

SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE

School of Nursing

Alumni Hall
Edwardsville, IL 62026-1066

STUDENT HANDBOOK

GRADUATE PROGRAM IN NURSING

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www.siu.edu/nursing

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

Academic Year 2014 – 2015

*"PREPARING NURSING LEADERS
FOR THE 21ST CENTURY"*

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

Information can be obtained from the:

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

Phone: (202) 877-6791

Fax: (202) 877-8476

Website: www.aacn.nche.edu/accreditation

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

Information can be obtained from the:

Council on Accreditation of Nurse Anesthesia Programs (COA)
222 South Prospect Avenue
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Website: <http://www.aana.com/>

TABLE OF CONTENTS

INTRODUCTION	1
SECTION I: MISSION AND GOVERNANCE	
University Mission, Vision & Values	3
University Statement on Diversity.....	4
SIUE Long-Term Goals.....	4
SIUE Goals of Graduate Student Learning.....	5
School of Nursing Mission.....	5
School of Nursing Philosophy Statement	6
The Illinois Department of Financial and Professional Regulation: Statement Of Definition of Advanced Practice Nursing Functions	6
State of Missouri Nurse Practice Act.....	7
School of Nursing Organizational Chart	8
SECTION II: ADMINISTRATION, STAFF & FACULTY	
School of Nursing Contact Information.....	10
School of Nursing Administration and Staff	10
School of Nursing Faculty Office, Telephone and Email List	15
Graduate Faculty Research Interests & Expertise 2014-2015.....	16
SECTION III: STUDENT RESOURCES	
University Student Support Services & Resources: Contact Information	25
Financial Assistance	26
Online Tuition & Fee Billing.....	26
Assistance With Logging on to Blackboard or With Revision of Your Password	26
SECTION IV: GENERAL INFORMATION	
School of Nursing Overview	28
School of Nursing Website and E-Mail	28
Student Addresses Telephone Numbers & Emergency Information	29
Lab Coats and Patches.....	29
Name Badges	29
Parking	29
School Pins.....	30
Convocation & Commencement Ceremonies.....	30
Sigma Theta Tau International Nursing Honor Society.....	30
Phi Kappa Phi Honor Society	30
Student Participation on School of Nursing Committees	30
Student Participation on University-wide Committees	31
SECTION V: MASTER'S CURRICULUM	
Nursing Paradigm	33
Curricular Themes	33
Master's Student Outcomes	35

Master's Program Curriculum.....	36
Master's Nursing Core Content	36
Advanced Practice Core Content	36
Specialty Curriculum Content.....	36
Master's Program Courses.....	36
Core Courses.....	36
Advanced Practice Core Courses	36
Master's Nursing Specialization Courses	37
Nurse Anesthesia Full-time Progression	38
Family Nurse Practitioner Part-Time Progression.....	39
Health Care & Nursing Administration Part-time Progression (Proposed)	40
Nurse Educator Part-time Progression (Proposed).....	41
Post-Master's Certificate	42
Dual Specializations.....	42
Doctor of Nursing Practice Specialization (See Section XI)	42

SECTION VI: COURSE RELATED INFORMATION

Face to Face, Web Enhanced, Hybrid, and Online Course Formats	44
Hardware and Software Recommendations	44
Course Registration Process.....	45
Dropping Courses	45
Course Fees	45
Course Syllabi	46
Textbooks	46
Requesting Clinical Preceptors and Clinical Practicum Sites.....	46
Professional Liability Insurance	46
Grading Scale	47
Grade Information	47
Incomplete Grades.....	47
Independent Study.....	47
Written Work of Students	48
Master's Terminal Project Guidelines.....	48
Master's Electronic Portfolio, Final Course Synthesis Project, and Oral Presentation	48
Faculty Responsibilities.....	49
Student Responsibilities	49
Contents of Electronic Portfolio	50
Electronic Portfolio Evaluation of Reflections Rubric	51
Graduation Requirements	53
Final Approval for Graduation	53

SECTION VII: HEALTH & RELATED INFORMATION

Professional Nursing Requirements and Verification.....	55
Criminal Background Check.....	56
Drug Test	56
Immunization Tracker.....	56
University Health Service	59
Immunizations Not Covered Under CDC Guidelines.....	59
Immunization Exemptions	59

School of Nursing Background Checks of Students.....	60
Mandatory Drug Screening Policy.....	67

SECTION VIII: STANDARD PRECAUTIONS AND GUIDELINES FOR CLINICAL EXPERIENCES

Standard Precautions: Preventing Transmission of Infectious Agents.....	71
Student Responsibilities Related to Clinical Incident Guidelines	71
Guidelines for Personal Safety During Clinical Nursing Experiences.....	71

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

Statement for Academic Integrity	73
Academic Integrity Reporting, Investigating, and Decision Process for the Graduate and Undergraduate Programs.....	75
Academic Integrity Offenses and Sanctions	78
School of Nursing Professional Behavior Guidelines.....	81
Safety.....	81
Personal Behaviors.....	81
Disruptive Behavior.....	82
Consequences of Unprofessional Behavior.....	83
Student Rights and Responsibilities.....	85
Internal Graduate Student Grievance Procedure.....	85
Students' Right of Access to Records	86
Equal Opportunity and Affirmative Action.....	86
Americans With Disabilities Act (ADA)	86
School of Nursing Statement on Diversity	86
Policy for the Illicit Use of Controlled Substances, Prescribed Controlled Substances, and Over-the-counter Drugs	87
Policy	87
Drug Screening for Clinical Placement.....	87
Use of Prescribed and/or Over-the-Counter Drugs.....	88
Drug Screening for Cause.....	88
Drug Screening Documentation Procedure	89
School of Nursing Hearing Panel	89
Hearing Panel Procedure	90
Sanctions and/or Readmission.....	90
Appeal of the Decision	90
Re-Admission Drug Screening	91
Minimum Technical Standards Policy for Admission and Matriculation	91
Competencies and Performance Standards.....	91
Policy & Procedure	94
Technology and Internet Standards of Conduct	95
Purpose	95
Examples of Technology Use.....	95
Examples of Internet Use	95
Guidelines for Use of Technology and Internet in Classroom, Lab & Clinical Settings.....	96

Disciplinary Procedures and Sanctions for Inappropriate Use of Technology and Internet In the Classroom, Clinical, and Simulation Laboratory	97
Policy for the Use of Digital Media.....	98
Intellectual Property Information Process	98
University Retention Policy	99
School of Nursing Policy on Removal of a Student From School of Nursing Academic Program Based on Course Grades	99
Retention Policy Based Upon GPA	99
HIPAA Guidelines	100
Clinical Courses	100
Clinical Probation	101
Academic Intervention.....	102
Student Absence Policy	102
Requesting Accommodation for Short Term Leave of Absence for Disability/Pregnancy or Personal Reasons.....	102
Requesting a Long Term Leave of Absence.....	103
Graduate Re-admission Policy	103
Application for Re-admission.....	103
Transfer of Credits	104

SECTION X: NURSE ANESTHESIA SPECIALIZATION INFORMATION

Nurse Anesthesia Progression.....	106
Nurse Anesthesia DNP Progression (Beginning Summer 2015)	107
Nurse Anesthesia Faculty	108
Terminal Specialization Course Objectives	109
Academic Policies.....	112
Clinical Guidelines	113
Attendance Policy	115
Meetings	116
Nurse Anesthesia Practicum	116
Guidelines for Clinical Practicum	116
Clinical Practicum Experiences.....	117
Purpose	117
Objectives	117
Clinical Affiliation Criteria	118
Condition of Instruction and Supervised Experiences	119
Patient Safety	119
Specific Practicum Guidelines.....	120
Work Related Injuries.....	122
Absences as a Result of Illness	122
Guidelines for Call Experiences	122
Purpose	122
Objectives.....	123
Time Commitment	123
Clinical Affiliate Call Guidelines.....	123
Relationship to Students While Assigned to Clinical Practicum.....	124
Clinical Objectives – Specialty Rotations.....	125
Cardiothoracic Anesthesia	125

Pediatric Anesthesia	126
Obstetrical Anesthesia	128
Purpose	128
Overall Objectives	128
Specific Terminal Objectives	129
Clinical Evaluation of Students	130
Visits to Affiliations	130
Records	130
Expenses	131
Attire	131
Lockers	131
Evaluation Process	131
Student Evaluations	131
Faculty Evaluation.....	133
Program Evaluation.....	133
Tuition and Expenses.....	134
Records	135
Requirements for Graduation	136
Procedure for Writing the Certification Examination	136
Active Clinical Sites.....	137
Forms for Anesthesia Students	
Formal Daily Evaluation and Expectations for the Appropriate Level	
Nurse Anesthesia Clinical Evaluation Form	143
Level I Expectations	145
Level II Expectations	146
Level III Expectations.....	147
Level IV Expectations	148
Level V Expectations	149
Critical Incident Report.....	150
Unsatisfactory Performance Card	151
Commendation Card.....	152
American Association of Nurse Anesthesia (AANA) 2013 Record of Clinical Experiences.....	154

SECTION XI: DOCTORATE OF NURSING PRACTICE SPECIALIZATION INFORMATION

Doctor of Nursing Practice Program Introduction	156
Doctoral Student Outcomes	156
Graduate Student Policies	156
DNP Post-Master's Curriculum Plan	157
DNP Timeline for Important Milestones.....	158
Completion of DNP Program Requirements Checklist.....	159
DNP Final Project Guidelines.....	160
Introduction	160
Definition of DNP Final Project.....	160
Committee Selection and Composition.....	160
Links to Sample Titles and Abstracts of DNP Projects	161
Sample DNP Project Outline	162
Sample Title Page for Final Project.....	163
Guidelines for External Stakeholders	164
Table 1: Responsibilities of SIUE Graduate Program and Faculty, the DNP Student and	

the External Stakeholder	165
DNP Final Project Committee Form	166
DNP Final Project Site Information Form.....	167
Final Project Scope and Design Approval Form	169
Human Subjects Approval.....	170
Procedure for Submitting the Application for Approval of Project Involving Human Subjects	170
DNP Practicum	171
DNP Practicum Transfer Hours Form.....	173
DNP Practicum Hours Spreadsheet.....	174
DNP Electronic Portfolio	176
Purpose	176
Student Responsibilities	176
Faculty Responsibilities.....	176
Electronic Portfolio Content.....	176
DNP Comprehensive Examination.....	177
Request to Take the DNP Written Comprehensive Examination	181

SECTION XII: FORMS FOR ALL STUDENTS

Graduate Program Academic Improvement Plan	180
Clinical Site Preceptor Request Form	181
Graduate Student Request Form	184
Application for Graduation.....	186
Incomplete Form.....	187
Request for Short or Long Term Leave of Absence or Accommodation	190
Health Care Provided Medical Release to Return to Class or Clinical	191
Report of Injury	192
Health Insurance Validation Form 2013-2014 Academic Year	193
Influenza Vaccination Form.....	194

INTRODUCTION

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

The most recent version of general policies and standards for graduate students can be found by accessing the Internet: <http://www.siu.edu/policies/>. Important policies include the **Student Academic Code** (SIUE, 2010) online at <http://www.siu.edu/policies/3c2.shtml>, the **Student Conduct Code**, (SIUE, 2012) online at <http://www.siu.edu/policies/3c1.shtml>, and the **Student Grievance Code**, (SIUE, 1998), online at <http://www.siu.edu/policies/3c3.shtml>. These documents can also be obtained from the offices of the Vice Chancellor of Student Affairs, Provost and Vice Chancellor of Academic Affairs, the Graduate School, or Admissions and Records.

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

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The SIUE Annual Security and Fire Safety Report is available online at www.siu.edu/securityreport. The report contains campus safety and security information and crime statistics for the past three calendar years and fire safety policies and fire statistics for the previous calendar year. This report is published in compliance with Federal law, titled the "Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act" and the Higher Education Opportunity Act also known as the "Campus Fire Safety Right to Know." For those without computer access, a paper copy of the report may be obtained from the Office of the Vice Chancellor for Administration, Rendleman Hall, Room 2228, 618-650-2536.

POLICIES MAY BE ADDED, CHANGED, OR MODIFIED DURING THE ACADEMIC YEAR AND STUDENTS ARE NOTIFIED REGARDING ANY CHANGES VIA EMAIL. STUDENTS ARE RESPONSIBLE FOR BEING FAMILIAR WITH SCHOOL POLICIES AND MAINTAINING COMPLIANCE.

SECTION I.

MISSION AND GOVERNANCE

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

UNIVERSITY MISSION

Southern Illinois University Edwardsville is a student-centered educational community dedicated to communicating, expanding and integrating knowledge. In a spirit of collaboration enriched by diverse ideas, our comprehensive and unique array of undergraduate and graduate programs develops professionals, scholars and leaders who shape a changing world.

UNIVERSITY VISION

Southern Illinois University Edwardsville will achieve greater national and global recognition and academic prominence through innovative and interdisciplinary programs that empower individuals to achieve their full potential.

UNIVERSITY VALUES

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

Citizenship

- Social, civic and political responsibility--globally, nationally, locally, and within the University
- Active partnerships and a climate of collaboration and cooperation among students, faculty, staff, alumni and the larger community
- Sustainable practices in environmental, financial and social endeavors

Excellence

- High-quality learning within and beyond the classroom
- Continuous improvement and innovation
- Outstanding scholarship and public service

Inclusion

- A welcoming and supportive environment
- Openness to the rich diversity of humankind in all aspects of university life
- Respect for individuals, differences, and cultures
- Intellectual freedom and diversity of thought

Integrity

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

Wisdom

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

UNIVERSITY STATEMENT ON DIVERSITY

The SIUE Statement on Diversity reflects SIUE's commitment to recognizing and valuing the contributions of the breadth of humankind. This statement, adopted in April 2013, replaces an earlier version:

All societies and peoples have contributed to the rich mix of contemporary humanity. In order to achieve domestic and international peace, social justice and the development of full human potential, we must build on this diversity and inclusion.

- Southern Illinois University Edwardsville nurtures an open, respectful, and welcoming climate that facilitates learning and work. Each member of the University is responsible for contributing to such a campus environment.
- Southern Illinois University Edwardsville is committed to education that explores the historic significance of diversity in order to understand the present and to better enable our community to engage the future.
- Integral to this commitment, Southern Illinois University Edwardsville strives for a student body and a workforce that is both diverse and inclusive.

ACHIEVING THE VISION: SIUE LONG-TERM GOALS

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

Prepared and Committed Students – Recruit and engage a diverse student body ready to accept the rigorous challenges of higher education, to persist in academic study, and to become lifelong learners.

Innovative High Quality Programs – Develop and enhance curricular and co-curricular programs to fully support learning and degree completion.

Dedicated Faculty and Staff—Recruit, support, and retain a highly committed and diverse faculty and staff who continually strive for excellence by promoting student learning, producing significant scholarship, and serving multiple constituencies.

Supportive Campus Community—Foster an inclusive university community characterized by integrity, civility, shared governance and openness to and respect for different backgrounds, cultures, and perspectives.

Outreach and Partnerships – Develop and strengthen collaborative relationships to effect positive changes in the university, region, nation and world.

Physical and Financial Sustainability—Develop, maintain and protect the University's assets by practicing and promoting economic, environmental, and social sustainability campus-wide.

SIUE GOALS OF GRADUATE STUDENT LEARNING

The purpose of graduate education at SIUE is to provide students with the intellectual ability to understand, create, integrate, and apply sophisticated discipline-specific knowledge. Because knowledge is dynamic, students are additionally expected to learn the intellectual system of the discipline, that is the discipline's system of thinking, knowing, and acting, in order to acquire and evaluate future knowledge. Toward those ends, the Graduate Council adopts the following goals for graduate student learning.

DEMONSTRATE BREADTH AND DEPTH OF KNOWLEDGE IN THE DISCIPLINE

Graduate students should understand the current and historical theories, concepts, and models of the discipline. They should possess the ability to access and evaluate the literature of the discipline and understand the major issues in the current state of knowledge. In addition to knowing the specific content of the discipline, students should be able to understand and appropriately use the methods and techniques of advancing knowledge in the field of study.

EFFECTIVELY COMMUNICATE KNOWLEDGE IN THE DISCIPLINE

Graduate students should possess the ability to write and speak about the current issues of the discipline to peers, practitioners, and the public. They should be able to articulate and demonstrate knowledge of the discipline and write and present scholarship to professionals.

DEMONSTRATE AN ABILITY FOR ANALYTICAL THINKING IN THE DISCIPLINE

Graduate students should be able to identify and understand critical issues in the discipline. They should possess the ability to challenge and evaluate information, as well as synthesize and integrate knowledge in the discipline.

EXHIBIT THE BEST PRACTICES, VALUES, AND ETHICS OF THE PROFESSION

Graduate students should understand and exhibit the professional standards for responsible conduct of research in the discipline and understand the values and ethics of practicing the profession in society.

APPLY KNOWLEDGE OF THE DISCIPLINE

Graduate students should possess the ability to apply knowledge in the discipline to solve sophisticated problems and to interpret technical issues.

SCHOOL OF NURSING MISSION

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

Approved by Faculty 9/06

SCHOOL OF NURSING PHILOSOPHY STATEMENT

Nursing education provides an essential service to the community and to the students whom we welcome. In concert with the mission and vision of SIUE and the mission and goals of the School of Nursing, we the faculty, believe that preparing professional nurses is a unique vocation blending scholarship, teaching, learning and service. **We share our professional educations, experiences, and achievements to help provide students with a comprehensive and nurturing foundation from which to build their own nursing practice.**

We acknowledge that SIUE School of Nursing graduates will help shape and lead the future of health care. Therefore, the faculty diligently endeavors to model behaviors that will inspire students to champion human advocacy, diversity, and health promotion. Students will learn to provide care with passion, courage, compassion, competence, confidence, leadership, tolerance, dedication to the profession, and service to the community.

We also believe that mentorship characterizes complimentary and learner-centered relationships, from which faculty and students grow. Therefore, we freely share our passion for life-long learning beginning at the baccalaureate level, into the master's level, and through doctoral education.

Passed by FC on March 28, 2011

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

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

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

- (a) Advanced practice nursing by certified nurse practitioners, certified nurse anesthetists, certified nurse midwives, or clinical nurse specialists is based on knowledge and skills acquired throughout an advanced practice nurse's nursing education, training, and experience.
- (b) Practice as an advanced practice nurse means a scope of nursing practice, with or without compensation, and includes the registered nurse scope of practice.
- (c) The scope of practice of an advanced practice nurse includes, but is not limited to, each of the following:
 - (1) Advanced nursing patient assessment and diagnosis
 - (2) Ordering diagnostic and therapeutic tests and procedures, performing those tests and procedures when using health care equipment, and interpreting and using the results of diagnostic and therapeutic tests and procedures ordered by the advanced practice nurse or another health care professional.

- (3) Ordering treatments, ordering or applying appropriate medical devices, and using nursing medical, therapeutic, and corrective measures to treat illness and improve health status.
- (4) Providing palliative and end-of-life care.
- (5) Providing advanced counseling, patient education, health education, and patient advocacy.
- (6) Prescriptive authority as defined in Section 65-40 of this Act.
- (7) Delegating selected nursing activities or tasks to a licensed practical nurse, a registered professional nurse, or other personnel.

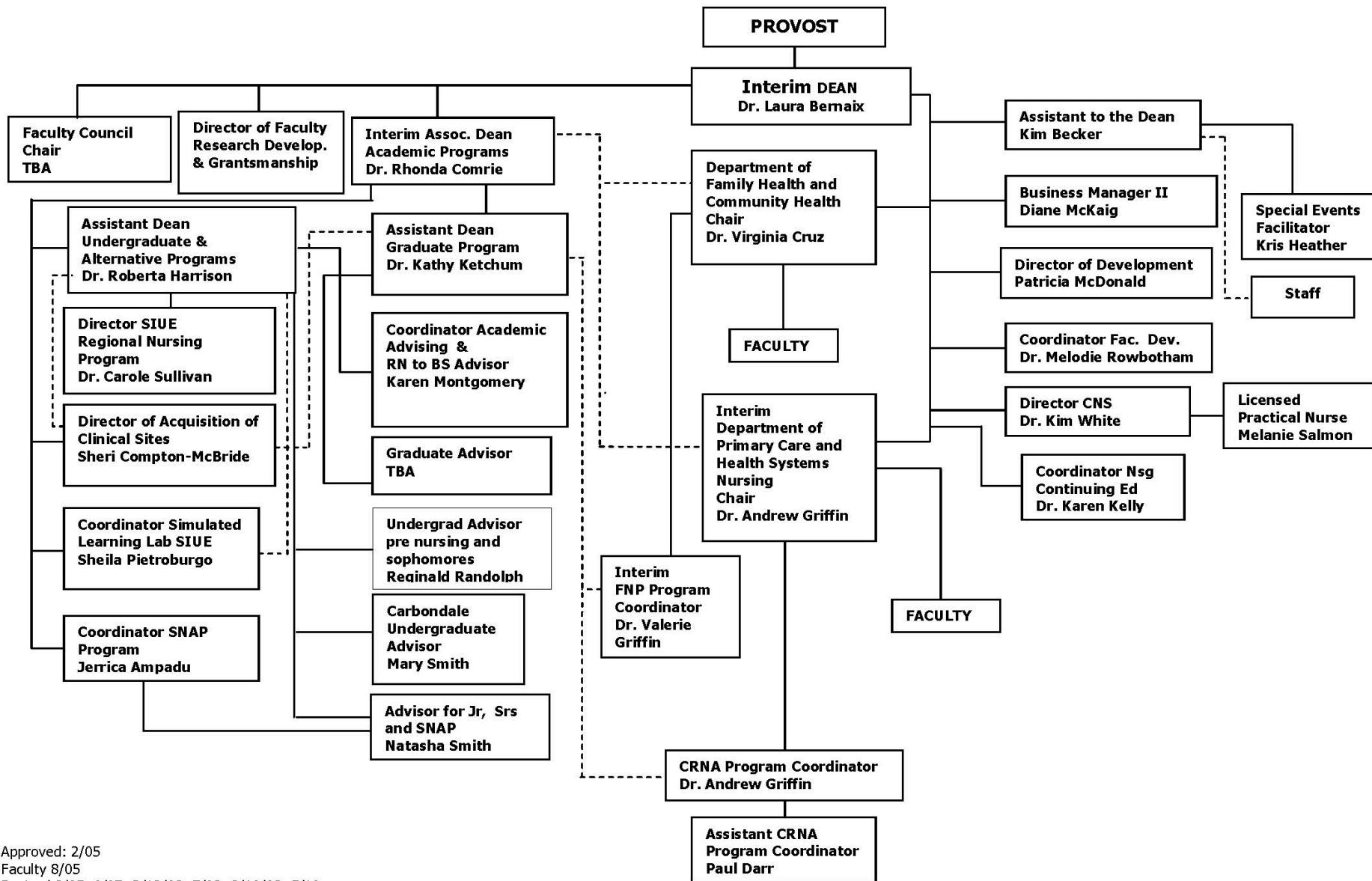
Source: Practice Act 95-639, eff. 10-5-07.

STATE OF MISSOURI NURSE PRACTICE ACT

The following website can be used to access the Nurse Practice Act for the state of Missouri:
<http://pr.mo.gov/boards/nursing/npa.pdf>.

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

SCHOOL OF NURSING ORGANIZATIONAL CHART



Approved: 2/05
 Faculty 8/05
 Revised 8/05; 9/07; 3/12/08; 7/08; 8/19/08; 5/10;
 6/11; 6/12; 9/13

SECTION II

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Edwardsville Fax - Administration	618 650-3854
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We Care Clinic:

East St. Louis Higher Education Center
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East St. Louis, IL 62201
Telephone: 618 482-6959
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Springfield Campus Address:

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

Office Support Specialist to the Director, SIUE Regional Nursing Program
TBA
SIUC Student Health Center
374 East Grand Avenue, MC 6740
Carbondale, IL 62901
618-453-3363
e-mail:

Faculty Office, Telephone & Email List

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

Room Number	Name	Phone	E-Mail
Graduate II Nursing Faculty			
2323	Alford, Linda	3998	lialfor@siue.edu
2327	Barron, Mary Lee	5986	mabarro@siue.edu
3335	Bell-Scriber, Marietta	3999	mbellsc@siue.edu
2109	Bernaix, Laura	3959	lbernai@siue.edu
3322	Boyd, Rita Arras	5031	rarras@siue.edu
2110	Comrie, Rhonda	3972	rcomrie@siue.edu
3334A	Durbin, Christine	5672	cdurbin@siue.edu
3335A	Gaehle, Kay	3976	kgaehle@siue.edu
2332A	Griffin, Andrew	2182	agriffi@siue.edu
2120	Harrison, Roberta	3934	roberha@siue.edu
2326	Kelly, Karen	3908	kkelly@siue.edu
2124	Ketchum, Kathy	3936	kketchu@siue.edu
2331A	Luebbert, Rebecca	3993	rluebbe@siue.edu
3334	Lyerla, Frank	5974	flyerla@siue.edu
2335B	Perez, Amelia	5317	aperez@siue.edu
2333	Popkess, Ann	3921	apopkes@siue.edu
2330	Riley, Marguerite	5836	mriley@siue.edu
3331	Rowbotham, Melodie	5319	mrowbot@siue.edu
TBA	Shelton, Ann	TBA	ashelto@siue.edu
2329	Yancey, Valerie	2588	vyancey@siue.edu
Graduate I Nursing Faculty			
2331B	Cruz, Virginia	3995	vcruz@siue.edu
3327	Griffin, Valerie	3392	vgriffi@siue.edu
2335A	Jenkins, Debra	3283	dejenki@siue.edu
3333	Jewell, Donna	5637	djewell@siue.edu
3332	Romkema, Lisa	3992	lromkem@siue.edu
EStL	White, Kim	482-6939	kiwhite@siue.edu
SIUC	Winters, Susan	453-4401	suwinte@siue.edu
Additional Faculty Teaching in the Graduate Program			
2336	Ampadu, Jerrica	3988	jerphil@siue.edu
2318	Behrhorst, Virginia	5873	vpetrof@siue.edu
2321b	Coats, Michon	5592	micoats@siue.edu
2135	Collier, Rebecca	5373	rcollie@siue.edu
2321A	Darr, Paul	5318	pdarr@siue.edu
2135	Droege, Jan	5373	jdroege@siue.edu
2321b	Ertel, Michelle	5320	mertel@siue.edu
3321	Furfaro, Terri	3980	tfurfar@siue.edu
2321B	Hamilton, Megan	5320	mehamil@siue.edu
2334	Kelly, Patricia	5676	pkelly@siue.edu
2308	Kennedy, Annette	3983	ankenne@siue.edu
2203	Pietroburgo, Sheila	2470	spietro@siue.edu
3321	Seabaugh, Dianne	3980	dseabau@siue.edu
3302	Sobczak, Bernadette	3922	lstelly@siue.edu
2321	Stein, Kevin	3926	kstein@siue.edu

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH PERMANENT GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Linda Alford, RN, MEd, DNP,FNP-BC	Clinical Assistant Professor	II	x3998 AH2323 lialfor@siue.edu	Family NP, Cardiac Risk Reduction, Nurse as Entrepreneur, Coding of E/M	Cardiac Risk Reduction, Nurse as Entrepreneur
Mary Lee Barron, PhD, ANP	Associate Professor	TBA	X5986 AH 2327 mabarro@siue.edu	Adult Nurse Practitioner	Adult Nurse Practitioner
Marietta Bell-Scriber, PhD, FNP	Associate Professor	II	X3999 AH3335 mbellsc@siue.edu	Family Nurse Practitioner, Nurse Admin.	Family Nurse Practitioner, Nurse Admin.
Laura Bernaix, RN, PhD	Interim Dean & Professor	II	x3959 AH2109 lbernai@siue.edu	Breast-Feeding Promotion, Maternal Behaviors, Teen Pregnancy Prevention, Maternal- Newborn Nursing, Parenting, Prenatal Blood Lead Testing	Research Design and Data Analysis, Education, Literature Review
Rita Arras Boyd, PhD, RN, MSN	Associate Professor Emerita	II	x3980 AH3321 rarras@siue.edu	Diabetes, Health Behavior, Health Promotion Disease Prevention	Interventions, Public Health, Health Promotion, Health Counseling
Rhonda Comrie, PhD, RN, AE-C	Associate Dean for Academic Programs & Associate Professor	II	x3972 AH2110 rcomrie@siue.edu	Nursing education, Asthma, Student Development, Hope, Ethics, Medical Surgical nursing	Education, Medical-Surgical, Qualitative Methods
Virginia Cruz, RN, PhD	Chair, FHCHN Department & Associate Professor	I	x3995 AH2331b vcruz@siue.edu	ADRD Family Caregivers, Older Adult-Depression, Long Term Care	Gerontological Nursing, Nursing Administration, Nursing Education

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH PERMANENT GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Christine Durbin, PhD, JD, RN	Associate Professor	II	x5672 AH3334A cdurbin@siue.edu	Health Law, Medical-Surgical Nursing	Advance directives, Electronic Health Record Usability.
Kay Gaehle, RN, PhD	Associate Professor	II	x3976 AH3335A kgaehle@siue.edu	Breast Cancer Detection - Women's Health, Medical Surgical, Cancer Survivorship	Medical Surgical, Nursing Education
Andrew Griffin, CRNA, MS, APN	Interim Chair PCHSN Department, Director CRNA Program & Assistant Professor	II	x2182 AH2332B agriffi@siue.edu	General Surgery, Vascular, OB	Nurse Anesthesia
Valerie Griffin, MSN, PNP-BC, FNP-BC	Coordinator, FNP Program & Assistant Professor	I	X3392 AH 3327 vgriffi@siue.edu	Childhood obesity/nutrition; Pediatric Primary Care; Developmental assessment of the pediatric patient	Childhood obesity/nutrition; Pediatric Primary Care; Developmental assessment of the pediatric patient
Roberta Harrison, PhD, RN, CRRN	Asst. Dean for Undergraduate Programs & Assistant Professor	II	x3934 AH 2120 roberha@siue.edu	Combined lifestyle interventions, diabetes, informatics	Rehabilitation, nursing administration, shared governance
Debra Jenkins, PhD, RN	Assistant Professor	TBA	X3283 AH2335A djenkin@siue.edu	Gerontology	Gerontology

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH PERMANENT GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Donna Jewell, PhD, RN, CCM	Clinical Assistant Professor	I	x5637 AH3333 djewell@siue.edu	Nursing care of the obese	Use of technology in nursing
Karen Kelly, EdD, RN, CNAAC, BC	Associate Professor & Continuing Ed. Coordinator	II	x3908 AH2326 kkelly@siue.edu	Autism, Nursing Administration, Professional Nursing Development	Nursing Autonomy, Nursing Administration, Continuing Education, Policy and Politics, Professional Development
Kathy Ketchum, RN, PhD	Asst. Dean for Graduate Programs & Associate Professor	II	x3936 AH2124 kketchu@siue.edu	Trauma patients and families, intravenous therapy and blood drawing, medication safety, nursing informatics; Emerging Educational Technologies	Research design, Statistics, Computer Technology, SPSS; Evidence-based practice
Rebecca Luebbert, PhD, PMHCNS-BC	Assistant Professor & Coordinator, RN-BS Program	II	x3993 AH 2331A rluebbe@siue.edu	psychiatric/ mental health nursing	human subject protection, informed consent, vulnerable populations
Frank Lyerla, PhD, RN	Associate Professor	II	x5974 AH 3334 flyerla@siue.edu	Nursing Informatics	Nursing Informatics
Amelia Perez, PhD, RN	Assistant Professor	II	X5317 AH 2335B aperez@siue.edu	Adult Medical-Surgical	Adult Medical-Surgical, Health behaviors, Acculturation, Health Literacy, Hypertension, Hispanics

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH PERMANENT GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Ann Popkess, RN PhD	Assistant Professor & Coordinator ABS Program	II	x3992 AH 3332 apopkes@siue.edu	Nursing Administration/Education	Nursing Education, Student Engagement, Active Learning Strategies, Quality Improvement and Safety Initiatives
Marguerite Riley, RN, PhD	Associate Professor	II	x5836 AH2330 mriley@siue.edu	Health Promotion, Curriculum Development, Breast & Prostrate Cancer, Chronic Pain, Professional Image	Medical-Surgical Nursing, Nursing Practice/Education
Lisa Romkema, PhD, CRNA	Assistant Professor	TBA	x3926 AH 2321 lromkem@siue.edu	Nurse Anesthesia	Nurse Anesthesia
Melodie Rowbotham, PhD, RN, CNE	Associate Professor	II	x5319 AH 3331 mrowbot@siue.edu	Nursing Education, Classroom Environment, Teaching Perspectives, Teacher and Student Self-efficacy.	Nursing Education, Classroom Environment, Teaching Perspectives, Teacher and Student Self-efficacy.
Ann Shelton, PhD, RN	Assistant Professor	II	x3283 AH2335a ashelto@siue.edu	Ethics, Informed Consent, Genetics & Genomics, Geriatrics	Ethics, Informed Consent, Genetics & Genomics, Geriatrics
Kim White, PhD, RN, CRRN	Director, We Care Clinic & Clinical Assistant Professor	I	x3495 AH3336 kiwhite@siue.edu	Community Health, Lead Poisoning; risk reduction behavior, perceptions of risk; Alzheimer's Disease & related dementias	Community Health, Orthopedic/ Neurological Rehabilitation, Public Health, Lead Poisoning, Health Risks

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH PERMANENT GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Susan Winters, PhD, RN	Assistant Professor	I	453-4401 SIUC suwinte@siue.edu	Medical-Surgical Nursing	Nursing Education
Valerie Yancey, RN, PhD, HPCN, HNC(A)	Associate Professor	II	x2588 AH2329 vyancey@siue.edu	Nursing Theory, Health Care Ethics, Holistic Nursing Palliative Care, Intensive Care Nursing, Death and Dying, Spirituality and Health; stress management and psychoneuroimmunology	End of Life Care; Palliative Care/Nursing Models for Care Delivery/Veteran Spiritual Care and Recovery from Trauma

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH TEMPORARY GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Jerrica Ampadu, PhD(c), MSN, RN	Instructor	Temp	x3988 AH2336 jerphil@siue.edu	Medical-Surgical Nursing	Nursing Practice
Virginia Behrhorst, APRN-C, MS	Clinical Instructor	Temp	x5873 AH2318 vpetrof@siue.edu	Nurse Practitioner Issues, Adult Health, Domestic Violence, Geriatrics, Women's Health	Primary Health, Adult Medical/ Surgical, Nurse Practitioner
Michon Coats					
Rebecca Collier, DNP, CRNA	Lecturer	Temp	217-545-7141 Springfield Bldg rcollie@siue.edu	Nurse Anesthesia	Nurse Anesthesia
Paul A. Darr, MSN, CRNA, APN, FAAPM	Instructor	Temp	x5318 AH2321 pdarr@siue.edu	Retrospective studies to outcome comparisons and CQI, Anesthesia	Anesthesia focused on outpatient, critical access rural anesthesia, pain management issues, simulation in anesthesia education
Jan Droege, MSN, CRNA, APN	Lecturer	Temp	x3926 AH2321 jdroege@siue.edu	Nurse Anesthesia	Nurse Anesthesia
Michelle Ertel, MSN, CRNA, APN	Lecturer	Temp	x5320 AH2321B mertel@siue.edu	Nurse Anesthesia	Nurse Anesthesia

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH TEMPORARY GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Terri Furfaro, DNP,	Lecturer	Temp	X3980 AH 3321 tfurfar@siue.edu	Family Nurse Practitioner	Family Nurse Practitioner
Megan Hamilton, MS, CRNA	Lecturer	Temp	X5320 AH2321B mehamil@siue.edu	Anesthesia	Anesthesia
Patricia Kelly, MSN, FNP-BC	Instructor	Temp	X5676 AH 2334 pkelly@siue.edu	Medical-Surgical Nursing	Adult Med-Surg.
Annette Kennedy, MSN. FNP	Instructor	Temp	X3983 AH2308 anenne@siue.edu	Nurse Practitioner	Nurse Practitioner
Sheila Pietroburgo, MSN, RN	Lab Coordinator & Instructor	Temp	X2470 AH2203 spietro@siue.edu	Medical-Surgical Simulation	Nursing Education
Dianne Seabaugh, MS,FNP-BC	Lecturer	Temp	X3980 AH3321 dseabau@siue.edu	Herbal Medicine	Herbal Medicine
Bernadette Sobczak,, RN, MSN, CPNP-PC	Instructor	Temp	x3922 AH 2302 bsobcza@siue.edu	Childhood obesity, physical activity and nutrition, stress and coping, and infertility	Pediatric Nurse Practitioner of sick and well children, and public health nursing especially immunizations and communicable disease.

SIUE SCHOOL OF NURSING 2014-2015 FACULTY RESEARCH INTERESTS AND EXPERTISE
FACULTY WITH TEMPORARY GRADUATE STATUS

Name, Credentials	Title	Graduate Status	Phone Ext. (650 Prefix) Main # 650-3956 Ofc Loc & Email	Area(s) of Clinical Research Expertise	Research Area(s) of Functional Expertise
Stein, Kevin, CRNA, MS, APN	Instructor	Temp	x5320 AH2321B kstein@siue.edu	Anesthesia	Nurse Anesthesia

SECTION III
STUDENT RESOURCES

University Student Support Services & Resources: Contact Information

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

Office	Contact Person	Building	Room #	Phone #
Quick Links for Current Students	Links to many informative sites listed below and more – Bookmark this site! http://www.siu.edu/currentstudents/			
Blackboard/Web Troubleshooting	M-R 7:30 am – 10:00 pm; F 7:30am – 8:00 pm; Sat 7:30 am – 1:00 pm or leave voicemail http://www.siu.edu/its/students/index.shtml	Lovejoy Library	0005	5500
Bursar	www.siu.edu/bursar	Rendleman Hall	1101	3123
Career Dev. Center	www.siu.edu/careerdevelopmentcenter	Std Success Ctr	0281	3708
CBI – Background Check & Drug Screen	www.CertifiedBackground.com Customer Service: Email: customerservice@certifiedbackground.com Billing: Email: billing@certifiedbackground.com	(888) 666-7788 ext.1 (888) 666-7788 ext.4		
CougarNet	https://ssb.siu.edu/pls/BANPROD/twbkwbis.P_GenMenu?name=homepage			
Counseling Services	http://www.siu.edu/counseling/	Std Success Ctr.	0220	2842
Disability Support Svcs.	http://www.siu.edu/dss/	Std Success Ctr.	1270	3726
Financial Aid	http://www.siu.edu/financialaid/ or http://www.siu.edu/studentemployment/	Rendleman Hall	2308	3880
General SIUE Policies	http://www.siu.edu/policies/			
Graduate Records – Graduation, Transcripts, Posting of Transfer Credit, Verif. of Degree, etc.	Jodi Olson, Registrar Fax: 618-650-3332 http://www.siu.edu/registrar/about/graduate.shtml or http://www.siu.edu/registrar/	Rendleman Hall	1207	3167
Graduate School Administrative, Research, and Prosp. Grad Students	www.siu.edu/graduate http://www.siu.edu/orp/index.shtml www.siu.edu/graduatestudents Linda Skelton, IRB lskelto@siu.edu Erin Miles, Graduate Assistantships emiles@siu.edu	Rendleman Hall	2202	3010 2958 3010
Health Service (Univ. Clearance)	Nancy Heiman, RN Fax: 618-650-5839 http://www.siu.edu/healthservice/	Std. Success Ctr.	0222	2842
Information Technology Services (ITS) (Email & Internet)	Staff http://www.siu.edu/its/students/index.shtml	Lovejoy Library	0005	5500
International Students	http://www.siu.edu/internationalstudents/	Rendleman Hall	2120	2756
Lovejoy Library Information Svcs.	Elizabeth Moreton http://www.siu.edu/lovejoylibrary/	Lovejoy Library	3015	3828
Parking Services	http://www.siu.edu/parking/	Rendleman Hall	1113	3680
Semester Schedules	http://www.siu.edu/registrar/schedules			
Service Center: All Graduate Admissions & Graduate Records Services	http://www.siu.edu/registrar/about/service_center.shtml	Rendleman Hall	1207	2080
Speech Center	http://www.siu.edu/is/speechcenter/	Alumni Hall	1242	3085
Student ID	http://www.siu.edu/cougarcard/manage.shtml	Rendleman Hall	1207	2080
Student Resources	http://www.siu.edu/advising/Campus_Resources.shtml	Stdnt Success Cntr	1220	3701
Writing Center	Chad Verbais http://www.siu.edu/IS/WRITING/	Stdnt Success Cntr	1254	2045

FINANCIAL ASSISTANCE

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

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

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

ON-LINE TUITION AND FEE BILLING

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

ASSISTANCE WITH LOGGING ONTO BLACKBOARD OR WITH REVISION OF YOUR PASSWORD

Student needing assistance logging onto Blackboard or revising their password from home may call Information Technology Services at (618) 650-5500. Office hours are from 7:30 AM until 10:00 PM Monday – Thursday, 7:30 AM until 8:00 PM Friday and 7:30 AM until 1:00 PM Saturday. The office is closed on Sunday. Break Week hours are 8:00 am – 4:30 pm. If you need assistance at other times, call that number and leave a message with your name and a telephone number that you can be reached at during office hours and someone will call you back as soon as possible. “Off-campus” students can get assistance with passwords by contacting the Registrar’s Office at (618) 650-3770.

SECTION IV
GENERAL INFORMATION

SCHOOL OF NURSING OVERVIEW

The Graduate Program in Nursing has four specializations for a master's degree or post-master's certificate for advanced nursing practice roles and two specializations for a doctorate in nursing practice. Master's degrees and post-master's certificates are awarded in the specializations of Health Care and Nursing Administration (HCNA), Nurse Anesthesia (NA), Nurse Educator (NE), and Family Nurse Practitioner (FNP). After May 2014, no students will be admitted to the master's or post-master's certificate for Nurse Anesthesia. This degree changes to a Doctor of Nursing Practice degree, with the first students being admitted in May 2015. Specific information regarding these progressions can be found later in this handbook.

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

The program for the Master of Science degrees in nursing consists of 35 semester hours for Health Care and Nursing Administration, 72 semester hours for existing students in Nurse Anesthesia, 36 semester hours for Nurse Educator and 54 semester hours for the Family Nurse Practitioner Specializations. The NA DNP consists of 80 semester hours. The Post-Master's DNP consists of 30 semester hours.

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

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

SCHOOL OF NURSING WEBSITE AND EMAIL

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

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

STUDENT ADDRESSES, PHONE NUMBERS AND EMERGENCY INFORMATION

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

- 1) Submit their current or changes of addresses, phone numbers, or name changes and emergency contact information to the Graduate Program Secretary, Pat Koehne (618) 650-3975, pkoejne@siue.edu in the School of Nursing.
- 2) Name changes must be submitted to the SIUE Service Center. Forms are available at <http://www.siue.edu/registrar/forms/index.shtml>.
- 3) Address and phone numbers may be changed through CougarNet.

If updated addresses, phone numbers, and names are not provided, students may not receive needed information and will bear full responsibility.

LAB COATS & PATCHES

All School of Nursing graduate students are required to purchase and wear lab coats for all clinical rotations (unless the agency representatives requested you not to wear a lab coat). School of Nursing patches will be sewn/heat pressed on the left upper sleeve of all lab coats. The School of Nursing will provide one patch free of charge to each student. Charges will be incurred for additional or replacement patches.

NAME BADGE

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

PARKING

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

SCHOOL PINS

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

CONVOCATION AND COMMENCEMENT CEREMONIES

Graduate students who have completed all degree requirements are eligible to attend both the School of Nursing Convocation and the University Commencement ceremonies. Commencement ceremonies are held at the end of fall and spring semesters only. Students who will graduate must apply for graduation by the first day of the semester they wish to graduate and be cleared by the Graduate Records Office, Financial Aid Office, Registrar, Bursar and the School of Nursing before they can participate in these ceremonies.

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

SIGMA THETA TAU INTERNATIONAL NURSING HONOR SOCIETY

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

PHI KAPPA PHI HONOR SOCIETY

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

STUDENT PARTICIPATION IN SCHOOL OF NURSING COMMITTEES

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

STUDENT PARTICIPATION IN UNIVERSITY-WIDE COMMITTEES

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

SECTION V

MASTER'S CURRICULUM

**The Master's Curriculum Plans included in this
2014-2015 Graduate Student Handbook
apply to all students admitted to cohorts
starting in
Summer 2014 and Fall 2014**

NURSING PARADIGM

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

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

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

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

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

Learning

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

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

Approved by School of Nursing Faculty: May, 2004

CURRICULAR THEMES

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

ANALYTICAL REASONING

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

COMMUNICATION

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

ROLE

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

HUMAN DIVERSITY

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

ETHICS

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

HEALTH POLICY / SOCIAL CONSCIOUSNESS

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

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

PRACTICE

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

Approved by School of Nursing Faculty. September 8, 2008

Integrated Concepts for curriculum

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

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

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

Approved by School of Nursing faculty: May, 2004

MASTER'S STUDENT OUTCOMES

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

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

Assume advanced nursing practice roles to address societal health needs.

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

Provide and advocate for culturally congruent care.

Model and facilitate ethical decision making and ethical practice.

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

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

Approved by Faculty: 11/20/06

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

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

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

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

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

MASTER'S PROGRAM COURSES:

Core Courses

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

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

Advanced Practice Core Courses

N501, Studies in Genomics and Ethics (3 cr. hrs.)
N510, Health Care Informatics (3 cr. hrs.)
N513, Advanced Health Assessment & Practicum (3 hrs. Didactic, 1 hr. Clinical)
N514, Advanced Human Physiology (4 cr. hrs.)
N515, Advanced Human Pathophysiology (4 cr. hrs.)
N516, Pharmacology for Advanced Nursing Practice (3 cr. hrs.)

- N517, Applications of Epidemiology in Advanced Nursing Practice (3 cr. hrs.)
- N520, Diagnostic Tests & Interpretation, and Procedures for Nurse Practitioners (3 cr. hrs.)

Master's Nursing Specialization Courses

- N529, Orientation to Nurse Anesthesia Practicum (2 cr. hrs.)
- N563, Pharmacology Related to Anesthesia (3 cr. hrs.)
- N564, Chemistry and Physics Applied to Anesthesia (3 cr. hrs.)
- N565a, Theoretical Foundations of Nurse Anesthesia I (5 cr. hrs.)
- N565b, Clinical Practicum in Nurse Anesthesia I (1 cr. hr.)
- N566a, Theoretical Foundations of Nurse Anesthesia II (5 cr. hrs.)
- N566b, Clinical Practicum in Nurse Anesthesia II (1 cr. hr.)
- N567a, Theoretical Foundations of Nurse Anesthesia III (5 cr. hrs.)
- N567b, Clinical Practicum in Nurse Anesthesia III (1 cr. hr.)
- N568a, Theoretical Foundations of Nurse Anesthesia IV: Clinical Correlations (2 cr. hrs.)
- N568b, Clinical Practicum in Nurse Anesthesia IV (4 cr. hrs.)
- N569a, Theoretical Foundations of Nurse Anesthesia V: Clinical Correlations (3 cr. hrs.)
- N569b, Clinical Practicum in Nurse Anesthesia V (6 cr. hrs.)
- N571, Clinical Management of Adults in Primary Health Care I and Practicum (3 hrs. Didactic, 1 hr. Clinical)
- N572, Clinical Management of Adults in Primary Health Care II and Practicum (3 hrs. Didactic, 1 hr. Clinical)
- N573, Advanced Management of Women's Health and Practicum (2 hrs. Didactic, 1 hr. Clinical)
- N576, Advanced Management of the Pediatric Client & Practicum (2 hrs. Didactic, 1 hr. Clinical)
- N577, Advanced Practicum and Role Synthesis and (2 hrs. Didactic, 1 hr. Clinical)
- N580, Teaching and Learning Theory, Development and Socialization in Nursing Education (3 cr. hrs.)
- N581, Curriculum Theory, Design & Program Evaluation in Nursing Education (3 cr. hrs.)
- N582, Instructional Design, Assessment, & Evaluation for Nursing Education (3 hrs. Didactic, 1 hr. Clinical)
- N585, Synthesis for Teaching in the Nurse Educator Role (2 hrs. Didactic, 1 hr. Clinical)
- N586, Advanced Specialty Nursing Practice for Nurse Educators: Seminar (2 hrs. Didactic, 1 hr. Clinical)
- N590, Organizational Theory and Behavior in Nursing & Practicum (2 ½ hrs. Didactic, ½ hr. Clinical)
- N591, Foundations for the Advanced Leadership Role in Health Care and Nursing Administration & Practicum (2 hrs. Didactic, 1 hr. Clinical)
- N592, Finance and Budgeting in Health Care and Nursing Administration (3 cr. hrs.)
- N593, Management of Diverse Human Resources in Health Care and Nursing & Practicum (2 ½ hrs. Didactic, ½ hr. Clinical)
- N594, Synthesis of Health Care and Nursing Administration & Practicum (3 hrs. Didactic, 1 hr. Clinical)

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

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

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

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

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

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

Updated 6/24/14

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

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

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

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

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

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

Updated 6/24/14

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

Health Care and Nursing Administration Part-Time Progression

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

Semester 1 (Fall Year One)		Semester Hours	Post-Master's	Clinical Hours
Nurs500	Theoretical Foundations of Nursing	3	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	$\frac{1}{7}$	**	
		7		
Semester 2 (Spring Year One)				
Nurs504	Research in Advanced Nursing Practice	3	**	
Nurs505	Health Policy and Advanced Nursing Practice	$\frac{3}{6}$	**	
		6		
Semester 3 (Summer Year One)				
Nurs590	Organizational Theory and Behavior in Nursing (2 ½ credits didactic, ½ credit practicum)	$\frac{3}{3}$	3	45
		3		
Semester 4 (Fall Year Two)				
Nurs510	Health Care Informatics	3	3	
Nurs591	Foundations for the Adv. Leadership Role in Health Care & Nursing Administration (2 credits didactic, 1 credit practicum)	$\frac{3}{6}$	3	90
		6		
Semester 5 (Spring Year Two)				
Nurs592	Finance and Budgeting in Health Care and Nursing Administration (2 ½ credits didactic, ½ credit practicum)	3	3	45
Nurs593	Management of Diverse Human Resources In Health Care and Nursing	$\frac{3}{6}$	3	
		6		
Semester 6 (Summer Year Two)				
Nurs501	Studies in Genomics and Ethics	$\frac{3}{3}$	3	
		3		
Semester 7 (Fall Year Three)				
Nurs594	Synthesis of Health Care & Nursing Administration & Practicum	$\frac{4}{4}$	4	90
Completion of Terminal Project		4		
			Varies by Individual	270
		Total Credits	35	

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

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

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

Updated 6/24/14

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

Nurse Educator Part-Time Progression

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

Semester 1 (Fall Year One)		Semester Hours	Post-Master's	Clinical Hours
Nurs500	Theoretical Foundations of Nursing	3	**	
PAPA420	Quantitative Analysis	3	**	
PAPA412	SPSS	$\frac{1}{7}$	**	
Semester 2 (Spring Year One)				
Nurs504	Research in Advanced Nursing Practice	3	**	
Nurs515	Advanced Pathophysiology	$\frac{4}{7}$	**	
Semester 3 (Summer Year One)				
Nurs580	Teaching and Learning Theory, Development and Socialization In Nursing Education	$\frac{3}{3}$	3	
Semester 4 (Fall Year Two)				
Nurs516	Advanced Pharmacology	3	**	
Nurs581	Curriculum Theory, Design & Program Eval. in Nursing Education	$\frac{3}{6}$	3	
Semester 5 (Spring Year Two)				
Nurs505	Health Policy and Advanced Nursing Practice	$\frac{3}{7}$	**	
Nurs582	Instructional Design, Assessment & Evaluation for Nursing Education (3 hours didactic, 1 hour practicum)	$\frac{4}{7}$	4	90
Semester 6 (Summer Year Two)				
Nurs586	Advanced Specialty Nursing Practice for Nurse Educators: Seminar (2 hours didactic, 1 hour practicum)	$\frac{3}{3}$		90
Semester 7 (Fall Year Three)				
Nurs585	Synthesis for Teaching in the Nurse Educator Role Project (2 hours didactic, 1 hour practicum)	$\frac{3}{3}$	3	90
Completion of Terminal Project		3		
Total Credits		36	Varies by Individual	270

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

There is no binding agreement between the student and the University and School of Nursing as to the nature of the enrollment contract. The University retains the right, opportunity, and privilege to update the curriculum using varying modes of instruction, change the standards for progression, adjust the tuition and fees and modify the credit hours and course requirements.
All nursing programs at SIUE are fully accredited by: Commission on Collegiate Nursing Education, Washington, D.C.

Updated 6/24/14

POST MASTER'S CERTIFICATE

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

DUAL SPECIALIZATIONS

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

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

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

Doctor of Nursing Practice Specialization

Please see the appropriate section of the handbook for the Nurse Anesthesia DNP Specialization curricula which begins in May, 2015 and the Post-Master's DNP.

SECTION VI

COURSE RELATED INFORMATION

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

Some graduate courses are offered in the traditional face-to-face format completely on the Edwardsville campus, while others may be teleconferenced to the Springfield campus. Other courses may be provided in either blended or online course formats. Most faculty use the Blackboard Course Management system to provide resources for students, which is called web enhanced. It is essential that the student plans for computer and internet access appropriate to the course.

- Face to Face: The entire course is provided to students on the Edwardsville campus with minimal online sessions.
- Teleconferenced: The family nurse practitioner specialization is provided using teleconferencing, with students located at both the Edwardsville and Springfield campuses.
- Blended: Combines classroom and online sessions using Blackboard, with the ratio varying depending upon the course
- Online Courses: Provides 100% of the course sessions are online
- Web Enhanced Courses: Uses Blackboard to make some of the resources for the students available on the web. Almost 100% of nursing graduate courses are web-enhanced.

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

HARDWARE AND SOFTWARE RECOMMENDATIONS

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

- Word 2007 or higher for word processing – Microsoft Office 365 (Free for SIUE Students at <http://www.siu.edu/its/news/2014/03/microsoft-office-students.shtml>)
- PowerPoint for presentations
- antiviral software if using personal PC
- free software such as Quicktime, RealPlayer, etc...

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

The Information Technology Services (ITS) is the department on campus that can help with connectivity issues or troubleshooting other problems. They can be reached at 618-650-

5500. Additional ITS information is available at <http://www.siu.edu/its/students/index.shtml>. If you have any technical problems with services offered by ITS, please contact them.

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

COURSE REGISTRATION PROCESS

A list serve email is sent to all graduate students informing them of the enrollment period for the next semester(s). **Students are responsible for checking course registrations each semester and contacting the Graduate Academic Advisor if needed.** When students accept the admission invitation, a proposed progression plan is signed and submitted to the School of Nursing. The Advisor follows this progression for registrations.

Student cannot be registered if any health/certification requirements are outstanding (See Section VII). If a student becomes non-compliant after registration has occurred, they may be dropped from their classes by the Graduate Academic Advisor prior to the first day of class.

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

DROPPING COURSES

All graduate students must notify the Graduate Academic Advisor in the School of Nursing prior to dropping any course. The University policy on assigning grades to dropped courses as outlined in the most recent SIUE Graduate Catalog will be followed. After the start of the semester, all withdrawals/drops must be conducted through the Service Center (Rendleman Hall, Room 1309, 618-650-2080), by the student. During Fall and Spring semesters, drops during weeks 6-8 require the signature of the instructor and the Graduate Academic Advisor. After week 8, no drops or withdrawals are allowed. Please check Summer deadlines as they may vary according to the course.

COURSE FEES

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

COURSE SYLLABI

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

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

TEXTBOOKS

Books for graduate courses may be purchased in person or online (<http://www.siu.edu/muc/bookstore.shtml>) through the SIUE Campus Bookstore at Matthews Bookstore, Springfield or St. Louis, or from online vendors. Textbooks are usually available 2 – 3 weeks prior to the first day of the semester. Students may also purchase electronic versions of texts, if desired, on their own. Electronic course packages may be available for some courses.

REQUESTING CLINICAL PRECEPTORS AND CLINICAL PRACTICUM SITES

Clinical site and clinical preceptor requests are made by students in all nursing majors except by those students enrolled in the Nurse Anesthesia specialization courses. However, Nurse Anesthesia students will request sites for N513 – Advanced Health Assessment & Practicum. The guidelines and forms related to this process are available in **Section XII, page 179: FORMS** of this handbook (under the label “Clinical Preceptor Forms”) or online at <http://www.siu.edu/nursing/graduate/Graduate%20Forms.shtml> or on the Graduate Student Blackboard site. If you have questions regarding the content or completion of the aforementioned, please contact Sheri Compton-McBride, Director of Clinical Acquisition in the School of Nursing at (618) 650-3341 or shcompt@siue.edu. All forms must be sent to Ms. Compton-McBride 3-6 months in advance of the clinical practicum.

PROFESSIONAL LIABILITY INSURANCE

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

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

GRADING SCALE

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

93 - 100%	A
85 - 92%	B
76 - 84%	C
68 - 75%	D
Below 68%	F

GRADE INFORMATION

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

INCOMPLETE GRADES

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

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

INDEPENDENT STUDY

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

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

WRITTEN WORK OF STUDENTS

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

MASTER'S TERMINAL PROJECT

Master's Electronic Portfolio, Final Course Synthesis Project, and Oral Presentation

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

- 1) **Electronic Portfolio** – Working with a faculty mentor, students begin development of an electronic portfolio during the first semester of course work and make submissions annually throughout the program. Students submit a structured reflection (approximately 3 - 5 pages) once per year that demonstrates their progress toward meeting the master's student outcomes. Portfolio entries include electronic submissions of significant works from their semester's courses (e.g. papers, projects, or personal/practicum experiences) that provide evidence of student development and learning. In the final reflection, students summarize their overall achievement of the master's student outcomes. The portfolio does not carry course credit, but instead provides faculty members and learners with an opportunity to track students' professional formation and growth in their advanced nursing practice roles. For program assessment purposes, the chairperson evaluates the progress of the student in meeting the master's student outcomes yearly (formative assessment) and achievement of the final outcomes in the final semester of the program (outcome assessment). The portfolio is evaluated using ratings of "exceeds expectations," "meets expectations," or "does not meet expectations."
- 2) **Synthesis Project** – In the final semester of study, all graduate nursing students take a specialization synthesis course in which they complete a synthesis project appropriate for the specialization. The course faculty member grades the synthesis projects using a point-based rubric that incorporates the master's student outcomes. Project grades are calculated into the final course grade. The projects provide students with an opportunity to create a rigorous, scholarly product that incorporates a broad review of the literature from nursing and related fields.
- 3) **Oral Presentation** – In the last semester of the program, students provide an oral presentation to students and faculty at the formal SON Presentation Day conference. The presentation describes their growth, professional formation, and attainment of master's student outcomes and includes information about their final synthesis project, citing appropriate scholarly references. For purposes of program assessment, unbiased faculty volunteers will evaluate the oral presentations using an established rubric based on the master's student outcomes.

Faculty Responsibilities

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

Student Responsibilities

1. Initiate contact (email, face to face, Skype, or phone) with chairperson at planned intervals throughout program, preferably one to two times per year.
2. Develop an electronic portfolio documenting growth and synthesis of knowledge throughout the program. The portfolio must contain more than just the "raw data" accumulated in course work. That is, students must reflect on how course/practicum work helps them meet program outcomes, provide exemplars of pivotal learning moments, identify achievements and growing edges in their professional formation, and give evidence of synthesized learning in their reflection narratives. Students also include references to scholarly source documents that aided their learning that semester.
3. Develop a final synthesis project as directed by the faculty member teaching the final synthesis course. Students use their individually designed projects to demonstrate end -

of -program knowledge, skill, and professional development as advanced nursing practice students.

4. Initiate meeting with chairperson in final semester to discuss content for the 20-minute final oral presentation (15 minutes with 5 minutes question and answer session) describing how the student has transformed throughout the program, citing specific examples of meeting the master's student outcomes. Students will also prepare a final portfolio reflection (approx. 5 pages) that addresses their formation and growth through the entire program and their achievement of the master's student outcomes.

Contents of Electronic Portfolio

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

1. Curriculum vita
2. Yearly and Final Reflections (put in folders by years, e.g. "2013 to 2014" or Year 1)
 - A. Developed based on progress towards meeting the master's student outcomes.
 - B. Reflect knowledge, experiences, and values based on coursework, assignments, practicum experiences, and discussions with healthcare professionals.
3. Selected coursework and practicum assignments (put in appropriate year folder)
4. Masters Electronic Portfolio Evaluation Rubric

Approved by SON Faculty 1/5/11, minor revisions May 2013

**Southern Illinois University Edwardsville
School of Nursing**

**Master’s Electronic Portfolio Evaluation of Reflections Rubric
FM – Fails to Meet Expectations, M – Meets Expectations, EE – Exceeds Expectations
(Some outcomes may not be addressed each year. Areas under Master’s Student Outcomes are just examples.)**

Student Name: _____ **Specialization:** _____

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

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

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

_____ **Fails To Meet Expectations**
 _____ **Meets Expectations**
 _____ **Exceeds Expectations**

Faculty Signature: _____

Date: _____

GRADUATION REQUIREMENTS

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

Each student in the nurse practitioner specialization shall complete the FNP HESI Examination in the final synthesis course, N577. The results can then be used by students to identify strengths and weaknesses within the APN domains. The exam results will be included as part of the formal grading scores in N577 (see N577 syllabus for details).

At the end of the program, a Project Presentation Day is scheduled; graduating students are required to present their work to faculty and students and to respond to questions from the attendees.

FINAL APPROVAL FOR GRADUATION

Students must have a final GPA of 3.0 or better to graduate. All coursework must be completed, and the electronic portfolio must be finalized. A final assessment of the program will be sent via email by Educational Benchmarking, Inc. (EBI) and must be completed by students. Once these activities are completed, the Graduate Program Secretary will forward all necessary paperwork to the Graduate School. **GRADUATION PAPERWORK WILL NOT BE SUBMITTED TO THE GRADUATE SCHOOL UNTIL ALL OF THESE REQUIREMENTS ARE MET.**

SECTION VII
PROFESSIONAL NURSING REQUIREMENTS AND
VERIFICATIONS

PROFESSIONAL NURSING REQUIREMENTS AND VERIFICATION

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

- Criminal Background Check
- Certified Drug Test
- Immunization Tracker which includes:
 - o Physical exam and Medical History
 - o Immunization History
 - Rubeola (2 vaccinations or positive antibody titer)
 - Mumps (1 vaccination or positive antibody titer)
 - Rubella (2 vaccinations or positive antibody titer)
 - Varicella (2 vaccinations or positive antibody titer)
 - Hepatitis B (3 vaccinations or positive antibody titer)
 - TDaP (1 vaccination within the past 10 years) – must include Pertussis
 - o TB Skin Test (2-Step or 2 consecutive years of negative annual TB testing initially (one must be the current year), then 1-step vaccination or blood test annually)
 - o Flu vaccine (due October 15th annually)
 - o Health Insurance Card (due annually)
 - o CPR, adult and child with AED
 - o ACLS & PALS certification (CRNA students only)
 - o Unencumbered Illinois and Missouri RN licenses (only DNP and Springfield FNP students are exempt from needing a Missouri license)
 - o Unencumbered Out of State or Advanced Practice RN licenses (if applicable)
 - o Additional requirements may be added as needed

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

- o Students must meet all the mandates listed above by the date specified in the admission materials in order to attend nursing courses
- o These requirements must be kept current throughout the entire program
- o This is a student responsibility
- o Students’ registrations will be cancelled the week before classes begin if all CBI requirements are not complete
- o Students will be removed from clinical courses if all CBI requirements are not complete

- Failure to follow these guidelines will result in removal (an unexcused absence) from the assigned course and/or clinical (See Absence Policy)

Criminal Background Check

CBI will perform a criminal background check after the order is placed. Complete instructions as well as a “Demo” are available on the website. For more information on Background Checks, see the Student Background Check Policy on page 74.

Drug Test

Within 24 – 48 hours after you have completed your background check order, you will have a Chain of Custody form (echain) placed in your CertifiedProfile account. This echain will explain where you need to go to complete your drug test. For more information on Drug Testing, see the Drug Screening Policy on page 81.

Contact Information for Certified Background Check:

www.Certified Background.com

Customer Service: (888) 666-7788 ext. 1
studentservices@certifiedprofile.com

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

Immunization Tracker

Students admitted to the program will use the CBI Tracker to keep track of all health, license and certification requirements.

All information on immunizations, physical exam, insurance, licenses and certifications will need to be uploaded, by their respective due dates. At the end of the background check order process, students are prompted to create an individual “Immunization Tracker.” Written and video Instructions for uploading records are provided on the website.

Immunization trackers include:

- Physical exam which cannot be dated prior to September 1st of the previous year (form available on the website if needed).
- Medical History (form available on the website if needed)
- Immunization History (can be included on Physical form or separate)
 - Rubeola (Measles or Red Measles): 2 vaccinations **OR** a titer showing immunity. **A copy of the lab report for the titer is required.**

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

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

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

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

If you have a documented past positive TB skin test **AND** a documented negative chest x-ray within the last 5 years, you will need to complete the Signs/Symptoms TB Assessment form annually (form available on the website). Copies of the positive TB skin test & x-ray results must be uploaded initially with the signs/symptoms TB assessment form.

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

- Copy of current insurance card must be submitted to CBI. A new copy of insurance card are required every academic year. If coverage changes or

expires during the current academic year, a new form and card must be submitted within 1 week of the change.

- CPR with AED certification. A copy of the card is required. Certification must include adult, child, and infant plus instruction on Automated External Defibrillation (AED) devices. This certification must be renewed every 1 or 2 years depending on the course taken. Recommended courses include American Heart Association (AHA) “Basic Life Support (BLS) for Healthcare Providers” (2 year certification) **OR** the American Red Cross “CPR/AED for Professional Rescuers and Health Care Providers” course (1 year certification). Other courses must include CPR for Adult, Child & Infant plus instruction on AED device. A letter from the provider is acceptable to show proof of requirement prior to the card being received.
- ACLS and PALS certification (only CRNA students): A copy of the card is required. Certification is for 1 or 2 years depending on course taken. A letter from the provider is acceptable to show proof of requirement prior to the card being received.
- Unencumbered Illinois and Missouri RN licenses (only DNP and Springfield FNP students are exempt from needing a Missouri RN license). A copy of the actual license must be uploaded.
- Unencumbered Out of State or Advanced Practice RN licenses (if applicable). Required for students working or doing clinicals in any other state.
- Annual flu shots are required each Fall semester. Vaccines must not be dated prior to August 1st of the current year and are due no later than October 15th.

Employees from CBI monitor each student’s Immunization Tracker and will email the student with any requirements which are expired, about to expire or not sufficient. Weekly emails will be sent until all requirements are complete, beginning thirty (30) days prior to the expiration of a requirement. If a requirement has been rejected by a member of the CBI Review Team but you think it should not have been rejected, please contact the Graduate Program Secretary at (618) 650-3975 or pkoejne@siue.edu.

Documents can be mailed, faxed or uploaded to CBI. Contact information is available on the website.

Students are responsible for uploading and attaching each required document. **If you have any difficulty with your online order or with uploading any of your requirements, please contact CBI Customer Service at 888-666-7788 ext. 1.**

CBI assesses an annual fee of \$20 for students who began the program prior to Fall 2013. This fee is the responsibility of the student. The annual fee for the To-Do List is included in the initial fee for the Background Check Package.

UNIVERSITY HEALTH SERVICE

In addition to the items that need to be uploaded to CBI, some of these same items are required by University Health Service in order for a student to be in good standing at SIUE. Students are required to submit their Immunization history for Rubeola, Rubella, and Mumps, (2 MMR) as well as a Tetanus/Diphtheria/Pertussis vaccine within the last 10 years. Please contact University Health Service at (618) 650-2849 with any questions or if you need additional information on these requirements.

IMMUNIZATIONS NOT COVERED UNDER CDC GUIDELINES

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

IMMUNIZATION EXEMPTIONS

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

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

SCHOOL OF NURSING BACKGROUND CHECKS OF STUDENTS

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

Therefore, as part of its enrollment process, the School is requiring background checks, including criminal background checks, for all of its students. All incoming graduate and undergraduate students must order a criminal background check from CBI. Only those students with a background check demonstrating backgrounds in compliance with this policy will be allowed to enroll into the School. The check shall be minimally intrusive, but may include checks for offenses or other matters, as required by the clinical sites, not specifically included in this policy.
- II. Students should be aware that many health care employers require all job applicants to complete a background check before beginning their employment. Additionally, all students taking the National Council Licensure Examination (“NCLEX”) must complete a background check and most states require background checks for licensure as a nurse.
- III. The CBI background check will include the following checks:
 1. Illinois Statewide Criminal Records;
 2. Residency History – upon searching the Residency History, if any county appears outside of the state of Illinois, CBI will search that individual out of state county criminal records to make sure the full criminal record is searched nationwide;
 3. Nationwide Sexual Offenders Registry; and
 4. Unlimited County Criminal Records
 5. Other lists maintained by federal or State governmental entities as required by the individual clinical affiliate.
- IV. As part of the enrollment process into the School, the student must order a background check package from CBI. Students will be responsible for all costs relating to the background check.
- V. Students must disclose each State in which they have resided for the last ten (10) years. If less than 28 years of age, the student need only disclose the States in which they have resided since they attained 18 years of age. Generally, the School will only consider criminal convictions which have occurred within the last ten (10) years, but depending on the nature and number of the convictions and other factors, may consider and take action based on convictions more than ten (10) years old.
- VI. Generally, two background checks will be sufficient for the student’s tenure in the School: the first check must be completed upon conditional admission into the School

before beginning any clinical experience; and the second check must be completed for all undergraduate students taking the NCLEX. However, if a clinical affiliate requires an updated check or an additional check not included in the original check, the students shall be subject to the additional check before entering the clinical affiliate.

- VII. If a background check demonstrates a finding of a positive criminal disposition described in this policy, the Associate Dean for Academic Affairs shall notify the student and provide the student with a copy of the finding. Following notification, the Associate Dean shall meet and discuss the finding with the student. The student shall have the opportunity to present information to the Associate Dean relating to the finding. Within fifteen (15) days, the Associate Dean shall make a decision whether the finding precludes the student from admission into the School. In reaching this decision, the Associate Dean may consult with its clinical affiliates. If the student wishes to appeal the decision, the student may file a grievance pursuant to the Student Grievance Code.
- VIII. **Record Retention**
The background check documentation provided to the School of Nursing by CBI is retained on the CBI server until the student graduates from the program. However, the documentation shall not be retained by the School of Nursing as part of the student's permanent file.
- IX. **Criminal Convictions which will Disqualify the Student**
This list constitutes the criminal offenses in Missouri and Illinois for which may be disqualified from participation in clinical experiences or other direct patient care. There may be additional federal or state and criminal offenses which disqualify students not specifically included in this list.

Missouri State Criminal Offenses

Chapter 565

Offenses Against the Person

Sections:

- 565.020 First degree murder, penalty-person under sixteen years of age not to receive death penalty.
- 565.021 Second degree murder, penalty
- 565.023 Voluntary manslaughter penalty-under influence of sudden passion, defendant's burden to inject
- 565.024 Involuntary manslaughter, penalty
- 565.050 Assault first degree, penalty
- 565.060 Assault, second degree, penalty
- 565.065 Unlawful endangerment of another, penalty
- 565.070 Assault in the third degree
- 565.072 Domestic assault first degree, penalty
- 565.073 Domestic assault second degree, penalty
- 565.074 Domestic assault third degree, penalty
- 565.075 Assault while on school property, penalty
- 565.081 Assault of a law enforcement officer or emergency personnel in the first degree, definition, penalty
- 565.082 Assault of a law enforcement officer or emergency personnel in the second degree, definition, penalty

565.083	Assault of a law enforcement officer or emergency personnel in the third degree, definition, penalty
565.084	Tampering with a judicial officer, penalty
565.090	Harassment
565.092	Aggravated harassment of an employee, penalty
565.100	Lack of consent in kidnapping and crimes involving restraint
565.110	Kidnapping
565.120	Felonious restraint
565.130	False imprisonment
565.150	Interference with custody, penalty
565.153	Parental kidnapping, penalty
565.156	Child abduction, penalty
565.165	Assisting in child abduction or parental kidnapping, penalty
565.180	Elder abuse in the first degree, penalty
565.182	Elder abuse in the second degree, penalty
565.184	Elder abuse in the third degree, penalty
565.188	Report of elder abuse, penalty, false report, penalty, evidence of prior convictions
565.200	Skilled nursing facility residents, sexual contact or intercourse with, penalties-consent not a defense
565.225	Crime of stalking-definitions, penalties
565.252	Invasion of privacy, first degree, penalty
565.253	Crime of invasion of privacy, second degree, penalties
565.300	Infant's protection act, definitions, crime of infanticide, penalty, exception: application of law
565.350	Tampering with a prescription or a drug prescription order, crime

Chapter 566

Sexual Offenses

Sections:

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

Chapter 569

Robbery. Arson. Burglary and Related Offenses

Sections:

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

- 569.070 Causing catastrophe
- 569.072 Water contamination, penalty
- 569.080 Tampering in the first degree
- 569.090 Tampering in the second degree
- 569.095 Tampering with computer data, penalties
- 569.097 Tampering with computer equipment, penalties
- 569.099 Tampering with computer users, penalties
- 569.100 Property damage in the first degree
- 569.120 Property damage in the second degree
- 569.140 Trespass in the first degree
- 569.150 Trespass in the second degree
- 569.155 Trespass of a school bus, penalty, schools to establish student behavior policy, when

- 569.160* Burglary in the first degree
- 569.170 Burglary in the second degree
- 569.180 Possession of burglar's tools

Chapter 198

Convalescent. Nursing and Boarding Homes

Sections:

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

Chapter 568

Offenses Against the Family

Sections:

- 568.020 Incest

Chapter 210

Child Protection and Reformation

Sections:

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

2. Illinois State Criminal Offenses

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

Sections:

8-1.1	Solicitation of Murder
8-1.2	Solicitation of Murder for Hire
9-1	First Degree Murder
9-1.2	Intentional Homicide of an Unborn Child
9-2	Second Degree Murder
9-2.1	Involuntary Manslaughter of an Unborn child
9-3	Involuntary Manslaughter and Reckless Homicide
9-3.1	Concealment of Homicidal Death
9-3.2	Involuntary Manslaughter and Reckless Homicide of an Unborn Child
9-3.3	Drug Induced Homicide
10-1	Kidnapping
10-2	Aggravated Kidnapping
10-3	Unlawful Restraint
10-3.1	Aggravated Unlawful Restraint
10-4	Forcible Detention
10-5	Child Abduction
10-7	Aiding and Abetting Child Abduction
11-6	Indecent Solicitation of a Child
11-9.1	Sexual Exploitation of a Child
11-19.2	Exploitation of a Child
11-20.1	Child Pornography
12-1	Assault
12-2	Aggravated Assault
12-3	Battery
12-3.1	Battery of an Unborn child
12-3.2	Domestic Battery

12-3.3	Aggravated Domestic Battery
12-4	Aggravated Battery
12-4.1	Heinous Battery
12-4.2	Aggravated Battery w/ Firearm
12-4.2-5	Aggravated Battery w/ Machine Gun or Silenced Weapon
12-4.3	Aggravated Battery of a Child
12-4.4	Aggravated Battery, unborn child
12-4.5	Tampering with Foods, Drugs or Cosmetics
12-4.6	Aggravated Battery of a Senior Citizen
12-4.7	Drug Induced Infliction of Great Bodily Harm
12-7.4	Aggravated Stalking
12-11	Home Invasion
12-13	Criminal Sexual Assault
12-14	Aggravated Criminal Sexual Assault
12-14.1	Predatory Criminal Sexual Assault of a Child
12-15	Criminal Sexual Abuse
12-16	Aggravated Criminal Sexual Abuse
12-19	Abuse and Criminal Neglect of Long-Term Care Facility Resident
12-21	Criminal Abuse or Neglect of an Elderly or Person w/ Disability
12-21.6	Endangering Life or Health of Child
12-32	Ritual Mutilation
12-33	Ritualized Abuse of Child
16-1	Theft
16-1.3	Financial Exploitation of an Elderly or Person w/ Disability
16-2	Theft of Lost or Mislaid Property
16A-3	Retail Theft
16G-15	Financial Identity Theft
16G-20	Aggravated Financial Identity Theft
17-3	Forgery
18-1	Robbery
18-2	Armed Robbery
18-3	Vehicular Hijacking
18-4	Aggravated Vehicular Hijacking
18-5	Aggravated Robbery
19-1	Burglary
19-3	Residential Burglary
19-4	Criminal Trespass to a Residence
20-1	Arson
20-1.1	Aggravated Arson
20-1.2	Residential Arson
24-1	Unlawful Use of Weapon
24-1.1	Unlawful Use or Possession of Weapon, Felon or Persons in Custody
24-1.2	Aggravated Discharge of Firearm
24-1.2-5	Aggravated Discharge of Machine Gun or Silenced Weapon
24-1.5	Reckless Discharge of Firearm
24-1.6	Aggravated Unlawful Use of a Weapon
24-3.2	Unlawful Discharge of Firearm Projectiles
24-3.3	Unlawful Sale or Delivery of Firearms on School Premises

33A-2 Armed Violence

Wrongs to Children Act (720 ILCS 150)

Section

- 5.1 Permitting Sexual Abuse of a Child
- Criminal Jurisprudence Act (50 ILCS 735)
(Repealed)

Cannabis Control Act (720 ILCS 550)

Sections

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

Illinois Controlled Substances Act (720 ILCS 570)

Sections

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

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

Sections

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

Nursing and Advanced Practice Nursing Act (225 ILCS 65)

Section

- 10-5 Prohibited Acts

Effective: January 1, 2005

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

MANDATORY DRUG SCREENING POLICY

I. Policy

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

II. Procedure for Implementation

1. All incoming School of Nursing students must order a drug screening test through CBI. The screen must be performed on all incoming students between the date of their admission letter and the first day of class. The School of Nursing may establish a deadline date for test results which is prior to the first day of class. However, for students admitted late or as warranted by other circumstances, the drug screen may be performed after this deadline. At present, the screen is required only for incoming students and is not mandatory for continuing students in good standing in the School of Nursing. If a particular clinical site requires additional or more recent drug screens, continuing students will be subject to additional screening. In addition, all students are subject to the SIUE Student Conduct Code, Student Alcoholic Beverages Policy and School of Nursing Substance Abuse policy which provides for drug and alcohol testing upon reasonable suspicion that the student is using or under the influence of drugs or alcohol.
2. Undergraduate and graduate nursing students, who leave the program for at least one year, must be drug screened in the same manner as newly admitted nursing students.
3. The drug screen must include the following drugs:
 - THC (delta-9-tetrahydrocannabinol, substance commonly found in marijuana)
 - Cocaine
 - Opiates
 - Amphetamine
 - Barbiturates
 - Benzodiazepines

- Methadone, Methaqualone
 - Propoxyphene
 - PCP (phencyclidine)
4. If the drug test is positive and a student has a legal prescription for any of the above listed drugs, the student will be asked to provide the prescription information to the Medical Review Officer in the form of an official letter from their physician.
 5. A student's drug test report is securely posted on the CBI website and is available only to the student and the school requiring the test. Students can be confident that the results will never be viewed by unwarranted outside sources. The School of Nursing will not accept screening results delivered by the student or any other third party, other than CBI. If a student has completed a CBI drug test associated with another university, then the student can send the results to the School of Nursing for approval by the Associate Dean for Academic Programs.
 6. Students are encouraged to have their drug test completed by the established deadline date to avoid any disruption of course enrollment. Drug screens that are not received in a timely manner by the School of Nursing may result in the student's removal from their nursing courses and/or clinical site. Any clinical days lost by the student will be made up by the student at the convenience of the clinical site and supervising faculty.
 7. The students being tested are responsible for the cost of all drug screenings.
 8. If a student refuses to submit to a drug screen, the student's enrollment in the School will be withdrawn. The Office of Student Affairs will be notified.
 9. Various clinical sites may require additional drug screenings and if a student is placed with such a clinical site, the student may be required to undergo additional drug screenings and screenings for other substances after the initial drug screening. Generally, one initial drug screening will be sufficient for the clinical sites. In addition, various clinical sites may impose random drug screens upon students. However, the cost of such random drug screens shall be borne by the clinical site.
 10. If the student's drug screen is negative, the student may commence all course and clinical assignments.
 11. If the student's drug screen is positive, a CBI Medical Review Officer (MRO) will contact the student to verify if there is a prescription and notify the appropriate School of Nursing secretary by email that the results are being reviewed. If the student does not return the phone calls from the MRO within five (5) business days of the first contact, the test will be released as a positive result with the note of NO CONTACT meaning that the student never responded. The student will then be contacted by the Associate Dean for Academic Programs as soon as

possible and shall meet with the Associate Dean to discuss the positive drug screen. If the policy has been violated, all clinical course enrollments within the School of Nursing shall be cancelled and at the discretion of the Associate Dean all didactic course enrollments may also be cancelled. The Associate Dean may report any positive drug screen to the SIUE Office of Student Affairs and the Illinois and Missouri State Boards of Nursing for information and possible action.

12. After one academic year, the student with a prior positive drug screen may apply for re-admission into the School of Nursing upon completion of all the stipulations imposed by the Associate Dean including a chemical dependency evaluation and further treatment, if recommended by the assessment process and a negative drug screen. The application for re-admission will be considered by the appropriate committee within the School of Nursing who shall make a recommendation on the re-admission decision to the Associate Dean. The Associate Dean shall have the discretion to admit or reject the student based on the Associate Dean's judgment whether this student can successfully complete the School of Nursing program. If the student is not satisfied with the Associate Dean's decision, the student may file a grievance pursuant to the SIUE Student Grievance Code.
13. The School of Nursing or designee may retain documentation of the drug screen results and shall provide the copies of the screen to the student, upon request. However, the drug screen results shall not be retained by the School of Nursing as part of the student's permanent file.

Effective: January 1, 2005

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

SECTION VIII
STANDARD PRECAUTIONS & GUIDELINES
FOR CLINICAL EXPERIENCES

STANDARD PRECAUTIONS: PREVENTING TRANSMISSION OF INFECTIOUS AGENTS

The School of Nursing follows the guidelines from the Centers for Disease Control website regarding preventing the transmission of infectious agents:

<http://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html>

All graduate students need to be aware of this policy and follow these guidelines at all times in clinical practicum settings. These guidelines include wearing gloves when in contact with potentially contaminated surfaces; using an alcohol-based handrub (if not visibly soiled) or soap and water (if hands are visibly soiled) before and after contact with patients and after removing gloves; not wearing artificial nails or extenders when providing direct patient care; and appropriate of personal protective equipment (PPE).

STUDENT RESPONSIBILITIES RELATED TO CLINICAL INCIDENT GUIDELINES

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

GUIDELINES FOR PERSONAL SAFETY DURING CLINICAL NURSING EXPERIENCES

Students are in a variety of community settings during their clinical experiences. Using common sense safety precautions to protect personal safety in everyday life is a concept that is life-long. Safety during clinical experiences is really just an extension of these principles and practices.

If you are injured, e.g. needle sticks, blood/fluid exposure, fall, at the clinical site, please complete the Report of Injury Form, <http://www.siu.edu/emergencymanagement/> and return it to the Associate Dean's office within one week. This form is also located in the Section XII Forms section of this handbook on page 192.

SECTION IX:

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

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING**

STATEMENT FOR ACADEMIC INTEGRITY

Students are expected to abide by all policies in the Student Handbook and the Students' Code of Conduct. This includes professional attire, classroom, clinical and laboratory civility, and class attendance policies as described in the Student Handbook and course syllabi. This policy applies to graduate and undergraduate nursing students.

Introduction

Southern Illinois University Edwardsville statement of values and implications of those values that support the School of Nursing statement on academic integrity are the following:

- Excellence
 - High-quality student learning
 - Continuous improvement and innovation
 - Outstanding scholarship and public service
- Integrity
 - Accountability to those we serve and from whom we receive support
 - Honesty in our communications and in our actions
- Wisdom
 - Creation, preservation, and sharing of knowledge
 - Application of knowledge in a manner that promotes the common good
 - Life-long learning

Source: *SIUE Undergraduate Catalog, SIUE Graduate Catalog*

The School of Nursing mission:

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

Approved by Faculty 9/06 by electronic vote

Ethics is a value of the School of Nursing and is an organizing thread of the curricula. It is defined as:

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

Source: *SIUE School of Nursing Undergraduate And Graduate Handbooks*

Nurses are viewed as one of the most honest and ethical professions. Behavior of professional nurses is directed by a Code of Ethics. In 2001, the American Nurses Association (ANA) published the Code of Ethics with Interpretive Statements.

Source: Fowler, M. (2010). The ANA Code of Ethics: Interpretation and Application. Silver Spring, MD: ANA.

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

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

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

Definitions for those acts of misconduct follow:

1. Cheating: Using another source to demonstrate mastery of a subject. It includes dishonestly obtaining help or using materials not explicitly approved by the instructor. The use of notes, electronic devices or interacting with others is prohibited in certain academic exercises. Acquiring and sharing unauthorized exams prior to testing is considered cheating. In the clinical setting, cheating includes but is not limited to copying another student's care plan, using former students' care plans as your own, using another student's, former students', or clinicians' clinical documentation notes, failing to indicate collaboration with another student to produce work, using any written work other than your own for clinical assignment completion.
2. Plagiarism: Including, without limitation, the act of representing the work of another as one's own. Plagiarism may consist of copying, paraphrasing, or otherwise using the written, electronic, or oral work of another without proper acknowledgment or consent of the source or presenting oral, electronic, or written material prepared by another as one's own. Plagiarism also includes using information from electronic resources, including the Internet, without the use of proper citations. Plagiarism includes class and clinical work.
3. Fabrication: Creating, inventing, falsifying or manufacturing scientific or educational data for as part of an academic requirement. Fabrication includes instances of representing manufactured data as the result of scientific or scholarly experiments or research, fabricating sources, or using citations in a misleading way. Altering or falsifying student records are one type of fabricated information.
4. Facilitation of academic dishonesty: Knowingly or negligently allowing work to be used by another or aiding others in academic dishonesty. It includes acts of soliciting, aiding, abetting, concealing, sabotaging another's work, or attempting to be dishonest.

Dishonesty is facilitated when students do not participate in group projects or allow one member to produce the work and represent it as the group's effort. Academic dishonesty also includes postings on social media related to class or clinical experiences.

5. Failure or refusal to follow clinical practice standards: Acting in a manner that does not meet the practice standards in the treatment of patients or clients as determined by the School, the clinical setting, or through the direction of the clinical instructor/supervisor. This includes violations of HIPAA regulations of patient information and falsifying of clinical patient records, failure to prepare for clinical experiences, failure to report an error in clinical practice to the faculty and nursing staff.

Academic Integrity Reporting, Investigating, and Decision Process for the Graduate and Undergraduate Programs

A. Reporting Process

1. A faculty member initiates the Academic Integrity Reporting process when:
 - A faculty member suspects an academic integrity violation.
 - Faculty member receives an allegation of an academic integrity violation from a student or students regarding another student.
2. A violation can be from a classroom, clinical or laboratory class.
3. The reporting faculty member completes the "Academic Integrity Initial Reporting Form", found at the end of this policy, and sends it to the appropriate Student Affairs Committee Chair, Graduate or Undergraduate.
4. The appropriate Student Affairs Committee Chair and the reporting faculty member will determine the level of the violation.
5. The reporting faculty member notifies the student of the allegation of an academic integrity violation within two days of the allegation.

B. Level One Offense

1. A first time level 1 violation may be investigated by the reporting faculty member with approval of the appropriate Assistant Dean of the program, Graduate or Undergraduate.
2. The reporting faculty member, using the "Academic Integrity Initial Reporting Form" found at the end of this policy), with any necessary documents attached, is sent to the appropriate Student Affairs Committee Chair, and appropriate Assistant Dean.
3. A Level 1 violation may be sent to the Honor Board at the request of the reporting faculty or the appropriate Assistant Dean.

4. If the reporting faculty member is approved to conduct the investigation he or she should collect the evidence and meet with the student and any others involved.
5. The reporting faculty member, using the "Academic Integrity Final Reporting Form" found at the end of this policy), with any necessary documents attached, is sent to the appropriate Student Affairs Committee Chair, and appropriate Assistant Dean.
6. The appropriate Assistant Dean approves the report and any recommendations and sanctions or makes revisions and returns the "Academic Integrity Final Reporting Form" to the reporting faculty.
7. The reporting faculty member notifies the student and schedules a conference date to meet with the student to discuss the report and complete the "Academic Integrity Final Reporting Form". The reporting faculty may request the appropriate Student Affairs Committee Chair and or appropriate Assistant Dean to attend the conference with the student.
8. If the appropriate Assistant Dean and or the appropriate Student Affairs Committee Chair are not available, the covering administrators will be consulted to oversee the investigation and review the report and recommendations and make any revisions and attend the student conference.
9. The reporting faculty meets with the student for notification and both complete the "Academic Integrity Final Reporting Form.
10. If the student will not meet with the reporting faculty who initiated the allegation after the letter of notification is sent then the "Academic Integrity Final Reporting Form" is completed to reflect this.
11. Copies of the notification letter and any student written response to the notification letter is placed in the student file, appropriate Student Affairs Committee Chair's, Honor Board Chair and appropriate Assistant Dean's office.
12. Copies of the "Academic Integrity Final Reporting Form", with any attached documents, are given to the student, Chair of Appropriate Student Affairs chair, Honor Board Chair and placed in the student's file.

C. Level 2 Through 4 violation

1. Level 2 Through 4 violations are referred to the Honor Board. A repeat Level One violation is referred to the Honor Board.
2. The reporting faculty must submit the "Academic Integrity Initial Reporting Form" to the Chair of the appropriate student Affairs Committee who convenes the Honor Board. The appropriate Assistant Dean should also be notified of the violation.
3. The reporting faculty member informs the student of the allegation and the referral to the Honor Board within two days of the allegation.

4. The Honor Board membership consists of three members from the Graduate and Undergraduate Student Affairs Committee.
5. Ideally, Honor Board members should have minimal contact with the student, so some or all of the three members can be selected from either one or both Student Affairs committees.
6. The appropriate Student Affairs Committee Chair will select 3 new members each time the Honor Board is convened and appoint a chair.
7. The Honor Board collects evidence and then meets with the student and the reporting faculty member and any other witnesses.
8. The Honor Board completes the investigation, and submits the "Academic Integrity Final Reporting Form" and any attached documents to the appropriate Assistant Dean who notifies the Honor Board of agreement with the report or other recommendations.
9. The reporting faculty member receives the final Honor Board report with the "Academic Integrity Final Reporting Form"
10. The reporting faculty member notifies the student and schedules a conference date to meet with the student to discuss the report and complete the "Academic Integrity Final Reporting Form". The reporting faculty may request the appropriate Student Affairs Committee Chair and or appropriate Assistant Dean to attend the conference with the student.
11. If the appropriate Assistant Dean and or the Student Affairs Chair of the student's program are not available, the covering administrators will be consulted to oversee the investigation and review the report and recommendations and make any revisions.
12. If the student will not meet with the reporting faculty after the letter of notification is sent then the "Academic Integrity Final Reporting Form" is completed to reflect this.
13. Copies of the notification letter and any student written response to the notification letter is placed in the student file, appropriate Student Affairs Committee Chair's, Honor Board Chair and appropriate Assistant Dean's office.
14. Copies of the "Academic Integrity Final Reporting Form", with any attached documents, are given to the student, Chair of Appropriate Student Affairs chair, Honor Board Chair and placed in the student's file.

Academic Integrity Offenses and Sanctions

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

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

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

Level One Violations

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

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

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

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

Level Two Violations

Level two violations are of a more serious nature as these affect more of the student's coursework. The student is more than likely aware that their action violated Academic Integrity. The following are examples.

1. Quoting directly or paraphrasing, to a moderate extent, without source acknowledgement.

2. Unauthorized multiple submissions. An example would be using the same paper or care plan for several courses without authorization from all faculty in these courses.
3. Receiving assistance from sources with special expertise for an area that is a core element in the project without acknowledgement. (Examples include statistical, research, clinical practice area, and/or computer programming.)
4. Not contributing to a graded group project.
5. Group members failing to report a group member or members who are not contributing to the project.
6. Failure to prepare for clinical practice.
7. Performing tasks in the clinical area for which student is not prepared.

The recommended sanction for level two violations is a failing grade for the assignment.

Level Three Violations

Level three violations are more serious in nature than level one and two violations. Dishonesty, including cheating on a significant portion of course work, major paper, or examinations either in class or the online environment. Usually, but not always, premeditated.

Examples include:

1. Unauthorized collaboration on an in-class, on line, or take home exam.
2. Plagiarizing major portions of a written assignment.
3. Allowing someone to copy during an exam.
4. Using books, notes, mobile devices, computers, calculators and other items prohibited by course faculty in an exam.
5. Altering exams for more points.
6. Acquiring and sharing of unauthorized exams prior to the exam.
7. Use of the work of others as your own.
8. Inventing sources and or data or altering materials for use in papers or projects.
9. Submitting false accusation of cheating by student.

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

Level Four Violations

These are the most serious violations and have potential to cause harm and thus carry the heaviest penalties. Usually are premeditated. Repeat violations at a lower level become a level four violation. Examples include:

1. Any violation that occurs after return from suspension for a previous violation.
2. Forging a grade, stealing an examination, buying an examination, falsifying a transcript.
3. Having a substitute take an exam or take an exam for someone else.
4. Fabricating clinical data in medical records and or assignments.
5. Reporting fabricated data or information to staff or instructor in clinical area or knowingly failing to report an error to the faculty or nursing personnel.
6. Fabrication of evidence, falsification of data.
7. Presenting another's ideas as one's own in a project, presentation, or other works.
8. Sabotaging another student's work through actions designed to prevent completion of an assignment.
9. Willful violation of the ethical code or nursing or a nursing specialty.
10. Posting information related to a course (live or online), clinical experience, and/or clinical agency on social media websites.
11. Violation of HIPPA regulations.
12. Falsifying clinical data and patient records.
13. Knowingly failing to report a change in patient condition, or an error to the faculty or nursing personnel.
14. Use of purchased papers or other materials.
15. Forgery of grades or transcripts.
16. Fabrication of completion of a clinical experience.

The recommended sanction for a level four violation is a failing grade for the course and/or may include dismissal from the nursing program. A report is made to the School of Nursing Student Affairs Committee. Further sanction will be in accord with University policy.

Students can institute a grievance as provided in the University's Academic Code.

Sanctions endorsed in this document are to be considered, additional sanctions are at the discretion of the faculty member and the School of Nursing.

Approved by Faculty – May, 2013

Approved by Faculty – May, 2005

Revisions Approved by Undergraduate Student Affairs Committee- March 2013

Approved by Graduate Student Affairs Committee-February 2013

Approved by Faculty-April 2013

**Southern Illinois University Edwardsville
School of Nursing
Professional Behavior Guidelines**

The nursing profession expects its members to be responsible, accountable, self-directed, and professional in behavior. As such, students are held accountable to the Student Conduct Code (<http://www.siu.edu/policies/3c1.shtml>), Student Academic Code (<https://www.siu.edu/policies/3c2.shtml>), and the Class Attendance Policy (<http://www.siu.edu/policies/1i9.shtml>), as set forth by the University. In addition, students are expected to abide by the School of Nursing's Statement of Academic Integrity, Student Conduct Policy, Attendance Policy as described in the Undergraduate and Graduate Student Handbooks.

The following guidelines provide clarification regarding the appropriate professional behavior expected of all nursing students, in both the classroom and clinical settings, and are to be used as a supplement to the above listed policies.

Professional Behavior:

Safety

Maintaining patient safety is an essential foundation of clinical nursing practice. A significant failure to maintain safety (i.e., life-threatening or likely to cause permanent disability) may result in immediate failure of clinical, and thus, failure of the course. A demonstrated pattern of failures in safety, although not immediately life-threatening, may also result in failure of clinical, and thus, failure of the course.

Personal Behaviors

Failure to demonstrate any of the following behaviors may result in dismissal from the classroom and/or the clinical setting:

- Accept responsibility for own behavior, practice, and scholarship.
- Adequately prepare, attend, and participate in all classroom and clinical practicum sessions.
- Arrive and depart from class and the clinical setting promptly.
- Exhibit professional appearance and behavior, as identified in the Undergraduate and Graduate Student Handbooks.

- Maintain privacy and confidentiality.
- Advocate for patients.
- Demonstrate ethical behavior.
- Seek and utilize guidance from the faculty, preceptor, and/or staff in an appropriate manner.
- Accurately represent self as a student to others including, but not limited to, colleagues, faculty members, representatives of the University and their affiliates, partner institutions, community partners, patients, nurses, and other members of the health care team.
- Evaluate personal competence. All nursing students shall seek consultation and supervision whenever they are uncertain or unprepared to handle a specific patient situation. Failure to obtain instruction or supervision when implementing nursing procedures or practices for which one lacks the educational preparation, ability, knowledge, or experience is unethical and in opposition to nurse practice acts.
- Display professional demeanor. Nursing students should portray a professional and responsible demeanor at all times; they should maintain honesty and respect, and should be sensitive and nonjudgmental toward individuals. Students should display respect for individual differences.
- Avoid use of inappropriate language, gestures or remarks.
- Avoid use of intimidation, coercion or deception in working with patients, families, preceptors, staff, other students and faculty and staff.
- Demonstrate teamwork and helping behavior for colleagues that exemplifies an assertive, rather than aggressive, approach.
- Maintain professional boundaries with patients.
- Promote personal growth by self-assessment, self-disclosure, and utilization of feedback.

Disruptive Behavior

Disruptive behavior interferes with the learning environment and student learning in the classroom and/or clinical rotation. Such behavior hinders or prevents faculty, the preceptor, and staff members from carrying out professional duties and responsibilities. Faculty, preceptors, and agency staff are asked to address disruptions promptly. If left unaddressed, disruptive behavior might continue to escalate, resulting in negative consequences for the individual, other professionals, and potentially the patient. Below is a list of warning signs that may indicate disruptive behavior. Any single issue or combination of these behaviors warrants further assessment by the nursing faculty member.

Warning Signs of Disruptive Behavior or Emotional Distress:

- Argumentative speech.
- Repetitive verbal abuse, including sarcasm, with patients, preceptors, staff, faculty, or other students.
- Controlling behaviors that impinge on others.
- Blaming others for problems in life or school.

- Persistent complaining.
- Ongoing challenges to or resisting authority.
- Intentional destruction of University or clinical site property.
- Withdrawing from usual social activities with friends, co-workers, or family.
- Presenting a change in lifestyle, demeanor, or appearance.

Specific examples of disruptive behavior:

- Numerous conflicts, verbal abuse, or non-therapeutic interactions with patients, preceptors, faculty, or other students.
- Inappropriate reaction to critique of performance or conduct.
- Persistent, unfounded, complaining about aspects of the program, classroom, or clinical requirements.
- Inappropriate tardiness and/or absenteeism.
- Behavior related to obsession with or stalking of another person at the University or clinical site.
- Inability to control feelings, eye rolling, outbursts of anger, swearing, slamming doors, or other physical displays of aggression.
- Interrupting meetings or trainings with inappropriate comments.
- Expression of entitlement, i.e. feels deserves special rights or that rules do not apply to him/her.
- Statements that he/she wants revenge related to some incident.
- Misrepresentation of the student status, knowledge, and authority, including the use of the title Registered Nurse, Advanced Practice Nurse, Nurse Practitioner, or Nurse Anesthetist.

Consequences of Unprofessional Behavior:

When problem behaviors are identified, the involved faculty member or preceptor will:

1. Counsel the student on the unacceptable behavior indicating the type of behavioral change that is expected; and
2. Document behavior using the “Academic Integrity Initial Reporting Form” including the expected response and timeframe for remediation, and
3. Refer student for required appointment with the Assistant Dean for Undergraduate Programs, Assistant Dean for Graduate Programs, faculty member, Director, Assistant Director, or Coordinator of specific program.
4. Submit the “Academic Integrity Initial Reporting Form” to the appropriate Student Affairs Committee Chair for further evaluation and recommendation.

5. Refer matter to the Office of the Dean of Students, if appropriate.

The University, School of Nursing, and/or an agency may remove a student from the clinical site for any of the following behaviors:

- Failure to come to clinical adequately prepared related to knowledge of treatment, medications, or plan of care
- Tardiness or unexcused absence
- Unprofessional communication behaviors (examples: personal texting, use of social media during clinical, use of profane language with patients, preceptors, staff, or faculty)
- Failure to treat others with respect, honesty and dignity
- Unprofessional dress and appearance
- Failure to demonstrate civility in the clinical area
- Arrival at clinical setting under the influence of alcohol or other substance that can impair judgment; arrival at site smelling of alcohol
- HIPAA violation or any breach in patient confidentiality
- Misuse or unauthorized use of computer resources or information
- Purposefully destroying property at the clinical site
- Stealing supplies or drugs
- Failure to comply with course or clinical site policies and protocols

A student may be asked to leave class for any of these behaviors:

- Persistent tardiness
- Disruptive behaviors listed above
- Disrespectful behavior
- Inattentiveness to classroom work

Approved by Executive Committee, 5/6/14

SIUE STUDENT RIGHTS AND RESPONSIBILITIES

INTERNAL GRADUATE STUDENT GRIEVANCE PROCEDURE

The University Student Grievance Procedure provides a means for students to bring a grievance against faculty and staff for violations of their student rights as described in the *Student Grievance Code* (SIUE, 1998) <http://www.siu.edu/policies/3c3.shtml>. This procedure does not apply to student grievances against another student or pertaining to student employment.

The first step in the grievance procedure is for the student to make a good faith effort to resolve academic issues **internally**. This informal action takes place within the School of Nursing and must be completed *prior to* the student filing a formal allegation at the University level. A **formal** grievance procedure, which takes place at the University level, may only be initiated after the internal procedure has been exhausted.

Internal Grievance Procedure: All grievances must be filed in the School of Nursing within sixty (60) working days from the actual occurrence, or the discovery of the occurrence, which forms the basis of the grievance. The appropriate order for resolving an internal grievance is to contact the:

1. Faculty or staff member involved, if applicable. If resolution is achieved, no further action is required. If resolution is not achieved, the student should move to step 2.
2. Department Chair and Assistant Dean for Graduate Programs. If resolution is achieved, no further action is required. If no resolution is achieved, move to step 3.
3. Provide a letter to the Graduate Student Affairs Committee (GSAC) outlining the grievance and steps taken to attempt resolution. A GSAC meeting will be scheduled within two weeks from receipt of the letter. If no resolution is achieved, move to step 4.
4. Associate Dean for Academic Programs. If resolution is achieved, no further action is required. If no resolution is achieved, move to step 5.
5. Dean of the School of Nursing. If resolution is achieved, no further action is required. If no resolution is achieved, the Dean will direct the student to the next appropriate step at the University level.

If the Internal Grievance Procedure does not provide resolution to the students' right issue against a faculty or staff member, then the student may file a **Formal** Grievance as described in the *SIUE Student Grievance Code*.

Approved by Faculty Council, 12/17/2012

STUDENTS' RIGHT OF ACCESS TO RECORDS

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

EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION

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

AMERICANS WITH DISABILITIES ACT (ADA)

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

SCHOOL OF NURSING STATEMENT ON DIVERSITY

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

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

The SON is committed to fostering diversity by:

- Actively seeking and admitting students from underrepresented, diverse populations within the region;
- Mentoring, retaining, and facilitating progression of students who are admitted to the SON;
- Preparing professional nurses who are competent in providing culturally specific care to diverse populations;
- Responding to the educational needs of a diverse student body;

- Recruiting, hiring, and retaining persons from underrepresented populations for positions as nursing faculty and staff in the SON;
- Creating an environment where all members of the SON interact in a positive manner. All SON policies, procedures, and programs will be compatible with and supportive of diversity;
- Encouraging the exploration and expression of beliefs, ideas, thoughts, and perspectives in a safe and supportive environment.

*Approved by Faculty Council April 2008
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**POLICY FOR THE ILLICIT USE OF CONTROLLED SUBSTANCES, PRESCRIBED
 CONTROLLED SUBSTANCES,
 AND OVER-THE-COUNTER DRUGS**

I Policy

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

II Drug Screening For Clinical Placement

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

Amphetamines
 Barbiturates
 Benzodiazepines
 Cannabinoids
 Cocaine
 Ethanol

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

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

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

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

IV Drug Screening For Cause

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

Procedure

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

1. Student will be removed from patient care after reporting off to appropriate personnel.
2. The Associate Dean for Academic Affairs in the School of Nursing and/or the faculty member responsible for the course will be contacted, along with the

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

V Drug Screening Documentation Procedure

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

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

VI School Of Nursing Hearing Panel

The Associate Dean for Academic Affairs in the School of Nursing shall appoint a hearing panel to be Chaired by the Assistant Dean consistent with the student's

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

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

VII Hearing Panel Procedure

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

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

VIII Sanctions And/Or Readmission

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

IX Appeal Of The Decision

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

X Re-Admission Drug Screening

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

Approved by faculty in SON: May 7, 2007

Minimum Technical Standards Policy for Admission and Matriculation

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

Competencies and Performance Standards

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

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

- ❖ The ability to identify cause and effect relationships in clinical situations;
- ❖ The ability to predict outcomes and interpret situational contexts;
- ❖ The ability to use reasoning skills sufficient to perform deductive/inductive thinking for nursing decisions;
- ❖ The ability to set and reorganize priorities based on changes in a patient's condition.

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

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

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

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

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

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

- ❖ The ability to calibrate instruments, operate equipment, and prepare and administer medications.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Policy and Procedure

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

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

It is the policy of the School of Nursing to comply with federal and state guidelines regarding students with disabilities so they can meet these required performance standards. Whether or not a requested accommodation is reasonable will be determined on an individual basis. Students should submit any requests for accommodations in writing prior to admission, allowing sufficient time for action on these requests. If a student becomes disabled after admission, the student should submit the request as soon as possible after admission. Written documentation of the disability that a student discloses must be provided. Determining what is reasonable accommodation is an interactive process that the student should initiate with the School of Nursing. The School of Nursing will provide reasonable accommodations, but is not required to make modifications that would fundamentally alter the nature of the program or provide auxiliary aids that would present an undue burden to the School of Nursing or our cooperating agencies. Accommodations cannot violate patient confidentiality or safety standards.

TECHNOLOGY AND INTERNET STANDARDS OF CONDUCT

I. Purpose

Interactive, electronic social media promotes dialogue among diverse groups of people using online technologies. To protect students, faculty, and staff, Southern Illinois University School of Nursing abides by the following standards of conduct. These standards apply to all academic uses to include but not limited to classroom, clinical, and simulation laboratory of technology and internet use as well as personal use where students and or faculty are identified as being associated with SIUE and/or the School of Nursing. Students are to embrace ethics and professionalism at all times in and out of the classroom and clinical agency environment.

II. Examples of Technology use include (but not limited to):

- a. Wireless and or Smart Phones (cellular phones)
- b. Mobile devices
- c. Laptop/notebook/personal computer
- d. Learning Management Systems (LMS) such as Blackboard

III. Examples of internet use include (but not limited to):

- a. Email
- b. Social networking (e.g.: Facebook, Twitter, Instagram, LinkedIn)
- c. Blogging
- d. Microblogging
- e. Podcasting
- f. Social news sharing
- g. Video hosting
- h. Wikis
- i. Wikipedia
- j. Flickr
- k. You Tube
- l. News groups

IV. **Guidelines for use of technology and internet in the classroom, lab, and clinical setting:**

- a. **Professional conduct:** Communications should not contain profanity, bullying, incivility, harassment, obscenities, sexually explicit, or malicious comments about the university, the school of nursing, faculty, students, clinical agency or agency staff. Respect for diversity, culture, and differing opinions/values is paramount.
- b. **Follow HIPAA regulations:** Students have an ethical and legal obligation to maintain patient privacy and confidentiality at all times. Information about patients and families must not be posted on social media sites or Learning Management Systems (LMS). HIPAA guidelines related to protected health information obtained during practicum experiences must be followed at all times (See the School of Nursing Statement for Academic Integrity Policy in the Student Handbook for violations and sanctions related to these guidelines)
- c. **Do not take and or post pictures or videos from classrooms, Simulated Learning Center for Health Sciences, or clinical practicum experiences on any media site:** Pictures and videos from class, clinical simulations, classmates/faculty, or affiliated institutions may not be taken without the written consent of the appropriate administrative personnel. SIUE School of Nursing logos and identification badges should not be recognizable without prior approval.
- d. **Do not disclose proprietary information or data obtained during practicum experiences.** Information, data, or images obtained during practicum experiences may be proprietary and cannot be disclosed on social media or LMS sites. Proprietary information or data includes, but is not limited to patient related information, name of the facility, and/or any other clinical practicum related information. Posting is a violation of patient rights, patient confidentiality and HIPAA. Students cannot post content or otherwise speak on behalf of Southern Illinois University, Edwardsville, School of Nursing, or Student Nurse Associations unless written permission is granted from the University.
- e. **Mobile devices in practicum settings are used for academic purposes only:** searching for information on medications, diagnoses, treatments, and patient teaching materials, as well as for contacting faculty for assistance.
- f. **Students are not allowed to use agency computers for personal use** such as to check email, use social media sites, or access Blackboard for course materials without prior approval.
- g. **Computer use in practicum experiences in agencies is limited to** charting on patients and searching for information on medications, diagnoses, treatments, and patient teaching materials.
- h. **Personal computer devices cannot be used to record any patient, agency, and/or staff information.**

- i. **Be cognizant of how you present yourself using social media. Portray yourself in a positive professional manner with each post made. Patients, classmates, instructors, employers may view online activity.** Many human resource departments and graduate schools check social media sites and individual online postings could be a reflection of personal/professional integrity.
 - j. **Social media sites are not the venue for faculty evaluations.** Student nurses should not make disparaging remarks about Southern Illinois University Edwardsville School of Nursing, including students, faculty members, and staff on any media or social media. **Remember you are legally responsible for any public statements containing any slanderous or threatening comments.**
 - k. **Responsibility to report:** Students have the responsibility to promptly report any identified breach of privacy, confidentiality, and/or improper use of technology and/or social media.
 - l. **Current undergraduate nursing students are not permitted to befriend faculty and/or staff or personal social media networks.**
- V. **Disciplinary procedures and sanctions for inappropriate use of technology and internet in the classroom, clinical, and simulation laboratory :**

The SIUE School of Nursing adheres to the University's Student Academic Code-3c2 (<http://www.siu.edu/policies/3c2.shtml>), Student conduct code-3c1 (www.siu.edu/policies/3c1.shtml), and the School of Nursing Statement for Academic Integrity located in the School of Nursing Student Handbook.

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- National Student Nurses Association. (n.d.). Recommendations for: Social media usage and maintaining privacy, confidentiality and professionalism. Retrieved from http://www.nсна.org/Portals/0/Skins/NSNA/pdf/NSNA_Social_Media_Recommendations.pdf

Approved by Undergraduate Student Affairs Committee 3/18/2013
 Approved by Faculty Council 5/2014

POLICY FOR THE USE OF DIGITAL MEDIA

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

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

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

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

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

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

Approved Faculty Council, 4/28/10

INTELLECTUAL PROPERTY INFORMATION PROCESS

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

Specific information for faculty about the Turnitin tool:

1. Any SIUE SON faculty can use the Turnitin in their course if they choose.
2. This program identifies statements/sections of student papers that are attributable to other sources; it does NOT check for grammar, spelling, or APA, etc.
3. The number of times a student may submit a draft can be decided as a school or by each individual faculty.
4. Each submission will generate a report showing the sections/sentences that are reportedly attributable to other sources.

5. Some statements or portions of a paper may be incorrectly flagged as being attributable to other sources, so faculty should review the report carefully.
6. A faculty may scrutinize any paper, regardless of the Turnitin report.
7. Students can submit their papers multiple times as a draft and get a report. When submitting the paper for the final time, DO NOT select the draft button and the paper will be submitted into the institutional database.
8. There are tutorials and references on the SIUE ITS webpage for both faculty and students at www.siu.edu/its/turnitin/index.shtml.

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

UNIVERSITY RETENTION POLICY

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

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

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

RETENTION POLICY BASED UPON GPA

Graduate Students in the School of Nursing Graduate Program are expected to maintain a cumulative GPA of 3.0 or above. If, after the completion of 15 semester hours, the

cumulative GPA falls below 3.0, the School of Nursing will comply with the University Graduate School policy on retention.

HIPAA Guidelines

The *Standards for Privacy of Individually Identifiable Health Information* ("Privacy Rule") were developed by the U.S. Department of Health and Human Services following approval of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). The Privacy Rule standards address the use and disclosure of individuals' health information as well as standards for individuals' privacy rights to understand and control how their health information is used. Registered nurses received training in HIPAA guidelines in previous educational programs or in employment situations. All graduate students must be cognizant of these guidelines and follow them at all times. For further information about these guidelines, click on the following website: <http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/index.html/>. Failure to follow these guidelines will result in disciplinary action.

CLINICAL COURSES

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

1. Clinical evaluation of student performance consists of both formative and summative methods of evaluation. Regular written and verbal evaluation sessions between the student and faculty and/or clinical preceptor will occur. These evaluations are used to determine progress and detect trends in performance. At the end of each academic term of clinical practicum, the faculty, utilizing a clinical evaluation tool, evaluates the student.
2. Nursing clinical courses are structured so that, as the student progresses through the program, he/she is expected to demonstrate increasing independence and competence in providing nursing care. A student must maintain satisfactory performance in the clinical practicum to progress in the specialization. If at any time the clinical faculty member determines that the student is not progressing satisfactorily or is demonstrating a pattern of suboptimal behavior, he/she may recommend to the Assistant Dean for Graduate Programs and the Graduate Student Affairs Committee that the student be placed on clinical probationary status.
3. The student may be relieved from the clinical practicum immediately if, in the instructor's professional judgment, the student is unable to provide safe patient care and/or if this deficit is so serious that it cannot be remedied in the given clinical time within the limits of available faculty supervision.

4. In some cases, the Graduate Student Affairs Committee may hold a special meeting to evaluate a clinical incident. If the Graduate Student Affairs Committee recommends termination of a student's enrollment in the specialization, the student forfeits the right to voluntarily withdraw.
5. The student will meet with the Assistant Dean for Graduate Programs and the course faculty, as well as the clinical preceptors (if appropriate) to discuss clinical performance and behavior that are problematic.

CLINICAL PROBATION

1. Decisions to place a student on clinical probation shall be the prerogative of the Graduate Student Affairs Committee based on recommendations from the faculty member who evaluated the student's performance and Assistant Dean for Graduate Programs and/or the Dean, School of Nursing.
2. The faculty member and the student will develop a formal plan of remediation.
3. A student placed on clinical probation may request to meet with the Graduate Student Affairs Committee to explain any unusual or extenuating circumstances concerning his/her performance in the clinical area.
4. The student will be notified in writing of the initiation of Clinical Probation, selected plan of remediation, and a time line for completing the required remediation.
5. During the clinical practicum, faculty/clinical preceptors will closely supervise the student and regular written evaluations will be completed on the student.
6. The student will meet with the faculty member weekly, as specified in the student's remediation plan during the period of clinical probation. At this time, clinical evaluations and classroom grades will be utilized to assist the faculty member when determining successful progress.
7. The period of probation will be for 30 days but will not extend beyond the academic grading period in which the clinical probation was initiated. At the completion of the 30-day period, the appropriate faculty and clinical preceptors will make a recommendation to the Graduate Student Affairs Committee regarding disposition of the student.
8. The recommendation to the Graduate Student Affairs Committee will be:
 - a. Restore the student to good standing.
 - b. Extend the probationary period for an additional period of 30 days to allow time for additional remediation.
 - c. Recommend to the Graduate School that the student be dismissed.
9. The student is referred to the most recent University policy information online at <http://www.siu.edu/policies>. A copy can be obtained from the offices of the Vice

Chancellor for Student Affairs, Provost and Vice Chancellor of Academic Affairs, Graduate School, or Admissions and Records.

ACADEMIC INTERVENTION

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

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

STUDENT ABSENCE POLICY

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

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

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

REQUESTING ACCOMMODATION FOR SHORT TERM LEAVE OF ABSENCE FOR DISABILITY/PREGNANCY OR PERSONAL REASONS

In the case of a temporary disability or pregnancy (less than one semester), the student must notify the Assistant Dean for Graduate Programs in writing (*See Request for Short or Long Term Leave of Absence or Accommodation form*). Nurse anesthesia students should also notify the Director and Assistant Director of the anesthesia program, and FNP students should notify the Director of the FNP program. All course faculty must be notified via email so that they can review upcoming assignments with students and make appropriate and reasonable accommodations. If students plan to attend class and/or practicum with a temporary disability, this information needs to be conveyed appropriately.

- For temporary disabilities lasting no longer than part of a semester (including pregnancies), students must submit verification form the healthcare provider that clearly states that the student's health status will not impair his/her ability to function safely in the classroom and clinical practicum experience.

This information must be updated during the semester for which the student is temporarily disabled or pregnant. In the case of permanent disability, University policies will be followed.

REQUESTING A LONG TERM LEAVE OF ABSENCE

Students may request to take a longer term (one semester or more) leave of absence (LOA) from the program for a temporary disability, pregnancy, or for personal reasons and will be reinstated to the same academic status, depending on the availability of courses and space in the specific program of study. If LOA was for disability that continues, student must submit verification from the health care provider stating that the student's health status will not impair his/her ability to function safely in classes or clinical practicum experiences (*See Health Care Provider Medical Release to Return to Class or Clinical form*). When students return, they must meet with the Graduate Student Advisor and/or the Assistant Dean for Graduate Programs to confirm progression through the remainder of the program.

To obtain a Long Term leave of Absence (LOA), a written request (*See Request for Short or Long Term Leave of Absence or Accommodation form*) must be submitted to the Graduate Student Affairs Committee, and should include the rationale for the request and anticipated date of return. The Graduate Student Affairs Committee will grant final approval/disapproval of a LOA based upon the academic status of the student and submission of all requested documentation. The School of Nursing reserves the right to deny a student's request for LOA if the student is not in good academic standing in their program or with the University.

GRADUATE READMISSION POLICIES

APPLICATION FOR READMISSION

1. Students who previously left the Graduate Program for academic or personal reasons, may apply for readmission. Such applications will be reviewed on a case-by-case basis by the Graduate Student Affairs Committee.
2. Consideration for readmission of a student to the graduate program in nursing is contingent upon (re)admission to the University.
3. Any consideration for re-admission of students into the graduate program will include consideration of space availability and a thorough review of the students' transcript and prior academic file. Students must meet all current graduate program admission requirements including cumulative GPA (minimum of 3.0 on a 4.0 scale) and prerequisite course work GPA (minimum of 3.0).

4. For students reapplying to the School of Nursing who have been previously enrolled in a nursing program, past experience in course work and clinical work will be evaluated for readmission. The School of Nursing specifically reserves the right to reject any applicant.

TRANSFER OF CREDITS

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

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

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

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

SECTION X
NURSE ANESTHESIA
SPECIALIZATION INFORMATION

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

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

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

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

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

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

Updated 6/24/14

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
DOCTOR OF NURSING PRACTICE
Nurse Anesthesia
Beginning Summer 2015

		Semester Hours	(Minimum)
Semester 1 (Summer Year One)			
PAPA 561	Biostatistics/Epidemiology	3	
Nurs 514	Advanced Human Physiology	4	
Nurs 515	Advanced Human Pathophysiology	<u>4</u>	
		11	
Semester 2 (Fall Year One)			
Nurs 600	Theory Guided Practice	3	
Nurs 516	Pharmacology for Advanced Nursing Practice	3	
Nurs 604	Evaluating Evidence for Improving Practice/Health Care Outcomes	3	
Nurs 564	Chemistry and Physics Applied to Anesthesia	<u>3</u>	
		12	
Semester 3 (Spring Year One)			
Nurs 605	Health Policy & Finance for Advanced Nursing Leadership	3	
Nurs 513	Advanced Health Assessment & Practicum	3	90
Nurs 563	Pharmacology Related to Anesthesia	3	
Nurs 529	Orientation to Nurse Anesthesia Practicum	<u>2</u>	90
		11	
Semester 4 (Summer Year Two)			
Nurs 565a	Theoretical Foundations of Nurse Anesthesia I	5	
Nurs 565b	Clinical Practicum in Nurse Anesthesia I	1	256
Nurs 695a	Health Care Innovations Seminar	<u>1</u>	
		7	
Semester 5 (Fall Year Two)			
Nurs 691	Organizational and Systems Leadership in Health Care	3	
Nurs 566a	Theoretical Foundations of Nurse Anesthesia II	5	
Nurs 566b	Clinical Practicum in Nurse Anesthesia II	2	512
Nurs 697a	Doctoral Project Design and Management I	<u>1</u>	
		11	
Semester 6 (Spring Year Two)			
Nurs 560	Ethical, Legal & Systemic Issues in Anesthesia Practice	3	
Nurs 567a	Theoretical Foundations of Nurse Anesthesia III	5	
Nurs 567b	Clinical Practicum in Nurse Anesthesia III	2	512
Nurs 697b	Doctoral Project Design and Management II	<u>1</u>	
		11	
Semester 7 (Summer, Year Three)			
Nurs 670a	Clinical Leadership in Anesthesia Seminar	1	
Nurs 670b	Clinical Leadership in Anesthesia Practicum	1	256
Nurs 697c	Doctoral Project Design and Management III	<u>3</u>	
		5	
Semester 8 (Fall Year Three)			
Nurs 668a	Clinical Correlations & Innovations in Anesthesia Practice I	3	
Nurs 668b	Clinical Practicum in Nurse Anesthesia IV	2	512
Nurs 697d	Doctoral Project Design & Management IV	<u>1</u>	
		6	
Semester 9 (Spring Year Three)			
Nurs 669a	Clinical Correlations & Innovations in Anesthesia Practice II	3	
Nurs 669b	Clinical Practicum in Nurse Anesthesia V	2	512
Nurs 697e	Doctoral Project Design & Management V	<u>1</u>	
		6	
Total Credits		80	2,740 Hours

Updated 7/15/14

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TERMINAL SPECIALIZATION COURSE OBJECTIVES

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

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

- I. Perform a pre-anesthetic evaluation of the patient to include:

- a) Evaluation of patient history, physical findings, laboratory, radiologic and additional diagnostic data.
 - b) Patient interview to establish rapport, gain additional information and prepare the patient psychologically for anesthesia and surgery by discussing anesthetic options.
2. Develop a plan of anesthesia care commensurate with patient needs and consistent with the overall medical and nursing regimen.
 3. Identify pathologic, physiologic or pharmacologic problems that might complicate anesthetic management and adapt the anesthesia care plan to accommodate patient needs.
 4. Select, test and assemble equipment necessary for the safe conduct of anesthesia, repairing or replacing defective devices. Conducts a comprehensive equipment check.
 5. Prepare the patient physically for induction of anesthesia as evidenced by:
 - a) Apply appropriate monitoring devices such as EKG monitor, BP monitoring devices, pulse oximeter, capnographic monitor, and temperature monitoring device and other monitors required by the patient's physical condition and the surgical or obstetrical care required.
 - b) Accurately interpret data provided by these devices to provide the patient with increased optimization of anesthesia care.
 - c) Calculate, initiate, and manage replacement fluid therapy and blood components for the patient using physiologic principles of fluid management and electrolyte therapy.
 - d) Interpret and utilize data obtained from various non-invasive and invasive monitoring modalities to include but not limited to arterial lines, central venous pressure lines and pulmonary artery catheters.
 - e) Recognize and appropriately respond to anesthetic complications that occur during the peri-anesthetic period.
 - f) Pass the Council on Certification of Nurse Anesthetists' (CCNA) certification examination in accordance with CCNA policies and procedures.
 6. Provide general anesthesia for all ages and categories of patients for a variety of surgical, obstetrical, and medically related procedures as evidenced by the:
 - a) Administration of anesthetic induction agents for routine and emergency/trauma cases ensuring a rapid and safe induction of anesthesia.
 - b) Selection and utilization of all current anesthesia techniques, agents, adjunctive drugs and equipment in providing anesthesia care.
 - c) Safe discontinuation of all anesthetic agents utilizing appropriate reversal of adjunctive drugs at the termination of the procedure to ensure a smooth emergence from anesthesia.

7. Recognize developing conditions and potential complications, taking appropriate actions with reference to complications that may arise during the course of anesthetic management, seeking consultation with CRNA preceptors/mentors and physicians whenever necessary.
8. Demonstrate skill in airway management as evidenced by:
 - a) Assessing respiratory status and ensuring airway patency, implementing measures to correct obstruction.
 - b) Performing atraumatic endotracheal intubation when patient's condition, position or surgical procedure indicates such a method of airway management.
 - c) Effective use of respiratory physiology and pathophysiology using the interpretation of blood gas analysis and pulmonary function testing to manage the ventilatory care of patients during anesthesia.
 - d) Utilizing objective criteria to assess respiratory status prior to extubation of the trachea both in the perioperative and critical care clinical settings, thus enhancing patient safety.
9. Administer and/or manage a variety of regional anesthesia techniques including but not limited to subarachnoid blocks, epidural anesthesia and analgesia, brachial plexus blocks, and intravenous regional anesthesia.
10. Utilize appropriate principles of basic and behavioral sciences in protecting patients from iatrogenic complications as evidenced by:
 - a) Positioning or supervising positioning of patients to assure optimal physiologic function and patient safety.
 - b) Ensuring the safety of the patient and operating room personnel by checking anesthesia equipment and supportive devices.
 - c) Acting as patient advocate and manager of critical incidents for patients undergoing anesthesia and surgery.
 - d) Establishing optimum communication and rapport with other health care team members vital to the patient and the conduct of anesthesia care.
 - e) Recognizing the need for, and participating in, the peer review process, concurrent and retrospective auditing of anesthesia care, and risk management programs, to assure the quality of patient care.
11. Function as a team leader/member in cardiopulmonary resuscitation. Maintain Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), and CPR certification.
12. Participate in the education of patients and the community of interest.
13. Function within appropriate legal requirements as a licensed professional nurse, accepting responsibility for his/her own practice.
14. Utilize commonly accepted infection control standards and precautions.

15. Demonstrate personal and professional integrity and the ability to interact on a professional level as evidenced by:
 - a) Effectively communicating with all individuals influencing patient care
 - b) Utilizing appropriate verbal, nonverbal and written communication in the delivery of peri-anesthetic care.
16. Be vigilant in the delivery of patient care.
17. Deliver culturally competent peri-anesthetic care throughout the anesthesia experience.
18. Apply theory to practice in decision-making and problem solving.
19. Provide nurse anesthesia care based on sound principles and research evidence.
20. Develop a professional role as evidenced by:
 - a) Participation in activities that improve anesthesia care
 - b) The ability to function within appropriate legal requirements as a registered professional nurse, accepting responsibility and accountability for his or her practice
 - c) Interaction on a professional level with integrity
 - d) Teaching / Educating others
 - e) Participation in continuing education activities to acquire new knowledge and improve his or her practice
 - f) Participation in state and national professional associations to prepare for active involvement as an advanced practice professional nurse

Academic Policies

1. Student Registered Nurse Anesthetists [hereby referred to as SRNAs] are responsible for policies in the current SIUE School of Nursing Graduate Handbook and SIUE Catalog including those described in this section that addresses specific requirements unique to the Nurse Anesthesia Specialization.
2. Students will observe the scheduled semester breaks and holidays of SIUE (see SIUE website for dates). Absence from the classroom or clinical practica may result in “incomplete” or unsatisfactory course grades and/or the deferral of graduation until the time is made up.
3. Students are responsible for all classroom material covered during any absence. Generally **NO** make-up exams are allowed.

4. The Nurse Anesthesia program recommends that students not be employed when they begin their clinical rotations. Students who chose to be employed **MUST** maintain satisfactory performance in both didactic and clinical areas. If a student does work,

THE STUDENT WILL NOT:

- a. work 11-7 shift prior to a clinical day. A minimum of ten (10) hours of free time must be ascertained prior to reporting to class or clinical.
 - b. be allowed to miss a scheduled class or clinical because of work schedules.
 - c. accept employment as a nurse anesthetist or represent himself or herself as a nurse anesthetist while enrolled in the specialization.
 - d. perform any function deemed to be strictly interpreted as being within the scope of practice of a Certified Registered Nurse Anesthetist when not participating in an Nurse Anesthesia Specialization Clinical Practicum.
5. Attire and professional demeanor: Personal appearance reflects the standards of the School and University; therefore, the importance of neatness and cleanliness in the clinical setting cannot be overemphasized. **Students should dress consistent with the guidelines at the clinical site in which they are assigned.**

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

Clinical Guidelines

1. Students are expected to follow all personnel policies of the assigned clinical site.
2. All student anesthetists will be in scrubs no later than 6:00 AM unless directed otherwise by the institution clinical coordinator or designee.
3. Induction of anesthesia will not be started unless the following minimum events have occurred:
 - a. Interview, assessment, evaluation, and counseling of the patient and significant or appropriate family members.
 - b. Formation and discussion of patient care plan and management with the instructor (CRNA or attending anesthesiologist) is mandatory.

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

or when directly involved in the anesthesia care during level I and II clinical rotation. During level III and IV clinical rotation, a daily written care plan should be turned in on the most complex case of the day. At level V, students are expected to complete anesthesia care plans when confronted with a new, challenging or complex clinical situation. Care plans should be given to the preceptor prior to administering the planned anesthetic. Due to the increasing number of outpatient procedures and same day admits, it may be impossible to have a complete written care plan prior to the morning of surgery. In these instances, the anesthetic plan must be formulated and discussed with the clinical preceptor before induction. The clinical preceptor will review the care plan making appropriate written comments and signing the form. The care plan serves as a means of verifying the preceptor's concurrence with the planned technique. Completed care plans are to be submitted to the SIUE Anesthesia faculty.

Attendance Policy

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

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

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

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

Frequent tardiness will affect the individual's ability to gain clarification of key instructional points and will negatively impact learning. Punctuality and preparation are key attributes of a professional and must be demonstrated consistently.

If a student misses a specific clinical experience or rotation, the experience or practicum may be rescheduled at the discretion of the Program Coordinator or Assistant Program Coordinator.

MEETINGS

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

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

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

Nurse Anesthesia Practicum

Guidelines for Clinical Practicum

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

All anesthesia clinical preceptors are Certified Registered Nurse Anesthetists (CRNAs) or anesthesiologists licensed in the appropriate jurisdictions and credentialed by the appropriate agencies to provide care to patients in the surgical, obstetrical, and critical care environments prior to becoming involved in the clinical instruction of Student Registered Nurse Anesthetists (SRNAs). The clinical preceptors are responsible for clinical instruction, including the evaluation of student performance in the clinical setting. The evaluation includes assessment of the student's acquisition of knowledge, demonstration of the student's understanding of anatomy, physiology, pathophysiology, chemistry, physics, pharmacological principles and agents, interpretation of data received from all available sources, synthesis and application of principles of anesthesia, and the demonstration of acquired technical skills. Students at no time should be precepted by an Anesthesiologist Assistant (AA).

Clinical Practicum Experiences

Purpose:

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

Objectives:

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

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

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

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

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

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

Clinical Affiliation Criteria

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

1. Recognize and adhere to the organizational culture of the particular facility:
 - a. Follow rules and regulations established for the agency.
 - b. Follow rules and regulations established for the affiliations.
 - c. Understand and utilize the proper "Chain of Command" in a variety of circumstances.
 - d. Become familiar with the accepted procedures for communications (telephones, beepers, computers).

2. Prepare the environment for safe, rapid, flexible management of the patient:
 - a. Assemble and check anesthesia equipment and monitors.
 - b. Organize the prescribed room/rooms in an efficient manner for the planned case/cases to include emergency interventions.
 - c. Become familiar with the surrounding environment to include retrieving supplies and equipment.
 - d. Become familiar with the policies and procedures that govern anesthetic care delivery.

3. Plan the appropriate anesthetic management pre-operatively, intra-operatively, and post-operatively:
 - a. Assess patients for classifications, organ systems, drug and fluid therapy, diagnostic and consultative study results, previous anesthesia experiences, NPO status, and full stomach.
 - b. Calculate fluid and blood replacement.
 - c. Plan for appropriate types of inductions, awake vs. rapid sequence vs. modified rapid sequence, nasal vs. oral intubations, and fiberoptic intubations.
 - d. Evaluate patient physiologic data, and planned procedures to determine the appropriate need for non-invasive or invasive monitoring.
 - e. Operate and describe routine equipment utilized in emergency cases and major surgical procedures including arterial lines, CVP, Swan Ganz catheters.
 - f. Evaluate a patient and administer anesthesia for an emergency procedure without a formal, written anesthetic management care plan.

4. Analyze the various facilities and determine information regarding the following:

- a. Composition of the Anesthetic Care Team.
- b. Departmental management strategies regarding policies, organizational culture, budget, finances, scheduling, inservice.
- c. Utilization of other health care providers and support personnel.
- d. Care and ordering of anesthesia supplies, equipment, and resources.
- e. Care and recording policies for narcotics and other anesthesia related drugs.
- f. Required information needed on anesthetic records, billing cards, other patient reports.
- g. Protocols for various procedures.
- h. Infection control protocols in various facilities.
- i. Policies governing banked blood and blood products.

Conditions of Instruction and Supervised Experience

1. The clinical affiliation site in conjunction with SIUE Nurse Anesthesia Faculty will appoint a Clinical Coordinator.
2. The Clinical Coordinator along with the Program Coordinator and Clinical Liaison will endeavor to assure that the learning objectives are met.
3. An orientation will be provided for the SRNA at the beginning of the affiliation experience. This orientation will include, but not be limited to, the affiliating institution's policies, procedures, and patient safety rules.
4. The SRNA's daily assignments will be made by the Clinical Coordinator or designee, keeping in mind the objectives of the affiliation rotation.
5. Specific requests may be made by the SRNA if a certain case type is needed to meet the Council on Accreditation minimum numbers and to meet the objectives of the affiliation.
6. Each student will receive a written evaluation of his/her clinical performance upon completion of the rotation from the Clinical Coordinator or designee.
7. Disciplinary problems will be reported to the Program Coordinator for evaluation in accordance with college policies.
8. SRNAs will comply with the existing rules and regulations of the Department of Anesthesia to which they are assigned.

Patient Safety

The nature of clinical nursing courses is such that students are involved in the direct delivery of patient care services. The primary purpose of any course is to provide education for students. However, when direct patient care is involved in the learning experience, the safety and well-being of

patients are of paramount concern. Clinical nursing courses are structured so that as students progress through the program, they are expected to demonstrate increasing competence and independence in providing nursing care to assigned patients.

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

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

Specific Practicum Guidelines

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

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

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

2. The ratio of student to instructor in the clinical area at any given time shall not exceed 1:1 with the appropriate direction related to:
 - a. The student's period of enrollment in the program and his/her readiness to assume responsibility.
 - b. The physical status of the patient.
 - c. The complexity of the anesthetic and/or surgical procedure.
 - d. The ability of the instructor.

- e. A CRNA or anesthesiologist must be physically present and directly supervising the SRNA's during induction and emergence in all pediatric cases through all phases of the program.
3. The student shall be involved in the total anesthesia management of the patients assigned to his/her care.
Restriction of a student's clinical participation in total anesthesia management, impeding his/her opportunity to develop as a competent, safe, nurse anesthesia practitioner capable of functioning in all type of practice settings, constitute a critical weakness.
- a. SRNA's management of the patient shall include, but not be limited to:
 - 1) Preoperative evaluation of the patient including the interview, physical assessment, and review of appropriate patient records.
 - 2) Development of a written or verbal anesthetic care plan which demonstrates that planning of the anesthesia process is occurring prior to each anesthesia administration.
 - 3) Administration of the anesthetic.
 - 4) Participation in and decision making during the anesthesia management.
 - 5) Implementation and maintenance of an accurate complete anesthesia record.
 - 6) Participation in immediate postanesthesia care.
 - 7) The conduction of post-anesthesia evaluation
 - 8) Appropriate and accurate documentation of controlled substances and their return to the appropriate area.
4. Basic principles of anesthesia practice shall be identified for each clinical practice setting and included in an orientation to the practicum:
- a. Pre- and post-anesthesia evaluation of the patient.
 - 1) Interview techniques
 - 2) Evaluation of the patient's chart
 - 3) Physical assessment of the patient
 - b. Charting
 - c. Monitoring of Vital Signs

- d. Familiarization with basic anesthesia equipment available at the clinical site
- e. Overview of anesthetic agents and accessory drugs available.

- f. Departmental philosophy and ethical position relative to the provision of anesthesia care.

Work related injuries

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

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

Absences as a result of illness

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

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

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

Guidelines for Call Experience

Purpose

The growth and development of the student is aided by the selection of specific learning experiences. The purpose of the call experience is to assist the student in refining skills, and developing self-confidence and competency in the management of emergent, unscheduled procedures. These

procedures often include patients who may not be ideally prepared for anesthesia and surgery, such as pediatric patients, medical and surgical emergencies, obstetrical emergencies, and trauma in patients of all ages and ASA categories.

Objectives

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

1. Apply theoretical knowledge and prior clinical learning to select optimum techniques of anesthesia in the emergency surgical and obstetrical patient.
2. Participate as a member of the hospital health team in such areas as cardiopulmonary resuscitation, patient assessment, and management of critical respiratory emergencies.
3. Use effective communication skills, practicing professionalism and courtesy in anesthetist-physician, anesthetist-nurse, and anesthetist-patient interactions.

Time Commitment

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

Clinical Affiliate Call Guidelines:

1. The clinical site must assure patient safety, student learning, and adherence to the standards and guidelines for clinical practice. The SRNA may not take call without a CRNA or anesthesiologist physically present and immediately available when the SRNA is caring for a patient.
2. Established policies and procedures at each clinical site and agency will outline the specific call expectations of the students.
3. The Clinical Coordinator at each clinical site will clarify call room locations, break rooms, study rooms, communication procedures, attire, etc.

4. The Clinical Coordinator at each respective will adhere to the Nurse Anesthesia Specialization policy relative to the Call Experience.
5. The student will not be scheduled for a clinical call experience that exceeds 16 hours on weekdays and 24 hours on weekends without the following day (post call day) free of clinical commitments.
6. All SRNA's must have a minimum of 10 hours of non-clinical time before returning to the clinical area.
7. It is the responsibility of the staff anesthesiologist and/or CRNA to determine which emergency cases the nurse anesthesia student will participate in during the call experience.
8. The Clinical Coordinator will identify the clinical responsibilities of the student during the call experience (i.e. responses to ER, OB, and CPR/Resuscitation Team).
9. The student must notify the preceptor before **EACH AND EVERY CASE OR PROCEDURE.**
10. The Clinical Coordinator, at the respective clinical site, will ensure compliance with guidelines for supervision outlined in the Clinical Practicum Guidelines in the Nurse Anesthesia Specialization Mandatory Activity Packet.
11. No student will be scheduled for call experience on class days or the day before class during all semesters of the program.
12. The affiliating agency will provide CRNAs and anesthesiologists committed to teaching students, and study time for the SRNA to prepare for clinical assignments and responsibilities.
13. The clinical affiliation site will provide quarters for students while on in-house call at the facility without charge to the SRNA or SIUE School of Nursing.

Relationship to Students While Assigned to a Clinical Practicum

1. The Program Coordinator or Assistant Program Coordinator is responsible for coordinating the clinical experiences for the SRNA:
 - a. Scheduling students for practicum experiences
 - b. Coordinating clinical experience expectations with the affiliating clinical coordinator
 - c. Making visits at affiliating agencies at a minimum of once a year while students are physically present at the agency
 - d. Reviewing each student's evaluation of the experience with the affiliating clinical coordinator at the conclusion of the student's rotation.

2. While on affiliation rotation, the SRNA will immediately notify the Program Coordinator and Assistant Program Coordinator of any problems during the affiliation. If an unacceptable daily evaluation is received, the SRNA must notify their assigned nurse anesthesia faculty advisor within 24 hours.

Clinical Objectives - Specialty Rotations

Cardiothoracic Anesthesia

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

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

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

Pediatric Anesthesia

Upon completion of the rotation focused in pediatrics the student will be able to:

1. Perform a comprehensive preoperative evaluation of the pediatric patient.
2. Describe common premedicant drugs, write sample orders with the appropriate dosage and route of administration.

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

- (2) Myringotomy
 - (3) Circumcision
 - (4) Hernia repair
 - (5) Orthopedic procedures
 - (6) Cerebral palsy
 - (7) Mental retardation
 - (8) Abdominal surgery
10. Demonstrate the skill of orotracheal or nasotracheal intubation. Identify characteristics of the pediatric airway as compared to adult airways and identify the advantages, disadvantages and indications of endotracheal intubation.
 11. Calculate crystalloid replacement on the basis of patient weight, amount of exposed field, insensible water loss, length of procedure and state of hydration. Blood volume/replacement strategies will be detailed. Determine blood/fluid volumes in neonates, infants and children.
 12. Describe the management of the child with croup/epiglottitis.
 13. Articulate the management of a cardiac arrest in the infant/small child in the operating room.
 14. Demonstrate the use of a variety of general anesthetic techniques in the pediatric patient population to include inhalation, intravenous, dissociative, and balanced anesthesia.
 15. Describe the pathophysiology, predisposing factors, anesthetic management and treatment of malignant hyperthermia.

Obstetrical Anesthesia

Purpose

The purpose of this clinical practicum is to provide the SRNA with added educational and professional experiences in anesthesia and analgesia for the obstetrical patient, fetus, and/or neonate during all aspects of labor, vaginal delivery, or Cesarean section.

Overall Objectives

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

1. Assess the physiologic changes peculiar to the mother and fetus during the various phases of pregnancy and labor.

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

Specific Terminal Objectives

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

1. Outline an obstetrical preoperative visit and note how it differs from routine surgical preoperative interviews, to include classic physiologic changes associated with pregnancy.
2. Plan and or implement anesthetic plan for the administration of anesthesia for the following obstetric emergencies: abruptio placenta, placenta previa, fetal distress, retained placenta, tetanic uterine contractions, amniotic fluid embolus.
3. Provide a rational plan of anesthetic management for routine and emergency C-sections under general or regional anesthesia.
4. Describe the pharmacokinetic/pharmacodynamic profile of the following local anesthetics: lidocaine, mepivacaine, bupivacaine, tetracaine, and chloroprocaine.
5. Describe and demonstrate the technique of regional anesthetics including anatomical and physiological considerations, indications and contraindications for; continuous epidural, single-dose epidural and subarachnoid blocks.
6. Detail the specifics of infant resuscitation, including appropriate drugs and dosages.
7. Articulate the anesthetic considerations for pre-eclampsia, and eclampsia to include potential drug interactions, and pertinent physiology.
8. Describe the effects of anesthetic agents/adjuncts on uterine activity, blood flow, and the progress of labor.
9. Detail Mendelson's syndrome and treatment regimes applicable to the parturient.
10. Outline the anesthetic considerations for the pregnant patient (preterm) presenting to the anesthetist for non-obstetrical surgery. Include teratogenicity of agents, monitoring of fetus, implications of maternal hemodynamic changes.

11. Describe the etiology, physiologic course and treatment for supine hypotensive syndrome.
12. Describe the indications and contraindications for vasopressor use in the obstetrical population.
13. Discuss the systemic effects of IV analgesics/sedatives in the parturient and the newborn.

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

Clinical Evaluation of Students

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

Visit to Affiliations

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

Records

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

REQUIREMENTS TO ALLOW HIM OR HER TO WRITE THE CERTIFICATION EXAMINATION.

Expenses

SRNAs are responsible for their own expenses.

Attire

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

Lockers

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

Evaluation Process

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

Student Evaluation

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

1. Self-Evaluation—Each student shall evaluate his/her performance on each clinical case. This self evaluation shall be documented on the Nurse Anesthesia Clinical Evaluation Form

(See pages 140-146 in this Handbook). All students will complete two Self-Evaluation Exams (SEE) offered by the National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA) during the program. The first one will be taken at the end of the completion of the fourth semester of study (August/September) and the second one will be completed at the end of the seventh semester of study (August/September). The results of the first SEE exam will be used by students and faculty to identify areas needing further study. The second SEE exam results will be included as part of the formal grading process in NURS 569a, the final didactic course in the program. A cumulative scaled score equal to or higher than the average scaled score for all examinees nationally must be achieved by each student in order to successfully pass NURS 569a without further remediation (See NURS 569a Syllabus for details).

2. Care Plans - All students shall complete care plans on a daily basis. Care plans are turned in to the clinical instructor for review and comment prior to the induction of anesthesia. The care plans are also reviewed periodically by the Assistant Program Coordinator and a selected number will become part of the clinical grade for each course level.
3. Clinical Evaluation - Each student is evaluated daily by the clinical instructor(s) supervising the student to include all individual cases. These daily evaluations are used primarily to provide feedback to the student regarding his/her performance, and to demonstrate progression in learning. At the end of each rotation the clinical coordinator is encouraged to consult with all clinical instructors who have worked with the student and complete a summative evaluation. These evaluations are compiled by the Nurse Anesthesia Clinical Liaison, Program Coordinator, Assistant Program Coordinator or their designee. Clinical grades are a percentage of the overall course grade a student achieves. In order to pass a course the student must successfully complete the clinical practicum

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

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

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

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

and the Coordinator or the Assistant Coordinator of the anesthesia major. Documentation of the events will be placed in the students file.

Faculty Evaluation

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

Strategies utilized in evaluation of faculty include:

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

Program Evaluation

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

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

Council on Accreditation of Nurse Anesthesia Educational Programs when conducting an accreditation review. Information obtained from these evaluations is compiled by the Program Coordinator and reviewed by the Graduate Advisory Committee. Goals for improving and strengthening the specialization are derived in part from faculty feedback via this mechanism.

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

TUITION AND EXPENSES

1. In addition to regular tuition and fees the Nurse Anesthesia specialization assesses a clinical charge each semester the student is enrolled in a clinical course. The fee is reviewed annually and subject to change as required. Students will be notified of any changes in the assessment fee prior to implementation. The current fee is \$4,600.00 per clinical semester beginning with the Summer-Year 2 Clinical Practicum and continuing each semester until graduation.
2. Book costs for the program are estimated to be approximately \$2500 to \$3200. Students **must** purchase the books required for each course.
3. Anesthesia related Professional Liability insurance for students enrolled in the Nurse Anesthesia Specialization will be provided through the Southern Illinois University Edwardsville self-insurance program.
4. **SEE Exam:** All students will be taking the Self-Evaluation Examination (SEE) from the Council on Certification of Nurse Anesthetist (an evaluation of the student's knowledge and preparation to take the National Certifying Examination). It is offered by the Council on Certification of Nurse Anesthetists. This test will be taken twice during the program, at the end of the first and 2nd years of study. The results of the first SEE exam will be used by students and faculty to identify areas needing further study and will be counted as an experience toward completion of NURS 566a (see syllabus). The second SEE exam results will be included as part of the formal grading process in NURS 569a, the final

didactic course in the program. A cumulative scaled score equal to or higher than the average scaled score for all examinees nationally must be achieved by each student in order to successfully pass NURS 569a without further remediation (See NURS 569a Syllabus for details).

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

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

RECORDS

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

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

1. Application for admission
2. Interview Letter
3. Acceptance Letter
4. Academic records
5. Completed Periodic, End-of-Semester, and Summary Evaluation Forms

6. Clinical case records
7. Corrective action forms and decisions
8. Copies of transcripts and application for the Certification Examination

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

REQUIREMENTS FOR GRADUATION

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

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

PROCEDURE FOR WRITING THE CERTIFICATION EXAMINATION

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

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

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

ACTIVE CLINICAL SITES

Clinical Site	Clinical Coordinator	Anesthesia Director	Student Level	Specialty/rotation Emphasis
Anderson Hospital 6800 State Route 162 Maryville, IL 62062	Sherry Blaha 618-288-5711 Sblaha9@hotmail.com www.andersonhospital.org	Dr. James Powell 618-650-5257w 618-288-5711 jpo30@charter.net	III, IV, & V	General/ Thoracotomies or Pulmonary Cases/OB
Blessing Hospital P. O. Box 7005 Quincy, IL 62305	Katie Cashman, CRNA, APN 217-223-1200w Ext. 6330 217-653-6917c kacashman@gmail.com www.blessinghospital.com	Dr. Joe Kuhlman 217-223-8400w Ext. 6336	I,II,III,IV,V	General, Neuro, O.B./ Emergency Cases & Thoracic Epidurals
Centralia Surgery Center 1045 Martin Luther King Drive Centralia IL 62801	David Lees, CRNA, APN 660-815-0592 http://communitycareinc.com/surgery-center-websites/surgery-center-of-centralia/	Dr. Jason Fischer 618-532-3110	III, IV, & V	General/MAC, Ortho, Ent, Endo, Gyne, Pain, Podiatry, Urology
Community Memorial Hospital 400 Caldwell, Staunton, IL 62088	Paul A. Darr, CRNA, APN 618-444-3666c 618-635-4310w pdarr@siue.edu www.stauntonhospital.org	Paul A. Darr 618-444-3666c 618-635-4310w pdarr@siue.edu	III, IV, & V	Outpatient General, MAC, Airway Management Skills, Pain Mgmt., Independent practice
Cross Roads Hospital #8 Doctors Park Road Mt. Vernon, IL 62864	Don Bertschi, CRNA 618-244-5500w 618-204-8710c donbertschi@yahoo.com www.crossroadscommunityhospital.com/	Dr Brad Bernstein 618-244-5500w 618-204-8710c babmjb@pol.net	O,I II	General, Independent practice/ Special Airway Management Techniques & Neuroskeletal
Fayette County Hospital 650 West Taylor Vandalia IL 62471	Kent Fair, CRNA, APN 618-237-0737 618-242-4150c www.fayettedcountyhospital.org	Kent Fair, CRNA, APN 618-237-0737 618-242-4150c 618-244-1696f	I, II, III, IV, V	Rural, Independent Practice, General, Regional

Gateway Regional Medical Center 2100 Madison Avenue Granite City, IL 62040	Jacob Presler, CRNA, APN 618-798-3057w	Waggas Khan, MD 618-798-3000	O,I II,III,IV,V	General, O.B.
Herrin Hospital 201 South 14th Street Herrin, IL 62948	Rick Boren 618-303-6541c 618-942-2171w rboren@msn.com www.herrinhospital.org/	Dr. Thomas Firestone 618-942-2171w Ext 35627	O,I,II,III,IV, V	General Independent practice/ Regional Anesthesia
Hillsboro Area Hospital 1200 East Tremont Hillsboro, IL 62049 217.532.6111	Bart Wetzel 217-532-6111w 217-556-0868c vai2003@consolidated.net www.hillsboroareahospital.org	Bart Wetzel 217-556-0868c Theresa Rapp, Dir of Surgical Svcs. 217-532-4272w theresarapp@hillsboroareahospital.org	III, IV, V	Outpatient General, MAC, Airway Management Skills, Pain mgmt., Independent practice
Jersey Community Hospital 400 Maple Summit Road Jerseyville, IL 62052 (NON-ACTIVE)	John Woodward 618-946-4464c 618-498-8420w woodardj@yahoo.com (Non-Active)	Larry Rawlings 618-498-8420w	O,I,II,III,IV, V	General Independent practice/ Special Airway Management Techniques & Regional Anesthesia
Memorial Hospital Belleville 4500 Memorial Drive Belleville, IL 62223	Michelle Ertel CRNA, APN mndionne@gmail.com 618-257-4076w 217-246-2901c www.memhosp.com	Michelle Ertel CRNA, APN mndionne@gmail.com 618-257-4076w Kevin Stein, CRNA, APN kstein@siue.edu 618-257-4076w	O,I,II,III,IV, V	General, Neuro Cardiac/ Vascular & Anesthesia for Craniotomies and other Neuro
Memorial Hospital of Carbondale 405 West Jackson Carbondale, IL 62901-1467 618-549-0721	Tony Pinto CRNA, APN tdpinto2004@yahoo.com 618-325-5723 www.memorialhospitalofcarbondale.org/	Dr. Kenny Gar 618-549-0721w Ext. 65850	I, II, III, IV, V	General, Regional, O.B. Pediatrics, Neuro/ Regional, Craniotomies, Pulmonary- Thoracotomies
Memorial Hospital 1900 State Street Chester IL 62233	Sandy Evans, CRNA 618-534-1644c Asap94@earthlink.net www.mhchester.com/	Sandy Evans, CRNA 618-534-1644 shays@mhchester.com	III, IV, V	General

<p>Memorial Medical Center 701 North First Springfield, IL 62781</p>	<p>Jayne Fiaush, CRNA 217-306-7626w 217-553-8209c Fiaush.jayne@mhsil.com</p> <p>Terry Sommer, CRNA 217-788-4200w sommer.terrance@mhsil.com</p> <p>www.memorialmedical.com</p>	<p>Lori Bruntjen-Carter Director of Anesthesia Services 217-788-3752w 217-467-5050p Bruntjen-Carter.lori@mjsil.com</p> <p>Melony Ellis Anesthesia Manager 217-788-3509w 217-492-3443p Ellis.Melony@mhsil.com</p>	<p>O,I,II,III,IV, V</p>	<p>General, Neuro, Cardiac, Peds</p>
<p>Mercy Hospital 615 S. New Ballas Road St. Louis, MO 63141</p>	<p>James J. Gibbons MD 314-540-6772c gibbonsjim@aol.com</p> <p>www.mercy.net/</p>	<p>Dr. Donald Arnold</p>	<p>III, IV, & V</p>	<p>General, Peds (select)/ Burn Cases</p>
<p>Pai Oupatient Center 2810 Frank Scott Parkway W, Suite 716, Copperhead Ctr. Belleville IL 62223</p>	<p>Andy Griffin, PhD, CRNA, APN 618-218-0115c agriffi@siue.edu</p>	<p>Andy Griffin, PhD, CRNA, APN 618-218-0115c agriffi@siue.edu</p>	<p>I, II, III, IV, V</p>	<p>Office Based</p>
<p>Paris Community Hospital 721 East Court St., Paris IL 61944</p>	<p>David Grazatis, BS, CRNA, APN 314-440-5422w dmatg@hotmail.com</p> <p>www.pariscommunityhospital.com/</p>	<p>David Grazatis, BS, CRNA, APN 314-440-5422w dmatg@hotmail.com</p>	<p>I, II, III, IV, V</p>	<p>Ortho, General, Pain Mgmt., Regional</p>
<p>Passavant Area Hospital 1600 West Walnut Jacksonville, IL</p>	<p>John Gregory, CRNA, APN 217-245-9541w jon.gregory@passavanthospital.com</p> <p>www.passavanthospital.com</p>	<p>Dr Peter Roodhouse 217-245-9541w ext 3127</p>	<p>III, IV, & V</p>	<p>General, O.B.</p>
<p>Redbud Regional Hospital 325 Spring Street Red Bud, IL 62278</p>	<p>Jeff Peterson, CRNA 270-366-2911w jfpetesn@gmail.com</p> <p>www.redbudregional.com</p>	<p>Jeff Peterson, CRNA 270-366-2911w jfpetesn@gmail.com</p>	<p>I, II, III, IV, V</p>	<p>Rural, Independent Practice, General, Regional</p>
<p>SSM DePaul Health Center 12203 DePaul Drive Bridgeton, Missouri 63044</p>	<p>Andrea Newport, CRNA 314-757-4170w 314-344-6940c twins_plus_one@yahoo.com</p>	<p>Dr L. Baudendistal 314-344-7049 ljboud@aol.com</p>	<p>O,I,II,III,IV, V</p>	<p>General, Neuro, some O.B./ ECTs</p>

<p>St. Anthony's Health Center 1 St. Anthony's Way P.O. Box 340 Alton, IL 62002</p>	<p>John Krivis, CRNA, APN 618-334-3474c 618-474-6180w krivisj@gmail.com www.sahc.org</p>	<p>John Krivis, CRNA, APN 618-344-3474c krivisj@gmail.com</p>	<p>O,I,II,III,IV, V</p>	<p>General, O.B./ Ortho</p>
<p>St Anthony's Memorial Hospital 503 North Maple Effingham, IL 62401</p>	<p>Mary Bryant, CRNA, APN 217-419-2858c 217-347-1576w marybryant@me.com www.stanthonyshospital.org</p>	<p>Dr. John Sudkamp 217-821-1222 217-347-1361 jsudkamp@asae.hshs.org Chief CRNA Justin Smith 731-803-8873 slyone77@gmail.com</p>	<p>III, IV, & V</p>	<p>General, O.B./ Regional - Spinal</p>
<p>St Anthony's Medical Center 10010 Kennerly Road St Louis, Missouri 63128</p>	<p>Laura Niehoff, CRNA 314-221-8466c lniehoff11@gmail.com www.stanthonysmedcenter.com</p>	<p>Dr Wilkinson 314-525-1969</p>	<p>O,I,II,III,IV, V</p>	<p>General, Neuro, O.B</p>
<p>St Elizabeth's Hospital 211 South Third Street Bellville, IL 62220 618-324-2120</p>	<p>Danny Geib 618-222-7352h 618-234-2120 ext, 1822 dannycat@aol.com</p>	<p>Dr Edward Schuessler 618-234-2120w Ext. 1822 or 2888 eschuessler@sebh.org</p>	<p>O,I,II,III,IV, V</p>	<p>General, Neuro/ Regional, Craniotomies, Pulmonary- Thoracotomies</p>
<p>St Johns Hospital 800 East Carpenter Street Springfield, IL 62769 217-544-6464 Ext. 44350</p>	<p>Rebecca Collier 217-492-7104p 217-246-5917c becjo74@hotmail.com www.st-johns.org/</p>	<p>Dr Frederick Gehrman Anesthesia office 217-525-5643w</p>	<p>O,I,II,III,IV, V</p>	<p>General, Neuro, Cardiac, Peds</p>
<p>St. John's Mercy Hospital 901 E. Fifth Street Washington, MO 63090</p>	<p>Joe Hassler, CRNA, APN 636-541-1415c 636-399-6412w joehassler84@gmail.com www.stjohnsmercy.org/sjmh/default.asp</p>	<p>Dr. Robert Moore 636-399-6412w</p>	<p>O,I,II,III,IV, V</p>	<p>General, O.B./ Regional & Ortho</p>

<p>St. Joseph Hospital 1515 Main Street Highland, IL 62249 618-526-5439</p>	<p>Donald Smith, CRNA 618-651-2680w 618-581-9613c justasmith@yahoo.com www.stjosephshighland.org/</p>	<p>Donald Smith, CRNA 618-651-2680w 618-581-9613c justasmith@yahoo.com</p>	<p>O, I, II, III, IV, V</p>	<p>Rural, Independent Practice, General, Regional</p>
<p>Touchette Regional Hospital 5900 Bond Avenue Centerville, IL 62207</p>	<p>Dr. Brad Bernstein 618-332-3060w alanbern75@yahoo.com</p>	<p>Dr. Brad Bernstein alanbern75@yahoo.com</p>	<p>I,II,III,IV,V</p>	<p>General, O.B./ Spinals, Emergency Cases</p>
<p>Troy Family Dental 606 Edwardsville Rd., Troy IL 62294</p>	<p>Paul A. Darr CRNA, MSN, APN 618-444-3666 pdarr@siue.edu www.troyfamilydental.com</p>	<p>Dr. Richard Boatman 618-667-8020</p>	<p>I,II,III,IV,V</p>	<p>Dental Surgery</p>

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

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

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

**Forms
for
Anesthesia Students**

School of Nursing

Nurse Anesthesia Clinical Evaluation Form

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

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

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

Student Self-Evaluation	1	2	3

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

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

 Clinical Preceptor Signature

 Student Signature

 Facility

 Date

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

CRITICAL INCIDENT REPORT

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

Student Name

Preceptor Signature

Date

Signature of Site Clinical Coordinator

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

Please mark the appropriate incident and attach a written explanation.

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

COMPLETE ALL SIGNATURES ON REVERSE

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

**COMMENDATION
CARD**

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

Student Name

Preceptor Signature Date

Signature of Site Coordinator

COMMENTS

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

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

2011

**Record of
Clinical Experiences**

Record of Clinical Experience

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

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

No field can be left blank.

First Last ID # Program Code #

	Number		Number
I. Total Number of Anesthesia Cases	(550)	IX. Methods of Anesthesia	XX
II. Total Hours of Anesthesia Time		A. General anesthesia	(350)
III. Total Clinical Hours		B. Induction, maintenance, emergence	XX
IV. Patient Physical Status	XX	1. Intravenous induction	(200)
A. Class I		2. Inhalation induction	[25] (10)
B. Class II		3. Mask management	[40] (25)
C. Classes III & IV	(100)	4. Laryngeal mask airways	
D. Class V	[5]	(or similar devices)	[40] (25)
V. Special Cases	XX	5. Tracheal intubation	XX
A. Geriatric (65+ years)	[100] (50)	a. Oral	(200)
B. Pediatric	XX	b. Nasal	[10]
a. 2-12 years	[75] (25)	6. Total intravenous anesthesia	[25] (10)
b. under 2 years	[25] (10)	7. Emergence from anesthesia	(200)
c. Neonate (under 4 weeks)	[5]	C. Monitored anesthesia care	[50] (25)
C. Trauma/emergency	[50] (30)	D. Regional techniques	XX
D. Ambulatory/outpatient	(100)	1. Management	(30)
E. Obstetrical management	[40] (30)	2. Administration (Total of a, b, c)*	(25) 0
1. Caesarean delivery	[15] (10)	a. Spinal	[50] (1)
2. Analgesia for labor	[15] (10)	b. Epidural	[50] (1)
VI. Position Categories	XX	c. Peripheral	[40] (1)
A. Prone	(20)	X. Arterial Technique	XX
B. Lithotomy	(25)	A. Arterial puncture/catheter insertion	(25)
C. Lateral	(5)	B. Intra-arterial blood pressure monitoring	(25)
D. Sitting	(5)	XI. Central Venous Pressure Catheter	XX
VII. Anatomical Categories	XX	A. Placement (Total of 1, 2)	[10] (5) 0
A. Intra-abdominal	(75)	1. Actual	
B. Extrathoracic	(15)	2. Simulated	
C. Extremities	(50)	B. Monitoring	(15)
D. Perineal	(15)	XII. Pulmonary Artery Catheter	XX
E. Head	XX	A. Placement	[5]
1. Extracranial	(15)	B. Monitoring	[10]
2. Intracranial	[20] (5)	XIII. Other	XX
3. Oropharyngeal	(20)	A. Intravenous catheter placement	(100)
F. Intrathoracic	[40] (15)	B. Mechanical ventilation	(200)
1. Heart	[10] (5)	C. ACLS - Expiration date (MM/YY):	
2. Lung	(5)	D. PALS - Expiration date (MM/YY):	
3. Other		E. Pain management (acute/chronic) [10 cases]	
G. Neck	[10] (5)	F. Alternative airway management techniques	
H. Neuroskeletal	(20)	(Total of 1, 2)	[40] (10) 0
I. Vascular	[20] (10)	1. Fiberoptic techniques	
J. Other		(Total of a, b, c)	[15] (5) 0
VIII. Pharmacological Agents	XX	a. Actual placement	
A. Inhalation agents	(200)	b. Simulated placement	
B. Intravenous induction agents	(200)	c. Airway assessment	
C. Intravenous agents - muscle relaxants	(200)	2. Other techniques	[25] (5)
D. Intravenous agents - opioids	(200)		

**Students must have experience in each category*

SECTION XI

DOCTOR OF NURSING PRACTICE
STUDENT INFORMATION

Doctor of Nursing Practice Program Introduction

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

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

Doctoral Student Outcomes

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

Graduate Student Policies

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

DNP Post-Master's Curriculum Plan

The curriculum plan for the post-master's DNP at SIUE School of Nursing requires that students complete 30 credit hours. In addition to completing the required credit hours, students must complete 1000 practicum hours. Upon admission to the program, the Assistant Dean for Graduate Programs will review prior coursework completed in master's programs to determine the number of clinical practicum hours that can be transferred into the program. Up to 500 practicum hours will be accepted from prior master's programs. DNP students must attend on-campus intensive experiences for one week at the beginning of year one and for 3 days at the beginning of year 2. The intensive experiences provide students with opportunities for networking; workshops on available technologies that help to facilitate the educational process; and introductions to courses, faculty, potential faculty chairs, and other DNP students. Dates of the intensive experiences will be announced each year as early as possible to facilitate travel arrangements.

Semester 1 (Fall Year One)	Semester Hours
Nurs 600 Theory Guided Practice	3
Nurs 604 Evaluating Evidence for Improving Practice/Health Care Outcomes	3
Nurs 695a Health Care Innovations Seminar	<u>1</u>
	7
Semester 2 (Spring Year One)*	
Nurs 617 Advanced Applications of Epidemiology in Practice	3
Nurs 605 Health Policy and Finance for Advanced Nursing Leadership	3
Nurs 695c Doctoral Practice Project	<u>2</u>
	8
Semester 3 (Summer Year One)	
Nurs 691 Organizational and Systems Leadership in Health Care	3
Nurs 695c Doctoral Practice Project	<u>2</u>
	5
Semester 4 (Fall Year Two)	
Nurs 601 Studies in Genomics and Ethics	3
Nurs 620 Health Care Informatics	<u>3</u>
	6
Semester 5 (Spring Year Two)	
Nurs 695c Doctoral Practice Project	<u>4</u>
	4
Total Credits	30

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

*Faculty expect that planning for the doctoral project begins in Spring Year 1 with 695a Health Care Innovations, followed by 8 credits of 695c Doctoral Practice Project distributed throughout the curriculum.

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

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

DNP Timeline for Important Milestones

Due	Milestone
Fall, Year One	<ul style="list-style-type: none"> - Attend week-long Intensive Experience on campus (Sunday through Friday) - Meet with Assistant Dean for Graduate Programs to discuss total number of clinical hours needed throughout program. (complete Practicum Hours Transfer Form) - Complete N600, N604, and N695a - Begin Electronic Portfolio development and share with project chair. Track hours. - Select project chair by mid-semester. Email name of chair to Assistant Dean. - Begin to identify committee member and external stakeholder for Final Project. - Begin review of literature for Final Project.
Spring, Year One	<ul style="list-style-type: none"> - Complete N605, N617, and N695C (2 of 8 credits, develop project proposal) - Complete CITI Tutorial for N695c - Continue work on Electronic Portfolio - Identify all committee members by mid semester. Complete Final Project Committee Form. - Complete DNP Final Project/Practicum Site Form with approval of project chair for each site utilized for practicum hours and site where Final Project will be done. (PRIORITY!) - Meet with all committee members at least three times to obtain approval of project idea and to assist in development of proposal.
Summer, Year One	<ul style="list-style-type: none"> - Complete N691 and N695c (2 of 8 credits, develop IRB). - Continue work on Electronic Portfolio - Continue to refine Final Project document. - Begin work on IRB Proposal(s) for Graduate School and institution where project will be completed, if needed. Best to submit this in the summer. - Submit Final Project Scope and Design Approval Form with signatures from committee members for permanent file, either during summer or early in fall. - If funding is requested, submit proposal for Research Grant for Doctoral Students (RGDS)
Fall, Year Two	<ul style="list-style-type: none"> - Participate in 3 day (2 night) on-campus immersion at beginning of semester - Complete N601 and N620 - Collect data (if required) for project and refine narrative of project. - Apply for graduation if planned for May of Year Two (necessary to apply semester before graduation).
Spring, Year Two	<ul style="list-style-type: none"> - Complete N695c (remaining 4 of 8 credits) - Take Written Comprehensive Examination - Complete project and finish written copy of project. - Present project summary in public oral presentation - Submit electronic final PDF copy to Graduate Secretary for permanent files - Attend nursing convocation for hooding and University graduation
Summer, Year Two	<ul style="list-style-type: none"> - If project not complete, continue to work on project, registering for University 500 - Students who successfully passed all courses and the comprehensive written exam may use the credentials DNP(C), indicating doctoral candidate

**Southern Illinois University Edwardsville
School of Nursing
Doctor of Nursing Practice Program
Completion of All DNP Program Requirements**

Directions: Each item on this electronic form should be completed within the appropriate time frame and signed by either the committee chair or the Assistant Dean for Graduate Programs (AD). The form will be forwarded by Pat Koehne, Office Support Specialist, at the end of each semester if not completed. Chairs or the AD can request the form at anytime, and should sign the form electronically. Thank you.

Student Name: _____ **Committee Chair:** _____

Immersion Week, Year One

Practicum Hours Transfer Form: Date: _____ Assistant Dean: _____

End of Fall Semester, Year One

Final Project Committee Form: Date: _____ Assistant Dean: _____

Final Project Site Information Form Date: _____ Assistant Dean: _____

End of Spring Semester, Year One

Meeting with External Stakeholder Date: _____ Chair Signature: _____

Final Project Title/Scope Form: Date: _____ Assistant Dean: _____

Registration of Title Form: Date: _____ Assistant Dean: _____
(University Form)

Fall, Year Two

Completion of IRB Form (if needed): Date: _____ Assistant Dean: _____

Request to Take Comp Exam Date: _____ Assistant Dean: _____

Spring, Year Two

Completion of Comp Exam: Date: _____ Assistant Dean: _____

Prior to Project Presentation

Electronic Portfolio Date: _____ Chair Signature: _____

Practicum Hours Spreadsheet: Date: _____ Chair Signature: _____

Prior to Graduation

Project Presentation: Date: _____ Chair Signature: _____

Receipt of PDF Final Project: Date: _____ Assistant Dean: _____

Summary of Completion Form Date: _____ Chair Signature: _____
Assistant Dean: _____

DNP Final Project Guidelines

I. Introduction

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

II. Definition of DNP Final Project

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

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

III. Committee Selection and Composition

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

Committee Composition:

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

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

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

Timeline:

The student will secure a committee project chair by mid-semester of Fall, year one. This is mandatory in order to register for N695c in Spring semester.

The student will collaborate with the project chair to identify the additional committee members; these final committee members should be identified early in Spring, Year One, with three meetings of all committee members before the end of the Spring semester. (This meeting may involve tele-conferencing by some members). The project chair must approve all committee members and student should send the Final Project Committee Form to the Graduate Secretary.

Student should send a Registration of Thesis/Project Title form to the Graduate School in the Spring, after the committee approves the title. During the summer and fall, the IRB should be submitted to the Graduate School after being approved by all committee members. The Final Project Scope and Design Approval Form should be submitted to the Graduate Secretary by Fall, Year Two.

When the project has been completed, and only minor revisions are required on the written proposal, an oral presentation of the project should be scheduled with the Graduate Secretary, on a date that has been approved by all committee members. This presentation includes a formal presentation lasting 30 minutes; it should include a description and summary of the project, as well as project implications and limitations. All committee members are expected to be in attendance. The presentation is open to the public; students, faculty, project stakeholders are encouraged to attend.

Dissolution of Committee:

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

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

- A. <http://sn.umdnj.edu/academics/dnp/CompletedCapstoneList.pdf>
- B. <http://www.doctorsofnursingpractice.org/studentprojects.php>
- C. <http://repository.usfca.edu/dnp/> or http://scholarworks.umass.edu/nursing_dnp_capstone/

Example of a DNP Project Outline (may be altered as needed)
With Correct Use of APA Headings

TITLE PAGE
COPYRIGHT PAGE (if desired)
ABSTRACT
ACKNOWLEDGEMENTS
TABLE OF CONTENTS
LIST OF TABLES
LIST OF FIGURES
LIST OF APPENDICES

- Chapter 1: Foreground of the Problem
Introduction
Theoretical Background
Local Problem Defined
Project Significance to Nursing (or Intended Improvement)
Aims of Project (research question or hypotheses if needed)
Definition of Terms
- Chapter 2: Theoretical Framework or Conceptual Model
- Chapter 3: Review of Evidence
PICO Question Guiding Review
Methodology for Search and Review
Different Subtopics for Review
Conclusions, Gaps (based on the evidence)
- Chapter 4: Project Design (IRB approval process as appropriate)
Project Design with Potential Limitations
Sample (Stakeholder, Setting, and/or Population)
Outcome Measures (Instrumentation or Needs Assessment)
Procedure for Project and/or Data Collection
Human Subjects Protection and Ethical Implications
Data Analysis/Evaluation Plan
Timeline and/or Needed Resources
- Chapter 5: Discussion of Project Implementation and/or Project Findings/Results
Summary of Project/Findings
Discussion of Implementation/Findings/Results (Relation to Existing Literature)
Limitations
Conclusions
Recommendations for Research, Education, and/or Practice

APPENDICES

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

Adapted from SQUIRE Guidelines – Standards for Quality Improvement Reporting Excellence, Version 2.62
SHORT (retrieved from <http://squire-statement.org/guidelines>)

SAMPLE TITLE PAGE FOR FINAL PROJECT

DNP Final Project Title

By
Jane Doe, MSN, RN

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

Southern Illinois University Edwardsville
School of Nursing
Doctor of Nursing Practice (DNP) Program

Guidelines for the External Stakeholder:
Role and Responsibilities

Thank you so much for agreeing to be an external stakeholder for a DNP student at the SIUE School of Nursing. The role of the “external stakeholder” is to assist the DNP student during completion of the DNP practicum hours related to the final project. External stakeholders indirectly assist students in expanding their knowledge base and improving their expertise in the advanced nursing practice roles of clinician, consultant, educator, leader, and researcher. More specifically, external stakeholder responsibilities include providing entry into the practicum site; collaborating on the development, implementation, and final review of the final practicum project and written document; providing a clinical site for completion of selected practicum hours; and evaluating the student and final project outcomes.

The external stakeholder:

- Is an experienced and competent professional who can provide entry into a practicum site for completion of the final project
- Provides a learning environment for students to meet the program outcomes
- Encourages the student to function at the highest level of competence
- Adapts to meet the expectations and needs of the student as necessary for completion of practicum hours and the final project
- Utilizes timely, direct, honest and open communication
- Collaborates on development of the project, approves the scope and purpose of the project, and assists as needed in completion of the project.
- Facilitates and evaluates student learning in the clinical area under the guidance of the Chair of the final project who serves as the DNP mentor

After the external stakeholder agrees to collaborate with a DNP student, we must insure that there is a signed contract between the representing agency and the School of Nursing. The student must complete the External Stakeholder/Preceptor Site Information Form and submit to the Director of Clinical Acquisitions, Ms. Sheri Compton-McBride, who can be contacted at shcompt@siue.edu, or 618-650-3341. Ms. Compton-McBride will work with the agency to negotiate a contract if we don't already have one.

The primary roles for the external stakeholder are to serve as a collaborating colleague and evaluator. An initial meeting between the student, the final project chair, and the external stakeholder is essential to provide a forum for open, honest collaboration on the DNP program and the final project goals.

External stakeholder concerns about a student's performance or conduct in the clinical site should be discussed with the chair of the final project committee or the Assistant Dean for Graduate Programs.

Table 1 provides information on the responsibilities of the SIUE Graduate Program and Faculty, the DNP Student, and the External Stakeholder.

Table 1: Responsibilities of SIUE Graduate Program and Faculty, the DNP Student, and the External Stakeholder

SIUE Program & Faculty Responsibilities	DNP Student Responsibilities	External Stakeholder Responsibilities
Approves practicum site and external stakeholder	Identifies practicum site and external stakeholder within the first year of the program.	Agree to collaborate with student to provide entry into a practicum site and a learning environment to meet program outcomes. Provides contact information and discusses strategies for assisting with final project completion.
Facilitates clinical affiliation agreements with the clinical agencies. Validates completion of student health requirement, liability insurance, licensure, and CPR certification	Completes an External Stakeholder/Preceptor Site Form.	Provides information regarding site, if needed for affiliation agreement.
Chair provides this orientation document for external stakeholders and meets with the stakeholder to discuss student goals.	Develops individual goals for final project in collaboration with Chair of final project and external stakeholder	Reviews external stakeholder orientation and student goals for the final project to identify strategies for collaboration.
Provides the stakeholder with documentation from DNP section of handbook, including: doctoral student outcomes, final project guidelines, and practicum hours guidelines.	Becomes familiar with all sections of the DNP handbook and discusses issues with external stakeholder and chair of final project.	Assists student in meeting and modifying learning outcomes as needed.
Collaborates with student and stakeholder on development of the project, approves the scope and purpose of the project.	Collaborates with the chair and external stakeholder to finalize the purpose and scope of the project.	Collaborates with the chair and student on development of the project, purpose, and scope. Approves completion of the project at practicum site.
Mentors student through completion of the final project and practicum hours.	Implements project and practicum hours as designed in collaboration with chair, reader, and external stakeholder.	Provides support at the clinical site for completion of the practicum hours and final project.
Is available to the external stakeholder for questions, problems, and concerns that may come up during the clinical experience	Is prepared and punctual in the practicum area on scheduled days and times	Serves as a host, sponsor, and role model for the student at the site. Intervenes in complex situations if needed.
Provides feedback to both the student and the external stakeholder as needed.	Participates in ongoing evaluations of external stakeholder.	Provides immediate feedback and completes appropriate evaluations of student.



DNP FINAL PROJECT COMMITTEE FORM (due by middle of Spring Semester, Year One)

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

Student's Name _____
Home Address _____
Email Address: _____ (SIUE) _____ (HOME)
Home/Cell phone # _____ Work # _____
Proposed Chair: _____ Proposed SIUE Member: _____
Proposed External Stakeholder: _____ Phone: _____
Address: _____ Email: _____
Project Title _____

Anticipated Graduation Date _____

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

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

I _____ Agree Do Not Agree

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

Date _____

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

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

I _____ Agree Do Not Agree

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

Date _____

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

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

I _____ Agree Do Not Agree

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

Date _____

For Office Use Only:		
Received from Student:	_____	Initials: _____
Received Chair Acceptance:	_____	Initials: _____
Received SIUE Member Acceptance:	_____	Initials: _____
Received Stakeholder Acceptance:	_____	Initials: _____

**DNP FINAL PROJECT/PRACTICUM HOURS SITE INFORMATION FORM
(DUE BY END OF SPRING, YEAR ONE FOR FINAL PROJECT.
DUE ANYTIME PRACTICUM HOURS NEED TO BE COMPLETED)**

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

Student Information

Date: _____

Name: _____

Address: _____

City, State, Zip Code: _____

Home Telephone: _____ Work Telephone: _____

Cell Telephone: _____ SIUE E-Mail: _____

Student's Current Employer & Work Area: _____

Clinical Site Information

Facility Name: _____

Address: _____

City, State, Zip Code: _____

Main Phone Number: _____

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

Person Responsible: _____

Contact Information: _____

Do you have approval of your Project Chair regarding external stakeholder/preceptor & site selection?
_____ Yes _____ No

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

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

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

EXTERNAL STAKEHOLDER/PRECEPTOR INFORMATION

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

Date: _____

Student Name: _____

External Stakeholder/Preceptor Name & Credentials: _____

Position/Title: _____

Cell/Beeper No.: _____

Work Address: _____

Work Phone: _____ E-Mail: _____

Parent Corporation Affiliation: _____ Yes _____ No

If 'Yes', List name and address: _____

Please return to:

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

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



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

Student Name: _____ Date: _____

Title of Project:

Purpose of Project with Aims:

Basic Procedures to be Completed:

Required Resources of Agency:

Required Sites for IRB Submission (if using human subjects):

(1) SIUE IRB

(2) Institution #1 Name: _____

(3) Institution #2 Name: _____

Approval of Project Design

Signatures:

Student: _____ Date: _____

Project Chair: _____ Date: _____

Committee Member: _____ Date: _____

External Member: _____ Date: _____

Additional Member: _____ Date: _____

Please send completed form with signatures to Graduate Secretary.

Human Subjects Approval

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

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

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

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

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

The application packet is submitted to, and signed by the student's Committee Chair. These materials are then forwarded for approval and signature to the Assistant Dean for Graduate Programs. A committee of four nursing faculty will review the IRB prior to submission to the Graduate School, with possible revisions as needed. The final, revised packet is returned to the Graduate Program Secretary, who sends it to the Office of Research and Projects for approval by the SIUE IRB and the Dean of the Graduate School. Data collection can begin **only** after the SIUE IRB approves the study.

DNP Practicum

Practicum:

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

Practicum hours may include:

- **PRACTICUM HOURS:** Approved mentored direct and indirect practicum hours
- **MEETINGS:**
 - Approved meetings, symposiums, and/or conference hours
 - Only actual meeting time will be considered, does not include travel and lodging time
- **LIT REVIEW:** Project literature review immersion hours
 - Literature review hours must not exceed 10% of total
- **COURSE:** In some cases, approved specialized course work
 - Does not include normal DNP coursework
 - Must be a course related directly to the student's practice project
 - Must be at a graduate level
 - Can be an approved independent study
 - A maximum of two courses directly related to the student's project may be approved; hours approved for each course cannot exceed the course's weekly contact hours times the number of weeks in the semester (i.e., a fall 3 credit course equals 3 hours x 15weeks = 45 accepted practicum hours).
- **PRESENTATIONS:** Approved hours for presentations related to project topic at a professional conference or other similar venue.
 - Does not include travel and lodging time
- **INTENSIVE:** Approved Intensive Hours
 - Students will be allowed to document hours for attendance to select sessions of the required Intensives during the DNP program. Intensive materials will identify these approved hours.
- **OTHER APPROVED HOURS:**
 - Immersions: Total of 40 (25 for Year One, and 15 for Year Two)
 - Cochrane Tutorial (Nurs 604): 10 hours
 - Cultural Diversity (Nurs 600): 10 hours
 - CITI Tutorial: 5 hours

Practicum instructions – these instructions are for hands-on, mentored, professional care provided to patients:

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



DNP Practicum Transfer Hours Form

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

Practicum Hours Transferred from Previous Programs

SITE #1:

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

SITE #1:

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

SITE #1:

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

Total Previous Hours: _____

Total Required Practicum Hours to Complete in DNP Program

Hours: _____

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

Student Signature: _____ Date: _____

Assistant Dean for Graduate Programs: _____ Date: _____



DNP Practicum Hours Spreadsheet

Name: _____

Project Title: _____

Semester 1				
Date	Category	Essential	Detailed Description	Hours

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

Purpose

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

Student Responsibilities:

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

Faculty Responsibilities:

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

Electronic Portfolio Content

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

1. Folder for each year (Label as Year One, Year Two, etc...)

- a. **Reflection**
 - i. 4 to 5 page reflection on progress towards achievement of Doctoral Student Outcomes and Doctoral Essentials for the year
 - b. **Significant Works**
 - i. Assignments that demonstrate progression through the program
 - 1. Course papers
 - 2. Group projects
 - 3. Other course assignments
2. **Curriculum Vitae**
3. **Practicum Hours**
- a. Practicum Hours Transfer Form
 - b. Practicum Hours Spreadsheet
4. **Final Project**
- a. DNP Final Project Committee Form
 - b. DNP Final Project/Practicum Hours Site Information Form
 - c. External Stakeholder/Preceptor Information
 - d. Final Project Scope and Design Approval Form
 - e. Registration of Thesis Title Form (from Graduate School)
 - f. Letters of Agreement from institution (scanned)
 - g. Application for Approval of Research Project Involving Human Subjects IRB Regular Protocol Form (if necessary)
 - h. Most recent draft of Final Project
5. **Achievements**
- a. Manuscripts
 - b. Abstracts
 - c. Podium presentations
 - d. Consultations
 - e. Partnerships
 - f. Awards/recognition

Reference

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

DNP Comprehensive Examination

The DNP Comprehensive written examination is taken during the last semester of the program and after completion of all coursework. The examination reflects on the AACN *Essentials of Doctoral Education for Advanced Nursing Practice* and the DNP program coursework. The student must be registered in the program at the time of the comprehensive examination, and must successfully complete the exam to be eligible to graduate.

This is a “take-home” examination and students have two weeks to complete it. The Comprehensive Examination information will be delivered electronically to the student no later than 0900 on the designated Monday (start of the exam) and the completed examination is to

be returned electronically to the Assistant Dean of Graduate Programs within two weeks, by 0900 on the designated Monday for the exam return.

The comprehensive examination is evaluated anonymously by three faculty members. Each committee member will grade the examination as Satisfactory, Reservations, or Unsatisfactory. Students who fail the exam may repeat the exam after a specified period of time.

SECTION XII
FORMS
FOR ALL STUDENTS

**SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING
GRADUATE PROGRAM
ACADEMIC IMPROVEMENT PLAN**

Student's Name

Course Number

Semester

Instructions: So that the School of Nursing can assist you in improving your academic performance during the course of the semester, we expect you to meet with your course instructor to identify specific performance improvement activities. **Once the form is completed it will be forwarded by your instructor to the Assistant Dean for Graduate Programs** to review and placed in your student file. Your mentor will also be notified by the Assistant Dean.

Problem Areas:

Instructor/ Student strategies for Improving Performance (describe below – be as specific as possible).

Check appropriate box:

Form only to Assistant Dean

Student also instructed to make appointment with Assistant Dean

Instructor's Signature

Date

I have read and understand the plans for my academic performance. I have had an opportunity to ask any questions I may have.

Student's Signature

Date

Notice to mentor:

Mentor: _____

Date: _____

PRACTICUM SITE / PRECEPTOR REQUEST PACKET

Purpose: This packet is for requesting a clinical site and preceptor to meet course/practicum requirements.

A complete packet consists of the following:

Page 1: Student form

Page 2: Preceptor form

Page 3 -4: Preceptor license and certification (if applicable)

A complete packet needs to be completed for **each course, clinical site, and preceptor.**

Please note that you are responsible for:

1. Selecting a clinical site and preceptor.

(A list of contracted agencies can be found on the school of nursing webpage, graduate blackboard site, or by contacting the Director of Clinical Acquisitions.)

2. Coordinate completion of the "Practicum Site / Preceptor Request Packet".

3. Submit the completed packet to the Director of Clinical Acquisitions.

(Completed packet includes: the student page, preceptor page, preceptor license and preceptor certification, if applicable. The aforementioned should be scanned and sent via email to the Director of Clinical Acquisitions at shcompt@siue.edu. Incomplete forms may be returned to you.) Receipt of the completed packet will initiate the process for verifying contract placement and/or initiating a new agreement.

Initiating a new contract/ field practice agreement takes 3-6 months to expedite.

Submit the complete packet via email to:
Sheri Compton-McBride, MSN, RN
Director of Clinical Acquisitions & Instructor, School of Nursing
Southern Illinois University Edwardsville
Alumni Hall; Office 2119
Campus Box 1066
Edwardsville, IL 62026
Tel: 618-650-3341
Fax: 618-650-5037
shcompt@siue.edu



School of Nursing, Alumni Hall, PO Box 1066
Edwardsville, IL 62026- (Tel: 618-650-3341)
618-650-3341

Practicum Site / Preceptor Request Packet

Page 1: To be completed by the SIUE graduate student
Student Information

Name: _____

Home Telephone: _____

Work Telephone: _____

Cell Telephone: _____

SIUE E-Mail: _____

Student's Current Employer & Work Area: _____

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

Please circle: Fall Spring Summer Year:

Course Number for which this request is being placed:

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

NE: 582___ 586___ 585___

HCNA: 590___ 591___ 592___ 594___

CRNA: 513 ___

Clinical Site Information

Facility Name: _____

Address: _____

City, State, Zip Code: _____

Main Phone Number: _____

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

Name of Prospective Preceptor and Credentials:

Prospective Preceptor's contact/telephone number: _____

Prospective Preceptor's email address: _____

SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE

School of Nursing, Alumni Hall, PO Box 1066
Edwardsville, IL 62026- (Tel: 618-650-3341)
618-650-3341

Student Name: _____

PRECEPTOR INFORMATION
(TO BE COMPLETED BY PRECEPTOR)

Preceptor Name & Credentials: _____ Date: _____

Position/Title: _____

Home Phone: _____ Cell/Beeper No.: _____

Current Facility – Primary Practice Location (Name) : _____

Work Address: _____

Work Phone: _____ E-Mail: _____

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

Parent Corporation Affiliation: Yes ____ No ____

If 'Yes', List name and address: _____

Educational & Licensure Information:

Nurse Practitioners: Please provide a copy of your current license **AND** current certification

Nurse Educators & Administrators: Please provide a copy of your current license.

Physicians: Please provide a copy of your current license.

Detailed Nurse Preceptor Information

MSN: Year/Institution: _____

PhD/DNP: Year/Institution: _____

APRN License No.: _____

State: () Illinois () Missouri

Exp Date: _____

Certifying Board: _____

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

Detailed Physician Preceptor Information

MD: Year received: _____

Received from (list institution): _____

MD/DO License No: _____

State: () Illinois () Missouri

Exp. Date: _____

Certifying Board: _____

Both Nurses and Physicians:

No. of years in current role: _____ Practice Area: _____

Number of students supervised concurrently this semester: _____.

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

Signature: _____

GRADUATE STUDENT REQUEST FORM INSTRUCTIONS

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

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

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

B. For Credit Transfer...

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

C. For Time-Limit Extensions...

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

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

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

Revised 11/19/09



GRADUATE STUDENT REQUEST FORM

Use for all special requests except for Request for Extended Thesis Credit and Overload/Underload for Graduate Assistants and Awardees.

800-
Name Student Identification Number Home Phone Number

Street City State Zip Code

Graduate Degree and Major

Request

Student's Signature Date

Instructor's Signature Date
NOTE: Required for permission for an undergraduate to enroll in a graduate-level course

Student's E-Mail Address or Daytime Phone Number

RECOMMENDATIONS

Graduate Major Advisor _____

Signature Date

Graduate Program Director (if different) _____

Signature Date

Associate Dean (School of Education requests only) _____

Signature Date

Registrar's Response _____

Signature Date

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

Revised 11/19/09



SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
APPLICATION FOR GRADUATION

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

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

Student Identification Number: 8 0 0

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

Name entry grid

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

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

Degree Sought:

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

Major: 1. 2.

Minor: 1. 2.
(Undergraduates only)

Are you in the process of completing a teacher education program to be certified to teach? Yes No

Please mark if you are a member of the following programs: Honors Scholar Program Meridian Scholarship

Do you have additional credits to be transferred from another institution before graduation: Yes No

If yes, from what Institution/s?:

Signature: Date:

By signing, you authorize your inclusion in commencement publications and news releases unless you check this box:

Exclude me from commencement publications and news releases.

Printed Name (if different than diploma name):

E-Mail Address or Daytime Telephone Number:

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

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

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

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

Graduation Fees Received by Bursar:

Date Application Received in Registrar's Office:

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



**SCHOOL OF NURSING
GRADUATE PROGRAM**

Directions for Use of “Incomplete Form”

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

SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE

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

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

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

Assignment/Task	Due Date	Completion Date
1.		
2.		
3.		

II. Explain how final course grade will be calculated. (Attach to the form if necessary).

III. Attach specific details regarding assignment(s) needed for completion. (e.g. description of research paper).

Signature of Student _____ Date _____

Signature of Instructor _____ Date _____

Signature of Assistant Dean Graduate Programs _____

Date _____

(Copy for student, student's file and faculty member)



**Risk Management Report: Completion of
“Incomplete” Requirements in Clinical Courses**

Student Name: _____

ID Number: _____

Clinical Practicum Site: _____

Address: _____

Preceptor Name/Credentials: _____

Course Number: _____

Semester Credit Hours: _____

Semester/Year Enrolled: _____

Date to be Completed: _____

Instructor of Record: _____

Signature of Instructor: _____ Date: _____

In accordance with university policy, the course work must be completed within the time period designated by the instructor, but not to exceed one year from the close of the term in which the course was taken, or graduation, whichever occurs first. Failure to complete the course as specified will result in a grade of “F” for the course.

- Copies:
- (1) University Risk Management (Attn: Jenny)
1301 W. Chautauqua
Mail Code 6829
Carbondale, IL 62901
Fax: 618-453-5442
 - (2) Student File
 - (3) Instructor

Health Care Provider Medical Release to Return to Class or Clinical

I hereby release _____ to return to class or clinical rotations as
(Student Name)
of _____.
(Date)

This student Does Not Does still have physical limitations which must be accommodated.

Further accommodations to be made for student while in class or clinical include:

Full release is effective as of _____.
(Date)

Name & Credentials of Health Care Provider: _____

Address: _____

Phone: _____

Email: _____

Signature: _____

This form will be saved in the student's permanent file

Report of Injury

It is the responsibility of each supervisor to ensure that this report is filed with Emergency Management and Safety within 24 business hours of becoming aware of an incident or hazard related to SIUE facilities or operations.

Please complete only those sections that are applicable to the incident.

I. PERSON INVOLVED IN INCIDENT	Name (Last, First, Mi)		Sex <input type="checkbox"/> F <input type="checkbox"/> M	E-Mail
	Date of Birth			Social Security #:
	Address (Local)		Phone (W) _____ (H) _____	
	Status At Time Of Incident <input type="checkbox"/> Employee <input type="checkbox"/> Visitor <input type="checkbox"/> Student <input type="checkbox"/> Other (Specify):	If An Employee, Give Job Title And Department	If A Visitor, State Purpose Of Campus Visit	
IF OTHERS WERE INVOLVED, ATTACH ADDITIONAL COPIES OF THIS FORM FOR EACH PERSON.				
Were the Police Notified? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Did Incident Arise Out Of And In The Course Of University Employment? <input type="checkbox"/> Yes <input type="checkbox"/> No				
II. INCIDENT/ OR HAZARD DESCRIPTION	Place Where Accident/Incident Occurred Or Hazard Is Located	Date & Time Of Incident	Name Of Area Supervisor Where Incident Occurred Or Hazard Is Located.	
	Describe Activity Being Performed By Person Involved In Incident (I.E. Driving Truck, Lifting Crate, Etc.)			
	Fully Describe Incident/Hazard (Attach Additional Sheets If Necessary.)			
	List Any Witness Present Name	Address	Phone (W) _____	
Additional Witness(es) Present Name	Address	Phone (W) _____		
III. INJURY	Did This Incident Result In Injury To The Person Involved? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	<i>IF INJURY OR ILLNESS RESULTS FROM AN INCIDENT ARISING OUT OF AND IN THE COURSE OF UNIVERSITY EMPLOYMENT, THE INJURED PERSON OR THEIR SUPERVISOR (If injured person is unable) MUST CALL CareSys, Inc. AT 1-800-773-3221 AND REPORT THE INJURY OR ILLNESS</i>			
	Describe Nature And Scope Of Personal Injury, If Any _____ _____			
Was Medical Care Sought? <input type="checkbox"/> No <input type="checkbox"/> Yes: Place & Date of Treatment				
IV. PROPERTY DAMAGE	Describe Property Damage, If Any			
V. SIGNATURE	Printed Name Of Person Completing Form		Job Title/Occupation	
	Signature Of Person Completing Form	Date	Phone Number (W) _____ (H) _____	

Original To: Emergency Management and Safety
 Copy To: According to Individual Departmental Policy

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE
SCHOOL OF NURSING

Health Insurance Validation

Please check one:

- Graduate ABS Traditional Undergrad
 RN-BS School Nurse

My health insurance coverage for **AY Fall 2014-Summer 2015** is as follows:

STUDENT'S NAME _____

STUDENT ID NUMBER _____

HEALTH INSURANCE PROVIDER _____

POLICY/ID NUMBER _____

I verify that I am covered for the current academic year under the above named health insurance policy. If my health insurance coverage would change or expire during the current academic year, I will notify the School of Nursing within one (1) week of the effective date of change of coverage.

Please attach copy of current insurance card.

SIGNATURE: _____ Date _____

Emergency Contact Information

Contact Person's Name _____ Relationship _____

Address _____

City, State, Zip _____

Phone _____

*To be retained as permanent record in student health file.

SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE
SCHOOL OF NURSING

Influenza Vaccination Form

- Graduate ABS Traditional Undergrad
 RN-BS School Nurse

Student Name _____

SIUE ID # _____

Date of vaccination _____

Provider Signature/Credentials _____

Provider site _____

If influenza vaccine not given, state reason:

Provider Signature/Credentials _____

Directions for Students: Take form to person/unit administering vaccine. Have it completed and return to program secretary. Deadline October 15th.