EDGEWOOD COLLEGE

HENRY PREDOLIN SCHOOL OF NURSING

2023-24
MASTER'S OF SCIENCE IN NURSING
STUDENT HANDBOOK

HENRY PREDOLIN SCHOOL OF NURSING
1000 Edgewood College Drive
Madison, WI 53711
(608) 663 – 2292
https://www.edgewood.edu/academics/programs/details/nursing/graduate

Contents

Henry Predolin School of Nursing

Master of Science in Nursing Degree Concentrations and Graduate Certificates

Progression

Graduation

Graduate Certificate Admission, Progression, and Graduation Policy

Appendices

HENRY PREDOLIN SCHOOL OF NURSING

MISSION

The Henry Predolin School of Nursing (SoN) reflects the Mission of Edgewood College by locating professional nursing education within the context of a Catholic, liberal arts setting in the Dominican tradition. Nursing is a profession built on knowledge from nursing theory, research and practice, the humanities, and the natural and behavioral sciences. Students are educated in a dynamic interactive environment to be knowledgeable, accountable, responsible, ethical and culturally sensitive graduates who will become leaders in a changing and diverse healthcare environment.

PHILOSOPHY OF THE NURSING CURRICULUM

The faculty develops, implements, and evaluates the curriculum to provide a broad and rich foundation for nursing practice. Faculty foster the professional development of students by offering learning challenges, promoting opportunities to think critically and creatively, and exhibiting collegiality in the teaching-learning environment. Teaching and learning is a dynamic and interactive process designed to integrate knowledge and research with professional nursing practice. Teaching and learning are facilitated when both students and faculty are actively engaged in the process.

ACCREDITATION

The Master of Science in Nursing program is accredited by the Commission on Collegiate Nursing Education and approved by the Wisconsin Board of Nursing and the North Central Association of Colleges and Schools Commission on Institutions of Higher Education.

For more information regarding the Master's program curricular alignment to AACN Essentials for Master's programs, see **MSN Essentials and Course Artifact Listing** (Appendix A).

MASTER OF SCIENCE NURSING AND GRADUATE CERTIFICATE PROGRAMS

MISSION

The Graduate Nursing programs are designed to develop nurses into leaders with advanced knowledge, humanistic values, and the ability to contribute to the changing, diverse health care environment. Advanced roles in nursing require further enhancement of critical thinking and decision-making skills as theory is translated into practice. Programs provide individuals with the opportunity to pursue professional development within a scholarly environment.

PROGRAMMATIC OVERVIEWS

There are six Master of Science in Nursing degree concentrations offered ranging from 30-51 credits: Comprehensive, Clinical Nurse Specialist (CNS), Clinical Nurse Specialist in Adult Gerontology (CNS-AG), Family Nurse Practitioner (FNP), Adult-Gerontology Primary Care Nurse Practitioner (AGPCNP), and Psychiatric Mental Health Nurse Practitioner (PMHNP).[1]

The **Comprehensive concentration** is designed for individuals who are, or are planning on becoming, nurse leaders, educators, or advanced practice nurses. Courses focus on health care policy, nursing delivery systems, resource management, teaching strategies, advanced practice-focused content, and program evaluation.

The **Clinical Nurse Specialist (CNS) concentration** is designed for nursing professionals seeking to foster skills that enhance their ability to advance the care of patients, families, groups of patients, and the profession of nursing. Curriculum is built upon the three spheres of influence (Patient, Nurse, System) model for CNS practice with courses in advanced pathophysiology, advanced physical assessment, advanced pharmacology, and advanced clinical practice preparing graduates as expert practitioners. Additional coursework focusing on enhancing knowledge of healthcare systems, leadership strategies, education methods, and applying evidence-based scholarship to practice prepare graduates as expert clinical educators and leaders.

The **Clinical Nurse Specialist in Adult Gerontology (CNS-AG) concentration** is designed for nursing professionals seeking to foster skills that enhance their ability to advance the care of middle-aged and older adult patients. Curriculum is built upon the three spheres of influence (Patient, Nurse, System) model for CNS practice with courses in advanced pathophysiology, advanced physical assessment, advanced pharmacology, differential diagnosis, adult-gerontology concepts, and advanced clinical practice preparing graduates as expert practitioners who work with the middle-aged and older adult population. Additional coursework focusing on enhancing knowledge of healthcare systems, leadership strategies, education methods, and applying evidence-based scholarship to practice prepare graduates as expert clinical educators and leaders. Graduates will be eligible to sit for the Adult-Gerontology Clinical Nurse Specialist-Board Certified (AGCNS-BC) exam.

The **Family Nurse Practitioner (FNP) concentration** is designed for nursing professionals seeking to expand their scope of practice to providing direct care for patients across the lifespan. Through didactic courses in advanced pathophysiology, advanced physical assessment, advanced pharmacology, and differential diagnoses as well as advanced practice clinical experiences, this program imparts the expertise needed to manage the primary health care needs of patients, families, and the community. Graduates will be eligible to sit for the Family Nurse Practitioner certification exam.

The **Adult Gerontology Primary Care Nurse Practitioner (AGPCNP) concentration** is designed for nursing professionals seeking to expand their scope of practice to providing direct care for adults and geriatric patients. Through didactic courses in advanced pathophysiology, advanced physical assessment, advanced pharmacology, adult-gerontology concepts, and differential diagnoses as well as advanced practice clinical experiences, this program imparts the expertise needed to manage the primary health care needs of adolescents, adults, and geriatric patients in a variety of primary care settings. Graduates will be eligible to sit for the Adult Gerontology Primary Care Nurse Practitioner certification exam.

The **Psychiatric Mental Health Nurse Practitioner (PMHNP) concentration** is designed for nursing professionals seeking to expand their scope of practice to providing psychiatric, mental, and emotional health care to patients across the lifespan. Through didactic courses in advanced pathophysiology, advanced physical assessment, advanced

---

[1] Students are responsible for knowing their state's licensing requirements and scope of practice regarding the CNS, CNS-AG, FNP, AGPCNP, and PMHNP roles. For more information on state-specific requirements, please visit: https://nursinglicensemap.com/. FNP, AGPCNP, and PMHNP students are also encouraged to visit: https://www.nursinglicensure.org/articles/nurse-practitioner-license.html#state

pharmacology/psychopharmacology, psychotherapy, diagnostics, and mental health management, as well as advanced practice clinical experiences, this program imparts the expertise needed to manage the psychiatric and mental health care needs of diverse populations in a variety of care settings. Graduates will be eligible to sit for the Psychiatric Mental Health Nurse Practitioner certification exam.

Graduate Certificates

The **Clinical Nurse Specialist in Adult Gerontology (CNS-AG) Post Graduate Certificate** is designed for MSN-prepared nursing professionals seeking to foster skills that enhance their ability to advance the care of middle-aged and older adult patients. The CNS-AP Post Graduate Certificate curriculum is built upon the three spheres of influence (Patient, Nurse, System) model for CNS practice with courses in advanced pathophysiology, advanced physical assessment, advanced pharmacology, differential diagnosis, adult-gerontology concepts, and advanced clinical practice preparing graduates as expert practitioners who work with the middle-aged and older adult population. Graduates will be eligible to sit for the Adult-Gerontology Clinical Nurse Specialist-Board Certified (AGCNS-BC) exam.

The **Family Nurse Practitioner (FNP) Post-Graduate Certificate** is designed for Master's-prepared nurses to extend their area of practice and to focus on providing primary care needs of patients across the lifespan. Graduates will be eligible to sit for the Family Nurse Practitioner certification exam.

The **Adult Gerontology Primary Care Nurse Practitioner (AGPCNP) Post-Graduate Certificate** is designed for Master's-prepared nurses to extend their area of practice and to focus on providing primary care needs to adolescents, adults, and geriatric patients. Graduates will be eligible to sit for the Adult Gerontology Primary Care Nurse Practitioner certification exam.

The **Perioperative Leadership Graduate Certificate** is designed for nursing professionals seeking to foster skills that enhance their ability to perform the role of a perioperative nursing leader working in a leadership/management role in the perioperative setting (i.e., managers, team leaders, educators). The Perioperative Leadership Graduate Certificate curriculum is built upon the American Organization for Nursing Leadership (AONL) Nurse Leader Core Competencies framework that outlines key knowledge, skills, and abilities related to the following topics: communication and relationship management, strategic management, financial management, human resource management, operational management, leadership, and professionalism.

GOALS FOR THE MSN DEGREE

The program will prepare advanced role (Comprehensive) and advanced practice (CNS & NP) nurses who will:

- Integrate scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement and organizational sciences for the continual improvement of nursing care across diverse settings.
- Evidence leadership skills that emphasize ethical and critical decision making, effective working relationships, and a systems perspective.
- Articulate methods, tools, performance measures, and standards related to quality, as well as apply quality principles within an organization.
- Apply research outcomes within the practice setting, resolve practice problems, work as change agents, and disseminate results.
- Use patient-care technologies to deliver and enhance care and use communication technologies to integrate and coordinate care.
- Intervene at the system level through the policy development process and employ advocacy strategies to influence health, health care, and health policy.
- Act as a member and leader of inter-professional teams, communicate, collaborate, and consult with other health professionals to manage and coordinate care for individuals and populations.
- Apply and integrate broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.
- Develop strategies to achieve quality outcomes in care delivery with respect to fiscal and human resources.
- Apply management, leadership, and systems theory to the design and implementation of services in a health care system.
- Practice independently and collaboratively with an interprofessional team while delivering direct and indirect care services in various types of health care systems to promote health, prevent disease and improve the health status of diverse individuals, families, communities, and populations.
- Value life-long learning and continuing professional development.

DEGREE CONCENTRATION REQUIREMENTS

Required courses for all degree concentrations include:

NRS 600	Clinical Prevention: Assessment and Planning for Aggregates[2]
NRS 612	Theoretical Foundations of Role Development for the Nurse Leader[3]
NRS 625	Healthcare Systems and Policy
NRS 645	Advanced Leadership Roles in the Healthcare System
NRS 665	Applied Statistics
NRS 670	Evidence-Based Practice

Students completing the **Comprehensive Concentration** will take the following additional courses:

NRS 631	Curriculum, Instruction, and Methodology in Nursing Education
NRS 700	Advanced Pathophysiology, Physical Assessment, and Pharmacology[4]
NRS 735	Nursing Practicum
NRS 830	Health Systems Informatics

Students completing the **CNS Concentration** will take the following additional courses:

NRS 680	Differential Diagnosis
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 717	CNS Advanced Practice Clinical 1
NRS 718	CNS Advanced Practice Clinical 2
NRS 719	CNS Advanced Practice Clinical 3
NRS 830	Health Systems Informatics

Students completing the **CNS in Adult Gerontology Concentration** will take the following additional courses:

NRS 680	Differential Diagnosis
NRS 690	Caring for the Adult and Older Adult
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 717	CNS Advanced Practice Clinical 1
NRS 718	CNS Advanced Practice Clinical 2
NRS 719	CNS Advanced Practice Clinical 3
NRS 830	Health Systems Informatics

---

[2] *MS in Nursing students looking to earn their DNP may replace certain courses with prescribed DNP courses. Students may take no more than three DNP courses as part of their MS in Nursing degree. The following is a list of course substitutions available to MS in Nursing students (DNP courses are mapped to both MSN and DNP Essentials):*
NRS 810 may be substituted for NRS 600
NRS 820 may be substituted for NRS 625

[3] PMHNP students are not required to take NRS 612; MSN Essentials for this course are addressed in NRS 696A and 696B.

[4] Students considering an APN certificate must take NRS 701, NRS 702, and NRS 703 in place of NRS 700. APN certification requires a separate course for Advanced Pathophysiology, Advanced Physical Assessment, and Advanced Pharmacology.

Students completing the **<u>FNP Concentration</u>** will take the following additional courses:

NRS 680	Differential Diagnosis
NRS 696A	Equity and Management of Diverse Populations for the Nurse Practitioner
NRS 696D	Transition to Practice for the Primary Care Nurse Practitioner
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 711	FNP Advanced Practice Clinical 1
NRS 712	FNP Advanced Practice Clinical 2
NRS 713	FNP Advanced Practice Clinical 3
NRS 830	Health Systems Informatics

Students completing the **<u>AGPCNP Concentration</u>** will take the following additional courses:

NRS 680	Differential Diagnosis
NRS 690	Caring for the Adult and Older Adult
NRS 696A	Equity and Management of Diverse Populations for the Nurse Practitioner
NRS 696D	Transition to Practice for the Primary Care Nurse Practitioner
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 720	AGPCNP Advanced Practice Clinical 1
NRS 721	AGPCNP Advanced Practice Clinical 2
NRS 722	AGPCNP Advanced Practice Clinical 3
NRS 830	Health Systems Informatics

Students completing the **<u>PMHNP Concentration</u>** will take the following additional courses:

NRS 691	Neuropathophysiology
NRS 692	Introduction to Psychotherapy/Psychiatric Interviewing & Common Major Psychopathological Disorder Basics
NRS 693	Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment I
NRS 694	Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment II
NRS 695	Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment III
NRS 696A	Equity and Management of Diverse Populations for the Nurse Practitioner
NRS 696B	Transition to Psychiatric Mental Health Practice
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 714	Clinical Practicum I: Psych Mental Health Nurse Practice - Family
NRS 715	Clinical Practicum II: Psych Mental Health Nurse Practice – Family
NRS 716	Clinical Practicum III: Psych Mental Health Nurse Practice - Family

GRADUATE CERTIFICATE REQUIREMENTS

Students completing the **CNS-AG Certificate** will take the following courses*:

NRS 680	Differential Diagnosis
NRS 690	Caring for the Adult and Older Adult
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 717	CNS Advanced Practice Clinical 1
NRS 718	CNS Advanced Practice Clinical 2
NRS 719	CNS Advanced Practice Clinical 3

Students completing the **FNP Certificate** will take the following courses*:

NRS 680	Differential Diagnosis
NRS 696A	Equity and Management of Diverse Populations for the Nurse Practitioner
NRS 696D	Transition to Practice for the Primary Care Nurse Practitioner
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 711	FNP Advanced Practice Clinical 1
NRS 712	FNP Advanced Practice Clinical 2
NRS 713	FNP Advanced Practice Clinical 3

Students completing the **APGCNP Certificate** will take the following courses*:

NRS 680	Differential Diagnosis
NRS 690	Caring for the Adult and Older Adult
NRS 696A	Equity and Management of Diverse Populations for the Nurse Practitioner
NRS 696D	Transition to Practice for the Primary Care Nurse Practitioner
NRS 701	Advanced Pathophysiology
NRS 702	Advanced Physical Assessment
NRS 703	Advanced Pharmacology
NRS 720	FNP Advanced Practice Clinical 1
NRS 721	FNP Advanced Practice Clinical 2
NRS 722	FNP Advanced Practice Clinical 3

Students completing the **Perioperative Leadership Graduate Certificate** will take the following courses:

NRS 731	Perioperative Strategic Management
NRS 732	Perioperative Finance & Operations
NRS 733	Perioperative Human Resources/Relationship Management
NRS 734	Perioperative Professional Leadership
NRS 736	Perioperative Nurse Leader Practicum

Applicants seeking an Advanced Practice Nursing (CNS-AG, FNP, or AGPCNP) certification will be evaluated to determine if course requirements (NRS 680, NRS 701, 702, and 703) have been met.

COURSE DESCRIPTIONS

NRS 600 Clinical Prevention: Assessment & Planning[5]
Study of community health promotion program planning processes for high risk and underserved aggregates. Population-focused health assessment, planning, implementation and evaluation methods are explored and applied.

NRS 612 Theoretical Foundations of Role Development for the Nurse Leader
Introductory course addressing attributes of organization and systems leadership including communication and decision-making, systems theory and change, quality improvement and patient safety initiatives, and operational and human resource management.

NRS 625 Healthcare Systems & Policy[6]
Study of local, state, and federal policy on health services and payment organization of the U.S. health care system. Legal, regulatory and legislative influences are discussed. Access to care, identified gaps and professional advocacy strategies are examined.

NRS 631 Curriculum, Instruction, and Methodology in Nursing Education
This course aims to provide graduate-level nursing students with an overview of the philosophical and historical influences on nursing education as well as contemporary teaching methods. Pedagogical frameworks for designing and implementing instructional experiences are used to develop curricular objectives, select and organize content, and plan program evaluation strategies across a variety of populations, settings and contexts. The selection, application, and evaluation of teaching tools and strategies in the context of health education, continuing education, staff development, simulation, and classroom and clinical instruction are also explored.

NRS 645 Advanced Leadership Roles in the Healthcare System
Study of advanced practice and nurse leader roles in managing individual role development and resources within a health system to affect optimal care delivery and outcomes. Strategies for collaborative inter-professional team care coordination for individuals and populations are emphasized.

NRS 665 Applied Statistics
Instruction focuses upon the application of statistical methods and data analysis in the healthcare professions related to evidence-based practice.

NRS 670 Evidence-Based Practice
This seminar serves as an introduction to program evaluation, quality improvement, and research methodology. Conceptual & methodological frameworks used in evaluation are examined. As part of this course, students develop a proposal to evaluate a health care program.

NRS 680 Differential Diagnosis
The course is designed for advanced practice nursing students to enhance assessment skills, formulate differential diagnosis, and develop therapeutic interventions for patients across the lifespan.

NRS 690 Caring for the Adult and Older Adult
This course focuses on health promotion for adults and older adults as well as the management of common acute and chronic health conditions encountered by this population. Students have the opportunity to build on previously acquired skills and to apply concepts of primary care to manage the complex health problems of the adult and older adult population.

NRS 691 Neuropathophysiology
This course is designed to provide advanced practice nursing students with knowledge of the essential neuropathophysiology of mental illness across the lifespan. Building on the basics of cell physiology and neural transmission, this course focuses on the neurobiology of select serious mental illnesses. There is an emphasis on the neural structures and functions thought to be implicated in symptom presentation and disease progression of select serious mental illnesses.

---

[5] MS in Nursing students planning to continue on for a DNP may take NRS 810 in place of NRS 600. NRS 810 satisfies degree requirements for both the MS in Nursing and DNP degree.
[6] MS in Nursing students planning to continue on for a DNP may take NRS 820 in place of NRS 625. NRS 820 satisfies degree requirements for both the MS in Nursing and DNP degree.

NRS 692 Introduction to Psychotherapy/Psychiatric Interviewing & Common Major Psychopathological Disorder Basics
This course is designed to provide advanced practice nursing students with the knowledge of basic diagnostic criteria of commonly treated major psychopathological disorders as well as an introduction to establishing therapeutic rapport and conducting a psychiatric interview in the role of a psychiatric mental health nurse practitioner. Building upon this knowledge, the student will become familiarized with the most common therapy modalities and engage in deeper study of modalities most often utilized within the field as a psychiatric prescriber.

NRS 693 Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment I
This course is designed to provide advanced practice nursing students with scaffolding knowledge in diagnostics, psychopharmacologic & nonpharmacologic management and evidence-based treatment of major psychopathological disorders. This is the first course in progressive sequence of three courses. In this first course, students will focus on the etiology, epidemiology, evidence-based treatment, and management of neurodevelopmental disorders, schizophrenia spectrum and other psychotic disorders, depressive disorders, bipolar and related disorders, and anxiety disorders.

NRS 694 Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment II
This course is designed to provide advanced practice nursing students with scaffolding knowledge in diagnostics, psychopharmacologic & nonpharmacologic management and evidence-based treatment of major psychopathological disorders. This is the second course in progressive sequence of three courses. In this second course, students will focus on the etiology, epidemiology, evidence-based treatment, and management of OCD and related disorders, trauma and stress-related disorders, substance-related and addictive disorders, sleep-wake disorders, feeling and eating disorders, and personality disorders.

NRS 695 Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment III
This course is designed to provide advanced practice nursing students with scaffolding knowledge in diagnostics, psychopharmacologic & nonpharmacologic management and evidence-based treatment of major psychopathological disorders. This is the final course in progressive sequence of three courses. In this final course, students will focus on the etiology, epidemiology, evidence-based treatment, and management of dissociative disorders, somatic symptom and related disorders, elimination disorders, gender dysphoria, disruptive, impulse-control and conduct disorders, paraphilic disorders, and other mental disorders.

NRS 696A Equity and Management of Mental Healthcare in Diverse Populations
This course is designed for advanced practice nursing students to develop and enhance skills engaging with and understanding of diverse populations. We will be exploring issues of health disparity and bias, and expanding on skills in interviewing patients across cultures. We will also be addressing unique aspects of care when working with special populations such as BiPOC, LGBTQ+, children, geriatrics, pregnant women, veterans, medically-complex individuals, and patients with trauma history.

NRS 696B Transition to Psychiatric Mental Health Practice
This course is designed for Psychiatric Mental Health Nurse Practitioner students to support their transition confidently to practice as independent advanced practice registered nurses. Students will focus on leadership, quality improvement, safety, health policy, and regulatory bodies important to practice. We will also review in greater depth clinical topics pertaining to role of the PMHNP (collaboration, consultation, therapeutic relationships) as well as preparation for PMH NP board certification.

NRS 696D Transition to Practice for the Primary Care Nurse Practitioner
This course is designed for Family and Adult Gerontology Primary Care Nurse Practitioner students to prepare for professional practice as a nurse practitioner within the primary care setting. The course allows students to become familiar with the primary care nurse practitioner role by teaching them about the transition from RN to NP, reviewing ethical considerations for practice, and utilizing evidence-based practice for decision making in the clinical setting.

NRS 700 Pathophysiology, Physical Assessment, & Pharmacology
This course integrates advanced pathophysiology, physical assessment, and pharmacological principles to aid graduate-level nursing students' promotion of quality patient outcomes.

NRS 701 Advanced Pathophysiology
This course provides students with an understanding of advanced pathophysiology to aid in diagnostic reasoning and clinical decision-making.

NRS 702 Advanced Physical Assessment
This course integrates advanced knowledge, skills, and critical understanding necessary for the performance of a comprehensive patient health history and physical assessment.

NRS 703 Advanced Pharmacology
This course prepares nurses for professional roles in advanced nursing practice with knowledge of pharmacological principles of medications commonly prescribed to prevent and/or manage adverse health conditions of patients across the lifespan.

NRS 711 FNP Advanced Practice Clinical 1[7]
Clinical practicum that immerses FNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 250 hours.

NRS 712 FNP Advanced Practice Clinical 2
Clinical practicum that immerses FNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 250 hours.

NRS 713 FNP Advanced Practice Clinical 3
Clinical practicum that immerses FNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 250 hours.

NRS 714 Clinical Practicum I: Psych Mental Health Nurse Practice - Family
Clinical practicum that immerses PMHNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of diagnostic, management, psychopharmacological and evidence-based treatment will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 250 hours.

NRS 715 Clinical Practicum II: Psych Mental Health Nurse Practice - Family
Clinical practicum that immerses PMHNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of diagnostic, management, psychopharmacological and evidence-based treatment will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 250 hours.

NRS 716 Clinical Practicum III: Psych Mental Health Nurse Practice - Family
Clinical practicum that immerses PMHNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of diagnostic, management, psychopharmacological and evidence-based treatment will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 250 hours.

NRS 717 CNS Advanced Practice Clinical 1
Clinical practicum that immerses CNS students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 167 hours.

NRS 718 CNS Advanced Practice Clinical 2
Clinical practicum that immerses CNS students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in

---

[7] Students are expected to review specifics of Clinical Rotations for CNS, CNS-AG, FNP, and AGPCNP in their respective Clinical Supplemental Handbooks that follow this document's Appendices.

patients throughout the lifespan in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 167 hours.

NRS 719 CNS Advanced Practice Clinical 3
Clinical practicum that immerses CNS students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in patients throughout the lifespan in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 167 hours.

NRS 720 AGPCNP Advanced Practice Clinical 1
Clinical practicum that immerses AGPCNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in adults and geriatric patients in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 167 hours.

NRS 721 AGPCNP Advanced Practice Clinical 2
Clinical practicum that immerses AGPCNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in adults and geriatric patients in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 167 hours.

NRS 722 AGPCNP Advanced Practice Clinical 3
Clinical practicum that immerses AGPCNP students into their respective role as an advanced practice nurse in the health care setting. Using the accumulated foundation of coursework, research and other evidence, students will manage illnesses in adults and geriatric patients in a variety of clinical sites. Continuation of the application of primary prevention strategies and health maintenance will be incorporated into care. Students will be mentored by advanced practice clinicians and must demonstrate clinical course objectives expected of the role. The minimum requirement for this practicum is 167 hours.

NRS 731 Perioperative Strategic Management
This perioperative leadership course is designed to provide the learner with the knowledge and skills necessary to apply scientific principles of strategic management in the perioperative environment.

NRS 732 Perioperative Finance & Operations
This perioperative leadership course is designed to provide the learner with the knowledge and skills necessary to apply scientific principles of financial management and operational management in the perioperative environment.

NRS 733 Perioperative Human Resources/Relationship Management
This perioperative leadership course is designed to provide the learner with the knowledge and skills necessary to apply scientific principles of human resources and relationship management in the perioperative environment.

NRS 734 Perioperative Professional Leadership
This perioperative leadership course is designed to provide the learner with the knowledge and skills necessary to apply scientific principles of professionalism and leadership in the perioperative environment.

NRS 735 Nursing Practicum
This combined seminar and practicum bridges theory and research with practice. Students will collaborate with instructors and preceptors to design practicum experiences that further their professional development as advanced practice nurses. Consent of instructor required.

NRS 736 Perioperative Nurse Leader Practicum
This perioperative leadership practicum provides students the opportunity to apply the knowledge and skills learned in the entire program of study and demonstrate competence by integration and application to real-world scenarios.

NRS 810 Population Health and Health Policy

Population health is explored to critically examine epidemiological statistics on determinants of health; and strategies to promote health, reduce health risks at multiple levels, and promote a culture of health among diverse populations. Students will be challenged to consider the socioeconomic impact of the cost of health care, advance equitable population health policy, engage in advocacy, and advance their knowledge of preparedness in order to protect population health during disasters and public health emergencies.

NRS 820 Health Care Service and Clinical Quality

Human resource management in healthcare, Continuous Quality Improvement (CQI), and principles of risk management; ethics, patient safety, claims management, and proactive loss control are examined. Strategies for interprofessional team effectiveness in quality processes, patient outcomes, and patient satisfaction are evaluated; benchmarking metrics are outlined.

NRS 830 Health Systems Informatics

Examining the optimization of information management and communication to improve the health of populations, communities, families, and individuals. Frameworks include regulatory, legislative, workflow, electronic health record, billing, and telehealth. Application in professional development, translational research, and bioinformatics (genomics) are explored.

MASTER OF SCIENCE IN NURSING PROGRAM CONCENTRATION COURSE SEQUENCES

Concentration: Comprehensive   Total Credits: 30-36   Duration: 2 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 600 (1st 8 wks.) Clinical Prevention: Assessment & Planning OR NRS 810 (2nd 8 wks.) Population Health and Health Policy	3	NRS 665 (1st 8 wks.) Applied Statistics	3	NRS 612 (1st 4 wks.) Theoretical Foundations of Role Development for the Nurse Leader	3
NRS 625 (2nd 8 wks.) Healthcare Systems & Policy OR NRS 820 (2nd 8 wks.) Health Care Service and Clinical Quality	3	NRS 670 (2nd 8 wks.) Evidence-Based Practice	3	OPTIONS: NRS 700 (8-12 wks) Pathophysiology, Physical Assessment, & Pharmacology (if no plans for APN Certificate/Track) OR NRS 645 (2nd 8 wks.) if taking 701, 702, or 703 individually over 16-week semesters next year OR NRS 701 (2nd 8 wks.) Advanced Pathophysiology	3
Total	6	Total	6	Total	6
Year 1 Total Credits: 18					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 830 (1st 8 wks.) Health Systems Informatics	3	NRS 631 (1st 8 wks.) Curriculum, Instruction, and Methodology in Nursing Education	3	NRS 735 (12 wks.) Nursing Practicum	3
NRS 701 (16 wks.) Advanced Pathophysiology OR NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 645 (2nd 8 wks.) Advanced Leadership Roles in the Healthcare System	3	NRS 703 (12 wks.) Advanced Pharmacology	3
		NRS 702 (16 wks.) Advanced Physical Assessment OR NRS 703 (2nd 8 wks.) Advanced Pharmacology	3	NRS 645 (2nd 8 wks.) if 701, 702, or 703 were taken individually over 8-week sessions previous year	3
Total	3-6	Total	6-9	Total	6
Year 2 Total Credits: 12-18					

Concentration: Clinical Nurse Specialist   Total Credits: 44   Duration: 3 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 600 (1st 8 wks.) Clinical Prevention: Assessment & Planning	3	NRS 665 (1st 8 wks.) Applied Statistics	3	NRS 612 (1st 4 wks.) Theoretical Foundations of Role Development for the Nurse Leader	3
NRS 625 (2nd 8 wks.) Healthcare Systems & Policy	3	NRS 670 (2nd 8 wks.) Evidence-Based Practice	3	NRS 701 (2nd 8 wks.) Advanced Pathophysiology	3
Total	6	Total	6	Total	6
Year 1 Total Credits: 18					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 830 (1st 8 wks.)* Health Systems Informatics	3	NRS 645 (1st 8 wks.) Advanced Leadership Roles in the Healthcare System	3	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 703 (2nd 8 wks.) Advanced Pharmacology	3		3
Total	6	Total	6	Total	3
Year 2 Total Credits: 15					
*Students may also take NRS 830 during the 1st 8 weeks of Summer semester if preferred					
**Adult Gerontology Concentration only					
Fall (3rd year)	Crs	Spring (3rd year)	Crs	Summer (3rd year)	Crs
NRS 717 (16 wks.) CNS Advanced Practice Clinical 1	3	NRS 718 (16 wks.) CNS Advanced Practice Clinical 2	3	NRS 719 (12 wks.) CNS Advanced Practice Clinical 3	3
Total	3	Total	3	Total	3
Year 3 Total Credits: 9					

Concentration: Clinical Nurse Specialist -Adult Gerontology   Total Credits: 45   Duration: 3 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 600 (1st 8 wks.) Clinical Prevention: Assessment & Planning	3	NRS 665 (1st 8 wks.) Applied Statistics	3	NRS 612 (1st 4 wks.) Theoretical Foundations of Role Development for the Nurse Leader	3
NRS 625 (2nd 8 wks.) Healthcare Systems & Policy	3	NRS 670 (2nd 8 wks.) Evidence-Based Practice	3	NRS 701 (2nd 8 wks.) Advanced Pathophysiology	3
Total	6	Total	6	Total	6
Year 1 Total Credits: 18					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 830 (1st 8 wks.)* Health Systems Informatics	3	NRS 645 (1st 8 wks.) Advanced Leadership Roles in the Healthcare System	3	NRS 690 (1st 6 wks.)** Adult and Older Adult	3
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 703 (2nd 8 wks.) Advanced Pharmacology	3	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
Total	6	Total	6	Total	6
Year 2 Total Credits: 18					
*Students may also take NRS 830 during the 1st 8 weeks of Summer semester if preferred					
**Adult Gerontology Concentration only					
Fall (3rd year)	Crs	Spring (3rd year)	Crs	Summer (3rd year)	Crs
NRS 717 (16 wks.) CNS Advanced Practice Clinical 1	3	NRS 718 (16 wks.) CNS Advanced Practice Clinical 2	3	NRS 719 (12 wks.) CNS Advanced Practice Clinical 3	3
Total	3	Total	3	Total	3
Year 3 Total Credits: 9					

Concentration: Family Nurse Practitioner   Total Credits: 45   Duration: 3 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 600 (1st 8 wks.) Clinical Prevention: Assessment & Planning	3	NRS 665 (1st 8 wks.) Applied Statistics	3	NRS 612 (1st 4 wks.) Theoretical Foundations of Role Development for the Nurse Leader	3
NRS 625 (2nd 8 wks.) Healthcare Systems & Policy	3	NRS 670 (2nd 8 wks.) Evidence-Based Practice	3	NRS 701 (2nd 8 wks.) Advanced Pathophysiology	3
Total	6	Total	6	Total	6
Year 1 Total Credits: 18					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 830 (1st 8 wks.)* Health Systems Informatics	3	NRS 645 (1st 8 wks.) Advanced Leadership Roles in the Healthcare System	3	NRS 696D (1st 6 wks.) Transition to Practice for the Primary Care Nurse Practitioner	1.5
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 703 (2nd 8 wks.) Advanced Pharmacology	3	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
Total	6	Total	6	Total	4.5
Year 2 Total Credits: 16.5					
*Students may also take NRS 830 during the 1st 8 weeks of Summer semester if preferred					
Fall (3rd year)	Crs	Spring (3rd year)	Crs	Summer (3rd year)	Crs
NRS 711 (16 wks.) FNP Advanced Practice Clinical 1	3	NRS 712 (16 wks.) FNP Advanced Practice Clinical 2	3	NRS 713 (12 wks.) FNP Advanced Practice Clinical 3	3
NRS 696A (1st 8 wks.) Equity and Management of Diverse Populations for the Nurse Practitioner	1.5				
Total	4.5	Total	3	Total	3
Year 3 Total Credits: 10.5					

Concentration: Adult Gerontology Primary Care Nurse Practitioner   Total Credits: 48   Duration: 3 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 600 (1st 8 wks.) Clinical Prevention: Assessment & Planning	3	NRS 665 (1st 8 wks.) Applied Statistics	3	NRS 612 (1st 4 wks.) Theoretical Foundations of Role Development for the Nurse Leader	3
NRS 625 (2nd 8 wks.) Healthcare Systems & Policy	3	NRS 670 (2nd 8 wks.) Evidence-Based Practice	3	NRS 701 (2nd 8 wks.) Advanced Pathophysiology	3
Total	6	Total	6	Total	6
Year 1 Total Credits: 18					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 830 (1st 8 wks.)* Health Systems Informatics	3	NRS 645 (1st 8 wks.) Advanced Leadership Roles in the Healthcare System	3	NRS 690 (1st 6 wks.) Adult and Older Adult	3
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 703 (2nd 8 wks.) Advanced Pharmacology	3	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
Total	6	Total	6	Total	6
Year 2 Total Credits: 18					
*Students may also take NRS 830 during the 1st 8 weeks of Summer semester if preferred					
Fall (3rd year)	Crs	Spring (3rd year)	Crs	Summer (3rd year)	Crs
NRS 720 (16 wks.) AGPCNP Advanced Practice Clinical 1	3	NRS 721 (16 wks.) AGPCNP Advanced Practice Clinical 2	3	NRS 722 (12 wks.) AGPCNP Advanced Practice Clinical 3	3
NRS 696A (1st 8 wks.) Equity and Management of Diverse Populations for the Nurse Practitioner	1.5			NRS 696D (1st 6 wks.) Transition to Practice for the Primary Care Nurse Practitioner	1.5
Total	4.5	Total	3	Total	4.5
Year 3 Total Credits: 12					

Concentration: Psychiatric Mental Health Nurse Practitioner   Total Credits: 51   Duration: 3 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 665 (1st 8 wks.) Applied Statistics	3	NRS 625 (2nd 8 wks.) Healthcare Systems & Policy	3	NRS 691 (1st 8 wks.) Neuropathophysiology	3
NRS 670 (2nd 8 wks.) Evidence-Based Practice	3	NRS 600 (1st 8 wks.) Clinical Prevention: Assessment & Planning	3	NRS 645 (2nd 8 wks.) Advanced Leadership Roles in the Healthcare System	3
Total	6	Total	6	Total	6
Year 1 Total Credits: 18					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 701 (16 wks.) Advanced Pathophysiology	3	NRS 702 (16 wks.) Advanced Physical Assessment	3	NRS 703 (12 wks.) Advanced Pharmacology	3
NRS 692 (16 wks.) Introduction to Psychotherapy/Psychiatric Interviewing & Common Major Psychopathological Disorder Basics	3	NRS 693 (16 wks.) Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment I	3	NRS 694 (12 wks.) Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment II	3
Total	6	Total	6	Total	6
Year 2 Total Credits: 18					
*Students may also take NRS 830 during the 1st 8 weeks of Summer semester if preferred					
Fall (3rd year)	Crs	Spring (3rd year)	Crs	Summer (3rd year)	Crs
NRS 714 (16 wks.) Clinical Practicum I: Psych Mental Health Nurse Practice - Family	3	NRS 715 (16 wks.) Clinical Practicum II: Psych Mental Health Nurse Practice - Family	3	NRS 716 (12 wks.) Clinical Practicum III: Psych Mental Health Nurse Practice - Family	3
NRS 695 (16 wks.) Diagnostics, Management, Psychopharmacology & Evidence-Based Treatment III	3	NRS 696A (1st 8 wks.) Equity and Management of Mental Healthcare in Diverse Populations	1.5		
		NRS 696B (2nd 8 wks.) Transition to Psychiatric Mental Health Practice	1.5		
Total	6	Total	6	Total	3
Year 3 Total Credits: 15					

Concentration: CNS-AG Post-Master's Certificate   Total Credits: 12-24   Duration: 2 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 701 (1st 8 wks.) Advanced Pathophysiology	3	NRS 703 (1st 8 wks.) Advanced Pharmacology	3	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 690 (2nd 8 wks.) Adult and Older Adult	3		
Total	6	Total	6	Total	3
Year 1 Total Credits: 15					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 717 (16 wks.) CNS Advanced Practice Clinical 1	3	NRS 718 (16 wks.) CNS Advanced Practice Clinical 2	3	NRS 719 (12 wks.) CNS Advanced Practice Clinical 3	3
Total	3	Total	3	Total	3
Year 2 Total Credits: 9					

Concentration: FNP Post-Master's Certificate   Total Credits: 12-24   Duration: 2 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 701 (1st 8 wks.) Advanced Pathophysiology	3	NRS 703 (1st 8 wks.) Advanced Pharmacology	3	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 696A (2nd 8 wks.) Equity and Management of Diverse Populations for the Nurse Practitioner	1.5		
Total	6	Total	4.5	Total	3
Year 1 Total Credits: 13.5					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 711 (16 wks.) FNP Advanced Practice Clinical 1	3	NRS 712 (16 wks.) FNP Advanced Practice Clinical 2	3	NRS 713 (12 wks.) FNP Advanced Practice Clinical 3	3
		NRS 696D (2nd 8 wks.) Transition to Practice for the Primary Care Nurse Practitioner	1.5		
Total	3	Total	4.5	Total	3
Year 2 Total Credits: 10.5					

Concentration: AGPCNP Post-Master's Certificate   Total Credits: 15-27   Duration: 2 Years

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 701 (1st 8 wks.) Advanced Pathophysiology	3	NRS 703 (1st 8 wks.) Advanced Pharmacology	3	NRS 690 (1st 6 wks.) Adult and Older Adult	3
NRS 702 (2nd 8 wks.) Advanced Physical Assessment	3	NRS 696A (2nd 8 wks.) Equity and Management of Diverse Populations for the Nurse Practitioner	1.5	NRS 680 (2nd 6 wks.) Differential Diagnosis	3
Total	6	Total	4.5	Total	6
Year 1 Total Credits: 16.5					
Fall (2nd year)	Crs	Spring (2nd year)	Crs	Summer (2nd year)	Crs
NRS 720 (16 wks.) AGPCNP Advanced Practice Clinical 1	3	NRS 721 (16 wks.) AGPCNP Advanced Practice Clinical 2	3	NRS 722 (12 wks.) AGPCNP Advanced Practice Clinical 3	3
		NRS 696D (2nd 8 wks.) Transition to Practice for the Primary Care Nurse Practitioner	1.5		
Total	3	Total	4.5	Total	3
Year 2 Total Credits: 10.5					

Concentration: Perioperative Leadership Graduate Certificate   Total Credits: 15   Duration: 1 Year

Fall (1st year)	Crs	Spring (1st year)	Crs	Summer (1st year)	Crs
NRS 731 (1st 8 wks.) Perioperative Strategic Management	3	NRS 733 (1st 8 wks.) Perioperative Human Resources/Relationship Management	3	NRS 736 (12 wks.) Perioperative Nurse Leader Practicum	3
NRS 732 (2nd 8 wks.) Perioperative Finance & Operations	3	NRS 734 (2nd 8 wks.) Perioperative Professional Leadership	3		
Total	6	Total	6	Total	3
Year 1 Total Credits: 15					

COURSE FORMAT

Didactic Courses

Didactic courses are facilitated in a fully-online format and MOST often offered over an 8-week session comprised of 8 individual modules. ***Each module begins Wednesday (12:01AM CST) and concludes the following Tuesday (11:59PM CST).*** At the discretion of the instructor, the first module may be available PRIOR TO the first Wednesday of the session and the last module may close AFTER the last Tuesday of the session. Typically, each module consists of presentations (PowerPoint, recorded lectures, etc.), readings, and associated activities intended to foster instructor-student and student-student interaction. When a module requires students to submit an initial post followed by a response, the initial posting is due on Saturdays at 11:59PM CST and responses are due Tuesdays at 11:59PM CST. Students should read instructions for all activities early on in the module and, if needed, contact the instructor with questions by 11:59AM CST on the Friday of that module. In addition to weekly modules, most didactic courses require one or more larger-scope assignments (e.g., scholarly papers; projects). Students are responsible for adhering to course syllabi regarding expectations and due dates related to all course-associated exercises.

Advanced Practice Clinical Courses

Advanced practice clinical rotations (NRS 711-722) offer CNS and NP students the opportunity to apply theory attained in didactic courses to the clinical setting. Students in the CNS, CNS-AG, AGPCNP and PMHNP concentrations are required to complete an established minimum number of precepted clinical hours in practice settings as part of their program of study (distributed over 3 advanced practice clinical rotations [view respective concentration Handbook for hour requirements]). Advanced practice clinical rotations span the full 16-week fall and spring semesters and 12-week summer semester. Advanced practice clinical courses are facilitated by both an Instructor of Record and Preceptor. The Instructor of Record facilitates the "theory" portion of the advanced practice clinical courses whereas the Preceptor oversees the "practice" experience for each student at the practice setting. Students are responsible for meeting all content objectives in "theory" course modules. Students should be prepared for the large volume of independent study that is required in the advanced practice clinical.

Due to the direct care nature of the role, all AGPCNP, FNP, and PMHNP students must meet secondary educational requirements to begin Advanced Practice Clinical rotations. To be eligible to begin Advanced Practice Clinical, AGPCNP, FNP and PMHNP students must earn a 3.0 cumulative GPA in the NRS 701, 702, 703, and 680 course series and successfully pass a 2-part Clinical Competency Examination (CCE). The CCE includes: (a) a head-to-toe exam and (b) a focused exam. The student must score a minimum of 80% on each component to successfully complete the CCE. Students who do not achieve an 80% on each component are not permitted to begin Advanced Practice Clinical rotations. If unable to pass the CCE, alternative options for degree completion will be explored with the student.

Practicum Courses

The practicum course (NRS 735) offers students in the MSN Comprehensive program the opportunity to apply theory attained in didactic courses to their current and future practice. The practicum experience is a minimum of 180 hours over the 12-week summer semester (this hour requirement can be split between two or more sites/preceptors as the student's contract outlines). Experiences are related to educational activities that support the learning goals of the student, incorporate the identified course Essentials (respective AACN Essentials of Master's Education in Nursing), and are mutually agreed upon by the student, Instructor of Record, and preceptor.

ONLINE CLASSROOM CONDUCT

Students are expected to attend and participate in all asynchronous modules. Students anticipating a missed or late module must notify the course instructor via email as far in advance as possible. The decision as to whether a missed or late module will be excused or accepted will be made on an individual basis and at the discretion of the instructor. Work obligations, vacation travel, and technical requirements do not excuse a student from their responsibility to cover any and all content required of the module or submit assignments as scheduled.

Faculty and Student Email Expectations

All course related email correspondence, including correspondence with faculty and clinical preceptors, should take place via BlackBoard and/or the Edgewood email system. All students must use their Edgewood College email address as their official email address. Students are responsible for checking email on a daily basis. Response to email is expected within 48 business hours.

Preview of Assignments Prior to Submission Deadline

Students are encouraged to review all assignment guidelines and rubrics prior to the submission deadline. Any specific assignment-related questions should be addressed to the course instructor via email in a timely fashion. Students may submit assignments prior to the submission deadline; however, they may not do so as an attempt to solicit formative feedback toward assignment improvement. Faculty reserve the right to allow only one submission of any given assignment.

Exams/Quizzes

Courses may have exams/quizzes as part of the evaluation criteria. Students must read, understand, and adhere to individual course policy regarding exams/quizzes.

POLICIES AND PROCEDURES FOR ADVANCED PRACTICE CLINICAL ROTATIONS (CNS & NP CONCENTRATIONS AND/OR CERTIFICATES)

General Guidelines

Students are primarily responsible for identifying and initiating an agreement with their clinical preceptors and practice settings, but assistance is provided by both Faculty and the Clinical Coordination Team as necessary. Once initiated, the Clinical Coordination Team will formalize all necessary contractual agreements. Due to the potential extended period of time needed to establish a formal agreement between multiple parties (student, Preceptor, Edgewood College, practice settings), students must notify the Clinical Coordination Team of their desired Preceptor and practice setting AT LEAST 180 days prior to the start of their experience via the appropriate role-specific **Advanced Practice Clinical Preceptor Form** (Appendix B-1 [CNS], B-2 [FNP], B-3 [PMHNP], and B-4 [AGPCNP]). Following this notification, students must anticipate follow-up communication from the Clinical Coordination Team regarding site-specific requirements needing completion prior to beginning the rotation. Students must adhere to the requirements and deadlines communicated by the Clinical Coordination Team. If Preceptor/practice setting guidelines are not completed by the specified date, students are at risk for not being able to remain in the next semester's advanced practice clinical course. Preceptors and practice settings are subject to approval by the advanced practice clinical course's Instructor of Record (in consultation with the clinical placement team) to ensure that assignments are based on the specific educational and credentialing needs of the student.

Once the Instructor of Record (via the Clinical Coordination Team) approves a student's Preceptor and practice setting, the student:

1. works through the Clinical Coordination Team to ensure that all documentation is complete and approved for the advanced practice clinical rotation.
2. drafts and submits their resume and objectives for the clinical experience to their Instructor of Record when requested. Objectives must be measurable, realistic, and individualized. The Instructor of Record will review them and provide feedback BEFORE submission to the Preceptor.
3. drafts and submits a **Preceptor Memorandum of Understanding** form to their Instructor of Record to review, discuss, and approve (Appendix C).
4. schedules a meeting with the Preceptor to discuss and/or complete resume, objectives for the clinical experience, schedule, and Preceptor Memorandum of Understanding form (this form must be signed by preceptor). In MOST cases, the mutually agreed upon schedule must lead to the accumulation of **AT LEAST 167** hours each semester for CNS, CNS-AG, and AGPCNP concentrations and **AT LEAST 250** hours each semester for the FNP and PMHNP concentrations. Importantly, the SoN recognizes that many students need to continue outside employment while completing advanced practice clinical rotations, however, preceptors and practice settings may not be able to accommodate students' work schedules.
5. submits to Clinical Coordination Team all necessary documentation for student file (final resume, objectives, schedule, and Preceptor Memorandum of Understanding form).
6. is responsible for meeting all compliance requirements prior to beginning their advanced practice clinical rotation. These compliance requirements include attendance at HIPPA classes, computer-training, fire and safety protocol, adhering to agency dress code, etc.
7. is responsible for all clinical site-specific subscriptions required by the site (e.g., MyClinicalExchange, Rural Wisconsin Health Cooperative).

Once the advanced practice clinical rotation begins:

1. students are responsible for accurately and punctually documenting all advanced practice clinical hours into **Typhon** (Appendix D-NPST Version). Advanced clinical hours and documentation will be reviewed by the Instructor of Record. If the Instructor of Record has any concerns regarding documentation prior to approval, the student will be contacted. Students MAY NOT count travel time as part of their clinical hours. Hours can only be satisfied within the scheduled dates of the semester unless mutually agreed upon by the Instructor of Record, Preceptor, student, and practice setting. Students are responsible for paying the one-time registration fee for Typhon.
2. students are expected to punctually attend all clinical experiences. In the event a student is not able to attend a previously arranged clinical day, the student must notify the Instructor of Record and Preceptor/site as soon as possible. Additional scheduled hours will have to be arranged (be aware that preceptors are not compensated for their time and are under no obligation to make accommodations).

3. there may be an occasion to work with providers in the practice setting other than the assigned Preceptor. These opportunities may present themselves due to scheduling issues, Preceptor or Instructor of Record suggestion, Preceptor illness, etc. In these instances, the Instructor of Record must be notified, and the experience must be noted on the clinical log (Typhon). Importantly, the majority of clinical hours should be spent with the primary Preceptor(s) in order for a comprehensive evaluation of clinical performance to be given.
4. the Instructor of Record will review students' progress with preceptors to validate clinical competency. Additional hours may need to be completed should skills be deemed "lacking."[8]
5. students are responsible for additional expenses connected to advanced practice clinical rotations and should be anticipated and planned for in advance (e.g., parking, identification badges).
6. students are expected to provide their own transportation to and from the practice setting.
7. students must maintain an unrestricted RN licensure in the state of their practice setting.

Please note that students already employed in a practice setting MAY complete clinical precepted in the agency, but not the department in which they work. Moreover, the student MAY NOT assume the role of the student in that agency unless formally relieved of all employer-employee responsibilities during their scheduled precepted hours. During their advanced practice clinical rotations, students are expected to be precepted at all times and only act within the advanced practice nurse role denoted by their program (CNS, CNS-AG, FNP, AGPCNP, and PMHNP). Engaging in non-advanced practice nursing roles during the advanced practice clinical rotation is not allowed.

The CNS, CNS-AG, FNP, AGPCNP, and PMHNP concentrations require that advanced practice clinical rotations adhere to the professional practice standards as identified by the ANCC credentialing body (see ANCC website https://www.nursingworld.org). Advanced practice clinical students are ideally paired one-to-one with either preceptors who hold certifications from ANCC or AACN as Clinical Nurse Specialists or Nurse Practitioners (AANP certification for Nurse Practitioners is also acceptable). Physicians or Doctors of Osteopathic Medicine (D.O.) and physician assistants will be considered as suitable preceptors on a case-by-case basis.

The CNS, CNS-AG, FNP, AGPCNP, and PMHNP roles function in a multitude of practice settings. CNS, CNS-AG, AGPCNP, and PMHNP advanced practice clinical rotations are carefully coordinated between the student and Instructor of Record. In the case of practice settings for all NP students, the respective NP Program Director directly reviews the appropriateness of the site with the Instructor of Record.

It is imperative that students familiarize themselves with their respective state's guidelines regarding specific licensing requirements (which could potentially affect clinical needs in terms of hours and sites) and scope-of-practice regarding the CNS, CNS-AG, FNP, AGPCNP, and PMHNP roles. The following site serves as an excellent resource: https://nursinglicensemap.com/advanced-practice-nursing/, however, students outside the State of Wisconsin are highly encouraged to contact their State Board of Nursing for up-to-date information. **Please note:** *our programs are only approved in certain states; a student changing their state of residency while in the program may jeopardize their ability to complete the program if our program is not yet approved in that state. It is the utmost importance students proactively communicate to the clinical placement team any plans regarding moving to a different state*.

Advanced Practice Clinical Dress Code
Students are expected to wear appropriate professional attire for all advanced practice clinical experiences. Students may need to wear a lab coat* with a nametag at the site of their advanced practice clinical (lab coats can be purchased at the Edgewood College bookstore; nametags will be issued by the School of Nursing for a $10 fee). Some agencies may have other requirements for their dress code. Students should check with their advanced clinical preceptor and/or site to identify appropriate dress code.

---

[8] If the Instructor of Record determines that a student is not meeting course or clinical objectives or standards as outlined in the syllabus, or if a clinical issue arises related to patient safety or professional practice, a conference will be held with the student to further explore the issue. Preceptors and Edgewood faculty maintain the right to ask the student to leave the clinical site until any issue of concern is resolved. If an issue of concern is unable to be resolved, a conference with the Instructor of Record, Preceptor, Associate Dean for Graduate Nursing Programs, and the student will be held to determine next course of action (e.g., written warning, clinical probation, repeat all or part of clinical rotation, assign failing grade, program dismissal). Documentation with agreed upon outcomes will become part of the student record.

The nametag will have the following lines:
1. Name and educational credentials (Ex. BSN, RN)

2. Henry Predolin School of Nursing, Edgewood College

3. Student's concentration (Ex., Family Nurse Practitioner Student)

*Note that some sites prefer students do NOT wear lab coats. Each student should check with the preceptor regarding attire. If lab coats are not required by the site, a name tag should be worn at all times.

POLICIES AND PROCEDURES FOR PRACTICUM COURSE (MS in Nursing-Comprehensive)

Students are primarily responsible for identifying and initiating an agreement with their practicum course preceptors and sites, but assistance is provided by both Faculty and the Clinical Coordination Team as needed. Once initiated, the Clinical Coordination Team will formalize all necessary contractual agreements. Due to the potential extended period of time needed to establish a formal agreement between multiple parties (student, preceptors, Edgewood College, practice settings), students must notify the Clinical Coordination Team of their desired preceptors and practice settings AT LEAST 90 days prior to the start of their experience via the **MS in Nursing Student Practicum Preceptor Form** (See Appendix E). Following this notification, students must anticipate follow-up communication from the Clinical Coordination Team regarding site-specific requirements needing completion prior to beginning the rotation. If Preceptor/practicum setting guidelines are not completed by date specified, students are at risk for not being able to remain in the upcoming practicum course. Preceptors and practicum settings are subject to the approval by the Instructor of Record for the practicum course (in consultation with the clinical placement team) to ensure that assignments are based on the specific educational needs of the student.

Once the Instructor of Record approves a student's Preceptors and practicum settings, the student:

1. works through the Clinical Coordination Team to ensure that all documentation is complete and approved for the practicum site.
2. drafts and submits their resume and objectives for the practicum experience to their Instructor of Record prior to the beginning of the practicum course. Objectives must be measurable, realistic, and individualized. The Instructor of Record will review them and provide feedback BEFORE submission to the preceptor(s).
3. drafts and submits a **Preceptor Memorandum of Understanding** form to their Instructor of Record to review, discuss, and approve (Appendix C).
4. schedules a meeting with each preceptor to discuss resume, objectives for the practicum experience, schedule, and Preceptor Memorandum of Understanding form (this form must be signed by each preceptor). The mutually agreed upon schedule must lead to the accumulation of **AT LEAST 180** hours. Please note that all MS in Nursing Comprehensive students must accumulate hours in both an advanced clinical-focused (i.e., practice setting includes activities where the student engages in complex care such as advanced wound care; care of ventilator-dependent patients) and an advanced role-specific experience (e.g., leadership/management; nurse education/staff development). Importantly, the School of Nursing recognizes that many students need to continue outside employment while completing practicum rotations, however, preceptors and practicum settings may not be able to accommodate students' work schedules.
5. submits to Instructor of Record all necessary documentation for student file (final resume, objectives, schedule, and Preceptor Memorandum of Understanding form).
6. students are responsible for meeting all compliance requirements prior to beginning their practicum experience. These compliance requirements include attendance at HIPPA classes, computer-training, fire and safety protocol, adhering to agency dress code, etc.
7. students completing practicum rotations outside of their licensed state are required to obtain a current license for the state in which they are completing their practicum.

Once the practicum begins:

1. students are responsible for accurately and punctually documenting all practicum hours into **Typhon** (Appendix D-NSST Version). Practicum hour documentation will be reviewed by the Instructor of Record and approved. If the Instructor of Record has any concerns regarding documentation, the student will be contacted. Students MAY NOT count travel time as part of their practicum hours. Hours can only be satisfied within the scheduled dates of the semester unless mutually agreed upon between Instructor of Record, preceptors, student, and practice setting.
2. students are expected to punctually attend all scheduled practicum experiences. In the event a student is not able to attend a previously arranged practicum experience, the student must notify the Instructor of Record and preceptor/site as soon as possible. Additional scheduled hours will have to be arranged (be aware that preceptors are not compensated for their time and are under no obligation to make accommodations).

3. there may be occasion to work with individuals other than the assigned preceptor. These opportunities may present themselves due to scheduling issues, Preceptor or Instructor of Record suggestion, preceptor illness, etc. In these instances, your Instructor of Record must be notified and the experience must be noted on the clinical log. Importantly, the majority of practicum hours should be spent with the primary preceptor(s) in order for a comprehensive evaluation of performance to be given.
4. the Instructor of Record will review students' progress with preceptors to validate progress toward educational objectives. Additional hours may need to be completed should skills be deemed "lacking" (See Section entitled: Preceptor and Student Evaluation Process).
5. students are responsible for additional expenses connected to practicum experiences and should be anticipated and planned for in advance (e.g., parking, identification badges).
6. students are expected to provide their own transportation to and from the practicum experiences.

Please note that students MAY complete practicum hours at their place of employment, but not in the area they are employed. If a student is currently working in a nurse administrator or nurse educator role, the Preceptor should be at a level higher than the student's level as students are encouraged to seek preceptors who will provide a mentoring opportunity and are appropriately prepared academically.

Under no circumstances may a preceptor be a family member or close friend of the student.

Practicum Dress Code
Students are expected to wear appropriate professional attire during all practicum experiences. Some agencies may have other requirements for their dress code. Students should check with their advanced clinical preceptor and/or site to identify appropriate dress code.

Preceptor and Student Evaluation Process
Faculty will discuss students' progress with preceptors throughout the semester to validate hours and completion of course objectives. The **Preceptor Evaluation of Student Performance** form (Appendix F) will be completed by the Instructor of Record, in consultation with the preceptor at mid-semester and at the end of the semester. The Preceptor Evaluation of Student Performance will be completed by the preceptor at the end of each practicum rotation.

Students will complete **Student Evaluation of Preceptor** (Appendix G) at the end of each practicum. Completion and submission of this documentation is needed to complete requirements of each practicum course each semester.

VIEWPOINT SCREENING (HEALTH REQUIREMENT AND BACKGROUND CHECK COMPLIANCE)
Before entering an Advanced Practice Clinical Rotation (NRS 711-722) or Nursing Practicum (NRS 735), students must provide evidence of completing all compliance requirements for the School of Nursing and the practice setting as outlined in the **On-Boarding Requirements for Graduate Students** document (Appendix H). Compliance files are maintained by **Viewpoint Screening** (Appendix I). Students are held responsible for accurately uploading their health information into Viewpoint Screening by the established due date (dates may vary depending upon agency guidelines). It is further students' responsibility to submit any additional health-related documentation required by the agency where the advanced practice clinical or practicum is to be held (including proof of current physical examination). Associated fees for Viewpoint Screening and any additional documentation required by the agency are covered by the student. Failure to comply with the student health policies will result in exclusion from advanced practice clinical or practicum, as well as possibly being dropped from the course.

Students are required to contact the Clinical Coordination Team immediately with any change in their health status.

The SoN and all clinical agencies under contract to the SoN require that every student and faculty member submit to a background check. Background checks are initiated through the Viewpoint Screening registration process. Students may also be required to complete additional background checks by the agency where the advanced practice clinical or practicum is to be held. Failure to submit to a background check will result in exclusion from the advanced practice clinical or practicum, as well as possibly being dropped from the course. Potential criminal background history concerns are addressed on a case-by-case basis.

Students are required to contact the Clinical Coordination Team immediately with any change in their criminal background history.

Students are responsible for keeping all documentation updated as needed to complete their advanced practice clinical or practicum experience. Students should keep copies of these documents in a personal file, so they are available if requested by their advanced practice clinical or practicum agency.

PROGRESSION

ACADEMIC ADVISING

Upon admission, students are advised by the Graduate Program Advisor.

The Graduate Program Advisor assists students in understanding the administrative and logistic components of the MS in Nursing program. The Graduate Program Advisor establishes a program plan in students' initial meeting, maintains a complete record of each student's program plan throughout their academic career, communicates policy changes, and makes referrals as needed. Students in the MSN program should consult with the Graduate Program Advisor every semester before registering for courses, or when their course plan changes.

Faculty serve as all MS in Nursing students' point-of-contact for educational and professional interests and concerns. The Clinical Coordination Team engages the student in initial and ongoing clinical practicum discussions.

COURSE INFORMATION AND SCHEDULE

The majority of coursework for all MS in Nursing concentrations will be delivered in an online format (Practicum and Advanced Practice Clinical Courses require face-to-face meetings and in-practice hours). Most courses are offered over 8-week sessions. Summer semester courses are offered over 4-, 6-, and 8-week sessions. Clinical courses and practicum may run 16 weeks (fall and spring semesters) or 12 weeks (summer). Students should speak to the Graduate Program Advisor if they have further questions regarding the format of course facilitation.

Students may be able to complete the Comprehensive program in 21 months by taking two courses each semester. Students may be able to complete the CNS, CNS-AG, FNP, AGPCNP, or PMHNP programs in three years by taking two courses each semester. Post-master's certificate students may complete the AGPCNP or FNP certificate programs in as little as 15 months, dependent on courses that are accepted for transfer. Although students meet with the Graduate Program Advisor to plan out their course sequences, their plans may change during their time in the program. The time to complete the MS in Nursing degree depends on the number of courses taken per semester and communicating with the Graduate Program Advisor regarding any changes in the course plan.

Students can enter the programs at the beginning of any fall, spring, or summer session.

ACADEMIC DATES AND REGISTRATION POLICY

Registration consists of course selection for the next semester, with the assistance of the Graduate Program Advisor as necessary. Registration has two distinct steps:

1. Registration
2. Payment of Fees

Registration is open prior to each fall, spring, and summer semester. Online registration is available to new and continuing students. Graduate students are held responsible for knowing the registration policies and procedures as printed in the *Registration Guide*.

Registration is complete when all fees are paid or payment arrangements are made with the Business Office. Credit may not be earned unless a student is properly registered and fees are paid. Students who have not paid fees or made payment arrangements by the end of the first week of classes will be withdrawn.

Academic Dates and Deadlines
Students are held responsible for knowing and adhering to academic dates and deadlines regarding add/drops, refunds, and withdrawals as published by the Registrar: https://registrar.edgewood.edu/academic-dates-and-deadlines

Add/Drop Policies
Students may use the online registration system to add or drop courses until the deadline has been reached. Students may also use the official Course Change Form obtained from the Graduate Program Advisor or the Office of the Registrar to add or drop a course. This form must be submitted to the Registrar's Office before the student will be considered officially added or dropped from a class. All other changes in course registration follow a similar procedure. Failure to comply with the official Add/Drop procedure may result in a loss of credit or a grade of "F" for an unofficial drop from a course. Absence from classes or informing the instructor does not constitute withdrawal or dropping a course and will result in a failure for the course(s).

GRADE REPORTS

Grades may be viewed online.

Only graduate courses numbered 600 or above are used to determine a student's cumulative and semester GPA. In accordance with College Policy, no grade below a C is applicable for meeting requirements for a graduate degree.

GRADING POLICY

A…………………………………………95-100%
AB………………………………………90-94%
B…………………………………………. 85-89%
BC………………………………………80-84%
C…………………………………………. 75-79%
D………………………………………….70-74%
F………………………………………… 0-69%

INCOMPLETE GRADES

In accordance with College Policy, "incompletes" may only be given when they are initiated by the student and the proper procedure is followed.

1. The student submits a "Request for Incomplete" to the instructor. The form must be signed by the student and the instructor before it is filed with the Registrar's Office. The Request for Incomplete must be filed either before or at the same time grades are submitted by the instructor.
2. Reasons for an Incomplete must be illness or an emergency—a situation beyond the student's control, which makes the student unable to finish the class. The student must have attended regularly and done the work up until the point of the Incomplete. Incompletes may not be given by the instructor for missed exams or late work.
3. If a student has not formally requested an Incomplete and misses exams or does not complete the coursework, a grade of "A" to "F" must be given for the work that has been done to date according to the course syllabus.
4. Incomplete work must be submitted and a grade given within 10 weeks of the close of the term in which the Incomplete is given, unless a request to extend the time for completion has been filed with the Registrar's Office before the 10-week period is completed.
5. Incompletes submitted by an instructor without the appropriate form will not be accepted. If such a grade appears, the Registrar will assign a grade of "F" for the class.

ACADEMIC STANDING

There are three categories of academic standing for students enrolled in graduate programs at Edgewood College: good standing, probation, and dismissed.

Good Standing

An enrolled student in good standing is one who maintains a cumulative 3.00 GPA while enrolled in graduate courses.

Probation

An enrolled student whose cumulative GPA in graduate courses falls below 3.00 is placed on probation.

Dismissed

A student on probation is dismissed if his or her cumulative GPA remains below 3.00 after completing nine additional graduate credits. Coursework which is not included in the grade point average does not count as part of the nine additional credits (courses numbered below 600, withdrawals, or pass/fail graded courses). Students may also be dismissed for academic dishonesty.

Academic standing is posted at the close of each semester and is reported on the grade report for each student.

REPEATING A COURSE

Most courses cannot be repeated for additional credit. Only the most recent attempt at the course will be included in the GPA calculation even if the most recent attempt at a course results in a lower grade. The credits for a course are earned only once, provided at least one of the courses has a passing grade. All repeated courses and their grades will appear on the transcript in the terms they were taken and the repeated course will be noted as "R" (repeated).

STOP-OUT STUDENTS

Stop-out students are previously admitted and/or enrolled students at Edgewood College who have stopped taking credit courses for an extended period, although most usually only stop-out for a semester or two.

Return Requirements

1. Stop-out students seeking to return to the MS in Nursing program after 3 or more semesters of non-enrollment simply need to contact the Graduate Program Advisor to fill out a re-entry form.
2. If the student had taken courses elsewhere while they were away from Edgewood College, they must submit official copies of their transcripts to turn in to Graduate and Professional Studies Admissions.

STUDENT RECORDS

During a graduate student's enrollment at Edgewood College, the official file of records is kept by the Registrar's Office. A copy of the student's file may be maintained by the Graduate Program Advisor and the student's faculty advisor. Official Edgewood College transcripts are maintained in the Office of the Registrar where copies may be obtained upon proper application.

Privacy of Student Records

The Family Educational Rights and Privacy Act (the Buckley Amendment) provides that, with certain explicit exceptions, students have the right to see their records (accessibility) and the right to determine who else will see their records (confidentiality). Detailed information about the provisions of the act and its implications on this campus may be obtained from the Edgewood College catalog.

WITHDRAWAL

Withdrawal is complete severance of attendance at Edgewood College. There are two types of withdrawal: student withdrawal and administrative withdrawal.

Fall/Spring and Sessions Student Withdrawal

A student may add or drop courses on Edgewood Express for seven calendar days after the start date of the term or session. After that add/drop deadline, a course must be added or dropped via a paper form. When adding courses via a paper form, instructor approval is required. Course drops are not permitted after the tenth week of a full-term course, or the fifth week of a session course.

Withdrawal does not remove the costs incurred that may apply for the semester in question. Refund schedules are published in the semester and summer session sections of the *Registration Guide*.

Withdrawal during summer session is governed by policies described in the summer session section of *the Registration Guide*.

Students who wish to drop their entire academic load should either obtain a Withdrawal Form or call Edgewood Central at 663-4300. Withdrawal forms are also available online from the Office of the Registrar's Student Resource Page.

Administrative Withdrawal

Students who have not paid fees or made payment arrangements by the end of the first week of classes will be withdrawn. There is a reinstatement fee. Appeals of Administrative Withdrawal should be made directly to the Edgewood College Business Office.

ACADEMIC APPEALS

Student appeals are limited to requests to continue in the major, or for grades that impact student progression in the SoN. Any student who feels he/she has cause for appeal may initiate the appeal process.

Appeal Procedure

Prior to initiating the appeal process a student should make every effort to resolve the situation with the course faculty most immediately and directly involved. If the concern is unresolved, it is expected that the student will contact the Graduate Program Advisor and his/her faculty advisor to explore other options.

I.   If the student chooses to initiate the appeal process, he/she must submit a written letter requesting an appeal to the Dean of the SoN. A written appeal must be filed with the Dean of the SoN within 10 business days of the date of the letter notifying the student that s/he is being dismissed from the program, or the right to appeal is denied.
The student's letter to the Dean must include the following information:

A. Precise grounds on which the appeal is based;
B. Circumstances associated with the appeal;
C. Rationale supporting the appeal, including student attempts to resolve the situation prior to requesting an appeal;
D. Description of proposed specific remedial actions to be taken to improve the student's academic performance.

II. The Dean of the SoN will submit the student's request for an appeal hearing to the Chair of the Student Appeals Committee no later than five business days after receiving the request for the appeal.

III. Within five business days of receiving the appeal request, the committee will determine whether or not a hearing is justified.

IV. If a hearing is not granted:
A. The committee chairperson will provide written rationale to the Dean.
B. The Dean will then notify the student in writing of the final decision.

V. If a hearing is granted:
A. The committee chairperson will notify the student of the time, date, and location of the hearing. The committee will have access to the student's record and to other pertinent written or verbal information such as the student's advising file.
B. The student is encouraged, although not required, to attend the hearing which will result in a recommendation to the Dean concerning his or her progression in the nursing program.
C. If the student chooses to attend the hearing, s/he is permitted to bring one support person. The name and relationship of that person to the student must be furnished in writing to the committee chair at least two business days prior to the hearing. An Edgewood College Faculty member is not allowed to be a support person or to submit a letter of support.
D. During the hearing, the student will be invited to provide additional information to the committee or to answer specific questions from the Appeals Committee. Once the Appeals Committee has sought and received any needed clarification of the appeal, the student and support person will be excused while the committee goes into closed session for deliberation.
E. Audio-taping or videotaping any portion of the meeting is not permitted.

VI. The Appeal Committee's recommendation for resolution of the student appeal will be forwarded in writing from the committee Chair to the Dean of the SoN within 5 business days of the hearing.

VII. The Dean of the SoN will consider the committee's recommendation in making the final decision regarding the disposition of the student appeal.

VIII. The Dean of the SoN will notify the student in writing of this final decision within 5 business days of receiving the committee's recommendation.

If the student chooses to appeal the final decision, s/he is referred to the section on appeals in the Edgewood College Student Handbook.

Student Complaints and Review/Maintenance of Records
Students have a right to voice a concern to the course instructor. A student who has a concern related specifically to his or her experience in the nursing program should consult with the course instructor in an attempt to arrive at a resolution of the issue. If the concern is not resolved at the instructor-student level, the following sequence should be followed:

1. Discuss the concern with the SoN Graduate Advisor, if not resolved at this level;
2. Discuss the concern with the SoN Assistant Dean, if not resolved at this level;
3. Discuss the concern with the SoN Associate Dean, if not resolved at this level;
4. Discuss the concern with the SoN Dean, if not resolved at this level, the SoN Dean instructs the student to complete a Formal complaint. The SoN Dean is responsible for disposition and documentation of all formal complaints. The SoN Dean will maintain records for a period of three years following the student's graduation or leaving the program.

If not resolved at the SoN level, the student may contact the office of the Vice President for Academic Affairs (VPAA).

ACADEMIC HONESTY POLICY

As members of a scholarly community dedicated to healthy intellectual development, students and faculty at Edgewood College are expected to share the responsibility for maintaining high standards of honesty and integrity in their academic work. Each student should reflect this sense of responsibility toward the community by submitting work that is a product of his or her own effort in a particular course, unless the instructor has directed otherwise. In order to clarify and emphasize its standards for academic honesty, the college has adopted this policy.

The following are examples of violations of standards for academic honesty and are subject to academic sanctions: cheating on exams, submitting collaborative work as one's own, falsifying records, achievements, field or laboratory data, or other course work, stealing examinations or course materials, submitting work previously submitted in another course, unless specifically approved by the present instructor, falsifying documents or signing an instructor's or administrator's name to any document or form; plagiarism, or aiding another student in any of the above actions.

Plagiarism, which is defined as the deliberate use of another's ideas or words as if they were one's own, can take many forms, from the egregious to the mild. Instances most commonly seen in written work by students in order from most to least serious are:

- Borrowing, buying or stealing a paper from elsewhere; lending or selling a paper for another's use as his or her own; using printed material written by someone else as one's own
- Getting so much help on a paper from someone else, including a college tutor, that the student writer can no longer legitimately claim authorship
- Intentionally using source material improperly, e.g., neither citing nor using quotation marks on borrowed material; supplying an in-text citation but failing to enclose quoted material within quotation marks; leaving paraphrased material too close to the original version; failing to append a works-cited page when sources have been used
- Unintentional misuse of borrowed sources through ignorance or carelessness

Sanctions recommended for dishonesty are an "F" on the assignment and/or an "F" in the course. More serious violations may be referred to the Academic Dean's Office for appropriate action.

DUE PROCESS

Students aggrieved by decisions made at the classroom, department, or SoN-level may appeal that decision to the VPAA's Office. The VPAA will make a determination of final resolution or will forward the grievance to the appropriate policy committee for consideration and action.

FERPA STATEMENT

The Family Educational Rights and Privacy Act (FERPA) of 1974, also known as the Buckley Amendment, provides that students have the right to see their records (accessibility) and to determine who will see their records (confidentiality). Detailed information on the provisions of the Act and its applications are included in the Edgewood College catalog.

GRADUATION

GRADUATION REQUIREMENTS

To graduate, a graduate student must have earned the number of credits appropriate to the degree sought. Only credits in courses numbered 600 or above count toward meeting this requirement. The student must have maintained a 3.00 GPA on those credits and successfully met all school or departmental and general degree requirements. No degree will be officially conferred by Edgewood College until all defined degree requirements for the student's academic program(s) have been met. Grades of a C or above will fulfill program requirements; grades of CD or below cannot be used to fulfill program requirements.

School or Departmental Requirements

Students must satisfy all coursework as required by the school or department offering the graduate program in which the student is registered.

Time Limits for Degree Completion (Seven-Year Rule)

Only those courses completed within the seven years prior to the granting of a degree will be counted toward meeting the degree requirements.

Residency Requirements for Degree Programs

A minimum to the nearest multiple of three (3) of 2/3 of the coursework credits presented for a graduate degree must be taken at Edgewood College.

Intent to Graduate Form

The Intent to Graduate form is required for four important reasons:
1. To inform the Registrar's Office that the student is planning to graduate at the end of the term.
2. To inform the Registrar's Office whether the student intends to participate in the commencement ceremony.
3. To allow the student an opportunity to indicate how he or she wants their name spelled on their diploma.
4. To allow the student the opportunity to provide a mailing address for his or her diploma that may be different from any other address that may be on file for the student (with graduation, many students move to new addresses).

If all graduation requirements have been met, but the Intent to Graduate Form has not been submitted to the Registrar's Office, the student's degree will be conferred, but no diploma will be released until the form is received.

GRADUATE CERTIFICATE ADMISSION, PROGRESSION, AND GRADUATION POLICY

A certificate is similar to a degree granted by an institution, but is not as comprehensive as a degree. Courses leading to a certificate are of the same academic quality and integrity as courses leading to a degree. The only difference is the number of areas covered by a certificate is fewer and the focus is much more narrow than a degree. Nursing Graduate certificates are comprised of 12-33 credits at 600 level or higher and require a residency of 12 graduate credits at Edgewood College.

Graduate certificates follow institutional policy pertaining to graduate programs unless indicated otherwise in this policy (including, but not limited to, seven-year rule, academic honesty, student conduct, credit load, repeating a course, withdrawal, grading system, incompletes, pass/fail, appeals).

Students applying to a graduate certificate program use the non-degree admission criteria, which requires a transcript showing a baccalaureate or more advanced degree in addition to the graduate application. Substitutions and waivers are determined by the Assistant Dean of Advanced Practice Graduate Nursing Programs or their designee. Please note, syllabi may be required for substitutions or waivers. Students cannot receive more than one C in the certificate program or they will be placed on probation. A student will be dismissed if he/she does not achieve a 3.0 in the next term following probation status.

Students must earn a cumulative 3.00 GPA in the certificate courses to receive the certificate. Graduate certificate students will not participate in the Edgewood College commencement ceremony.

APPENDICES

APPENDIX A

The Master's of Science in Nursing curriculum is built upon the American Association of Colleges of Nursing (AACN) *Essentials.* The *Essentials* delineate the content that must be contained within courses that comprise the program, and the necessary competencies to be attained by graduates of the MS in Nursing program. The *Essentials* are woven throughout individual courses. Particular *Domains* and associated competencies/sub-competencies stressed within an individual course are listed prominently in the course syllabus. A course's curriculum may, and often does, devote attention to multiple *Domains* and associated competencies. However, for accreditation reporting purposes, the Henry Predolin School of Nursing MS in Nursing program matches a single *Domain* to a significant course assignment. This assignment is termed an *Artifact.* This practice allows the student to provide a concrete example of how they have met all *Domains* at the conclusion of their program. In turn, rubrics for each *Artifact* are aligned with the *Domain* and its associated *Level 2 Competencies/Sub-Competencies* (rubrics that correspond to an *Artifact* are available in the respective course's syllabus). The following is a listing of the *2021 AACN Essentials* and the corresponding course from which the *Artifact* will be submitted for each MS in Nursing program concentration.

MS in Nursing: Comprehensive

Domain 1: Knowledge for Nursing Practice Artifact: NRS 631
Integration, translation, and application of established and evolving disciplinary nursing knowledge and ways of knowing, as well as knowledge from other disciplines, including a foundation in liberal arts and natural and social sciences. This distinguishes the practice of professional nursing and forms the basis for clinical judgment and innovation in nursing practice.

Domain 2: Person-Centered Care Artifact: NRS 670
Person-centered care focuses on the individual within multiple complicated contexts, including family and/or important others. Person-centered care is holistic, individualized, just, respectful, compassionate, coordinated, evidence-based, and developmentally appropriate. Person-centered care builds on a scientific body of knowledge that guides nursing practice regardless of specialty or functional area.

Domain 3: Population Health Artifact: NRS 600/810
Population health spans the healthcare delivery continuum from public health prevention to disease management of populations and describes collaborative activities with both traditional and non-traditional partnerships from affected communities, public health, industry, academia, health care, local government entities, and others for the improvement of equitable population health outcomes.

Domain 4: Scholarship for Nursing Discipline Artifact: NRS 665
The generation, synthesis, translation, application, and dissemination of nursing knowledge to improve health and transform health care.

Domain 5: Quality and Safety Artifact: NRS 700
Employment of established and emerging principles of safety and improvement science. Quality and safety, as core values of nursing practice, enhance quality and minimize risk of harm to patients and providers through both system effectiveness and individual performance.

Domain 6: Interprofessional Partnerships Artifact: NRS 612
Intentional collaboration across professions and with care team members, patients, families, communities, and other stakeholders to optimize care, enhance the healthcare experience, and strengthen outcomes.

Domain 7: Systems-Based Practice Artifact: NRS 625/820
Responding to and leading within complex systems of health care. Nurses effectively and proactively coordinate resources to provide safe, quality, equitable care to diverse populations.

Domain 8: Informatics and Healthcare Technologies Artifact: NRS 830
Information and communication technologies and informatics processes are used to provide care, gather data, form information to drive decision making, and support professionals as they expand knowledge and wisdom for practice. Informatics

processes and technologies are used to manage and improve the delivery of safe, high-quality, and efficient healthcare services in accordance with best practice and professional and regulatory standards.

Domain 9: Professionalism Artifact: NRS 645
Formation and cultivation of a sustainable professional nursing identity, accountability, perspective, collaborative disposition, and comportment that reflects nursing's characteristics and values.

Domain 10: Personal, Professional, and Leadership Development Artifact: NRS 735
Participation in activities and self-reflection that foster personal health, resilience, and well-being, lifelong learning, and support the acquisition of nursing expertise and assertion of leadership.

MS in Nursing: Clinical Nurse Specialist and Clinical Nurse Specialist in Adult Gerontology
Domain 1: Knowledge for Nursing Practice Artifact: NRS 702
Domain 2: Person-Centered Care Artifact: NRS 670
Domain 3: Population Health Artifact: NRS 600/810
Domain 4: Scholarship for Nursing Discipline Artifact: NRS 665
Domain 5: Quality and Safety Artifact: NRS 680
Domain 6: Interprofessional Partnerships Artifact: NRS 612
Domain 7: Systems-Based Practice Artifact: NRS 625/820
Domain 8: Informatics and Healthcare Technologies Artifact: NRS 830
Domain 9: Professionalism Artifact: NRS 645
Domain 10: Personal, Professional, and Leadership Development Artifact: NRS 719

MS in Nursing: Family Nurse Practitioner and Adult Gerontology Primary Care Nurse Practitioner
Domain 1: Knowledge for Nursing Practice Artifact: NRS 702
Domain 2: Person-Centered Care Artifact: NRS 670
Domain 3: Population Health Artifact: NRS 600/810
Domain 4: Scholarship for Nursing Discipline Artifact: NRS 665
Domain 5: Quality and Safety Artifact: NRS 680
Domain 6: Interprofessional Partnerships Artifact: NRS 612
Domain 7: Systems-Based Practice Artifact: NRS 625/820
Domain 8: Informatics and Healthcare Technologies Artifact: NRS 830
Domain 9: Professionalism Artifact: NRS 645
Domain 10: Personal, Professional, and Leadership Development Artifact: NRS 696D

MS in Nursing: Psychiatric Mental Health Nurse Practitioner
Domain 1: Knowledge for Nursing Practice Artifact: NRS 694
Domain 2: Person-Centered Care Artifact: NRS 670
Domain 3: Population Health Artifact: NRS 600/810
Domain 4: Scholarship for Nursing Discipline Artifact: NRS 665
Domain 5: Quality and Safety Artifact: 714
Domain 6: Interprofessional Partnerships Artifact: 716
Domain 7: Systems-Based Practice Artifact: NRS 625/820
Domain 8: Informatics and Healthcare Technologies Artifact: NRS 715
Domain 9: Professionalism Artifact: NRS 645
Domain 10: Personal, Professional, and Leadership Development Artifact: NRS 696B

APPENDIX B-1

MS in Nursing-CNS Student Advanced Practice Clinical Preceptor Form

Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Course for this Placement Request: (Please bold or circle)

NRS 717   NRS 717   NRS 719

Date:_____

Student Name:_____

Student Contact Information:_____   _____
                                    Phone   Email

Student Current Employer:_____

Position Held:_____

Hours Requested:_____

Preceptor Name and Credentials:_____

Preceptor Contact Information:_____   _____
                                    Phone   Email

Clinical Site Name and Clinical Affiliation:_____

Clinical Site Coordinator Contact: _____   _____
                                    Phone   Email

Clinical Site Address:_____

_____

Daily Patient Population Description: _____

_____

_____

- This form must be submitted AT LEAST 180 days prior to the start of the advanced clinical course
- All MSN-CNS students must complete 500 practice hours as part of their program
- An ANCC- or AACN-certified instructor is the preferred preceptor; professionals with credentials other than CNS certification may serve as preceptors per Instructor of Record permission
- Students must obtain and attach a copy of each preceptor's CV/Resume

APPENDIX B-2

MS in Nursing-FNP Student Advanced Practice Clinical Preceptor Form

Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Course for this Placement Request: (Please bold or circle)

NRS 711   NRS 712   NRS 713

Date:_____

Student Name:_____

Student Contact Information:_____ _____
                                                    Phone   Email

Student Current Employer:_____

Position Held:_____

Hours Requested:_____

Preceptor Name and Credentials:_____

Preceptor Contact Information:_____ _____
                                                    Phone   Email

Clinical Site Name and Clinical Affiliation:_____

Clinical Site Coordinator Contact: _____ _____
                                                    Phone   Email

Clinical Site Address:_____

_____

Daily Patient Population Description: _____

_____

_____

- This form must be submitted AT LEAST 180 days prior to the start of the advanced clinical course
- All MS in Nursing-FNP students must complete 750 practice hours as part of their program
- An ANCC-, AACN-, or AANP-certified instructor is the preferred preceptor; professionals with credentials other than FNP certification may serve as preceptors per Instructor of Record permission
- Students must obtain and attach a copy of each preceptor's CV/Resume

APPENDIX B-3

MS in Nursing-PMHNP Student Advanced Practice Clinical Preceptor Form

Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Course for this Placement Request: (Please bold or circle)

NRS 714   NRS 715   NRS 716

Date:_____

Student Name:_____

Student Contact Information:_____   _____
                                                    Phone   Email

Student Current Employer:_____

Position Held:_____

Hours Requested:_____

Preceptor Name and Credentials:_____

Preceptor Contact Information:_____   _____
                                                    Phone   Email

Clinical Site Name and Clinical Affiliation:_____

Clinical Site Coordinator Contact: _____   _____
                                                    Phone   Email

Clinical Site Address:_____

_____

Daily Patient Population Description: _____

_____

_____

- This form must be submitted AT LEAST 180 days prior to the start of the advanced clinical course
- All MS in Nursing-PMHNP students must complete 750 practice hours as part of their program
- An ANCC-, AACN-, or AANP-certified instructor is the preferred preceptor; professionals with credentials other than PMHNP certification may serve as preceptors per Instructor of Record permission
- Students must obtain and attach a copy of each preceptor's CV/Resume

APPENDIX B-4

MS in Nursing AGPCNP Student Advanced Practice Clinical Preceptor Form

Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Course for this Placement Request: (Please bold or circle)

NRS 720   NRS 721   NRS 722

Date:_____

Student Name:_____

Student Contact Information:_____   _____
                                            Phone   Email

Student Current Employer:_____

Position Held:_____

Hours Requested:_____

Preceptor Name and Credentials:_____

Preceptor Contact Information:_____   _____
                                            Phone   Email

Clinical Site Name and Clinical Affiliation:_____

Clinical Site Coordinator Contact: _____   _____
                                            Phone   Email

Clinical Site Address:_____

_____

Daily Patient Population Description: _____

_____

_____

- This form must be submitted AT LEAST 180 days prior to the start of the advanced clinical course
- All MS in Nursing- AGPCNP students must complete 500 practice hours as part of their program
- An ANCC-, AACN-, or AANP-certified instructor is the preferred preceptor; professionals with credentials other than AGPCNP certification may serve as preceptor per Instructor of Record permission
- Students must obtain and attach a copy of each preceptor's CV/Resume

APPENDIX C

<div align="center">

Preceptor Memorandum of Understanding
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

</div>

Thank you for your willingness to provide an educational experience for students in the Edgewood College Master of Science in Nursing (MSN) or Doctor of Nursing Practice (DNP) programs. The following information is provided to assist you in the process.

Mission of Edgewood College
Edgewood College, rooted in the Dominican tradition, engages students within a community of learners committed to building a just and compassionate world. The College educates students for meaningful personal and professional lives of ethical leadership, service and a lifelong search for truth.

Course Background
'Practicum' and 'Advanced Practice Clinical' experiences are provided for MSN students. 'Residency' experiences are provided for DNP students. The combined seminar and practicum, advanced practice clinical, or residency is intended to bridge theory and research with actual practice. Students will collaborate with the course professor and preceptors to design these experiences that further their professional development as expert practitioners, leaders, and educators in practice settings.

The practicum course for MSN – Comprehensive concentration practicum provides students opportunities to develop competence in professional practice.

The MSN clinical nurse specialist (CNS), clinical nurse specialist in adult gerontology (CNS-AG), family nurse practitioner (FNP), adult gerontology primary care nurse practitioner (AGPCNP), and psychiatric mental health nurse practitioner (PMHNP) advanced practice clinical courses are designed to foster students' clinical skills that enhance their ability to advance the care of patients, families, groups of patients, the community, and the profession of nursing.

The DNP residency courses emphasize the highest level of education in order to prepare experts in specialized advanced nursing roles.

Practicum, Advanced Practice Clinical, or Residency Experience
The practicum, advanced practice clinical, or residency experiences and instruction that students receive is a critical educational component of the Nursing Graduate Programs at Edgewood College. It is viewed as a mutual sharing of responsibility between the graduate student, site preceptor, and course professor.

The practicum experience is a minimum of 180 hours over a 16-week period (this hour requirement can be split between two or more sites/preceptors as the student's contract outlines). MSN Comprehensive students must acquire 180 total practice hours through both advanced clinical-focused (e.g., practice setting includes activities where the student engages in complex care such as advanced wound care; care of ventilator-dependent patients) and advanced role-specific experiences (e.g., leadership/management; nurse education/staff development). The division of 180 hours is to be determined by the Student and Instructor of Record. For the advanced clinical component of the practicum experience, students should identify a specific population with whom they would like to develop further expertise caring for in practice; it is beneficial for the student to select a population with whom they have limited experience in order to maximize the potential for new clinical learning. The clinical preceptor should specialize in this clinical area. The advanced-role component of the practicum experience should align with the student's area of focus (e.g., leadership/management; nurse education/staff development). The advanced role preceptor should specialize or have significant experience working in the student's chosen focus area of nursing education. Note that qualified individuals can serve simultaneously as both the clinical and advanced-role preceptor. However, if an MSN Comprehensive student is precepted by an individual teaching undergraduate students in a clinical setting, practicum hours spent in this setting are categorized as "Nurse Education" and not "Clinical."

Advanced practice clinical experiences are a minimum of 167 hours over a 16-week period for CNS and AGCNP students; 250 hours for FNP and PMHNP students. This hour requirement can be split between two or more sites/preceptors as the student's contract outlines. Experiences are related to the direct care/leadership activities that support the learning goals of the advanced practice nursing student, incorporate the identified course Essentials (respective AACN Essentials of Master's Education in Nursing), fulfill the requirements needed to sit for the intended licensing exam (respective of the American Nurses Credentialing Center [ANCC] guidelines), and are mutually agreed upon with the preceptor and course professor.

Residency experience hour requirements are variable but can reach up to 500 hours over a 16-week period (this hour requirement can be split between two or more sites/preceptors as the student's contract outlines). Experiences are related to leadership/management and/or educational activities that support the learning goals of the student, incorporate the identified course Essentials (respective AACN Essentials of Doctor of Nursing Practice), and are mutually agreed upon with the preceptor and course professor.

Responsibilities of Each Party

Course Professor (Instructor of Record) will:
- Provide the academic requirements for successful completion of the experience (student contract with preceptor).
- Assist student in selecting a qualified preceptor to meet student's learning objectives.
- Direct students to provide agency required information (RN license [direct care experiences], health information, criminal background check, required training, etc.) and communicate with students that they cannot start an experience until all the required documentation is complete.
- In consultation with the preceptor and student, provide approval of the student contract and verification that the student has met the required performance standards during the placement period.
- Serve as the educational supervisor of the student and consultant to preceptors to assure there are opportunities for enriched learning experiences for the student.
- Provide evaluation forms for student to share with preceptors at the mid-point and end of the experience. Collect, aggregate and share information to determine areas of improvement regarding student learning outcomes.
- As needed or requested, provide consultation to the student and preceptor in order to resolve conflict or mediate differences.
- Consult with the appropriate School of Nursing Assistant Dean, the preceptor and student when changes or termination of placement are deemed appropriate.
- Follow agreements in contractual agreement with agency.
- Grade all student work.
- Keep all records and reports on students' practicum experience placement experiences and record the final grade with the Office of the Registrar.

Course Preceptor will:
- Assist the student in establishing a plan that will meet both the course and personal objectives. Review and approve the student's proposal to assure expected activities are available. Negotiate with student for alternative experience if necessary.
- Provide access to necessary materials needed to complete the experience (examples include: library, procedure manuals, client records if applicable).
- Facilitate and supervise the student's experience by arranging specific opportunities and contacts with other institutional personnel as needed or arises.
- Meet with the student on a regular basis to review the progress of the experience and to offer appropriate direction, coordination and availability for consultation sessions designed to enhance the student's learning and performance.
- Complete a written mid-term and final evaluation of the student, review with the student, and submit to the course professor within required timeframe.
- Notify the course professor of any difficulties encountered in the experience in which consultation with the course professor might be helpful.
- Withdraw from the placement a student whose health or conduct, in the judgment of the experienced preceptor, poses a threat to clients, employees, the public or property. If the Instructor of Record is not immediately available for consultation, the preceptor shall remove the student until she/he can consult with either an Assistant Dean, Associate Dean, or Instructor of Record. If reinstatement of the student becomes a question, it shall be addressed through a conference between the preceptor and the Instructor of Record, and, when appropriate, the student. In all cases the decision of the preceptor or institutional director shall be final.
- Make available emergency health service access if needed to students who become ill or injured while on duty at the experience; costs of such care to be incurred by the student.

Student will:

- Identify learning objectives to address both course objectives and personal learning goals.
- Select preceptor in coordination with Instructor of Record.
- In consultation with the preceptor, develop an implementation plan to meet the course/personal objectives.
- Meet with the preceptor to review and approve (sign) the experience proposal.
- Comply with the course and institutional requirements prior to beginning the experience.
- In consultation with the preceptor, establish days and times for precepted experiences.
- Seek advice and call upon the expertise of the preceptor throughout the experience to enhance educational opportunities.
- In consultation with the preceptor, assure completion of a written mid-term and final evaluation of the student within the required timeframe.
- Notify the course professor of any difficulties encountered in the experience in which consultation with the course professor might be helpful.
- Present a final summary of the experience (and presentation or project if appropriate) to the Agency staff.

Preceptor Qualifications

Primary preceptors overseeing MS in Nursing student experiences must have at least a Master's Degree in nursing (Advanced Practice Clinical preceptors must also hold specific nursing credentials). Primary preceptors overseeing DNP residency student experiences ideally have a DNP or PhD in nursing. However, additional individuals who augment the student's experience and learning activities may have degrees outside of nursing, such as accounting, business or administration, or medicine.

Preceptor Verification for Advanced Practice Clinical Placement

National Task Force (NTF) on Quality Nurse Practitioner Education requires that preceptors verify they have received appropriate orientation. The School of Nursing provides each preceptor a Preceptor Manual and Typhon training opportunities. If preceptors need further guidance or training, the course Instructor of Record and the Clinical Coordinator are available to provide needed assistance.

Institutional Agreement

The School of Nursing has a signed institutional agreement with your facility that stipulates the responsibilities of the agent and the affiliating agency.

Termination Stipulation

Any problem related to the operation and administration of the experience placement, not provided for in this agreement or any question relative to an interpretation of this agreement can be discussed by the preceptor and School of Nursing course professor. If further clarification or resolution is needed, the problem or issue should be referred to the Dean of the School of Nursing or designee for final action. Either party may terminate this agreement with 45 days written notice.

Contact Reviewed and Accepted:

_____   _____

Preceptor (please print)   Agency

_____   _____

Preceptor (please sign)   Date

_____   _____

Preceptor's Certification(s) & Renewal Date   Preceptor's Program/School Where Degree was Earned

_____   _____

Course Professor   Date

_____   _____

Student   Date

NPST STUDENT INFORMATION SHEET

INTRODUCTION

Typhon Group's NPST System is software used by your school to track your clinical encounters, your time spent at clinical facilities, your evaluations, schedule, portfolio, and much more.

Typhon Group is web-based software. This means you can access your account and enter information on any computer or device that has a modern browser. There are no "apps" to install. You can login directly to the Typhon Group website (www.typhongroup.net) from anywhere you have internet access.

Students DO NOT self-register for Typhon. Your program creates an account for you. Once your account has been created and your program is ready to grant you access, they will send you an email with login instructions and information. Typhon Group cannot directly provide you with this information.

Once you have received the initial email from your school, you can log in to your account. If your temporary password has expired (or you forgot your password), you can request another one by clicking "Forgot Login or Password." Classroom training may be provided by your school, but once you log in, you'll gain access to the complete instruction manual and video tutorials.

PAYING FOR YOUR ACCOUNT

The first time you log in to the system, you will be directed to an online payment page. On this page, you can pay your one-time $90 system access fee with a credit card (Amex, Visa, MasterCard, or Discover). Once your credit card has been approved, the system will automatically activate your account, enabling you to start using the system.

LOG IN TIPS

Typhon Group provides several kinds of products, so to ensure you log in to the correct area, utilize the special page we created for your school. Your school's home page is http://www.typhongroup.net/xxxx, where xxxx is the main web domain of your school. Click on your specialty, then "Student Data Entry Login." Add this page to your favorites or bookmarks for future reference. You should see the screen below (with the red NPST logo and "Student Data Entry Login"), plus your account number will automatically get inserted when you log in through your school's special page.

ADDITIONAL HELP

Although Typhon Group hosts and provides the software, the system is customized and maintained by your school. Thus, your school is responsible for handling your questions regarding access to your account and login issues. Your questions should be directed to the Typhon Group program administrator at your school. They can also answer your questions about clinical content, missing drop-down items (ie. your preceptor or clinical site is not listed), or specifics on how to use the system.

NSST STUDENT INFORMATION SHEET

INTRODUCTION
Typhon Group's NSST System is software used by your school to track your clinical encounters, your time spent at clinical facilities, your evaluations, schedule, portfolio, and much more.

Typhon Group is web-based software. This means you can access your account and enter information on any computer or device that has a modern browser. There are no "apps" to install. You can login directly to the Typhon Group website (www.typhongroup.net) from anywhere you have internet access.

Students DO NOT self-register for Typhon. Your program creates an account for you. Once your account has been created and your program is ready to grant you access, they will send you an email with login instructions and information. Typhon Group cannot directly provide you with this information.

Once you have received the initial email from your school, you can log in to your account. If your temporary password has expired (or you forgot your password), you can request another one by clicking "Forgot Login or Password." Classroom training may be provided by your school, but once you log in, you'll gain access to the complete instruction manual and video tutorials.

PAYING FOR YOUR ACCOUNT
The first time you log in to the system, you will be directed to an online payment page. On this page, you can pay your one-time $60 system access fee with a credit card (Amex, Visa, MasterCard, or Discover). Once your credit card has been approved, the system will automatically activate your account, enabling you to start using the system.

LOG IN TIPS
Typhon Group provides several kinds of products, so to ensure you log in to the correct area, utilize the special page we created for your school. Your school's home page is http://www.typhongroup.net/xxxx, where **xxxx** is the main web domain of your school. Click on your specialty, then "Student Data Entry Login." Add this page to your favorites or bookmarks for future reference. You should see the screen below (with the purple NSST logo and "Student Data Entry Login"), plus your account number will automatically get inserted when you log in through your school's special page.

ADDITIONAL HELP
Although Typhon Group hosts and provides the software, the system is customized and maintained by your school. Thus, your school is responsible for handling your questions regarding access to your account and login issues. Your questions should be directed to the Typhon Group program administrator at your school. They can also answer your questions about clinical content, missing drop-down items (ie. your preceptor or clinical site is not listed), or specifics on how to use the system.

APPENDIX E

MS in Nursing Comprehensive Student Practicum Preceptor Form

Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Course: NRS 735

Date:_____

Student Name:_____

Student Contact Information:_____ _____
Phone   Email

Student Current Employer:_____

Position Held:_____

Preceptor Name and Credentials:_____

Preceptor Contact Information:_____ _____
Phone   Email

Practicum Site Name and Organizational Affiliation:_____

Clinical Site Coordinator Contact: _____ _____
Phone   Email

Practicum Site Address:_____

_____

Proposed Practicum Experience Overview: _____

_____

_____

_____

_____

GUIDELINES FOR PRACTICUM EXPERIENCE

Practicum experiences are provided for MS in Nursing students. The combined seminar and practicum are intended to bridge theory and research with actual practice. Students will collaborate with the course professor and preceptors to design practicum experiences that further their professional development as leaders and/or educators in practice settings.

The practicum experience is a minimum of 180 hours over the 12-week summer semester (this hour requirement can be split between two or more sites/preceptors as the student's contract outlines and/or over one or two semesters). Experiences are related to leadership/management and/or educational activities that support the learning goals of the student, incorporate the identified course Essentials (as identified by the respective AACN Essentials of Master's Education in Nursing) and are mutually

agreed upon by the Student, Preceptor, and Instructor of Record. Therefore, prior to beginning any practicum experience (NRS 735), the Student, Preceptor, and Instructor of Record must discuss, complete, and adhere to thereafter a Preceptor Memorandum of Understanding agreement form (Appendix C).

Proposal/Contract: The student must submit a proposal to the Instructor of Record that identifies the intended individual student learning and experiential objectives prior to beginning the clinical portion of the experience. This proposal needs to be signed by the student, the Instructor of Record and the Preceptor(s). Preceptors are not paid for their contribution to the experience.

Practicum Proposal Outline/Components: The purpose of the proposal is to assist the incoming NRS735 student in planning and clearly articulating his/her practicum experience. ***The completed written proposal is due no later than the second week of class so that the actual time engaged in practice activities can be maximized***. It is recommended that the student contact preceptor(s), and ***work on writing the proposal prior to beginning the semester*** so that time can be most efficiently utilized in practicum hours during the semester. Necessary components and a suggested format for the proposal are outlined below:
A. Introduction to practicum area
B. Brief statement of professional goals post-graduation (in narrative form)
C. Behavioral objectives for the practicum **that integrate the course Essentials/Objectives**
D. Identification of Preceptor (note: at least one Preceptor must be a master's prepared nurse with expertise and experience in the area that is to be the focus of the practicum).
E. Activity Plan and Timeline: Clearly outline the various learning experiences you will be engaged in each week and designate due dates for any projected reading, projects, etc.
F. Bibliography of anticipated reading (approximately 10 citations)

Supporting Student/Preceptor/Organizational Documentation: Prior to beginning a practicum, the student's Preceptor must file a copy of their current resume or curriculum vitae with the School of Nursing. A contractual agreement between Edgewood College and the respective agency where the practicum is to take place must also be completed and filed. Both of these documents may be collected and filed via the Clinical Coordination Team.

A practicum must complete the appropriate onboarding documents for both Edgewood College and the respective agency where the practicum is to be conducted (reference copies of Edgewood's onboarding documents (via ViewPoint as well as any unique requirements mandated by the respective agency). It is the student's responsibility to be aware of, locate, complete, and adhere to any and all additional agency-specific guidelines.

Variable Credit Option: Some students may take this course for variable credit (1-3 cr.) over two semesters. A total of 3 credits and a minimum of 180 hours of clinical experience are required. One of these semesters a student must participate in seminar (classroom). Students electing to take the course for variable credit must formally (in writing) address and submit the following information each semester of the practicum:
1. Number of hours for respective semester
2. Outcomes the Instructor of Record will evaluate each semester
3. Assignments that will be completed each semester

APPENDIX F

Preceptor Evaluation of Nursing Practicum and Clinical Nurse Specialist Advanced Practice Clinical Student
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name (Evaluator): _____

Agency: _____

Student Name: _____   Date: _____

Philosophy: The Preceptor acts as a teacher and mentor to the student during Practicum (NRS735) and CNS Advanced Practice Clinical (NRS 717-719) experiences. It is important for the student to receive feedback on their performance in the practicum experience. This information provides a mechanism of dialogue between Instructor of Record, Student and Preceptor.

Instructions to preceptor:
- Please evaluate your student in terms of meeting AACN MSN Essentials and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment. If no relevant opportunity was available at the setting to observe the student's meeting of the Essential, please mark the box labeled N/A.
- This evaluation can be done at mid-semester, and **is required** at the conclusion of the semester. The form is to be reported to the student and Instructor of Record (the Instructor of Record will then place it in the student clinical file [Typhon]). The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort.
- An additional evaluation form, **Preceptor Evaluation of Student (CNS)** is aligned to the specific competencies expected for the practice role, and required documentation for CNS students each semester of a clinical rotation.

MSN Essential	1	2	3	4	5	N/A	Comments / Opportunities for Improvement
Recognizes the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.							
Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.							
Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.							
Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.							
Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.							
Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy							

development process and to employ advocacy strategies to influence health and health care.							
Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care for individuals and populations.							
Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.							
Recognizes that nursing practice, at the master's level, is b defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or syster Master's-level nursing graduates must have an advanced l of understanding of nursing and relevant sciences as well a the ability to integrate this knowledge into practice. Nurs practice interventions include both direct and indirect care components.							

Additional comments:

_____   _____

Preceptor Signature   Date

APPENDIX G

Student Evaluation of Preceptor
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Philosophy: The Preceptor acts as a teacher and mentor to the student in NRS735 (Master's and Advanced Practice Clinical [NRS 711-722]) experiences. It is important for the preceptor to receive feedback on the execution of their role. This information can also assist course instructors in matching future students with Preceptors, and provides a mechanism of dialogue between Instructor of Record, Student and Preceptor.

Instructions to student:
- Please evaluate the following statements about your Preceptor and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with School of Nursing. The student and Instructor of Record will determine the communication plan with the preceptor, based on student comfort. The *Student Evaluation of Preceptor* will assist the Instructor of Record in determining matches for future student placement.

The Clinical Preceptor:	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Is available.							
Demonstrates an understanding of the APRN role.							
Guides student to build on their strengths and knowledge.							
Serves as a role model.							
Demonstrates good effective rapport with patients and team.							
Encourages student to assume increasing responsibility during the clinical rotation.							
Provides immediate and adequate feedback.							
Leads students through decision-making rather than giving own impressions.							
Reviews and signs each clinic/hospital note.							
Offers constructive comments about documentations.							
Encourages questions.							
Thoughtfully reviews differential diagnosis with student.							
Discusses management plans.							
Communicates clinical and systems knowledge well.							
Collaborates with other members of the health care team.							
Suggests and provides additional learning experiences.							
Reviews evaluations with student and provides immediate and constructive feedback.							
I would recommend this preceptor to another student.							

Adapted from: NONPF's Preceptor Portal Appendix N, Student Evaluation of the Clinical Preceptor, 2023

Additional comments:

_____   _____
Student Signature   Date

APPENDIX H

On-Boarding Requirements for Graduate Students
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

The following documents must be on file with the School of Nursing prior to beginning your Practicum, Residency, or Advanced Practice Clinical experience (this process should begin at least 60 days in advance of the start-date).

All documents must be completed before beginning clinical experiences or data collection activities.
1. Copy of RN license
2. Completed criminal background check
3. Documentation of current TB skin test (within one year)
4. Documentation of current BLS CPR
5. Immunization Documentation for MMR, HepB, Influenza, Varicella, Tdap, and Covid-19.
6. Assumption of Risk form
7. Copy of preceptor resume (upload to Typhon)
8. Signed copy of memorandum of understanding between preceptor, student and faculty member (upload to Typhon)
9. MyClinicalExchange – required for clinical at UW, Meriter, or St Mary's. To request placement at these sits, you must first complete the MyCE Clinical Request form. It is strongly recommended you already have a preceptor when you complete the request.
10. The above are required for all sites. You may have additional requirements or trainings as assigned by your particular clinical site.

Any items that cannot be uploaded to Viewpoint Screening or MyClinical Exchange (if at UW) should be e-mailed to Kyle Sanger at ksanger@edgewood.edu.

For Edgewood On-Boarding:
The School of Nursing needs to be in compliance with all our clinical agencies regarding documents noted above and any additional required forms. Students only need on-board **once** for the School of Nursing by submitting documents to ViewPoint Screening. However, students must keep requirements up-to-date throughout the entirety of their experience (e.g., as TB screening, flu vaccination, licensure renewals, and CPR).

Site Contracts: If you are having your precepted experience at a site other than UW, UW Medical Foundation, AFCH, Meriter-Unity Point, VA, St. Mary's or Monroe Clinic, please verify with Kyle Sanger that there is an institutional clinical contract in place prior to beginning your semester.

Note for UW onboarding:

1. If a student on-boards at a UW agency for a single course (such as Practicum), the on-boarding process satisfies the requirements for the duration of the semester at a UW agency. If, however, a student is at the site for more than one semester (such as during Residency), on-boarding can carry over from semester to semester, as long as the calendar dates are clear, and there is no gap.

For example, if a student has both Residency experiences at UW (Fall and Spring semesters), the student need not repeat on-boarding at UWHealth (but dates must reflect the continuous event). If the student is going from Fall to Spring (such may be the case in the Advanced Practice Clinical sequence), the student will need to on-board again. Rationale provided by UW: Data security (and access to the EMR) is a concern when access is available, but 'vacant' for a time period. Dates need to be clear and access will be terminated at end point.

2. If a student is in two (2) courses simultaneously (such as Advanced Practice Clinical and NRS 670), he/she must only on-board once for both, but details of data access need to be clear. If a student must access UW data for a project (NRS 670 for MSN students; a variety of courses for DNP students), the "Academic Project Submission Form" needs to be completed and sent to: Clinical Nurse Specialist for Research & Evidence-Based Practice at the following E-mail address: NursingResearch&EBP@uwhealth.org

APPENDIX I

Viewpoint Screening for Graduate Students
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

In addition to requirements outlined in Appendix H, the following must be submitted to Viewpoint Screening (Directions are on the [Viewpoint Screening website](#)).

Varicella: Must submit documentation of 2 varicella immunizations or a positive titer. Documentation must include administered dates OR the lab results of the titer. If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series.

Hepatitis B: Must submit documentation of 3 vaccinations. The student must also submit a positive antibody titer (lab report required) or declination waiver.

Tuberculosis: Documentation of a one-step PPD skin test within the past 12 months with a negative result. Skin test reaction should be read between 48-72 hours after administration.

OR Documentation of a two-step PPD skin test within the past 12 months (two step requires an initial injection and reading by a licensed healthcare professional and a second injection and reading by a healthcare professional within 1-3 weeks of the first.)

OR: Documentation of a negative QuantiFERON Gold-TB blood test (you must have QuantiFERON Gold if you have had a BCG vaccination) within the past 12 months

Renewal date will be set for 1 year from the date of the test results. Need the date of skin test placement **and** date read **and** the mm of induration **and** the signature of the healthcare professional who read the results. If QuantiFERON Gold, must submit the lab report. Note that some sites such as the VA will require a TB test within 90 days of the clinical start date.

If you test positive at any time, please notify the clinical coordinator immediately.

CPR Certification: MUST be BLS for Healthcare Providers/Professional Rescuers. The front and back of the card must be submitted and must be signed, certificates of completion with your name and date are acceptable. Renewal date will be based on the expiration of the card or certificate (certification is good for 24 months).

Health Form: Provide documentation for a physical exam completed within the last 12 months. You may use the form we provide, a signed form from your healthcare provider or screenshot of a MyChart. Date must be visible.

Influenza: Documentation of a flu vaccine administered during the current flu season (August-March).

Due date: Original date; then annually on November 1.

Tetanus (Td): Documentation of a Tetanus booster within the past 10 years. Renewal date will be set for 10 years from the administered date of the booster.

Measles, Mumps, Rubella (MMR): Documentation of 2 vaccinations or positive antibody titer (lab report required)

RN License (State License only): Expiration based on date on license.

Due date will be 90 days prior to the 1st day of Advanced Practice Clinical or Practicum, depending on start date of clinical residency.

APPENDIX J

Formal Complaint Form
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Policy for Filing a Formal Student Complaint
A formal complaint is a written report from a student or other constituent that expresses a serious concern about the quality of the nursing programs or the conduct of a faculty member or student in the Henry Predolin School of Nursing (SoN) at Edgewood College. A formal complaint should be initiated when all other appropriate SoN channels have failed to produce a satisfactory resolution from the point of view of the complainant.

Process for Filing:
1. The first step in any disagreement or conflict is to directly discuss it with the person/s involved.
2. If there has not been satisfactory resolution, the complainant may utilize the appropriate process outlined in the Edgewood College School of Nursing Student Handbook: *Student Complaints and Review and Maintenance of Records.*

Formal Complaint Form:

Date: _____

Name of Person Filing Complaint: _____

Program (if student): _____

If you are not a student, what is the nature of your relationship to the School of Nursing:

_____

Email Address: _____Phone: _____

Please provide a description of the issue giving rise to your complaint in as much detail as possible. If appropriate, include any and all dates and/or times where an issue occurred that relates to this formal complaint. Attach additional sheets if required, as well as copies of any relevant documents.

What have you done so far to resolve this complaint directly with persons involved or through established Edgewood College School of Nursing procedures?

Please describe as clearly as you can what measures would resolve this issue in a satisfactory manner, in your opinion. Attach additional sheets if required.

Complaints can be submitted via email, fax or mailed to:
Email: mnoreuil@edgewood.edu
Fax: 608 663-2863
Mail: 1000 Edgewood College Drive, Madison WI 53711

ADVANCED PRACTICE SUPPLEMENTAL HANDBOOKS

FNP Advanced Practice Clinical Supplemental Handbook

NRS 711 COURSE BACKGROUND

NRS 711 is the first clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Master of Science in Nursing Family Nurse Practitioner (FNP) concentration. During their first rotation, students focus on practicing and refining clinical history taking and physical assessment skills in an adult, primary care population. Students develop proficiency in presenting concise and accurate patient histories and exam findings. Emphasis is placed on early diagnostic reasoning whereby students begin to develop differential diagnoses and formulate the plan of care. Students are required to complete a minimum of 250 hours of supervised clinical practice in this course.

NRS 712 COURSE BACKGROUND

NRS 712 is the second clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Family Nurse Practitioner student. The course focuses on the practice and refinement of clinical history taking and assessment skills in a primary care family population under the supervision and guidance of a clinical preceptor. Students perform age-appropriate, comprehensive and focused histories and physical exams in pediatrics, adolescent, and adult reproductive health, and geriatrics. Students continue to gain proficiency with presenting concise and accurate patient histories and exam findings to their preceptors. Additionally, students work independently on diagnostic reasoning skills to develop differential diagnoses and formulate the plan of care for their preceptors' review. More emphasis is placed on patient education with a focus on anticipatory guidance and prevention. Students are required to complete a minimum of 250 hours of supervised clinical practice.

NRS 713 COURSE BACKGROUND

NRS 713 is the third clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Family Nurse Practitioner student. The course focuses the diagnosis and management of common acute and chronic health problems that occur in the family population across the lifespan. Students are expected to gain proficiency with performing histories and physical exams, developing differential diagnoses, and prescribing a plan of care for each patient. Students present each patient and the management plan to their preceptors for review. Emphasis is placed on professional collaboration and interdisciplinary consultation with other health professionals, teaching patients and families, and using evidence-based practice to prescribe and evaluate therapeutic interventions. Students must complete a minimum of 250 hours or the hours needed for completion of the 750 total hours of supervised clinical practice in this course.

Note: *During the Advanced Practice Clinical courses (i.e. NRS 711, 712, 713), students will be required to perform simulation examinations in a live or virtual setting with your course instructor. In some instances, a follow-up simulation may also be required prior to completion of the course.*

ADVANCED PRACTICE CLINICAL ROTATION OUTCOMES

Upon successful completion of NRS 711, 712, and 713, the student will be able to:

1. Describe the role of the nurse practitioner within a family-based scope of practice and be able to apply concepts of professionalism as set forth by professional nursing and national organizations.
2. Design patient-centered and culturally inclusive strategies to guide advanced practice nursing and optimize health outcomes for diverse populations.
3. Integrate the principles of epidemiology, pathophysiology, pharmacology and health promotion/disease prevention when diagnosing and managing patients, families and communities in all practice settings across the lifespan.
4. Provide comprehensive health examinations by utilizing problem-oriented data collection and risk assessment principles for the purposes of diagnosing current conditions, identifying co-morbidities, and putting preventative practices into place in patients across the lifespan.
5. Evaluate and implement educational and/or health promotion and preventive strategies based on information gathered during history and physical exam and considering cultural, socio-economic, psycho-social and developmental needs.
6. Assess, diagnose and manage common primary care problems across the lifespan by utilizing diagnostic tests, the skills of clinical decision-making, and evidenced based clinical practice guidelines.
7. Collaborate and arrange for appropriate consultations and referrals to other healthcare specialties as necessary, to promote quality patient care.

PATIENT ENCOUNTERS

An "Encounter" is an interaction where the FNP student addresses a patient's specific clinical problem (a patient may present with multiple clinical problems and thus an FNP student may have more than one Encounter with a single patient). Encounters offer the FNP student the opportunity to practice and demonstrate proficiency in meeting the Course Objectives. With each advanced practice clinical course, the goal is for a student to have *a minimum of* five Encounters for each clinical rotation that fall under each of the following clinical problem categories:

Routine physical exams and child well-check exams: including, but not limited to performing screening tests and preventative care

Respiratory- ENT: including, but not limited to, COPD, asthma, rhinitis, bronchitis, pneumonia, otitis media, otitis externa, sinusitis, or pharyngitis.

Eye: including, but not limited to, performing fundoscopic examination, conjunctivitis, hordeolum, foreign body or wood lamp.

Cardiovascular: including, but not limited to, congestive heart failure, chest pain, palpitations, valve disease, hypertension, or CAD.

GI: including, but not limited to, abdominal pain, gastroenteritis, inflammatory bowel disease, hepatitis, duodenal ulcer, GERD, appendicitis, pancreatitis, biliary disease, abdominal hernia, hemorrhoids, or other acute abdomen.

Musculoskeletal: including, but not limited to, extremity injury, joint disease, neck pain, or low back pain.

Neurology: including, but not limited to, headache, vertigo, CVA/TIA, head trauma, radiculopathies, movement or sensory disorders.

Endocrine: including, but not limited to, diabetes, thyroid disorders, parathyroid disorders, hypothalamus or pituitary disorders, or amenorrhea.

GU: including, but not limited to, prostate exams, urinary tract infection, urinary incontinence, BPH, erectile dysfunction, inguinal hernia, renal stone, or pyelonephritis.

GYN/Women's Health: including, but not limited to, breast mass, amenorrhea, dysmenorrhea, vaginitis, ectopic pregnancy, sexually transmitted infections, or prenatal care.

Dermatology: including, but not limited to, inflammatory dermatoses, acne, eczema/atopic dermatitis, contact dermatitis, actinic keratosis, tinea/candidiasis, cellulitis or abscess.

Psychiatry: including, but not limited to, to situational/individual/family crises, anxiety, depression, bipolar, schizophrenia, confusion, memory loss, drug/alcohol dependency or abuse.

LEVEL OF RESPONSIBILITY (LoR)

Each Encounter is to be entered into the Typhon Patient Log Record. The student must also designate their Level of Responsibility (LoR) during the Encounter. There are four LoR designations:

Level 1: Observation Only-FNP student observes provider or "assists" peripherally in procedure (e.g., observes a surgical procedure or passes an instrument to the provider).

Level 2: Major Consultation-Preceptor rechecks almost all of the FNP student's patient history-taking and/or physical examination; the preceptor provides most of the assessment and plan. LoR 2 is common for students very early in their clinical rotations or with very complex/high-risk patients.

Level 3: Dual Responsibility-The preceptor entrusts the FNP student with 50% of the responsibility for the patient. LoR is often utilized for beginning students or when patients have complex problems.

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

All LoRs count toward clinical time toward the 750-hour requirement, however, only patient Encounters at LoR 2-4 count toward meeting the clinical requirements of an Encounter (i.e., purely observing the preceptor handle the Encounter precludes the FNP student from counting the Encounter as one of the five required Encounters for that clinical problem category). The following provides guidelines for determining if an Encounter counts toward meeting clinical requirements:

1. The Encounter must be diagnosis-specific for the clinical requirement counted (e.g., if the clinical problem is contact dermatitis, the diagnosis must state "contact dermatitis" rather than "rule out contact dermatitis" or "contact dermatitis vs. psoriasis").

2. The SOAP must contain an HPI (or brief description of the condition), review of systems to address the specific patient condition or problem, a physical exam appropriate to the expected condition, an assessment with the diagnosis, and a treatment plan for the diagnosis.

In addition, only clinical problems addressed by the FNP student should be recorded as an Encounter, even though the patient may have additional problems on their problem list that would constitute an Encounter. All problems addressed by the student should be recorded each time a patient is seen. Typhon Patient Log Records are reviewed on a weekly basis by the Instructor of Record. Students must document their clinical time and clinical requirements

(Encounters) on a weekly basis on the *Clinical Hours Log* and provide a copy to the Preceptor and Instructor of Record. Failure to appropriately clinical hours will result in not progressing to the next clinical rotation. This process of calculating clinical hours and Encounters for preceptor approval will assure both the Instructor of Record and Preceptor that the student is making timely progress.

Clinical Hours and Encounters Log (FNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

LEVEL OF RESPONSIBILITY (LoR)
Each Encounter is to be entered into the Typhon Patient Log Record. The student must also designate their Level of Responsibility (LoR) during the Encounter. There are four LoR designations:
Level 1: Observation Only-FNP student observes provider or "assists" peripherally in procedure (e.g., observes a surgical procedure or passes an instrument to the provider).
Level 2: Major Consultation-Preceptor rechecks almost all of the FNP student's patient history-taking and/or physical examination; the preceptor provides most of the assessment and plan. LoR 2 is common for students very early in their clinical rotations or with very complex/high-risk patients.
Level 3: Dual Responsibility-The preceptor entrusts the FNP student with 50% of the responsibility for the patient. LoR is often utilized for beginning students or when patients have complex problems.
Level 4: Complete Encounter-The FNP student sees a patient without preceptor consultation during the patient visit. However, the student must briefly present the patient's case to the preceptor prior to the patient leaving.

Encounter	LoR
Routine physical exams and child well-check exams: including, but not limited to performing screening tests and preventative care.	
Respiratory- ENT: including, but not limited to, COPD, asthma, rhinitis, bronchitis, pneumonia, otitis media, otitis externa, sinusitis, or pharyngitis.	
Eye: including, but not limited to, performing fundoscopic examination, conjunctivitis, hordeolum, foreign body or wood lamp.	
Cardiovascular: including, but not limited to, congestive heart failure, chest pain, palpitations, valve disease, hypertension, or CAD.	
GI: including, but not limited to, abdominal pain, gastroenteritis, inflammatory bowel disease, hepatitis, duodenal ulcer, GERD, appendicitis, pancreatitis, biliary disease, abdominal hernia, hemorrhoids, or other acute abdomen.	
Musculoskeletal: including, but not limited to, extremity injury, joint disease, neck pain, or low back pain.	
Neurology: including, but not limited to, headache, vertigo, CVA/TIA, head trauma, radiculopathies, movement or sensory disorders.	
Endocrine: including, but not limited to, diabetes, thyroid disorders, parathyroid disorders, hypothalamus or pituitary disorders, or amenorrhea.	
GU: including, but not limited to, prostate exams, urinary tract infection, urinary incontinence, BPH, erectile dysfunction, inguinal hernia, renal stone, or pyelonephritis.	

GYN/Women's Health: including, but not limited to, breast mass, amenorrhea, dysmenorrhea, vaginitis, ectopic pregnancy, sexually transmitted infections, or prenatal care.	
Dermatology: including, but not limited to, inflammatory dermatoses, acne, eczema/atopic dermatitis, contact dermatitis, actinic keratosis, tinea/candidiasis, cellulitis or abscess.	
Psychiatry: including, but not limited to, to situational/individual/family crises, anxiety, depression, bipolar, schizophrenia, confusion, memory loss, drug/alcohol dependency or abuse.	

Preceptor Evaluation of Student (FNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Student Name:_____

Agency:_____

Preceptor Name (evaluator):_____

Date: _____

Advanced Practice Clinical Course (Circle One): NRS 711   NRS 712   NRS 713
Students will be evaluated on their self-directed achievement of the following course objectives (CO) mid-way through the clinical experience, and again at the conclusion of the clinical experience:

1 = Considerable guidance needed

2 = Moderate guidance needed

3 = Self-directed, minimal guidance needed

N/A = Not applicable to this clinical situation, or unable to evaluate

	1	2	3	N/A	Comments/Opportunities
Data Base					
Obtains and accurately documents appropriate health history.					
Performs and accurately documents appropriate comprehensive or focused physical examination.					
Synthesizes subjective and objective data to formulate an appropriate list of differential diagnoses					
Orders, performs, and interprets screening and diagnostic procedures and tests					
Documents appropriate findings in accordance with legal and professional standards					
Distinguishes and prioritizes patient care between immediate needs and less immediate needs.					
Identifies health and psychosocial risk factors					
Establishes therapeutic rapport with patients.					
Therapeutic Regimens					
Provides care that is nonjudgmental and sensitive to the client's needs and culture.					

Selects appropriate management regimen.					
Selects appropriate medications.					
Orders and interprets screening and diagnostic procedures and tests appropriately.					
Performs procedures competently					
Initiates health maintenance therapy such as nutrition, skin care, OT, and PT, as appropriate					
Makes appropriate referrals/consultations.					
Initiates health teaching to promote, maintain, or restore health.					
Evaluation					
Evaluates results of therapeutic efforts and continues and/or modifies therapeutic regimen as required.					
Documents concise, relevant, and complete data in accordance with legal and professional standards.					
NP Role Aspects					
Collaborates and consults with members of the health care team effectively.					
Communicates client case concisely and in an organized manner when collaborating with preceptor and other members of the health care team.					
Assumes accountability for NP practice					
Legally protects self and patients in the delivery of health care and in problem-oriented medical record keeping.					
Maintains ethical standards.					
Assumes responsibility for defining NP role for patients, physicians, nurses, and other health team members.					
Functions appropriately within NP scope of practice					
Utilizes preceptor consultation appropriately.					
Integrates current research findings and evidence-based guidelines into clinical practice.					
Engages in self-evaluation to identify areas for improvement					
Seeks and selects learning experiences to increase skills and improve areas of weakness.					
OVERALL: I would rate this student's performance:					

Adapted from: NONPF's Preceptor Portal Appendix M, Preceptor Evaluation of the Student, 2023

Additional Comments:

_____ _____

Student Signature   Date

_____ _____

Preceptor Signature   Date

_____ _____

Instructor of Record Signature   Date

Preceptor Evaluation of Student (FNP, AGPCNP, PHMHNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Student Name:

Agency:

Preceptor Name (evaluator):

Date:

Students will be evaluated on their self-directed achievement of the following course objectives (CO) mid-way through the clinical experience, and again at the conclusion of the clinical experience:

1 = Considerable guidance needed

2 = Moderate guidance needed

3 = Self-directed, minimal guidance needed

N/A = Not applicable to this clinical situation, or unable to evaluate

	1	2	3	N/A	Comments/Opportunities
Data Base					
Obtains and accurately documents appropriate health history.					
Performs and accurately documents appropriate comprehensive or focused physical examination.					
Synthesizes subjective and objective data to formulate an appropriate list of differential diagnoses					
Orders, performs, and interprets screening and diagnostic procedures and tests					
Documents appropriate findings in accordance with legal and professional standards					
Distinguishes and prioritizes patient care between immediate needs and less immediate needs.					
Identifies health and psychosocial risk factors					
Establishes therapeutic rapport with patients.					
Therapeutic Regimens					
Provides care that is nonjudgmental and sensitive to the client's needs and culture.					
Selects appropriate management regimen.					

Selects appropriate medications.				
Orders and interprets screening and diagnostic procedures and tests appropriately.				
Performs procedures competently				
Initiates health maintenance therapy such as nutrition, skin care, OT, and PT, as appropriate				
Makes appropriate referrals/consultations.				
Initiates health teaching to promote, maintain, or restore health.				
Evaluation				
Evaluates results of therapeutic efforts and continues and/or modifies therapeutic regimen as required.				
Documents concise, relevant, and complete data in accordance with legal and professional standards.				
NP Role Aspects				
Collaborates and consults with members of the health care team effectively.				
Communicates client case concisely and in an organized manner when collaborating with preceptor and other members of the health care team.				
Assumes accountability for NP practice				
Legally protects self and patients in the delivery of health care and in problem-oriented medical record keeping.				
Maintains ethical standards.				
Assumes responsibility for defining NP role for patients, physicians, nurses, and other health team members.				
Functions appropriately within NP scope of practice				
Utilizes preceptor consultation appropriately.				
Integrates current research findings and evidence-based guidelines into clinical practice.				
Engages in self-evaluation to identify areas for improvement				
Seeks and selects learning experiences to increase skills and improve areas of weakness.				
OVERALL: I would rate this student's performance:				

Adapted from: NONPF's Preceptor Portal Appendix M, Preceptor Evaluation of the Student, 2023

Additional Comments:

_____ _____
Student Signature   Date

_____ _____
Preceptor Signature   Date

_____ _____
Instructor of Record Signature   Date

Student Evaluation of Preceptor
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Philosophy: The Preceptor acts as a teacher and mentor to the Student in Practicum, Advanced Practice Clinical, or Residency experiences. It is important for the Preceptor to receive feedback on the execution of their role. This information can also assist course instructors in matching future students with Preceptors, and provides a mechanism of dialogue between Instructor of Record, Student and Preceptor.

Instructions to Student:
- Please evaluate the following statements about your Preceptor and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with the School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Preceptor* will assist the Instructor of Record in determining matches for future student placement.

The Clinical Preceptor:	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Is available.							
Demonstrates an understanding of the APRN role.							
Guides student to build on their strengths and knowledge.							
Serves as a role model.							
Demonstrates good effective rapport with patients and team.							
Encourages student to assume increasing responsibility during the clinical rotation.							
Provides immediate and adequate feedback.							
Leads students through decision-making rather than giving own impressions.							
Reviews and signs each clinic/hospital note.							
Offers constructive comments about documentations.							
Encourages questions.							
Thoughtfully reviews differential diagnosis with student.							
Discusses management plans.							
Communicates clinical and systems knowledge well.							
Collaborates with other members of the health care team.							
Suggests and provides additional learning experiences.							
Reviews evaluations with student and provides immediate and constructive feedback.							
I would recommend this preceptor to another student.							

Adapted from: NONPF's Preceptor Portal Appendix N, Student Evaluation of the Clinical Preceptor, 2023

Additional comments:

_____   _____
Student Signature   Date

Student Evaluation of Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Instructions to Student:
- Please evaluate the following statements about your clinical site and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Clinical Site* assists the Instructor of Record in determining matches for future student placement.

	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Was adequate orientation to the clinical site provided?							
Is adequate space provided?							
Does facility provide a safe environment for clinical practice?							
Is adequate time given to see clients?							
Are there sufficient numbers of clients?							
Does the range of clients served match the student's scope of practice?							
Are students given the opportunity to follow-up with clients and/or pro interest?							
Are clients' records (e.g., chart, test results, etc.) accessible to students?							
Is support staff appropriately helpful to student?							
Are other disciplines utilized in client care?							
I would recommend this clinical site to other students							

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date

Instructor of Record/Site Evaluator Evaluation of Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Evaluator Name/Role: _____ Date: _____

Instructions to Student:
- Please evaluate the following statements about your clinical site and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with the School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Clinical Site* assists the Instructor of Record in determining matches for future student placement.

	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Was adequate orientation to the clinical site provided?							
Is adequate space provided?							
Does facility provide a safe environment for clinical practice?							
Is adequate time given to see clients?							
Are there sufficient numbers of clients?							
Does the range of clients served match the student's scope of practice?							
Are students given the opportunity to follow-up with clients and/or problems of interest?							
Are clients' records (e.g., chart, test results, etc.) accessible to students?							
Is support staff appropriately helpful to student?							
Are other disciplines utilized in client care?							
I would recommend this clinical site to other students							

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date

Instructor of Record Evaluation of Student at Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____

Agency: _____

Site: _____

Student: _____

Evaluator Name/Instructor of Record: _____

Date of Visit: _____

Criteria	Yes	No	N/A	Comments
Introduced self to the patient and set the tone for a professional appointment				
Practices good hygiene, including hand washing and avoidance of equipment contamination for appointment. (Observe throughout the evaluation)				
Asked patient for a Chief Complaint				
Performed a thorough health history interview				
Performed a thorough review of immunizations				
Performed a thorough review of social history				
Performed a thorough ROS interview				
Reviews medication list with patient and/or family, including OTC's, herbals)				
Performed appropriate and thorough physical assessment (a focused exam is allowable in some settings)				
Identified differential diagnoses with rationale for selected diagnosis (in collaboration with faculty or preceptor)				

Ordered appropriate diagnostics				
Identified appropriate treatment plan				
Demonstrated clinical reasoning and can support rationale for diagnosis, diagnostics, and treatment plan				
Prescribed recommended pharmacological treatment. (Inclusive of allergy review)				
Incorporated needed health promotion and disease screening tests				
Incorporated family in the treatment and plan of care				
Provided culturally responsive patient care				
Facilitated necessary patient care referrals				
Provided effective patient education (age appropriate)				
Collaborated with members of the interprofessional team (if appropriate)				
Demonstrated effective communication skills with patient and family.				

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date

AGPCNP Advanced Practice Clinical Supplemental Handbook

NRS 720 COURSE BACKGROUND

NRS 720 is the first clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Master of Science in Nursing Adult Gerontology Primary Care Nurse Practitioner (AGPCNP) concentration. During their first rotation, students focus on practicing and refining clinical history taking and physical assessment skills in an adult, primary care population. Students develop proficiency in presenting concise and accurate patient histories and exam findings. Emphasis is placed on early diagnostic reasoning whereby students begin to develop differential diagnoses and formulate the plan of care. Students are required to complete a minimum of 167 hours of supervised clinical practice in this course.

NRS 721 COURSE BACKGROUND

NRS 721 is the second clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Adult Gerontology Primary Care Nurse Practitioner student. The course focuses on the practice and refinement of clinical history taking and assessment skills in a primary care adolescent and adult population under the supervision and guidance of a clinical preceptor. Students perform age-appropriate, comprehensive and focused histories and physical exams in adolescent, adult, reproductive health, and geriatrics. Students continue to gain proficiency with presenting concise and accurate patient histories and exam findings to their preceptors. Additionally, students work independently on diagnostic reasoning skills to develop differential diagnoses and formulate the plan of care for their preceptors' review. More emphasis is placed on patient education with a focus on anticipatory guidance and prevention. Students are required to complete a minimum of 167 hours of supervised clinical practice.

NRS 722 COURSE BACKGROUND

NRS 722 is the third clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Adult Gerontology Primary Care Nurse Practitioner student. The course focuses on the diagnosis and management of common acute and chronic health problems that occur in the adolescent, adult, and geriatric population. Students are expected to gain proficiency with performing histories and physical exams, developing differential diagnoses, and prescribing a plan of care for each patient. Students present each patient and the management plan to their preceptors for review. Emphasis is placed on professional collaboration and interdisciplinary consultation with other health professionals, teaching patients and families, and using evidence-based practice to prescribe and evaluate therapeutic interventions. Students must complete a minimum of 167 hours or the hours needed for completion of the 500 total hours of supervised clinical practice in this course.

Note: *During the Advanced Practice Clinical courses (i.e. NRS 720, 721, 722), students will be required to perform simulation examinations in a live or virtual setting with your course instructor. In some instances, a follow-up simulation may also be required prior to completion of the course.*

ADVANCED PRACTICE CLINICAL ROTATION OUTCOMES

Upon successful completion of NRS 720, 721, and 722, the student will be able to:

1. Describe the role of the nurse practitioner within an adult-gerontology-based scope of practice and be able to apply concepts of professionalism as set forth by professional nursing and national organizations.
2. Design patient-centered and culturally inclusive strategies to guide advanced practice nursing and optimize health outcomes for diverse populations.
3. Integrate the principles of epidemiology, pathophysiology, pharmacology and health promotion/disease prevention when diagnosing and managing adult patients, as well as families and communities in all practice settings.
4. Provide comprehensive health examinations by utilizing problem-oriented data collection and risk assessment principles for the purposes of diagnosing current conditions, identifying co-morbidities, and putting preventative practices into place in adolescent patients through end of life.
5. Evaluate and implement educational and/or health promotion and preventive strategies based on information gathered during history and physical exam and considering cultural, socio-economic, psycho-social and developmental needs.
6. Assess, diagnose and manage common primary care problems within the adolescent through end of life by utilizing diagnostic tests, the skills of clinical decision-making, and evidenced based clinical practice guidelines.
7. Collaborate and arrange for appropriate consultations and referrals to other healthcare specialties as necessary, to promote quality patient care.

PATIENT ENCOUNTERS

An "Encounter" is an interaction where the AGPCNP student addresses a patient's specific clinical problem (a patient may present with multiple clinical problems and thus an AGPCNP student may have more than one clinical problem with a single patient). Encounters offer the AGPCNP student the opportunity to practice and demonstrate proficiency in meeting the Course Objectives. With each advanced practice clinical course, the goal is for a student to have *a minimum of* five Encounters for each clinical rotation that fall under each of the following clinical problem categories:

Routine physical exams: including, but not limited to performing routine screening tests and preventative care

Respiratory- ENT: including, but not limited to, COPD, asthma, rhinitis, bronchitis, pneumonia, otitis media, otitis externa, sinusitis, or pharyngitis.

Eye: including, but not limited to performing fundoscopic examination, conjunctivitis, hordeolum, foreign body or wood lamp.

Cardiovascular: including, but not limited to congestive heart failure, chest pain, palpitations, valve disease, hypertension, or CAD.

GI: including, but not limited to abdominal pain, gastroenteritis, inflammatory bowel disease, hepatitis, duodenal ulcer, GERD, appendicitis, pancreatitis, biliary disease, abdominal hernia, hemorrhoids, or other acute abdomen.

Musculoskeletal: including, but not limited to extremity injury, joint disease, neck pain, or low back pain.

Neurology: including, but not limited to headache, vertigo, CVA/TIA, head trauma, radiculopathies, movement or sensory disorders.

Endocrine: including, but not limited to diabetes, thyroid disorders, parathyroid disorders, hypothalamus or pituitary disorders, or amenorrhea.

GU: including, but not limited to prostate exams, urinary tract infection, urinary incontinence, BPH, erectile dysfunction, inguinal hernia, renal stone, or pyelonephritis.

GYN/Women's Health: including, but not limited to breast mass, amenorrhea, dysmenorrhea, vaginitis, ectopic pregnancy, sexually transmitted infections, or prenatal care.

Dermatology: including, but not limited to inflammatory dermatoses, acne, eczema/atopic dermatitis, contact dermatitis, actinic keratosis, tinea/candidiasis, cellulitis or abscess.

Psychiatry: including, but not limited to to situational/individual/family crises, anxiety, depression, bipolar, schizophrenia, confusion, memory loss, drug/alcohol dependency or abuse.

LEVEL OF RESPONSIBILITY (LoR)

Each Encounter is to be entered into the Typhon Patient Log Record. The student must also designate their Level of Responsibility (LoR) during the Encounter. There are four LoR designations:

Level 1: Observation Only- AGPCNP student observes provider or "assists" peripherally in procedure (e.g., observes a surgical procedure or passes an instrument to the provider).

Level 2: Major Consultation-Preceptor rechecks almost all of the AGPCNP student's patient history-taking and/or physical examination; the preceptor provides most of the assessment and plan. LoR 2 is common for students very early in their clinical rotations or with very complex/high-risk patients.

Level 3: Dual Responsibility-The preceptor entrusts the AGPCNP student with 50% of the responsibility for the patient. LoR is often utilized for beginning students or when patients have complex problems.

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

All LoRs count toward clinical time toward the 500-hour requirement, however, only patient Encounters at LoR 2-4 count toward meeting the clinical requirements of an Encounter (i.e., purely observing the preceptor handle the Encounter precludes the AGPCNP student from counting the Encounter as one of the five required Encounters for that clinical problem category). The following provides guidelines for determining if an Encounter counts toward meeting clinical requirements:

3. The Encounter must be diagnosis-specific for the clinical requirement counted (e.g., if the clinical problem is contact dermatitis, the diagnosis must state "contact dermatitis" rather than "rule out contact dermatitis" or "contact dermatitis vs. psoriasis").

In addition, only clinical problems addressed by the AGPCNP student should be recorded within each Encounter, even though the patient may have additional problems on their problem list. If they were not addressed during the visit, it should not be recorded. All problems addressed by the student should be recorded each time a patient is seen. Typhon Patient Log Records are reviewed on a weekly basis by the Instructor of Record. Students must document their clinical time and clinical requirements (Encounters) on a weekly basis on the *Clinical Hours Log* and provide a copy to the Preceptor and Instructor of Record. Failure to appropriately log clinical hours will result in not progressing to the next clinical rotation. This process of calculating clinical hours and Encounters for preceptor approval will assure both the Instructor of Record and Preceptor that the student is making timely progress.

Clinical Hours and Encounters Log (AGPCNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

LEVEL OF RESPONSIBILITY (LoR)
Each Encounter is to be entered into the Typhon Patient Log Record. The student must also designate their Level of Responsibility (LoR) during the Encounter. There are four LoR designations:
Level 1: Observation Only- AGPCNP student observes provider or "assists" peripherally in procedure (e.g., observes a surgical procedure or passes an instrument to the provider).
Level 2: Major Consultation-Preceptor rechecks almost all of the AGPCNP student's patient history-taking and/or physical examination; the preceptor provides most of the assessment and plan. LoR 2 is common for students very early in their clinical rotations or with very complex/high-risk patients.
Level 3: Dual Responsibility-The preceptor entrusts the AGPCNP student with 50% of the responsibility for the patient. LoR is often utilized for beginning students or when patients have complex problems.
Level 4: Complete Encounter-The AGPCNP student sees a patient without preceptor consultation during the patient visit. However, the student must briefly present the patient's case to the preceptor prior to the patient leaving.

Encounter	LoR
Routine physical exams and child well-check exams: including, but not limited to performing screening tests and preventative care.	
Respiratory- ENT: including, but not limited to COPD, asthma, rhinitis, bronchitis, pneumonia, otitis media, otitis externa, sinusitis, or pharyngitis.	
Eye: including, but not limited to performing fundoscopic examination, conjunctivitis, hordeolum, foreign body or wood lamp.	
Cardiovascular: including, but not limited to congestive heart failure, chest pain, palpitations, valve disease, hypertension, or CAD.	
GI: including, but not limited to abdominal pain, gastroenteritis, inflammatory bowel disease, hepatitis, duodenal ulcer, GERD, appendicitis, pancreatitis, biliary disease, abdominal hernia, hemorrhoids, or other acute abdomen.	
Musculoskeletal: including, but not limited to extremity injury, joint disease, neck pain, or low back pain.	
Neurology: including, but not limited to headache, vertigo, CVA/TIA, head trauma, radiculopathies, movement or sensory disorders.	
Endocrine: including, but not limited to diabetes, thyroid disorders, parathyroid disorders, hypothalamus or pituitary disorders, or amenorrhea.	
GU: including, but not limited to prostate exams, urinary tract infection, urinary incontinence, BPH, erectile	

dysfunction, inguinal hernia, renal stone, or pyelonephritis.	
GYN/Women's Health: including, but not limited to breast mass, amenorrhea, dysmenorrhea, vaginitis, ectopic pregnancy, sexually transmitted infections, or prenatal care.	
Dermatology: including, but not limited to inflammatory dermatoses, acne, eczema/atopic dermatitis, contact dermatitis, actinic keratosis, tinea/candidiasis, cellulitis or abscess.	
Psychiatry: including, but not limited to to situational/individual/family crises, anxiety, depression, bipolar, schizophrenia, confusion, memory loss, drug/alcohol dependency or abuse.	

Preceptor Evaluation of Student (AGPCNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Student Name:

Agency:

Preceptor Name (evaluator):

Date:

Advanced Practice Clinical Course (Circle One): NRS 720   NRS 721   NRS 722
Students will be evaluated on their self-directed achievement of the following course objectives (CO) mid-way through the clinical experience, and again at the conclusion of the clinical experience:

1 = Considerable guidance needed

2 = Moderate guidance needed

3 = Self-directed, minimal guidance needed

N/A = Not applicable to this clinical situation, or unable to evaluate

	1	2	3	N/A	Comments/Opportunities
Data Base					
Obtains and accurately documents appropriate health history.					
Performs and accurately documents appropriate comprehensive or focused physical examination.					
Synthesizes subjective and objective data to formulate an appropriate list of differential diagnoses					
Orders, performs, and interprets screening and diagnostic procedures and tests					
Documents appropriate findings in accordance with legal and professional standards					
Distinguishes and prioritizes patient care between immediate needs and less immediate needs.					
Identifies health and psychosocial risk factors					
Establishes therapeutic rapport with patients.					
Therapeutic Regimens					
Provides care that is nonjudgmental and sensitive to the client's needs and culture.					

Selects appropriate management regimen.				
Selects appropriate medications.				
Orders and interprets screening and diagnostic procedures and tests appropriately.				
Performs procedures competently				
Initiates health maintenance therapy such as nutrition, skin care, OT, and PT, as appropriate				
Makes appropriate referrals/consultations.				
Initiates health teaching to promote, maintain, or restore health.				
Evaluation				
Evaluates results of therapeutic efforts and continues and/or modifies therapeutic regimen as required.				
Documents concise, relevant, and complete data in accordance with legal and professional standards.				
NP Role Aspects				
Collaborates and consults with members of the health care team effectively.				
Communicates client case concisely and in an organized manner when collaborating with preceptor and other members of the health care team.				
Assumes accountability for NP practice				
Legally protects self and patients in the delivery of health care and in problem-oriented medical record keeping.				
Maintains ethical standards.				
Assumes responsibility for defining NP role for patients, physicians, nurses, and other health team members.				
Functions appropriately within NP scope of practice				
Utilizes preceptor consultation appropriately.				
Integrates current research findings and evidence-based guidelines into clinical practice.				
Engages in self-evaluation to identify areas for improvement				
Seeks and selects learning experiences to increase skills and improve areas of weakness.				
OVERALL: I would rate this student's performance:				

Adapted from: NONPF's Preceptor Portal Appendix M, Preceptor Evaluation of the Student, 2023

Additional Comments:

_____ _____
Student Signature   Date

_____ _____
Preceptor Signature   Date

_____ _____
Instructor of Record Signature   Date

Student Evaluation of Preceptor
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Philosophy: The Preceptor acts as a teacher and mentor to the Student in Practicum, Advanced Practice Clinical, or Residency experiences. It is important for the Preceptor to receive feedback on the execution of their role. This information can also assist course instructors in matching future students with Preceptors, and provides a mechanism of dialogue between Instructor of Record, Student and Preceptor.

Instructions to Student:
- Please evaluate the following statements about your Preceptor and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with the School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Preceptor* will assist the Instructor of Record in determining matches for future student placement.

The Clinical Preceptor:	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Is available.							
Demonstrates an understanding of the APRN role.							
Guides student to build on their strengths and knowledge.							
Serves as a role model.							
Demonstrates good effective rapport with patients and team.							
Encourages student to assume increasing responsibility during the clinical rotation.							
Provides immediate and adequate feedback.							
Leads students through decision-making rather than giving own impressions.							
Reviews and signs each clinic/hospital note.							
Offers constructive comments about documentations.							
Encourages questions.							
Thoughtfully reviews differential diagnosis with student.							
Discusses management plans.							
Communicates clinical and systems knowledge well.							
Collaborates with other members of the health care team.							
Suggests and provides additional learning experiences.							
Reviews evaluations with student and provides immediate and constructive feedback.							
I would recommend this preceptor to another student.							

Additional comments:

_____   _____
Student Signature   Date

Student Evaluation of Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Instructions to Student:
- Please evaluate the following statements about your clinical site and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Clinical Site* assists the Instructor of Record in determining matches for future student placement.

	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Was adequate orientation to the clinical site provided?							
Is adequate space provided?							
Does facility provide a safe environment for clinical practice?							
Is adequate time given to see clients?							
Are there sufficient numbers of clients?							
Does the range of clients served match the student's scope of practice?							
Are students given the opportunity to follow-up with clients and/or pro interest?							
Are clients' records (e.g., chart, test results, etc.) accessible to students?							
Is support staff appropriately helpful to student?							
Are other disciplines utilized in client care?							
I would recommend this clinical site to other students							

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date

Instructor of Record/Site Evaluator Evaluation of Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Evaluator Name/Role: _____ Date: _____

Instructions to Student:
- Please evaluate the following statements about your clinical site and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with the School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Clinical Site* assists the Instructor of Record in determining matches for future student placement.

	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Was adequate orientation to the clinical site provided?							
Is adequate space provided?							
Does facility provide a safe environment for clinical practice?							
Is adequate time given to see clients?							
Are there sufficient numbers of clients?							
Does the range of clients served match the student's scope of practice?							
Are students given the opportunity to follow-up with clients and/or problems of interest?							
Are clients' records (e.g., chart, test results, etc.) accessible to students?							
Is support staff appropriately helpful to student?							
Are other disciplines utilized in client care?							
I would recommend this clinical site to other students							

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date

Instructor of Record Evaluation of Student at Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____

Agency: _____

Site: _____

Student: _____

Evaluator Name/Instructor of Record: _____

Date of Visit: _____

Criteria	Yes	No	N/A	Comments
Introduced self to the patient and set the tone for a professional appointment				
Practices good hygiene, including hand washing and avoidance of equipment contamination for appointment. (Observe throughout the evaluation)				
Asked patient for a Chief Complaint				
Performed a thorough health history interview				
Performed a thorough review of immunizations				
Performed a thorough review of social history				
Performed a thorough ROS interview				
Reviews medication list with patient and/or family, including OTC's, herbals)				
Performed appropriate and thorough physical assessment (a focused exam is allowable in some settings)				
Identified differential diagnoses with rationale for selected diagnosis (in collaboration with faculty or preceptor)				

Ordered appropriate diagnostics				
Identified appropriate treatment plan				
Demonstrated clinical reasoning and can support rationale for diagnosis, diagnostics, and treatment plan				
Prescribed recommended pharmacological treatment. (Inclusive of allergy review)				
Incorporated needed health promotion and disease screening tests				
Incorporated family in the treatment and plan of care				
Provided culturally responsive patient care				
Facilitated necessary patient care referrals				
Provided effective patient education (age appropriate)				
Collaborated with members of the interprofessional team (if appropriate)				
Demonstrated effective communication skills with patient and family.				

Additional comments:

_____   _____
Student Signature   Date

_____   _____
Instructor of Record Signature   Date

CNS Advanced Practice Clinical Supplemental Handbook

PATIENT ENCOUNTERS: May not see children <12 years of age

Encounters offer the CNS student the opportunity to practice and demonstrate proficiency in meeting the course objectives and CNS core competencies for practice. An "Encounter" is an interaction where the CNS student participates collaboratively with their preceptor in the role of the CNS within the 3 Spheres of Impact: patient direct care, nurse/nursing practice, organization/system (NACNS, 2019). A total of 240 patient encounters will be recorded in Typhon over the 500 hours of clinical. A minimum of 20 encounters within each Sphere of Impact per clinical rotation is required. The encounters will demonstrate role integration from wellness to illness across the care settings.

Three Spheres of Impact:

- Patient/Direct Care: Represents patient, family, healthcare surrogate, community, and population. Direct interaction with patients, families, and groups of patients to promote health and/or well-being and improve quality of life. Characterized by a holistic perspective in the advanced nursing management of health, illness, and disease states.
- Nurse and Nursing: The CNS advances nursing practice to achieve optimal outcomes by ensuring that nurses and nursing personnel utilize evidence-based practices to meet the multifaceted needs of patients and/or populations.
- Organizations/Systems: The CNS articulates the value of nursing care at the organizational, decision-making level; influences system changes that facilitate improvement of quality, cost effective patient outcomes; and advocates for professional nursing.

Examples (but not limited to):

Care Collaboration: patient and family care conferences both inpatient and outpatient, Coordination of care with sub-specialties or outpatient agencies and multidisciplinary teams and across agencies.
Systems Leadership: the design and/or implementation system wide change within the CNS practice specialty in the delivery of care, education of patient, family or staff or quality improvement initiatives across the system and collaborating agencies.
Coaching: skilled guidance and teaching to advance the care of patients, families, aggregate patient populations and staff to advance the care of the patient, family or community
Research: participating in the design, implementation, and data analysis and distribution of nursing quality improvement project or IRB approved research to advance the care of patients, families, or aggregates of patients across individual or multiple care settings.
Advocacy & Public Policy: advocating for ethical patient care issues in complex systems, patient and family education on community resources to provide safe and adequate care across multiple settings.

All work is due no later than 90 days from the initial patient encounter.

To ensure Encounters are appropriate to practice role, the Preceptor, Instructor of Record (Edgewood College) and Student will communicate prior to the start of the clinical rotation, mid-rotation and at the end of the rotation.

Clinical Encounter Worksheet
CNS Typhon Case Log Documentation Template
NRS 717, 718 & 719

Sphere of Impact (Information must also be entered into Typhon)
Choose 1 only of the 3 Spheres.

_____ Patient Direct Care

_____Nurse and Nursing Practice

_____ Organizations/Systems

Role of the CNS Encounter (May chose more than 1)

_____ Educator

_____ Mentor

_____ Consultant

_____ Project Management/Quality Improvement

_____Program Evaluation/Outcome Measures

_____Technology Management

_____ Advocacy

Identify 1-3 CNS competencies within the Sphere of Impact specific to the Clinical Encounter (These must reflect the above role of the CNS).

Wellness or Illness encounter: ___Wellness   ____Illness

Topics of Discussion

1. Present a brief description of the learning opportunity
         a.   Brief description of clinical encounter related to the sphere and role chosen above.
2. What assessment tools, theories, guidelines, research etc. was used to guide plan of care or activity (cite using scholarly resources).
3. Describe what you learned from the activity. How did this experience affect your development as an advanced practice nurse?

CNS Student Competency Evaluation –Midterm & Final Evaluation
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Date of Evaluation:_____

Student Name:_____

Name of Evaluator:_____ Evaluator's Role:_____

Rating Scale:
1=Emerging-The student demonstrates an **initial understanding** of the concepts and competencies relevant to the expected learning
2=Developing-The student develops a **partial understanding** of the concepts and competencies relevant to the expected learning.
3=Proficient-The student develops a **complete understanding** of the concepts and competencies relevant to the expected learning.
4=Extending-The student demonstrates a **sophisticated understanding** of the concepts and competencies relevant to the expected learning.
NO = Not observed or not applicable in this setting or not opportunity to perform skill.

Please check the rating that best describes the student's ability in each area: (It is recognized that the student is a learner student and thus will not necessarily excel in every area. A realistic rating benefits the student by assisting them to determine areas to be further developed.)

	1	2	3	4	NO
P.1. Uses relationship-building communication to promote health and wellness, healing, self-care, and or peaceful end-of-life.					
P.2. Conducts a comprehensive health assessment in diverse care settings including psychosocial, functional, physical, and environmental factors					
P.3. Synthesizes assessment findings using advanced knowledge, expertise, critical thinking, and clinical judgment to formulate differential diagnoses.					
P.4. Designs evidenced-based, cost effective interventions, including advanced nursing therapies to meet the multifaceted needs of complex patients.					
	1	2	3	4	NO
P.5. Implements customized evidenced-based advanced nursing interventions including the provision of direct patient care.					
P.6. Prescribes medications, therapeutics, diagnostic studies, equipment, and procedures to manage the health issues of patients. *If applicable to clinical site*					
P.7. Designs and employs educational strategies that consider readiness to learn, individual preferences, and other social determinants of health.					
P.8. Uses advanced communication skills in complex situations and difficult conversations.					
P.9. Provides expert consultation based on broad range of theories and evidence for patients with complex health care needs.					
P.10. Provides education and coaching to patients with complex learning needs and atypical responses.					
P.11. Evaluates impact of nursing interventions on patients' aggregate outcomes using a scientific approach.					

	1	2	3	4	NO
P.12. Facilitates or participates in planning coordinated care and transitions in collaboration with the patient and inter-professional team.					
P.13. Facilitates patient and family understanding of the risks, benefits, and outcomes of proposed healthcare regimes to promote shared decision-making.					
P.14. Facilitates or supports resolution of ethical conflicts in complex patient care situations.					
P.15. Analyzes the ethical impact of scientific advances, cost, clinical effectiveness on patient and family values and preferences.					
P.16. Advocates for patient's preferences and rights.					
	1	2	3	4	NO
N.1. Provides expert specialty consultation to nurses related to complex patient care needs.					
N.2. Promotes interventions that prevent the impact of implicit bias on relationship building and outcomes.					
	1	2	3	4	NO
N.3. Advocates for nurses to practice to the full extent of their role in the delivery of health care.					
N.4. Facilitates efforts to resolve ethical conflict and moral distress experienced by nurses and nursing staff.					
N.5. Fosters a healthy work environment by exhibiting positive regard, conveying mutual respect, and acknowledging the contributions of others.					
N.6. Employs conflict management and negotiation skills to promote healthy a work environment.					
N.7. Assesses the nursing practice environment and processes for improvement opportunities.					
N.8. Uses evidence-based knowledge as a foundation for nursing practice to achieve optimal nurse-sensitive outcomes.					
N.9. Mentors nurses and nursing staff in using evidence-based practice principles.					
N.10. Leads nurses in the process of planning, implementing, and evaluating change considering intended and unintended consequences.					
N.11. Participates in evaluating the outcomes of nursing practice using methods that provide valid data.					
N.12. Facilitates opportunities for nurses, students, and other staff to acquire new knowledge and skills that foster professional development.					
N.13. Engages nurses in reflective practice activities that promote self-awareness and invite peer feedback to improve the practice of nursing.					
N.14. Mentors nurses to analyze legislative, regulatory, and fiscal policies that impact nursing practice and patient outcomes.					
	1	2	3	4	NO
O.1. Cultivates a practice environment in which mutual respect, communication, and collaboration contribute to safe, quality outcomes.					
	1	2	3	4	NO
O.2. Uses leadership, team building, negotiation, collaboration, and conflict resolution skills to build partnerships within and across systems and / or communities.					

0.3. Consults with health care team members to integrate the needs, preferences, and strengths of a population into the health care plan to optimize health outcomes and patient experience within a health care system.				
O.4. Leads and or participates in systematic quality improvement and safety initiatives based on precise problem /etiology identification, gap analysis, and research opportunities.				
0.5 Provides leadership to the interprofessional team in identifying, developing, implementing, and evaluating evidenced-based practice and research opportunities.				
O.6. Partners with research-focused, doctorate-prepared (e.g. PhD) colleagues to translate, conduct, and disseminate research that addresses gaps and improves clinical knowledge and practice.				
O.7. Leads and participates in the process of selecting, integrating, managing, and evaluating technology and products to promote safety, quality, efficiency, and optimal health outcomes.				
O.8. Leads and or facilitates change efforts in response to organizational and or community needs in a dynamic health environment.				
O.9. Evaluates system level interventions, programs, and outcomes based in the analysis of information from relevant sources.				
O.10. Demonstrates stewardship of human and fiscal resources in decision-making.				
O.11. Demonstrates CNS practice and fiscal outcomes to internal stakeholders and to the public at large.				
O.12. Promotes nursing' unique contributions toward advancing health to stakeholders (e.g. the organization, the community, the public, and policy makers).				
O.13. Advocates for equitable health care by participating in professional organizations and public policy activation.				
O.14. Advocates for ethical principles in protecting the dignity, uniqueness, and safety of all.				

Additional Comments:

Evaluator Signature:_____ Date:_____

Preceptor Evaluation of Nursing Practicum and Advanced Practice Clinical Student
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive

Madison, WI 53711

Preceptor Name (Evaluator): _____

Agency: _____

Student Name: _____
Date: _____

Philosophy: The Preceptor acts as a teacher and mentor to the student during Practicum (NRS735) and CNS (NRS 717-719) experiences. It is important for the student to receive feedback on their performance in the practicum experience. This information provides a mechanism of dialogue between Instructor of Record, Student and Preceptor.

Instructions to Preceptor:
- Please evaluate your student in terms of meeting AACN MSN Essentials and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment. If no relevant opportunity was available at the setting to observe the student's meeting of the Essential, please mark the box labeled N/A.
- This evaluation can be done at mid-semester, and **is required** at the conclusion of the semester. The form is to be reported to the student and Instructor of Record (the Instructor of Record will then place it in the student clinical file [Typhon]). The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort.
- An additional evaluation form, **Preceptor Evaluation of Student (CNS)** is aligned to the specific competencies expected for the practice role, and required documentation for all CNS Students each semester of a clinical rotation.

MSN Essential	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Recognizes the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.							
Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision making, effective working relationships, and a systems-perspective.							
Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.							
Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.							
Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.							
Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.							
Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care for individuals and populations.							

Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.						
Recognizes that nursing practice, at the master's-level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences, as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.						

Additional comments:

_____   _____
Preceptor Signature   Date

PMHNP Advanced Practice Clinical Supplemental Handbook

NRS 714 COURSE BACKGROUND

NRS 714 is the first clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Master of Science in Nursing Psychiatric Mental Health Nurse Practitioner (PMHNP) concentration. During their first rotation, students focus on practicing and refining clinical history taking, psychiatric assessment skills, and comprehensive treatment planning in patients across the lifespan. Students develop proficiency in presenting and documenting concise and accurate patient histories and assessment findings. Emphasis is placed on early diagnostic reasoning whereby students begin to develop differential diagnoses and formulate the plan of care. Students are required to complete a minimum of 250 hours of supervised clinical practice in this course with a psychiatric nurse practitioner or psychiatrist.

NRS 715 COURSE BACKGROUND

NRS 7151s the second clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Psychiatric Mental Health Nurse Practitioner student. The course focuses on the practice and refinement of clinical history taking and assessment skills in psychiatric setting under the supervision and guidance of a clinical preceptor. Students perform age-appropriate, comprehensive and focused psychiatric evaluation in patients across the lifespan. Students continue to gain proficiency with presenting concise and accurate patient histories and exam findings to their preceptors. Additionally, students work independently on diagnostic reasoning skills to develop differential diagnoses and formulate the plan of care for their preceptors' review. More emphasis is placed on patient education with a focus on anticipatory guidance and prevention. Students are required to complete a minimum of 250 hours of supervised clinical practice with a psychiatric nurse practitioner or psychiatrist.

NRS 716 COURSE BACKGROUND

NRS 716 is the third clinical rotation in a progressive sequence of Advanced Practice Clinical courses for the Psychiatric Mental Health Nurse Practitioner student. The course focuses on the diagnosis and management of common acute and chronic mental health problems in patients across the lifespan. Students are expected to gain proficiency with performing comprehensive psychiatric evaluations and follow-up focused assessments, developing differential diagnoses, and prescribing a plan of care for each patient. Students present each patient and the management plan to their preceptors for review. Emphasis is placed on professional collaboration and interdisciplinary consultation with other health professionals, teaching patients and families, and using evidence-based practice to prescribe and evaluate therapeutic interventions. Students must complete a minimum of 250 hours or the hours needed for completion of the 750 total hours of supervised clinical practice in this course.

Note: *During the Advanced Practice Clinical courses (i.e. NRS 714, 715, 716), students will be required to perform simulation examinations in a live or virtual setting with your course instructor. In some instances, a follow-up simulation may also be required prior to completion of the course.*

ADVANCED PRACTICE CLINICAL COURSE OBJECTIVES

Upon successful completion of NRS 714, 7151and 716 the student will be able to:

1. Perform complete histories and psychiatric evaluations in a manner appropriate for the patient.
2. Differentiate normal and abnormal findings based on the psychiatric examination, history, laboratory findings, and other tests and procedures.
3. Develop a working diagnosis, differential diagnosis, or a problem list and a preliminary plan of care.
4. Identify and explain significant pathophysiology related to the patient's clinical problem.
5. Problem solve through evaluation of history and physical examination, usage of established criteria for management, and collaboration with preceptor on a plan of care.
6. Present and record findings in a concise, accurate, and organized manner.
7. Institute and provide continuity of care and interact with the patient to assure understanding of and compliance with the therapeutic regimen.
8. Provide instruction and counseling regarding health promotion, patient teaching, discharge planning, family care, as appropriate, to the patient and/or family.
9. Consider the cost implications of care provided.
10. Recognize when to refer to another health care provider.
11. Coordinate care with other health professionals and agencies.
12. Demonstrate appropriate interpersonal relationships with staff, patients, families, and other health professionals.

PATIENT ENCOUNTERS

An "Encounter" is an interaction where the PMHNP student addresses a patient's specific clinical problem (a patient may present with multiple clinical problems and thus a PMHNP student may have more than one clinical problem with a single patient). Encounters offer the PMHNP student the opportunity to practice and demonstrate proficiency in meeting the Course Objectives. With each advanced practice clinical course, the goal is for a student to see the broadest variety of diagnosis in their

rotation. With that being said, depending on the preceptor and clinical population, you may not see some of the more sub-specialty diagnosis. Encounters for each clinical rotation that fall under each of the following clinical problem categories:

Psychiatric Evaluation: including, but not limited to performing routine screening tests

Schizophrenia and Related Disorders: including, but not limited to, schizophrenia, schizotypal personality disorder, delusional disorder, brief psychotic disorder, schizophreniform disorder, schizoaffective disorder, substance/medication-induced psychotic disorder, psychotic disorder due to another medical condition, catatonia

Bipolar and Related Disorders: including, but not limited to bipolar 1 disorder, bipolar 2 disorder, cyclothymic disorder, substance/medication-induced bipolar and related disorder, Other specified bipolar and related disorder

Major Depression and Related Disorders: including, but not limited to DMDD, MDD, PDD, PMDD, substance-medication-induced depressive disorder, depressive disorder due to another medical condition, unspecified depressive disorder

Anxiety and Related Disorders: including, but not limited to Separation /anxiety Disorder, Selective Mutism, specific phobia, social anxiety disorder, panic disorder, agoraphobia, generalized anxiety disorder, substance/medication-induced anxiety disorder, unspecified anxiety disorder

OCD and Related Disorders: including, but not limited to OCD, body dysmorphic disorder, hoarding disorder, trichotillomania, excoriation disorder

Trauma and Stress Related Disorders: including, but not limited to Reactive attachment disorder, disinhibited social engagement disorder, PTSD, acute stress disorder, adjustment disorders

Substance Use and Addiction Related Disorders: including, but not limited to Alcohol-related disorders, cannabis-related disorders, hallucinogen-related disorders, inhalant-related disorders, opioid-related disorders, sedative, hypnotic, or anxiolytic-related disorders, stimulant-related disorders, tobacco-related disorders

Feeding and Eating Related Disorders: including, but not limited to Pica, rumination disorder, avoidant/restrictive food intake disorder, anorexia nervosa, bulimia nervosa, binge-eating disorder

Personality Disorders: including, but not limited to paranoid personality, schizoid personality, schizotypal personality, antisocial personality, borderline personality, histrionic personality, narcissistic personality, avoidant personality, dependent personality, obsessive-compulsive personality

Sleep-wake and Related Disorders: including, but not limited to to insomnia disorder, hypersomnolence disorder, narcolepsy, sleep apneas, sleep-related hypoventilation, circadian rhythm sleep-wake

Dissociative and Related Disorders: Dissociative identity disorder, dissociative amnesia, depersonalization/derealization disorder

Somatic Symptom and Related Disorders: Somatic symptom disorder, illness anxiety disorder, conversion disorder (functional neurological symptom disorder) , Factitious Disorder

Elimination Disorders: Enuresis, encopresis

Gender and Related Disorders: gender dysphoria

Impulse-Control and Conduct Disorders: ODD, conduct disorder, pyromania, intermittent explosive disorder, kleptomania

Paraphilic Disorders: Voyeuristic disorder, exhibitionist disorder, frotteuristic disorder, sexual masochism disorder, sexual sadistic disorder, pedophilic disorder

Neurocognitive and Related Disorders: Delirium, major and mild neurocognitive disorders, traumatic brain injuries

Neurodevelopmental Disorders: Intellectual Disability, Communication Disorders, Autism spectrum disorders, ADHD, Specific Learning Disorder, Motor Disorders, Tic Disorder, etc.

Medication-Induced Movement Disorders and Other Adverse Effects of Medication: Neuroleptic-induced Parkinsonism, NMS, Medication-Induced Acute Dystonia, Medication-induced acute akathisia, Tardive dyskinesia, tardive dystonia, tardive akathisia, antidepressant discontinuation syndrome

LEVEL OF RESPONSIBILITY (LoR)

Each Encounter is to be entered into the Typhon Patient Log Record. The student must also designate their Level of Responsibility (LoR) during the Encounter. There are four LoR designations:

Level 1: Observation Only- PMHNP student observes provider.

Level 2: Major Consultation-Preceptor rechecks almost all of the PMHNP student's patient history-taking and/or psychiatric examination; the preceptor provides most of the assessment and plan. LoR 2 is common for students very early in their clinical rotations or with very complex/high-risk patients.

Level 3: Dual Responsibility-The preceptor entrusts the PMHNP student with 50% of the responsibility for the patient. LoR is often utilized for beginning students or when patients have complex problems.

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

All LoRs count toward clinical time toward the 750-hour requirement, however, only patient Encounters at LoR 2-4 count toward meeting the clinical requirements of an Encounter (i.e., purely observing the preceptor handle the Encounter precludes

the PMHNP student from counting the Encounter as one of the five required Encounters for that clinical problem category). The following provides guidelines for determining if an Encounter counts toward meeting clinical requirements:

1. The Encounter must be diagnosis-specific for the clinical requirement counted (e.g., if the clinical problem is generalized anxiety disorder, the diagnosis must state "generalized anxiety disorder" rather than "rule out generalized anxiety" or "generalized anxiety disorder vs. Social anxiety disorder").

In addition, only clinical problems addressed by the PMHNP student should be recorded within each Encounter, even though the patient may have additional problems on their problem list. If they were not addressed during the visit, it should not be recorded. All problems addressed by the student should be recorded each time a patient is seen. Typhon Patient Log Records are reviewed on a weekly basis by the Instructor of Record. Students must document their clinical time and clinical requirements (Encounters) on a weekly basis on the *Clinical Hours Log* and provide a copy to the Preceptor and Instructor of Record. Failure to appropriately log clinical hours will result in not progressing to the next clinical rotation. This process of calculating clinical hours and Encounters for preceptor approval will assure both the Instructor of Record and Preceptor that the student is making timely progress.

Clinical Hours and Encounters Log (PMHNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

LEVEL OF RESPONSIBILITY (LoR)

Each Encounter is to be entered into the Typhon Patient Log Record. The student must also designate their Level of Responsibility (LoR) during the Encounter. There are four LoR designations:
Level 1: Observation Only- PMHNP student observes provider.

Level 2: Major Consultation-Preceptor rechecks almost all of the PMHNP student's patient history-taking and/or psychiatric examination; the preceptor provides most of the assessment and plan. LoR 2 is common for students very early in their clinical rotations or with very complex/high-risk patients.

Level 3: Dual Responsibility-The preceptor entrusts the PMHNP student with 50% of the responsibility for the patient. LoR is often utilized for beginning students or when patients have complex problems.

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

Encounter	LoR
DIAGNOSES	
Schizophrenia and Related Disorders: including, but not limited to, schizophrenia, schizotypal personality disorder, delusional disorder, brief psychotic disorder, schizophreniform disorder, schizoaffective disorder, substance/medication-induced psychotic disorder, psychotic disorder due to another medical condition, catatonia	
Bipolar and Related Disorders: including, but not limited to Bipolar 1 disorder, bipolar 2 disorder, cyclothymic disorder, substance/medication-induced bipolar and related disorder, Other specified bipolar and related disorder	
Major Depression and Related Disorders: including, but not limited to DMDD, MDD, PDD, PMDD, substance-medication-induced depressive disorder, depressive disorder due to another medical condition, unspecified depressive disorder	
Anxiety and Related Disorders: including, but not limited to Separation /anxiety Disorder, Selective Mutism, specific phobia, social anxiety disorder, panic disorder, agoraphobia, generalized anxiety disorder, substance/medication-induced anxiety disorder, unspecified anxiety disorder	
OCD and Related Disorders: including, but not limited to OCD, body dysmorphic disorder, hoarding disorder, trichotillomania, excoriation disorder	

Trauma and Stress Related Disorders: including, but not limited to Reactive attachment disorder, disinhibited social engagement disorder, PTSD, acute stress disorder, adjustment disorders	
Substance Use and Addiction Related Disorders: including, but not limited to Alcohol-related disorders, cannabis-related disorders, hallucinogen-related disorders, inhalant-related disorders, opioid-related disorders, sedative, hypnotic, or anxiolytic-related disorders, stimulant-related disorders, tobacco-related disorders	
Feeding and Eating Related Disorders: including, but not limited to Pica, rumination disorder, avoidant/restrictive food intake disorder, anorexia nervosa, bulimia nervosa, binge-eating disorder	
Personality Disorders: including, but not limited to paranoid personality, schizoid personality, schizotypal personality, antisocial personality, borderline personality, histrionic personality, narcissistic personality, avoidant personality, dependent personality, obsessive-compulsive personality	
Sleep-wake and Related Disorders: including, but not limited to to insomnia disorder, hypersomnolence disorder, narcolepsy, sleep apneas, sleep-related hypoventilation, circadian rhythm sleep-wake	
Dissociative and Related Disorders: Dissociative identity disorder, dissociative amnesia, depersonalization/derealization disorder	
Somatic Symptom and Related Disorders: Somatic symptom disorder, illness anxiety disorder, conversion disorder (functional neurological symptom disorder) , Factitious Disorder	
Elimination Disorders: Enuresis, encopresis	
Gender and Related Disorders: gender dysphoria	
Impulse-Control and Conduct Disorders: ODD, conduct disorder, pyromania, intermittent explosive disorder, kleptomania	
Paraphilic Disorders: Voyeuristic disorder, exhibitionist disorder, frotteuristic disorder, sexual masochism disorder, sexual sadistic disorder, pedophilic disorder	
Neurocognitive and Related Disorders: Delirium, major and mild neurocognitive disorders, traumatic brain injuries	
Neurodevelopmental Disorders: Intellectual Disability, Communication Disorders, Autism spectrum disorders,	

ADHD, Specific Learning Disorder, Motor Disorders, Tic Disorder, etc.	
Medication-Induced Movement Disorders and Other Adverse Effects of Medication: Neuroleptic-induced Parkinsonism, NMS, Medication-Induced Acute Dystonia, Medication-induced acute akathisia, Tardive dyskinesia, tardive dystonia, tardive akathisia, antidepressant discontinuation syndrome	
PROCEDURES	
Psychiatric Interview	
Record Review	
Interprofessional Consultation	
Complete Mental Status Examination	
Patient Education	
Medication Review	
Medication Adjustment	
Lab Review	
DIAGNOSTICS	
PHQ9 or other depression screeners (list)	
GAD7 or other anxiety screeners (list)	
Vanderbilts for ADHD	
SLUMS	
Use of Adult ADHD Screener	
Columbia Suicide Severity Rating Scale	
AIMS	

ACES	

Preceptor Evaluation of Student (PMHNP)
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Student Name:_____

Agency:_____

Preceptor Name (evaluator): _____

Date:_____

Advanced Practice Clinical Course (Circle One): NRS 714 NRS 715 NRS 716

Students will be evaluated on their self-directed achievement of the following course objectives (CO) mid-way through the clinical experience, and again at the conclusion of the clinical experience:

1 = Considerable guidance needed
2 = Moderate guidance needed
3 = Self-directed, minimal guidance needed
N/A = Not applicable to this clinical situation, or unable to evaluate

	1	2	3	N/A	
DATA BASE					
Obtains and accurately documents appropriate health history					
Performs and accurately documents appropriate comprehensive or focused physical examination					
Synthesizes subjective and objective data to formulate an appropriate list of differential diagnoses					
Orders, performs, and interprets screening and diagnostic procedures and tests					
Documents appropriate findings in accordance with legal and professional Standards					
Distinguishes and prioritizes patient care between immediate needs and less immediate needs.					
Identifies health and psychosocial risk factors					
Establishes therapeutic rapport with patients.					
THERAPEUTIC REGIMENS					
Provides care that is nonjudgmental and sensitive to the client's needs and culture.					
Selects appropriate management regimen.					
Selects appropriate medications					
Orders and interprets screening and diagnostic procedures and tests					

appropriately.				
Performs procedures competently				
Initiates health maintenance therapy such as nutrition, skin care, OT, and PT, as appropriate				
Makes appropriate referrals/consultation				
Initiates health teaching to promote, maintain, or restore health.				
EVALUATION				
Evaluates results of therapeutic efforts and continues and/or modifies therapeutic regimen as required.				
Documents concise, relevant, and complete data in accordance with legal and professional standards.				
NP ROLE ASPECTS				
Collaborates and consults with members of the health care team effectively				
Communicates client case concisely and in an organized manner when collaborating with preceptor and other members of the health care team				
Assumes accountability for NP practice				
Legally protects self and patients in the delivery of health care and in problem-oriented medical record keeping.				
Maintains ethical standards				
Assumes responsibility for defining NP role for patients, physicians, nurses, and other health team members.				
Functions appropriately within NP scope of practice				
Utilizes preceptor consultation appropriately.				
Integrates current research findings and evidence-based guidelines into clinical practice				
Engages in self-evaluation to identify areas for improvement				

Seeks and selects learning experiences to increase skills and improve areas of weakness					
OVERALL: I would rate this student's performance:					

Adapted from: NONPF's Preceptor Portal Appendix M, Preceptor Evaluation of the Student, 2023
Additional Comments:

Additional Comments:

_____ _____
Student Signature   Date

_____ _____
Preceptor Signature   Date

_____ _____
Instructor of Record Signature   Date

Student Evaluation of Preceptor
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Philosophy: The Preceptor acts as a teacher and mentor to the Student in Practicum, Advanced Practice Clinical, or Residency experiences. It is important for the Preceptor to receive feedback on the execution of their role. This information can also assist course instructors in matching future students with Preceptors, and provides a mechanism of dialogue between Instructor of Record, Student and Preceptor.

Instructions to Student:
- Please evaluate the following statements about your Preceptor and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with the School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Preceptor* will assist the Instructor of Record in determining matches for future student placement.

The Clinical Preceptor:	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Is available.							
Demonstrates an understanding of the APRN role.							
Guides student to build on their strengths and knowledge.							
Serves as a role model.							
Demonstrates good effective rapport with patients and team.							
Encourages student to assume increasing responsibility during the clinical rotation.							
Provides immediate and adequate feedback.							
Leads students through decision-making rather than giving own impressions.							
Reviews and signs each clinic/hospital note.							
Offers constructive comments about documentations.							
Encourages questions.							
Thoughtfully reviews differential diagnosis with student.							
Discusses management plans.							
Communicates clinical and systems knowledge well.							
Collaborates with other members of the health care team.							
Suggests and provides additional learning experiences.							
Reviews evaluations with student and provides immediate and constructive feedback.							
I would recommend this preceptor to another student.							

Additional comments:

_____   _____
Student Signature   Date

Student Evaluation of Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Student Name (evaluator): _____ Date: _____

Instructions to Student:
- Please evaluate the following statements about your clinical site and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Clinical Site* assists the Instructor of Record in determining matches for future student placement.

	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Was adequate orientation to the clinical site provided?							
Is adequate space provided?							
Does facility provide a safe environment for clinical practice?							
Is adequate time given to see clients?							
Are there sufficient numbers of clients?							
Does the range of clients served match the student's scope of practice?							
Are students given the opportunity to follow-up with clients and/or pro interest?							
Are clients' records (e.g., chart, test results, etc.) accessible to students?							
Is support staff appropriately helpful to student?							
Are other disciplines utilized in client care?							
I would recommend this clinical site to other students							

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date

Instructor of Record/Site Evaluator Evaluation of Clinical Site
Henry Predolin School of Nursing
Edgewood College
1000 Edgewood College Drive
Madison, WI 53711

Preceptor Name: _____ Agency: _____

Evaluator Name/Role: _____ Date: _____

Instructions to Student:
- Please evaluate the following statements about your clinical site and indicate your level of agreement by checking the appropriate rating boxes (1= strongly disagree through 5 = strongly agree). If you assign a score of 3 or below, please include a comment.
- This evaluation can be done at mid-semester, and *is required* at the conclusion of the semester. The form is to be reported to the Instructor of Record who will then file it with the School of Nursing. The student and Instructor of Record will determine the communication plan with the Preceptor, based on student comfort. The *Student Evaluation of Clinical Site* assists the Instructor of Record in determining matches for future student placement.

	1	2	3	4	5	NA	Comments / Opportunities for Improvement
Was adequate orientation to the clinical site provided?							
Is adequate space provided?							
Does facility provide a safe environment for clinical practice?							
Is adequate time given to see clients?							
Are there sufficient numbers of clients?							
Does the range of clients served match the student's scope of practice?							
Are students given the opportunity to follow-up with clients and/or problems of interest?							
Are clients' records (e.g., chart, test results, etc.) accessible to students?							
Is support staff appropriately helpful to student?							
Are other disciplines utilized in client care?							
I would recommend this clinical site to other students							

Additional comments:

_____ _____
Student Signature   Date

_____ _____
Instructor of Record Signature   Date