



College of Nursing and Health Sciences
Family Nurse Practitioner Clinical Handbook

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United States University
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Road, San Diego, CA
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Welcome to Your FNP Clinical Experience

The purpose of this handbook is to assist students and faculty members in the tasks of clinical instruction and assessment for the United States University (USU) College of Nursing and Health Sciences (CONHS) Master of Science in Nursing - Family Nurse Practitioner (FNP) program and serves as a guide for the Office of Field Experience (OFE). *Students, clinicians, and preceptors are required to read this handbook. All students must sign and return the acknowledgment form in this handbook to the OFE prior to starting his/her clinical experience (Appendix B).*

It is the intent of the CONHS to assist in developing a more consistent clinical experience for all students independent of their field experience. This consistency revolves around appropriate supervision, regular formal and informal feedback, and consistent assessment of students' clinical proficiencies among other topics and skills. This is an ongoing process and we look to each of you and your respective professional and life experiences to aid us in shaping the field experience so that it reflects our mission and goal of developing outstanding future nurse professionals. While advisors and faculty are available to guide students with respect to the requirements, students ultimately bear the responsibility of following the requirements.

*****All communication with the College of Nursing and Health Sciences must be sent from a student's United States University issued email address due to confidentiality, HIPAA, and FERPA restrictions. Please do not send emails from your personal email addresses. Please do not use texting as a method of communication.**

Notice: Please make sure you are referencing the latest edition of this handbook as policies are subject to change.



FACULTY AND STAFF CONTACT INFORMATION

**United States University College of Nursing
7675 Mission Valley Road
San Diego, CA 92108**

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GENERAL GUIDELINES FOR CLINICAL EXPERIENCES

Please click on the applicable program link below for information regarding programs of study and course descriptions: <https://www.usuniversity.edu/colleges/college-of-nursing/>

EXPECTATIONS OF ALL STUDENTS

Active Learning

It is our expectation that as a student, you identify your strengths and areas for improvement, set personal goals that address the areas for improvement, and actively seek learning opportunities to meet your goals. As active learners, it is important that you give critical thought to your learning needs and devise a plan to address them. As you get into clinical areas, you might want to discuss your thoughts with your clinical faculty and ask for feedback. We also expect that you actively prepare for every clinical day and set aside time at the end of each clinical day to identify the things you need to review, and then take time during the week to get that learning done.

Time Management

You cannot socialize to the role you are learning if most of your energy is in other roles. If you haven't already, look at your obligations outside of school and identify ways that you can be successful over the course of the program. You may want to seek resources and formulate a plan now so that you can get the most out of this experience.

Communication with Faculty

You will have a designated clinical faculty member who is responsible for the evaluation of the student's performance. It is essential that you keep your designated clinical faculty member informed of any change in your clinical site or schedule, as well as any unanticipated events that occur during the clinical experience, e.g. illness or injury related to experience.

Professionalism

Good communication skills, a positive attitude, and respectful and productive interactions are part of being a professional. Being a great health care provider does not mean you possess manual skills, but that you possess the heart of a nurse who is compassionate, caring, and willing to lead with humility. Your professors can help you network and develop connections within the profession, so the impact of your professional image is important to consider. We hold faculty to the same expectations.

Clinical time is also best spent seeking new learning opportunities and discovering your area of interest. Practice involves a variety of activities that include direct care and indirect care experiences. Direct care refers to care activities provided at the point of patient care. Indirect care refers to interventions that are provided on behalf of patients. What counts as clinical experiences in your coursework is tied directly to the clinical learning objectives for that particular setting and is part of meeting the overall program competencies based on the program standards. The standards provide an important framework for designing and assessing graduate education programs for professional practice.



Strong moral values and character are the backbone to the profession. It is imperative that health care professionals maintain collaborative relationships with patients, doctors, fellow health care providers, and other health care staff. If conflict arises, students must make an effort to resolve the situation in a way that supports the situation in positive way. Many of you are natural leaders and we encourage you to discover the power of positive leadership as you move toward your future. Faith, religion, and spirituality are distinct components of what defines many human communities and allows individuals to make sense of their experiences. Your ability to understand and support those beliefs is key to your role as a caring, compassionate health care provider.

ESSENTIAL FUNCTIONS OF NURSING STUDENTS

The *essential functions* are basic cognitive, psychomotor, and affective activities that are essential to the successful completion of the United States University advance practice program.

CATEGORIES

ESSENTIAL FUNCTIONS

A student must be able to:

Motor/Physical Strength

Possess the physical strength and mobility to safely carry out nursing procedures and provide routine and emergency care and treatment to patients of all ages in all assigned health care settings.

*Perceptual/Sensory
Math*

Use their senses to make accurate clinical assessments and judgments.

Accurately calculate medication/solution dosages and any needed information specific to patient care.

*Behavioral/Interpersonal
(relationships)/Emotional
Stability*

Develop mature, sensitive and effective therapeutic relationships with individuals, families and groups of various social, emotional, cultural and intellectual backgrounds.

Adhere to United States University policies, procedures and requirements as described in the university academic catalog, student handbook, and course syllabi.

Demonstrate ethical behavior, including adherence to professional and student university honor codes.

Communication

Communicate effectively and accurately in English using speech, reading, writing, language skills, and computer literacy.

Use of appropriate nonverbal communication is also essential.

*Problem Solving/Critical
Thinking*

Collect, analyze, prioritize, integrate, and generalize information and knowledge to make sound clinical judgments and decisions to promote positive patient outcomes.

Punctuality/Work Habits

Adhere to classroom and clinical schedules.

Complete classroom and clinical assignments and submit assignments in a timely manner.

General Health

Work in an environment that puts one at risk for infection.

Meet all health and safety requirements to perform patient care in assigned clinical facilities.

Adapted from Yocum, C. J. (1996). *A validation study: Functional abilities essential for nursing practice*. National Council of State Boards of Nursing, Inc.: Chicago, IL.

BEHAVIORAL/ETHICAL CODE FOR STUDENTS

As students are involved in the clinical and academic environments, we believe that ethical principles are a necessary guide to professional development. Therefore, in addition to the USU Student Code of Conduct within these environments, we:

1. Advocate for the rights of all clients.
2. Maintain client confidentiality.
3. Take appropriate action to ensure the safety of clients, self, and others.
4. Provide care for the client in a timely, compassionate, and professional manner.
5. Communicate client care in a truthful, timely, and accurate manner.
6. Actively promote the highest level of moral and ethical principles and accept responsibility for your actions.
7. Promote excellence in nursing by encouraging lifelong learning and professional development.
8. Treat others with respect and promote an environment that respects human rights, values and choice of cultural and spiritual beliefs.
9. Collaborate in every reasonable manner with the academic faculty and clinical staff to ensure the highest quality of client care.
10. Use every opportunity to improve faculty and clinical staff understanding of the learning needs of nursing students.
11. Encourage faculty, clinical staff, and peers to mentor nursing students.
12. Refrain from performing any technique or procedure for which the student has not been adequately trained.
13. Refrain from any deliberate action or omission of care in the academic or clinical setting that creates unnecessary risk of injury to the client, self, or others.
14. Assist the staff nurse in ensuring that there is full disclosure and those proper authorizations are obtained from clients regarding any form of treatment or research.
15. Abstain from the use of alcoholic beverages or any substances in the academic and clinical setting that impair judgment.
16. Strive to achieve and maintain an optimal level of personal health.
17. Support access to treatment and rehabilitation for students who are experiencing impairments related to substance abuse or mental or physical health issues.
18. Uphold school policies and regulations related to academic and clinical performance, reserving the right to challenge and critique rules and regulations as per school grievance policy.
19. Abstain from accepting gifts from patients/clients.

PROFESSIONAL BOUNDARIES

Professional codes of conduct are the foundation for caring relationships. These relationships exist primarily during the student's education within the timeframe of their enrollment in the nursing program. These relationships are developed between client-nurse, student- faculty, faculty-faculty, and student-student. The student –client relationship exists within the timeframe of the nursing course. The National Council of State Boards of Nursing has developed a document that provides the basis for understanding the boundaries for such relationships. It is available at

https://www.ncsbn.org/ProfessionalBoundaries_Complete.pdf

HIPAA GUIDELINES

As health care providers, and as one of its covered entities, nurses must be knowledgeable about the various aspects of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). United States University CONHS offers the guidance below for those persons to ensure compliance with those requirements and asks that all students sign the HIPAA Confidentiality Agreement (Appendix C).

Students and faculty are required to do the following:

1. Sign the HIPAA Confidentiality Agreement before any involvement in a clinical agency.
2. Attend HIPAA training or in-classroom clinical instruction on requirements relating to patient privacy.
3. Know and adhere to a clinical site's privacy and procedures before undertaking any activities at the site.
4. Maintain the confidentiality of any patient information at all times, regardless of whether the identifiers listed in the "Do not" section of these guidelines have been removed.
5. Promptly report any violation of those procedures, applicable law, or HIPAA Confidentiality Agreement by a CONHS student, faculty or staff member to the appropriate CONHS clinical coordinator or clinical faculty member.
6. Understand that a violation of the clinical site's policies and procedures, of applicable law, or HIPAA Confidentiality Agreement will subject the student to disciplinary action. Students and faculty are not to do the following:
 - a) Discuss, use or disclose any patient information while in the clinical setting or outside of clinical unless it is part of the clinical setting.
 - b) Remove any record from the clinical site without the prior written authorization of that site.
 - c) Disclose any information about a patient during the clinical assignment to anyone other than the health-care staff of the clinical site.
 - d) Use patient information in the context of a learning experience, classroom case presentation, class assignment, or research without attempting to exclude as much of the following information as possible:
 - i Names
 - ii Geographical subdivisions smaller than a state
 - iii Dates of birth, admission, discharge, death
 - iv Telephone and fax numbers
 - v E-mail addresses
 - vi Social security numbers
 - vii Medical records or account numbers
 - viii Certificate/license numbers
 - ix Vehicle or device numbers
 - x Web locators/Internet protocols
 - xi Biometric identifiers
 - xii Full face identifiers
 - xiii Any other unique identifying number, characteristic, or code
 - xiv All ages over 89
 - e) Access any patient information unless patient is clinical assignment.
 - f) Disclose any Personal Health Information (PHI) to any entity not requiring PHI for healthcare purposes without their consent.



UNITED STATES
UNIVERSITY

OSHA GUIDELINES

Students are responsible to review OSHA training for Healthcare training at this [OSHA site](#). You should review all topics across the ribbon including: Culture of Safety, Infectious Disease, Safe Patient Handling, Workplace Violence, Other Hazards, and Standards/Enforcement.

STUDENT RIGHTS AND RESPONSIBILITIES

United States University strives to treat students and student organizations in a consistent and fair manner while respecting their rights and responsibilities as members of the United States University community. We are committed to balancing the interest of the individual student or student organization with the needs of the community at large. Our goal is to uphold our institutional values.

All students who attend USU should be aware of their rights and responsibilities. USU policies are listed in the United States University Catalog. The most recent version is downloadable online at <https://www.usuniversity.edu/current-students/university-catalog/>.

PROFESSIONAL DRESS AND BEHAVIOR

Students must obtain and wear a lab coat or other attire as appropriate to the clinical setting. Students will always wear their USU official identification badge whenever on site in the student role. Students must also bring their USU official identification badge during their practice immersions. Students should order this badge as early as possible, but no later than 8 weeks prior to MSN573 to ensure receipt before the course start date. The link to order your USU badge is:

<https://goo.gl/forms/na0al2HTJtpQD9g32>. Nursing students have a specific dress code listed below.

All students are expected to present themselves as representatives of United States University's program. All students are expected to be respectful to faculty, student colleagues, staff, patients, and their families. Reports of unprofessional behavior will result in your being counseled by the clinical faculty and/or the Program Director/Clinical Coordinator and initiation of a Code of Conduct violation which is subject to review by the College of Nursing and Health Sciences. You are expected to follow United States University's official Code of Conduct policy identified in the University Catalog.

Nursing students are expected to be clear of any felony convictions at the time of admission into the College of Nursing and Health Sciences and to remain free of felony convictions for the duration of the program. If the prospective student or enrolled student is charged with a felony, or another undesignated offense either before formal admission or during the program, he/she must notify either their Academic Advisor, or the Clinical Coordinator and Program Director immediately.

FNP Student Professional Clinical Attire

The student should have professional attire for all clinical experiences and immersions. Any deviations in dress at clinical including immersions will result in clinical warning or the student being sent home from clinical and placed on clinical probation. Proper identification MUST be worn at all times in all clinical and immersion settings. The uniform and identification requirements of the clinical agency are to be followed.

The uniform consists of:

1. Wrinkle free white lab jacket
 - a. A white lab jacket must be worn with professional attire. Shorts, very short skirts, jeans, tank tops, tube tops, see-through clothing, exercise clothes (sweats), and open-toed shoes are not acceptable attire in any clinical agency. Undergarments will not be visible through the uniform.
2. Name badge will be provided to you at your first immersion in MSN 573. The name badge will show your picture, legal first and last name, and "FNP Student." The name badge must be worn while attending any clinical or immersion activity. Name badge will not be worn outside of the clinical agency or campus.
3. All of the following items will be ordered online by student through the Apparel Pro. You will be emailed a link in your course prior to MSN 573 that will give you a specific student code to order the equipment. With this code, the equipment is paid by United States University. The bundled items will be sent to the address provided by the student.
 - a. Wink 7106 Unisex Student 33" Lab Coat Starting at: \$24.00
 - b. MDF MDF777 MDF - One™ - Stainless Steel Stethoscope \$60.00* (optional)
 - c. Prestige C-512 512Hz Frequency Tuning Fork \$9.00
 - d. Prestige S210 Disposable Penlight \$3.00
 - e. Prestige 45 60" (150cm) Tape Measure \$2.50
 - f. Prestige 3909 Snellen Pocket Eye Chart 18.5cm x 10cm \$2.00
 - g. Prestige 25 7.5" PVC Taylor Percussion Hammer \$5.00
 - h. ADC 5110e Diagnostix™ 5110e - Pocket Diagnostic Set (1 Handle) \$200.00
 - i. ADC 5182/5185 Extra 50-each 2.75 mm and 4.25 mm disposable speculas \$10.00

* You may use your own medical grade stethoscope

Professional Appearance

1. In most clinical settings, business casual is acceptable and can be interpreted as:
Women: wrinkle free slacks (dress pants), skirts (mid-calf to about two inches above the knee), blouses, shells, cardigans, blazers or dresses, clean low-heeled shoes that cover the entire foot.
Men: wrinkle free dress pants, button down shirts, polo shirts (short sleeved shirts with a collar), blazers, clean shoes that cover the entire foot.
Do not wear:
 - Denim/jean material
 - Anything that is see-through, short, tight, or shows too much skin.
 - Low neck lines or visible midriffs
 - Flip-flops or tennis shoes/sneakers.
2. The clinical facility's ID must be worn whenever in that facility. Students who do not wear this ID may be asked to leave the facility.
3. Hair should be short or pulled back and styled neatly. Natural hair color is required with no purple, blue, etc. Beards or mustaches, if worn, should be neatly trimmed.
4. Fingernails should be neatly trimmed and free of cracked nail polish. Only clear or neutral nail polish may be used if desired. Acrylic nails or any other nail enhancements are not permitted.
5. Permitted jewelry includes one pair of studded earrings, a watch, a plain ring band. No other visible jewelry is acceptable including tongue rings or other facial jewelry. Clear spacers may not be worn in place of facial piercings. Tattoos and any other body art should be covered where possible.

6. Perfume, scented lotions, after-shave lotion, and heavy makeup are not acceptable in the clinical area.
7. Gum chewing is not acceptable.
8. Clothing worn in non-clinical setting activities not requiring student uniform should adhere to professional standards as stated in this handbook and in USU's Catalog under Dress Code.
9. Cell phone use is not permitted in the classroom or in the patient clinical setting. Students are expected to follow agency guidelines and clinical faculty directions regarding appropriateness of cell phone usage in the clinical setting.
10. Please remember that students represent United States University. Your appearance must be clean, neat, and professional.

TRANSPORTATION/TRAVEL TO CLINICAL SITES

Students must provide their own transportation to clinical sites and ground campus location for practice immersions. Students are encouraged to work with Office of Field Experience to assist finding clinical placements. Every attempt will be made to secure clinical placements close to where you work or live, but you may have to travel up to 3 hours. Office of Field Experience, in conjunction with clinical sites, make every attempt to minimize the distance that students travel to their clinical experience, but sometimes additional travel is unavoidable. We know attending clinical can be challenging, but rest assured your learning experience is a valuable one and will guide your future as a well-prepared professional.

GENERAL HEALTH AND SAFETY REQUIREMENTS

Students and clinical faculty are expected to take measures to maintain their personal health so as not to jeopardize themselves or any patient with whom they come in contact. Students who are accepted into the program must show evidence of the USU required immunizations and diagnostic procedures as required by the clinical agencies utilized. At any time, a student may be required to receive a medical examination if deemed necessary by the clinical faculty for the wellbeing of the student and/or the patients.

As students are in contact with patients in a variety of health situations, it is imperative that students maintain protection against communicable illnesses. In addition, students must meet agency health requirements to enter clinical course work. Students are responsible for updating BLS, personal health insurance, immunizations when needed. **Students will not be allowed to participate in clinical experiences unless all agency and USU requirements are current.** Any student that falls out of compliance due to expired documentation will immediately be restricted from clinical participation until renewed documentation is provided and coinciding faculty will be notified. Missing clinical may jeopardize student success in the program. All students are responsible for the completion of the required documents. **The deadline to submit required documentation is a minimum of 8 weeks prior to the planned clinical course. Documentation submitted late may result in a later registration of the clinical course. Students should submit their documentation early to avoid a delay in their clinical start date.** Instructions on completing *Complio* are included in the appendices (**Appendix D**). Please note that a student's clinical site may require additional or different health and safety documents than those in the lists below, as stipulated in an affiliation agreement.

NOTE: A CHECKLIST FOR USU REQUIRED HEALTH & SAFETY REQUIREMENTS IS IN APPENDIX A.

Item	Description				
<p>Tuberculosis (TB) For continued enrollment - required annually.</p>	<p>Initial Tuberculosis testing must be a 2-step PPD (repeated PPD). If the first PPD is negative, a second skin test is required within 7 – 21 days. Alternatively, students may upload their current annual negative TB Skin Test and the previous year’s negative TB Skin Test. Subsequent tuberculosis testing is a one-step PPD repeated annually. The skin test reaction should be read between 48 and 72 hours after administration. A patient who does not return within 72 hours will need to be rescheduled for another skin test. A TB test is valid for one year. TB records must be current and on file. The QuantiFERON®-TB Gold blood test may be accepted in lieu of the PPD. For positive PPD or QuantiFERON®- TB Gold Test/T-Spot, negative CXRs will be required, along with the annual symptoms checklist (Appendix F). A chest x-ray is valid for 5 years, but the evaluation form must be submitted annually. INH and the annual symptoms checklist (Appendix F) may also be submitted. The PPD is not contraindicated for anyone including pregnant women, persons who are HIV-infected, or persons who have been vaccinated with BCG. Evaluation will be made on an individual basis.</p>				
<p>BLS card For continued enrollment - Re-certification required prior to expiration date.</p>	<p>BLS certification for the Professional Rescuer or Healthcare Provider is required. Information as to the availability of courses may be obtained by calling either the American Heart Association or checking online. This certification is valid for a two-year period and provides comprehensive training in this area. <i>Other BLS courses will NOT fulfill this requirement. Online-only courses are not acceptable.</i></p> <table border="1" data-bbox="418 884 1521 961"> <thead> <tr> <th data-bbox="418 884 911 919">Provider Name</th> <th data-bbox="911 884 1521 919">Course Title</th> </tr> </thead> <tbody> <tr> <td data-bbox="418 919 911 961">American Heart Association</td> <td data-bbox="911 919 1521 961">BLS Healthcare Provider</td> </tr> </tbody> </table>	Provider Name	Course Title	American Heart Association	BLS Healthcare Provider
Provider Name	Course Title				
American Heart Association	BLS Healthcare Provider				
<p>Tetanus-Diphtheria (TD/Tdap) For continued enrollment – required prior to expiration date.</p>	<p>Documentation of Tetanus/Tetanus-Diphtheria/Tetanus-Diphtheria with Acellular Pertussis vaccination administered within the past 10 years. (Tdap vaccines are preferred.). If you have a medical condition which does not allow current immunization, then you may contact the Office of Field Experience that documents your medical exception (<i>please note this may jeopardize clinical placement if clinical site requires this documentation</i>). Evaluation will be made on an individual basis.</p>				
<p>Influenza (Flu) For continued enrollment - required annually.</p>	<p>Flu vaccines are available from late September through early May. Students are required to have a current flu vaccine on file in order to enter the clinical setting. Influenza vaccine is required annually. If you have a medical condition which does not allow current immunization, then you may contact the Office of Field Experience that documents your medical exception (<i>please note this may jeopardize clinical placement if clinical site requires this documentation</i>). Evaluation will be made on an individual basis.</p>				
<p>Medical Clearance Form</p>	<p>A physician or other health care provider completes this form following a physical exam of the student. If the physical was performed within the last six months, the form may be completed based off that exam.</p>				
<p>Hepatitis B</p>	<p>Hepatitis B vaccine (3 doses) OR blood titers are required. A lab confirmation must be presented (see below) if using blood titers. You will be required to repeat the vaccine series if there is no immunity. If you have repeated vaccination series and completed a second titer and the results are still negative, equivocal, or borderline, then you may sign a waiver for this disease. If you have a medical condition which does not allow current immunization, then you may contact the Office of Field Experience that documents your medical exception (<i>please note this may jeopardize clinical placement if clinical site requires this documentation</i>). Evaluation will be made on an individual basis.</p>				

	HBsAg anti-HBc anti-HBs	negative negative positive with >10mIU/mL	immune due to vaccination	no vaccination necessary
MMR: Measles, (Rubeola), Mumps, Rubella	Students must show proof of immunity (lab evidence indicating positive MMR titers). It is not sufficient to report having had any of these illnesses or vaccinations as a child. Titers must indicate adequate protection. Equivocal results are considered negative and the student is required to get a booster for the MMR vaccine. If not immune (negative titer results), then student must be vaccinated and be re- tested at least 30 days after receiving the vaccination. If, after the second blood test, the student is still showing “negative” or “non-reactive” for immunity, no further vaccines/titer requests then you may sign a waiver for this disease. If you have a medical condition which does not allow current immunization, then you may contact the Office of Field Experience that documents your medical exception (<i>please note this may jeopardize clinical placement if clinical site requires this documentation</i>). Evaluation will be made on an individual basis.			
Varicella (Chicken Pox)	Students must show proof of immunity (lab evidence indicating positive varicella titers). Because of recent changes in policies, documentation of history of chicken pox or varicella vaccinations are not sufficient. If not immune (negative titer results), then student must be vaccinated and be re- tested at least 30 days after receiving the vaccination. If, after the second blood test, the student is still showing “negative” or “non-reactive” for immunity, no further vaccines/titer requests will be required. If you have a medical condition which does not allow current immunization, then you may contact the Office of Field Experience that documents your medical exception (<i>please note this may jeopardize clinical placement if clinical site requires this documentation</i>). Evaluation will be made on an individual basis.			
Health Insurance For continued enrollment - required prior to expiration date.	Verification of the student’s current health insurance coverage. (e.g., copy of insurance card.) This information is be required to be current throughout your clinicals. Please note that this is only for your nursing file and is NOT shared with other departments.			
Malpractice Insurance Coverage	\$1M per incident, \$3M aggregate. The coverage should state that student is covered as a FNP Student. OFE does not require a specific provider.			
Background Check	All nursing students, must complete a background check prior to first clinical rotation. No felonies accepted, and misdemeanors will be subject to review by the Program Director whose decision is final. A student must report, within 10 days, any legal violation such as a DUI, misdemeanor or felony if occurrence is during the program. Students will not be permitted to continue in the program without a disposition date. Students may not be allowed to continue in the program depending on the offense. The student must pay the cost of the background check.			
Hepatitis A	Recommended but not required.			
Drug Screen	Students are required to have a negative drug screen prior to beginning first clinical experience. Students will be notified by the Office of Field Experience when drug screen is required. The student pays the cost of the drug screen. All students should refer to the detailed Policy for Student Drug, Nicotine & Alcohol Screening below.			

HIPAA Form	Students must sign and return this form, which certifies the student has completed the HIPAA training within the Nursing Caring Corner and completed the quiz with an 80% or higher.
Universal Precautions	Based on the mandatory CDC and OSHA guidelines, students and clinical faculty will consistently observe blood and body fluid precautions when working with all clients in all settings. Students are required to complete the Blood-borne Pathogens Training in the Nursing Caring Corner. Once training is completed, students must take quiz and get an 80% or higher. Students will submit a screenshot of the grade page (showing name, date, and grade) to meet this requirement.

POLICY FOR STUDENT DRUG, NICOTINE, & ALCOHOL SCREENING

The practice of professional nursing demands that the clinician be free from the influence of any substance that would impair judgment and thinking ability. As a result, health care agencies are requiring students who work directly with patients to undergo drug screening. Nursing students must also be free from impairing substances. Health care agencies and the CONHS require drug screening of all nursing students prior to their first clinical experience. In addition, CONHS students are subject to screening if either the faculty suspects that the student is impaired at any time on campus, or during any health care experience or any other university or work-related activity. Any student whose test is deemed positive will not be able to enroll or continue in the nursing program for a minimum period of one year. Determination will be made by the Program Director. The CONHS is required to report any positive screens and/or suspicion refusal to the appropriate board.

This policy is designed to identify the procedures to be followed for both types of testing as well as to outline the appeal and readmission to the program.

Initial Urine Drug Screening

1. First clinical course and new transfer students will be randomly given a drug screen authorization form and a 24-hour time frame to complete a urine drug screen at one of the laboratory options provided.
2. Students will be required to show picture identification upon arrival. A driver's license or passport are acceptable forms of identification.
3. The cost for all screening and medical review (if deemed necessary) is the students' responsibility.
4. A screen with questionable results will be sent by the lab for a medical review. Costs for review and retest will be the responsibility of the student.
5. A negative report is necessary to continue in the program of study in the CON.
6. This screen need not be repeated as long as the student maintains continuous enrollment. Continuous enrollment is defined as enrollment in nursing classes during all consecutive semesters until graduation.
7. Students may be re-tested for cause or reasonable suspicion.

For Cause or Reasonable Suspicion Drug, Nicotine & Alcohol Screening

The CONHS may ask a student to submit to a drug and alcohol screening at any time a faculty member believes that the student may be under the influence of drugs or alcohol. This includes but is not limited to the following circumstances: evidence of drugs or alcohol on or about the student's person or in the student's possession, unusual conduct on the student's part that suggests possible use or influence of drugs or alcohol, negative performance patterns, or excessive and unexplained absenteeism or tardiness. Determination will be made by the Program Director after consultation with the clinical faculty.

1. Students will be asked to submit to an immediate oral drug and alcohol screening test conducted at one of the laboratory options provided.
2. Students may also be given a drug screen authorization form and asked to immediately complete a urine drug screen at one of the laboratory options provided.
3. Students will be required to show picture identification upon arrival. A driver's license or passport are acceptable forms of identification.
4. The costs for all screening and medical review (if deemed necessary) are the students' responsibility.
5. A screen with questionable results will be sent by the lab for a medical review by the company completing the drug screen. Costs for review and retest will be the responsibility of the student.
6. A negative report, excluding a positive nicotine result, is necessary to continue in the program of study in the CONHS.

Follow-up Action: Positive Screen (For Cause or Initial Drug Screen)

1. Positive drug screens (including those medically prescribed) may result in withdrawal from the nursing program for a minimum of 12 months. After this 12-month period, the student may apply for readmission under general guidelines stated in the United States University Catalog, provided there is submission of evidence of satisfactory participation in a rehabilitation program for alcohol/substance abuse. Determination will be made by the Program Director.
2. Sources of evidence include:
 - a. Documentation of completed program of rehabilitation.
 - b. Acknowledgement of continuance in a twelve step or after-care program.
 - c. Letter from therapist or licensed health care provider stating the student is now able to function safely in a clinical facility.
3. The student must have a negative screen prior to being readmitted to the nursing program. The screen will be done at the direction of the FNP Program Director and may be periodic while the student is in a CONHS program. The student is responsible for all costs of screening.
4. The decision to readmit will be made by the Program Director after review of submitted materials. As with other applications for readmission, space availability may be a determining factor.

5. A report will be filed with the CA Board of Nursing upon withdrawal from the program consistent with the rules and regulations of the CA Board of Nursing.
6. Any student who screens positive after one readmission may be expelled from the nursing program.

Follow-up Action For-Cause Negative Screen

1. Students whose drug screens are negative will meet with the Program Director to discuss the perceptions of impaired behavior and the implications and steps to avoid similar situations in the future.
2. A review by the Medical Review Officer (MRO) by the company collecting the drug screen for documentation of any medical condition or treatment may be requested.
3. Students will not be counted as absent from clinical during this evaluation process. However, students will be expected to meet the clinical objectives.
4. A reasonable suspicion/cause drug screen that is positive; however, is deemed negative by a MRO will follow these guidelines:
 - a. The student will meet with the Program Director.
 - b. The student may be required to undergo, at the student's expense, an evaluation for drug use/prescription drug use/impairment by a psychiatrist recommended by the State Board of Nursing.
 - c. The student will follow other recommendations deemed necessary by the Program Director.
 - d. The student will be required to provide a negative drug screen prior to returning to clinical and be subject to periodic drug screens at the student's expense.
 - e. More than one incident of a reasonable suspicion/cause drug screen that is positive; however, deemed negative by a MRO may result in withdrawal from the nursing program for a minimum of 12 months. In this case, the student will follow the positive drug screening guidelines.

Students Who Refuse Drug Screening

Students who refuse to participate in screening will be required to leave the clinical area and make an appointment with the Program Director. The student will remain out of the clinical area until an investigation has been done and a recommendation has been made by the Program Director. Students who refuse screening may be subject to dismissal from the CONHS. A student who refuses to participate in a rehabilitation program will not be allowed into clinical courses; therefore he/she cannot complete the nursing program.

Substances Included in Urine Drug Screen

Amphetamines, Barbiturates, Benzodiazepines, Cannabinoids, Cocaine metabolite, Cotinine (tobacco/nicotine), Fentanyl, Meperidine, Methadone, Opiates, Oxycodone, Phencyclidine, Propoxyphene

**Please note certain clinical facilities include nicotine as part of their screening and will not allow students to rotate at their facility who test positive from nicotine or its byproduct, cotinine.*



SAFETY GUIDELINES FOR STUDENTS

Standard Precautions

Students will adhere to all guidelines for Standard Precautions within the clinical agencies.

Bodily Fluids Exposure and/or Injury during Clinical Experiences

United States University acknowledges the inherent risks associated with working around or with patients and health care organizations, including a potential exposure to blood and body fluids. Once in a patient care setting, you will have access to and are expected to utilize appropriate blood borne pathogen barriers, proper sanitary precautions, and appropriate biohazard disposal equipment and procedures at each clinical site. The following policy outlines your responsibilities in this area:

- You must have and maintain current health insurance and show verification of coverage each year while matriculated in the program.
- United States University and the clinical agencies that provide clinical experiences for students are not responsible or liable for the costs of medical follow-up or expenses incurred.
- If evaluation and treatment is required by the facility where you are completing clinical experiences, the student is responsible for all costs and associated follow up.
- In the event that you are injured or exposed to blood and body fluids, you will:
 - Immediately notify your clinical instructor or site supervisor.
 - Wash the area immediately and thoroughly with soap and water.
 - Within 24 hours, follow-up with your own Primary Care Provider who will decide of immunization status and give appropriate prophylaxis or referral for appropriate prophylaxis.
 - Assume full responsibility for disease sequelae.
 - Follow the policies of the agency (if any).
 - Complete an incident report with the clinical faculty who was present during incident. A copy of this report will be given to the Office of Field Experience and placed in the student's file.

Protocol for Puncture Wounds and Exposure to Blood or Bodily Fluids

- Incidents involving any type of needle stick or body-fluid exposure must be reported to the Clinical Faculty/Facility immediately. The clinical faculty will then notify the Office of Field Experience.
- All faculty and students should observe the protocol for safe needle usage when practicing or performing parental injections, IV starts, blood draws, or using syringes, or performing any invasive procedure as part of a skills check off, or in a clinical setting. The faculty/student should follow the protocol for needle usage at the agency where clinicals are being held.

Uncontaminated Needle Stick or Intact Skin Exposure

A student who accidentally punctures him/herself with an uncontaminated needle or is exposed to blood or bodily fluid that is an intact skin exposure should:

1. Wash the area immediately and thoroughly with soap and water

2. Follow-up with their own Primary Care Provider who will make a determination of Tetanus immunization status and give appropriate prophylaxis or referral for appropriate prophylaxis.
3. Complete an incident report with the clinical faculty who was present during the incident. A copy of this report will be given to the Office of Field Experience and placed in the student's file.
4. Counseling referral and other referrals can be arranged through the student's personal Primary Care Provider.

Contaminated Needle Stick or Non-Intact Skin or Mucous Membrane Exposure

If the exposure is via a contaminated needle or if a bodily fluid exposure to non-intact skin, or to mucous membranes the student should continue with the following:

1. Wash the skin area immediately with soap and water. If exposure is to mucous membranes, flush area with water immediately.
2. Report the incident to your clinical faculty.
3. Immediately seek medical attention. If in an acute care setting, always follow agency guidelines. This may include reporting to either Occupational Health or the agency Emergency Department.

In the event that this incident occurs, in the community setting, when the agency Occupational Health Center or Emergency Department are not available, United States University recommends that you seek immediate treatment at an Urgent Care or Physician's Office equipped to treat contaminated needle stick injuries.

An incident report will be completed by the student and the clinical faculty who was present during incident. A copy of this report will be given to the Office of Field Experience to be placed in the student's file. Financial responsibility for testing and recommended care following an exposure rests solely with the student. This could include testing, evaluation, treatment, and counseling.

If you have questions about the appropriate medical treatment, the Centers for Disease Control and Prevention recommend that you call a 24-hour assistance line at 1.888.448.4911 (Clinicians' Post Exposure Prophylaxis Hotline).

TUBERCULOSIS EXPOSURE PLAN

According to the CDC, "It is important to know that a person who is exposed to TB bacteria is not able to spread the bacteria to other people right away. Only persons with active TB disease can spread TB bacteria to others."

"Some people develop TB disease soon (within weeks) after becoming infected, before their immune system can fight the TB bacteria. Other people may get sick years later, when their immune system becomes weak for another reason. Many people with TB infection never develop TB disease."

<http://www.cdc.gov/tb/topic/basics/exposed.htm>

Students will not be held from clinical experiences unless they have an active TB infection, not TB disease. Active TB is determined using TB screening and confirmation by qualified health care providers/professionals based on symptoms of active TB.

Tuberculosis (TB) exposure potential is defined as any exposure to the exhaled or expired air of a person with suspected or confirmed TB disease. A high hazard procedure involving an individual with suspected or confirmed TB disease is one that has the potential to generate potentially infectious airborne respiratory secretions such as aerosolized medication treatment, bronchoscopy, sputum induction, endotracheal intubation, and suctioning. Workplaces with inherent exposure potential to TB disease:

- Health care facilities
 - Corrections facilities
 - Homeless shelters/clinics for homeless
 - Long term health facilities
 - Drug treatment centers
 - Post-exposure Procedure
1. When a Tuberculosis (TB) exposure occurs, the involved student will report the incident to the clinical instructor and the appropriate administrative staff at the involved institution or agency.
 2. The student will be counseled immediately and referred to his or her personal health care provider, or local Health Department.
 3. A baseline Tuberculosis Skin Test (TST) should be administered as soon as possible after the exposure.
 4. Frequency of follow-up TSTs will be performed per provider protocol. A TST performed 12 weeks after the last exposure will indicate whether infection has occurred.
 5. A student with evidence of new infection (TST conversions) needs to be evaluated for active TB. Even if active TB is not diagnosed, prophylactic therapy for latent TB is recommended.
 6. A student with a previously documented reactive TST need not be retested but should have a baseline symptom screen performed following the exposure and repeated 12 weeks after the exposure. If the symptom screen is positive a chest x-ray is required.
 7. Any active case of TB must be reported to local Health Department.

Return to Class for Active TB

A student diagnosed with active pulmonary or laryngeal TB may be highly infectious; and will not be able to attend class or clinical experiences until he/she is noninfectious. In order to return to school, the student will need to provide documentation from the health care provider that he/she is noninfectious. The documentation needs to include evidence that:

- The student has received adequate therapy for a minimum of 2 weeks.
- The cough has resolved, and the student is not experiencing chest pain, hemoptysis, fever or chills.
- The results of three consecutive sputum acid-fast bacilli (AFB) smears collected on different days are negative

Documentation and Financial Responsibility

- After the student returns to school and remains on anti-TB therapy, periodic documentation from their health care provider is needed to show that effective drug therapy is being maintained for the recommended period and that the sputum AFB smear results remain negative.
- The student is responsible for all costs related to the exposure incident.
- The student's health records will be maintained in a confidential file.



COMMUNICABLE DISEASE POLICY

You may not participate in classroom or field experiences during the time you are affected by or suspect you have a communicable disease. A communicable disease is a health disorder that can be passed from one person to another. If suspected of communicable disease, you must immediately visit your personal physician for evaluation. If the evaluation shows possible communicable disease, you must remain out of contact with patients for the duration suggested by the physician and report this to the course faculty and program director. You may not return to participation in clinicals until you have been re-evaluated by a physician, nurse practitioner, or physician assistant and released with written verification from the medical provider. You must contact the clinical faculty upon suspicion and verification of the disease.

The following are examples of communicable diseases:

AIDS	Strep pharyngitis	Hand, foot, mouth syndrome
Cholera	Measles	Viral and acute hepatitis
Tetanus	Influenza	Herpes
Shingles (Herpes Zoster)	Herpes Simplex	Lice (pediculosis)
Conjunctivitis	Meningitis (bacterial)	Lyme disease
Impetigo	Mumps	Escherichia coli (E coli)
Diphtheria	Pertussis (whooping cough)	Tuberculosis
Yellow Fever	Rubella	Group A Strep
Chickenpox	Shigellosis	Pinworms
Diarrhea-infectious	Streptococcal pneumonia	Ringworm
Hepatitis A, B or C	Scabies	

HEAD LICE PROCEDURE

- Transmission to another host occurs when two heads are in direct contact for one minute or more. They can climb rapidly in dry hair and are not removed by washing.
- Standard Infection Control Precautions (Universal Precautions Policy) should be implemented for the management of lice.
- Staff should wear appropriate PPE (long sleeved gowns and gloves) during application of treatment and when prolonged contact occurs.
- Remove linen and clothing carefully and treat as infected linen.
- Minimum of daily linen changes may be necessary to reduce the number of lice where there is heavy infestation.
- Personal clothing can be sent home in a sealed plastic bag for washing which should be washed at temperatures suitable for the fabric but ideally above 65 degrees and preferably dried in a tumble drier and ironed.
- Student needs to go home for treatment and cannot return for 24 hours: Obtain the recommended product from the pharmacy. Treat the patient according to product instructions. Two treatments are recommended seven days apart to prevent lice emerging from eggs that survive the first application. All family members, close contacts and affected staff (head to head contact for 1 minute or more) to be treated at the same time on the same day.



Malpractice Insurance/University Insurance Coverage

Student-Self Coverage: FNP students are required to carry their own professional liability insurance. The coverage is a minimum of \$1,000,000 per event/\$6,000,000 aggregate. This coverage must state that the student is in an advanced practice/nurse practitioner student role. *Note: Your clinical site may require additional coverage.*

CONHS carries Medical Professional Liability Insurance on all students for our programs that require clinical experiences. The coverage is \$1,000,000 each occurrence and \$3,000,000 aggregate.

OFFICE OF FIELD EXPERIENCE

Students enrolled in CONHS programs that require field experiences will be assisted by the Office of Field Experience (OFE) to secure appropriate clinical settings for completion of their clinical hours. The OFE staff will carefully monitor each of your placements to ensure they meet USU's high academic standards.

Clinical Placements

Students enrolled in the FNP program will be assisted by the Office of Field Experience to secure appropriate clinical settings for completion of their clinical hours. Some travel may be required to obtain hours at a clinical site. The OFE will work with you to ensure all health and safety and site required documents are verified and on file prior to clinical placement. It is your responsibility to work to complete these requirements on a timely basis to ensure successful placement.

Clinical Hour Requirements

The student's clinical practicum hours are to be scheduled at the convenience and availability of the preceptor. Students should not request or expect preceptors to conform to a schedule to meet their own personal and/or employment needs/preferences. Students are expected to participate in the required number of clinical hours prescribed by the clinical course and students are expected to amend their own personal and work schedules accordingly. Students are expected to begin their clinical experience when the course begins to insure adequate time to complete assignments unless stated otherwise in the syllabus. Students are not permitted to begin hours PRIOR to the start date of the course. In MSN573, students are not permitted to start clinical hours until week 6 of the course. By the end of program all clinical hours must be complete. Clinical hours do not rollover from course to course – students must obtain the minimum required hours of each clinical course.

For FNP education, the majority of students hours are in primary care across the lifespan are required to sit for national certification. However, there are additional hour requirements to meet their program of study. Please review the *CONHS Guidelines for FNP Clinical Placements and Experience (Appendix I)* to confirm appropriate clinical sites, experiences, and population of focus for each course. Please note that APRNs cannot practice in a population focus for which they were not trained. For example, if students want to pursue a practice in pediatrics or women's health, they would need an additional PNP



or WHNP education and certification. For more information about the APRN Consensus Model, students may visit: <https://www.ncsbn.org/736.htm>. Timely and complete documentation is a professional responsibility of all clinicians. Students are expected to document all patient encounters whether observed or performed, and experiences using Project Concert within 48 hours of the clinical encounter or the associated hours will not count towards the clinical hour requirement. Students' are required to obtain a total of 585 clinical hours associated with patient experiences. Hours are entered into Project Concert by completing a Journal Entry. All patient experiences must be entered into a Journal so that it counts toward your hours. Patient experience time includes: the time you are in the room with the patient, the time you are talking with your preceptor about that particular patient and the time you take to chart for that, and any administrative activities associated with the patient. That entire time counts as patient time because it's in relation to the single visit.

A FNP program shall provide clinical instruction that includes, at a minimum, selected and guided experiences that develop a student's ability to apply core principles of advanced practice nursing in varied settings when caring for patients within the full lifespan. Most of the clinical hours will be completed in a family practice or internal medicine setting. All hours for each population must be identified separately in your clinical log in Project Concert. Please see **CONHS Guidelines for FNP Clinical Placements and Experience (Appendix I)** for further details on each clinical course.

Within the required 585 clinical hours you must get:

- Geriatrics: 100 minimum hours
- Women's Health, Obstetrics, Gynecology: 40 minimum hours
- Pediatrics: 80 minimum hours
- Optional Specialty Rotations: Up to 40 hours maximum in specialty rotations---(combined total in multiple specialties or all in 1 specialty).
- During FNP 594 or FNP 597 ONLY: ER/Urgent Care 60 hours maximum

Selection Criteria for FNP Clinical Sites

CONHS requires that nurse practitioner student clinical experiences to occur in clinical sites that meet the criteria below, and follow the state board nursing scope of practice. Students are expected to review and become knowledgeable of the scope of practice for their particular state board of nursing. In order to meet the criteria, students should be prepared to travel to clinical sites outside of the city in which they reside during any semester.

- As a primary care nurse practitioner focusing across the lifespan, student clinical placements should mostly be in primary care clinics. These experiences should be based upon student learning objectives and students are encouraged to discuss this with faculty.
- Patient characteristics represent diversity (education, income, insurance, race/ethnicity).
- Patient volume is adequate to ensure sufficient patients per day for student to acquire the skills required to meet core curriculum guidelines, program goals, and practice in a work environment upon graduation
- Space is available for student (examination room, area for documentation)
- Adequate resources available on site
 - Preceptor
 - Medical record system (electronic preferred but not required)



- Current medical reference books or Internet access for searching
- The inpatient hospital setting is not an appropriate clinical site for FNP students at any point during the clinical experience.

Selection Criteria for FNP Clinical Preceptors

FNP students engage in clinical practice under the guidance of a qualified clinical preceptor. The mandatory preceptor/student ratio (direct supervision) is 1:1. Students are required to work with at least one Nurse Practitioner Preceptor throughout their clinical experience. The clinical preceptor must be:

- Formally educated for professional practice:
 - A preceptor is a NP, CNW, MD or DO who, while employed by a clinical facility, is assigned to directly supervise a student's clinical education for the duration of a formal course designed to prepare registered nurses to transition to advanced practice nursing.
- Clinical preceptors may be used to enhance faculty-directed clinical learning experiences, but not to replace faculty. A clinical preceptor shall be approved by program administration and:
 - Hold a current unencumbered license or multistate privilege to practice as a registered nurse or physician in the state in which the preceptor practices or, if employed by the federal government, holds a current unencumbered RN or physician license in the United States;
 - Has at least one year clinical experience as a physician or an advanced practice nurse
 - Practice in a population focus comparable to that of the FNP program;
 - For FNP preceptors, have at least one of the following:
 - Current national certification in the advanced practice role and population focus of the course or program in which the student is enrolled;
 - Current Board certification in the advanced practice role and population focus of the course or program in which the student is enrolled; or
 - If an advanced practice preceptor cannot be found who meets the requirements of educational and experiential qualifications that will enable the preceptor to precept students in the program, as determined by the nursing program and approved by the Board, approvals will be obtained only by the College Dean.
- Be actively involved in clinical practice.
- Once the Office of Field Experience receives preceptor licensing, credentialing, CV/Resume and certification information, the documents are sent to the Program Director who reviews and provides final approval or denial of the preceptor.

Preceptor Fit

It is intended that students stay with the clinical preceptor and site arranged by themselves or the OFE during the course. If the fit between the student and clinical preceptor/site is not working or the student is not being exposed to the required patient populations the clinical faculty and student will discuss the need to identify another clinic site. All students who do not wish to remain with their preceptor and site for other various reasons will be responsible for finding a new clinical preceptor and site and must be in communication with the OFE and their faculty regarding any preceptor and site changes as soon as practical. The College and faculty must be apprised of students' placement at all times. Any new preceptor or site would need to be



approved by OFE and Program director respectively.

Affiliation Agreements

USU must have an agreement with the site prior to the student beginning field experiences. It is the student's responsibility to provide OFE their site's coordinator information, so that the OFE can work directly with the facility to obtain the required paperwork. **It is important to remember this is not a contract when submitted for approval.** If a current agreement is not already in place, the legal contract will be sent directly to the preceptor's site from the OFE. Completing new site agreements can be a lengthy process and the Affiliation Agreement must be in place prior to the clinical course start date. **Students should allow at least four to six months for a new agreement to be finalized.** Failure to provide site information accurately and entirely can slow this process and may prevent the student from beginning the field experience on time. Once an Affiliation Agreement has been finalized, students will be notified via email. Some sites may have specific requirements for documentation for a placement. Students are to work with both the site and OFE to ensure all requirements are met (e.g. a hospital may require a background check different from the original background check and has the right to specify their own institutional requirements that are not within the control of the University).

Project Concert

Project Concert is a "clinical hub" used by students and clinical faculty. It has 3 main functions:

- 1) An environment for students to log their clinical hours and labs. Reports can be pulled in excel format and with graphing for facilitating both personal records of experiences for the students as well as reporting to demonstrate the quality of clinical experiences for accreditation.
- 2) Houses documents and records for clinical faculty and students.
- 3) Shows schedule for student which includes course, timeframe, preceptor and site. Students may not log hours with a preceptor and site that they are not scheduled to be at.

Students will receive an email from OFE by the end of their first course. The email contains the student's login information, detailed instruction sheets on how to log clinical hours and journals and how to pull reports to track hours for program requirements. Videos are also available on PC website upon logging in for additional help. Students are required to watch the training video in PC and read all training materials. It is the student's responsibility to properly document clinical and immersion (lab) hours in PC. Additional guidance may available in the classroom and by the clinical course faculty. For technical difficulties students, faculty and preceptors may reach out to OFE for assistance.

All patient experiences must be documented using Project Concert within 48 hours of the encounter or the associated hours will not count towards the clinical hour requirement



CLINICAL ATTENDANCE AND PARTICIPATION

Absences in clinical rotation may jeopardize a student's successful progression and completion of the program. Clinical absences may result in clinical probation at the discretion of the clinical faculty. Students who are too ill to perform safely in clinical should seek medical attention and contact their clinical faculty prior to missing clinical.

Attendance of 100% is strongly recommended. Students are responsible for any and all material covered in class, in clinical, and in their assigned readings. Participation in the online classroom and clinical experience is essential to meet the objectives for all clinical courses.

Attendance at all scheduled lectures, discussions, and clinical and laboratory courses is expected. Students are expected to be on time to all scheduled activities. Students are required to notify faculty of any absence and/or anticipated tardiness. Individual faculty will discuss the mechanism for notification of absence. Absenteeism may interfere with student attainment of course objectives, and may impact the grade students receive in clinical and theory courses.

Any student who has experienced an Emergency Department visit or hospitalization or an acute illness, trauma, surgery, or pregnancy/delivery will need a health care provider's release to return to clinical. Such a release should provide information that attests to the fact that the student is physically and emotionally able to provide direct patient care.

Students who must miss clinical due to pregnancy or extended illness may not be able to complete clinical objectives. Students must contact the clinical faculty member to discuss options or students are encouraged to contact the Office of Field Experience. The CONHS is not obligated to provide makeup clinical opportunities for students unable to complete clinical during their clinical course.

Clinical Absence Policy

Failure to complete the minimum clinical requirements will result in failure of that clinical course. All absences are to be reported to the clinical faculty in a timely manner via email, text, or phone, as required by the clinical faculty.

If a student is unable to attend clinical, the student must:

1. Contact, by phone or in person, the clinical faculty, at least one (1) hour prior to the scheduled clinical time.
2. At the discretion of the faculty member, submit a release signed by a health care provider to return to clinical.
3. Release from medical provider if related to pregnancy.

Clinical Tardy Policy

Clinical tardiness is defined as being late at the beginning of a clinical. Any anticipated tardiness is to be reported to the appropriate clinical faculty.

Consequences of being tardy three times within the same course are:

- o First Occurrence: Student will receive a clinical warning.
- o Second Occurrence: Student will be placed on clinical probation for the second late.
- o Third Occurrence: Student will fail clinical on the third late.



Clinical Restriction

Clinical restriction is the official means of restricting the student from any clinical experience when students have missing, expired, or insufficient immunizations or documentation requirements on file with the Office of Field Experience. You will be notified by the OFE and/or through Complio before documentation is set to expire. Once documentation has expired, the Clinical Coordinator will notify your clinical course faculty of your restriction status. **At all times, it is your responsibility to ensure that your health and safety documentation is up to date and current, and that all other program requirements have been met.** Health and safety requirements are mandatory for all students where indicated in this handbook.

Clinical Probation

Clinical probation is the official means of notifying you of unacceptable behavior or unsatisfactory performance. Being placed on probation can affect the field experience/clinical grade and will result in a Student Code of Conduct violation and may result in being administratively withdrawn from the course as determined by the Program Director.

Clinical probation status is conferred at the discretion of the course instructor, clinical instructor, and respective course faculty for any unsafe or unprofessional behaviors. The following are examples of behaviors that lead to probation:

- ◆ Participating in a setting with expired or outstanding immunizations or documentation or delay in completing *COMPLIO* by the due date
- ◆ Unexcused absences
- ◆ Tardiness, failure to notify faculty/staff of tardiness or absences in clinical
- ◆ Insufficient preparation for the field experience
- ◆ Failure to follow clinical faculty or clinical nurse guidance
- ◆ Unsafe practice in the clinical area
- ◆ Causing a client unnecessary suffering or harm
- ◆ Failure to report abnormal data in a timely manner to the appropriate persons
- ◆ Conduct inappropriate to the role of the student as outlined in this manual
- ◆ Failure to dress in approved program attire
- ◆ HIPAA violations
- ◆ Leaving the clinical site without permission at any time during clinical hours
- ◆ Performing skills/interventions which have not been signed off by the clinical faculty
- ◆ Acting outside of a student scope or practice

Probation Procedure

- ◆ Code of Conduct processes will be initiated.
- ◆ A discussion with Clinical Faculty and a letter of probation will be provided to you by the Office of Field Experience.
- ◆ A copy of the letter will be sent to the Program Director and will be placed in your file.
- ◆ Refer to <https://www.usuniversity.edu/current-students/university-catalog/> for more information
- ◆ Clinical probation may result in up to 10% reduction in the overall clinical grade and may result in the student being withdrawn from the course



FAILURE/PROGRAM EXPULSION

If you fail to meet the course objectives, policies, and procedures outlined in the classroom and this manual, you may face failure or program expulsion. Any failed course(s) must be repeated before proceeding to the next course outlined in your program of study. Refer to the Repeat Policy in the University Catalog for more information on number of allowable attempts and failure of co-requisite didactic courses. A Code of Conduct violation will be filed by the clinical faculty for any action that results in clinical failure. Clinical experience or Clinical course failure may result in a failure of the co-requisite didactic course. Examples of clinical failure, program expulsion, or Code of Conduct violation actions, include but are not limited to:

- ◆ Compromising United States University’s relationship with any site
- ◆ Compromising safety in any form
- ◆ Plagiarism and ethical conduct resulting in Code of Conduct Violations

FNP CURRICULUM PLAN

6 Semesters/24 Months - 50 Semester Credits 100% Online; with 2 On Site Immersions

Year 1:

Term	Credit Hours	Course Number and Title	Immersion
1	3	MSN 560 Transitions in Practice: The Role of the Advanced Practice Nurse	Start <i>Complio</i>
2	3	MSN 561 Theoretical Foundations of Advanced Practice Nursing	
3	3	MSN 563 Evidence Based Inquiry for Scholarship and Practice	
4	3	MSN 565 Nursing Leadership and Health Policy	(Must be substantially complete in <i>Complio</i>)
5	3	FNP 590 Health Promotion, Education and Disease Prevention Across the Lifespan	
6	3	MSN 570 Advanced Pathophysiology Across the Lifespan	

Year 2:

Term	Credit Hours	Course Number and Title	Immersion
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7	3	MSN 571 Advanced Pharmacology Across the Lifespan	
	2	MSN 564 Cultural and Spiritual Care Across the Lifespan	
8	3	MSN 572 Advanced Health and Physical Assessment Across the Lifespan	
	1	MSN 573 Advanced Health Assessment Across the Lifespan and Cultures Lab (12 lab hours and 36 hours of clinical)	Week 1- *ON CAMPUS IMMERSION Week 7- **VIRTUAL OSCE (Objective Structured Clinical Examination) training and checkoff.
9	3	FNP 591 Common Illnesses Across the Lifespan	*ONE ON CAMPUS IMMERSION DURING FNP592 OR FNP594
	3	FNP 592 Common Illnesses Across the Lifespan – Clinical Practicum (119 clinical hours)	
10	3	FNP 593 Primary Health of Acute Clients/Families Across the Lifespan	(3 days to include 2 days of simulation; 1 day skills: suturing, splinting, X-rays)
	3	FNP 594 Primary Health of Acute Clients/Families Across the Lifespan – Clinical Practicum (135 Clinical hours)	
11	3	FNP 595 Primary Healthcare of Chronic Clients/Families Across the Lifespan	
	3	FNP 596 Primary Healthcare of Chronic Clients/Families Across the Lifespan – Clinical Practicum (134 clinical hours)	Week 8- **VIRTUAL simulation and complete certification predictor exam
12	3	FNP 597 Clinical Residency and Practice Management (135 clinical hours)	
	2	MSN 600 Evidence-Based Capstone Project	



ROLES AND RESPONSIBILITIES

Student Responsibilities

- Upon enrollment the student must have a preceptor and clinical location site confirmed, or 3 potential clinical sites using the *Preceptor and Clinical Placement Interest Sheet* (Appendix G) that can be contacted by the OFE.
- A *Preceptor Information and Acknowledgement Form* (Appendix H) must be on file with OFE for each preceptor prior to the student starting the clinical rotation. The student is responsible for providing the *Preceptor Information and Acknowledgement Form* to be completed and signed by the preceptor. A copy of this form is to be given to the Preceptor, and a copy is sent to the OFE and filed under “Student Documents” in Project Concert.
- A change of address (especially a move to another state) may cause the inability to progress in your program of study. The inability to progress in the program of study may delay the student’s graduation. The United States University College of Nursing and Health Sciences program is not responsible for guaranteeing a clinical placement when a student moves after the start of a term, or after a move the term before clinical starts in the case of out-of-state placements.
- The student must thoroughly complete all OFE Requirements, including *Complio* (American Data Bank) prior to completing any clinical course. Note: Students cannot start clinical until all *Complio* and site affiliation requirements are completed. **Complio and site requirements must be current throughout each clinical course.**
- If needed, meet with the appropriate person at the clinical site (preceptor, office manager, etc.) to negotiate the dates and times to be in clinical.
- Provide all clinical sites with required information requested by the site (i.e. Immunizations, fingerprints, criminal background checks, Health information, OSHA training, copy of nursing license, American Heart Association Healthcare CPR lesson, drug screening, patient confidentiality statement, or any other agency requirements).
- The student’s personal and work schedules are expected to accommodate the required number of hours required in each course.
- Students must meet all orientation, health and safety, and administration expectations of the facility before scheduling field experiences.
- Complete the **Student Evaluation of Preceptor** for each Preceptor (example in Appendix).

Clinical Faculty Responsibilities

At United States University the clinical faculty responsibilities include the following:

- Work with Office of Field Experience for contract assignment availability
- Complete all training required prior to supervising students in clinical course
- Maintain immunization/health/safety compliance in *Complio* and complete any agency requirements necessary to start the assigned rotation, if applicable
- Maintain personal updated Health and Safety documents.
- Clinical faculty will supervise and facilitate learning for students in no more than a 6:1 ratio per



clinical course.

- Provide timely and constructive feedback to students. For any clinical issue or concern, document and send to student via email. For any immediate concern concerning student or patient safety, please contact OFE at ofe@usuniversity.edu immediately.
- Complete grading of clinical assignments as determined by course syllabus according to university policy guidelines.
- Complete the *Preceptor and Site Evaluation by Site Supervisor Form* (example in Appendix) for each student with the Preceptor via email or phone call by close of clinical course.
- For clinical faculty assigned to lab and simulation experiences:
 - Arrive 30 minutes prior to assigned start time
 - Review lab and/or simulation materials before assigned experience
 - Ensure standardization of instruction with USU course materials
 - Maintain compliance with any additional lab or simulation specified training

OFE Clinical Coordinator Responsibilities

- Ensure that students understand the nature of the clinical experience and the expectations involved.
- Assist students in ensuring all required health and safety documents and site requirements have been met.
- Be available to counsel with students as situations dictate.
- Act as the centralized point of contact for any student or clinical faculty issues or concerns brought forth.
- Works with all students in assigned load following enrollment into the FNP program.
- Responsible to ensure students are aware of and complete requirements for placement in the clinical setting and maintain their approved status.
- Will work with students to insure all necessary health and safety documentation is uploaded and cleared in required systems in advance of start of the clinical experience. Works with student to determine and identify best placement options.
- Works collaboratively with other OFE staff and management as well as CONHS leadership.
- Will manage the Affiliation Agreement legal review as necessary with USU legal department and the legal departments of the site.
- Will monitor and ensure all preceptors have been approved by CONHS based on submitted document and will provide access to required systems.

Preceptor Responsibilities

A preceptor is an NP, CNW, MD or DO who, while employed by a clinical facility, is assigned to directly supervise a student's clinical education for the duration of a formal course designed to prepare registered nurses to transition to advanced practice nursing. As a preceptor, you allow the student to observe and experience what you, the expert, do on a daily basis, to ask questions, and to critically analyze what is observed. You challenge, guide, direct, and support the student. Fundamental to the process is your willingness to share professional values, beliefs, and skills, while incorporating professional standards of practice within legal and ethical parameters.

- Possess clinical expertise appropriate to accomplish the goals of the preceptorship and has at least one year of work experience at or above the level of licensure of the student's program.
- Authorized to practice in the state or currently licensed as a health care professional as required by state regulations.
- Current unencumbered license in the specialty when required for the role.
- Professional certification, if required/appropriate.
- Provide the student with ongoing constructive feedback that relates performance standards to student performance
- Participate in faculty/preceptor conferences and communicate with faculty to clarify roles and the nature of the learning experience.
- Provide an orientation for the student to the practice area and expectations of nursing care standards
- Participate in orientation to the preceptorship.
- Precept no more than 1 person per shift.
- Participate with the faculty and student in the evaluation of the student's clinical competence.
- Complete the *Preceptor Evaluation of Student* (example in the Appendix).

United States University College of Nursing & Health Sciences is responsible to orient the Preceptor on the following items:

- Mission, goals, and curricular outline of the program.
- Student objectives, course objectives and course outline.
- Role of the preceptor and faculty.
- Performance expectations of the student.
- Evaluation responsibilities and standards for the student, course, and preceptor.
- Avenues of communication between the program, faculty, preceptor, facility, and student.
- Student assignments related to the experience.
- Expected initial level of knowledge, skills, and abilities of the student.

CLINICAL PRACTICE IMMERSIONS

Practice immersions allow students to be introduced to new skills. Students will be expected to practice, and be evaluated on his/her skills. Practice immersions will be integrated throughout your clinical courses. You will have a total of four practice immersions: 2 on-campus in San Diego or other designated site and 2 virtual practice immersions.



ON CAMPUS- There are two practice immersions held *on campus* in San Diego, CA or other sites across the country that includes standardized patients for students to learn and practice skills. The first on campus immersion is held during MSN573 to introduce and allow practice of health assessment clinical skills on standardized patients. The second on campus immersion will be held during the rest of your clinical courses. The purpose of the second on campus experience is to allow for practice of specific clinical and procedural skills such as suturing and radiology interpretation.

VIRTUAL- The two virtual practice immersions in which students will be completing a test out during MSN573 and FNP596 with a consented peer of their choice in their home or designated area within their state. The clinical course faculty will individually schedule these immersion dates and times during the course. The students will utilize YouSeeU or another form of technology approved by the instructor to complete these immersions.

STUDENT IMMERSION RESPONSIBILITIES

- The clinical practice immersions are an extension of your clinical and academic program. Therefore, all the same requirements for maintaining professional behaviors in both clinical and academic settings apply (i.e. dress and behavior, etc.).
- No food or drink in patient simulation or lab areas – may cause damage to equipment
- No children – risk of injury from equipment
- No cell phones during testing or in student work areas (Please turn phones off) – Can be very distracting to students when testing & practicing.
- Students are required to wear their student ID always while in the lab and follow the recommended dress code.
- Respect lab personnel and equipment always.
- Review the course syllabus for due dates and late assignment policies.
- Failure to meet deadlines may result in failure to meet course objectives.
- Review all skills guidelines for each check-off.
- Practice/Testing areas: Follow directions/signs for use of lab space and equipment. Ask for directions and for location of practice or testing equipment.
- Use beds for practice and testing purposes only.
- Report any malfunctioning, unsafe, or damaged equipment to lab personnel.
- If you are aware that you have a latex allergy, or suspect that you do, it is your responsibility to notify skills lab personnel. Non-latex gloves and equipment is available upon request.
- If your check-off is unsatisfactory, remediation will be required prior to retesting.
- Please contact the Immersion Director if accommodations are needed for religious obligations. A note will be required from your clergy on what is needed for your accommodation. Please note that although we do our best to meet the needs of religious requests, nursing and healthcare is a full-time profession in which patients need care every day and time.
- Complete the **Student Evaluation of Immersion Experience**, found in Project Concert.



CLINICAL PRACTICE IMMERSION REMEDIATION POLICY

Definition: Required practice for all unsuccessful skill testing (check-offs).

Guidelines: Students must successfully complete the skills check-off by obtaining the number of required points per skill as identified on form.

Consequences of unsuccessful completion of a skill check-off are as follows:

1. Required practice
2. Repeat testing (maximum 3 attempts)

Remediation Steps

If unsuccessful

1st Attempt –

1. Mandatory 1-hour (minimum) practice with immersion/clinical faculty.
2. Student must complete a written one-paragraph reflection including identifying the potential/actual implications the unsuccessful performance would have on the patient outcomes. The student must include a reference related to the unsuccessful portion of the skill (i.e. effects of the medication errors, increased costs due to nosocomial infection, etc.). The reference must be from a professional journal, nursing reference book or textbook.
3. Student must submit the reflection when returning to repeat.

2nd Attempt -

1. Mandatory remediation with clinical faculty or lab coordinator 1 – 2 hours (minimum) and/or receive counseling for testing anxiety, if applicable.
2. Student must complete a written one-paragraph reflection including identifying the potential/actual implications the unsuccessful performance would have on the patient outcomes. The student must include a reference related to the unsuccessful portion of the skill (i.e. effects of the medication errors, increased costs due to nosocomial infection, etc.). The reference can be from a professional journal, nursing reference book or textbook.
3. Must have reflection and signed form from anxiety counseling and/or remediation provider when returning to repeat.

3rd Attempt -

1. If student is unsuccessful after 3rd attempt, there is no remediation and student fails the course.

Clinical Site Supervisors

The purpose of the Clinical Site Supervisors is to perform an evaluation of the clinical site and preceptor. The site supervisor will assess the safety and appropriateness of the clinical site and the preceptor.



The Clinical Site Supervisor is the faculty assigned to complete the student's site evaluation in a clinical course. This may or may not be the same faculty as the clinical/didactic portion of the course. The site supervisor works collaboratively with the course clinical faculty and preceptor to deliver a safe, effective, and high-quality education for the student.

Clinical Site Supervisor Process

1. Accept Clinical Site Supervisor contract from USU.
2. Contact student via usuniversity.edu email to set up an appointment for visit.
3. Clinical Site Supervisors will be sent a link to access Project Concert, which is the student tracking system. If you have not received that email link, please contact the Office of Field Experience (OFE).
4. Review the student clinical evaluation and the preceptor/site evaluations in Project Concert ahead of time so you understand what is expected of the preceptor and site.
5. Contact the student via USU email to confirm the date and location of where the clinical site/preceptor evaluation will be completed.
6. Complete the summative in person clinical site-visit with the student and preceptor during the assigned clinical course.
7. Evaluate the appropriateness of the preceptor and clinical site.
 - a. Ensure the following:
 - i. Assess the safeness of the clinical site.
 - ii. The preceptor is providing appropriate feedback and guidance
 - iii. The preceptor allows the student the opportunity to practice the clinical competencies that are required of the course
 - iv. The student is practicing within their scope.
 - v. Assist student and clinical preceptor to optimize clinical learning environment.
 - b. Some questions that could be asked to assess the clinical site
 - i. What skills have you completed or observed?
 - ii. What are the most common illnesses, diseases or patients you care for?
 - iii. Ask to review documentation/SOAP note with student while discussing assessment/plan

Within 24 hours of the completion of the site visit:

- a) Each site visit must be documented in Project Concert or it was not completed. Document the ***Preceptor and Site Evaluation by Site Supervisor Form*** (Example in Appendix) into Project Concert.
- b) Send clinical course faculty an email within notifying them that the evaluation was completed and inform them of any concerns.

INCIDENT REPORTING

If the student's performance is unsatisfactory on any given day, the Preceptor and/or Clinical Faculty will initiate an informal conference with the student. This informal conference will provide the student with constructive feedback to assist them in ongoing improvement in clinical practice.

Should the student's performance continue to be unsatisfactory, the clinical faculty will formulate a



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written plan explaining areas of concern and behaviors necessary to correct these deficiencies. This process will be completed by mid-course, so the student has time to improve. The clinical faculty will contact studentservices@usuniversity.edu after communicating with the preceptor to acknowledge the clinical faculty/preceptor concerns and develop a written remediation plan.

- If the conditions of the remediation plan are not met by the student by the last clinical day, the student's clinical performance will be unsatisfactory on the final clinical evaluation and the student will receive a failing grade. At any time if a student's clinical performance in a clinical course indicates an inability to perform at a safe and/or professional level of practice, the clinical faculty will assign a failing grade regardless of the point in time such a decision is made. In such case, the student will be ineligible to continue in the course.

APPENDICES

Appendix A	Health & Safety Requirements Checklist
Appendix B	Student Acknowledgement of FNP Clinical Handbook Guidelines
Appendix C	HIPAA Confidentiality Agreement
Appendix D	Complio Instructions
Appendix E	Medical Clearance Form
Appendix F	Annual Positive TB Skin Test Questionnaire
Appendix G	Preceptor & Clinical Placement Interest Form
Appendix H	Preceptor Information and Acknowledgement Form
Appendix I	CONHS Guidelines for FNP Clinical Placements and Experience
Appendix J	Student Evaluation of Preceptor
Appendix K	Preceptor and Site Evaluation by Site Supervisor
Appendix L	Preceptor/Clinical Faculty Evaluation of Student
Appendix M	Guidelines for Clinical Placement and Experiences

HEALTH AND SAFETY REQUIREMENTS CHECKLIST

The following documentation must be on file with the Office of Field Experience 8 weeks BEFORE a student's first clinical course and must be current throughout all clinical courses:

Upload/Complete in Complio:

- Signed Medical Clearance Form
- Student Acknowledgement of FNP Handbook Guidelines
- Signed HIPAA Confidentiality Agreement
- AHA CPR for Healthcare Professionals/Providers
- Proof of Health Insurance Coverage
- TB
- Tetanus vaccination (Td/Tdap)*
- MMR*
- Varicella*
- HepB*
- Annual Influenza*
- Drug screen
- Background check
- Malpractice Insurance Coverage (\$1M per incident, \$6M aggregate)
- Student Nursing License

Submit by email to Clinical Placement Coordinator in OFE:

- Preceptor Acknowledgement and Information Form
- Preceptor and Clinical Placement Interest Form
- Preceptor Resume/CV
- Preceptor Nursing/Medical License/Certification
- Affiliation Agreement Information (OFE will confirm if on file once site name is provided, if it is not on file, student to provide necessary requested information to OFE, OFE will negotiate agreement)

Note: Clinical Facility may require additional requirements.

**Waivers are available for medical exceptions but may jeopardize placement. Please contact OFE if waiver is needed.*

The deadline to submit required documentation is a minimum of 8 weeks prior to the planned clinical course. Documentation submitted late may result in a later registration of the clinical course. Students should submit their documentation early to avoid a delay in their clinical start date.

Appendix B

STUDENT ACKNOWLEDGEMENT OF FNP CLINICAL HANDBOOK GUIDELINES

Student:

I have read and agree to abide by the guidelines for clinical experiences as stated in the United States University College of Nursing and Health Sciences Family Nurse Practitioner Clinical Handbook including the General Overview, Sections, Appendices, and information specific to myself as a student.

Student Signature: _____ Date: _____



HIPAA CONFIDENTIALITY AGREEMENT

All students must complete this form.

Student Full Name: _____

The discussions, uses and disclosures addressed by this agreement mean any written, verbal or electronic communications. I understand that I am never to discuss or review any information regarding a patient at a clinical site unless the discussion or review is part of my assignment to the site. I understand that I am obligated to know and adhere to the privacy policies and procedures of the clinical site to which I am assigned. I acknowledge that medical records, accounting information, patient information and conversations between or among healthcare professionals about patients are confidential under law and this agreement.

I understand that, while in the clinical setting, I may not disclose any information about a patient during the clinical portion of my clinical assignment to anyone other than the medical staff of the clinical site. I understand that I may not remove any record from the clinical site without the written authorization of the site. Additionally, I understand that, before I use or disclose patient information in a learning experience, classroom, case presentation, class assignment or research, I must attempt to exclude as much of the following information as possible:

Names	Certificate/license numbers
Geographical subdivisions smaller than a state	Vehicle identifiers Device identifiers
Dates of birth, admission, discharge, and death	Web locators (URLs)
Telephone numbers and Fax numbers	Internet protocol (IP) addresses
E-mail addresses	Biometric identifiers
Social security numbers	Full face photographs
Medical record numbers	Any other unique identifying number, characteristic, or code
Health plan beneficiary numbers	All ages over 89 years
Account numbers	

Additionally, I acknowledge that any patient information, whether or not it excludes some or all of those identifiers, may only be used or disclosed for health care training and educational purposes at United States University, and must otherwise remain confidential. I understand that I must promptly report any violation of the clinical site’s privacy policies and procedures, applicable law, or this confidentiality agreement, by me, or a United States University student or faculty member to the appropriate United States University clinical coordinator or Program Director.

Finally, I understand that if I violate the privacy policies and procedures of the clinical site, applicable law, or this agreement, I will be subject to disciplinary action. By signing this agreement, I certify that I have read and understand its terms and will comply with them.

Signature: _____

Date: _____

Complio Instructions

FNP students are required to follow the below process and watch all video tutorials. United States University requires all FNP students to order the following packages:

- Immunization package
- Background & Drug Screen (*Note: Single drug screen package is available if retake is required/approved*)

Please contact American Data Bank if you have questions about your account, compliance requirements, or using Complio. They are available to assist you Monday-Friday 7am-6pm MT (Denver) via email at complio@americandatabank.com or by calling (800) 200-0853.



Welcome to Complio Tracking!

Complio is an online tracking system, selected by your school, to host details and documentation proving your compliance with immunizations and other requirements. Follow these step-by-step instructions to create an account and move towards compliance.

[Video: Complio Overview](#)

 http://www.americandatabank.com/VideoDirectory/complio_overview.html

Create your Account

Step 1: Create an account by going to www.sdnahcbackground.com. On the right hand side of the page, click **Create an account** to get started with Complio. Enter your personal information. Be extra careful with your email address, as this is the system's main mode of communication with you.

Step 2: Complio will send an email to the email address used during account creation. Click on the Activation Link within the message or copy and paste the URL in your web browser.

Place Order

Step 3: Please note: An Account is not the same as a Subscription. Before you can begin entering information, you will need to order a subscription. Click **Get Started** to begin your order. Select your school, applicant type and program of study (FNP) and click Load Packages. Select a Tracking package and a Screening package:

- Immunization package
- Background & Drug Screen (*Note: Single drug screen package is available if retake is required/approved*)

[Video: Subscribe to Complio](#)

 <http://www.americandatabank.com/VideoDirectory/subscribe.html>

Step 4: Carefully enter the information required to complete your order. Please read the Disclaimer on the next screen, sign, and click Accept & Proceed to continue.

 [Video: Signing Forms](#) <http://www.americandatabank.com/VideoDirectory/SigningForms.html>

Drug Screen Registration: Select the drug screen location that is most convenient for you. The current page loads based on the zip code of your current address, you can provide a different zip code to view additional locations.

Upon completion of your order, you will receive an email (Check your spam and/or junk mail) with the registration and collection location you have chosen. Make sure to print out the electronic drug screen registration form and go to the collection site you selected along with a photo ID to submit a specimen. **BE AWARE OF THE EXPIRATION DATE ON THE DRUG SCREEN ORDER.** The drug screen must be completed prior to the expiration date. If the drug screen is not completed prior to the expiration date, the drug screen will be flagged and the student will be required to purchase another drug screen subject to USU approval.

Please note: If you pay for your order by money order, you will not receive this information until the payment has been received.

Step 5: Review your information on the Order Review screen. If everything is correct, enter your payment. You can pay by credit card or money order. Once they have received payment for your subscription, you can begin to enter your data by clicking Enter Requirement for each category.

Add Details & Documents

Step 6: Click Upload Documents to browse your computer and upload your records and use the Browse button to locate documents within your computer.

[Video: Upload Documents](#)

 <http://www.americandatabank.com/VideoDirectory/upload.htm>

Step 7: Click Enter Requirement to add details for a specific requirement. There may be multiple options, but you may not need to complete them all.

[Video: Entering Data](#)

 <http://www.americandatabank.com/VideoDirectory/data.html>



Step 8: Select a Requirement, complete the required fields and select from the drop---down list of documents you've uploaded. Click Submit to save what you've entered. You can update the item at any time before it is approved.

[Video: Exceptions - • - When and How to Apply](#)

 <http://www.americandatabank.com/VideoDirectory/exceptions.html>

United States University generally does not accept exceptions. Please discuss any exceptions with Office of Field Experience.

Wait for Approval

Once you have entered a document, the red “x” to the left of the item  will turn into a yellow circle with an exclamation point , indicating the item is ready to be reviewed. American DataBank verifies and reviews items within 1-3 business days (excluding holidays and weekends). Please plan ahead.

Monitor Your Status

We recommend checking Complio regularly. You are not fully compliant until your Overall Compliance Status = Compliant, indicated with a **Green Checkmark**. Complio will notify you via email when your compliance status changes, if an item is approaching expiration, or if a new requirement is added.

Questions?

Please contact American Data Bank if you have questions about your account, compliance requirements, or using Complio. They are available to assist you Monday-Friday 7am-6pm MT (Denver) via email at complio@americandatabank.com or by calling (800) 200-0853.



FNP ANNUAL POSITIVE TB SKIN TEST QUESTIONNAIRE

Positive TB Skin Test (PPD) Date: _____ Last Chest X-Ray Date: _____

Please indicate if you are having any of the following problems for three to four weeks or longer:

- | | <u>Yes</u> | <u>No</u> |
|--|------------|-----------|
| 1. Chronic cough lasting longer than three weeks | _____ | _____ |
| 2. Chills that recur | _____ | _____ |
| 3. Unexplained weight loss (over 10 lbs. in 2 months) | _____ | _____ |
| 4. Night sweats | _____ | _____ |
| 5. Fever lasting several days | _____ | _____ |
| 6. Coughing blood-streaked sputum | _____ | _____ |
| 7. Fatigue—easily and ongoing | _____ | _____ |
| 8. Shortness of breath | _____ | _____ |
| 9. Have you been recently diagnosed with diabetes, silicosis, HIV disease, renal disease or liver disease? | _____ | _____ |
| 10. Have you recently been exposed to a family member or other person with active TB? | _____ | _____ |
| 11. Have you ever received the BCG immunization? | _____ | _____ |

If you checked YES to any of the above questions, are you currently being treated by a Physician? Yes or No (circle one). Please explain:

Any additional symptoms:

I have indicated the symptoms above and have no symptoms at this time:

Signature: _____ Date: _____

Print Name: _____

Healthcare Provider	
Name (<i>print</i>): _____	
Certification: MD / NP / PA / RN	
_____ Signature	_____ Date



Preceptor & Clinical Placement Interest Form

OFE is pleased to work with FNP students to secure clinical placement. As student clinical placement is highly competitive, we encourage you to provide us as much information to help you achieve your preferred location and preceptor. Please provide at least 3 preceptors and the sites where they are in practice. *Please complete the applicable sections in their entirety as to not delay processing.*

STUDENT INFORMATION

Student Name: _____

Student ID: _____

The following are needed for which clinical course: MSN573 FNP592 FNP594 FNP596 FNP597

CLINICAL SITE/PRECEPTOR INFORMATION (1st Priority)

Clinical Site Name:	_____	Facility Phone:	_____
Clinical Site Address:	_____	Clinical Site City, State & Zip code:	_____
Facility Email:	_____	Type of Practice:	_____
Preceptor Name:	_____	Preceptor Credentials:	_____
Preceptor Phone:	_____	Preceptor Email:	_____

Agreed to Precept Me Contacted, need OFE to follow up

CLINICAL SITE/PRECEPTOR INFORMATION (2nd Priority)

Clinical Site Name:	_____	Facility Phone:	_____
Clinical Site Address:	_____	Clinical Site City, State & Zip code:	_____
Facility Email:	_____	Type of Practice:	_____
Preceptor Name:	_____	Preceptor Credentials:	_____
Preceptor Phone:	_____	Preceptor Email:	_____

Agreed to Precept Me Contacted, need OFE to follow up

CLINICAL SITE/PRECEPTOR INFORMATION (3rd Priority)

Clinical Site Name:	_____	Facility Phone:	_____
Clinical Site Address:	_____	Clinical Site City, State & Zip code:	_____
Facility Email:	_____	Type of Practice:	_____
Preceptor Name:	_____	Preceptor Credentials:	_____
Preceptor Phone:	_____	Preceptor Email:	_____

Agreed to Precept me Contacted, need OFE follow up



Preceptor Information and Acknowledgement Form

Student Name: _____

Student ID Number: _____

PRECEPTOR INFORMATION

Name: _____ Board Certification: _____

Phone: _____ License #: _____

Fax: _____ Email: _____

Years of Practice: _____ Foreign Languages: _____

Clinical Site Name: _____ Clinical Site Address: _____

PRECEPTOR RESPONSIBILITIES

- I have read the Family Nurse Practitioner Clinical Handbook and agree to abide by its guidelines
- I will read the Syllabus provided by student for each clinical course
- I have participated in orientation to the preceptorship
- I understand I may need to confer with the Clinical instructor during and/or at the end of the course(s) to provide information I believe is necessary for progress in the clinical experience
- I agree to act as Preceptor to the student listed above as part of his/her enrollment at the United States University College of Nursing and Health Sciences program clinical courses
- I have provided USU with a current Curriculum Vitae
- I agree to monitor student hours
- I agree to complete evaluations of the student and clinical experience, as necessary

Preceptor Signature: _____

Date: _____

CONHS GUIDELINES FOR FNP CLINICAL PLACEMENTS AND EXPERIENCE

- Appropriate Preceptors include: a Nurse Practitioner, a Certified Nurse Midwife, or a Physician
- A minimum of **585** hours is required with an approved preceptor
- We encourage every FNP student to get a minimum of **16** hours experience in telehealth
- The inpatient hospital setting is NOT an appropriate clinical site for FNP students at any point during the clinical experience

COURSE	HOURS REQUIRED	APPROPRIATE SITES	EXPERIENCE	COMMENTS
MSN 573: Advanced Health and Physical Assessment Across the Lifespan and Cultures Lab	45 Total: ➤ 28 hours of clinical practicum ➤ 17 hours of clinical lab	<ul style="list-style-type: none"> ➤ Family practice clinic ➤ Community based clinic ➤ Internal Medicine 	<ul style="list-style-type: none"> ➤ Routine H&Ps ➤ Problem focused systems exams ➤ Health Screening, promotion and maintenance ➤ Should see adults and children 	<ul style="list-style-type: none"> ➤ Focus is on the history and exam only. ➤ The student should not spend time in the diagnosis and management component of the visit during this course.

CONHS GUIDELINES FOR FNP CLINICAL PLACEMENTS AND EXPERIENCE

COURSE	HOURS REQUIRED	APPROPRIATE SITES	EXPERIENCE	COMMENTS
FNP 592: Common Illnesses Across the Lifespan – Clinical Practicum	135 Total: <ul style="list-style-type: none"> ➤ 119 hours of clinical practicum ➤ 16 hours of clinical lab 	<ul style="list-style-type: none"> ➤ Family practice clinic ➤ Community based clinic ➤ Internal Medicine ➤ Most of the clinical hours will be completed in a family practice or internal medicine setting 	<ul style="list-style-type: none"> ➤ The focus is on disease management of patients with common illnesses ➤ Possible Women’s health, Obstetrics and Gynecology, Pediatrics, or Geriatric rotation 	Within the required: 585 clinical hours you must get: <ul style="list-style-type: none"> ➤ Geriatrics: 100 minimum hours ➤ Women’s Health, Obstetrics, Gynecology: 40 minimum hours ➤ Pediatrics: 80 minimum hours

COURSE	HOURS REQUIRED	APPROPRIATE SITES	EXPERIENCE	COMMENTS
FNP 594: Primary Health of Acute Clients/Families Across the Lifespan – Clinical Practicum	135 Total: <ul style="list-style-type: none"> ➤ 135 hours of clinical practicum 	<ul style="list-style-type: none"> ➤ Family practice clinic ➤ Community based clinic ➤ Internal Medicine ➤ Most of the clinical hours will be completed in a family practice or internal medicine setting 	<ul style="list-style-type: none"> ➤ The focus is on disease management of patients with acute illness ➤ Possible Women’s health, Obstetrics and Gynecology, Pediatrics or Geriatric rotation 	Within the required: 585 clinical hours you must get: <ul style="list-style-type: none"> ➤ Geriatrics: 100 minimum hours ➤ Women’s Health, Obstetrics, Gynecology: 40 minimum hours ➤ Pediatrics: 80 minimum hours ➤ Optional Specialty Rotations: Up to 40 hours maximum in specialty rotations---(combined total in multiple specialties or all in 1 specialty). ➤ During FNP 594 or FNP 597 ONLY: ER/Urgent Care 60 hours maximum

CONHS GUIDELINES FOR FNP CLINICAL PLACEMENTS AND EXPERIENCE

COURSE	HOURS REQUIRED	APPROPRIATE SITES	EXPERIENCE	COMMENTS
FNP 596: Primary Healthcare of Chronic Clients/Families Across the Lifespan – Clinical Practicum	135 Total: <ul style="list-style-type: none"> ➢ 134 hours of clinical practicum ➢ 1 hour of clinical lab 	<ul style="list-style-type: none"> ➢ Family practice clinic ➢ Community based clinic ➢ Internal Medicine ➢ Most of the clinical hours will be completed in a family practice or internal medicine setting 	<ul style="list-style-type: none"> ➢ The focus is on disease management of patients with acute illness ➢ Possible Women’s health, Obstetrics and Gynecology, Pediatrics or Geriatric rotation 	<p>Within the required: 585 clinical hours you must get:</p> <ul style="list-style-type: none"> ➢ Geriatrics: 100 minimum hours ➢ Women’s Health, Obstetrics, Gynecology: 40 minimum hours ➢ Pediatrics: 80 minimum hours ➢ Optional Specialty Rotations: Up to 40 hours maximum in specialty rotations---(combined total in multiple specialties or all in 1 specialty).

COURSE	HOURS REQUIRED	APPROPRIATE SITES	EXPERIENCE	COMMENTS
FNP 597: Clinical Residency and Practice Management	135 Total: <ul style="list-style-type: none"> ➢ 135 hours of clinical practicum 	<ul style="list-style-type: none"> ➢ Family practice clinic ➢ Community based clinic ➢ Internal Medicine ➢ Most of the clinical hours will be completed in a family practice or internal medicine setting 	<ul style="list-style-type: none"> ➢ The Focus is to get ongoing experience in disease management of patients. ➢ Possible • Women’s health, Obstetrics and Gynecology, Pediatrics or Geriatric Rotation 	<p>Within the required 612 clinical hours you must get a minimum of:</p> <ul style="list-style-type: none"> ➢ Within the required 585 clinical hours you must get: ➢ Geriatrics: 100 minimum hours ➢ Women’s Health, Obstetrics, Gynecology: 40 minimum hours ➢ Pediatrics: 80 minimum hours ➢ Optional Specialty Rotations: Up to 40 hours maximum in specialty rotations---(combined total in multiple specialties or all in 1 specialty). ➢ During FNP 594 or FNP 597 ONLY: ER/Urgent Care 60 hours maximum



Student Evaluation of Preceptor

Student Name:
Student ID:
Student USU E-mail:
Course:

Preceptor Name:
Site Name:

Student Evaluation	Qualities	Below Expectations	Meets Expectations	Exceeds Expectations
Communication	Concise, Clear, Positive, and professional			
Professionalism	Professional interaction			
Teaching	Reviews all areas of competencies and skill development			
Educational Support	Utilizes evidence based practice and guidelines. Directs student to appropriate resources.			

Evaluation completed by:

Student Signature: _____
Student Name (Printed): _____
Date: _____



Preceptor and Site Evaluation by Site Supervisor

Preceptor Name:
Site Name:

All questions are rated: Below expectations (1); Meets Expectations (2); Exceeds Expectations (3)

Area of Evaluation: Preceptor

1. Available

Expectation: Available to answer questions, review goals and objectives, listen to presentations, and sign charts.

2. Role models

Expectation: Demonstrates understanding of the APRN role; serves as a good role model for physical examination and assessment techniques.

3. Allows practice opportunities

Expectations: Allows opportunities to assume increasing responsibility, suggest plan of care such as health promotion screens, medications, lab and x-ray, alternative therapies, referrals while considering limits according to level of training.

4. Diagnostic Reasoning

Expectation: Leads student through decision-making rather than giving own impressions and reviews their differential diagnoses.

5. Caring and Ethical Practices

Expectation: Demonstrates caring and ethical practices utilizing patient advocacy in all socioeconomical circumstances.

6. Feedback

Expectation: Provides immediate and adequate feedback to questions, clinical performance, and patient presentations.

7. Research/Quality

Expectation: Implements evidence-based practice and applies continuous quality improvement in delivery of care.

Area of Evaluation: Site

1. Space/Time

Expectation: Provides adequate space and time for student to see clients.

2. Client Types

Expectation: Provides opportunities for health promotion and disease prevention care as well as disease diagnosis and management

3. Diversity

Expectation: Varies types of clients as to health status, diagnoses, level of acuity, age, sex, and ethnic.

4. Support Staff

Expectation: Accepting and appropriately helpful

5. Teaching/Education Opportunities

Expectation: Instructional materials available to supplement client learning such as pamphlets, books, charts, etc.

6. Summary of why this site and preceptor provided an acceptable learning environment:

7. Additional feedback or areas of improvement needed:

8. Do you recommend this clinical site and preceptor:

Yes _____ No _____

Evaluation completed by:

Site Supervisor Signature: _____

Site Supervisor Name (Printed): _____

Date: _____



Preceptor/Clinical Faculty Evaluation of Student

Student Name:
Student ID:
Student USU E-mail:
Course:

Preceptor Name:
Site Name:

All questions are rated: Below expectations (1); Meets Expectations (2); Exceeds Expectations (3)

1. Judgment/Common Sense

Expectations: Responds to clinical situations logically and demonstrates good judgment; considers cost benefits and ethical principles.

2. Attitude/Cooperation

Expectation: Maintains professional composure and accepts instruction; well motivated and shows enthusiasm.

3. Accountability/Dependability

Expectation: Good attendance, punctual and well prepared; meets minimum clinical hour requirements.

4. Communication Skills

Expectation: Communicates well with staff and patients and prepares concise, legible and well-organized progress

5. Caring and Ethical Practices

Expectation: Demonstrates caring and ethical practices utilizing patient advocacy in all socioeconomical circumstances.

6. Diagnostic Reasoning/Critical Thinking Skills

Expectation: Applies diagnostic reasoning and critical thinking skills in clinical practice.

7. Professional Role

Expectation: Articulates their specific scope of practice and collaborates with other healthcare partners.

8. Teaching/Counseling Patients

Expectation: Counsels clients regarding wellness, health risks, age-appropriate screening, and health restoration. Provides appropriate anticipatory guidance

9. History Taking

Expectation: Elicits a complete and/or focused health history and documents effectively.

10. Physical Exam

Expectation: Performs a skillful, complete physical according to the patients' presenting complaints.

11. Clinical Knowledge

Expectation: Applies relevant caring science theoretical advanced practice nursing concepts in health promotion and disease management.

12. Research/Quality

Expectation: Implements evidence-based practice and applies continuous quality improvement in delivery of care.

13. Clinical Skills

Expectation: Performs APRN skills appropriate to level of education.

14. Diagnosis

Expectation: Utilizes appropriate differentials, diagnostic studies, and evidence-based practice guidelines.

15. Management Plan

Expectation: Provides appropriate patient education, community resources and health care provider referrals, and plans for follow-up; uses pharmacological and integrative healing strategies.

16. Evaluation/Follow-up

Expectation: Modifies plan of care according to patient's response, additional database such as social, financial, and diagnostic data.

17. Leadership Role

Expectation: Demonstrates leadership skills in patient care and professional relationships.

18. Community-based Experience

Expectation: Seeks out a meaningful clinical experience in community.

Evaluation completed by:

Preceptor Signature: _____

Preceptor Name (Printed): _____

Date: _____