and the Doctoral Essentials.

Faculty Responsibilities:

1. The chairperson responds to the student 2-3 times per semester to assure progress in portfolio development. The chairperson validates documentation towards the attainment of the DNP’s student outcomes by reviewing the documentation in the portfolio, including electronic evidence (e.g. significant course papers, projects or personal/practicum experiences, reflections, and Final Project paperwork). The chairperson notifies the student if more detailed explanations are needed. If the portfolio is not completed each semester, the faculty member will notify the Assistant Dean for Graduate Programs who will initiate further discussion with the student.

Electronic Portfolio Content

The electronic portfolio is created, shared, and stored in the Blackboard Course Management System. Guidelines for developing the portfolio are in the Graduate Student Handbook located at http://www.siu.edu/nursing/academic/pdf/graduate_handbook_2011_2012_052711.pdf. Recommended folders and files for the portfolio can be found below (**bolded**).

1. Folder for each semester (Label as **Fall 20xx**, **Spring 20xx**, etc...)
 - a. **Goals**
 - i. Educational
 - ii. Professional
 - iii. Personal
 - b. **Significant Works**
 - i. Assignments that demonstrate progression through the program

1. Course papers
 2. Group projects
 3. Other course assignments
 - c. **Reflection**
 - i. 4 to 5 page reflection on progress towards achievement of Doctoral Student Outcomes and Doctoral Essentials for that semester
2. **Curriculum Vitae** (update yearly)
3. **Practicum Hours**
 - a. Practicum Hours Transfer Form
 - b. Residency (N695b, Summer Session)
 - Residency Plan Form
 - Preceptor Information Form
 - c. Practicum Hours Spreadsheet
4. **Final Project**
 - a. DNP Final Project Committee Form
 - b. PICO Form
 - c. External Stakeholder Information Form
 - d. Charter
 - e. Scope Statement (scanned with signatures)
 - f. DNP Project Title Approval Form
 - g. Letters of Agreement from institution (scanned)
 - h. IRB Proposal
 - i. Most recent draft of Final Project
5. **Achievements**
 - a. Manuscripts
 - b. Abstracts
 - c. Podium presentations
 - d. Consultations
 - e. Partnerships
 - f. Awards/recognition

Reference

Langely, M.E. & Brown, S.T. (2010). Perceptions of the use of reflective learning journals in online graduate education. *Nursing Education Perspectives*, 31 (1), 12-17.

DNP Comprehensive Examination

The DNP Comprehensive written examination is taken during the last semester of the program, after all other coursework is completed, and after a successful completion of the oral defense of the project plan. The examination reflects on the AACN *Essentials of Doctoral Education for Advanced Nursing Practice*, the DNP program coursework, and the proposed project.

Prior to sitting for the examination, the student must submit the “Request to Take the DNP Written Comprehensive Examination” during the Fall semester of year 2. At this time, the Final Project Chair confers with the Assistant Dean of the Graduate Program on the student’s program of study and gives final approval. The student must be registered in the program at the time of the comprehensive examination, and must successfully complete the exam to be eligible to graduate.

This is a “take-home” examination and students have five days to complete it. The questions for the Comprehensive Examination will be delivered electronically to the student no later than 0900 of the Monday of the examination week. The completed examination is returned electronically to the Assistant Dean of Graduate Programs no later than 5 p.m. on Friday of that week.

The comprehensive examination is evaluated by three faculty members: the chair and the SIUE committee member from the student’s Final Project Committee and one other designated faculty member. Each committee member will grade the examination as Satisfactory, Reservations, or Unsatisfactory.

Two Unsatisfactory votes indicate a failure. A vote of “Reservations” should only be used when a faculty member feels that the deficiencies displayed by the student were modest, and can easily be remedied. In the event that two or more committee members score the examination with Reservations, the committee members will design specific actions the student must take to correct the deficiencies. The statement must specify the time allowed for completion of the actions. A copy of the statement must be filed with the Assistant Dean of the Graduate Program. If the student satisfies the required actions in the specified period of time, the Project Chair will notify the Assistant Dean who documents this on the appropriate form and place in the student’s file.

Students who fail the exam will may repeat the exam after a specified period of time. The student may be required to repeat coursework or other remediation as designated by the Final Project Committee members or the Assistant Dean of the Program, in concert with the Graduate Student Affairs Committee.



Southern Illinois University Edwardsville
School of Nursing

Request to Take the DNP Written Comprehensive Examination

DIRECTIONS: This section to be completed by DNP student.

I, _____ intend to take the DNP Written Comprehensive Examination next semester, _____. I have completed all required course work.

Date: _____ Printed Student Name: _____

Student Signature: _____

.....
DIRECTIONS: This section is to be completed by faculty.

Written Comprehensive Examination Results:

Faculty Grader Signatures Satisfactory Reservations Unsatisfactory

1) _____

2) _____

3) _____

Pass _____ Needs Revisions _____ Fail _____

Comments:

Assistant Dean for Graduate Programs

Date

SECTION XII
FORMS
FOR ALL STUDENTS

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING**

GRADUATE PROGRAM ACADEMIC IMPROVEMENT PLAN

Student _____ Date _____ Semester _____

Course Number and Title: _____ Faculty: _____

Purpose: The purpose of this form is to document an identified problem area and the remediation plan determined by the student and faculty member.

Process: The Faculty and the Student will meet to discuss an identified problem area and the remediation plan to be implemented. After both the student and faculty sign the form, a preliminary copy is provided to the student and the form is forwarded to the Assistant Dean for the Graduate Program for signature. Final copies will be sent by the Graduate Program Secretary to the faculty member and the student, and a copy will be placed in the student academic file.

Description of Problem:

Student's Perception of the Problem:

Remediation Plan: (Action Plan)

Final Goals/Outcomes to be Achieved:

Student will be allowed to continue in class while this remediation plan is being completed.

YES ___ NO ___

Student will be allowed to continue in clinical while this remediation plan is being completed.

YES ___ NO ___

I, the undersigned student, understand that by signing and dating this form I agree to any and all directions included herein. I further understand that all requirements listed must be met in order to be in compliance with this agreement and that I understand all consequences which may result from noncompliance, deviation, omission, or other.

Student (Printed Name) _____

Student Signature _____ Student ID# _____

Date _____

Faculty Signature _____ Date _____

Assistant Dean, Graduate Program: _____ Date _____

INSTRUCTIONS FOR COMPLETING CLINICAL SITE / PRECEPTOR REQUEST FORM

SIUE School of Nursing Graduate Student:

This form is for requesting a clinical site and preceptor to meet course requirements. A new form will need to be completed for each course, clinical site, and preceptor. *Please be aware that initiating a new contract agreement takes 3-6 months to expedite.*

Please note that you are responsible for:

- Selecting a clinical site and preceptor.
- Completing and submitting the “Clinical Site & Clinical Preceptor Request Form”. (Incomplete forms may be returned to you...creating a delay in processing.)
- Deliver completed forms to the Director of Clinical Acquisitions.
(Director of Clinical Acquisitions office is Rm 2119 OR Fax: 618-650-5037)
- Obtaining approval from your current faculty regarding your site and preceptor selection.

Due to regulatory requirements for program accreditation, your preceptor will be asked to provide a copy current licensure and certification,

Questions? Email shcompt@siue.edu or call 618-650-3341

Clinical Site & Clinical Preceptor Request Form

TO BE COMPLETED BY STUDENT

Student Information

Name: _____

Address: _____

City, State, Zip Code: _____

Home Telephone: _____ Work Telephone: _____

Cell Telephone: _____ SIUE E-Mail: _____

Student's Current Employer & Work Area: _____

Please provide the following information for the course, semester, and year for which this request is being submitted:

Your specialization: NP___ NE___ HCNA___ CRNA___ Please circle: Fall Spring Summer
Year: _____

Course Number for which this request is being placed:

NP: 513___ 571___ 572___ 573___ 576___ 577___

NE: 585b___ HCNA: 594___ CRNA: 513___

Clinical Site Information

Facility Name: _____

Address: _____

City, State, Zip Code: _____

Main Phone Number: _____

Do we have a current field practice/agreement (aka: contract) with this agency? If not, to whom should a contract be sent? (Please provide name of the 'contract authority' for the facility, this is often the CEO/COO/CFO, Dir of Educ, or Dir of Nursing. This is the person responsible for signing contracts for the facility.)

Name of Prospective Preceptor and Credentials:

Prospective Preceptor's contact/telephone number: _____

Prospective Preceptor's email address: _____

Have you received approval from your current faculty regarding your preceptor & site selection?
If yes, please list the name of the faculty from whom you received approval: _____

Student Name: _____

**PRECEPTOR INFORMATION
(TO BE COMPLETED BY PRECEPTOR)**

Preceptor Name & Credentials: _____ Date: _____

Position/Title: _____

Home Phone: _____ Cell/Beeper No.: _____

Current Facility – Primary Practice Location (Name) : _____

Work Address: _____

Work Phone: _____ E-Mail: _____

Setting: (i.e.: primary care/ambulatory, fast track/ER, etc.) Please specify: _____

Parent Corporation Affiliation: Yes ____ No ____

If 'Yes', List name and address: _____

Educational & Licensure Information:

Nurse Practitioners:

*Please provide a copy of your current license
AND current certification*

Physicians:

Please provide a copy of your current license.

MSN: Year received: _____
Rcvd from (list institution): _____

MD: Year received: _____
Received from (list institution): _____

APRN License No.: _____
State: () Illinois () Missouri
Exp Date: _____

MD/DO License No: _____/
State: () Illinois () Missouri
Exp. Date: _____

Certifying Board: _____

Certifying Board: _____

No. of years in APRN role: _____

Certification (circle): FNP / ANP / PNP / WHNP / GNP Other: _____

Area(s) of Practice (circle): Family / Adult / Pediatric / Women's Health / Geriatric Other: _____

Number of students supervised concurrently: () None () One Other: _____

As a preceptor, I am willing to provide access to any documents necessary to verify the above information. (i.e.: reaccreditation of program by CCNE)

Signature: _____

GRADUATE STUDENT REQUEST FORM INSTRUCTIONS

This form is for the filing of requests to transfer credit, apply credit older than the time limit for your degree program, or enroll in graduate-level courses for graduate credit while you are an undergraduate. For any of these requests, please explain why you are making the request and obtain the recommendations and signatures of appropriate faculty personnel **before** submitting the form to Graduate Records, located in the Service Center, Rendleman Hall, Room 1309.

A. For An Undergraduate Seeking to Enroll In Graduate Courses...

1. See Chapter 1 of the Graduate Catalog for details on this policy. Note that when undergraduates take graduate courses, it is intended that such courses be reserved for later application to a graduate degree program at SIUE. **Courses numbered 500 or above cannot be applied to undergraduate degree programs.**
2. You must have the approval of the instructor of the graduate level course(s) you have listed on this form and the approval of the director of the graduate program to which you have applied.
3. You must be in your last term for completing the baccalaureate and you must have submitted an application for admission to a graduate degree program at SIUE.
4. Ordinarily, permission is not granted to Visiting Students or those in Senior-with-Degree status for this kind of enrollment.
5. Enrollment in graduate-level courses for graduate credit must have *prior* approval from Graduate Records.
Credit earned without such approval may not later be applicable to a graduate degree program.

B. For Credit Transfer...

1. You must have on file an official transcript showing completion of courses taken at another university and presented for transfer.
2. List courses by course designation, number, and school, or, if taken at SIUE, by status such as **undergraduate** or **unclassified**.
3. Provide syllabi or other descriptive materials and documentation showing level of performance for courses, as appropriate.
4. Furnish course descriptions for courses taken at other universities and identified by titles such as **Independent Study, Special Topics, and Readings in ...**
5. For a course graded **S, P, or Cr**, you must provide a letter from your instructor evaluating your performance level on an A to F scale.
6. Courses for which you received a grade of **C or lower** are not transferable.
7. No credit is given for courses taken by correspondence.

C. For Time-Limit Extensions...

Time limits vary for master's and specialist programs. Please refer to the Graduate Catalog for descriptions of these programs. When making a request to have lapsed credit apply to your degree, please furnish the following:

1. List courses w/corresponding semester/year.
2. Statement indicating you have retained the substance of the lapsed courses.
3. Statement indicating that the substance of the lapsed course is still effective in your discipline.
4. An explanation of reasons for taking more than the allotted number of years to complete your program.
5. Anticipated date of your graduation.
Evidence of 2 and 3 must be obtained from appropriate faculty members (instructors, adviser, and program director).

SIUE, Graduate Records, Rendleman Hall, Room 1309, Edwardsville, IL 62026-1047
Telephone: (618) 650-3167 Fax: (618) 650-2081

Revised 11/19/09



SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
APPLICATION FOR GRADUATION

OFFICE USE ONLY
Date:
Cat. Term:
Coded By:
Post Date:

Application Deadline: Applications are due no later than the first day of the term in which you expect to complete all degree requirements.

Student Identification Number: 8 0 0

Please print the name (First/Middle/Last) you wish to appear on your diploma. Limit to 30 characters, including periods or other punctuation, in the spaces provided below. Use upper and lower case.

Grid for printing name

Expected completion of degree requirements (enter year): Fall (Dec.) 20__ Spring (May) 20__ Summer (Aug.) 20__
(Students who fail to meet all graduation requirements within three consecutive terms, beginning with the initial application term above, will be required to re-apply and pay an additional \$35.00 fee by the first day of the term in which requirements will be completed.)

Please complete the following information. If unsure, please check with your adviser.

Degree Sought:

College/School (please circle one): Arts and Sciences Business Education Engineering Nursing Pharmacy

Major: 1. 2.

Minor: 1. (Undergraduates only) 2.

Are you in the process of completing a teacher education program to be certified to teach? Yes No
Please mark if you are a member of the following program: Honors Scholar Program Meridian Scholarship
Do you have additional credits to be transferred from another institution before graduation: Yes No
If yes, from what institution(s):

Signature: Date:

By signing, you authorize your inclusion in commencement publications and news releases unless you check this box
Exclude me from commencement publications and news releases.

Printed Name (if different than diploma name):

E-Mail Address or Daytime Telephone Number:

Your diploma will be sent to your mailing address on file with the Office of the Registrar. In order to receive your diploma and other University correspondence, you must keep your mailing address current.

What is MOST LIKELY to be your PRINCIPAL activity upon graduation?

- Employment, full-time paid
Employment, part-time paid
Graduate or professional school, full-time
Graduate or professional school, part-time
Additional undergraduate coursework
Military Service
Volunteer activity (e.g., Peace Corps)
Starting or raising a family
Other, please specify:

* Students who graduate fall semester may be subject to significant decreases in their financial aid. Please check with the Office of Student Financial Aid before submitting this application.

Graduation Fees Received by Bursar:

Date Application Received in Registrar's Office:

SERVICE CENTER, SIUE, RENDLEMAN HALL, ROOM 1309, EDWARDSVILLE, IL 62026-1080

Form 1

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE (SIUE) APPLICATION FOR APPROVAL OF RESEARCH PROJECT INVOLVING HUMAN SUBJECTS

Part I – To be completed by researcher:

Please refer to the instruction sheet at <http://www.graduate/humansubjectsprotection/irb.shtml>

Please Type

Principal Investigator(s):

Name: _____ SIUE ID (SS #): _____ E-Mail: _____

Mailing Address: _____ Phone: _____

Name: _____ SIUE ID (SS #): _____ E-Mail: _____

Mailing Address: _____ Phone: _____

Name: _____ SIUE ID (SS #): _____ E-Mail: _____

Mailing Address: _____ Phone: _____

Name: _____ SIUE ID (SS #): _____ E-Mail: _____

Mailing Address: _____ Phone: _____

Faculty Supervisor (if applicable): _____ Department: _____

Faculty Supervisor SIUE Email: _____ Phone: _____

Project Title: _____

Anticipated start date of project: _____ end date: _____

Principal Investigator's Status: SIUE faculty SIUE student SIUE staff

Researcher not affiliated with SIUE: faculty student staff other

Affiliation: _____ Other: _____

Project Status (mark as many as appropriate):

- To be submitted externally for funding (list agency under notes)
- Agency should be notified of IRB review (list agency under notes)
- To be submitted internally for funding (list funding unit under notes)
- Funded (list unit or agency under notes)
- Will not be submitted for funding
- Student independent study (list course title and number under notes)
- Student Thesis proposal
- Student dissertation proposal
- Student research proposal in lieu of thesis
- Classroom
- Other

Notes:

1. PURPOSE (Provide a brief statement of the purpose of the research and how human subject participants are necessary to this purpose.)

2. SUBJECTS

Are human subject participants under the age of 18? Yes No (check one)

Provide a detailed description, including number of subjects, age of subjects and how they are to be selected and recruited.

3. PROCEDURES

Please check method of data collection: (check all that apply)

- Interviews
- Interviews using audio or video recordings
(If using audio or video recordings, refer to requirements listed in the instruction sheet)
- Surveys (other than e-mail or web)
- Surveys sent by e-mail or the web
(If using web or email surveys, provide detailed information on how confidentiality will be maintained; - removal of identifiers, etc.)
- Observation of public behavior
- Use of human subject's protected health information (hospital files, insurance files)

Give complete description of how human subject participants will be used in this research.

4. INFORMATION COLLECTION

- a. What types of information will be collected?

(Attach a copy of all survey instruments, interview questions, word or activity tests, advertisements, etc. to this application)

- b. Informed Consent will be obtained from (check one):

The subject Parent or guardian of the subject

(Attach a copy of your Informed Consent document to this protocol) (To properly construct the Informed Consent form, refer to our model at: <http://www.siue.edu/graduate/humansubjectsprotection/consent.shtml> (form 2))

- c. Will demographic information be collected? Yes No (check one)

List all demographic information that will be collected (e.g., age, sex, income etc.)

- d. Will subjects be identifiable to anyone? **If so, how will their identity be safeguarded?**

- e. For what purpose is the information being collected (e.g., publication, thesis)?

5. BENEFITS: **Give description of benefits to the subjects and/or society.**

6. RISKS: **Describe all risks to subjects, including physical, psychological, and emotional risks as well as risks to subjects' dignity and self respect. Describe all measures to be taken to protect the subjects from risk. (e.g. access to emergency medical treatment, counseling services etc.) – Use additional page if necessary.**

Certification:

In making this application, I certify that I have read and do understand the policies and procedures governing research with human subjects, and that I fully intend to comply with them. I further acknowledge my responsibility to report significant changes in the procedural summary prior to making these changes.

If the research project is approved I will retain all documents and records of my subjects for three years following the subjects' participation. At least annually and at the completion of my research, I will be expected to submit a statement indicating that the study was conducted as described in the proposal and that no other significant changes were instituted (Form 3), if required.

The formal repository for Informed Consent Forms is (The IRB recommends that Informed Consent Forms be kept centrally in the Department in a locked cabinet.):

Signature(s) of principal investigator(s): _____

Date: _____

Signature of faculty supervisor (if applicable): _____

Date: _____

Part II -- To be completed by department chair/head (or other designated school / college / department representative):

I have reviewed this proposed research for ethical considerations and scientific merit. I recommend that it be:

approved not approved. (check one)

Signature of Department Chair/Head: _____

Date: _____

School/College/Department: _____

PART III -- To be completed by the IRB:

The proposed research has been reviewed by the Institutional Review Board (IRB). According to the Federal common rule regulation, it is designated

exempt.

not approved.

approved. Informed consent will be required with the following stipulations and/or recommendations:

Signature of IRB Chairperson or Member: _____

Date: _____



**SCHOOL OF NURSING
GRADUATE PROGRAM**

Directions for Use of “Incomplete Form”

1. Students may request a grade of “Incomplete” when there is a part of a course requirement that will not be completed by the end of exam week.
2. Faculty have the authority to either grant this request or deny this request.
3. If the request is granted, the faculty member needs to complete the “Incomplete Form”, obtain the student signature and submit the completed form to the Assistant Dean for the Graduate Program for approval and signature. A copy will then be sent by the Graduate Program Secretary to the student and to the faculty member, and placed in the student file.
4. If the course involved must be completed prior to enrollment in a subsequent course, approval by the Assistant Dean for the Graduate Program should be requested before the final plan is established with the student.
5. The faculty member determines the date by which the additional coursework must be completed. According to the University guidelines, the **maximum** amount of time that is allowed is one year. If no grade is submitted at the end of one year, the University Registrar will change the “I” grade to an “F”. However, the faculty member must determine whether or not the full year is approved for the completion of course requirements by designating the “Due Date” for the individual student.
6. It is the faculty member’s responsibility to submit a final course grade on a “Grade Change Form” either **when the “Due Date” is reached and the student has not completed the requirements or when the student completes the requirements prior to the “Due Date”**.
7. A copy of the “Grade Change Form” should be given to the Graduate Program Secretary for the student’s academic file.
8. If the course is a Clinical course, then the “Risk Management Report: Completion of “Incomplete” Requirements in Clinical Courses” form must also be completed.



**SCHOOL OF NURSING
GRADUATE PROGRAM IN NURSING
Incomplete Form**

Name of Student	Student ID Number	Semester and Year	Course Number	Instructor

I. List specific assignments/tasks required by the student in order to complete this course.

Assignment/Task	Due Date	Completion Date
1.		
2.		
3.		

II. Explain how final course grade will be calculated. (Attach to the form if necessary).

III. Attach specific details regarding assignment(s) needed for completion. (e.g. description of research paper).

Signature of Student _____ Date _____

Signature of Instructor _____ Date _____

Signature of Assistant Dean Graduate Programs _____
Date _____

(Copy for student, student's file and faculty member)



**Risk Management Report: Completion of
“Incomplete” Requirements in Clinical Courses**

Student Name: _____

ID Number: _____

Clinical Practicum Site: _____

Address: _____

Preceptor Name/Credentials: _____

Course Number: _____

Semester Credit Hours: _____

Semester/Year Enrolled: _____

Date to be Completed: _____

Instructor of Record: _____

Signature of Instructor: _____ Date: _____

In accordance with university policy, the course work must be completed within the time period designated by the instructor, but not to exceed one year from the close of the term in which the course was taken, or graduation, whichever occurs first. Failure to complete the course as specified will result in a grade of “F” for the course.

- Copies:
- (1) University Risk Management (Attn: Jenny)
1301 W. Chautauqua
Mail Code 6829
Carbondale, IL 62901
Fax: 618-453-5442
 - (2) Student File
 - (3) Instructor

Report of Injury

It is the responsibility of each supervisor to ensure that this report is filed with Emergency Management and Safety within 24 business hours of becoming aware of an incident or hazard related to SIUE facilities or operations.

Please complete only those sections that are applicable to the incident.

I. PERSON INVOLVED IN INCIDENT	Name (Last, First, MI) Sex D F M E - Mal
	Date of Birth Social Security #:
	Address (Local) Phone (W)
	(H)
	Status At Time Of Incident If An Employee, Give Job Title And If A Visitor, State Purpose Of D Employee D Visitor Department Campus Visit D Student D Other (Specify):
IF OTHERS WERE INVOLVED, ATTACH ADDITIONAL COPIES OF THIS FORM FOR EACH PERSON.	
	Were the Police Notified? D Yes D No Did Incident Arise Out Of And In The Course Of University Employment? D Yes D No
II. INCIDENT/ OR HAZARD DESCRIPTION	Place Where Accident/Incident Date & Time Name Of Area Supervisor Where Incident Occurred Or Hazard Is Located Of Incident Occurred Or Hazard Is Located.
	Describe Activity Being Performed By Person Involved In Incident (I.E. Driving Truck, Lifting Crate, Etc.)
	Fully Describe Incident/Hazard (Attach Additional Sheets If Necessary.)
	List Any Witness Present Address Name Phone (W)
	Additional Witness(es) Present Address Name Phone (W)
III. INJURY	Did This Incident Result In Injury To The Person Involved? E I Yes D No
	IF INJURY OR ILLNESS RESULTS FROM AN INCIDENT ARISING OUT OF AND IN THE COURSE OF UNIVERSITY EMPLOYMENT, THE INJURED PERSON OR THEIR SUPERVISOR (If injured person is unable) MUST CALL CarSys, Inc. AT 1-800-773-3221 AND REPORT THE INJURY OR ILLNESS
	Describe Nature And Scope Of Personal Injury, If Any
	Was Medical Care Sought? D No D Yes: Place & Date of Treatment
PROPERTY DAMAGE	Describe Property Damage, If Any
V. SIGNATURE	Printed Name Of Person Completing Form Job Title/Occupation
	Phone Number (W)
	Signature Of Person Completing Form Date (H)

Original To: Emergency Management and Safety
 Copy To: According to Individual Departmental Policy